Guidelines for preparing post-confinement roadmaps for public bodies

Drafting plans for the return to on-site work and the reopening of ministries and agencies to users after Coronavirus (COVID-19) confinement

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Introduction

Following requests from a number of beneficiaries, SIGMA has prepared these guidelines to help prepare the complex process of reopening public bodies after lockdown.

SIGMA advises its beneficiaries to instruct all ministries and public bodies to prepare a tailor-made “back to work roadmap” for the period following the confinement. These roadmaps should guide the managers of each public body to handle the weeks before and immediately after the return of civil servants to on-site work.

SIGMA has prepared these guidelines to provide recommendations to ministries and other public bodies to indicate topics to focus on when drafting roadmaps for returning to on-site work.

SIGMA recommends that its beneficiaries should develop a co-ordinated process, with decentralised, tailor-made roadmaps prepared by each public body under the guidance of the relevant authorities, such as the prime ministry, the civil service co-ordination body or the ministry of health.

Purpose of these guidelines

- These guidelines are principally intended for ministries and public bodies whose premises have been closed to regular staff and users during the confinement period, while their services have been suspended or only provided online. Organisations directly involved in managing coronavirus (COVID-19), such as health care centres, police or emergency services, will require dedicated guidelines according to the evolution of the pandemics and the government measures taken.

- These guidelines are intended to provide support to managerial officials and human resource (HR) units when preparing the gradual process of returning to work premises. This is an operational document, which is not intended for ministers, or other political decision makers. However, depending on the situation and on the potential risks, certain decisions described in these guidelines could require approval at political level.

- These guidelines can be used to inform the drafting of national guidelines or can be directly shared with ministries and public bodies, supplemented by country-specific guidance.

- These guidelines do not substitute the regulations on occupational risks applicable to your public body.
Structure of the guidelines

The guidelines are structured in two parts:

I. Preparing a roadmap for returning to on-site work for ministries or public bodies
   1. Initial considerations
   2. Potential sequence of actions for preparing the roadmap
   3. Who should directly participate in drafting the roadmap?
   4. Involve stakeholders
   5. Consultations on the initial draft roadmap

II. Contents of the roadmap for returning to on-site work
   Section 1: Assessment of the situation
   Section 2: Preparing your workplace to avoid spreading of Coronavirus (COVID-19)
   Section 3: The “back to work” process
   Section 4: Communication with your staff
   Section 5: Reopening on-site services to users
   Section 6: Human resource issues
   Section 7: Other issues

Annex on service delivery (separate document)

The SIGMA Programme
I. Preparing a roadmap for returning to on-site work for ministries or public bodies

1. Initial considerations
   a) At the end of the confinement, all ministries and public bodies will be confronted by an unusual situation, with gradual reopening of premises and services in order to prepare a full recovery of services over the mid-term.
   b) The recommendations listed in this document are basic and generic; each organisation is unique, so it will be necessary to create a specific, tailor-made plan that each public body and its operational needs. If, in the past, a “business continuity plan” was prepared for any other contingency, it can be taken into account.
   c) Certain sections of the roadmap will be highly dependent on decisions taken at national/regional level. Other sections will be dependent on options taken autonomously by the ministry/public body.
   d) Most ministries and public bodies will need a general roadmap as well as a specific one for each region/territory and for each of their premises/buildings.
   e) In this uncertain and volatile environment, different scenarios should be included, at least in the draft versions of the roadmap, therefore it should be possible to amend the roadmap quickly if required.
   f) Draft roadmaps should be discussed with relevant trade unions and other stakeholders.
   g) According to the legal framework and traditions in each country or region, the roadmap or some of its parts could require a formal approval by the minister and/or other relevant authority.

2. Potential sequence of actions for preparing the roadmap
   a) Initial indication or instruction from the minister/chief executive to the top managerial official and the management team.
   b) A team is appointed, as well as a team leader, to be in charge of drafting the roadmap. The team should have a clear mandate and be adequately empowered to deliver.
   c) Adequate co-ordination with the relevant authorities and horizontal bodies is carried out: the Prime Minister, civil service authority, ministry of health, police (and army, if relevant), ministry of finance, etc.
   d) Cost estimates are prepared during the preparation of the roadmap and discussions held on the feasibility of additional expenditures with superiors, the budget unit and with the ministry of finance.
   e) The draft roadmap is checked to ensure that it complies and is coherent with the indications of the government body/bodies in charge of the COVID-19 emergency and once the period of lockdown has ended.
   f) The concerns and expectations of staff are considered:
      - unions and staff representatives are engaged
      - online surveys or other tools are used to get to know the opinions of staff.
   g) The process is supported through online meetings with supervisors and staff.
   h) A draft is circulated among the management team and comments are gathered.
3. **Who should directly participate in drafting the roadmap?**

The officials to be directly involved in the preparation of the roadmap should be identified by each organisation, taking into account the internal distribution of responsibilities. However, a tentative list would include the following:

1) The top managerial official.
2) The HR unit (including the officer in charge of occupational health and safety, and the officer in charge of organisational development, if there is one).
3) The unit in charge of security, access and maintenance of the buildings.
4) The unit in charge of IT.
5) The unit in charge of communication.
6) The health official if there is one.

The units in charge of the main services provided should take care of the plans for each specific service.

4. **Involve stakeholders**

During the drafting of your roadmap, stakeholders will need to be identified, consulted and involved in the “back to work” process.

Start by listing the stakeholders, under different categories:

- Suppliers
- Subcontractors
- External consultants
- Internal users (citizens, professionals...)
- Civil society (NGOs, business chambers, trade unions...).

Prepare a list of topics to be discussed with each of them, concerning:

- Their situation: are they operational? Can they provide the usual supplies/services?
- The reopening process
- Access to premises
- Delivery of goods and services.

5. **Consultations on the initial draft roadmap**

The draft roadmap should be discussed with the relevant health authorities. Ideally, public bodies should have a designated public health officer as their regular contact during the process.

According to the usual practices of the country and organisation, the preparation of the roadmap should involve consultations with the relevant trade unions and/or with representatives of staff, to ensure their concerns and suggestions are taken into account. It may be agreed with trade unions that they should collect concerns and suggestions from staff to be discussed at these meetings.
The structure below, which is composed of seven sections, is proposed as a generic structure for the roadmap:

- **Section 1: Assessment of the situation**
- **Section 2: Preparing your workplace to avoid spreading Coronavirus (COVID-19)**
- **Section 3: The “back to work” process**
- **Section 4: Communication with your staff**
- **Section 5: Reopening on-site services to users**
- **Section 6: Human resource issues**
- **Section 7: Other issues**
Section 1: Assessment of the situation

1.1. Initial assessment of the situation in the ministry/public body and its services

a) Try to anticipate the situation at the end of confinement: concerning the public body and the staff, the sector/s of activity, the backlog and latent demand regarding the services provided, the new needs of users.

b) Remember to look at all relevant aspects: assess the situation of staff, premises, systems, site, IT, other equipment, users, supplies and suppliers, other stakeholders, transportation, utilities, budget, finances/accounting, etc.

c) Can you identify specific risks and critical areas?

d) What additional problems have arisen during the confinement?

e) Consider what is critical to the core mission: determine functions that are most critical and that should be recovered in the short-term.

f) Consider segmentation of users: those especially vulnerable to coronavirus (COVID-19), users who lack access to e-services, users more affected by the economic consequences of the confinement.

1.2. New policies, new services, new priorities in the framework of the Coronavirus (COVID-19) crisis?

The roadmap is an operational plan to go back to work, reopen premises and continue “business as usual”. However, it is important to consider a number of questions regarding prioritisation and adapting to new situations, such as:

a) Which services are priority services [taking into account backlogs, increased needs/demand and available staff]?

b) Which services/activities may be suspended or postponed?

c) Is it possible to re-programme postponed activities?

d) What new programmes, services or activities are now required in your ministry/public body in response to coronavirus (COVID-19)?

e) Is it possible to continue with ongoing projects?

f) Is it necessary to revise strategies and action plans?
Section 2: Preparing your workplace against Coronavirus (COVID-19) spreading

The information listed here is a potential sample of actions to be taken, but should not substitute the indications of your health authorities. Be aware that these criteria and indications depend on a number of factors and are modified and updated frequently. Actions should be in line with the regulations or criteria set by the relevant government body in charge of operations for ending coronavirus (COVID-19) confinement in your country.

a) Appoint a workplace co-ordinator responsible for coronavirus (COVID-19) issues related to each specific workplace or building.

b) The workplace coronavirus (COVID-19) co-ordinator should ensure day-to-day co-ordination with the public health authorities.

c) Initial assessment of coronavirus (COVID-19)-related and lockdown consequences.

d) Provide initial disinfection.

e) Plan for day-to-day disinfection.

f) Guarantee adequate ventilation.

g) Ensure coronavirus (COVID-19)-secure workspaces, i.e. increasing physical space between employees at the worksite or installing partitions or barriers.

h) Guarantee hydroalcoholic gel, soap, disposable towels, etc., for staff and visitors.

i) Decide if staff and/or visitors will be required to use masks, gloves and other protective equipment (and ensure availability).

j) Decide if visitors’ temperature will be screened.

k) Define separate entry, circulation and exit flows, for staff and for visitors.

l) Prepare, print and display posters with indications for staff and visitors.

m) Prepare for specific protocol for new coronavirus (COVID-19) cases (identification and action), in line with the health authorities criteria; plan how to keep track of contacts, to be able to warn them in case of need.

n) Ensure signage concerning social-distancing if provided for queuing spaces.

o) Calculate maximum allowed capacity for each room; provide adequate signage for employees and visitors.

p) Arrange meeting spaces and meeting protocol.

For updated information on recommended measures to prevent infection in the workplace, you can refer to the EU-OSHA (European Union information agency for occupational safety and health) website and its latest publication: COVID-19: Back to the workplace – Adapting workplaces and protecting workers.¹

Section 3: The “back to work” process

The “back to work” should be organised in phases, and will depend on the health situation in the country, region or city, on the evolution of the remaining risks, on the gradual lifting of limitations and on the clearance of staff on health grounds.

In agreement with the health authorities, staff, including external staff, will potentially require some kind of clearance before being authorised to return to on-site work. According to the situation and to the policies in place in the country, this clearance may or may not require systematic coronavirus (COVID-19) tests for all or for selected staff.

This section provides a generic, “back to on-site work” structure in four phases, based on the segmentation of staff, taking into account:

- Their roles (more or less critical)
- Their health
- Their family responsibilities.

Take into account that in all phases, teleworking will be used for staff to a greater or lesser degree.

Phase 1

Only key management and key staff work on-site

a) For the initial few days, key staff work on-site to prepare the return of all staff, ensuring adequate conditions and clarifying short-term priorities. These key staff will include operational managers that are needed to prepare practical aspects of the back to work process and other required employees (such as maintenance and cleaning teams, security staff, IT technicians, work safety officers).

b) The premises will remain closed to users and other employees (if they were closed during the confinement period).

c) During this period:
   - ensure decisions about urgent matters related to the crisis
   - hold detailed discussions with heads of units (working on-site or remotely)
   - hold additional consultations with unions and staff
   - consult relevant experts
   - liaise with stakeholders.

d) The needs of the majority of staff that will remain working from home should also be taken into account.

e) Give clear instructions to your staff and provide any necessary training:
   - Reasons why it is necessary for some staff to return to work premises
   - Information, clear instructions and appropriate training on measures
   - Provide psychosocial support (see section 6, HR issues).
**Key requirements to start Phase 1**

- The Government authorises mobility and non-essential economic activity.
- Premises have been adequately disinfected.
- Social distancing and other preventive measures are ensured.
- Only staff cleared on health grounds may return to work premises.

**Phase 2**

**Only a limited number of critical staff without family responsibilities or special health risks return to on-site work**

This second phase should be longer, gradually increasing the number of on-site staff, starting with the critical jobs requiring physical presence in the workplace. Initially, the other employees should remain working from home. After successfully having the minimum required staff at work premises for a few days, voluntary on-site working for some additional staff can be considered.

The possibility of opening on-site services to users in these conditions can also be considered (see Section 5, Reopening on-site services to users).

**a)** Define the critical jobs that will work on site:

- Set maximum numbers of on-site staff for each unit and room, depending on the limitations of the workspace, to comply with the social distancing required. You can also set a maximum number or percentage of staff allowed to be in the premises simultaneously.
- Managers are responsible for determining who is required for on-site work.
- Organising different shifts for on-site work may be an option to avoid too many staff in the building at the same time; staff can combine some hours on-site and some telework or work on site only few days a week.
  - Staggered entry and exit of staff can also help to reduce risk.

**b)** Clarify who is considered as having “family responsibilities” and who is considered as “vulnerable staff”:

- Staff with chronic illnesses (diabetes, heart, lung or kidney disease and people with compromised immune systems); pregnant women, elderly staff (over 60 years old?); ensure these definitions are consistent and have been agreed with the relevant experts and public bodies.

**c)** Extended teleworking or other solutions will still be required for numerous staff:

- Make sure you have reasonable agreements clarifying expectations, tasks, and working time.
- Provide adequate communication procedures and tools.
- Emphasise the importance of taking breaks and avoid employees working overtime.
- Encourage your teleworking staff to take care of workstation ergonomics, as much as possible.
- Support your employees regarding the well-being aspects of working from home, including psychosocial aspects.
Key requirements to start Phase 2

- Social distancing and other preventive measures are ensured.
- All on-site staff should have been cleared on health grounds.
- Ideally, no-one should be obliged to work on-site if they do not feel secure.
- Ensure your staff know how to contact reference persons regarding the coronavirus (COVID-19), including if possible psychosocial advice.

Phase 3

Most staff are back to on-site work:

a) On-site services are open to users.
b) Only staff who are ill, quarantined or under special health risk remain at home.
c) Some of your staff may still be unavailable, if they have been redeployed to other priority services.
d) Loosen preventive measures in the workplace that are still enforced.

Key requirements for Phase 3

- The Government has lifted most restrictions to economic and social activity
- Opening of schools and kindergarten.
- Public transportation is functioning.
- Staff have been cleared on health grounds.

Phase 4

All staff are back on-site

- Some less-restrictive preventive measures in the workplace are still enforced.

Key requirements for phase 4

- The pandemic is considered under control.
- All or most coronavirus (COVID-19)-related measures taken in the country cease effect.
- All staff have been cleared on health grounds.

"First day" back to work (all phases)

Provide clear indications and tips for supervisors and staff, regarding “first day” back in each of the phases.

Tips should include the following topics:

- Organising teams with absent staff
- Prevention measures and logistical aspects
- Addressing staff questions, reactions and emotions
- Management of workloads.
Section 4: Communication with your staff

4.1. Set up a specific corporate communication plan and communicate regularly with your staff

a) Designate a communication co-ordinator and one or more spoke-persons

b) Prepare a communications plan (content of each communication, media, ...):
   - explain the phased “Back to work” process in advance: send a personalised e-mail to all staff with specific and detailed instructions for his/her return to on-site work, accompanied by your work plan for returning to on-site work (a simplified version);
   - key and motivational messages should be sent by the highest official;
   - general messages should be managed by the HR unit;
   - line managers should be instructed on how to communicate regularly with all their staff and ensure that people working remotely are not left aside;
   - ensure trade unions and staff representatives are consulted and informed before any communication to staff;
   - provide FAQs.

4.2. Ensure two-way communication

a) Offer participation channels and listen to concerns and feedback from your staff (i.e. WhatsApp/Viber and an email address).

b) Offer a hotline to answer questions (telephone, WhatsApp/Viber, email)

c) Offer and be prepared to “negotiate” with some of your staff about dates and conditions of the return.

d) Consider using an anonymous, online staff survey to have a detailed view of the perceptions and concerns of your staff. Free systems such as SurveyMonkey (https://www.surveymonkey.com/) are available.

e) Look for ideas: ask your staff to participate, sharing ideas and making proposals about the new working context.

4.3. Give clear Coronavirus (COVID-19)-prevention instructions to your staff (adapted to the four phases)

a) When leaving home.

b) Commuting to work: ensure staff awareness of social-distancing measures.

c) Procedures on arrival at work.

d) Workplace instructions: elevators, circulation in the building, use of facilities (ex. cafeteria), organisation of breaks and lunch, etc.

e) Inform about of hygiene measures: hand washing, workplace and equipment cleaning, protective equipment, etc.

f) Inform staff of social-distancing measures and of how they will be ensured in your premises.

g) Consider providing online training on those issues.
4.4. Create easily accessible crisis communication channels

a) Keep updated lists of phone numbers and e-mail addresses to communicate 24/24 with your staff in case of crisis.

b) Provide a hotline (phone, WhatsApp/Viber, e-mail) for staff enquiries.
5.1 Key elements to consider when planning the progressive reopening of services:

a) No on-site service can be reopened until you can secure face-to-face interactions (i.e. increase the physical distance between users and employees, install physical barriers, etc.).

b) Will all or some services be offered? Prioritising services will most probably be necessary.

c) Estimate backlogs and potential user demand in the first weeks and months after reopening.

d) Look for solutions to reduce “demand” during the first weeks: i.e. extending the validity of documents and licences, extending the deadlines for applications, etc.

e) During these months, you will probably need to cope with increased and unexpected front-line staff absenteeism due to coronavirus (COVID-19) and lockdown. So, consider options to manage the service with fewer staff than usual.

f) Take particular care of your front-line employees; provide specific coronavirus (COVID-19)-related training, ensure Personal Protective Equipment and, especially, listen to them!

g) Think about adequate segmentation of users.

h) Consider providing tailor-made solutions for important and urgent procedures related to ill or quarantined citizens.

i) Reinforce information to users and citizens:
   - Updating websites and apps
   - Providing FAQs
   - Creating a hotline (WhatsApp, telephone, email) to answer questions or resolve issues
   - Clear and visible notices with information for visitors at entrances.

j) Avoid crowds and long waiting times:
   - Offering (new?) online services?
   - Providing additional phone services?
   - Simplifying procedures?
   - Extending opening times/days?
   - Reinforcing or establishing scheduled appointment systems?

k) Reduce formalities and try to be flexible as much as possible; understand that users could have faced difficulties fulfilling the normal formalities.

l) Prepare protocols to react if incidents happen (such as long queues, unrest, individuals with symptoms, IT breakdowns, supply chain disruptions, etc.); set mechanisms to identify problems with the delivery of services in real time.

m) Estimate if additional staff could be required (i.e. security and welcoming staff); consider hiring temporary staff or engaging volunteers.

n) Promote non-cash payments to reduce the risk of spreading coronavirus (COVID-19).

5.2 During Phase 1 (only key management and key staff work on-site): initial assessment of the situation for each unit/service and drafting service delivery plans

a) Appoint a team to develop a service delivery plan for each unit, core function or service.
b) Each plan should identify the potential risks when opening to the public:
   - Assess supply elements (staff absenteeism, IT needs, potential problems with suppliers, reduced budget, problems with administrative requirements to provide services).
   - Assess demand (increased demand after reopening; users with specific needs – elderly, families –, users in financial need, etc.).

c) The plans should try to minimise risks while providing reasonable quality of service. Consider measures such as:
   - extending administrative deadlines and validity of licences;
   - directing users to use electronic channels and supporting users who are not accustomed to using the related technology;
   - changing opening hours;⁴
   - reserving special times or premises for vulnerable citizens;
   - prioritising telephone/on-line communication with users;
   - redesigning the customer journey;
   - being more flexible with administrative requirements;
   - using sworn declarations, provisional approvals or similar mechanisms to provide citizens with the possibility to obtain certificates from third parties.

d) Discuss the service delivery plans with the relevant employees and stakeholders, gathering their views and making them part of the decision-making process.

e) Develop an overall view of the public body, aggregating all service delivery plans:
   - Determine the most critical functions or groups of users where services should be resumed in the short-term.
   - Revise service delivery plans, potentially including new programmes required by the coronavirus (COVID-19) response.
   - Revise systems/criteria for scheduling appointments, considering segmentation and prioritisation of users (e.g. users closer to the expiration deadline of a certificate/document, users especially vulnerable to coronavirus (COVID-19), users who lack access to e-services, users more affected by the economic consequences of the confinement).
   - Consider prioritising services and plan mechanisms to temporarily reallocate resources (staff, equipment, offices) from one service/unit to another.

f) Communicate the new service delivery situation, including new requirements, limitations, opening times, etc. to your users and stakeholders, to ensure they know what to expect.

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² Extending opening hours might help to achieve physical distancing. It can also help to secure safe spaces for especially vulnerable users (such as specific hours to serve the elderly). However, in order to extend opening hours successfully, a sufficient number of personnel should be available. If staff work in two shifts, the service during one shift might collapse if critical personnel are absent. Be aware that extending opening hours with the same staff does not automatically result in increased service delivery. Productivity issues and interrelation between staff might be considered when deciding to extend opening hours or not. Reducing opening hours might also be useful if there is a shortage of staff, so all available staff will be present in one shift, ensuring that the service can be provided smoothly during the reduced opening hours.
5.3. **During Phase 2 (only critical staff without family responsibilities or special health risks return to on-site work): provide some critical services as pilot tests (ideally, only to users with a scheduled appointment)**

a) Train staff in social distancing measures, using personal protective equipment (PPE) and self-protection mechanisms, coping with new risks of interaction with users (e.g. individuals with symptoms, stressed users, users who do not want to comply with new measures).

b) Start providing critical services to the public and use them as pilot projects. These pilot projects will serve the purpose of testing the service delivery and training the staff for the new conditions. Rotate staff, so they learn how to correctly use PPE and adapt to protection measures in a more controlled environment.

c) Consider providing services uniquely for users with a scheduled appointment. This allows you to plan how many people you will need to provide services to each day, and users know in advance that services will be provided to them. During this phase, walk-in should be limited as much as possible, in order to avoid overcrowding of premises and service collapse. If you do not currently have a phone/internet appointment scheduling system in place:
   - Consider using a queue management system; various solutions are available on the market³.
   - Try to organise scheduling outside, at the entrances of buildings, handing appointment tickets to users as soon as they get to the premises.

d) If there is no other option, try to ensure that walk-in users queue outside premises, respecting social distancing.

e) Learn by doing. Revise your service delivery action plans after listening to user feedback and evaluating the initial period.

5.4. **During Phase 3 (most staff are back to on-site work): progressively provide all services to the public**

- React quickly to supply shortages, bottlenecks and other incidents: absenteeism, IT breakdowns, large queues of users, users with coronavirus (COVID-19) symptoms.

- Empower middle managers to take service-delivery decisions: the back to work process will create unexpected situations that will require quick decisions, with no time to consult the Minister.

- Reinforce information mechanisms. Update websites with new measures and relevant information that may not usually be provided (e.g. off-peak hours when the premises are less crowded). Post information posters in your premises. Create or reinforce existing information hotlines using telephone or social-media. If hotlines and information desks are overcrowded and cannot respond to increased demand, reinforce them with more staff immediately. Information is key to increasing citizen satisfaction when many changes are taking place.

- Be flexible with administrative requirements, as citizens might not be able to comply with some as easily as in normal times (e.g. getting a medical certificate to renew a driving licence might take longer than usual).

- Co-ordinate with the relevant public bodies in case external administrative bottlenecks are creating difficulties for your users.

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• Communicate continuously with stakeholders about the situation of your services.
• Check if the approved extension of deadlines/validity of licences are sufficient and make proposals to the relevant authorities if they need to be extended further due to the service delivery situation.
• Learn by doing. Collect and analyse indicator results in order to improve continuously.
• Draft a plan for potential suspension of work in case a new wave of coronavirus (COVID-19) infection means that confinement is put in place once again.
Section 6: Human resource issues

In the coming weeks and months, the unit(s) dealing with HR issues will have additional work, will confront new situations and will probably need to revise some policies and processes. Additionally, in order to handle risk and stressful situations adequately, being receptive to staff concerns and flexible with requirements will be extremely useful. For instance, obliging staff to work on-site against their will is to be avoided as much as possible.

Your central HR unit will need to ensure close co-ordination with the civil service and health authorities, and should support the work of the HR officers working across your branches. It is recommended to hold regular co-ordination meetings with the relevant HR officers and to agree on the communication channels to answer questions and communicate incidents.

Potential HR issues to address:

a) Staff with special needs: provide flexible work organisation solutions:
   - For staff with coronavirus (COVID-19)
   - For quarantined staff
   - For staff with family-responsibilities (during school closure period or when taking care of ill or dependent family members)
   - For other situations.

b) Coronavirus (COVID-19) identification and monitoring:
   - Set up a protocol to be followed by your staff when showing coronavirus (COVID-19) symptoms.
   - Set up a system to monitor employees who are ill or suspected to be ill.
   - Set up a protocol for the return of infected and quarantined staff at the end of the isolation period.

c) Managing coronavirus (COVID-19) induced absenteeism:
   - Update policies regarding sick leaves and family medical leaves; make sure employees know exactly what the new criteria are and the procedures for sick leave or family care.
   - Holidays and leave: reprogramming? Flexible arrangements?
   - Identify deputy heads to cope with absence of managers and supervisors.
   - Identify back-up staff to cope with absences in critical jobs.

d) Well-being and psychosocial risks:
   - psychological support to staff;
   - morale surveys

e) Flexible working time arrangements during transitional months:
   - flexible working hours;
   - staggered entry and exit of staff;
   - teleworking (set up infrastructure to allow some staff to work from home);
   - rotation between on-site and telework;
   - shiftwork (rotating shifts, i.e. 7-14h and 14-21h);
   - overtime;
o extended working days (i.e. opening during weekends to better distribute users).

f) Holidays and leave: reprogramming? Advancement or postponement (extended period)? Flexible arrangements?

g) Mobility/redeployment:
   o Consider creating a specific internal mobility scheme to ensure adequate staff for priority services (voluntary and/or compulsory temporary mobility).
   o Explain your situation (staff needs and surpluses) to your central HR authorities and ask them to manage the interministerial/interagency mobility.

h) Information and training:
   o Set and communicate quarantine protocols.
   o Provide induction training to new staff coming from voluntary or compulsory mobility.
   o Cross train employees so they can effectively cover other duties.
   o Provide training on effective personal hygiene, including handwashing.
   o Inform and train managers, for example with FAQs for all phases (see annex).

i) Salaries and allowances:
   o Special allowances?
   o Specific arrangements for working parents during school closure (i.e. babysitter bonuses).
   o Revise overtime compensation criteria?

j) Regulations:
   o Establish or revise relevant HR policies and procedures; new regulation relating to coronavirus (COVID-19).
   o Establish or update policies on flexible working, telecommuting, absenteeism and medical leave.
   o Policies or procedures to address psychological impacts of the crisis on employees, to accommodate employees’ family obligations.
   o Speak to the civil service co-ordination body if you are confronted with regulations that restrict the flexible solutions required.

k) Workforce planning and hiring:
   o Clarify the procedure for hiring temporary staff.
   o Hire additional or temporary IT staff.
   o Appointing interim project managers.
   o Special redeployment and mobility schemes (internal or external).
   o Identify deputy heads to cope with absence of managers and supervisors.
   o Identify back-up staff to cope with absences in critical jobs.

l) Coronavirus (COVID-19) consequences management:
   o Dealing with coronavirus (COVID-19)-related deaths (if relevant).
   o Dealing with coronavirus (COVID-19)-related temporary staff (if relevant).
   o Dealing with coronavirus (COVID-19)-related overtime (if relevant).
m) Impact on ongoing processes: reprogramming selection, promotion, training, performance appraisal, etc.

n) Proof of attendance compatible with hand hygiene.
Section 7: Other issues

a) Consult the Ministry of Finance and assess the budget implications of coronavirus (COVID-19) for your service/institution. Estimate the extra costs of the required new actions and assess the risk of possible budget limitations.

b) Take into account (potentially broken) “supply-chains”; prepare contingency measures in case certain organisations are not able to provide what you need to deliver your services.

c) Gather lessons learnt during the process and prepare contingency plans to ensure business continuity in case of new lockdown following coronavirus (COVID-19) outbreaks.

d) Consider discussing with international donors reorienting or postponing ongoing technical assistance projects.

► Annex on service delivery (separate document)
Some additional documents on preparing your workplaces for coronavirus (COVID-19)


SIGMA papers on public administration under coronavirus (COVID-19)


The SIGMA country manager can provide you with additional documents and advice if required.

OECD website on COVID-19 response

The OECD is compiling data, information, analysis and recommendations regarding the health, economic, financial and societal challenges posed by the impact of coronavirus (COVID-19). Please visit our dedicated page for a full suite of coronavirus-related information, including a chapter on Governance and the paper Public servants and the coronavirus.
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THE SIGMA PROGRAMME

SIGMA (Support for Improvement in Governance and Management) is a joint initiative of the OECD and the European Union (EU), principally financed by the EU. SIGMA has been working with partner countries on strengthening public governance systems and public administration capacities since 1992.

In partnership with the European Commission (EC) Directorate-General for Neighbourhood and Enlargement Negotiations (DG NEAR), we currently work with:

- Albania, Bosnia and Herzegovina, Kosovo*, Montenegro, North Macedonia, Serbia, and Turkey as EU candidate countries and potential candidates; and
- Algeria, Armenia, Azerbaijan, Belarus, Egypt, Georgia, Jordan, Lebanon, Moldova, Morocco, Palestinian Authority¹, Tunisia and Ukraine as EU Neighbourhood countries.

SIGMA provides assistance in six key areas:
1. Strategic framework of public administration reform
2. Policy development and co-ordination
3. Public service and human resource management
4. Accountability
5. Service delivery
6. Public financial management, public procurement and external audit.

SIGMA reviews and gives feedback on:

- Governance systems and institutions
- Legal frameworks
- Reform strategies and action plans
- Progress in reform implementation.

SIGMA provides:

- Advice on the design and prioritisation of reforms
- Methodologies and tools to support implementation
- Recommendations for improving laws and administrative arrangements
- Opportunities to share good practice from a wide range of countries, including regional events
- Policy papers and multi-country comparative studies.

For further information on SIGMA, consult our website:
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¹ Footnote by the European External Action Service and the European Commission: this designation shall not be construed as recognition of a State of Palestine and is without prejudice to the individual positions of the European Union Member States on this issue.