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John Bel Edwards, Governor
Marketa Garner Walters, Secretary

DEPARTMENTAL MEMORANDUM 20-11

DATE: JUNE 5, 2020

TO: ALL DCFS STAFF

**FROM: TERRI RICKS
DEPUTY SECRETARY**

**RE: PHASE-TWO ROADMAP TO RESILIENCE AND RETURN TO THE
WORKPLACE**

Governor Edwards has directed that Louisiana move to Phase-Two reopening beginning Friday, June 5, 2020. This action revises the previous order and allows state agencies to become more accessible to the public. Each office manager will be provided the DCFS Offices Staff Occupancy Chart that indicates a 50% occupancy rate not to be exceeded in each building at any given time during Phase-Two. Each office manager shall make a determination of the number of visitors that can be in the building at any given time to maintain social distancing. Management is responsible to ensure safe distancing is maintained considering the configuration of space available in the building.

PHASE-TWO STAFFING

During Phase-Two, managers should develop and implement plans that may allow up to 50% of staff on site at any one time. For employees unable to comply with the in-office schedule the following options can be considered:

Employee with Dependent Care Challenges

If a determination is made that the employee with a dependent care issue can continue to work remotely, the employee will need to provide the following documentation: Name of Employee, Name of Child or Children, School or Day Care Closed due to COVID-19, statement that no other suitable person is available to care for child. The documentation should be provided to the employee's supervisor within a day or two of the employee being contacted for assignment to an in-office schedule.

Employee with High Risk/Compromised Immune System

If a determination is made that the employee with a high risk/compromised immune system can continue to work remotely, the employee will need to provide the following documentation: A signed and dated statement from the health care provider advising that the employee with risk factors for severe or complicated COVID-19 should be isolated from the workplace to avoid a health risk exposure. Information about an employee's specific



diagnosis or medical condition is not required nor should it be included by the health care provider to satisfy this request. The documentation should be provided to the employee's supervisor. Some flexibility should be granted in obtaining this documentation.

Employee Caring for an Individual who has COVID-19, may have COVID-19, or is particularly vulnerable and at Risk for COVID-19

If a determination is made that the employee who is caring for an individual in this category can continue to work remotely, the employee will need to provide the following documentation: A signed and dated statement from the health care provider advising that the individual being cared for has COVID-19, may have COVID-19, or is particularly vulnerable or at risk and should remain isolated or quarantined to avoid a health risk exposure. Information about the individual's specific diagnosis or medical condition is not required nor should it be included by the health care provider to satisfy this request. The documentation should be provided to the employee's supervisor. Some flexibility should be granted in obtaining this documentation. Any questions about individuals covered under these categories should be directed to Human Resources.

For the three categories described above, if an employee's job is not conducive to continue to work from home or the employee requests Families First Coronavirus Response Act (FFCRA) leave, then the documentation stated above is required along with the [DCFS Request Form for FFCRA](#). The form and documentation should be submitted to Human Resources. *The employee should provide the required documentation to Human Resources.* Any questions about individuals covered under this category should be directed to Human Resources. After exhaustion of FFCRA leave, use of other applicable leave will apply.

An employee that falls within one of the three categories above does not have to provide new documentation in Phase Two, if he/she provided documentation during Phase One and has had no change in circumstances. An employee who provided documentation in Phase One and/or Phase Two due to high risk factors for COVID, compromised immune systems, dependent care needs or caring for someone with COVID but no longer needs priority consideration for remote work must provide a statement, (it can be by email) that he/she can return to working in the office.

Employees who have provided documentation and who have been granted approval to continue to work 100% remotely due to COVID-19 because of dependent care needs, a high risk factor(s) for COVID, or are caring for an individual at risk for COVID, but who voluntarily accept or request assignment to an ESF-6 duty or a D-SNAP assignment during an activation event will void their 100% remote work approval. In advance of beginning the assignment, the employee must provide a written statement that he/she volunteered for the assignment and can return to work.



OPERATIONS IN OFFICE BUILDINGS

Employee with Suspected or Confirmed COVID-19

Workers should use the symptom-based strategy to return to normal activity following a suspected or confirmed case of COVID-19. They should continue isolation until:

- At least 3 days (72 hours) have passed *since recovery* defined as resolution of fever without the use of fever-reducing medications **and** improvement in respiratory symptoms (e.g., cough, shortness of breath); **and**,
- At least 10 days have passed since symptoms first appeared

Employee Home Screening

It is important that employees remain home if they are ill. Employees must complete a home self-assessment that includes the screening questions below. A YES response to any question will prohibit that employee from reporting to a DCFS worksite, and the employee shall immediately contact their supervisor for alternate worksite options (i.e., work at home) until the answer to both questions is “NO.”

Screening Questions

Prior to entering any DCFS worksite, employees and visitors must answer the screening questions below and have a temperature check. If the answer is “YES” to either question, then the individual shall not enter the DCFS office.

1. Have you had any of the following symptoms during the past 14 days that cannot be attributed to another health condition or activity?
 - Fever ≥ 100.4 degrees or feeling like you had a fever, OR
 - Cough, OR
 - Shortness of breath or difficulty breathing, OR
 - Chills, OR
 - Repeated shaking with chills, OR
 - Sore throat, OR
 - Headache, OR
 - Muscle pain, OR
 - New loss of taste or smell.
2. Have you come into close contact with someone with suspected or lab-confirmed COVID-19 in the past 14 days?

**Close contact is defined by being within approximately 6 feet of a suspected or lab-confirmed COVID-19 case for a prolonged period of time; close contact can occur while caring for, living with, visiting, or sharing a healthcare waiting area or room with a COVID-19 case, OR having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on).*



Temperature Checks

All DCFS worksites shall implement temperature checks for employees, contractors, and visitors. The first time each day that an employee, contractor, and visitor enters the DCFS worksite, they must have their temperature checked. When waiting in line to be screened, all individuals should maintain at least 6ft between each other.

Anyone with a temperature of 100.4 degrees or greater will not be allowed entry. *All individuals who pass the temperature check will be given a visible sticker or wristband to wear so that other employees know they have been screened.

Please note that a temperature check alone is not sufficient to detect COVID-19 and temperature checking must be paired with the assessment questions. (According to LDH, based on the best available evidence, <50% of patients hospitalized with confirmed COVID-19 have a fever on admission. In addition, the fever course can be low-grade and intermittent. In other words, a temperature check alone could miss more than half of COVID-19 cases.)

*A temperature < 96 degrees generally indicates a quality control issue and should be repeated.

PERSONAL MITIGATION MEASURES

Personal Hygiene

The absolute most important part of stopping the spread of COVID-19 is our personal hygiene practices. DCFS will be implementing several important measures to aid in this important step.

Things to Remember

Washing our hands may be the most important protection against COVID-19.

- Germs are most often introduced into our body when we touch our eyes, nose or mouth, experts say. Try not to touch your face. Wash your hands very often.
- Do not sneeze or cough openly, use a tissue. Wash your hands very often.
- Try not to touch doors with your bare hand. Open doors with your arm or elbow or with a tissue when possible. Wash your hands very often.
- Do not shake hands. Wash your hands very often.

Hand Washing

Wash your hands after being out in high-traffic areas of your building, after you use the bathroom, after coughing or sneezing, after meetings, before and after preparing or consuming food—basically, as often as is practical. Vigorous washing with soap and water is required and should be for no less than the CDC-recommended 20 seconds. Hand sanitizers should be frequently used, as needed, between hand washings.



Facial Coverings

A mask (preferably cloth), scarf, bandana or other such facial covering shall be worn upon entering and leaving the office building, in halls, walkways, stairwells, elevators, kitchens, break rooms, meeting rooms and restrooms. Employees may be more comfortable in and are encouraged to bring their own masks, but supplies will be available for those unable to do so. Although preferable to wear a facial covering at all times, employees assigned to a private office or individual cubicle where 6-foot distancing can be maintained may remove the facial covering while working within their designated workspace. The facial covering should fully cover the mouth/nose area and may not contain images or text that are inappropriate or may be offensive to others.

- Child Welfare (and other) staff who are having direct contact with clients shall continue using the PPE provided for their work.
- Anyone with a condition that prohibits the wearing of masks/facial coverings as required should be considered as a remote worker for now.

Physical Distancing

Employees are required to maintain a minimum distance of 6 feet from others. (When there are several people passing through the lobby or waiting for an elevator or when working in close proximity of others facial coverings are required.) In-person meetings are permitted, but should be limited in frequency, duration and number of attendees. In such meetings, facial coverings must be utilized and the meeting space sufficient to satisfy the 6-foot distancing rule. Preferably, telephones, teleconferences and video conferencing should be used.

VISITORS

Visitors entering a DCFS worksite will be required to wear a face covering, complete the COVID-19 screening, temperature check and maintain social distancing.

OFFICE SPACE

In-office employees must maintain appropriate social distancing. There should always be at least 6 foot of distance between all employees, including when sitting at their desks. Cubicle partitions do not confer protection and do not reduce or eliminate the 6-foot requirement. Therefore, employees in adjoining cubicles who are not sitting 6 feet apart should be placed on alternate work schedules if possible. Otherwise, they will be required to wear facial covering at their desks.

Workers are discouraged from sharing or using other workers' phones, desks, offices, or other work tools and equipment, when possible.

Workers who share office space are encouraged to develop a rotating schedule of on-site and work-from home if possible so that the 6-feet physical distancing can be observed.



ELEVATORS

No more than two individuals should ride the elevator at one time. If allowed, elevators should have tape on the floors marking the safe distance. A sign stating “No More Than Two People Allowed in the Elevator At One Time” must be posted.

As noted above, those using the elevators should always use face coverings and should avoid touching the buttons directly.

COMMON AREAS

Common areas (such as kitchen areas and restrooms) of each program office shall be considered for their proper use considering these guidelines. Kitchens, break rooms and dining areas are considered for walk-up use only. Lingering in these areas is restricted. Instructions should be posted for all to follow. If multiple programs share common areas, the program managers should agree on the guidelines. One might consider avoiding common areas, when possible.

ROUTINE CLEANING/DISINFECTING

DCFS will be working with the landlord of each building to provide a standard of care regarding the cleaning and disinfecting of surfaces that are touched frequently (e.g., door handles, elevator buttons, stairwell railings) which should be cleaned and disinfected at least daily.

Each employee is welcome to clean/disinfect their own work area.

CLEANING OFFICE OF SICK INDIVIDUALS

If an employee becomes sick due to COVID-19, the worker’s personal cubicle or office should be cleaned and disinfected after a minimum of 24 hours. Clean and disinfect all areas used by the person who is sick, such as offices, bathrooms, common areas, shared electronic equipment like tablets, touch screens, keyboards, and remote controls. If more than 7 days has elapsed since the person who is COVID-19 positive visited or used the DCFS worksite, additional cleaning and disinfection is not necessary beyond routine cleaning.

ENTRY AND EXIT

To ensure the screening of all DCFS employees, contractors, and visitors, all entrances and exits to worksites should be restricted to as few locations as feasible, while adhering to applicable fire codes. When waiting to enter the building, all individuals should maintain at least 6 feet of distance between each other. To the extent feasible, services to the public are to be offered using options that do not require office visits.

