## TRANSCRIPT May 7, 2020 Vanderbilt Health Employer Solutions: Live Q&A Webinar on Back-to-Work Safety for Employers

**Brent McDonald:** There are a lot of considerations around what we need to do to get businesses back up and running and to prepare to keep our employees as well as our customers safe. Before we get started, I would like to do an in-webinar poll so that we have a little better understanding of who is listening so that we can address questions given the industries that are represented. So, take just one moment and if you would answer this poll, we would appreciate that.

Very good. And as you can see, the results of that poll are showing up now on your screens and we'll try to use this information as we go through and answer questions so we can be more specific to your industries.

Now, let me transition now to Dr. David Aronoff, who will spend a few minutes on key considerations as we prepare to open our businesses. There's a lot of information out there, and some of it is conflicting or confusing. Will you bring us up to speed on what we need to be considering?

**Dr. David Aronoff:** Thank you very much, Brent. I definitely want to thank the organizers of this webinar and I want to thank you all for tuning in. I really appreciate it. I think this is an uncertain time obviously. Unless we are over 100 years old, most of us have never lived through any kind of pandemic like this. These are new times and, and as I like to say, and as I've heard others say, we're really building an airplane in flight when it comes to how we handle this pandemic, how we get into it, how we get through it and how we get out the other end. I thought that I would first just give you a brief introduction to who I am. My name is Dave Aronoff. I'm the director of the division of infectious diseases here at Vanderbilt University Medical Center. I have been in this position for about seven years and trained here at Vanderbilt back in the day.

And where are we right now with, with COVID-19? Well, globally, this is an infectious disease that has almost surpassed 4 million diagnosed patients. And of course they're a myriad of other people who haven't been tested. We don't know the full scope of the pandemic, but certainly we're nearing 4 million known victims of COVID-19 with nearly 270,000 people who have lost their lives in the United States already. And obviously this just arrived in the United States earlier this year. Known infected persons are over 1.3 million at this time, with nearly 76,000 lives lost. And then here in Tennessee, we get regular numbers from the department of health. And as of yesterday, we were just under 14,000 diagnosed cases in our state. And that's been since the very first case was diagnosed in Tennessee in early March. There've been nearly 240 deaths in Tennessee from COVID-19. Nashville's number, even as recently as today, reflect 3,432 cases of COVID-19 with 35 lives lost so far.

So, it's still a very active infectious disease globally in the United States, in Tennessee and here in middle Tennessee. But we've been handling this now long enough that we've learned an awful lot about the SARS COVID-2 virus that causes COVID-19. We've learned a lot about how it's transmitted, very fundamental lessons about how this goes from person to person largely through respiratory droplet transmission. Sometimes people can inoculate themselves by getting the virus onto their hands and touching their eyes, nose or mouth. And we've seen sweeping mitigation techniques implemented to try to slow down the spread of this virus in large part because it can be a fatal infection. One thing that has turned out to be really both fascinating and anxiety-provoking about COVID-19 is the wide span of symptoms that can result. Some people appear not to get any symptoms at all after infection and other people get a life-threatening pneumonia and sometimes have to be on mechanical ventilation and sometimes succumb to infection. It tends to be older adults and people with chronic medical conditions who are most vulnerable to this infection. We've also learned that it can transmit from person to person, even if the infected person is without symptoms. And that's been a big challenge is figuring out how do we reduce the risk or mitigate when we don't know who's infected and who's not. Because some people may be infected with no symptoms at all. And that's led to where we are today. A lot of mitigation around staying at home, closing businesses, keeping people away from each other, implementing things like wearing masks and participating in lots of hand hygiene and other measures. But the good news is that a lot of our hard work here in Tennessee in public health and with individuals taking it very seriously, doing our part and staying apart as the governor says, that we've been able to do what experts like me have been suggesting to flatten the curve, slow down the transmission and prevent a surge from overwhelming our healthcare system.

And because of that, we're hoping and starting to see some light at the end of the tunnel. We're starting to think about opening businesses again and seeing some businesses open again. Even today, Nashville Mayor John Cooper announced that at the beginning of next week we're going to be seeing some limited opening of restaurants, for example. And so all of our business owners are having to feel their way through this new reality of being shut down and having an economy crushed by a pandemic and now trying to balance reopening and reigniting business while at the same time keeping themselves their employees, patrons, clients and customers as safe as possible. And so, here at the medical center, we've been engaged a lot around this issue, not only for our patients and at our outlying clinics, central hospital and healthcare center, but also in engaging with business owners and employers about how best to do things. And so that's what we're here for today.

**Brent McDonald:** Dr. Aronoff, thank you for that background and setting the stage. One of the questions that keeps coming up, regardless of what industry you're in, is: I'm going to be opening my doors for business soon. What are the most important things that I need to do as an employer to keep my employees safe and communicate to the community that it is safe to come to my place of business. Can you elaborate for us a little bit on those considerations?

**Dr. David Aronoff:** For sure. One thing I would say about this is that truly we're all in this together. All employers should know that your brothers and sisters who are also employers are going through this at the same time. And what we're seeing is a lot of really important information-sharing. The idea that a rising tide lifts all ships is very true in this situation. And so those people who are tuned in today, we'll hopefully learn some new things and can share those with others. But sharing best practices across businesses, even across types of businesses, will be vital in terms of individual companies and businesses and how to keep everyone safe. I think it begins with being organized, having a plan, having an understanding of what local jurisdictions recommending about how best to open businesses. Again, for example, businesses in Davidson County may be able to look for the Reopening Nashville plans that have been written by Mayor Cooper's taskforce.

Businesses all across Tennessee may benefit from the document called "Close Contact Businesses" that Governor Bill Lee's taskforce has published in partnership with the department of public health. And of course, relying on national agencies such as the CDC, OSHA and others that have information available for how best to stay safe at work, to come into this organized and have those resources pulled together is really helpful. Depending on the size of a business, it can be useful to have a point person, somebody who's collecting all this information and who will be key in developing operating procedures for reopening. If such a manager is selected, it's often helpful and efficient to deputize that person to educate employees about best practices. Harmonizing across the workforce those fundamental aspects of what the disease is, what the symptoms are and how it's transmitted are things that every employee should be aware of.

[That education should cover] the fact that the main way that this virus goes from person to person is through respiratory droplet spread. It's by speaking, coughing and sneezing that respiratory droplets are emitted from our airways and dispersed into an arc around us. When we're talking, that diameter or arc around us is pretty small, maybe six to eight feet. Laughing or sneezing can propel the virus certainly a bit farther. And then understanding the importance of surface disinfection. When respiratory droplets fall, they can get on common use surfaces. Then somebody's hand can come across that surface and contaminate their hands, then that person can be inoculated by touching their eyes, nose and mouth. So once people understand how the virus gets from person to person—that we don't get infected through our skin and that it's important to engage in hand hygiene to remove the virus from our skin so that we don't accidentally inoculate ourselves—people can actively engage in preventing transmission.

The most important thing, of course, which is why businesses have been closed and why people have been asked to stay at home, is distance. And so, I think the challenge for business owners is being able to work with their team to figure out how to maximize distance and limit direct contact time between employees in the same workspace and between employees and customers. That can mean thinking about the minimum workforce that can be utilized to keep a business open. Or, before opening a business, you come up with plans and do walk throughs to make sure that spacing can be done effectively. It may be helpful to put down pieces of tape on the floor or on long counter surfaces where many people are working. We're seeing a few areas of areas of our economy actually blossom a bit in this pandemic that we might not have ever predicted.

I think communication is going to be absolutely critical for reminding us how to behave to limit the risk of transmitting the virus from one person to another. [It's important to create] signage that reminds people to wash hands and not to come to work if they're not feeling well. [It's also important to] emphasize the importance of honesty, truth and transparency between employees and employers so that [employees will be honest when they're experiencing] symptoms [such as] a sniffle, a new cough, a fever or shortness of breath, just don't feel well, or are very fatigued. It should be important for employers to actively encourage employees to stay home and have plans about how to best do that and keep a business going if you need to send people home.

[It's important] to continue to try to support employees even if they're unable to be at work. And then of course having employees who are together wearing cloth masks, particularly if they're not in high-risk work areas like healthcare for example. And recommending that when people put on their masks that they limit the times that they touch their face and that their masks are washed every day. [It can be important to have] a supply of cloth masks and replacements that employees can use for one day and then either launder on their own or have the business launder. These are a few first pass sort of messages, Brent, that I would say may be helpful.

**Brent McDonald:** Thank you for that. And that spawns another question. As we've been talking with the employer community, there's been an underlying question of what precautions can be taken that really do work and which precautions may or may not work but certainly help instill a sense of confidence in our customer base and in our employees. And so I wanted to pose that question to you: Can you list off two or three precautions that are really meaningful and do have an impact, and then some things that can be done to also help the employers create a sense of confidence in the customer base?

**Dr. David Aronoff:** Sure. Well, I think first and foremost, it's having policies in place to discourage people from coming to work if they don't feel well. And that includes customers, patrons and clients. Have

signage that's very clear for customers and employees. They may need to see a list of symptoms. So, if someone has fever, cough, shortness of breath, loss of smell or taste, new diarrhea, fatigue, low-grade fever, those sorts of things, they should be discouraged from interacting at the workplace. That absolutely is an important way to stop the spread of infection.

It's also important to engage in good hygiene—not only hand hygiene, but also surface disinfection. So for companies where clients, patrons or customers are going to be coming in, [it's important to have] hand sanitizer handy for people to use on entry to businesses and on exit. It can be helpful for times where there may be frequently touching of surfaces, such as utensils in restaurants, in the grocery store and on the shopping cart handle. But any commonly used surface should be regularly disinfected.

What is also likely to be helpful is the use of cloth masks. Cloth masks do a few things. One, we think that the most important reason why cloth masks are helpful is to prevent asymptomatic transmission from the person wearing the mask to somebody else. So when we wear cloth in front of our nose and mouth, it is very difficult for our breath [to be dispersed]. The droplets that come out when we talk disperse widely, but many of them get trapped in the cloth masks.

We know that even for people who get symptomatic with COVID-19, they can be transmitting the virus for several days before symptoms occur. And some people appear not to ever get symptoms or get symptoms so mild that it doesn't really even register with them that they may get sick. We just can't know who's infected and who's not just by looking at them. So setting the example of wearing masks is a good way to protect the population by limiting the risk that somebody in a workplace, whether that's a customer, employee or an employer, is transmitting the virus to someone else. The other two quick points I would make about cloth masks is that when employees and employers are wearing masks, it destigmatizes the use of masks by customers and others. The more we normalize the public health measures that may help during this pandemic, the easier it is to get people to buy into them and not feel ostracized, left out or strange by doing those things that may be very important to them. It instills a sense of confidence.

The other thing that masks can be helpful for is reminding us that, "Oh yeah, right now is a pandemic and I need to be respecting space. There's a reason that there's tape on the floor or why the person in front of me just gave me a look that I may be encroaching too much in their space." And so this can be a very important reminder as well.

**Brent McDonald:** Thank you very much for those insights. We continuously hear about the topic of masks. Another question that is emerging is: "Should I as an employer require my customers to wear masks as they come into my place of business?" Can you elaborate some on that—not a policy discussion so much as just what should employers be thinking about as they wrestle with that?

**Dr. David Aronoff:** It's a really important question. Even the guidance from both the city and state recommend that customers wear masks. And again, this is the kind of thing where the virus doesn't care if someone is an employee or a client or an employer. The idea for these public health recommendations is to interrupt the chain of transmission when any groups of people are getting together. And so having a policy that strongly recommends that customers wear masks is important. Now obviously that can get challenging if someone owns a restaurant because people can't push food through their masks, at least not in a very efficient or hygienic way. And so eating and drinking require taking a mask off. And so there are some business specific things that can be looked at. But in general it's a good guidance to have signage that strongly recommends the use of masks on premises; it good for businesses to be thinking about having masks to give to customers if they don't have one or the one that they have is a soiled and they want a new one or something like that.

I tend to think of it in this way. We're all very used to going to restaurants where we see signs that say "no shirt, no shoes, no service." And at this point we probably don't even read those signs anymore even though they're posted most restaurants because we take that step for granted. Here we're in a new time where we're thinking about masks potentially being really off the table in terms of asking people to wear them. But we should be thinking for public health that this is a "no shirt, no shoes, no masks" kind of time. The other thing is that many people tuning into this may remember the time not so long ago when it was perfectly acceptable to smoke cigarettes in restaurants. And those days are now gone largely throughout the United States because we learned that smoking can cause health problems for people who are not the active smoker. The people at the tables next to secondhand smokers can get health problems. And so over time we were able to—not without significant protest and with regulations—put up signs that said no smoking on premises. And that's because smoking could cause a hazard to someone else. Now we're living with a pandemic where my breath could literally kill somebody because I could be transmitting a lethal virus. And so being able to think about it that way—that my breath could be a lethal to another person—is an important motivating force to say, "please wear a mask when you're in our place of business, whether you're an employee or a customer."

**Brent McDonald:** Something that I've noticed just in when I've interacted with businesses: There is a difference in how I respond when I walk into a business based upon their outward expression [of certain public health policies] like, please stand this far apart; here's hand sanitizer for you. So I would imagine that that would be a consistent theme for quite some time.

I'd like to transition now to the live Q&A portion of our webinar. Before we make that transition, though, we'd like to have our second in-webinar poll. This is to get a gauge of how many of our participants already have a return to work plan and are ready to execute on that plan. This helps us think through preparedness in the employer community.

From the poll, it looks like the vast majority either feel like they are ready to go or they are working on that plan. So if you are working on that plan or haven't started yet and you still have outstanding questions, submit those via the chat and we'll address those as we go on.

So, Dr. Aronoff, one of the first questions that have come through is one we've covered before, but it's still an outstanding question: What do I do if one of my employees test positive or has symptoms and has yet to test positive? What do I need to do as their employer at place of work?

**Dr. David Aronoff:** That's a really good question. First, as an employer, the first concern of course is for the health and safety of an employee who may not be well. Refer them to call their healthcare provider or a COVID-19 hotline if they are worried that they may need to be tested for the coronavirus. We're living in a day and age now where instead of sending someone to walk into a clinic, we're advising people to use the telephone or a computer to contact their healthcare provider. But if they're safe and well enough to go home, they should be asked to go home and leave the premises. If somebody has tested positive for the coronavirus, then they'll need to have some quarantine time at home, which will probably be information provided to them by their healthcare provider. As a business owner, itit's important to be thinking through a plan for how to know which employees may have had prolonged contact with someone who has tested positive for a COVID-19.

And what do we mean by prolonged contact? Well it's sometimes one of those things that you know when you see it. In general, when people are working shoulder to shoulder or elbow to elbow the CDC has suggested that that contact that's closer than six feet for longer than 10 minutes at a time would be considered prolonged contact. But it's subjective; if there's a feeling that there's been close contact, then those employees need to be made aware. It can be done in a way that's protective of health information from the employee who is sick, and those employees who may have been in close contact with a case should be aware about tracking their own symptoms if at all possible. They should be sent

home and be monitoring themselves in self-isolation for 14 days and looking for the onset of symptoms of COVID-19. If business operations absolutely can't continue without some employees who may or may not have been in contact with an employee who has a case, then some contingency plans may need to put in place related to monitoring at work, wearing masks and engaging in good hygiene. But ideally someone who is a known close contact may be able to be at home self-isolating and monitoring for the arrival of any symptoms of COVID-19.

**Brent McDonald:** The second question would have a lot of value as we saw several organizations here in the hospitality industry. The question is about self-service, coffee bars, and putting food out for employees or guests. What's some guidance around that? Should it even be continued or should everything be done through a server?

**Dr. David Arnoff:** Yeah, in general recommendations that we're providing suggest that we want to do as little as possible to have multiple people touching the same materials and limit the opportunities for people to be coming together closely. And so you know, we may be seeing the end of the salad bar for example, at least in the short term—hese sort of opportunities where multiple people are converging on something, whether that's a self-service, drink dispenser, grab-and-go-types of items. We really need to think through those and likely not have those, especially when the goods that are placed in those areas are really difficult to individually disinfect for example.

If there are packages or things that have smooth surfaces and are not edible, that may be different cases where things can be wiped down or taken out of rotation for awhile. But when it comes to food stuff, particularly, it's important to limit the contact time and the number of contacts. And that also helps to limit the formation of lines or groups or huddles at places of work. That that could be an important sea change for many businesses. That's why it's going to be really important upfront to think logistically. For example, some businesses have really been built to have waiting areas and how that can be altered is important. So obviously I go back often to the example of restaurants because that happens to be such a popular service industry in Nashville and across the world.

But, finding ways to tell people that their table is ready through their smartphone and discouraging them from sitting in a waiting room or an anteroom is really important. And so that's why before businesses unlock the door for their customers, it's important to have some walkthroughs with management and think through common docking points for people ways to mitigate those activities. We can't necessarily control other people's behavior when it comes to handling products or foods, but we can control the behavior of our servers, for example, and make sure that after food is delivered that hands are washed and that plates and cutlery are clean. And so I do think, to get back to your question, that having people bring items out to customers or putting them on a surface where a customer can leave with that is probably the way to go.

**Brent McDonald:** Another question that comes up frequently: What about gloves? Are gloves really helpful or not helpful? Should they be required or not required?

**Dr. David Aronoff:** Sure. Well, one thing to point out is if your business was using gloves prior to COVID-19 because of importance and infection control, like people working in the back of a restaurant and prepping food, those recommendations are still the same. So, anything I'm talking about in terms of gloves is specifically around COVID-19. Outside of healthcare centers, there are not really recommendations for the use of gloves to prevent the transmission of COVID-19 or to protect an individual from COVID-19. As I said earlier, this is not a virus that infects us through our skin. So, I can have virus on my hands and not develop illness. The problem will be if I touch my eyes, nose or mouth with my hands that are contaminated and then my respiratory tract gets inoculated and then I can indeed get infected. The key to preventing me from infecting from my hands is to engage in really good regular hand hygiene, washing with soap and water for 20 seconds or using an alcohol-based hand sanitizer and remembering not to touch my eyes, nose or mouth.

Those are the fundamentals. When I wear gloves, I can still get those gloves contaminated and I can still touch my eyes, nose or mouth with a glove hand. And those gloves may somehow cause me to be lulled into a sense of security and into thinking I'm protected. And then I may take off a glove and rub my eye without engaging in hand hygiene. So, in some sense, gloves can create more of an opportunity to get virus onto my hands and then onto my face without really thinking about it. So, I don't think that there's an important role for the use of gloves in preventing the acquisition of or transmission of COVID-19. That's to say, customers don't need to be given gloves if they're coming into a restaurant to eat. Hosts, hostesses, waiters and waitresses don't need to wear gloves unless that was already part of their job. And the same for any other business.

**Brent McDonald:** Another stream of questions has come around return-to-work screening. And I know at the medical center we have protocols in place for our staff. So, the question really is, should return to work screening be mandatory?

**Dr. David Aronoff:** I think at this point it should be mandatory, as we're all trying to do the best thing to ensure that our employees are safe and asymptomatic and feel healthy and normal. We know so much now about the cardinal symptoms and signs of COVID-19, so we can screen for them fairly efficiently and our own employees can help with that screening.

A couple of pieces of advice: One, if at all possible, engage in temperature screening of employees, particularly because employees are going to be at the business for long shifts or entire days. That can be done increasingly quite well with non-contact thermometers that are often aimed at the forehead. They work on an infrared basis and several are approved by the FDA for that very purpose. So that limits contact between someone who is screening and an employee. It's an important way to check that someone is in fact not having fever.

The second thing is to have a very brief questionnaire that an employer goes over with employees or a designated employee goes over with other employees upon entry to work about common symptoms. Ask questions like: Are you having any new respiratory symptoms, runny nose, cough, sore throat, fever, feelings of fever, headache, fatigue, muscle aches, new diarrhea, for example. Those are easy to run through and important to help emphasize and remind people of the symptoms and signs of coronavirus so that even if they feel well, maybe the employee goes home and the next day wakes up with a scratchy throat and is reminded, "Oh, they're going to ask me about that. Maybe I should call in and not come to work and see how this plays out." I think that's an important way to continue to emphasize a safety culture. And it also provides a very strong message to customers that we are taking this very seriously—for your health as well as ours. We're screening our employees for how they feel.

**Brent McDonald:** As a followup to that, what do you tell someone if they fail the test upon screening when they come back to their place of work? What is the guidance that employers need to offer that individual employee?

**Dr. David Aronoff:** Well, first of all, that conversation starts prior with training and education of employers, management and employees about how all of this is going to work. So that there's an understanding that there should be no culture of shame if someone doesn't feel well and people should be willing to figuratively sign into the idea that we're all in this together and my health can adversely affect someone else's health. And if you tell me that I'm having a low-grade fever or that I'm having a cough or a sore throat that I agree to be sent home and then instructed to contact a healthcare provider or a hotline about getting tested for COVID-19, if that's a concern. It's important for employers to think about how they're going to handle when employees get sent home and not creating a penalty for doing that. And obviously the way economics are right now, it's very difficult and challenging financially to be

able to sustain support for people who aren't able to be at work. But now more than ever before, it's really important to think about contingency plans for how people don't get docked sick days or other penalties or perceived penalties by going with the program and, for the benefit of everybody, being agreeable to being sent home and contacting healthcare provider.

**Brent McDonald:** Here's another follow up question: Should I be screening customers? Well, that's a loaded question, but that it seems to be one that people are concerned about. Do we need to have some precautions related to our customers?

**Dr. David Aronoff:** I think it's really important to put it in the context of the business. For some businesses, it may be practical and important depending on the nature of the business to do temperature screening on customers. For others, that may be very intrusive and slow things down and actually create lines or more crowding and maybe impractical screening customers or at least having very obvious signage that if you're not feeling well, it's recommended that you take care of yourself, stay home, contact a healthcare provider, and we very much appreciate your patronage when you're feeling better. Having that kind of signage is really important and being willing to engage with customers who appear to be ill and [tell them] for their well-being, we recommend that they go and seek medical attention or be okay with leaving the premises because they appear to be unwell.

And of course, again, it depends on the nature of the business, the relationship that employers have with their clients and patrons. But I think this is about encouraging a culture of safety and health, not only for the employers and employees, but for customers, too. And that's often a two-way street. So good communication, transparency, good signage can be very helpful. And then again, encouraging customers to wear masks. Even if a customer is not feeling well is hiding that from the business, that's why wearing a mask may be protective as well as having lots of hand hygiene available and surface disinfectant available.

**Brent McDonald:** The last question on screening is: Do healthcare professionals have to do the screening, or can employees be trained to do that for their company?

**Dr. David Aronoff:** Yes, this is something that employees can be trained to do. We're talking about noncontact thermometry, which almost looks like you would point a speed gun at a baseball or a police officer following traffic; they look almost the same. They're infrared detectors. Very, very easy to use with a single trigger and a readout. So that's very doable. And then asking about common symptoms and having a checklist of some kind is really simple to do. [This can be done] as long as there's a safe place at work—it could be a break room, it could be a table towards the back.

I think as long as employees know that when they enter the facility, they need to be wearing a cloth mask and they need to take a squirt of hand sanitizer on entry. They can walk to wherever this screening area is and be screened, with the person doing the screening having a mask on. It should be set up in such a way that no one is right on top of each other, that there's room for distancing, that there won't be a line and that it's efficient. This is something that not only can employees participate in, but it can be a way to help employees feel part of the culture of health and safety at a business.

**Brent McDonald:** One of the questions that people want to know how long they should be prepared to continue this. And how long should companies be preparing their employees to take these precautions? Is this a short-term thing or is this the new norm?

**Dr. David Aronoff:** Well, that's such a great, very challenging question. I think for sure that these plans need to be created in such a way that if they have to extend that there's going to be a way to continue to train new employees, for example, and to make changes. It's going to be really important for employers and employees and those of us who are customers to be flexible to changing circumstances.

One of the things that we're seeing very commonly in governments, local and statewide across the United States, is an attempt to be a logical and phased in the way that things open up. Again, our economy shut down very quickly with this coronavirus. We could think of the economy as the lights in our city that were all turned off at once by this pandemic. And rather than flipping them all back on again and saying, "okay, everybody get back to normal," what we're seeing is really the installation of a dimmer switch. And what we want to do is turn on these lights a little bit, see how things go, let our eyes get adjusted to it and then turn it up a little bit more. And as we start to see the opening of businesses, the return to some kind of normalcy in commerce, our partners in the public health sector are going to be watching the dashboard of what's happening with disease activity in our area: How many people are getting diagnosed with COVID-19, how many people are going to the hospital, and how many people are dying of this infection. And if it looks like we've gone too far too fast, there needs to be a willingness to dial back. And that can be hard to imagine. You know people could think of this as putting the toothpaste back in the tube or the genie back in the bottle. It's hard but it's not impossible, and I think we have to have some flexibility there.

But if all goes well, we will be able to open up businesses. We will likely see some more disease as we get people together again, but the one important point is making sure that we have the healthcare infrastructure to care for patients who are infected and continue to move forward. Then as we do that, we'll go into bigger phases of reopening and hopefully end up back towards a new normal. That is would be ideal to be imperceptibly different than the previous normal. We're going to see some differences. We're going to be having many more meetings through the power of electronic transfer, as I like to say, or through the internet. I think when we're change, we're going to be probably telling people their orders are ready through their smartphones, tablets and computers more than in person. There is a lot that's going to be changed about the fabric of our e-commerce and our society coming out of this pandemic. The short answer to this really important question is that we don't envision that these kinds of efforts that we're doing right now—of everybody wearing masks, hand hygiene everywhere, logging in employees, restricting, asking probing questions about symptoms, keeping people six feet apart, putting tape on the floor—we're all hoping that we don't see that as the new normal. We may see a destigmatization of mask wearing. It may be that for the foreseeable future, people in closer quarters are wearing masks and nobody really seems to notice. But you know, if there's one thing that my family is very keen at reminding me of is that my crystal ball is not all that great. And so I think it's important for us to remember that all of us are seeing the future in real time. We're all living into this and we're all very hopeful because that's what we do. But we should be prepared that we're going to go through cycles. We need to be able to retrain people and move forward without a definite line in the sand that says that we're good.

**Brent McDonald:** This next question is a very specific question. One of the participants would like to know your thoughts on the effectiveness of electrostatic misters and UV light wands and what role they may play in killing germs, viruses and good hygiene.

**Dr. David Aronoff:** That's a really good question. I'll have to get back to that particular question in terms of electrostatics and UV lights being tested. People are working on that and there is some guidance around it. I don't know that that's quite standard yet for disinfection and decontamination. And again, those sorts of environmental approaches depend a little bit on the exact nature of the business and how readily multiple surfaces can be decontaminated and whether they can be done after the businesses closes at nighttime or between shifts. We can provide more information about specifics for that after the webinar. I can't give a more detailed answer than that right now, but great question, though.

**Brent McDonald:** As a followup to that, I'll remind the audience that if you sign up for our weekly COVID-19 communications we will be sending out answers to questions. That's the method through which we'll answer questions like this where we need a followup.

Here's another question: While that might be under testing right now, are you aware of anything that has been out there and communicated to the general public as effective that we know are not effective and we don't want people to rely on?

**Dr. David Aronoff:** That's a good question. Most of the messaging that we're seeing is around the most effective ways to limit transmission. There are a lot of products being advertised for use in surface disinfection. I would remind folks that the Environmental Protection Agency (EPA) has a really good list of products that can be used to disinfect against the SARS COVID-2 virus. It lists common things like Lysol disinfectants that are so common and can be purchased at most stores. And so, I would encourage people before they buy to check out the EPA list and make sure that that's okay.

And there's no substitute for maintaining social distance. So if people are convinced that there's a way to start congregating again and not increase at all the risk of transmission, it's important to remember that even with masks and hand hygiene, the more that we put people together into enclosed spaces, the more likely that there's going to be some risk of transmission. We won't go to zero simply by cloth masks and hand hygiene.

**Brent McDonald:** As we're winding down, I encourage folks to please submit one or two more questions if you have any additional items that have come up. Our next question takes us back to the screening topic again, which helps us know what's on people's minds. This particular question says: They have multiple entry points to their place of business, which does present a pretty significant logistical challenge. The best way to answer this question might be to share a little bit about what VUMC is doing because we also have multiple entry points. So perhaps you could share a little bit about what we're doing to protect against all those different places people can enter it.

**Dr. David Aronoff:** You can think of it almost like we think of the material that we use to make masks. The larger the spaces between the fibers, the more virus might be able to get in between and the tighter those fibers get, the less likely it is that virus can get through. And it's the same way with a porous building. Buildings have holes in them, and people walk in and out of those holes. And the number of holes may determine the traffic that can come in and out and the dynamics of virus transmission that's possible. Our ability to screen it really depends on having the person-power to set up screening areas. So here at Vanderbilt University Medical Center where there's lots of portals of entry and exit, which were absolutely created for the convenience of people coming to see their care providers, we had to really rethink how are we going to put enough people at each of those entry points to really be effective at screening and providing the workforce to do that.

And so, as a result, what was decided was to limit the number of entries and exits. We also limited the number of visitors that could come to the hospital. And it's really that combination of efforts that have made a difference. And so now when I come to work, I know exactly where I can go. It's different from what I did for the last seven years. It's not the fastest way. It's a prettier way. And I get to see more trees than I saw before. But now there's a new entry and I would really encourage businesses that have multiple entrances and exits to take a strong look at those that are purely for convenience. But during this time of uncertainty where we're trying to turn the lights back on, can we limit the portals of entry and exit, set up screening, have signage there. And even for those entrances and exits that are closed to have professional signage that essentially says, please pardon the fact that we've had to close this entrance temporarily because of COVID-19. We'd prefer you to use the entrance that way. Those sorts of things can be nice to the customers and remind people that, "Oh, it's not just that they forgot to

unlock the store," but "Oh yeah, this is a pandemic and we have to go that way." So limiting and making sure that you can handle the traffic is really important.

**Brent McDonald:** Dr Aronoff, we thank you for your time and I as we wrap up this session, I want to have a couple closing comments. One, we will finish with a final poll here in just a few moments. But first I just want to remind everybody on the line that this was recorded and will be available for download if you go to the Employer Solutions website. And furthermore, when you go there, you will see a link to our blog where you can see all of the topics that we have been sending out to the employer community over the last couple of months. And that will include some recommendations and guidelines that you may be able to download and use with your employees. So just wanted to make sure people were aware of that resource.

Furthermore, if you do have other questions, or if you would like to specifically talk to a member of this team about your plans and we can be of any help to you at all, please see us as a resource to you as the employer community. We thank you very much for your participation today. Dr. Aronoff, thank you for giving us your time. We know that you are a very busy person right now and we appreciate it. We hope that all of you remain safe and please see us as a resource should you have questions. Thank you and have a good day. Thank you so much.