

Executive Summary: Coronavirus Back to Work Strategy

- **Global cases & deaths continue to rise, but with some “flattening” evidence to-date**
 - The US new daily cases are beginning to decline, but still account for 1/3 of global daily new cases
 - MA new daily cases still high, have been declining the past 5 days. Hospital ICU beds only ~50% filled
- **The economy is suffering as a result of mitigation efforts, with unemployment approaching 14%+**
 - JP Morgan estimating Q2 GDP down ~40% QoQ, and unemployment north of 14%
 - ~33-35% of MA jobs vulnerable, with low income workers and SMBs particularly hard hit
- **Some promising therapeutic developments 2-4 months out, but vaccine will take 12-18+ months**
 - Promising therapeutic developments with existing drugs that could be deployed in May, with second wave 3-4 months out
 - Best case scenario on vaccine timing is first quarter next year; worst case is 2 years or longer
- **Back to work planning essential to helping the economy, but will involve risk of virus spread. To minimize that risk, propose a seven-step action plan:**
 - 1) **Timing & Capacity Model:** Determine when to reopen by dynamically modeling hospital capacity & progress on steps #2-7
 - 2) **Treatment:** Identify and develop mechanisms (communication, infrastructure) for the most promising treatments
 - 3) **Segmentation:** Sequence sectors returning to work according to risk and ability to safeguard
 - 4) **Robust Testing:** Develop mass testing plan to be used to identify virus spread
 - 5) **Workplace Norms:** Develop “back to work safeguards” to minimize recurrence
 - 6) **Robust Tracing:** Develop mass tracing plan to be used to contain the virus spread and prevent a second surge
 - 7) **Reimagine Support Services:** Develop guidelines for realigning unemployed workforce, back-to-school (& childcare), and transportation



Need an actionable framework for who comes to work when, what protocols are necessary, how to scale testing and tracing capabilities, and how to reinstate enablers

7 Critical Steps to Get Back to Work

1. Timing & Hospital Capacity Constraint Model

- How “flattened” should the curve be before returning to work?
- How to build dynamic capacity / demand model based on current infection rate & implementation of steps 2-7?

2. Treatment

- How do we determine the best treatment?
- How do we rapidly secure supply & infrastructure?

3. Segmentation

- Which segments should return first?
- How to deal with high-risk & vulnerable populations?

4. Robust Testing

- How do we build testing scale?
- What is the right testing cadence, both timing & location?

5. Workplace Norms

- What are the key protocols and safeguards workplaces need to implement, varied by industry?

6. Robust Tracing

- How centralized should digital sol’ns be?
- How many people do we need to manual tracing teams?

7. Reimagining Support Services

- How do we rapidly realign the unemployed?
- When should schools / child care reopen?
Transportation protocols?

Preparing the right infrastructure for back to work will take time – critical to start now to build a dynamic capacity constraint model & expand our capabilities in each of the above seven areas