

VBCMh: COVID-19 Preparedness & Response Plan: Reopening Public

SUMMARY

The first 2 pages of this plan provides a summary of key points of the plan. This plan is VBCMh's operating procedure in response to the novel coronavirus pandemic. Employees are expected to follow all of the guidelines and procedures described in this plan.

Summary of key actions to mitigate spread of the virus as VBCMh returns to work

The first line of defense is to ensure you engage in universal precautions. **Everyone is required to be vigilant in best practice infection control practices, no matter where you work.**

Universal Precautions

1. Sanitize your hands often.
2. Practice social distancing: Stay at least 6 feet away from others.
3. Wear a face covering /mask in public.
4. Cover coughs and sneezes with your elbow.
5. Disinfect surfaces and belongings
6. Stay home if you feel sick.

Return to face to face services and in office work processes will be gradual.

Additional Actions to promote health and safety

- Remote work/work from home will continue to be encouraged as much as feasible even as face to face services increase in the community and in VBCMh offices.
- Delivery of services through remote means (tele) will continue as allowed by state rules if benefitting the client.
- Numerous actions are being taken to ensure social distancing inside our buildings including:
 - Staff meetings and trainings should continue to occur through telecommunications.
 - The number of employees permitted in any work room, breakroom, or shared restroom shall be limited according to room size to ensure social distancing restrictions can be followed. Posted signs will designate maximum number allowed in these rooms.
 - Face masks are required as medically tolerated when in enclosed spaces and may come within 6 feet of others.
 - Employees are expected to minimize COVID-19 exposure by avoiding handshakes or other physical contact.
- Enhanced hygiene and disinfection will occur including
 - Employees will be provided with access to places to frequently wash hands or to use hand sanitizer and the time to do so.

- Customers and visitors will have access to hand sanitizer at entrances.
 - Increased cleaning and disinfecting of surfaces, equipment, and other elements of the work environment will be performed at least twice a day using products containing EPA-approved disinfectants. For some larger locations, contracted cleaning crews may be utilized and other locations, all staff will need to pitch in and cleaning will be tracked on the cleaning sheet for public spaces.
 - Employees will be provided with access to disposable disinfectant wipes and/or spray so that any commonly used surfaces can be wiped down after each use.
 - Shared equipment will be minimized but employees using shared equipment or agency vehicles must disinfect all surfaces that might be touched both before and after each use.
- Employees coming into VBCMh sites or providing face to face services in the community are required to complete a health screening before leaving home **via the link emailed each day**. This is not considered work time. The screen includes symptom and temperature checks. Employees with symptoms are to remain home and contact their supervisor.
 - Customers and visitors will be health screened before face to face services and at VBCMh buildings.
 - Guidance and training on COVID-19 practices, such as PPE usage, as required will be provided to staff.
 - In the event anyone who tests positive for COVID 19 has been in a VBCMh building or vehicle in the past 14 days, VBCMh will undertake appropriate cleaning and disinfecting measures based on consultation with an infectious disease certified organization trained in disinfecting for COVID 19 and will notify persons who have had contact.

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VBCMh COVID-19 Preparedness & Response Plan

In order to respond to the current state of emergency related to COVID-19 and to comply with relevant state and local orders VBCMh has developed the following COVID-19 Preparedness and Response Plan focused on gradually reopening. This Plan will be updated as this situation evolves and as state or local orders and guidance related to COVID-19 are issued or amended.

This plan is VBCMh's operating procedure in response to the novel coronavirus pandemic. Employees are expected to follow all of the guidelines and procedures described in this plan.

As in earlier phases of this pandemic and plan, our primary objectives remain the same and are to prevent the spread of COVID-19 in our community, while ensuring the behavioral health needs of our customers and those seeking our services are met. Addressing the needs of our community will create challenges that call for creativity and innovation. That means nothing less than our very best is in order to meet these challenges. Although our response plan will continue to change, our values of safety and high-quality services will remain.

This plan complies with the requirements in previously issued Executive orders and with the replacement orders from the Director of the Michigan Department of Health and Human Services (MDHHS) and will continue to abide by an rules put in place in the state as well as following public health guidance. VBCMh will continue to strive to meet the community's mental health needs while reducing the risk of infection to our clients, staff and our community.

Please be advised this document is subject to change as the information in this document is based upon recommendations which continue to change and from staff input. The State of Michigan's MI Safe Start plan is available to staff in the !COVID 19 folder in the shared drive and on the state's website. As our region moves through these phases, guidance in this document may be updated. All updates to this document will be disseminated by the CEO.

This plan (minus staff only resources) and summary information relevant to the community will also be posted on the public portion of the VBCMh website so that it is accessible to the community.

To report unsafe working conditions please complete an Employee Incident Report and contact your supervisor, and the onsite staff person designated to implement, monitor, and report on the COVID-19 control strategies. This designated staff person must be onsite and may change. The designated staff person will be listed by building on the staff sign in sheet located on the shared drive.

Below are the safety measures VBCMh plans to take as we cope with the pandemic and continue to serve our community. The measures are in line with the CDC guidance, Michigan's MI Safe

Start plan, MDHHS, Michigan's Association of Local Public Health and Van Buren Cass District Health Department guidance.

An onsite designated staff person to assist with monitoring, reporting and implementing compliance with this plan will be designated each day by site.

Universal Precautions

The first line of defense is to ensure you engage in universal precautions. **Everyone is required to be vigilant in best practice infection control practices, no matter where you work.**

1. **Sanitize your hands often.** Wash your hands thoroughly and frequently. Use hand sanitizer when soap and water is not available.
2. **Practice social distancing: Stay at least 6 feet away from others.** For those who cannot maintain social distancing to complete work tasks, use Personal Protective Equipment (PPE) as appropriate.
3. **Wear a face covering /mask in public.** Any individual able to medically tolerate a face covering must wear a mask over his or her nose and mouth when in any public space. Staff shall utilize acceptable cloth masks when at agency sites when they will be potentially within the 6-foot social distance from other people. Masks should be multiple layers of cloth when medical masks are not called for. Masks are available to staff, customers and required visitors to our buildings.
4. **Cover coughs and sneezes with your elbow, and don't touch your face.**
5. **Disinfect surfaces and belongings:** Wipe down your workspace and other frequently touched surfaces with disinfectant
6. **Stay home if you feel sick.** If you display any symptoms while at an office, you will be asked to go home. We are asking staff to be symptom free for at least 3 days prior to returning to an office. Any employees who are sick or showing symptoms of COVID 19 are asked to stay at home and notify their supervisor. If they have symptoms of COVID 19, they should contact their health care provider for guidance.

Coping with stress and self-care

Coping with all the changes both in our work and outside of work during these past few months has been stressful. Beginning to return to work also brings many changes and thus additional stress. Many people have experienced a wide range of feelings over the past few weeks and will likely continue to do so in the coming weeks and months - It's normal and okay to feel an array of emotions during times like now. You might feel a lot of different emotions from fear to anger to anxiety and even depression, and at times you may feel hopeful and happy to begin to return

to how life used to be. And your feelings may change from day to day. It's important to give yourself an opportunity to check in with how you're doing.

While you are practicing good hygiene and physical distancing, it is also important to practice self-care and stress reduction. Working in a COVID-19 world is not “normal”! Regular focus on healthy coping is always important, but even more so now. Coping strategies will not always feel natural, but they are science-driven pathways to becoming a healthier person. The four pillars of self-care consist of:

- Regular sleep schedule;
- Healthy balance of nutritious foods;
- Regular exercise and stay somewhat physically active during your day; and
- Maintain/build positive social support and close relationships with loved ones.

Other helpful strategies:

- Get outside / spend time in nature every day
- Regularly practice mind-body-spirit based activities: yoga, tai chi, mindfulness, meditation
- Engage in patterned, repetitive motor activities: deep breathing, music, dance, yoga, tai chi, drumming, tapping
- Avoid alcohol, tobacco and drugs

Stress is a normal psychological and physical reaction to the demands of life, and COVID-19 has certainly added additional demands. Everyone reacts differently to difficult situations, and it's normal to feel stress and worry during a crisis. Multiple challenges daily, such as all the impacts and the effects of the COVID-19 pandemic, may push you beyond your ability to cope. Despite your best efforts, you may find yourself feeling helpless, sad, angry, irritable, hopeless, anxious or afraid. You may have trouble concentrating on typical tasks, changes in appetite, body aches and pains, or difficulty sleeping or you may struggle to face routine chores. When these signs and symptoms last for several days in a row, make you feel miserable and cause problems in your daily life so that you find it hard to carry out normal responsibilities, it's time to ask for help.

Recognize your feelings and understand that if it gets to the point where it's debilitating and preventing you from going on with your day, you might want to reach out for help, and again, that's okay. We've gone through a lot of change already and that was hard to handle. Now, we are starting to change again. Be kind and patient with yourself and with others.

Additional resources on coping with stress and emotional support and wellbeing can be found in the Appendix of this document and in the !COVID 19 folder under Public Resources.

Enhanced Social Distancing

Persons with COVID 19 are contagious when asymptomatic and/or pre-symptomatic , thus social distancing and universal precautions are important.

Supervisors will direct employees to perform their work in such a way to reasonably avoid coming within six feet of other individuals. Where possible, employees may be relocated or provided additional resources in order to avoid shared use of offices, desks, telephones, and tools/equipment.

The number of employees permitted in any work room, breakroom, or shared restroom shall be limited according to room size to ensure social distancing restrictions. Posted signs will designate maximum number allowed in these rooms.

Employees on site at VBCMh buildings should remain in their assigned work areas as much as possible. Call or email rather than visit in person to accomplish a task.

Remote work/work from home will continue to be allowed even as face to face services increase in offices and the community. Supervisors in collaboration with Division Managers will determine criteria for when office and community face to face services will resume making remote work a less frequent privilege.

Delivery of services through remote means (tele) will continue as allowed by state rules if benefitting the client. Currently the waiver allowing for services through tele means has been extended until further notice.

Furniture in waiting rooms will be spaced to allow for social distancing. Other measures shall be taken to reduce the number of persons in waiting rooms as determined by supervisors on-site and Executive Team (ET) such as programs could stagger schedules to reduce number of people in waiting rooms.

Distancing markers will be placed in areas where more than one person may be waiting.

Staff meetings and trainings should continue to occur through telecommunications. Instructions for free conference calling for staff meetings from home, from office phones and from Android cell phones has been sent out and posted in the shared drive.

Employees whose job duties regularly require them to be within six feet of members of the public will be provided with appropriate personal protective equipment (PPE) or physical barriers commensurate with their level of risk of exposure to COVID-19. Installation of plastic shields or use of face shields will be utilized.

Employees shall avoid handshakes or other physical contact which brings them closer than 6 feet of another person during the course of their work.

Where possible, VBCMh will offer alternative work schedules (remote, part time, vary on-site work days or hours among employees) to allow for social distancing within office buildings.

Non-essential travel continues to be prohibited, such as conferences. Travel should be approved in advance by supervisors. If an in person training is required to carry out essential job functions, permission should be sought through direct supervisor from Division Manager. Permission will only be granted when there is no other alternative for completing the training.

Employees should limit visits to other VBCMh sites. Participation by staff other than the psychiatrist in med reviews should continue as much as feasible through tele means.

Any need to be at a VBCMh site to which an employee is not assigned should be by appointment. Appointment should be made with the designated site Utilizing non primary office site for access to a computer is discouraged.

Employees without access to their primary assigned work site (such as New Outlook, CSDD) and without consistent ability to work from home will be assigned a new temporary work site as needed.

Face coverings:

As stated above, face coverings are required for employees when they might come within 6 feet of others and aligns with the requirements which requires everyone to wear masks in public settings.

If an employee cannot medically tolerate a mask, please provide medical documentation of this and contact Human Resources to request an accommodation.

Only staff with an approved accommodation should be in any public portion of a VBCMh building (outside of their private office) without a mask.

A face shield is not considered to provide equal protection as a mask and is generally worn with a mask. Masks made only of plastic are not as effective as cloth masks at reducing transmission of COVID-19. **Plastic masks, sometimes referred to as Chef's Masks, may not be worn in place of a cloth mask without medical documentation that an employee cannot tolerate wearing a cloth mask. There are also inserts available online that assist in expanding the area around the mouth and nose which may make wearing the mask more tolerable.**

Masks reduce the risk of transmission via droplets emitted during talking, breathing and coughing. Wearing a mask provides protection to others if one is an asymptomatic or pre-symptomatic carrier of the coronavirus. Masks may provide some protection to the wearer.

Masks are required to cover the nose and mouth and secure under the chin and should be multiple layers of fabric. Tightly woven cotton is considered the best fabric for a cloth mask.

The best ways to determine if the mask is good is if light passes through the fabric then it is not a protective face covering. If you can clearly see through the fabric or make out what is on the

other side, or if you can easily blow out a candle while wearing the mask it does not meet the recommendations for an effective mask.

Cloth face masks should be washed after each use, and recommendations from the VBCMh training related to face mask use should be followed.

Masks are worn because they are required by the state and VBCMh.

Masks are required because we care about others.

VBCMh has masks available for staff and customers who do not have one.

Guidance on how to wash, put on, and take off a non-medical face covering is part of the required training provided by VBCMh via HR PowerPoint.

In compliance with EO 2020-145, signs stating that face masks are required will be posted at all VBCMh sites.

If a customer arrives for an appointment at VBCMh building or in the community without a mask, a mask will be offered. If the mask is refused for any reason, the screening procedure will be followed and a decision will be made about providing services.

Staff serving customers in the community should travel with extra masks so a mask could be provided if needed.

Staff are responsible for bringing a mask for their use every day and assuring masks are washed regularly using water and a mild detergent, dried completely in a hot dryer and stored in a clean container or bag.

When entering community sites or other agency's buildings, staff will comply with the site's rules on wearing a mask or the above, whichever is more stringent.

Additional information and guidance on wearing a mask are included in required staff training and in the appendix.

Enhanced hygiene and disinfecting

As stated in the universal precautions, employees are instructed to wash their hands frequently, to cover their coughs and sneezes with a tissue or into their elbow if a tissue is unavailable, and to avoid touching their faces.

Employees will be provided with access to places to frequently wash hands or to use hand sanitizer and the time to do so.

Customers and visitors will have access to hand sanitizer at entrances. Hand sanitizers shall be placed in multiple locations to encourage good hygiene.

Employees will also be provided tissues and places to properly dispose of them.

Signs regarding proper hand washing methods will be posted in all restrooms.

Increased cleaning and disinfecting of surfaces, equipment, and other elements of the work environment will be performed each evening using products containing EPA-approved disinfectants.

Each building will be cleaned at least twice per day. For some larger locations, contracted cleaning crews may be utilized and other locations, all staff will need to pitch in and cleaning will be tracked on the cleaning sheet for public spaces.

Each day a single staff will be assigned this responsibility for each for larger locations as part of Screener Role and Screener Checklist. Staff assignment will be based on schedule and workload (not based on position). A daily task list and schedule for each location will be developed and followed. Supervisors of assigned staff are responsible for monitoring whether staff are following the task list and schedule as needed.

Proper disinfection (wipes/spray) and cleaning is mandatory especially for high traffic areas and frequently touched items such as countertops, entrance/exit doors, handles, bathrooms.

Individual staff are responsible for cleaning their own office plus any conference room or clinical space / shared space after each use in addition to the nightly cleaner's cleaning.

Employees will be provided with access to disposable disinfectant wipes and/or spray and paper towels so that any commonly used surfaces can be wiped down after each use.

Employees using agency vehicles must disinfect all surfaces that might be touched both before and after each use.

VBCMh limits the sharing of equipment and/or conference rooms. Should any sharing of equipment/conference rooms be required, employees must disinfect and clean each piece of equipment before use and following use.

Staff shall avoid using other workers' phones, desks, offices, or other work tools and equipment, when possible. When shared equipment must be used, sanitize with disinfectant wipes both before and after use.

Items that are generally touched and shared should be considered for removal or setting up an alternative process, such as removing toys and magazines from waiting rooms, and reworking processes so fewer papers or pens are shared or passed between people.

For example: Canisters for used pens will be provided where pens are handed to customers for use. The canisters are for pens after use. Pens are to be disinfected before allowing another person to use it.

In the event that an employee that has been in the workplace in the past 14 days tests positive for COVID-19, VBCMh will undertake appropriate cleaning and disinfecting measures based on consultation with an infectious disease certified organization trained in disinfecting for COVID. These measures involve fogging of an EPA-registered disinfectant solution, detailed cleaning of horizontal and vertical surfaces, and direct application to vertical and horizontal surfaces with the same EPA-registered disinfectant solution.

Controls including the installation of high-efficiency air filters, increased ventilation rates are being explored with building owners. Where the above is not feasible, the effectiveness/impact of air purifiers is being explored.

Please consider limiting share items and cleaning items when used, like refrigerators and microwaves.

Controls including the installation of high-efficiency air filters, increased ventilation rates have been explored with building owners and adjustments made as indicated.

Personal Protective Equipment (PPE)

VBCMh shall provide and make available to all employees recommended PPE. All employees must wear a covering over his or her nose and mouth when in public space.

PPE may vary especially for staff that may need additional protection against blood, body fluids, chemical, and other materials to which they may be exposed. Additional PPE may include medical/surgical gowns, fluid-resistant coveralls, aprons, or other disposable or reusable protective clothing, goggles, face shields, gloves and/or cloth masks.

PPE Usage Guide

At all times

- Staff should wear a mask as previously described
- Staff should maintain 6 feet of distance with all other people
- Wash or sanitize hands after contact with any shared surface or other person
- Clean shared objects (door handles, pens, refrigerators, microwaves, copiers) or use a tissue to touch shared objects or limit sharing
 - remove staplers and scissors from workrooms to limit shared objects

When staff cannot maintain 6 feet of distance (examples include joint transportation in car)

- Staff should also wear gloves
- Require others (clients, parents, visitors) to wear mask
- Consider wearing a jacket or scrub that can be removed after contact
 - If you are wearing a reusable covering please consider the following:
 - Remove once exposure is completed and place in a bag for transporting to launder. Do not allow used scrubs to be laying on chairs or hanging in an office after use. Do not re-use the next day without being laundered,
 - At the end of the day/week, that bag should be taken home to be laundered.

Person to Person Contact (examples include shots)

- Gown, and Face Shield should be worn in addition to mask, and gloves

Contact with person with symptoms or possible COVID-19

- Approval by medical or supervisor staff (situation specific plan developed).

VBCMh recommends that staff wash masks, and clothing nightly at home that may be contaminated. While there is no conclusive direction at this point of how long the virus can live on fabrics after exposure it is the safest method to assume contamination and limit spreading the virus between locations.

How to Use PPE:

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/using-ppe.html>

Training for staff

Guidance and training on the following will be provided to staff and staff are required to complete training on

- Workplace infection-control practices.
- The proper use of personal protective equipment.
- Steps the employee must take to notify VBCMh of any symptoms of COVID-19 or a suspected or confirmed diagnosis of COVID-19, and
- How to report unsafe working conditions.

Employees are required to complete the trainings assigned and send a Training Attendance Form.

Health Screenings

Employees' Self-Monitoring-

Persons with COVID 19 are contagious when displaying symptoms (and when not displaying symptoms) thus it is important to isolate when showing common symptoms associated with COVID 19.

Employees must complete and submit required Health Screening prior to entrance to VBCMh buildings or providing face to face services in the community.

VBCMh staff reporting for work at a VBCMh site **MUST be symptom-free.**

- Please do not report for work if you have any symptoms that could indicate COVID-19.
- Please do not report for work if anyone in your household has any of COVID-19 symptoms.
- Please do not report for work if you have had unprotected (no use of PPE and/or social distancing for a prolonged period of time which is more than 10 minutes) contact with a person with a confirmed case of COVID 19 until 14 days have passed since your contact, if you are symptom-free. Please do talk with your PCP or the Health Department to determine if testing is needed.
- *If you have any symptoms, please notify your supervisor and Human Resources.*

We want to avoid the spread of other illnesses as well during this time. Overall, we are recommending the staff, or their family members/guests not go to an office when experiencing any illness or symptoms. Remote work from home may be possible if the work is available and if the staff member is willing.

Do NOT come to work in the following instances:

- Employees who display COVID-19 symptoms, such as fever, new or worsening cough, shortness of breath, sore throat, new loss of smell or taste, and/or gastrointestinal problems, including nausea, diarrhea, and vomiting, whether or not accompanied by a formal COVID-19 diagnosis, or;
- Employees who, in the last 14 days, have had close contact with and/or live with any person having a confirmed COVID-19 diagnosis, or;
- Employees who, in the last 14 days, have had close contact with and/or live with any person displaying COVID-19 symptoms, such as fever, new or worsening cough, shortness of breath, sore throat, new loss of smell or taste, and/or gastrointestinal problems, including nausea, diarrhea, and vomiting, or;
- Employees who have traveled to areas that are experiencing a large volume of cases.

Close Contact is defined by the CDC as:

On October 21, 2020, the Centers for Disease Control and Prevention (CDC) released an updated definition of “close contact” for purposes of determining whether someone should quarantine following a suspected or confirmed exposure to people with possible COVID-19. Under the latest definition, a person is a “close contact” if the person was:

- Within six feet of an infected person;
- For a cumulative total of 15 minutes or more; and
- Over a 24-hour period starting from two days before illness onset (or, for asymptomatic patients, two days prior to test specimen collection) until the time the patient is isolated.

Against this framework, an individual who has multiple, short encounters with an infectious person (e.g., three five-minute exposures within a 24-hour period) is now considered to have

“close contact” for contact tracing purposes. This definition represents a significant departure from guidance provided by various local public health departments.

The CDC also reaffirmed other factors to consider when identifying close contacts for contact tracing purposes, including:

- Proximity;
- The duration of exposure;
- Whether the infected individual has symptoms;
- If the infected person was likely to generate respiratory aerosols; and
- Other environmental factors.

Finally, the CDC further advised that close contact determinations should be made irrespective of whether the contact was wearing respiratory personal protective equipment.

Employee Self Screening

Employees on-site or providing face to face services in the community shall complete a self-check prior to leaving home and report as directed. Confidential electronic means of reporting shall be implemented. The electronic screening is preferred before coming into the office. If this is not possible then staff should complete the questions from a paper form before leaving home and copy answers into the electronic tracking when they are in the building. The questions need to be answered and reviewed before a person heads to the building or providing a service.

Each employee is responsible for monitoring his/her own health and taking appropriate actions based on his/her knowledge of his/her health and seek medical help as appropriate. If feeling ill employees should not come to the building or participate in work activities that expose others.

Employees are expected to continue to monitor their health throughout their shift. If an employee begins to feel sick after arrival, please call your supervisor, Division Manager or Human Resources.

When entering community sites or other agencies’ buildings, staff will comply with the site’s screening protocols.

Customers coming to VBCMh buildings for services -

Prior to a scheduled service, staff will whenever possible call all clients and/or responsible person accompanying them (e.g. parents, guardians, caregivers, etc.) approximately 24 hours prior to any face to face contact/appointments or meetings and ask the screening questions listed in the COVID-19 Visitor Screening Procedure. If the customer and any necessary person accompanying them pass these screening questions, they will be reminded of their appointment time and provided additional guidance on building procedures including being asked if they have a face covering or will need us to provide a face mask. Customers will be asked to limit additional

persons accompanying them to as few support persons as possible. All visitors will also be screened before entering the building.

Prior to entering any building/office space all clients and other persons accompanying them must be asked the screening questions and have a temperature taken with an automatic, no-touch infrared forehead thermometer to rule out fever. If a person refuses to participate in the screening process, access to the building will not be allowed, explaining politely that the current state rules require that we switch their services to telehealth or delay them until participation in the screening can occur. If assistance is needed, call the onsite designated staff person to assist.

Screening prior to Face to face services in a customer's home or community setting-

Prior to a scheduled service staff will whenever possible call all customers and/or responsible persons (e.g. parents, guardians, caregivers, etc.) approximately 24 hours prior to any face to face contact appointments or meetings and ask the screening questions listed in the COVID-19 Client Screening Procedure . Screening questions should be asked about all persons in the home. If the person and persons in the home pass the screening questions, customer/responsible person will be reminded of the appointment time and provided additional guidance on service procedures.

For services in the customers' homes, all persons in the home should be screened before entering. All persons in room where service is taking place need to wear a mask. If persons are not willing, the service should take place elsewhere or through tele means or rescheduled.

If customer/others are not able to wear a mask, additional PPE for staff should be worn. Please consult with supervisor if questions.

Visitors

No visitors will be allowed in the workplace unless they are deemed essential. All visitors entering the building shall be screened prior to entering the building. The VBCMh Entry Screening form should be utilized to decide if the visitor can enter the building.

If a visitor presents with symptoms of COVID-19 or answers yes to any of the screening questions, they will not be allowed access to the building and will be instructed to seek medical care or call the COVID-19 Hotline. The incident will be reported through the Incident reporting system. If assistance is needed, call the onsite designated staff person to assist.

VBCMh requires any member of the public as medically appropriate to wear a face covering over their nose and mouth while at any VBCMh facility.

Workplace Flexibilities and Potential Benefits for Employees Affected by COVID-19

Employees are permitted to take paid leave consistent with VBCMh's procedures.

As this crisis and our response evolves, the following modifications to previously approved enhancements and flexibilities have been approved.

➤ Payment for Available hours (COVID hours)

The Board approved on March 20th and renewed at the April and June meetings to pay staff for hours they are available to work but there is no work assigned to them. This flexibility assured the retention of the workforce during the phases of the pandemic when face to face work was not advised. The Board approval for paying for available time was granted through September 14th. The Board approved an extension through the end of the month of September to ensure a smooth transition for all positions to full schedule of work.

Only if the Governor moves the region backwards in the phase of recovery or risk assessment described in her Mi Safe Start plan, would the possibility of approving payment for available time or COVID hours be considered. Currently the region is in phase 4, medium high risk.

Should the region be moved backwards into high risk, the guidelines for payment for available time would remain as previously described.

➤ COVID-19 Illness Leave

In an effort to protect staff from loss of income when affected by the current health pandemic, the Employer proposes to provide an additional five (5) days of COVID Illness Leave for use between June 9-September 30, 2020. COVID-19 Illness leave availability is extended until the April board meeting, April 12, 2021, at which time a decision could be made to end or continue the availability of this leave.

The guidelines for use of this leave time remain:

Eligible Employees: Bargaining and Non-Bargaining Unit, Regular Full and Part-Time staff, working at least 30 hours per week, including Probationary Employees.

Crediting of Time: COVID Illness Leave shall be made available to eligible employees on June 9, 2020 [or date of hire thereafter] in a lump sum amount of five (5) days [pro-rated for part-time employees]. Such leave shall be deemed fully earned on the date credited. Any unused COVID Illness Leave shall expire at the end of April 12, 2021. There shall be no pay-out or roll-over of unused time.

Eligible Uses: COVID Illness Leave may be used in 15-minute increments by staff:

- *Experiencing COVID-19 symptoms or who have been diagnosed with COVID-19*
- *Acting as the primary caregiver to a household member who has COVID-19 symptoms or diagnosis*

Conditions and Limitations on Use: Employees must exhaust all other available, accrued paid leave prior to accessing COVID-19 Illness Leave.

Notification of Intent to Use: Employees shall inform his/her immediate supervisor or designee of the intent to use COVID Illness Leave in advance of their scheduled shift. An employee who has tested positive for COVID-19 must notify their supervisor to comply with any mandatory reporting to the Public Health Department.

➤ **Voluntary, Temporary Full or Partial Unpaid Lay-Off**

This option lapses 9/30/20 as the agreement with the health insurance company and the union lapses at that time.

➤ **Required Premium Pay**

The Governor and the Michigan Department of Health and Human Services (MDHHS) are requiring a \$2 an hour temporary premium pay. The state originally required these payments for the period of April 1 - June 30th for workers providing specified face to face direct care services. The state extended the period to September 30th and, recently extended it again through December 31, 2020. Services must be provided face to face (as opposed to through tele means.) We appreciate the work of these staff during the pandemic.

➤ **Rule waivers**

The rule waivers that were previously adopted were all in favor of the staff affected (giving more flexibility not taking any benefit away,) and have been administered equally for all who might be affected. As the crisis has extended but evolved, the following are now in effect:

- Staff may use ANY accrued leave time available to them if unable to work due to **their own COVID-19 symptoms or diagnosis, the COVID-19 symptoms or diagnosis of a household member, or a requirement by the Employer to quarantine.** Previously this was more vaguely stated as *for reasons related to the pandemic.*
- The option allowing staff to request to use **UNPAID leave**, even if accrued time is available, for reasons related to the pandemic is **ended.** Taking unpaid leave in this way could cause issues with health insurance eligibility.
- On-call employees will be paid the set fee for documented and necessary crisis intervention, currently listed as when face to face when completing an inpatient hospital pre-screening over the phone or by other tele means will continue.

As we continue to evaluate the safety needs of our staff and community while being able to effectively deliver needed services, the supervisor and division manager may require some tasks to be performed remotely and in-person. Staff interested in limiting time working on-site are encouraged to discuss with their supervisor what work can be effectively performed remotely. Supervisors may consider assigning alternate tasks, that are not the staff person's traditional duties but are within the scope of their classification, which can be performed remotely or at an alternate work site.

VBCMh will not discipline, discharge or retaliate against an employee who stays home or leaves work when they are at risk of infecting others with COVID-19. Requirements of VBCMh procedures including notification of supervisor are applicable. Not every concern related to COVID-19 is applicable under this clause; please consult with Human Resources.

Mileage

- Staff may be reimbursed for approved mileage incurred Jan-April 2020 that is older than 90 days. The travel voucher must be approved by supervisor and submitted by July 27th by email to Payroll. Any travel incurred in or after May will be subject to the 90 day deadline outlined in the Travel Conference Procedure (III.08). **Please note** the following as procedure for mileage as face to face services begin while employees continue to work remotely: Employees working remotely have a designated official work office. Employees will not receive a mileage reimbursement to travel from the remote work location to the designated official work office. Mileage reimbursement will be made for travel to field assignments. Reimbursement will be based from the remote worksite to the field assignment and return **but in no case will such mileage charge exceed the amount had the assignment started and terminated at the designated official work office on a per day basis.**

An employee's work office would be what it was at the time they began remote work (HFRC, HSB, etc) or temporarily for CSDD employees, the Depot. When traveling to a field assignment from home an employee would need to reduce the mileage by the miles from/back to home and work.

Need to quarantine if travel to areas with high positive rates of COVID 19

Due to the various risk levels and infection rates in other states, VBCMh is adopting a recommendation that those staff who leave the state will work with their supervisor and the COVID-19 task force to determine a plan for face to face services. VBCMh recommends no face to face services or return to the building occur until an appropriate quarantine period has taken place **should they travel to a high-risk area.** Staff should report vacation locations via the Employee screening survey and to their supervisor. Staff who visited an area that is seeing a spike with COVID-19 cases will need to stay home for a period of up to 14 days and monitor your health. VBCMh will work with individuals in this situation on a case-by-case basis and may offer remote work options or you may use available paid leave time to cover any time you are unable to work.

The information on risk levels will be utilized to determine what states are considered high risk and will require staff to self-quarantine for 14 days before return to any VBCMh office building or vehicle or having face to face contact with any VBCMh customer or colleague.

State risk level information will come from a website overseen by the Harvard public health department:

<https://globalepidemics.org/key-metrics-for-covid-suppression/>

We are following the below rating for states because we want to limit the possible spread of the virus to staff and clients:

Red- Staff coming from these areas need to quarantine for 14 days if they visited that state for a time frame of 24 hours or more

Orange- Recommend remote work if possible but quarantine is not required.

Yellow- no quarantine required

Green- no quarantine required

Any staff person choosing to travel to a state with COVID status of red will need to quarantine for 14 days following their return. Quarantine in this instance means do not come to any VBCMh building, use any VBCMh vehicle, meet face to face with any VBCMh customer or coworker.

Staff may be able to work remotely if their job duties and the available work allow the person's work can be done remotely. If an employee is unable to perform regular job duties remotely, they will NOT be allowed to be paid COVID hours during this quarantine period. They may use vacation, sick or personal time or request unpaid voluntary leave for they hours they cannot work during the quarantine period.

Foreign travel will be reviewed by the COVID Response Team but a simple rule is that any country allowing US residents in for leisure travel likely is fairing worse than Michigan and quarantine is highly likely to be required.

Quarantine for travel to states in red would be for a visit time frame of 24 or more hours.

Measures Upon Notification of Employee's COVID-19 Symptoms and/or Diagnosis

Employees with Suspected or Confirmed COVID-19

An employee with a COVID-19 diagnosis or who displays symptoms consistent with COVID-19 must immediately leave the worksite, or as soon as safely able. Isolation spaces will be utilized in the event staff are unable to leave immediately, e.g. need transportation assistance.

In response to a confirmed diagnosis or display of COVID-19 symptoms, VBCMh will:

- Within required timeframe inform all employees and customers with and near whom the diagnosed/symptomatic employee worked of a potential exposure.

- Keep confidential the identity of the diagnosed/symptomatic employee except for required reporting to the Van Buren Health Department or other entities; and
- Conduct deep cleaning of the diagnosed/symptomatic employee's workstation, as well as those common areas potentially infected by the employee.

All employees who worked in sustained, close proximity to the diagnosed/symptomatic employee will also be required to work remotely for at least 14 days; however, should these exposed employees later develop COVID-19 symptoms and/or receive a confirmed diagnosis, they may not report on-site until all return-to-work requirements are met, defined below.

VBCMh completes required reporting to the Health Department and OSHA.

Contact Tracing/Increased Testing

VBCMh will cooperate with the Van Buren/Cass District Health Department (or other authority as directed by MDHHS) on contact tracing and increased testing.

Testing is becoming more available. Resources through the Health Department are listed in the appendix. InterCare offers drive up testing at their Bangor, Pullman and Benton Harbor sites. Testing resources/referrals may also be available through your primary care physician.

Staff shall continue to utilize the electronic sign in and sign out sheets when entering and leaving any VBCMh buildings. The sheets are found in the shared drive in the !COVID 19 folder. When signing in or out, it is important to remember to **save and close** the document so the next person may utilize it.

Decision-Making Authority

- CEO is responsible for decisions related to this plan and VBCMh response to COVID-19; in the absence of the CEO decisions are made by:
- Community Support Services Division Manager: if not available, decisions are made by:
- Adult & Family Division Manager; and if not available, decisions are made by:
- CFO.

Input to decisions needing to be made is sought and welcomed from staff and customers. Input should flow through management structure and to Safety Chairperson.

VBCMh Guidance for Services to Customers

VBCMh offers many types of services to people with unique needs, preferences, and strengths in multiple settings. Individual decisions on how best to provide a medically necessary service to an individual will all need to consider basic principles of safety and utilize creative problem solving and dedication to meeting clients' needs.

Basic safety principles to be applied include:

- Universal precautions as listed on page 5 of this document must be used as applicable in every interaction. (Wash hands frequently, disinfect shared surfaces frequently, if you are sick stay home; maintain social distance; all participants should wear a face covering; utilize additional PPE if social distance cannot be maintained.)
- Services which are provided effectively through virtual or tele means may remain virtual.
- Health screens in advance for all involved in any face to face services are required, and if anyone has symptoms, they should typically be rescheduled or moved to tele services.
- Consider whether the service can be provided outside as outside is considered safer than inside.
- Exposure to fewer people is considered safer.
- Plexiglas barriers to be utilized as needed for areas with potential prolonged contact with others.

Additional guidance that has been in place includes:

- For any out of office client service, a phone call should be made prior to any visit to determine if anyone in the home is sick or displaying symptoms utilizing the attached screening questions.
- If a clinician feels that a person requires in-person services, or a customer requests in person services, the clinician should discuss with their supervisor and Division Manager, listing why telephonic or audio-visual options would not be effective. The Division Manager will give final approval/disapproval.
- Any face to face services that have been approved by the Division Manager meeting the screening criteria listed above (answering no to all portions) should also take into consideration any rules or requests of the home/program owner/operator, E.G. if they have reported that they are going into self-quarantine, limiting visitors, or are taking other steps that impact our ability to interact face to face with clients.
- Psychiatric services: Face to face for initial psychiatric evaluation is priority. Telehealth is encouraged as feasible for established patients. Established patients having complex issues –doctor will decide on case by case basis whether face to face or telehealth. Executive order (EO) states as medical offices reopen, encourage telehealth to continue to greatest extent feasible; and contactless sign in as feasible. EO requires “Specific Vulnerable patient hours.” Many of VBCMh patients served are vulnerable due to other chronic conditions and/or age, thus most hours will be treated with every precaution. Special considerations for patients who must be seen in person and are considered vulnerable may be taken as directed by the attending doctor. If a patient requests to be seen during a vulnerable patient hour, please notify the attending RN and psychiatrist.

Public health guidance also requires specific actions for medical offices. To address this, VBCMh is requiring the following at all agency sites:

- Room must be cleaned between every person.
- Deep clean between clients if any client has respiratory symptoms.
- Special building cleaning if person is confirmed positive for COVID.
- Ground markings for social distancing

- Must provide masks; require wearing face mask if cannot maintain 6 ft distance; recommend face shield if will be within 3 ft (donated cloth, surgical, and N95 masks as well as face shields are available)
- Rules set by specific nursing homes, specialized residential homes etc. should be followed by VBCMH employees. If you believe there is a need to enter one of these settings when being asked not to, please consult with your Division Manager and Zana Smallen, Recipient Rights Officer.
- Both clients and staff must be symptom free. If a client is displaying symptoms, please consult a supervisor regarding how to handle the client's situation.
- If a client calls and states they are ill or displaying symptoms, a phone consult should be offered and then appointment rescheduled (in general 14 days later, reminding clients they should be symptom free without use of medications for symptoms for 3 days before attending.) Appointment should be flagged to check if symptom free without use of medications for symptoms for 3 days. Recommend client/caregiver to contact their primary doctor.
 - For those situations with an RN or MD providing the service, the medical professional can provide the service to a person with PPE while taking additional precautions based on their medical judgement including use of full PPE.