

Transitioning our return to the workplace in the context of the COVID-19 pandemic

Human Resources Policy Guidance for all duty stations (other than UNHQ-NY)

Version 2 – 6 December 2021¹

¹ This guidance will be reviewed periodically, as necessary, by the Office of Human Resources (OHR) and revised accordingly.

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1. General provisions

- 1.1 This guidance is intended for duty stations where the COVID-19 situation has been improving, allowing for a gradual physical return to the workplace. It is meant to assist with the development of local return-to-work plans and accordingly to be complemented by local instructions tailored to the local situation in each duty station.
- 1.2 The physical return of UN staff and non-staff personnel (hereafter referred as “personnel”) to the workplace should be based on a risk-based, phased, flexible and people-centered approach.
- 1.3 The primary consideration is to ensure all necessary measures are in place to support the safety and health of all UN personnel (and of their families) for carrying out the functions and responsibilities entrusted to them.
- 1.4 Conditions, workplace settings and dynamics of the pandemic vary from duty station to duty station. When developing their local plan for a gradual return of UN personnel to the duty station and/or to the workplace, heads of entity must take into account the WHO and local host country authorities’ guidance and regulations where applicable, local operational needs and consult with other UN common system organizations in the duty station to aim to have a harmonized approach.
- 1.5 Where a local UN Occupational Safety and Health (OSH) Committee is in place, it should lead the development of a reintegration plan. If there is no OSH committee, it is recommended to establish one to advise on this and other workplace health and safety issues (see Annex II for details). This committee, or the head of entity in the absence of such a committee, should also consult with their local supporting medical service if it has OSH capability, the Division of Healthcare Management and Occupational Safety and Health (DHMOHS) in New York, and their local World Health Organization representative.
- 1.6 The local plan should normally include separate phases applicable to the local situation in each duty station and/or the country (see Annex I for an example of a phased plan). The transition from one phase to another will be decided by the head of entity upon recommendations from the OSH Committee, where applicable, based on pre-established criteria including, amongst other things, the evolution of local restrictions. The decision should apply to all Secretariat entities within the same duty station and should also be taken in coordination with all UN common system entities present at the duty station in order to achieve a harmonized approach to the extent possible. Given the evolving nature of the pandemic, the transition from one phase to another may not be linear and the heads of entity may decide to revert to a previous phase if conditions deteriorate.

- 1.7 Transparency and active, continuous communication with personnel regarding planning and the evolving situation is paramount. The transition from one phase to another should be communicated to personnel at large ahead of time, in consultation with staff representatives.
- 1.8 In field duty stations where personnel live and work in the same UN compounds, the distinction between return to the duty station and return to the workplace may not be relevant. The present guidance may be adjusted as applicable, while following the key principles contained herein.
- 1.9 Non-compliance with the obligations mentioned in local instructions received in application of the present guidance will be reviewed following the applicable policies and processes and appropriate measures may be taken under the Staff Regulations and Rules (see Annex VII for more details).**

2. Key principles for the gradual return to the workplace

- 2.1 The gradual return to the workplace should be guided by the following principles:
- Emphasis on vaccination;
 - Increased or unrestricted on-site presence for UN personnel;
 - Safety mitigating measures according to change of risk profiles either amongst personnel or in the local area;
 - Inclusiveness;
 - Flexibility; and
 - Supporting personnel's mental health and well-being.

The above principles are common to all duty stations. Based on local conditions, heads of entity may add other suitable principles to guide the local return to the workplace.

Emphasis on vaccination²

- 2.2 All UN personnel and their household members are strongly encouraged to receive the COVID-19 vaccination.
- 2.3 In general, vaccination status is the most significant driver of COVID-19-related risk and accurate information on the vaccination status of personnel is essential to determine risk and appropriate mitigation strategies – including reintegration and return to the workplace.

² Any COVID-19 vaccine that is recognized by the WHO or under routine approved use by a Member State national health authority is accepted

2.4 In this context, and in accordance with staff rule 1.5 (a) on notification by staff members and obligation to supply information, **heads of entity should, under their delegated authority as per ST/SGB/2019/2, require UN personnel in the entity/duty station to report their vaccination status** – whether personnel are vaccinated or not vaccinated. When such a decision is made:

- a) Staff members are required to report their vaccination status through the confidential EarthMed Portal (<http://medical.un.org>). Fully vaccinated staff with access to EarthMed will receive a confirmatory email that may be used as proof of being fully vaccinated for UN work-related purposes.
- b) Non-staff personnel³ without access to the EarthMed Portal should report their vaccination status through the process designed by their entities in consultation with the local supporting medical service.

Note that copies of vaccination records should not be requested to be submitted to or stored in other record systems that do not meet the data protection requirements of an approved medical record system.

2.5 When mandating personnel to report their vaccination status, heads of entity should communicate the process for doing so and set a deadline by which they should be required to report.

2.6 **At the present time, in duty stations where COVID-19 vaccination is accessible, either through national or UN-led vaccination programmes, personnel who are performing certain tasks and whose functions do not allow sufficient management of exposure to COVID-19 may be required to be vaccinated in order to fulfil their role. The Secretary-General has delegated his authority to mandate COVID-19 vaccination to the following heads of entity:**

- in the Geneva, Nairobi and Vienna duty stations, to the Director-General;
- in the Addis Ababa, Bangkok, Santiago and Beirut duty stations, to the Executive Secretary;
- in duty stations where there is a Resident Coordinator, to the Resident Coordinator;
- in structurally integrated missions in which the Resident Coordinator is a deputy Special Representative of the Secretary-General, to the Special Representative of the Secretary-General;
- in duty stations where there is no Resident Coordinator, to the head of entity with the largest number of staff members within the country.

³ Non-staff personnel include interns, consultants, and individual contractors and UNVs.

2.7 When exercising their delegated authority, heads of entity should follow the below principles:

- a) When considering mandating vaccination for certain functions, **heads of entity should consult with other Secretariat entities and UN common system organizations present at the duty station, as well as staff representatives;**
- b) Decisions to mandate vaccination **should take into consideration any public health requirements from the host country and the availability of vaccines that are fully authorized by national authorities** (as opposed to vaccines that are approved for emergency use only) to the UN personnel at the duty station;
- c) When making such decisions, heads of entity **should consult with the local OSH Committee if applicable, and their supporting medical service and the UN Medical Director;**
- d) Heads of entity **should ensure that only those personnel whose functions create a genuine need to be vaccinated are identified for this requirement.** This is to be based on the necessity of the work, the work environment, the tasks to be performed, and the overall risk of exposure after all other reasonable mitigation measures have been implemented. **The identification of functions with a mandatory vaccination requirement requires an occupational safety and health review to ensure there are no other acceptable mitigation measures available to protect the personnel performing those functions.**

2.8 Personnel concerned may request an “Exemption from COVID-19 vaccination on medical grounds” (including in the case of a recent recovery from COVID-19) following the process outlined in Annex V. **Note that a medical exemption from vaccination does not allow the staff member to be perform the functions of the role for which there is a requirement, as the risk remains unacceptable.**

Increased or unrestricted on-site presence for UN personnel

2.9 In duty stations where occupancy limits are in place (correlated with alternate working arrangements), the gradual return to the workplace would translate into a gradual increase of the occupancy limits over time (e.g. 20, 40, 60 per cent of the maximum occupancy) based on the local situation.

2.10 **When conditions allow, occupancy limits should be lifted, at which point there should be no restrictions on the number of personnel to perform their functions at the workplace.** This removes physical distancing requirements in the workplace as well,

however all personnel should continue to lower overall risk by maintaining an awareness of their proximity to others. **No restriction does not mean however that personnel should be systematically prevented from telecommuting. Rather, heads of entity should ensure mainstreaming of the implementation of the Organization's policy on Flexible Working Arrangements.**

- 2.11 Depending on operational needs, it is recommended that heads of entity gradually increase the on-site presence of personnel through a voluntary approach before mandating personnel to work on-site a certain number of days per week, in consultation with staff representatives.

Safety mitigating measures according to change of risk profiles either amongst personnel or in the local area

- 2.12 Physical distancing and other safety mitigating measures, such as mask wearing, have proven largely effective to support the safety and health of all UN personnel.
- 2.13 Conditions, workplace settings and dynamics of the pandemic vary from duty station to duty station. Heads of entity, with the assistance of the OSH committee or supporting medical service, should monitor the situation and implement corresponding measures. Personnel may be directed to wear a mask when in indoor public areas, such as lobbies, elevators, restrooms, cubicles, and flexible workstations. Requirements for vaccinated and unvaccinated personnel may differ and unvaccinated personnel may need to follow stricter mitigation measures at the workplace.
- 2.14 In this context, heads of entity may also consider allowing access to UN premises to vaccinated individuals only. In such instances, they should follow the principles mentioned in section 2.7 a) to c) above and allow an alternative to vaccination, such as the provision of a negative test, taking into account the measures put in place by national authorities in the host country.

Inclusiveness

- 2.15 In the context of an increased on-site presence and as a result of hybrid teams, managers should continue to promote an inclusive environment, including by ensuring that all personnel have equal access to information needed to carry out their functions and can participate in meetings regardless of whether they are on-site or working remotely. For instance, when having impromptu meetings or discussions in the office, managers and other team members should make sure to include the colleagues who may be working from home. Similarly, informal knowledge and information sharing should include all team members for whom it would be relevant, regardless of whether they are present in the

office or working from home. Teams should continue to leverage online collaboration tools (e.g., Teams, SharePoint) that they have been using over the past year to ensure inclusiveness.

- 2.16 It is not recommended to segregate meetings according to vaccination status, unless required by the local laws and/or COVID-19 related restrictions, and meeting arrangements should not result in the de facto exclusion of colleagues who are not physically present in the meeting room or who are not vaccinated.

Flexibility

- 2.17 Managers should continue to exercise flexibility, understanding and care, for instance when personnel are experiencing issues with limited or disrupted childcare/elderly service or public transportation. What this means will vary depending on the duty station and work requirements. When compatible with exigencies of service managers should, for instance, allow their personnel to choose which day(s) of the week they work onsite, take a favorable view to leave requests or ensure meetings are not booked over the lunch period.

Supporting personnel's mental health and well-being

- 2.18 These are difficult times for all UN personnel, who have faced challenges and uncertainty throughout the pandemic. The impact on mental health and well-being is likely to be felt for some time and needs to be considered. There are likely to be additional stressors as personnel adjust to returning to the office or have worked onsite throughout the pandemic and are used to a different environment. Many personnel continue to face challenges to their working and personal lives and mental health concerns are expected to be prolonged based on research from previous pandemics. All personnel are strongly encouraged to avail of the resources developed by the Staff Counsellors Office in New York and by staff counsellor offices at the duty station, as well as the Mental Health Strategy Team (see Annex III). Managers are also invited to review the guiding principles to support work-life balance (see Annex IV). Mental health concerns and promoting a mentally healthy workplace have been considered throughout these guidelines, such as encouraging flexibility, guidance on work/life balance, giving personnel control where possible (e.g. with what days they work in the office) and encouraging teamwork. If personnel are experiencing a mental health condition that impacts their return, they may request workplace accommodations in accordance with the procedure outlined in Annex V.

3. Working arrangements during the Transition

- 3.1 The selection of the most appropriate working arrangements in the context of a gradual return to the workplace should be guided by the COVID-19 pandemic situation in each duty

station. For detailed guidance on Flexible Working Arrangements and Alternate Working Arrangements, please consult the [Policy guidance on AWA/FWA](#) and accompanying [FAQs](#).

3.2 **Alternate working arrangements at the duty station should remain in place until occupancy limits are completely lifted.**

Working arrangements for duty stations with occupancy limits

Return of UN personnel to their official duty station

3.3 During the implementation of Alternate Working Arrangements (AWA), personnel might have been authorized or encouraged to work remotely outside their official duty station to accommodate personal situations or reduce staff footprint. **AWA outside the duty station should normally not exceed 6 consecutive months. Decisions to extend beyond six months should be based on COVID-19 related exceptional circumstances such as travel restrictions.** Decisions to discontinue or continue AWA outside the duty station are within the authority of the head of entity. Decisions to suspend AWA outside the duty station should apply to all Secretariat entities within the same duty station and should be taken in coordination with all entities concerned. UN agencies, funds and programmes at the duty station should also be consulted with a view to harmonize the arrangements applicable to personnel across the organizations of the UN common system. Entitlements will continue to be paid in relation to the official duty station for the whole duration of AWA, except for danger pay that is not payable for the period that personnel work remotely from outside their official duty station and the accrual of qualifying service toward rest and recuperation that remains governed by the conditions established in section 3 of ST/AI/2018/10 on rest and recuperation.

3.4 UN Personnel working outside of the duty station under AWA should be informed in writing of the expected return date and be provided a reasonable period of advance notice (at least 21 days) before they are expected to return. This will permit sufficient time to make necessary arrangements to physically report to the workplace, taking into consideration travel restrictions and quarantine requirements, as applicable. A phased return of personnel to the duty station may be implemented based on the lifting of travel restrictions affecting certain countries/areas. Advance notice is not required for staff serving in duty stations where scenario 1 b) of the [Human Resources Network's Standing Committee on Field Duty Stations guidance note for R and R duty stations with COVID-19 travel restrictions dated 1 June 2020](#). Human Resources Network's Standing Committee on Field Duty Stations guidance note for R and R duty stations with COVID-19 travel restrictions dated 1 June 2020 is implemented, since rotation is carried out on a pre-established scheduled.

- 3.5 When a decision is made to discontinue AWA outside the duty station as of a specific date, staff members who would like to exceptionally delay their return due to compelling personal circumstances may also request authorization to telecommute outside of the duty station pursuant to a flexible work arrangement established in accordance with ST/SGB/2019/3 (ST/IC/2019/15 provides detailed information on the impact that telecommuting outside of the duty station has on the staff members' benefits and allowances). Upon completion of the maximum period allowed for telecommuting outside of the duty station (normally up to 6 months or exceptionally up to 9 months), staff members are required to return to the duty station. **Failure to return to the duty stations on the agreed upon date may result in their absence being treated as unauthorized.**
- 3.6 In duty stations where the R and R framework was suspended and scenario 1. a) or 1.b) of the Human Resources Network's Standing Committee on Field Duty Stations guidance note for R and R duty stations with COVID-19 travel restrictions dated 1 June 2020 was implemented, personnel required to return as part of the rotation must comply since travel was approved in a phased approach with a view to maintaining operational capacity. Failure to return on the specified date may result in their absence being treated as unauthorized, unless subject to exigencies of service, managers agreed to a delayed return as per the procedure outlined in Annex V. Personnel leaving the duty station as part of the rotation will be on AWA for the duration of their turn outside the duty station unless they avail of leave.

Continuation of AWA at the duty station

- 3.7 Alternate working arrangements at the duty station should remain in effect when the maximum occupancy limits are gradually increased and until they are completely lifted.
- 3.8 Personnel who physically return to the premises one or more days per week during gradual return to the workplace should accordingly continue to work on alternate working arrangements on the days on which their presence on-site is not required.
- 3.9 Rotation and shifts may be introduced to limit the number of UN personnel on-site at any given time and allow physical distancing if required. No additional compensation should apply.
- 3.10 As a first step to a gradual return to work plan, heads of entity may encourage staff members and/or non-staff personnel who have not been performing their functions at the workplace during the COVID-19 pandemic to voluntarily return to the premises one or more days per week. Following this initial period and based the outcome of the voluntary approach, heads of entity may mandate a number of days personnel should work from the workplace per week, taking into consideration the occupancy limits.

- 3.11 In the context of a mandatory approach, personnel who wish to delay their return to the workplace due to medical reasons, should seek a recommendation for a “workplace accommodation” from their supporting medical service following the process outlined in the Annex V.
- 3.12 Personnel who wish to delay their return to the workplace for personal concerns/family obligations should first discuss with their managers. Managers may seek advice from the local HR service on possible ways to facilitate the transition of personnel whose on-site presence is required taking into account their personal concerns and /or family obligations (e.g. rotation of personnel; allowing a reasonable amount of time to make childcare/elderly care arrangements before resuming on-site presence; granting of annual leave or special leave). Where the accommodation is not granted the manager is required to document for the staff member why the request represents an undue burden on the operational needs. Local HR offices may send questions to DOS-HR ADVICE at dos-hr-advice@un.org as Tier 2.
- 3.13 After discussions with personnel and consultations with the relevant services taking into consideration the Organization’s operational needs and exigencies of service, as well as, when feasible, personal circumstances and risks factors for the individual(s) concerned, managers shall communicate the expected return date and other relevant details (e.g. number of days per week, work schedule, etc.) in writing to those whose on-site presence is required/authorized.
- 3.14 Personnel whose on-site presence is required including for support to intergovernmental bodies may be asked to report to work on short notice. Failure to report to the premises on the specified date/time may result in their absence being treated as unauthorized.**

Working arrangements for duty stations without occupancy limits

- 3.15 Alternate working arrangements at the duty station should end only when occupancy limits are completely lifted.
- 3.16 Ending of the alternate working arrangements at the duty station does not mean that personnel should not be allowed to telecommute or that they should be requested to return en masse to the office. After discontinuation of AWA, entities should seek to mainstream the implementation of FWA taking into account the lessons learned from the alternate working arrangements during the pandemic and staff members may submit telecommuting requests under the existing FWA policy ([ST/SGB/2019/3](#)).
- 3.17 During the first few months after the end of AWA at the duty station, as a temporary measure, heads of entity may exceptionally raise the maximum number of telecommuting days from three days to four days week for a limited duration, to enable a gradual return**

to the workplace. Such decision should apply to all UN Secretariat entities within the same duty station and should accordingly be taken in coordination with all entities concerned and be reported to the Business Transformation and Accountability Division in DMSPC (BTAD).

- 3.18 As per section 3.8 of ST/SGB/2019/3, staff members who are facing compelling personal circumstances may request authorization to telecommute five days a week, subject to exigencies of service.
- 3.19 In conjunction with their FWA requests, staff members may also, for medical reasons, request a recommendation for “workplace accommodation” from their supporting medical service following the process outlined in the Annex V. A response as to whether the request is supported or not, and for what period, will be provided to both the staff member and their supervisor. **Such response is advice to the manager who is responsible to make the final decision. In addition, managers must inform their staff in writing if their request to telecommute five days a week is approved or not and the basis for the decision in case of non-approval.**
- 3.20 As per section 3.10 of ST/SGB/2019/3, staff members who are facing compelling personal circumstances may also request authorization to telecommute outside of the duty station ([ST/IC/2019/15](#) provides detailed information on the impact that telecommuting outside of the duty station has on the staff members’ benefits and allowances). Upon completion of the maximum period allowed for telecommuting outside of the duty station (normally up to 6 months or exceptionally up to 9 months), staff members are required to return to the duty station.
- 3.21 The final decision on all requests for FWA, including workplace accommodation on medical grounds, is made by the manager based on exigencies of service.
- 3.22 Local HR offices should monitor and keep records of FWA agreements and be prepared to report on FWA statistics for their respective entity.**
- 3.23 The same working arrangement principles applicable to staff members should be extended to non-staff personnel. Unless otherwise agreed in the terms of their contracts, non-staff personnel are expected to perform services on the premises.
- 3.24 Working arrangements involving non-staff (e.g., remote internships) may continue for the remainder of the engagement period and new non-staff personnel may continue to be onboarded remotely if presence at the duty station is not required as per the terms of their engagement.
- 3.25 **Core working hours may remain lifted** to allow flexibility in work schedules and to avoid possible commute during rush hours, when compatible with exigencies of service.

3.26 Failure by staff members to report to the premises on the specified date/time may result in their absence being treated as unauthorized. Staff members not reporting to work must have a signed FWA agreement in place for the days on which they telecommute or be on leave as approved by their manager or avail of uncertified sick leave (if applicable). Any absence from the workplace that is not approved will be deemed as unauthorized absence in accordance with the UN Staff Regulations and Rules. Unauthorized absence may, depending on the circumstances, trigger:

- a) **the withholding of payment of salaries, benefits and allowances for the day(s) the staff member did not report to duty through placement on special leave without pay; and/or**
- b) **the initiation of an administrative process leading to a determination of abandonment of post in accordance with staff rule 9.1 (ii) and 9.3. Abandonment of post is a separation initiated by the staff member other than by way of resignation, it is not deemed a termination within the meaning of the Staff Regulations and Rules. ST/AI/400 defines what constitutes abandonment of post and sets out the procedure to be followed in cases where a staff member may be deemed to have abandoned his or her post. Temporary or occasional absences or failure to perform some of the duties of the post do not constitute abandonment of post.**

Should such considerations be required, managers should seek guidance from their local HR office, as each case should be handled on its own merits. Local HR offices may send questions to DOS-HR ADVICE at dos-hr-advice@un.org as Tier 2.

3.27 For non-staff personnel, failure to report to premises as required will be treated in line with the conditions of service of their engagement.

4. Behaviors, duties, and obligations of UN personnel

4.1 UN personnel are expected to continue to show respect, care and understanding for each other at all times.

4.2 On return to the workplace, personnel should expect a different work environment due to the implementation of COVID-19 related protective measures.

4.3 For instance, personnel may be directed to wear masks in the building, exercise appropriate physical distancing and the seating arrangement might be reconfigured. At some duty stations, there may be disinfection procedures on entry or limitations on indoor dining. There may be specific instructions on the use of elevators, escalators, door handles, toilets

etc. Further details on how the plan is implemented and helpful practical tips to personnel as they gradually return to the workplace in greater numbers should be provided by the Head of entity and the local Occupational Safety and Health Committee in accordance with each entity's plan for a gradual return to the workplace.

- 4.4 UN personnel must at all times follow the required measures to prevent the spread of the COVID-19 virus and adhere to established sanitary protocols, as well as those concerning presence at, use of, and circulation through, the premises.
- 4.5 In duty stations where occupancy limits have not been lifted, personnel must follow the guidance received from their managers and/or local security to ensure that daily occupancy limits are not exceeded.
- 4.6 Personnel with symptoms, who are unwell or have been in contact with individuals who have shown symptoms must stay home. Staff members may avail of up to 10 days of uncertified sick leave for COVID-19 related absence, including for quarantine. Certified sick leave is not available for quarantine unless the staff is actually unable to perform their functions for reasons of illness or injury.
- 4.7 Any personnel with COVID-19 positive test results are required to report this using the confidential Self-Reporting EarthMed Portal (<http://medical.un.org>) or if that is unavailable contact their supporting medical service. All such approaches will be handled with full confidentiality and privacy.

Obligation to establish a FWA agreement, monthly obligation to record and certify time and attendance

- 4.8 **In duty stations where AWA are in place**, staff members should continue to use the “telecommuting COVID-19” option in Umoja on the days they are not working onsite.
- 4.9 **In duty stations where AWA have been discontinued**, staff members who are not coming to the office 5 days a week are required to have approved FWA agreements to telecommute on the days on which they are not physically reporting to the workplace; and, prior to certifying their monthly attendance statements, are required to record in Umoja their agreed upon telecommuting days, whether at the duty station or outside, by using the “telecommuting” option.
- 4.10 Staff members are not expected to “compensate” for their on-site days if they did not report to the premises due to an official holiday (including floating holidays), approved leave, uncertified sick leave or weather conditions.
- 4.11 **When working on premises**, no attendance recording in Umoja is needed.

ANNEX I

Phases of return to the premises

	Phase 0 -Preparation	Phase 1 - Activities required on-site	Phase 2 - Expansion of UN personnel on-site / at the duty station	Transition from Phase 2 to Next Normal		Next Normal
Timeline	[end date]	[date of transition from the prior phase]	[date of transition from the prior phase]	[date of transition from the prior phase]		[date of transition from the prior phase ⁴]
Daily occupancy limit	Up to XX in the premises and/or in the duty station	Up to XX in the premises or XX% of normal occupancy and/or presence of UN personnel at the duty station	Up to XX% of normal occupancy of the premises and/or presence of UN personnel at the duty station	Up to XX-XX% of normal occupancy of the premises and/or presence of UN personnel at the duty station or daily occupancy limits are lifted.		N/A
What	Essential functions ⁵	Essential functions and those that can only be performed on-site	Essential functions and those completed more effectively / efficiently on-site ⁶	a) Essential functions (b) Functions that can only be performed on-site (c) Functions completed more effectively / efficiently on-site	All other functions	All functions
Who	Personnel required to perform essential on-site functions who are not in high-risk groups	Personnel required to perform essential on-site functions who are not in high-risk groups	Personnel required to physically return to UN premises according to operational needs or	All personnel (100%) performing the functions listed in (a), (b) and (c) above	All other personnel, recommended or mandated	All personnel ⁷

⁴ Example of criteria to move into Phase III: Minimum 42 days since previous transition. No restrictions beyond general best practices on social distancing and hygiene; compliance with applicable local/federal guidelines; very rare new cases in local area; no staff/contractor cases in the workplace in the past 42 days; widespread UN and local health testing in place for asymptomatic cases/contacts; local health service capacity returned to baseline (pre-pandemic levels); consistent staff adherence to distancing & hygiene measures; vendors available; public services available; other peer organizations fully open.

⁵ E.g. security, maintenance, cleaning, medical

⁶ E.g. interpretation, conference services, any work requiring use of certain equipment such as photocopiers, work more efficiently done on larger or dual monitors, those who need to access hard copy documents... etc.

⁷ Staff members may request flexible working arrangements, including telecommuting, under ST/SGB/2019/3. The same working arrangement principles applicable to staff members may be extended to non-staff personnel.

			those who elect to do so within occupancy limits		one day or more a week	
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ANNEX II

Establishing a local Occupational Safety and Health Committee

1. The local OSH committee should be chaired by someone who is not part of the expert panel, for instance Chief of Staff or similar. The members of the Committee should include experts in Security, Engineering, Medical, Human Resources, Facilities Management, Communications, transportation/movement and other persons as seen relevant to the duty station. The OSH Committee should brief and/or report to a wider senior management body to ensure all entities at the duty station can provide inputs to and help propagate the plan. (The Terms of reference for the New York OSH Standing Committee are copied below for information).
2. The local plan should normally include separate phases applicable to the local situation in each duty station and/or the country. Clear guidance on key issues should be produced and annexed to the plan, including on the principles guiding the plan and key features of each phase, social distancing requirements, managing meeting rooms, HR policy, COVID-19 testing, quarantine requirements, etc. FAQs should be made available as well.

Occupational Safety and Health Standing Committee for UNHQ NY

Terms of Reference

1. United Nations (UN) personnel are its greatest asset, and the UN has a duty to undertake all reasonably practicable actions to prevent occupational accidents, illnesses, and exposures, and to enhance personnel health and wellbeing. The UN's ability to deliver its mandate is inextricably linked to the safety and health of its workforce and managing workplace safety and health is part of the UN's duty of care to its personnel and to those affected by its work.
2. The development of a reintegration plan is dependent on the process of consultation and communication within the entities, transparent risk management processes and the full and effective involvement of management and staff.
3. The entity's Occupational Safety and Health (OSH) recommendations and the achievement of its OSH objectives should be implemented through a consultative process between personnel and management within the OSH Committee.
4. Although the OSH Committee is to address all workplace hazards, until completion of the COVID pandemic, its Chair should report key recommendations to the Senior Management team of the entity for decisions.

Mandate

5. The OSH Committee's mandate is to advise the Entity's Senior Management team on all aspects of occupational safety and health at the duty station. This should apply to:
 - a. All personnel of the duty station in United Nations Secretariat entities, Agencies, Funds and Programmes (AFPs) (hereafter UN personnel).
 - b. Visitors, delegates, and other persons in the UN workplace.
6. This mandate includes receiving or identifying safety and health concerns in the workplace, assessing hazards through a standard risk management process, and proposing mitigation measures that are consistent with sound OSH practice, existing UN OSH policy, and each organization's duty of care.
7. Senior management of each entity retains the responsibility for overall workplace safety and health. This includes for authorizing OSH recommendations and approaches and for implementing OSH risk mitigation measures. It may delegate certain tasks to the OSH Committee where appropriate (see tasks).

Objectives

8. The objectives of the OSH Committee are to:
 - a. Provide a mechanism by which safety and health issues affecting the workforce at the duty station and local workplaces can be raised and addressed;
 - b. Provide a resource for advice on safety and health matters for senior management, personnel, and managers at all other levels; and
 - c. Promote the development of a culture of prevention-based safety and health risk management and awareness in UN personnel and workplaces.

Composition

9. The OSH Committee is a multidisciplinary technical and advisory body. Its work is to be conducted in a co-operative, non-adversarial atmosphere. It shall include representatives authorized to contribute on behalf of the following:
 - a. Chair appointed by Senior Management (one year term);
 - b. UN Secretariat and other AFPs present at the duty stations;
 - c. Local UN staff associations;
 - d. UNS HR (technical representative);
 - e. Medical office /occupational health or occupational safety (technical representative).

- f. Facilities and Commercial Activities Services (technical representative).
 - g. Security (SSS) (technical representative).
 - h. Communications (technical representative).
10. The Staff Association representative and each of the technical representatives are required to coordinate with and represent any equivalent body in other entities in at the duty station, or to select a representative from an equivalent body in another organization as its alternate where appropriate.

Tasks

11. The OSH Committee is to:
- a. Review requests from the senior management of any member organization on all aspects of organizational health and safety management and provide them with recommendations on OSH risk and OSH prevention and control measures;
 - b. Receive input from personnel and managers on occupational safety and health concerns and mitigation measures;
 - c. Develop broadcasts, articles, guides, or other related communications materials to assist personnel and managers at all levels to understand and implement safety and health recommendations or approaches adopted by the entity's senior management or the requesting organization;
 - d. Develop measures to promote a culture of safe work practices and environments, improve access to OSH policies, instructions, and training, and facilitate measures to report incidents, accidents, and near-misses.
12. Note that day-to-day management of OSH matters, and the provision of workplace risk assessments, job hazard analyses or other OSH advice is the responsibility of each entity's OSH services. Where appropriate the OSH Committee may request the supporting medical service or other OSH services to provide support for OSH matters that the OSH Committee cannot provide.
13. Regarding the ongoing pandemic, the specific tasks of the OSH Committee are to:
- a. Review the potential exposure to COVID-19 in the workplace (including where practical during commuting) in the context of the COVID-19 outbreak in the local duty station;
 - b. Review the potential exposures for specific jobs and tasks;
 - c. Develop prevention and mitigation measures for these exposures and any associated hazards;

- d. Develop options for a phased reintegration of staff back into the workplace, with triggers for moving between phases;
- e. Contribute to developing concrete options for a safe and phased re-introduction of conferences and meetings including those with delegates and other participants. Propose criteria to be met for opening UN HQ premises to the public;
- f. Contribute to a communications strategy that explains the risk-based approach to the development of the plan; and
- g. Liaise with member state groups on travel of delegates, as applicable.

Meetings

- 14. The OSH Committee is to meet at least quarterly and quorum requires attendance by each represented organization present at the duty station (UN Secretariat and any AFPs, as applicable).

Confidentiality

- 15. Members of the OSH Committees have a strict requirement to maintain confidentiality where personnel raise safety and health concerns that involve individuals. Where health impacts are relevant, individual health status of personnel are to be anonymized prior to being presented to the OSH Committee.

ANNEX III

Actions to support Mental Health of UN personnel

1. Actions that will support the mental health and well-being of UN Personnel during the transition to the Next Normal:

- a) Ensuring regular and transparent communication to personnel;
- b) Flexible policies that allow for the differing needs of personnel;
- c) Learning resources on managing change;
- d) Educating managers on change, how to enable flexibility and support personnel with compassion;
- e) Tools to assist teams to re-integrate into a face-to-face working environment;
- f) Increased access to Counselling services given the anticipated increased need;
- g) Suicide prevention resources for those who are struggling; and
- h) Expansion of Psychological First Aid Training, and/or Peer Helper programmes.

2. Managers and personnel are strongly encouraged to avail of the resources developed by the Staff Counsellors Office in New York Wellbeing tips for UN personnel and the Mental Health Strategy Team: 'Mental Health Matters, A Healthy Workforce for a better world (un.org)' and 'A Healthy Workforce | iSeek (un.org)'.

3. The Staff Counsellors Office has also workshops for managers on how to support teams on returning to the office and can be requested by sending the form to SCOHQ@UN.org. In addition, there are workshops on Psychosocial Aspects of Change in the workplace, details of available workshops are displayed on iSeek.

ANNEX IV

Guiding principles to support work-life balance

1. In the context of COVID-19 and public health measures implemented by host countries, many UN personnel across the world have worked remotely for a prolonged period. Many colleagues have been balancing work with increased private responsibilities like caring for children or the elderly at home. Others have faced additional stress due to concerns for their health, particularly those who have been requested to perform onsite and/or public facing functions, and their loved ones, from whom they may have been separated for months. In light of these conditions, it is essential that all managers continue to exercise maximum flexibility to support their colleagues' well-being, mental health, and work-life balance.
2. The core working hours requirement may be lifted to provide maximum flexibility for work schedules and to accommodate individual needs. To further support personnel in balancing their personal and professional lives, managers are invited to consider the following guiding principles:
 - a) Avoid scheduling meetings outside of customary office hours;
 - b) Avoid scheduling meetings during customary lunch hours;
 - c) Avoid scheduling meetings on the afternoon of the last day of the working week when exigencies of service allow; and
 - d) Avoid sending work-related communications requiring immediate action (unless extremely urgent) during the weekends.
3. Favorably consider requests by team members to avail of options in the Organization's policy on flexible working arrangements, including compressed work schedule (see sections 3.2 and 3.3 of ST/SGB/2019/3). This option, which may be combined with telecommuting, allows taking a half-day off every week or a full day off every other week, provided the overall weekly hours are completed on the other working days.
4. These guiding principles are meant to give UN personnel the opportunity to disconnect and take care of themselves and their loved ones.
5. Notwithstanding the above, managers and their team members may jointly agree to schedule meetings as suits them best, for example, to accommodate constraints at home, commuting times, or colleagues in different time zones.

ANNEX V

Workplace accommodation

1. If a staff member is concerned about returning to the office due to their or a family/ household member having a preexisting condition and requests full-time telecommuting, they may seek a medically based workplace accommodation. This requires the staff member to:

- a) Notify their manager of the request as, regardless of the medical recommendation, it still needs to be approved by the manager;
- b) Send an email to their supporting medical service with the heading 'Request for workplace accommodation', (Name), (Entity);
- c) In the email state briefly:
 - a. The accommodation requested (the dates they are requesting full-time telecommuting for or an exemption from a vaccination requirement)
 - b. Their or their dependent's medical condition (and attach supporting medical documentation)
 - c. The reason this *requires* full-time telecommuting, and
 - d. The email address of their supervisor.

A response as to whether the request is supported or not, and for what period, will be provided to both the staff member and their supervisor. **Such response is advice to the manager who is empowered to make the final decision.**

1. 2. If an individual has been required to receive a COVID-19 vaccination due to the functions they perform and wants to seek an exemption from vaccination on medical grounds, they should follow the same process. **Where a medical exemption is granted from vaccination, the staff member may still not carry out the functions for which vaccination was required.**

ANNEX VI

Responding to a suspected or proven COVID-19 case amongst personnel

All guidance below regarding the nature and timings of tests and quarantine are generic only. They should be used only when local guidance is not available.

The process of contact tracing and determining the workplace response to a potential workplace exposure is beyond the scope of this guidance, and requires the additional advice of a medical service or clinician.

For personnel who develop symptoms

1. Personnel that become symptomatic with COVID-like illness whilst at work are to leave UN premises immediately, seek testing and medical attention, and inform their supporting medical service. They are not to remain in or come to the workplace.
2. All personnel that are symptomatic at home should seek medical care and get tested immediately. If the medical clinic they need to attend for testing or treatment is a UN clinic on UN premises, they are to contact the clinic by telephone or email first to seek advice on their next steps. They should stay at home until the test result is available, either telecommuting or using uncertified sick leave if available. If the test result is negative by antigen/PCR test, they may return to work. If the test result is positive, follow the advice below regarding a positive test. In the unlikely event a test is genuinely not available, they are to isolate for a minimum of 10 days and seek advice from their supporting medical service immediately.

For personnel who test positive for COVID-19

3. All personnel who test positive are to follow local isolation requirements. In the absence of clear guidance, they are to remain in isolation for a minimum of 10 days after their first positive test result. They are required to report their positive test, with a copy of the test result, to their supporting medical service. This can be done by the EarthMed portal (medical.un.org).
4. If they have been in the workplace 10 days prior to their positive test they should contact their supporting medical service. They should also provide an appropriate workplace contact who can manage the workplace aspects of exposure assessment/notification.

5. Supporting medical services shall treat test results as confidential information and will not act on hearsay or second/third hand information about an alleged case in the workplace. Supporting medical services will determine the appropriate next steps based on the circumstances. In general this will be:
 - a. To identify where the case was and when;
 - b. To advise managers of those floors/areas that there may have been an exposure at that location on a specific day or time; and
 - c. To provide the managers with further advice for personnel according to the circumstances.

6. The individual who is the original case may share the details and test results with colleagues with whom they had been working with or who may have been exposed. **However, the widespread release of medical information is discouraged.**

Advice for contacts of a confirmed case

To be a “close contact” requires more than 15 minutes exposure over a 24-hour period at less than 6 feet/2 meters, whether wearing a mask or not. The most important step is to determine if this requirement is met. Personnel are often the best judge of whether they are a close contact.

1. Vaccinated close contact:
 - a. Can stay at work (unless symptomatic).
 - b. Are to get a PCR test 3-5 days after the exposure.
 - c. If the test is negative, they may continue normal activity.
 - d. If the test is positive, they should follow the guidance above for an ill staff member or suspected or proven COVID-19 case.

2. Unvaccinated close contact:
 - a. Must enter quarantine.
 - b. Are to get a PCR test 3-5 days after exposure.
 - c. If the test is negative, continue to quarantine for a total of 10 days and self-monitor for symptoms.
 - d. If the test is positive, they should follow the guidance above for an ill staff member or suspected or proven COVID-19 case.



Although there is no requirement to test or quarantine unless the close contact definition is met, those who are brief contacts of a case can be recommended to get tested 3-5 days after exposure and may continue to work during this time.

ANNEX VII

Addressing non-compliance with mandatory reporting and mandatory vaccination

1. **When heads of entity have mandated personnel to report their vaccination status**, this obligation should be communicated in writing with a set deadline, taking into consideration official holidays and popular break periods.

Once the deadline for reporting has passed:

- a. entity-specific lists of personnel who did not report their status by the set deadline should be generated using the data available in EarthMed (for staff members) and local systems (for non-staff personnel); and
- b. Upon receipt of such reports, the local HR offices should follow-up with the individuals concerned and remind them of this new requirement.

In line with staff rule 10.2 (b), such non-compliance may result in the issuance of a written or oral reprimand).

For non-staff personnel, the applicable measure will be taken as per the terms of their employment.

Should such considerations be required, managers should seek guidance from their local HR office, as each case should be handled on its own merits. Local HR offices may send questions to DOS-HR ADVICE at dos-hr-advice@un.org as Tier 2.

In the meantime, such individuals should be considered as unvaccinated which may result in the application of the measures mentioned in paragraph 2 below for staff members for whom vaccination is mandatory.

2. **When heads of entity have mandated personnel to get vaccinated due to the functions they perform**, this obligation should be communicated individually in writing with a set deadline, taking into consideration official holidays, popular break periods and ease of access to vaccines.

When a person who has been mandated to be vaccinated does not get vaccinated:

- a. as a first step, the manager should engage with the person to understand the reasons why;
- b. the manager should advise such person that, if they have concerns about not being vaccinated because of any medical condition, they must seek confirmation from the supporting medical service for an exemption on medical grounds. In such case, the supporting medical service should further advise the manager on options for completing assigned tasks safely.;
- c. Where a medical exemption is granted from vaccination, the staff member may still not carry out their functions. If there is no medical exemption warranted, the manager should clarify to such person the aim of mandatory vaccination for individuals performing functions for which vaccination has been mandated: the aim is to protect all personnel where mitigation actions such as distancing and masking are not sufficient to manage the risk of exposure at the workplace;
- d. If the person still decides to not be vaccinated, the manager will have to decide whether there is any potential flexibility that can be exercised, such as reassigning the person to other functions;
- e. Otherwise, such person should be informed that they may not carry out their functions on premises until such time as they are vaccinated. In such situations, staff members may request leave, including annual leave or special leave without pay, which may be approved depending on exigencies of service and conditions of employment.

If such individual does not receive a medical exemption or if the leave request is not approved, the entity may also decide to place a staff member on special leave without pay in accordance with staff rule 5.3 (f).

For non-staff personnel, the applicable measure will be taken as per the terms of their employment.

Should such considerations be required, managers should seek guidance from their local HR office, as each case should be handled on its own merits. Should local HR offices need advice, they may contact DOS-HR-Advice (dos-hr-advice@un.org) as Tier 2.