**SAFE AT WORK POLICY**

Effective \_\_\_\_\_\_\_\_\_

FIRM is committed to a safe and productive work environment for our employees, clients and visitors.

In response to an infectious disease outbreak and following state and federal orders, health recommendations and workplace and occupational safety guidelines, FIRM has implemented several new protocols effective \_\_\_\_\_\_\_\_\_\_\_\_\_\_.

The requirements included in this policy are being implemented to gradually return FIRM to normal operations recognizing that normal may look very different from operations in effect prior to the COVID19 outbreak. While this policy is created to outline the immediate requirements by FIRM to resume normal firm operations, management does reserve the right to adjust certain provisions to accommodate individual employee circumstances and emerging best practices.

**Safe at Work Return Timeline**

Beginning \_\_\_\_\_\_\_\_\_\_\_\_\_\_ and in consideration of the availability of adequate cleaning materials and Personal Protective Equipment (PPE), we will begin to stagger employees working at the office to de-intensify the number of employees in the office at any given time.

**EXAMPLES:**

Staff will rotate weeks working in the office.

Staff will rotate days in the office.

Staff will have staggered start and end times.

The following priorities will be considered for employees returning to the office:

**Phase I**: Employees who have difficulty working remotely and are able are allowed to return.

**Phase II**: Employees who are willing and able to return to the office environment.

**TBD**: Employees considered at-risk are restricted the public health crisis has ended:

* + Individuals or those with someone in their household who is over 65 or with serious underlying health conditions, including high blood pressure, chronic lung disease, diabetes, obesity, asthma, and those whose immune system is compromised such as by chemotherapy for cancer and other conditions requiring such therapy.
	+ Employees at risk should contact their supervisor to request telecommuting/remote work authorization.

Timing for each phase will be determined by management based on the successful implementation of each phase.

**THE FOLLOWING INFECTIOUS DISEASE PROTOCOLS ARE BEING IMPLEMENTED WITHIN THE OFFICE EFFECTIVE MAY X – XX, 2020**

**Safe at Work Personal Care Policies**

All employees are asked to wash their hands regularly and use hand sanitizer after touching items in areas outside of their offices and workstations. Employees should also avoid touching their eyes, nose, and mouth with unwashed hands.

Health protocols suggest the most effective way to protect yourself is hand washing for no less than 20 seconds with soap and water. Employees should follow this protocol and wash their hands throughout the day.

When entering and working in the office; and when interacting with other employees or visitors, employees are asked to wear a mask, if tolerated. Employees may use their own masks. To the extent possible and based on availability, we will maintain a supply of disposable masks.

Employees are asked to always cover your mouth and nose with a tissue when you cough or sneeze or use the inside of your elbow.

* Throw used tissues in the trash.
* Immediately wash your hands with soap and water for at least 20 seconds. If soap and water are not readily available, clean your hands with a hand sanitizer that contains at least 60% alcohol.

Employees are asked not to shake hands with co-workers or visitors to the office until the public health crisis has ended.

Employees are required to wash their hands or use hand sanitizer after accepting deliveries or collecting mail.

**Safe at Work Office Cleaning Protocols**

Based on availability, disinfectant wipes and hand sanitizers are available throughout the office.

All workers are asked to maintain a clean and uncluttered desk, to allow for more effective office cleaning. Based on availability, disinfectant wipes will be available for employees to keep their work areas clean.

**Cleaning your workstation**

* Clean your station at the beginning and end of each workday.
* Use alcohol-based wipes or sprays containing at least 70% alcohol.
* Spray alcohol on work surfaces and tools, allow to stay on surface for at least 30 seconds.
* For IT equipment such as a keyboard, spray a paper towel with alcohol to wipe down surface, or use alcohol wipes.
* Once you touch an item, clean it: stapler, tape dispenser, cabinet door.
* Employees may choose to bring the following supplies from home to reduce the need to handle commonly items in the office: dish gloves for cleaning, desk cleaner, hand sanitizer, and a water/coffee cup with a lid.

**Safe at Work Office Operational Policies**

Employees are encouraged to use telephonic and virtual meeting options whenever possible, even when participants are in the same building. Employees are encouraged to collaborate virtually whenever possible using Teams/Zoom/ Webex and are only allowed to travel to in person meetings if absolutely necessary.

If face-to-face meetings are unavoidable, minimize meeting time, choose large meeting spaces and keep 6ft distance between employees.

Workstations will be arranged to create a minimum 6ft distance between workstations.

[De-densifying workstations might be a challenge in areas where desk spacing is tight, such as some open layouts. In situations where existing desk spacing is less than 6 feet apart, consider using every other desk to create a buffer for each person. This could be achieved by assigning some people to working from home or temporarily locating them in other areas. Ideally, space employees so they do not face each other. Consider adding partitions for sit/stand desks that are attached to the desktop and move up and down with the desktop. The goal is to block potentially harmful viruses that can be transmitted by talking, coughing, or sneezing. It is also preferable to avoid situations where one employee is standing while another is seated within the same 6-foot bubble.]

All employees are required to maintain a 6ft social distance between themselves and co-workers. Employees are encouraged to refrain from congregating in common areas and under no circumstance should there be more than 10 employees gathered in the common spaces of the office.

Until advised otherwise, employees are encouraged to supply their own lunches and eat at their desks, outside (observing 6ft distance rule) or in their private vehicles. Employees must retrieve all outside food deliveries outside of the building. No outside food deliveries will be allowed inside the building.

We will be limiting visitors to the office until there is no longer a coronavirus health threat. Meetings with clients, suppliers, subcontractors and others should be conducted virtually until government orders are amended to allow more than 10 individuals to be present in an office.

Employees that must be present at worksites should follow the guidelines provided relative to worksite safety ([Industry Worksite safety plan](file:///C%3A%5CUsers%5CDoreen%5CDesktop%5CCOVID19%5CCOVID-19%20LADOTD%20Joint%20Workforce%20Safety%20Plan_Final_bk%20%283%29.docx)).

We are increasing cleaning protocols for workstations, conference rooms, collaborative areas, reception desks, and other common areas at regular intervals throughout the day.

[Contracted cleaning service/or designated firm employee is cleaning daily/2x per day until further notice.

All excess chairs in the conference rooms are being removed to limit seating to 10 or fewer seats. When using the conference room, we will spread out collaboration seating so people are spaced further apart.

*If you will take temperatures:*

We will test the temperature of each employee at the start of the day following CDC guidelines and screen everyone who enters our facility/office, including:

* All employees before the start of each workday;
* All visitors.

We will ask the following questions when as employees and visitors enter the office:

 “YES or NO, since your last day of work, or since your last visit to this facility, have you had any of the following:”

* A new fever (100.4°F or higher), or a sense of having a fever?\*
* A new cough that you cannot attribute to another health condition?\*
* New shortness of breath that you cannot attribute to another health condition?\*
* Loss of smell or taste?\*
* A new sore throat that you cannot attribute to another health condition?\*
* New muscle aches (myalgias) that you cannot attribute to another health condition, or that may have been caused by a specific activity (such as physical exercise)?\*

\*If an employee or visitor answers YES to any of the screening questions, we will immediately activate our employee protocol for infectious disease by sending employees home and advising such employees to see their health care provider. See section on Safe at Work Policy for employees with or presumed to have coronavirus.

## Safe at Work Travel Conditions

The employee’s level of comfort with travel is paramount, but the following conditions are required for business travel:

* Travel ***must*** be approved in advance by your supervisors.
* The location being traveled to and from must not have lockdown or stay at home orders and or must not be designated ‘hot spots.’
* Anyone traveling should have appropriate Personal Protective Equipment, specifically some sort of mask/face covering and travel size disinfectant such as hand sanitizer, wipes, sprays - (the company can supply you with these if need be).  Use on any high contact surfaces, such as plane seat arm rests, tray tables, seatbelts or hotel room door handles, remotes and light switches.
* Type of work should be relatively independent, where it is realistic to maintain the 6 ft of separation.
* Travel to conferences, seminars, trainings is not permitted at this time.
* Adhere to all other regular company and CDC guidelines (monitor for symptoms, frequent handwashing, social distancing, etc).

**Safe at Work Policy for Employees with or Presumed to Have Coronavirus:**

Employees who have [symptoms](https://www.cdc.gov/coronavirus/2019-ncov/about/symptoms.html) (i.e., fever, cough, or shortness of breath) are instructed to notify their supervisor and the COVID-19 Workplace Coordinator and to stay home.

Employees are asked to[follow the Centers for Disease Control (CDC) recommended steps](https://www.cdc.gov/coronavirus/2019-ncov/downloads/sick-with-2019-nCoV-fact-sheet.pdf) for sick employees.

Employees who are well but who have a sick family member at home with COVID-19 are instructed to notify their supervisor, the COVID-19 Workplace Coordinator and to stay home. Employees are asked to follow [CDC recommended precautions.](https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-prevent-spread.html#precautions)

Employees who appear to have symptoms (i.e., fever, cough, or shortness of breath) upon arrival at work or who become sick during the day will be immediately separated from other employees, customers, and visitors and sent home.

Employees are instructed not to return to work until the criteria to discontinue home isolation are met, in consultation with healthcare providers and state and local health departments as follows:

**Employees with COVID-19 who have symptoms** and were directed to care for themselves at home may discontinue isolation under the following conditions:

* 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 7 days have passed since symptoms first appeared.

**Employees with laboratory-confirmed COVID-19 who have not had any symptoms** may discontinue isolation when at least 7 days have passed since the date of their first positive COVID-19 viral test and have had no subsequent illness provided they remain asymptomatic. For 3 days following discontinuation of isolation, these employees should continue to limit contact (stay 6 feet away from others) and limit potential of dispersal of respiratory secretions by wearing a covering for their nose and mouth whenever they are in settings where other persons are present.

Employees in all cases are instructed to **follow the guidance of their healthcare provider and local health department.** The decision to stop home isolation should be made in consultation with your healthcare provider and state and local health departments.

If you are out sick or show symptoms of being ill, it may become necessary to request information from you and/or our health care provider to confirm you need to be absent, how the absence relates to the infection, and to know that is appropriate for you to return to work. This information will be treated as a confidential medical record and will be treated as such according to state and federal workplace laws.

If an employee is confirmed to have COVID-19 infection, we will inform employees of their possible exposure to COVID-19 in the workplace but will maintain confidentiality as required by the Americans with Disabilities Act (ADA). All employees will be instructed to then self-monitor for symptoms (i.e., fever, cough, or shortness of breath).

We will thoroughly disinfect all areas of the office that an exposed person may have been in contact.

CONFIDENTIALITY: *Due to federal ADA requirements employee* ***names and conditions will not be disclosed to fellow employees. However, employees will be notified about their possible exposure to COVID-19 in the workplace and advised to follow*** [*CDC precautions*](https://www.cdc.gov/coronavirus/2019-ncov/prepare/prevention.html)***to protect themselves and monitor for symptoms.***

Reports of employees not following firm policies and protocols should be made to:

 -INSERT CONTACT INFORMATION-

**Lagniappe Recommendations to Firms**

Businesses should prepare for a more discerning workforce that will expect continuous, credible assurances that they are working in a safe environment. This will include clear displays of updated safety, health and wellness information and resources for employees, visitors and occupants throughout the building and specific workplace.

There should be a comprehensive assessment of the physical building and the taking of steps to prepare for reentry where controllable. In leased locations, occupiers and property owners should openly communicate a plan that will support the back-to-work process.

Communicating with all constituents is more critical now than ever before. Ongoing employee and stakeholder feedback will be critical; continually review and adopt best practices and new ideas to demonstrate an active and ongoing commitment to a safe and healthy workplace environment.

You will need to plan for increased expense to reopen your environments. On the operating side, you can expect added costs for things like enhanced cleaning, hand sanitizer, Personal Protective Equipment, screening services, and increased communications. Capital will be needed for space reconfiguration, and changes to furniture, fixtures, and technology components to support your post-COVID workplace.

Upon implementing a return to work policy, consider assigning what were formerly shared desks to individuals for a full day or a week, and then make sure they are disinfected before a new person uses the work setting.

Limit tech sharing. To avoid disease transmission, it is best to provide technology and accessories (such as a mouse, keyboard, or headset) to each individual. These devices are touched throughout the day and are best not shared without disinfecting between uses.

Upgrade air filtration systems. The air we breathe is also a shared resource, so invest in air-cleaning systems to protect collaborative environments. Consider installing state-of-the-art air purification and sanitization systems. Many of these systems display real-time air quality measurements on digital screens to keep employees informed, and it will serve as a continuous disinfectant, improving air quality by reducing airborne and surface contaminants like viruses, bacteria, germs, VOCs, smoke, and other allergens.

Employers should also install plenty of hands-free dispensers with sanitizer that contains at least 60−95% alcohol in lobbies, conference rooms, and lounges. No-touch garbage and recycling receptacles are preferable. Also, door pulls, badge readers, and shared common areas should be disinfected throughout the day.

## Resources of information

* <https://www.cbre.com/covid-19/Reopening-The-Worlds-Workplaces?article=7c4fc873-6d81-48a1-9284-d86c35a1f379&feedid=fab9f8b5-57a6-4d15-b9e2-f5bd185db42e>
* <https://www.osha.gov/Publications/OSHA3990.pdf>
* <https://www.osha.gov/Publications/OSHA3994.pdf>
* <https://brac.org/wp-content/uploads/20200422-Safe-at-Work-Framework.pdf>
* <https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html>
* <https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-in-home-patients.html>
* <https://www.osha.gov/SLTC/covid-19/>
* <https://www.eeoc.gov/coronavirus>
* [COVID-19 Website](https://www.cdc.gov/coronavirus/2019-ncov/index.html)
* [What You Need to Know About COVID-19pdf icon](https://www.cdc.gov/coronavirus/2019-ncov/downloads/2019-ncov-factsheet.pdf)
* [What to Do If You Are Sick With COVID-19pdf icon](https://www.cdc.gov/coronavirus/2019-ncov/downloads/sick-with-2019-nCoV-fact-sheet.pdf)
* [Interim US Guidance for Risk Assessment and Public Health Management of](https://www.cdc.gov/coronavirus/2019-ncov/php/risk-assessment.html)

[Persons with Potential Coronavirus Disease 2019 (COVID-19) Exposure in Travel-associated or Community Settings](https://www.cdc.gov/coronavirus/2019-ncov/php/risk-assessment.html)

* [Small Business International Travel Resource Travel Plannerpdf icon](https://www.cdc.gov/niosh/docs/2019-165/pdfs/2019-165.pdf?id=10.26616/NIOSHPUB2019165)
* [Persons at Higher Risk of Severe Illness](https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-higher-risk.html)
* [Industry Worksite safety plan](file:///C%3A%5CUsers%5CDoreen%5CDesktop%5CCOVID19%5CCOVID-19%20LADOTD%20Joint%20Workforce%20Safety%20Plan_Final_bk%20%283%29.docx)

Information contained in this document is not legal advice

**Safe at Work To Do List**

|  |  |  |
| --- | --- | --- |
|  **#** |  **Topic** |  **Task** |
| **1** | **Establish a SAW Task Force**  | * Set up the cross-functional Safe at Work Taskforce
* Define your cultural North Star and Guiding Principles
* Set policies, plans, communicate to employees and leaders
 |
| **2** | **Identify Key Data to inform decisions** | * [Center for Disease Control (CDC) Website](https://www.cdc.gov/)
* [World Health Organization (WHO) Website](https://www.who.int/)
* [Washington State Department of Health Website](https://www.doh.wa.gov/)
* [Access Washington Website](https://access.wa.gov/)
* [Occupational Safety and Health Administration (OSHA)](https://www.osha.gov/)
* [ADA](https://www.ada.gov) Website
 |
| **3** | **Determine who comes back first** | * Define prioritization of projects
* Define who is eligible to come back
* Create a phased approach
* Build a facilities limitation plan
* Implement flexible work policies
* Prepare contingency plans
 |
| **4** | **Preparing the Office** | * Workplace PPE
* Facilities & cleaning protocols
* Tenant / Landlord responsibilities & communications
* Gathering and spatial planning
* Screening, Tracking and Tracing
* Covid / Covid-like Symptom procedures
 |
| **5** | **Preparing the People** | * Who to train
* Topics to cover
* Training formats
* Train the trainer
 |
| **6** | **Communications** | * Executives. Weekly meetings with firm managers.
* Employees. Weekly/bi-weekly company-wide emails to employees. Weekly Supervisor check ins with employees. Communicate transparently with employees as situations evolve.
* Re-opening plans and expectations
* Physical office communication & signage
 |
| **7** | **The Road Ahead** | * Check CDC guidelines and evolving medical guidelines regularly
* Be prepared for potential re-shutdown – have contingency plans
* Evolve internal protocols to reflect new guidance and best practices
 |

**Disinfection & Deep Cleaning Protocols & Checklists**

The goal is to establish a sanitary baseline before the site opens. The site should be 100% disinfected prior to anyone returning to work.

Take unique, office-specific circumstances into consideration when sanitizing and disinfecting.

**Reminders**

* Deep clean or disinfect entire office/facility prior to anyone returning to work.
* Replace HVAC air filters or clean/disinfect.
* The cleaning steps outlined below should be taken routinely to disinfect workplace surfaces, chairs, tables, etc. and to protect employees.

##### **Providers or employees should sanitize and disinfect all areas of the site with special attention to**

* Mailroom and Printer Equipment
* Workstations and equipment
* Screens on Work Areas
* Common surface areas
* Restrooms
* Cafeterias
* Lockers

##### **Put tight controls in place on who enters and exits the site during the cleaning shutdown**

* Security
* Sanitization vendors
* Taskforce team members, as needed

This checklist should be implemented in facilities to reduce the risk of spread of infection

The cleaning steps outlined below should be taken routinely, based on frequency mentioned to disinfect workplace surfaces, chairs, tables, etc. and protect employees

Along with these workplace disinfection activities, proper personal sanitary practices including washing hands after bathroom use are also necessary.

**Communications Checklist**

**Communicate Early and Often**

* Communicate with employees early, consistently and transparently
* Evaluate the tone and message set by leadership (e.g., avoidance of pressure come in to work due to leadership presence in office)
* Share your Plan publicly to build confidence and trust
* Consider posting Plan reminders around the office
* Survey employees to gauge broad-based comfort and sentiment on returning to workplace ([Polly.ai](http://www.polly.ai/), [TinyHr](http://www.tinyhr.com/), [CultureAmp](http://www.cultureamp.com/))
* Enable employees to confidentially self-identify as high-risk or vulnerable
* Create alternative work arrangements for those with concerns regarding return to workplace
* Management-specific training on compliant ways to manage return to workplace concerns with workers
* Engage with counsel to review training materials, employee communications and back to workplace plan

**Communication channels**

* Company-wide email or video from CEO and/or Head of People
* C-level for org-wide or global comms, HR for local comms
* Hold company-wide discussions / Q&As / AMAs (ask me anything sessions)
* Set up Slack channel with updates (pro-tip: let people opt out)
* Create a contact email (e.g., email health@company with questions or if you need to alert the company you or someone in contact with you is sick)

**Consider Pulse Surveys for all employees:**

**For employees**

* How do you feel, personally, about returning to the office? 1 not eager  - 10 very eager
* What actions would you like to see us take before you’re comfortable returning to the office?
* Are there conditions that are unique to you that should be known, regarding returning?
* How effective do you feel your team has been working remotely? 1 not very - 10 very
* Do you have the equipment, support, and conditions you need to work well from home? 1-10

**For managers:**

* How has working from home impacted your team’s effectiveness? 1 not at all - 10 very much
* What would improve work quality by 10%?

**Internal Communications**

A clear, caring message from leadership can go a long way in reducing fear and uncertainty in the workplace in the face of public health concerns. Below, you’ll find the blueprint for effective internal communication, and examples you can use or customize so you don’t have to create your own messaging from scratch. Think of this as your 5-point guide to keeping your team informed and safe.

1. **Begin with an acknowledgement statement (e.g., “We realize you might be feeling X”). Share an intention statement (e.g., “I am writing about this because Y). Example:**

*Hi everyone,*

*Given the uncertainties around the coronavirus, I wanted to share our stance to create alignment and ensure our team’s wellbeing.*

1. **Clarify that the intention is to invite smart action vs fear or overreaction. Example:**

*While the current health risk is low, we recognize the importance of taking calm precautions.*

1. **Outline adjustments you require or recommend with links to relevant information so people feel as much certainty as possible. Clarify who to go to for support. Example:**
* *Work from home if you feel sick, traveled outside the country in the past 2 weeks, or simply prefer to work remotely. Please work with your manager to co-create a smooth transition.*
* *Switch meetings and events to virtual, if needed. When in doubt, get support from your manager.*
* *Follow*[*CDC*](https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/guidance-business-response.html)*safety guidelines. These precautions are always a good idea! So, think of this as a reminder to commit to the basics: wash your hands thoroughly, use hand sanitizer (with at least 60% alcohol), and avoid touching your face. Sleeping well and healthy eating also go a long way in keeping our immune systems strong.*
1. **Make a ‘know/don’t know/will know’ statement. Example:**

*What we do know is that the CDC is listing most regions as safe and that health officials are saying good hygiene habits make a big difference. What we don’t know yet is how this situation will impact our upcoming conference. But we will be tracking CDC updates and news reports, and will keep you updated about any changes. Expect to hear another update by Monday.*

1. **Invite conversation. Example:**

*In the meanwhile, if you have any questions, please don’t hesitate to reach out.*

**COVID19 Q&A**

**Can someone who has had COVID19 spread the illness to others?**

The virus that causes COVID-19 is [spreading from person-to-person](https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/how-covid-spreads.html). People are thought to be most contagious when they are symptomatic (the sickest). That is why CDC recommends that these patients be isolated either in the hospital or at home (depending on how sick they are) until they are better and no longer pose a risk of infecting others. More recently the virus has also been detected in asymptomatic persons.

How long someone is actively sick can vary so the decision on when to release someone from isolation is made using a test-based or non-test-based strategy (i.e. time since illness started and time since recovery) in consultation with state and local public health officials. The decision involves considering the specifics of each situation, including disease severity, illness signs and symptoms, and the results of laboratory testing for that patient.

Learn more about [CDC’s guidance on when to release someone from isolation](https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-hospitalized-patients.html) and discharge hospitalized patients with COVID-19. For information on when someone who has been sick with COVID-19 is able to stop home isolation see [Interim Guidance for Discontinuation of In-Home Isolation for Patients with COVID-19](https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-in-home-patients.html).

Someone who has been released from isolation is not considered to pose a risk of infection to others.

**Can someone who has been quarantined for COVID19 spread the illness to others?**

Quarantine means separating a person or group of people who have been exposed to a contagious disease but have not developed illness (symptoms) from others who have not been exposed, in order to prevent the possible spread of that disease. Quarantine is usually established for the incubation period of the communicable disease, which is the span of time during which people have developed illness after exposure. For COVID-19, the period of quarantine is 14 days from the last date of exposure because the incubation period for this virus is 2 to 14 days. Someone who has been released from COVID-19 quarantine is not considered a risk for spreading the virus to others because they have not developed illness during the incubation period.

COVID-19 is a new disease and there is limited information regarding risk factors for severe disease. Based on currently available information and clinical expertise, **older adults** and **people of any age who have serious underlying medical conditions** might be at higher risk for severe illness from COVID-19.

**Who is at higher risk for serious illness from COVID19?**

Based on what we know now, those at high-risk for severe illness from COVID-19 are:

* [People aged 65 years and older](https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/older-adults.html)
* People who live in a nursing home or long-term care facility

People of all ages with underlying medical conditions, particularly if not well controlled, including:

* People with chronic lung disease or moderate to severe asthma
* People who have serious heart conditions
* People who are immunocompromised
	+ Many conditions can cause a person to be immunocompromised, including cancer treatment, smoking, bone marrow or organ transplantation, immune deficiencies, poorly controlled HIV or AIDS, and prolonged use of corticosteroids and other immune weakening medications
* People with severe obesity (body mass index [BMI] ≥40)
* People with diabetes
* People with chronic kidney disease undergoing dialysis
* People with liver disease

Full list of CDC Frequently Asked Questions:

<https://www.cdc.gov/coronavirus/2019-ncov/faq.html>