



# GEORGIA VETERINARY MEDICAL ASSOCIATION

*Serving Georgia Veterinarians Since 1906*

## VIRTUAL TOWN HALL ON COVID-19

3/26/2020

### Business Issues Q&A

*Please note that there are answers in this document that have now changed due to the Executive Order issued by Governor Brian Kemp on Thursday, 4/2. We will strike through what was valid on 3/26 and provide the correct answer as of 4/2.*

#### Panelist:

- Dr. Jill Lancaster, *GVMA President*
- Jim Cichanski, *CEO, Flex HR*
- Dr. Lee Myers, *USDA APHIS VIC*

#### **Dr. Jill Lancaster, GVMA PRESIDENT**

**Q:** Who determines what an essential business is, when does it happen and are we included?

**A:** ~~Based on what has happened in other states—the Governor of the state/county or city official identifies which businesses are essential and non-essential in their executive order. Yes, the U.S. Department of Homeland Security had their list of those that they considered essential, who “have a special responsibility to maintain your normal work schedule.” These were to be used as guidelines for the states (and veterinarians were included in that list, though they could have made it clearer). Governor Kemp has not issued an executive order shutting down businesses but it may come to that.~~ The Executive Order of Governor Kemp stipulates that those businesses that are included in the Department of Homeland Security’s Critical Infrastructure list (veterinarians are included) can remain operational. Those businesses must comply with the following 16 requirements outlined in the Executive Order:

1. Screening and evaluating workers who exhibit signs of illness, such as a fever over 100.4 degrees Fahrenheit, cough, or shortness of breath;
2. Requiring workers who exhibit signs of illness to not report to work or to seek medical attention;
3. Enhancing sanitation of the workplace as appropriate;
4. Requiring hand washing or sanitation by workers at appropriate places within the business location;
5. Providing personal protective equipment as available and appropriate to the function and location of the worker within the business location;



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6. Prohibiting gatherings of workers during working hours;
7. Permitting workers to take breaks and lunch outside, in their office or personal workspace, or in such other areas where proper social distancing is attainable;
8. Implementing teleworking for all possible workers;
9. Implementing staggered shifts for all possible workers;
10. Holding all meetings and conferences virtually, wherever possible;
11. Delivering intangible services remotely wherever possible;
12. Discouraging workers from using other workers' phones, desks, offices, or other work tools and equipment;
13. Providing disinfectant and sanitation products for workers to clean their workspace, equipment and tools;
14. Prohibiting handshaking and other unnecessary person-to-person contact in the workplace; and
15. Placing notices that encourage hand hygiene at the entrance to the workplace and in other workplace areas where they are likely to be seen; and
16. Suspending the use of Personal Identification Number ("PIN") pads, PIN entry devices, electronic signature capture and any other credit card receipt signature requirements to the extent such suspension is permitted by agreements with credit card companies and credit agencies.

The Executive Order and a FAQ about the Executive Order are posted on the GVMA Website.

~~The GVMA sent a letter to him on March 19 asking him to designate veterinary clinics as essential businesses in the event that he decides to close businesses down. And, let me repeat—he has not done that YET. The Mayor of Atlanta, Keisha Lance-Bottoms did that on Monday for a 14-day period and she did recognize veterinary clinics as essential businesses.~~

**So what does all of that mean?** It means that you have the right to stay open. Each individual practice owner needs to make their own decision as to whether they want to stay open based on the conditions in their local community and their determination on how best to keep themselves, their staff, and their clients safe.



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**Q: Gov. Brian Kemp announced a series of measures Monday to try to curb the spread of coronavirus, instituting a ban on gatherings of more than 10 people. How does the 10 person limit affect us?**

**A: ~~The 10 person limit does apply to veterinary clinics and if you don't have room to practice social distancing of 6 feet, you could be at risk of being closed down if reported. To stay within that 10 person limit for larger clinics, you should consider using teams of people/shifts to stay within the limit.~~**

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**Q: How do local ordinances affect us?**

**A:** ~~If your local government issues an order, you must comply with it. If your county has a shelter in place rule, you can still be open unless you are not designated as an essential business in that order. We are not aware of any communities where this is the case, but if that does happen in your community, please contact the GVMA and we will be in touch with your local authorities.~~ The Executive Order issued by Governor Kemp on 4/2 invalidates all existing county and city ordinances that were in place.

**Q: Is there a shortage of PPE in Georgia for human medical providers?**

**A:** Based on what Governor Kemp said on Monday, human medical practitioners in Georgia have been supplied as follows:

- The state distributed about 268,000 N95 surgical masks to all 142 hospitals over the weekend, and 30 ventilators to the hard-hit counties of Dougherty and Floyd. All told, Georgia has shipped out 532,170 N95 masks, 65,640 face shields, 640,600 surgical masks, 46,740 surgical gowns, 635,000 gloves, and 64 pallets of general hospital supplies since early March.
- Federal authorities say a new supply of the goods will arrive within five days.
- Does this mean that you shouldn't conserve your PPE supply? No, it doesn't and we'll take more about that later. It means we aren't being asked **YET** to share our supplies with human medical workers as they have in other states and it is doubtful that you will be able to order PPE for some time. Our panelists will cover more about this later.

A late breaking development today—the CDC has a PPE Burn Rate Calculator so you can estimate how long your supply of PPE will last. We have posted that on the GVMA Website under the CDC resources.



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## **Jim Cichanski - CEO, Flex HR**

**Q: Regarding Families First Act, do we know how employers will apply for payroll tax credits, request accelerated payments from the IRS (if the taxes are not sufficient), or request exemptions?**

**A:** The Department of Labor has stated that all the rules of the Families First Coronavirus Recovery Act (FFCRA) will be prepared and published on April 2 and the rules should be out on April 1. What we are hearing so far is when you do your payroll, you will reduce the amount of bottom line federal taxes you were going to submit by the amount of the expense. We are recommending that you talk to your payroll firm and ask them to set up two separate leave categories, one for the sick and one for the FMLA portion. This way it will be easy to track.

**Q: If someone took a voluntary decrease in hours (using PTO) prior to April 2, can the employer pay that individual and be reimbursed through the CARES act?**

**A:** It looks like the answer is NO but we will know more when the final bill is passed. The best practice will be for the practice to give the employee a letter stating they will be partially furloughed meaning reduced hours. In this way, they can collect unemployment for those partial hours. Please be sure to consult the Georgia Department of Labor website for their rules concerning this in this emergency state as Don referenced earlier.

**Q: Regarding the CARES Act, how and when can we apply for the loan? What criteria must we follow in order for the loan to be forgiven? What expenses will the loan cover?**

**A:** The CARES Act has not been passed as of now but it looks like you can go to any bank that has federal loan processing. What we have heard is that you must keep and pay 90% of your workforce to get the loan forgiven. What we are hearing is it will cover wages, employment taxes, benefit cost and lease facility cost. There are some hints of other business expenses but that is not clear at this time.

**Q: In one version of the CARES act, it was listed that expenses covered will include payroll, mortgage, and rent.**

**A:** Yes and also employee benefit costs.

**Q: What if the business owner owns the building through a separate entity?**

**A:** In most arrangements I have seen, there is a contract for a lease and you pay on that agreement, therefore I would believe that is OK if you can prove this has always been done and you didn't do this arrangement just to get more money in your claim of expenses.



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**Q:** Will they also be entitled to loans that cover rent?

**A:** The loan the way they indicate will be to cover the rent/benefits and wages.

**Q:** What if the business owner owns the building under the same entity as the business? Are they also eligible to have rent included?

**A:** I would think so, if again you can prove it has been that way in the past.

**Q:** How is “mortgage” defined? Will it include bank loans that were used for building improvements?

**A:** Undetermined, we will need to see the small print in the Act on expenses authorized.

**Q:** The CARES act appears to include loan forgiveness if we retain 90% of our team members. Many hospitals are reducing operating hours, which of course decreases hours worked. If employees’ hours are reduced, is the employer at risk of losing the loan forgiveness?

**A:** All indications are that you must keep them and pay them their full wage. Again, we will see the final Act. Also remember, when the Feds put acts out like this, it is normally followed by written rules on the details. The first act passed claims the rules will be written by 4/1.

## **Dr. Lee Myers - USDA APHIS VIC**

**Q:** Can you please talk about the use of masks—differences between N95, surgical masks, homemade masks and how they are used for outbreaks?

**A:** Facial masks are one component of Personal Protective Equipment.

An N95 respirator is a respiratory protective device designed to achieve a very close facial fit and very efficient filtration of airborne particles, including small particle aerosols and large droplets (only non-oil aerosols). It filters out at least 95% of airborne particles. Both a medical clearance and a fit test is required to determine the type of respiratory that provided the best protection. When properly fitted and donned, minimal leakage occurs around edges of the respirator when user inhales. N95 respirators are regulated by both FDA and NIOSH.

USDA APHIS VS maintains a stockpile of a variety of respirators, including various brands of N95 masks, to be used by animal health emergency responders to stay healthy while working with animals. The responders are subject to an annual medical clearance and fit testing. Responders who wear respiratory protection are identified through determination of risk during a zoonotic disease outbreak. A high consequence zoonotic disease of concern is an H7 or H5 strain of highly pathogenic avian influenza. Occupational use of N95 respirators requires a written respiratory protection program.



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Surgical masks are intended to protect the environment from the wearer (designed to keep the surgeon's respiratory pathogens away from a patient). It does a good job of trapping large droplets and some aerosols. It does NOT provide the wearer with a reliable level of protection from inhaling smaller airborne particles and is not considered respiratory protection. It is loose fitting and allows leakage around the edge of the mask when user inhales. Surgical masks are approved by FDA.

COVID-19 is spread through respiratory droplets (both large droplets and small droplets) in the air and that land on surfaces.

The use of PPE within a veterinary practice should be one component of an overall infection control and biosecurity program.

## **Helpful websites:**

- CDC National Institute for Occupational Health provides an informative one-pager on understanding the differences between N95 respirators and surgical masks.
- <https://www.cdc.gov/niosh/nppt/pdfs/UnderstandDifferenceInfographic-508.pdf>
- <https://www.fda.gov/medical-devices/personal-protective-equipment-infection-control/n95-respirators-and-surgical-masks-face-masks>

**Q: PPE issues—what does conservation look like and how do we balance seeing patients with conserving PPE? Shouldn't the PPE be going to human health workers?**

**A:** We know that the unusual high demands for PPE due to the COVID-19 response has resulted in a temporary shortage of PPE in the supply chain. CDC has issued Strategies for Optimizing the Supply of PPE and Equipment, including surgical masks <https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/face-masks.html>

CDC has issued a Checklist for Healthcare Facilities: Strategies for Optimizing the Supply of N95 Respirators during the COVID-19 Response <https://www.cdc.gov/coronavirus/2019-ncov/hcp/checklist-n95-strategy.html>

Some of this guidance can be applicable to veterinary facilities, e.g.

- understand the facemask inventory, supply chain and utilization rate
- remain aware from your supplier of the time required to receive additional supplies
- implement other engineering and administrative control measures to reduce the demand for PPE use, e.g. reduce the number of procedures that require the use of PPE, maximum use of telemedicine, optimize your supply of PPE, etc.