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Dentons Flashpoint

Novel Coronavirus Daily Update

May 4, 2020

Novel Coronavirus Update: May 4, 2020

KEY TAKEAWAYS

China is facing growing international calls for an investigation and accountability over its responsibility for the coronavirus pandemic.

Scientists warn against using serological tests to provide immunity passports.

Russian hospitals are at risk of being overwhelmed by critical cases.

Note: This report is based on sources and information deemed to be true and reliable, but Dentons makes no representations to same.

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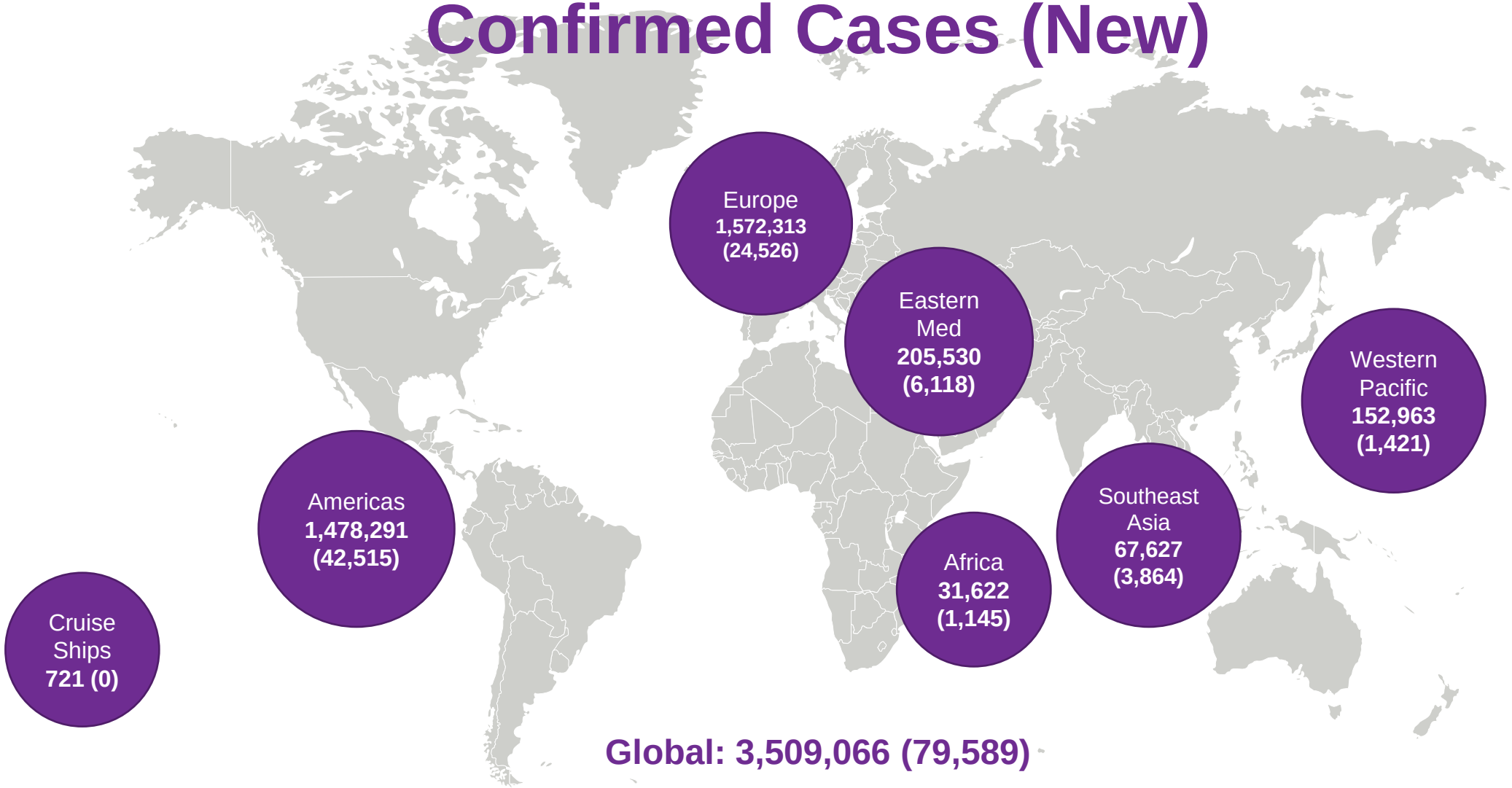
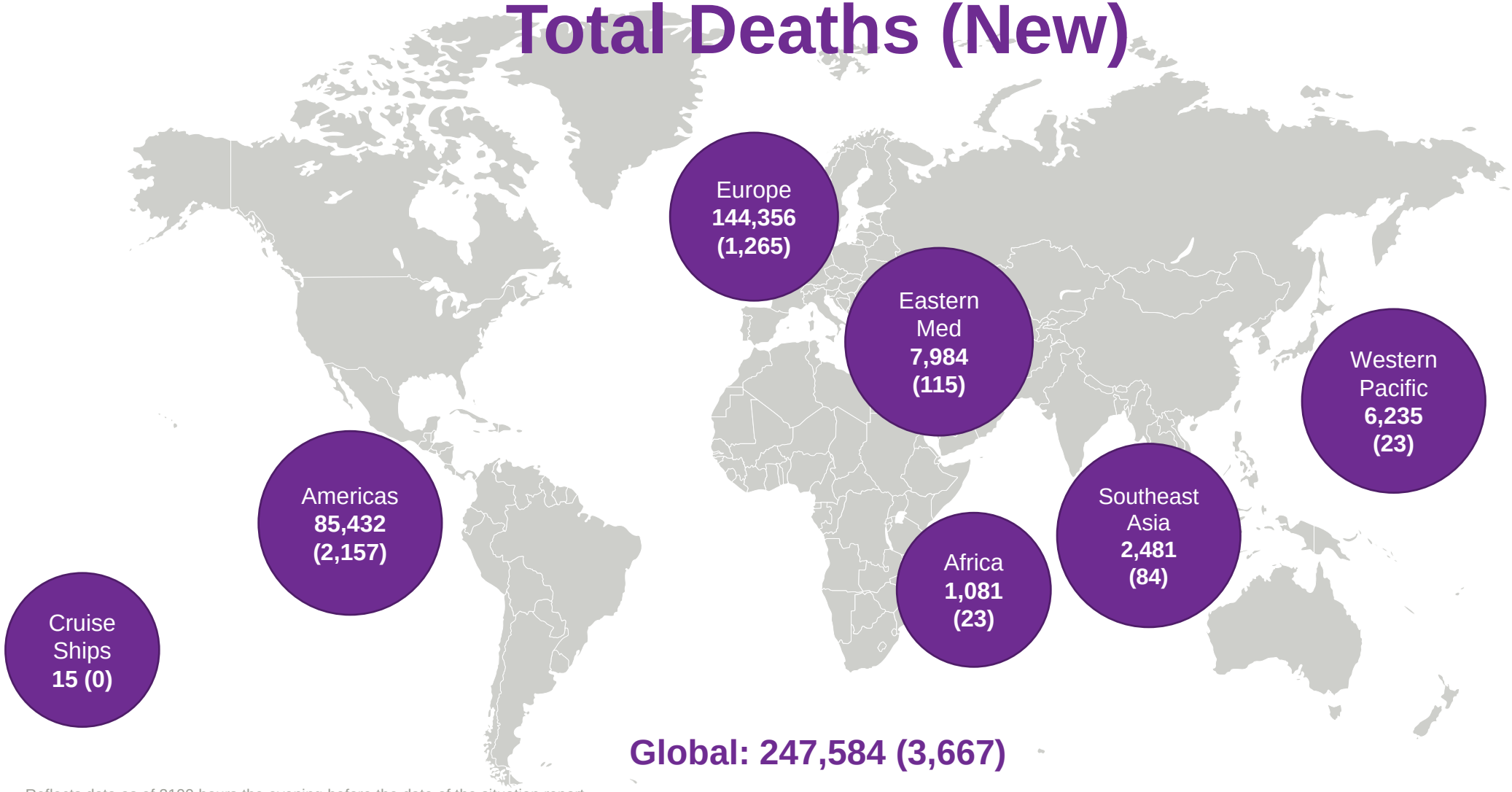
Confirmed Cases (New)



Global: 3,509,066 (79,589)

Reflects data as of 2100 hours the evening before the date of the situation report.
Data Source: Johns Hopkins University

Total Deaths (New)



Global: 247,584 (3,667)

Reflects data as of 2100 hours the evening before the date of the situation report.
Data Source: Johns Hopkins University

Note: This report is based on sources and information deemed to be true and reliable, but Dentons makes no representations to same.

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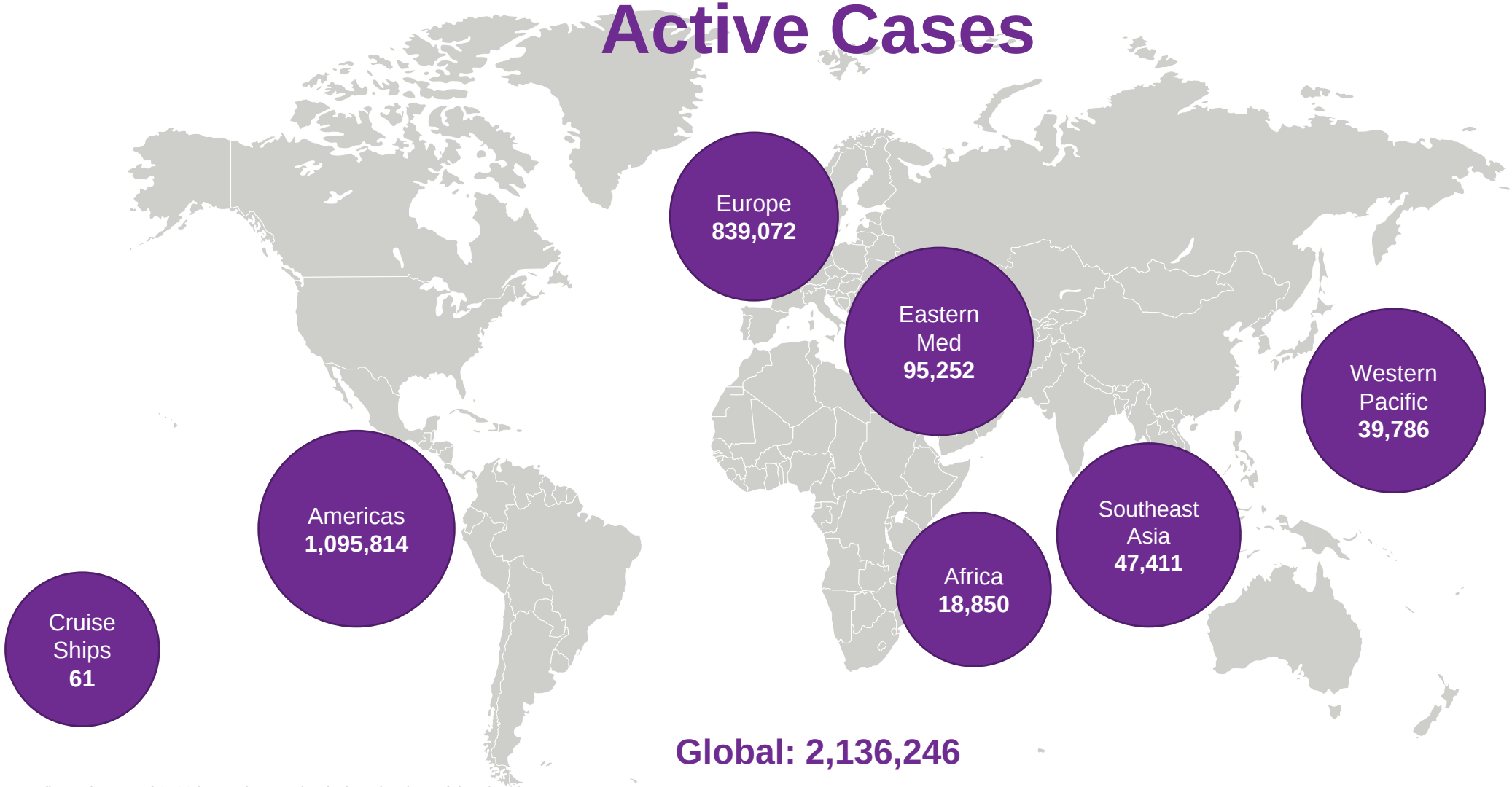
Active Cases



Global: 2,136,246

Reflects data as of 2100 hours the evening before the date of the situation report.
Data Source: Johns Hopkins University

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Condition Updates

As of A.M. US EDT on May 4

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Global

Overnight, confirmed cases grew to 3,581,879 in 212 countries and territories, with 248,558 deaths.

- China is facing growing international calls for an **investigation and accountability** over its responsibility for the coronavirus pandemic.
- As countries in Europe and the US **ease lockdowns**, experts warn that closing down countries to contain the coronavirus pandemic would be far easier than opening them up again.
- Globally, deaths continue to decline in an 18-day overall **downward trend**.
- WHO extended its state of emergency, originally announced on January 30, and warned of **coming food shortages**.
- World Athletics, the international governing body for track and field, is in talks with the IOC over the financial blow the sport faces from the postponement of this year's **Olympic Games**.

Markets

Global stocks fell on Monday as tension flared between the US and China over the origin of the coronavirus pandemic.

- Traders will be allowed back on to the floors of two **US options exchanges** on Monday, the New York Stock Exchange's Arca options floor in San Francisco and the Box Options Exchange in Chicago.
- Fed Chairman Jerome Powell suggested that even a **W-shaped economic recovery** may be **too optimistic**.
- Bank of America said that US **consumer spending** is starting to rebound.
- The OPEC+ production cut deal came into effect on Friday, but the IEA predicts that **global storage capacity** could be full by mid-June.
- A key **US manufacturing index** hit an 11-year low in April.

Business

The *Washington Post* reported that publicly traded companies received more than $1 billion in funds meant for small businesses.

- **US and European banks** are on track to book more than $50bn of charges on bad loans in the first quarter, the biggest such provisions since the 2008 financial crisis.
- Low-cost airline **Norwegian Air Shuttle** has reached a last-minute deal with bondholders for a debt-for-equity swap, need to secure a government rescue package to avert financial collapse.
- Remdesivir, a drug that has shown promise in reducing recovery time for coronavirus patients, will start going out to US hospitals this week, California-based **Gilead Science** announced.
- Research suggests that a majority of **US executives** have not taken pay cuts.
- Warren Buffett sold all stakes in US airlines as **Berkshire Hathaway** reported a $50bn loss.
- Saudi petrochemical giant **Sabic** said it would suspend all but essential capital expenditure in Q2.
- Spain's **Telefonica** confirmed that it is in merger talks with John Malone's **Liberty Global** to combine telecoms operator **O2 with Virgin Media**.
- **Vaxxel,** a French start-up that develops vaccines against respiratory viral infections, announced the acquisition of **Transgene's** DuckCelt-T17 cell line which is used against influenza and an acute respiratory virus.
- **American Airlines, Delta, and United** announced that they will soon require passengers to wear face masks, following **JetBlue**.

Africa

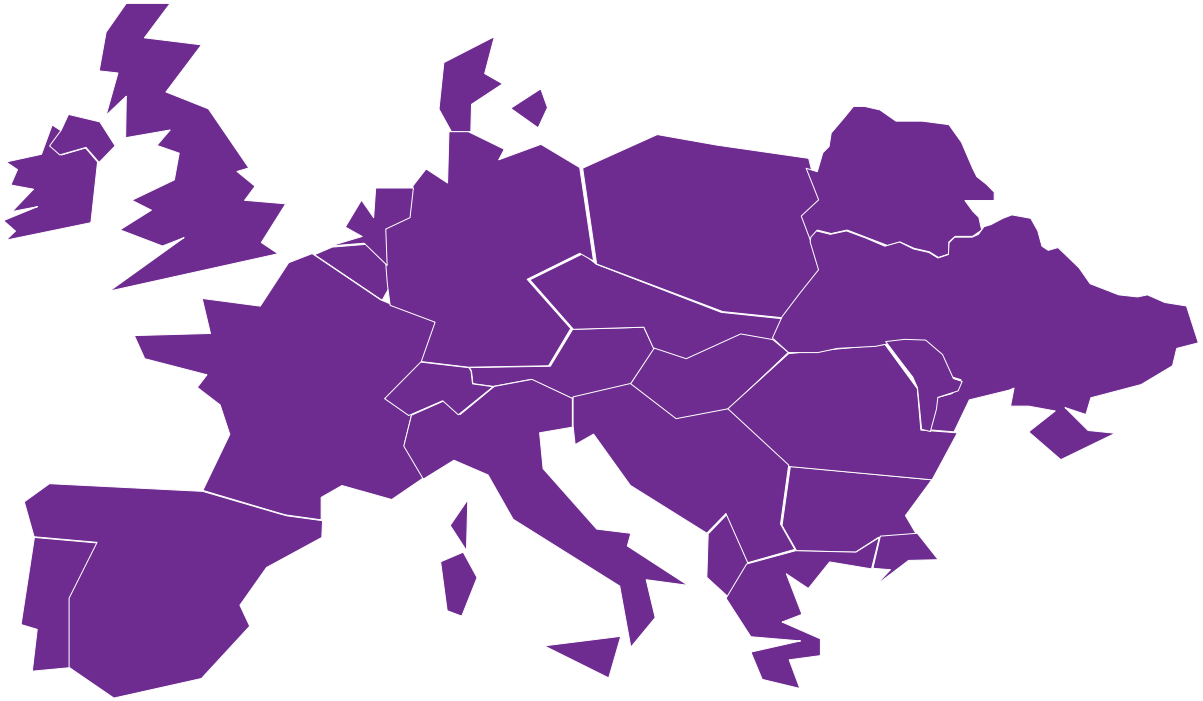
- **South Africa's** mining union won a court case against the government that will force authorities to impose strict guidelines on mining companies to protect workers against COVID-19.
- **Ivory Coast** PM Gon Coulibaly has been evacuated to France for medical checks after self-isolating in late March because of possible exposure to the virus.
- **Zimbabwe**, having fallen behind on $2b in loan servicing to international lenders, pleaded for international help to avoid economic collapse.
- Doctors, opposition leaders and activists are accusing the **Tanzania's** government of covering up the true extent of the coronavirus pandemic with secret burials taking place at night, hospitals overflowing, and three parliamentarians suspected of dying from the disease. Tanzania has report 480 cases and 16 deaths.
- **Senegal** surpassed 1,000 cases.

Asia

- **Hong Kong's** economy contracted at the fastest rate on record, with GDP decreasing by 8.9 percent in the first three months of 2020 relative to the same period a year earlier. .
- Asia's third-largest economy **India** had a record low in April in manufacturing activity. India extended its lockdown until May 18 but eased some restrictions on movement, notably allowing special trains to transport stranded rural migrants away from urban centers.
- One of **Australia'**s top medical officials has called for children to return to school. Australia has allowed **a New Zealand** rugby league team to enter the country despite the strict lockdowns to train for the scheduled resumption of the 2020 National Rugby League season on May 28.
- **China** imported 307m barrels of oil in April, roughly equivalent to 2019 levels. Chinese travelers visited the country's major tourist sites over the May Day holiday, a sign of a return to normality.
- The United Nations urged **Malaysia** to cease the detention campaign of undocumented migrants, including Rohingya, which Malaysia says is an effort to enforce movement restrictions and contain the virus outbreak.
- TPP members **Singapore, New Zealand, and Japan** are working together to maintain regional free trade and counter protectionist tendencies.

Europe

- **Eurozone** growth and inflation rates are expected to fall sharply this year, while unemployment is set to surge, according to the latest European Central Bank survey of professional forecasters.
- The **UK** defense minister called on **China** to be transparent in a "*postmortem*" investigation of the pandemic crisis. **Italy** exposes Chinese propaganda film of Italians cheering for China as a fake montage.
- **Greece** announced that wearing facemasks will be obligatory from Monday on public transport as the country emerges from a five-week lockdown. **German** businesses call on Berlin to announce a firm timetable for lifting the lockdown.
- **France** announced on Saturday it would extend its "*health emergency*" for a further two months until July 24, with provisions for wearing masks on public transport and a 14-day quarantine for those entering the country.
- After seven weeks in confinement, millions of people in **Spain** ventured out for the first time in a major step to ease one of Europe's most severe lockdowns.
- There is a growing concern that hospitals will be overwhelmed in **Russia,** with more than 10,000 new infections reported overnight, mostly in Moscow.



Middle East

- Confirmed cases in the **region** surpassed 200,000 while experts warn the numbers are under reported in many places. Random testing in **Kabul** showed about one-third of people were positive for the coronavirus, raising concerns of an outbreak far more widespread than is known. WHO warned that despite a small number of reported coronavirus cases in **Yemen** and just two deaths, the virus was likely "*actively circulating throughout the country*" of 30 million people.
- **Saudi Arabia** will lead the G20 campaign to kickstart the Coronavirus Global Response campaign to raise $8b to overcome the COVID-19 pandemic.
- Schools open in **Israel** after 6 weeks of closure.
- **Jordan** has lifted all restriction on economic activity in the latest easing of nationwide curfew rules.
- **Iranian** President Rouhani said mosques would reopen across large parts of the country.
- Amnesty International shines a light on **Egypt's** arrest of journalists, charged with "*spreading false news*" in attempts to report on coronavirus infections.
- **Kuwaiti security forces quelled violent protests by** Egyptian expatriates awaiting deportation in a camp.

Americas: US

- More than half of America's governors have relaxed restrictions as **protests against stay-at-home orders** have spread. President Trump tweets in support of protestors defying stay-at-home orders. Oregon Gov. Kate Brown extended the state's emergency declaration through July 6.
- **New York, Connecticut, Delaware, Massachusetts, New Jersey, New York, Pennsylvania and Rhode Island** are forming a buying consortium to secure billions of dollars-worth of coronavirus medical and testing equipment as they prepare to reopen their economies.
- Secretary of State Pompeo claimed that "*enormous evidence*" indicates that the covid-19 virus originated at a **laboratory in Wuhan**.
- A battle is brewing in Congress over draft legislation to **shield businesses from liability** if workers contract coronavirus.
- **White supremacists** are attempting to exploit the pandemic into a recruiting tool on the internet and on the streets of state capitals by twisting the public health crisis to bolster their extremist and anti-government agenda.
- The **Kentucky Derby** was postponed for the first time since 1945.
- **Beaches** have been a social and political flash point, as people rush back to fun in the sand, while others warn that they are threatening lives of others.
- Department of Agriculture plans to spend $300 million on **surplus produce, milk and meat** and ship it to food banks.

Americas

- **Argentina's** Minister of Economy warns that that country cannot continue to pay 20 percent of government revenues to service debt payments to its creditors and calls for a three-year grace period, a 5.5 percent reduction on the bonds' principal, and a 62 percent reduction of interest payments.
- Cases in **Mexico** surged to 23,471, with the hardest hit areas located in Mexico City, Sinaloa and Baja California.
- **Canada** pledges $170 million for improved access to online health care, including mental health services. . Alberta launched Canada's first contact tracing app.
- The IMF will lend an additional $643m to **Ecuador** as the country grapples with a sharp drop in oil prices and growing infections rates. Ecuador is the hardest hit country in South America, with 27,464 confirmed cases and over 1,300 deaths.
- At least 46 people died in a prison riot in **Venezuela**, prompted by a prohibition on families from bringing food to inmates as part of coronavirus-related restrictions.
- The IMF approved a two-year $10.8bn credit line to **Colombia**. Colombia's biggest guerrilla group, the ELN, resumed conflict with the state as its month-long coronavirus ceasefire ended.
- **Brazil** surpasses 100,000 cases, and **Honduras** tops 1,000 cases.

Science Under the Scope: SARS-CoV-2 Immunology and Immunity Passports

Contributed by Scowcroft Institute of International Affairs

The lack of evidence that infection confers immunity should push states away from the use of serology in making decisions about reopening the economy or any inferences of immunity.

Over the course of the last week, a number of countries have begun lifting their lockdown measures and allowing citizens to move around more freely. In many of those countries, however, adequate testing - both quantity and quality - is insufficient to "*box in*" the virus when outbreaks occur. Test kits around the world still struggle to reach levels of sensitivity (the ability to correctly return a positive result for a sample that has antibodies present) and specificity (the ability to correctly return a negative result for a sample that does not have antibodies present) that would allow them to be useful in pandemic response. Even a test that is 95 percent sensitive and 95 percent specific will return almost the same amount of false positive cases as true positives in a population of 1 million people.(1)

In addition to the lack of serological tests that are sufficiently accurate, Rapid Diagnostic Tests (RDT), in particular, present a problem if used for anything other than basic epidemiological purposes. RDTs have been the focus of most testing development because they can return testing results in 10-30 minutes, but they can only tell you if antibodies are present or absent.(2) RDTs do not have the ability to provide information on the amount of antibodies a person has, which research shows is of growing importance for SARS-CoV-2.

Despite the current lack of adequate testing, many countries have sought to expand their testing for purposes beyond epidemiological use. Germany has developed one of the first large-scale serology testing

programs and says that they intend to use the information to issue immunity certificates. The United Kingdom has written a 5-pillar plan to develop and implement wide-scale serological testing, which would then be used for immunity passports. Additionally, France, Italy, and the United States have all expressed interest in developing an immunity passport program.

There are a number of reasons to be cautious when suggesting that serological tests can and should be used to provide immunity passports. The first, as mentioned above, is that the tests are not sufficiently accurate. Even tests at 95% accuracy will label tens of thousands of people as positive when they are, in fact, negative. Second, we are still uncertain if immunity is conferred from infection and, if it is, what level of antibodies are necessary to provide that immunity. Research on seasonal coronaviruses show that overall immunity is short-term and research on SARS and MERS indicates that any antibody immunity conferred is relatively short-lived.(3) One of the world's leading coronavirus scientists has argued that the presence of antibodies alone is not enough to label a person as immune and that we must also be analyzing T-cell mediated adaptive immune response to SARS-CoV-2 to better understand immunity.(4) Though broader immunology research is needed to understand immunity, only a handful of laboratory studies have been conducted on the subject. The best known study challenged two rhesus macaques with reinfection and found that they were immune.(5) Many researchers have pointed out, however, that this and the other two studies only had a few weeks between clearing of symptoms and rechallenge. Thus, it does not provide any information on how long immunity might last.

Given that there is limited data on immunity and a general agreement among scientists that there is a possibility that only short-term immunity exists, many have cautioned against immunity passports or using serology as a standalone to reopen economies.(6) From a scientific perspective, the issuing of immunity passports gives individuals a false sense of security and may encourage them not to take precautions against infection. If immunity to SARS-CoV-2 is short-term, this could

Science Under the Scope: SARS-CoV-2 Immunology and Immunity Passports

lead to high rates of reinfection among those with immunity passports. There is also an ethical perspective of this argument and fears that the issuing of immunity passports may encourage people to become purposefully infected.

The lack of evidence that infection confers immunity should push states away from the use of serology in making decisions about reopening the economy or any inferences of immunity. Instead, it can be an effective tool for contact-tracing, as is being done in Singapore. Serological tests can help track the virus throughout a community and isolate infected or exposed cases in an attempt to contain the spread, but it should not be used to assume immunity.

(1) Osterholm, M. (2020, April 29). Episode 6: The Question of Immunity. Osterholm Update: COVID-19. Available at https://www.cidrap.umn.edu/covid-19/podcasts-webinars

(2) Gronvall, G., Connell, N., Kobokovich, A., West, R., Warmbrod, K.L., et al. (2020, April 22). Developing a National Strategy for Serology (Antibody Testing) in the United States. Johns Hopkins Center for Health Security.

(3) Channappanavar, R., Zhao, J., Perlman, S. (2014). T cell-mediated immune response to respiratory coronaviruses. Immunologic Research, 59(1): 118-128.

(4) Racaniello, V., Condit, R., Spindler, K., Barker, B. (2020, April 16). TWiV 602: Coronavirus immunology with Stanley Perlman. Available at https://www.microbe.tv/twiv/

(5) Bao et al. (2020, March 14). Reinfection could not occur in SARS-CoV-2 infected rhesus macaques. BioRxiv. Available at https://www.biorxiv.org/content/10.1101/2020.03.13.990226v1

(6) Gronvall, G., Connell, N., Kobokovich, A., West, R., Warmbrod, K.L. et al. (2020, April 22). Developing a National Strategy for Serology (Antibody Testing) in the United States. Johns Hopkins Center for Health Security.

Famine: The Second Pandemic

By Anni Coonan

As the COVID-19 pandemic continues and predictions of its full economic impact of become more dire, humanitarian organizations and governments around the world have realized that severe and widespread food insecurity is near. The UN World Food Programme (WFP) recently amended its predictions for the rest of 2020, estimating that virus-related economic fallout would double the amount of people experiencing poverty and severe food insecurity to 260 million.

The WFP had already predicted that 2020 would be a “devastating” year for food insecurity prior to the coronavirus pandemic, with 135 million people facing crisis levels of hunger in countries experiencing war or climate catastrophes.

The new numbers predict a famine of “*biblical proportions*,” per the executive director of the WFP, if swift action is not taken. The famine is indiscriminate: even if countries are relatively unscathed by the coronavirus, they will not be able to escape global supply chain interruptions and economic downturn.

Famine: The Second Pandemic

Extended lockdowns in most countries of the world have led to lost income or employment for much, if not most, of the world, and even before virus-related restrictions began, the world's poor did not have the resources to stockpile two weeks of food. Government aid, when it has been implemented, has rarely been swiftly delivered or generous enough to seriously offset virus-related food insecurity. Schools, a source of food that the insecure throughout the world generally rely on for their children, are widely closed. At the same time that people around the world are becoming increasingly unable to afford food, global food supply chains are being interrupted, making it less available. Cargo flights have decreased and become more expensive as the world's airlines crater financially, and transport of freight by land or boat has similarly decreased. In some countries, lockdowns have included the temporary closures of meatpacking, food processing, and food-related manufacturing plants, and infections arising from crowding and poor preventive measures have closed them elsewhere. In the same vein, travel restrictions have stemmed the flow of migrant workers who are crucial to agricultural supply chains throughout the world. Attempts to replace them with other laid-off workers have been largely unsuccessful, and travel restrictions will likely remain in place for some time even after outbreaks themselves have abated.

Similarly, the global logistical slowdown has hampered efforts to fix the factors that were already threatening food security: in the Horn of Africa, for example, a record-breaking locust infestation fueled by unusually wet weather began decimating crops in late 2019. Trade barriers and the rising expense of many staples have made pesticides and the food aid that was already necessary late or difficult to procure. Similarly, in Southeast Asia, drought throughout the last year led to under-planting of rice to conserve water, a shortfall that has been exacerbated by the pandemic. In Syria and Yemen, noted by the WFP as areas of concern for the ongoing conflict, the active humanitarian crises have not abated, and the ability of aid organizations to deliver food aid has been stymied.

Famine: The Second Pandemic

Although the poor and war-torn countries will be disproportionately affected, wealthier countries are far from immune to supply chain disruptions. In the US, for example, President Trump recently signed an executive order designating the American meat industry as critical infrastructure, compelling meatpacking businesses to remain open despite lockdowns. Regardless, meatpacking companies - where employees usually work in crowded, damp, and unclean conditions - have struggled to avoid infections in their workers, and there will likely be meat shortages throughout the US for the coming months. Similarly, Germany has sounded the alarm on the effect of border closures on the agricultural industry as harvest seasons approach but has not found a workable solution.

Also concerning is that just as food insecurity can be caused by coronavirus spread, coronavirus spread can be caused by food insecurity. Those struggling with food insecurity often have lower baseline health, putting them more at risk of contracting the virus. Unlike the food-secure, the poor must continue to travel to access food, dampening the effect of lockdown measures in their countries and putting themselves more at risk. According to cell phone data, movement in the American south has not decreased at nearly the same rate as other areas, a statistic explainable by the fact that much of the American south is a "*food desert*," or an area without easy access to food. Similarly, rural poor in India have in some cases increased their travel as food becomes less available or more expensive. Even well-coordinated responses to coronavirus-triggered food insecurity have the potential to continue spreading the virus: multiple US states have converted closed schools to food distribution centers, and countries around the world have ramped up food distribution by the government and militaries, but these solutions require ever-larger groups of people to gather and queue for food. Elderly people are especially at risk for the coronavirus and, in most places, for food insecurity, meaning that they could be increasingly put at risk in an attempt to obtain food. The safest response to food insecurity - door-to-door deliveries of food to people in need - is beyond the capabilities of all but the wealthiest countries.

Famine: The Second Pandemic

Despite calls by the UN for swift delivery of food aid, it seems unlikely given recent protectionist trends that the international community will donate generously enough to avert widespread famine. Export restrictions on food staples (similarly to now-common export restrictions on medical equipment and PPE) in the most insecure countries would not be surprising. However, such a move would only exacerbate food insecurity in other countries while depriving exporters of sorely needed income during a global recession. Beyond the humanitarian costs of famine, food insecurity is a significant driver of unrest and instability. Famines frequently trigger mass migrations, which overwhelm state capabilities and create internal unrest even without the exacerbating larger global crises, and create hungry populations disenchanted with their governments' response to the pandemic - both significant risk factors for conflict and unrest. In already food-insecure areas of the world, such as sub-Saharan Africa, southeast Asia, and conflict-ridden areas of the Middle East, rising food insecurity combined with widespread economic shocks, high mortality rates, and weakened governments will be a potent risk to state stability.

The Office in the Time of Pandemic

By Melissa Boyle Mahle

Businesses in the United States are starting to reopen, some with a sense that the threat has passed, others with some trepidation but feeling economic necessity. Office workers know that they will not be going back to a normal business environment, but do not know what the new normal will be. Employers are scrambling to identify best practices for office environments that enable a return to profitability, keeping a healthy workforce while not falling afoul of employment laws.

What Can Office Employees Expect?

Office space in the US varies widely, from large suites in landmark skyscrapers to mom and pop operations located in urban centers and small businesses in office parks. One common denominator will be the treatment of shared space. Expansive lobbies designed for an impressive welcome built to accommodate a crowd will become less welcoming and less crowded. The security desk or receptionist may now sit behind a Plexiglas shield. Only visitors with pre-cleared appointments will be permitted to remain inside the lobby, and the numbers may be limited. As the technology improves, remote temperature screens and disinfectant stations could be installations in a new obstacle course between the revolving doors, electronic security badge checks and elevator banks. Security badges may now include additional biometric information for fast tracking: does the bearer have an active clearance in the form of an immunity passport?

Elevators, already a source of anxiety for the claustrophobic, will have entirely new social distancing protocols. Elevator attendants, a relic of the 20th century, could be back, as the designated button pusher and monitor of the number riders permitted and floors to be accessed. In skyscrapers, with thousands of workers, elevators and access/exit times could be assigned during morning and afternoon peak uses, organized by offices and floors. The flow of workers may be staggered by work shifts, minimizing the number of people coming and going each hour, or maybe reflecting downsized office operations.

Appropriate business attire may now require an additional accessory: a face mask. This will offer up new business opportunities for branding or fashion statements. Appropriate business etiquette may include graciously agreeing to routine temperature taking and answering probing questions about your and your family's health.

The Office in the Time of Pandemic

Once in the office, employees will need to adjust how they do their work. Shared spaces and equipment will be viewed as high risk. Personal offices, once a sign of status, may be allocated differently. If in short supply, more vulnerable workers could be given higher priority. Open work areas with workstations, the current design rage, will become sectioned off, with Plexiglas dividers or plastic "*sneeze guards*." Shared printers/copiers may be moved to a closed access room with an attendant operating the machines and distribution of materials to minimize the number of hands touching both equipment and product. Shared phones and computer stations will be treated as public bathrooms in gas stations – best to be avoided. Already an endangered species, the printed daily newspaper and glossy magazine may just disappear from waiting areas, driven extinct by pandemic.

Even with multiple precautions in place, the rules for personal interaction will change. Shooting the breeze at the water cooler could be discouraged, either by removal of the water cooler, or phobias of getting too close to co-workers. Popping into a colleague's office for chat could now require a more formal process of asking in advance, "*may I come in?"* Trots around the office to get in daily steps or give personal attention to staff could be viewed as inconsiderate. Daily staff meetings may not resume around the conference table but continue to be over the phone or by video conference because of reluctance by one or more involved parties. The potential changes are many, but the point is that social distancing can be corrosive, with some people more risk adverse than others, creating opportunities for workplace tension to seep into previously comfortable relationships. The reminders of the risks will be everywhere, from increased cleaning regimes by janitorial staff and new protocols requiring handwashing.

What Can Employers Expect?

A return to the office from remote working does not equate to a return to business as usual. Productivity will not bounce back immediately. Employers will face a host of new situations, requiring decisions, policies and procedures that could be contested in the court of public opinion and the court of law.

Employers are not without resources. The Centers for Disease Control and Prevention (CDC) and Occupational Safety and Health Administration (OSHA) have provided guidance to employers for best practices.

The Office in the Time of Pandemic

Expect Increased Absenteeism

To reduce transmission among employees, the sick should be encouraged to stay home until they are well, in consultation of healthcare providers. Employees who are well but who have a sick family member at home with COVID-19 should notify their supervisor and follow CDC recommended precautions. Employers will need to be aware that some employees may be at higher risk for serious illness, such as older adults and those with chronic medical conditions. The CDC recommends minimizing face-to-face contact between these employees or assign work tasks that allow them to maintain a distance of six feet from other workers, customers and visitors, or to telework if possible.

If an employee falls sick at work, the individual should be immediately separated from other employees, customers, and visitors and sent home. If an employee is confirmed to have COVID-19 infection, employers should inform fellow employees of their possible exposure to COVID-19 in the workplace but maintain confidentiality as required by the Americans with Disabilities Act (ADA).

To maintain healthy business operations, the CDC recommends identifying a workplace coordinator who will be responsible for COVID-19 issues and their impact at the workplace. Firms could consider adopting flexible sick leave and supportive policies and practices that permit employees to stay at home to care for a sick family member or take care of children due to school and childcare closures. Additional flexibilities might include giving advances on future sick leave and allowing employees to donate sick leave to each other. The CDC suggests that employers that do not currently offer sick leave to some or all of their employees may want to draft non-punitive "*emergency sick leave*" policies.

The CDC suggests that employers should not require a positive COVID-19 test result or a healthcare provider's note for employees who are sick to validate their illness, qualify for sick leave, or to return to work. Healthcare provider offices and medical facilities may be extremely busy and not able to provide such documentation in a timely manner.

The Office in the Time of Pandemic

Expect to Revise Policies and Practices

The CDC recommends establishing policies and practices for social distancing and implement them if recommended by state and local health authorities. Social distancing means avoiding large gatherings

and maintaining distance (approximately 6 feet or 2 meters) from others when possible (e.g., breakrooms and cafeterias). Strategies that businesses could use include:

- Implementing flexible worksites (e.g., telework)
- Implementing flexible work hours (e.g., staggered shifts)
- Increasing physical space between employees at the worksite
- Increasing physical space between employees and customers (e.g., drive through, partitions)
- Implementing flexible meeting and travel options (e.g., postpone non-essential meetings or events)
- Downsizing operations
- Delivering services remotely (e.g. phone, video, or web)
- Delivering products through curbside pick-up or delivery

Employers with more than one business location are encouraged to provide local managers with the authority to take appropriate actions outlined in their COVID-19 response plan based on local conditions.

OSHA advises it is permissible to take employees' temperature during a pandemic, but employers must adhere to anti-discrimination laws when establishing policies and procedures. Employers must treat health information confidential.

Employers can support good hygiene practices by providing:

- Tissues and no-touch disposal receptacles
- Provide soap and water in the workplace. If soap and water are not readily available, use alcohol-based hand sanitizer that is at least 60 percent alcohol. Place hand sanitizers in multiple locations to encourage hand hygiene.
- Place posters that encourage hand hygiene to help stop the spread at the entrance to your workplace and in other workplace areas where they are likely to be seen.

The Office in the Time of Pandemic

- Discourage handshaking – encourage the use of other no-contact methods of greeting.
- Perform routine environmental cleaning and disinfection by routinely cleaning and disinfecting all frequently touched surfaces in the workplace, such as workstations, keyboards, telephones, handrails, and doorknobs.

Expect Bigger Changes

Employers will also need to consider larger transformations in the workforce and workplace. Faced with health risks, some employees will decide not to return to the workforce or seek jobs with fewer perceived risks or need to depend upon public transportation. Employees may seek to renegotiate their job requirements, becoming, for instance, permanent teleworkers. Additionally, some employers may find that a remote workforce makes their business more competitive, reducing overhead and increasing productivity.

Large corporations may decide that collocating hundreds of workers in one location is no longer desirable. The prestigious New York City address may come to have less value than having top tier professionals happily working from small offices, or home offices, in locations of their choice. If the pandemic results in a move away from international business travel, corporate locations near major airport hubs could migrate towards less congested and more travel-friendly airports.

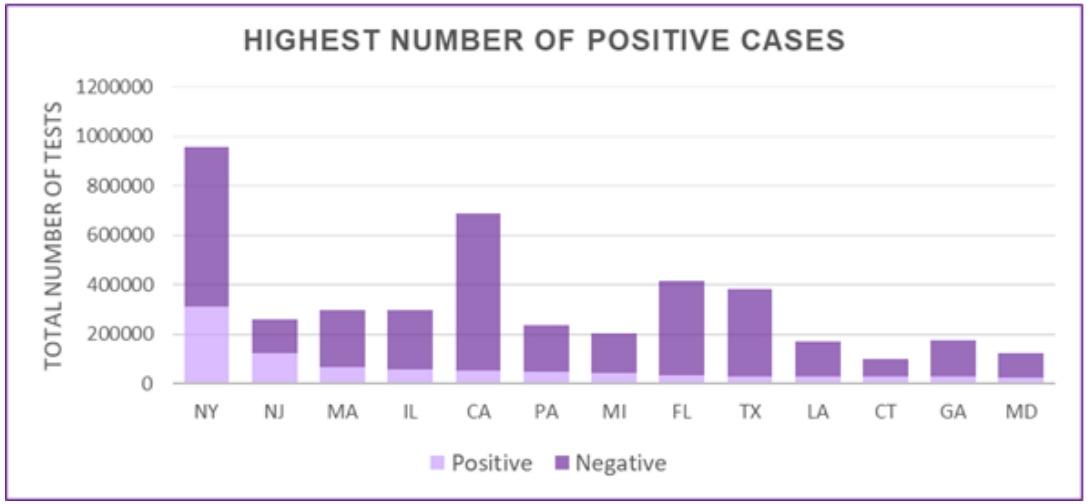
Big changes could be immediate or slowly evolve. Companies experiencing severe financial stress could see the need to implement radical changes immediately to stem losses or others may see the advantage of leveraging perceptions that change is required. Agents of change for the post-pandemic workforce and workplace will likely set new standards, albeit with risks to reputation should measures be perceived as exploitive or insensitive.

Data in Focus: Testing in US States

By Briana Boland

A key argument for lifting lockdowns at different rates in different states is based on the predication that each locality is facing a unique situation and should therefore have the flexibility to determine a localized pandemic response. Health experts have repeatedly pointed to expanded testing as critical to accurately assessing the COVID-19 situation across different areas. The testing positive rate, the percentage of total coronavirus tests that return positive, is seen as an important indicator of both the severity of an outbreak and how well a jurisdiction is able to capture the true spread of the coronavirus. Countries which have been pointed to for success in containing the pandemic have overall low rates: South Korea, Australia, and New Zealand all reached testing positivity rates of about 2 percent by the middle of April. Rates as low as 2 percent suggest that these governments are testing a wide enough array of the public to capture the true prevalence of the virus with relative accuracy. The US, on the other hand, has a high overall test positivity rate of approximately 20 percent. However, this number does not capture the nuance of testing on state-by-state basis, where positivity rates range from 89 percent to 6 percent.

The following charts draw data from The Atlantic's COVID Tracking Project, which compiles the majority of its data from state and local public health authorities, augmented by trusted new sources and official press releases. All data have been updated on or after the first of May.



It is unsurprising that the jurisdictions experiencing severe outbreaks also have high rates of testing positive, such as New York and New Jersey. Other areas with high rates could indicate that outbreaks and community transmission is more widespread than is reflected in the number of positive cases.

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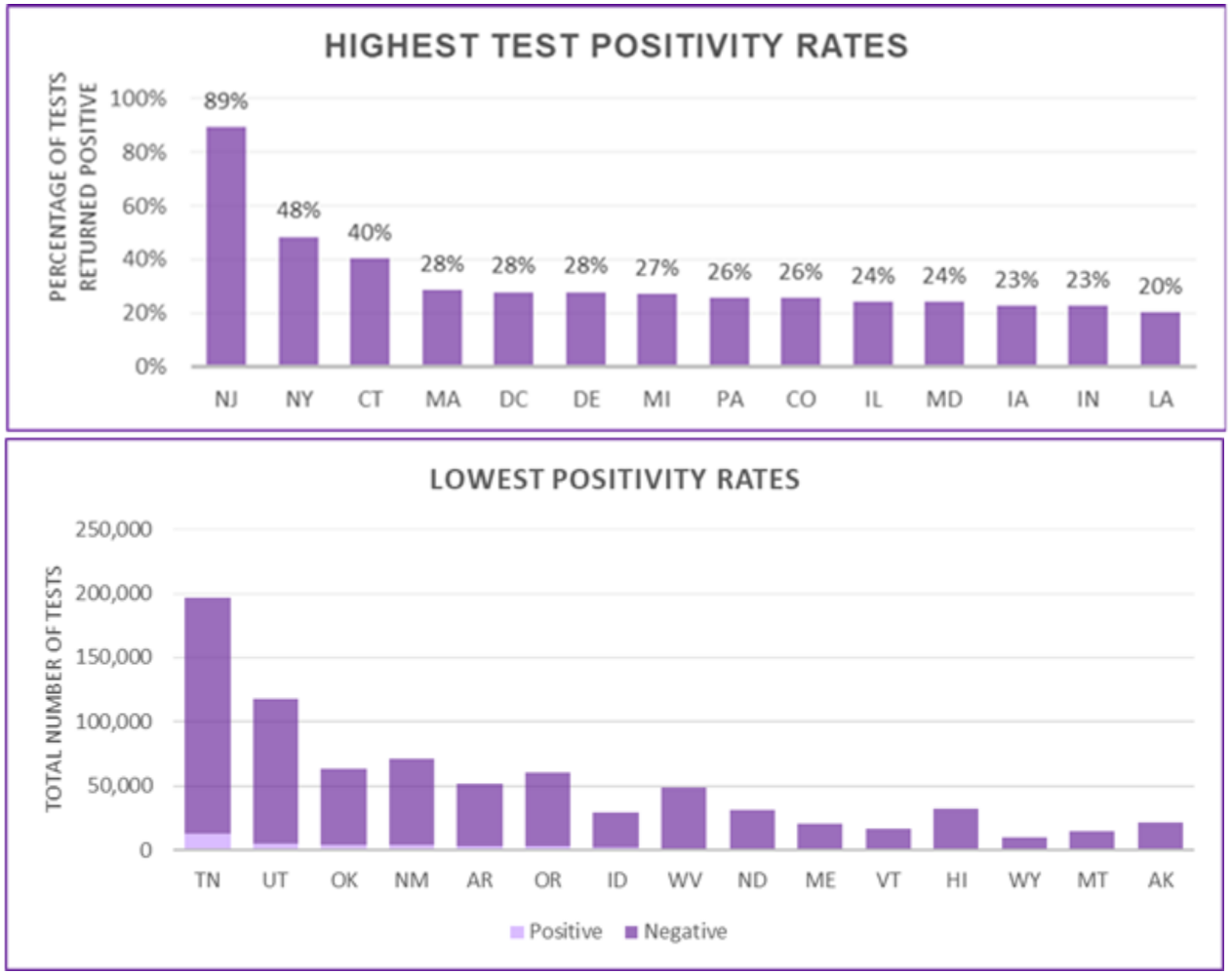

Note: This report is based on sources and information deemed to be true and reliable, but Dentons makes no representations to same.

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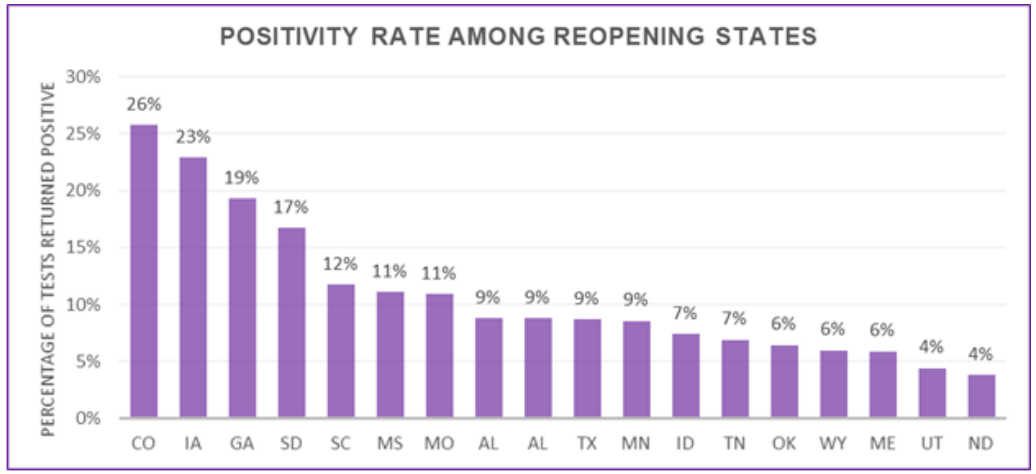
It is notable that the states with the lowest positivity rates also tend to have relatively low case numbers and have conducted relatively few tests. This raises the possibility that outbreaks have yet to reach those states or have not reached high levels of severity. However, the low number of tests overall in states like Wyoming or Vermont make it harder to have high confidence in this metric of virus spread.



Over the past week, several states began lifting lockdown measures. As many Americans are concerned that these decisions are being made too soon, positivity rate can serve as a useful metric to understand state readiness. A high positivity rate can indicate that a state may not have the testing capacity to fully capture virus transmission. It is also important to look into the reasons why a positivity rate may be so high – for example, a locality may only be testing hospitalized patients or the severely symptomatic. This can fail to capture community spread from asymptomatic or mildly symptomatic carriers.

Country Risk Assessment

VERY HIGH RISK (>5,000 cases)

Country	Active Cases	Confirmed (New)	Deaths (New)	Cases/ 1M Pop.	Deaths/ 1M Pop
US	910504	1158344 (25653)	67688 (1316)	3589	207
UK	158290	187608 (4341)	28509 (315)	2749	419
Russia	116768	134687 (10633)	1280 (58)	923	9
Italy	100179	210717 (1389)	28884 (174)	3485	478
France	92435	167272 (296)	24864 (135)	2584	381
Spain	73300	217466 (884)	25264 (164)	5285	540
Turkey	59497	126045 (1670)	3397 (61)	1495	40
Brazil	51784	101826 (4726)	7051 (290)	476	33
Netherlands	35515	40571 (335)	5056 (69)	2368	295
Canada	31788	60504 (2578)	3795 (111)	1576	98
Peru	31092	45928 (3394)	1286 (86)	1393	39
Belgium	29753	49906 (389)	7844 (79)	4306	677
India	29339	42505 (2806)	1391 (68)	31	1
Germany	28198	165664 (697)	6866 (54)	1977	82
Ecuador	24674	29538 (2074)	1564 (193)	1674	89
Saudi Arabia	22693	27011 (1552)	184 (8)	776	5
Portugal	22550	25282 (92)	1043 (20)	2479	102
Sweden	18633	22317 (235)	2679 (10)	2210	265
Singapore	16779	18205 (657)	18 (1)	3112	3
Pakistan	14513	20084 (981)	457 (17)	91	2

Data Source: Johns Hopkins University

VERY HIGH RISK (>5,000 cases)

Country	Active Cases	Confirmed (New)	Deaths (New)	Cases/ 1M Pop.	Deaths/ 1M Pop
Qatar	13875	15551 (679)	12 (0)	5398	4
Belarus	13410	16705 (877)	99 (2)	1768	10
Iran	12799	97424 (976)	6203 (47)	1160	74
UAE	11274	14163 (564)	126 (7)	1432	13
Japan	10409	14877 (306)	487 (13)	118	4
Ukraine	10077	11913 (502)	288 (9)	272	7
Chile	9362	19663 (1228)	260 (13)	1029	14
Poland	9070	13693 (318)	678 (14)	362	18
Indonesia	8471	11192 (349)	845 (14)	41	3
Bangladesh	8215	9455 (665)	177 (2)	57	1
Mexico	7870	23471 (1383)	2154 (93)	171	16
Serbia	7720	9464 (102)	193 (4)	1083	22
Norway	7604	7847 (38)	211 (0)	1447	39
Romania	7504	13163 (431)	790 (19)	684	41
Philippines	7402	9223 (295)	607 (4)	84	6
Ireland	6817	21506 (330)	1303 (17)	4355	264
Panama	6252	7090 (0)	197 (0)	1643	46
Israel	6227	16208 (23)	232 (3)	1873	27
Dominican Rep	6015	7954 (376)	333 (7)	733	31
Colombia**	5606	7668 (383)	340 (16)	151	7

** Indicates moved up a risk category

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Country Risk Assessment

HIGH RISK (1,000-5,000 cases)

Country	Active Cases	Confirmed (New)	Deaths (New)	Cases/ 1M Pop.	Deaths/ 1M Pop
Egypt	4474	6465 (272)	429 (14)	63	4
South Africa	4103	6783 (447)	131 (8)	114	2
Czechia	3946	7781 (26)	248 (3)	727	23
Switzerland	3643	29905 (88)	1762 (0)	3455	204
Morocco	3291	4903 (174)	174 (1)	133	5
Argentina	3183	4783 (102)	246 (9)	106	5
Kuwait	3169	4983 (364)	38 (5)	1167	9
Kazakhstan	2809	3920 (63)	27 (2)	209	1
Moldova	2614	4121 (69)	125 (1)	1022	31
Afghanistan	2274	2704 (235)	85 (13)	69	2
Algeria	2075	4474 (179)	463 (4)	102	11
Nigeria	2071	2558 (170)	87 (2)	12	0.4
Denmark	2052	9523 (116)	484 (9)	1644	84
Hungary	2029	2998 (56)	340 (5)	310	35
Finland	2024	5254 (78)	230 (10)	948	42

HIGH RISK (1,000-5,000 cases)

Country	Active Cases	Confirmed (New)	Deaths (New)	Cases/ 1M Pop.	Deaths/ 1M Pop
Ghana	1922	2169 (0)	18 (0)	70	0.6
Oman	1806	2568 (85)	12 (0)	503	2
Malaysia	1780	6298 (122)	105 (2)	195	3
Austria	1771	15597 (39)	598 (2)	1732	66
Puerto Rico	1711	1808 (51)	97 (2)	534	29
Bahrain	1657	3383 (99)	8 (0)	1988	5
Estonia	1386	1700 (1)	55 (2)	1282	41
Bolivia**	1352	1594 (365)	76 (10)	126	6
South Korea	1332	10801 (8)	252 (2)	211	5
Armenia	1316	2386 (113)	35 (2)	805	12
Bulgaria	1237	1618 (24)	73 (1)	233	11
Guinea	1174	1586 (0)	7 (0)	121	0.5
Greece	1108	2626 (6)	144 (1)	252	14
Slovenia	1102	1439 (0)	96 (2)	692	46
Cameroon**	1060	2077 (0)	64 (0)	70	0.6

Data Source: Johns Hopkins University

* Indications moved down a risk category ** Indicates moved up a risk category

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US Risk Assessment

VERY HIGH RISK (>5,000 cases)

Country	Active Cases	Confirmed (New)	Deaths (New)	Cases/ 1M Pop.	Deaths/ 1M Pop
New York	291707	316415 (3438)	24708 (510)	16509	1256
New Jersey	118873	126744 (3027)	7871 (129)	14348	888
Massachusetts	64083	68087 (1824)	4004 (158)	9969	586
Illinois	58881	61499 (2994)	2618 (59)	4797	204
California	52687	54903 (1556)	2216 (36)	1401	57
Pennsylvania	48505	51225 (731)	2720 (25)	4069	221
Michigan	39748	43801 (594)	4053 (32)	4394	407
Florida	34699	36078 (615)	1379 (15)	1752	67
Texas	31120	31998 (1081)	878 (15)	1147	32
Georgia	27481	28665 (334)	1184 (7)	2784	114
Louisiana	27328	29340 (200)	2012 (19)	6291	431
Connecticut	26851	29287 (0)	2436 (0)	8177	697
Maryland	24181	25462 (989)	1281 (30)	4241	213
Indiana	19,021	20267 (638)	1246 (17)	3003	188
Ohio	18875	19914 (579)	1039 (17)	1711	89
Virginia	18012	18672 (934)	660 (43)	2219	78
Colorado	15793	16635 (410)	842 (10)	3008	152

VERY HIGH RISK (>5,000 cases)

Country	Active Cases	Confirmed (New)	Deaths (New)	Cases/ 1M Pop.	Deaths/ 1M Pop
Washington	14351	15185 (182)	834 (4)	2163	115
Tennessee	12957	13177 (516)	220 (1)	1981	32
North Carolina	11336	11770 (182)	434 (3)	1156	43
Rhode Island	9157	9477 (188)	320 (24)	8969	303
Iowa	8991	9175 (532)	184 (9)	2927	59
Arizona	8278	8640 (276)	362 (32)	1244	52
Missouri	8237	8618 (262)	381 (5)	1385	62
Wisconsin	7625	7964 (304)	339 (5)	1378	59
Alabama	7598	7888 (277)	290 (1)	1621	60
Mississippi	7247	7550 (109)	303 (12)	2526	101
South Carolina	6351	6626 (137)	275 (8)	1337	55
Minnesota**	6245	6663 (431)	418 (24)	1205	76
Nebraska**	5583	5661 (344)	78 (5)	2971	41
Nevada**	5214	5472 (83)	258 (3)	1856	90
Utah**	5125	5175 (190)	50 (1)	1699	16
Delaware**	5031	5208 (170)	177 (9)	5485	186
Kansas**	5012	5156 (271)	144 (2)	1683	49

Data Source: Johns Hopkins University

** Indicates moved up a risk category

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US Risk Assessment

HIGH RISK (1,000-5,000 cases)

Country	Active Cases	Confirmed (New)	Deaths (New)	Cases/ 1M Pop.	Deaths/ 1M Pop
Kentucky	4877	5130 (249)	253 (0)	1155	57
DC	4765	5016 (219)	251 (11)	7328	367
Oklahoma	3734	3972 (121)	238 (0)	1014	61
New Mexico	3699	3850 (118)	151 (13)	1840	72
Arkansas	3361	3437 (65)	76 (4)	1147	25
South Dakota	2610	2631 (43)	21 (0)	3044	24

HIGH RISK (1,000-5,000 cases)

Country	Active Cases	Confirmed (New)	Deaths (New)	Cases/ 1M Pop.	Deaths/ 1M Pop
Oregon	2571	2680 (45)	109 (0)	657	27
New Hampshire	2432	2518 (89)	86 (2)	1874	64
Idaho	1997	2061 (0)	64 (0)	1221	38
North Dakota	1166	1191 (38)	25 (1)	1583	33
West Virginia	1147	1195 (10)	48 (0)	653	27
Maine	1128	1185 (32)	57 (1)	889	43

Data Source: Johns Hopkins University

Contacts

This summary is based on reports sourced from among the 75 countries in which Dentons currently serves clients as well as from firms in other locations, some of which will formally join Dentons later in 2020. We are pleased to share this complimentary summary and contemporaneous assessment, with the caveat that developments are changing rapidly. This is not legal advice, and you should not act or refrain from acting based solely on its contents. We urge you to consult with counsel regarding your particular circumstances.

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