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Triple Ring Technologies

www.tripleringtech.com

- **Triple Ring Technologies** is the leading full service, multi-disciplined medical technology & product development company providing funding, incubation space, support and product development services for life science and medical device companies. And, with incubators located in both the Silicon Valley & Boston, their innovation lab staff supports early stage companies.
- A forward-thinking, innovative, and results-driven Human Resources Executive with a successful record developing company-wide programs to support strategic business initiatives with experience ranging from pre-IPO startups to global, public companies
- Experience managing amid continually changing environments
 - Talent acquisition & retention / Training & development / Diversity
 - Rewards & recognition / compensation & benefits
 - Workforce planning
 - HR governance & compliance / M&A

Experience

- HR Leadership roles at Accuray, Trend Micro, Alliance Fiber Optic Products & Freeslate



COVID-19: Science & Laboratories

April 29, 2020

What I'm covering today...

- ▶ Who We Are
- ▶ Our Plan
- ▶ Our Concerns

Who We Are

Before March 16th



After March 16th



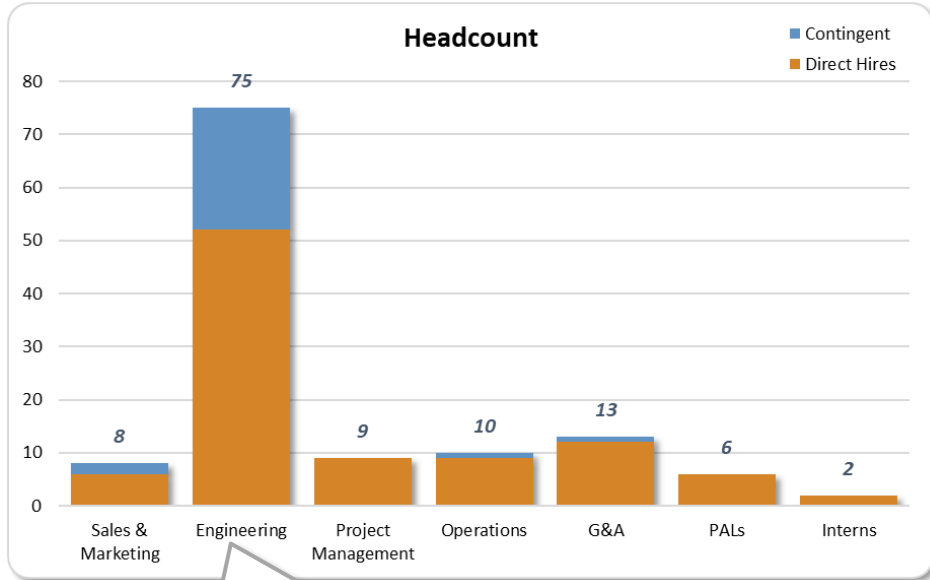
Trust-based organization founded on Teamwork

We all share an appreciation of creativity, collaboration, and curiosity.

We have 2 offices with combined ~250+ people

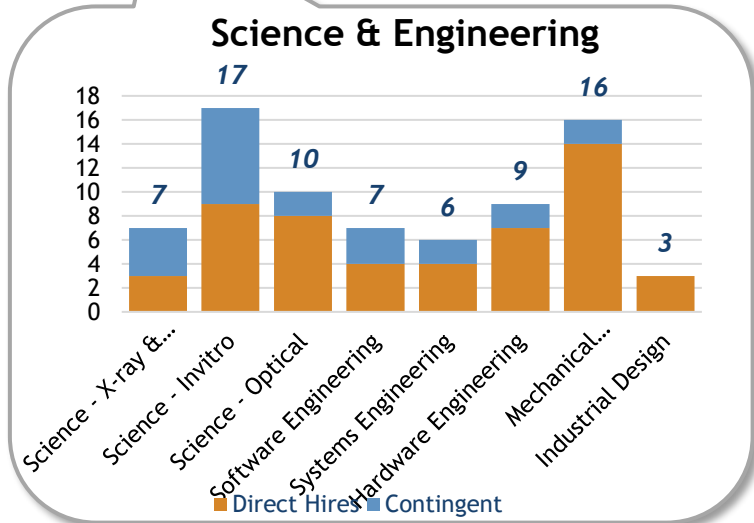
- Newark, CA office: ~88,000 ft² facility
- Boston office: ~12,500 ft² facility
- ~45% labs, 25% cubicles, 25% offices
- Provide ~ 25% of our space to incubating companies

Science & Engineering Driven Organization



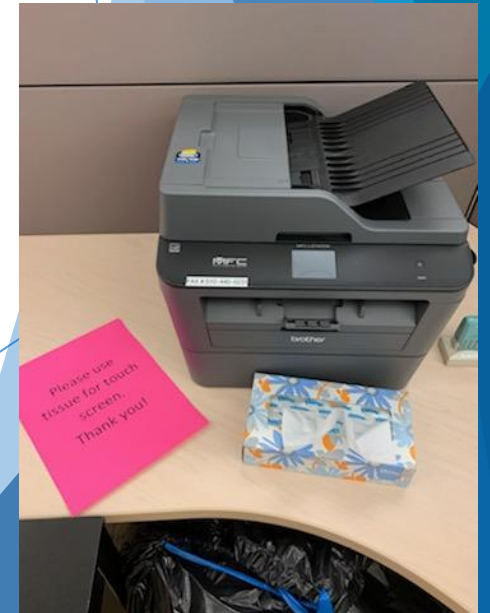
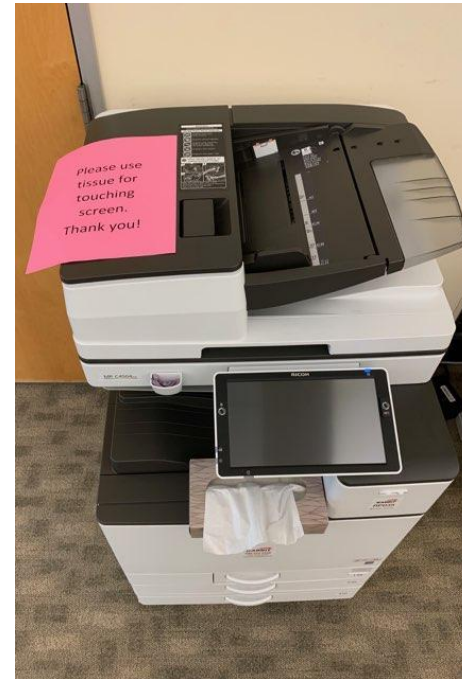
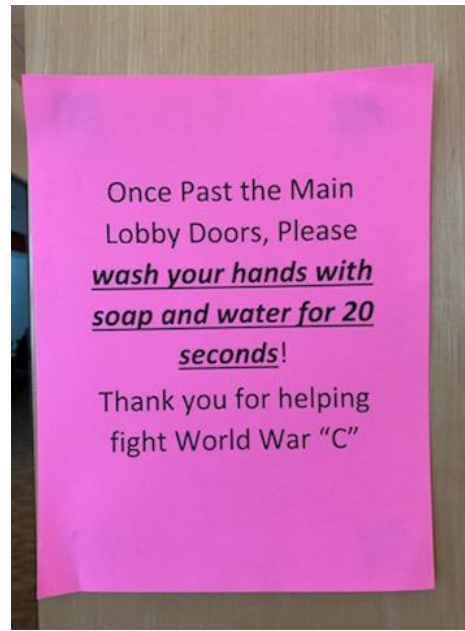
- ▶ “Essential Business” under the current Orders
- ▶ Decisions are based on data
 - ▶ We predict multiple waves going forward
 - ▶ Applying evidence-based workplace protocols
 - ▶ Self screen prior to work
 - ▶ Social Distancing
 - ▶ Frequent Hand Washing
 - ▶ Face Coverings
 - ▶ Enhanced cleaning high touch surfaces (Day Porter)

- ▶ Establishing redundancies between CA & MA offices to mitigate potential closure of one or other
- ▶ Monitoring testing efficacy & timing
- ▶ Contact Tracing



Our Return to Office (RTO) Plan

- ▶ Prioritize employee & client safety & well-being
- ▶ Focus on business continuity
- ▶ Make data-driven decisions
- ▶ New Office Mindset - “Universal Precautions”
- ▶ Continue protocols that are working
 - ▶ Social Distancing, frequent hand washing, etc..
- ▶ Minimize density in the office
- ▶ Ensure employees feel safe working in the office
- ▶ Phased approach by category
 1. Essential to be onsite (laboratory work)
 2. Preference or project drives RTO (0-100% time)
 3. Continue to WFH
 4. Accommodations for vulnerable individuals
- ▶ Flexible worksites and workhours (new norm)
- ▶ Follow advice from both government leaders and leading scientific experts



Our Concerns

- ▶ A lot of emotion, uncertainty, and bad data out there
- ▶ Balancing WFH and RTO
 - ▶ Returning to work too soon
 - ▶ Employee comfort levels
 - ▶ Employee needs – some work better from home than others
 - ▶ Employee productivity levels
 - ▶ Returning in shifts or staggered may be less efficient/productive
 - ▶ Routine disruption for those doing shifts
 - ▶ Incubator company plans
- ▶ Childcare availability for some employees
- ▶ Impact to our Intern Program
- ▶ Impact of accommodations on business
- ▶ Impact (psychological) on employees of having COVID-19 positive case onsite
- ▶ Employees getting sick and not being able to work

Appendix

Definitions

- ▶ **Universal Precautions** is an approach to infection control to treat all human blood and certain human body fluids as if they were known to be infectious for HIV, HBV and other bloodborne pathogens, (Bloodborne Pathogens Standard 29 CFR 1910.1030(b) definitions).
- ▶ **Face Covering** is defined as: a covering made of cloth, fabric, or other soft or permeable material, without holes, that covers only the nose and mouth and surrounding areas of the lower face. A covering that hides or obscures the wearer's eyes or forehead is not a Face Covering. Examples of Face Coverings include a scarf or bandana; a neck gaiter; a homemade covering made from a t-shirt, sweatshirt, or towel, held on with rubber bands or otherwise; or a mask, which need not be medical-grade. It may be factory-made, or may be handmade and improvised from ordinary household materials.
- ▶ **Close contact** is defined as: a) being within approximately 6 feet (2 meters) of a COVID-19 case for a prolonged period of time; close contact can occur while caring for, living with, visiting, or sharing a healthcare waiting area or room with a COVID-19 case – *or* –b) having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on)

Four Categories

- ▶ **Essential** to be onsite (laboratory work)
 - ▶ means that it's impossible or at least very difficult to do their job working from home or are working on COVID related project currently.
- ▶ **Preference or Project Driven RTO** (0-100% time)
 - ▶ indicates that while we encourage these folks to WFH, they either choose to come in to do their job or their individual projects are driving to have to come in, at least occasionally. (Some grey area here between ESSENTIAL and preference or project drives RTO)
- ▶ Continue to **WFH**
- ▶ Accommodations for **vulnerable individuals**
 - ▶ 1. Elderly individuals. 2. Individuals with serious underlying health conditions, including high blood pressure, chronic lung disease, diabetes, obesity, asthma, and those whose immune system is compromised such as by chemotherapy for cancer and other conditions requiring such therapy.

RTO Checklist

Return to Office Plan (to be reassessed and updated as situation unfolds)	Phase 0	Phase 1	Phase 2
	(03/16-5/31)	(June)	(July)
Comply with "Shelter-in-Place" Order	✓	TBD	TBD
Comply with "Face Coverings" Order	✓	TBD	TBD
Staged RTO based on role/projects:	✓	✓	✓
Essential/required to be onsite	✓	✓	✓
Better or prefer to RTO (0-100% time)	✗	TBD	TBD
Able to work remotely X% of time	✓	✓	✓
Reasonable accommodation to WFH	✓	✓	TBD
Health Screening:			
Survey workers for risk of exposure	✗	✗	TBD
Self-screen temperature prior to going into office	✓	✓	TBD
COVID-19 Testing required	✗	✗	TBD
Antibody Testing required	✗	✗	TBD
Contact tracing	TBD	TBD	TBD
Social Distancing protocol	✓	✓	✓
Face Covering protocol	✓	TBD	TBD
PPE			
Masks (provided by TRT)	✓	✓	TBD
Gloves (outside of 1x use in labs)	✗	✗	✗

Return to Office Plan (to be assessed and updated as situation unfolds)	Phase 0	Phase 1	Phase 2
	(03/16-5/31)	(June)	(July)
Facilities:			
Enhanced cleaning of high-touch surfaces	✓	✓	✓
Paper towels near all high touch objects (door handles, water cooler/coffee machine/refrigerator)	✓	✓	✓
Hand & Spray Sanitizer available in all common areas	✓	✓	✓
Reconfigure work spaces	✗	✗	✗
Gym closed	✓	✓	TBD
Limited use Conference Rooms	✓	✓	TBD
Group in person meetings (no >3-4 people)	✓	✓	TBD
Limited use Lunch Rooms	✓	✓	TBD
1 chair per table	✓	✓	TBD
Lunch Service suspended	✓	✓	TBD
Pre-packaged snacks provided as available	✓	✓	TBD
Labs			
Limit 3 people at a time/6 feet apart	✓	✓	✓
Reserve lab time via MS Team	✓	✓	✓
Shared tools/electronics must be wiped down	✓	✓	✓
Onsite Visitors/Offsite Meetings:			
Onsite visitors/interviews case by case	✓	✓	✓
Onsite tours case by case/pre-approved	✗	✓	TBD
Travel:			
"Business critical" only	✗	✗	TBD

POTENTIAL SCENARIOS:		What to do:
Employee becomes ill during workday:	Has a fever, cough or other symptoms.	<ul style="list-style-type: none"> • Send home immediately • Surfaces in their workspace should be cleaned and disinfected. • Information on persons who had contact with the ill employee during the time the employee had symptoms and 2 days prior to symptoms should be compiled. • Others at the facility with close contact within 6 feet of the employee during this time would be considered exposed.
POTENTIAL SCENARIOS:		Return to Office only under the following conditions:
May have had exposure to a person with suspected or Confirmed COVID-19	Potential exposure means a household contact or having close contact ³ of an individual with confirmed or suspected COVID-19 by a test of medical provider.	<ul style="list-style-type: none"> • You have self-isolated for a minimum of 14 days since having close contact. <ul style="list-style-type: none"> ○ The timeframe for close contact includes the period of time of 48 hours before you became symptomatic.
Unconfirmed COVID-19 with illness	Has had fever, cough or other symptoms but NOT tested or confirmed to have COVID-19 and has fully recovered.	<ul style="list-style-type: none"> • You have had no fever for at least 72 hours (that is 3 full days of no fever without the use medicine that reduces fevers) AND • other symptoms have improved (for example, when your cough or shortness of breath have improved) AND • at least 7 days have passed since your symptoms first appeared
Confirmed COVID-19 with NO illness	Tested positive by a medical professional but has NOT become ill due to virus.	<ul style="list-style-type: none"> • After at least 14 days have passed since the date of first positive COVID-19 test AND • you have not become ill
Confirmed COVID-19 with illness not requiring hospitalization	Tested positive by a medical professional and become moderately ill due to the virus	<ul style="list-style-type: none"> • You have had no fever for at least 72 hours (that is 3 full days of no fever without the use medicine that reduces fevers) AND • other symptoms have improved (for example, when your cough or shortness of breath have improved) AND • you received 2 confirmed negative tests in a row, 24 hours apart.
Confirmed COVID-19 with illness requiring hospitalization AND other “high risk” severely immunocompromised patients	Tested positive by a medical professional and come ill due to the virus, requiring hospitalization.	<ul style="list-style-type: none"> • Manage case-by-case • CDC recommend rigorous testing before returning to office. • Follow the guidance of your healthcare provider and local health department.

Employee Survey Questions

- 1) How has the transition to working from home (WFH) been for you?
- 2) Do you have all the required tools you need to WFH?
- 3) What have been your biggest challenges WFH?
- 4) Is childcare an issue for you? If yes, please explain
- 5) How is your work efficiency/productivity WFH as compared to working in the office?
- 6) If WFH continued what would you need to be successful (or comfortable)?
- 7) Do you have reservations returning to work in the office? If yes, please explain.
- 8) When would you feel comfortable returning to working in the office with others?
- 9) What additional information do you need to feel safe and informed?
- 10) How do you feel leadership is handling the situation?
- 11) Do you have any other comments, questions, or concerns?