

CRI, INC. ATTENDANCE POLICY CLARIFICATIONS – EFFECTIVE MARCH 16, 2020 (REVISED MARCH 19, 2020)

CRI will require any employee (staff or client) who exhibits symptoms or acute respiratory illness or a fever of 100.4 or greater to stay home. If an employee comes to work exhibiting these symptoms, they will be required to go home. This policy will be implemented uniformly and in a manner that does not discriminate based on any protected characteristic (e.g., national origin, gender, race, etc.).

CRI will require anyone to stay home for 14 days who is asymptomatic and who has:

1. Been in close contact with someone with COVID-19
2. Sat on an aircraft within 6 feet of someone with COVID-19, or
3. Live in the same household as, are an intimate partner of, or are caring for at home, while consistently using recommend precautions for a symptomatic individual with “laboratory- confirmed COVID-19.”

This also applies if the asymptomatic employee fits within certain categories and guidance established by the CDC’s based on:

1. symptoms (i.e., symptomatic or asymptomatic) and
2. Risk (i.e., High, Medium, Low, or No Identifiable, which takes into account both (a.) travel destinations and (b.) level and type of contact with symptomatic individuals).

CDC defines symptomatic as subjective or measured fever, cough, or difficulty breathing. CDC defines “close contact” as:

1. Being within approximately 6 feet (2 meters) of a 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-

2. Having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on).

An employee sent home for exhibiting symptoms may return to work at least 24 hours after no longer having or exhibiting:

- a) A fever of, or greater than, 100.4° F or 37.8° C).

-AND-

- b) Any other symptoms, without the aid of fever-reducing medicines (e.g., anything containing ibuprofen or acetaminophen) or other symptom-masking medicines (e.g., cough suppressants). **Return-to-work standards and time periods may be different for an individual with a confirmed COVID-19 diagnosis.**

During the course of a pandemic, a doctor’s note **will not** be a prerequisite for returning to work. This is due to the high burden on the healthcare system and healthcare provider offices and medical facilities that may not be able to provide documentation in a timely fashion. Exceptions to this rule are:

- a.) If an employee’s situation meets the ADA’s “direct threat” standards, CRI may require a return-to-work doctor’s note.

-OR-

- b.) If an employee’s illness is a “serious health condition” under the FMLA, CRI will require a return-to-work note.

If an employee indicates they are ready to return to work and have doctors return-to work note, CRI may still require the employee not return to work if it was determined the employee would create an unsafe or unhealthful work environment or is a direct threat to him- or herself or others.