

COVID-19 ECONOMIC RECOVERY

*Roadmap for a Smart Re-Start
of the Wisconsin economy*

April 2020

MMAC
Metropolitan Milwaukee
Association of Commerce

DOUBLE IMPACT: COVID-19 AND THE WISCONSIN ECONOMY

COVID-19 (Novel Coronavirus) is the most significant threat to public health in Wisconsin since the Spanish Flu outbreak of 1918, which killed 6% of the U.S. population. Although fundamentally a public health crisis, COVID-19 has created a corresponding economic crisis, the velocity of which is unprecedented.

KEY TAKEAWAYS

- Engage in a Smart Re-Start of the Wisconsin economy, informed by metrics contained in the Key Health and Safety Indicator Dashboard (Attachment A).
 - Employers encouraged to implement best practices to self-determine readiness to meet employee and customer health and safety needs.
 - Providing and sustaining employee and consumer confidence will be both a health and economic imperative. We want regional employers to be best in class.
 - The “next normal” will extend until a vaccine is widely available.
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Economic Impact and Trends

Moody’s estimates that U.S. economic output fell an astonishing 29% in March 2020 (*The Wall Street Journal*, April 4). To put this decline in perspective, economic output during the initial five years of the Great Depression (1929-33) fell 26%. The halt of commercial activity was felt immediately in Wisconsin, where applications for unemployment benefits over a 17-day period (March 17 – April 2) totaled 264,000, compared to 14,000 applications for the same period in 2019. The economic impact will deepen in the months to come and surely persist long after COVID-19 has been sufficiently controlled. Our challenge is to create an expedited roadmap for economic recovery that neither stymies efforts to contain the virus nor lengthens the period it disrupts commerce and the lives of Wisconsin residents.

Safer at Home

Wisconsin Governor Tony Evers, recognizing the potential human toll of COVID-19, took action on March 25 to halt the spread of the virus. The Governor’s Safer at Home order directed Wisconsin residents to remain in their homes (except for essential activities) and mandated closure of non-essential businesses. The original order was set to expire on April 24, significant portions of which have been extended to May 26 via a second order.

Thanks to the collaborative and diligent actions of Wisconsin residents, companies and frontline health care workers, there are encouraging early signs that Safer at Home is having a positive impact in managing the spread of COVID-19 beneath the crisis curve. As a result, we must turn our attention to a phased restart of the Wisconsin economy that proceeds in step with public

and health care efforts to control COVID-19.

MOVING FROM CRISIS TO RECOVERY

Full economic recovery from the COVID-19 crisis is likely to take several years. There are three projected stages of the recovery: 1) Restart: phased opening, 2) Next normal: stay under the crisis curve, and 3) Thrive: post vaccine. This document and corresponding recommendations focus on the first phase.

Key Indicators: When Can Wisconsin’s Phased Re-Start Begin?

The goal is an expedited return to normal economic activity that does not force the public health situation back into a crisis, hence elongating the broader economic recovery and damaging the collective psyche of Wisconsin residents. The number and rate of new positive cases is trending favorably as of April 17, but continued monitoring of key indicators will be required in the days and weeks ahead.

The Medical College of Wisconsin has created a Key Health and Safety Indicator Dashboard (Attachment A) to provide state and local officials with real time metrics to support informed decision making on when business operations can be safely resumed. Although the dashboard is currently populated with health data specific to the Milwaukee 7 region, it can be customized to other regions in Wisconsin to determine local readiness.

The Return to Economic Prosperity: *Smart Re-Start*

We recommend that a new plan – *Smart Re-Start* – be implemented, allowing a subset of Wisconsin companies to resume operations. These companies, as well as those meeting the definition of “essential” specified in Safer at Home, would be encouraged to follow a series of best practices (detailed later in this document) to control the spread of COVID-19 in the workplace. Examples include workplace distancing and cleaning procedures to prevent infection, screening of employees for symptoms and exposures associated with COVID-19 infection, and use of personal protective equipment.

Businesses reopening during *Smart Re-Start* would be those that can safely operate without bringing people into close physical proximity of each other. We will be developing a framework and schedule in the coming days and weeks that categorizes companies along a risk continuum (low, medium, high) based on occupational health standards and known characteristics of disease spread. This flexible framework will take into account factors including industry type and geographic



location, and will also rely upon each company's unique operating capabilities and willingness to implement workflow processes that maintain appropriate physical distance between employees, customers and other stakeholders. The framework will be developed in consultation with several organizations, including the U.S. Centers for Disease Control and Prevention (CDC) and public health experts.

“Best Practice” Workplace Procedures

All companies meeting the definition of essential under Safer at Home, as well as those commencing operations under *Smart Re-Start*, should enact a series of procedures to mitigate situations in the workplace which may introduce, expose or spread COVID-19. Attachment B contains a list of best practices assembled from CDC guidance and policies adopted by leading companies. We recommend that state resources be made available to assist companies in developing and implementing these procedures, including a strong push for worker education on hand washing, physical distancing and remaining home when not working. The compendium of best practice procedures is likely to change during follow-on phases of the economic recovery to address operating tendencies of other types of businesses. The procedures may also be modified in response to changing COVID-19 infection patterns across Wisconsin.

We recommend establishing a voluntary certification process for companies that pledge to adopt those best practices relevant to their specific type of operation. Participating companies could then notify their employees, customers and suppliers of the certification, providing confidence that the business is working diligently to protect stakeholders. Wisconsin officials could establish a searchable, public website in which companies taking the pledge are listed. This would be especially useful for consumer-facing companies, giving the public confidence that they are not incurring undue risk by patronizing a business. This confidence is key to the broader goal of returning Wisconsin to economic normalcy.

Attachment A

Key Health and Safety
Indicator Dashboard

The Key Health and Safety Indicator Dashboard, compiled by the Medical College of Wisconsin with input from national and regional public health experts, provides a guide for conditions that would be ideal for a safe re-opening of the economy. Metrics are based on the current environment and could change with additional information. These guiding conditions must be taken into consideration alongside other economic and societal considerations.

INDICATOR	KEY METRIC	THRESHOLD METRICS	4/15 UPDATE
CASES	Sustained Reduction in Cases for 14 Days (start 14-day tracking on 4/13)	Green: Sustained 10% decrease in new cases for 14 days or more Yellow: Sustained 5% decrease in new cases for 14 days or more Red: Steady 10% Increase in new cases for 5 days https://www.wha.org/COVID19Update	
TESTING	Testing availability for all people with COVID-19 symptoms	Green: Available for individuals presenting in hospital or clinic with symptoms AND available for symptomatic individuals working or returning to work Yellow: Available for individuals presenting in hospital or clinic with symptoms AND NOT available for symptomatic individuals working or returning to work Red: NOT available for individuals presenting to hospital or clinic with symptoms AND NOT available for symptomatic individuals working or returning to work	
CARE	Hospitals have ability to treat all patients requiring hospitalization without resorting to crisis standards	Green: Maintain below 65% non-surge hospital capacity: ICU Beds Yellow: At 65% non-surge hospital capacity: ICU Beds Red: Above 70% non-surge hospital capacity: ICU Beds https://www.wha.org/COVID19Update	
PPE	Adequate PPE available to health care personnel	Green: Conventional Level: More than 50% of hospitals have 7 or more days of PPE Yellow: Contingency Level: Less than 50% of hospitals have 7 or more days of PPE Red: Crisis Level: More than 25% of hospitals have 7 or fewer days of PPE https://www.wha.org/COVID19Update	
TRACKING	Ability to count, trace, monitor COVID-19 cases and outbreaks in real-time	State able to conduct rapid, active monitoring of confirmed case and their contacts	

 Metric achieved
  Signs of progress
  Metric achievement not in sight
  Insufficient Data

Attachment B

Workplace Procedures and Protocols

WORKSAFE PRACTICES

Companies are encouraged to enact procedures and protocols that mitigate the introduction, exposure or spread of COVID-19 in the workplace. Each company's written plan should be regularly updated based on evolving guidance from the CDC and state/local public health agencies.

The following is a sampling of best practices for companies to consider in developing their own COVID-19 response plan.

Employee Screening

- Health screen to clear employees before returning to work.
- Employee must immediately report symptoms associated with COVID-19 exposure.
- Employee must report contact with any person who tests positive for COVID-19 (via household contact or proximity within 6 feet of an individual with confirmed or suspected COVID-19 case).
- Employee testing positive for COVID-19 quarantined for 14 days prior to the health screen and return to work.
- Regular body temperature scans performed for on-site employees (contingent on availability of scanning devices) or self-administered and reported by employees.

On-Site Practices

- Require employees to work from home (at least until June 1), except the minimum required for baseline on-site functions.
- Limit in-person meetings of any size (internal or external) and employee convenings (formal or informal) to those deemed essential. Communicate virtually wherever possible.
- Workflow audit that removes instances of employees being within 6 feet of each other wherever possible.
- On-site employees wear face coverings (contingent on availability), except those with respiratory conditions.

- Reduction of on-site work hours to minimum needed to sustain operations.
- Staggered shifts and work hours to minimize on-site human presence at a given time.
- Staggered use of all shared spaces, including bathrooms, breakrooms and lunchrooms, and frequent, safe cleaning of those facilities.
- Staggered facility entry and exit procedures maintaining at least 6 feet physical distancing.
- Ban on non-essential deliveries.
- Ban on non-essential visitors (including suppliers and customers) except those approved by senior management.

Facility Cleaning

- Sanitary processes implemented throughout facility (soap, hand sanitizer, single-use gloves, doors propped open, hands-free capabilities, no shared food).
- Blue tape marking of surfaces that receive frequent human contact; disinfection of these surfaces multiple times daily

Travel

- Policy that minimizes domestic and international travel – business and personal. Business travel requires senior management approval.
- Any employee returning from a Level 2 or 3 CDC travel country must self-quarantine for 14 days and be symptom-free before returning to work.