



CENTRA WELLNESS NETWORK

COVID-19 PREPAREDNESS AND RESPONSE PLAN- LEVEL 4

THROUGHOUT THE PAST FEW MONTHS STAFF AND LEADERSHIP AT CENTRA WELLNESS NETWORK HAVE HAD TO ADAPT AND IMPLEMENT RAPID CHANGES IN THEIR APPLICATION OF MANDATED SERVICES PROVIDED TO PERSONS LIVING IN MANSIEE AND BENZIE COUNTIES.

ADJUSTING TO A PANDEMIC, WHILE ASSURING SAFETY TO STAFF AND CLIENTS IS REQUIRED QUICK ADAPTABILITY TO ASSURE MEETING CLIENT NEEDS, MEETING WORKLOAD REQUIREMENTS AND CHANGING THE MANNER IN WHICH WE PROVIDE TREATMENT. IN SOME INSTANCES, THIS EVENT HAS SHOWN US HOW NIMBLE AND CREATIVE OUR STAFF AND THIS ORGANIZATION CAN BE.

MAY 26, 2020

CWN COVID-19 RESPONSE COORDINATOR:
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1. INTRODUCTION:

We are all living through the spread of COVID-19 the need for safety measures for our employees, clients and partners. As MI continues to re-open to business and tourism and our communities become more active, we will increase our time working with clients and families in the community. As of today (May 26, 2020) we continue to follow Executive Order 20-77 and all extensions of that order that request Stay Home, Stay Safe initiatives for Michiganders, excluding those providing/or determined as essential workers, first responders and health care providers. CWN provides essential services and has continued to provide critical mandated services for clients in Manistee and Benzie Counties.

March 23rd, when the Governor signed Executive Order 20-21 and at that time CWN developed and implemented the Healthy Workplace Cautionary (HWC) Document. Following the guides of the HWC document CWN developed three levels of program implementation adjusting as needed to comply with State and Local guidelines and mandates. With each order since we continue to identify all mandated essential safety needs for clients and staff. No disruption in core services occurred, adaptations were made to assure staff were able to still meet with clients, monitoring and coordinating services as needed. (Attachment A)

Governor Whitmer's Executive Order 20-77 requests that Michiganders continue to quarantine, leaving homes for jobs deemed essential, and at those jobs that employers assist in assuring safety to the public and employees. CWN has followed both State and CDC guidelines in assuring safety to staff while they were working off site, and in the office. We will be adapting our work environment and practices to further meet the guides set forth through Governor's Executive Orders, Public Health Department guidelines, Michigan Department of Health and Humans Services (MDHHS) and the Center for Disease Control (CDC).

CWN's plan is based on information and guidance from the Centers for Disease Control (CDC) and the Occupational Health and Safety Administration (OSHA) at the time of its development. Because the COVID-19 situation is frequently changing, the need for modifications may occur based on further guidance provided by the CDC, OSHA, and other public officials at the state or local levels. CWN is focused on three lines of defense:

1. Limiting the number of people together at the same time in the same place,
2. Sanitizing all areas and
3. Requiring appropriate personal protection equipment including masks, face shields, etc. *Include all that apply to your business in the community and office.*

Note: CWN may amend this Plan based on changing requirements and the need of our business.

The spread of COVID-19 in the workplace can come from several sources:

- Co-workers
- Customers
- Guests - visitors/vendors/family members
- The General Public

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All CWN managers/supervisors must be familiar with this Plan and be ready to answer questions from employees. Additionally, CWN expects that all managers/supervisors/staff follow this Plan. This includes practicing good personal hygiene and jobsite safety practices to prevent the spread of the virus. WE all must practice these behaviors. We are in this together as one team.

CWN will require and keep a record of all self-screening protocols for all employees or contractors entering the worksite, including, at a minimum, a questionnaire covering symptoms and suspected or confirmed cases of COVID -19.

CWN WILL:

- Keep everyone on the worksite premises at least six feet from one another to the maximum extent possible, including using ground markings, signs, and physical barriers, as appropriate to the worksite.
- Provide non-medical grade face coverings to employees,
- Require face coverings to be worn when employees cannot consistently maintain six feet of separation from other individuals in the workplace
- Train staff to increase cleaning and disinfecting of personal and shared facility spaces throughout the day in order to limit exposure to COVID-19, especially on high- touch surfaces (e.g., door handles), paying special attention to parts, products, and shared equipment (e.g., tools, machinery, vehicles).
- Make cleaning supplies available to employees upon entry and at the worksite and provide time for employees to wash hands frequently or to use hand sanitizer.
- Conduct a daily entry self-screening protocol for all employees or contractors entering the workplace, including, at a minimum, a questionnaire covering symptoms, suspected or confirmed exposure to people with possible COVID-19.
- When an employee is identified with a confirmed case of COVID-19, within 24 hours, notify both:
 - 1.The local public health department, and
 2. Any co-workers, contractors, or suppliers who may have met the person with a confirmed case of COVID-19.

2. OVERVIEW OF CWN HEALTHY WORKPLACE CAUTIONARY PLAN FROM MARCH 24,2020 – JUNE 12,2020. Levels 1 through 3: (Attachment B, C, D)

A. CWN office hours and access:

- All clients were notified that office appointments had changed, and clients would be able to use video or phone contacts to talk with CWN clinical staff.
- Entrance to CMH buildings were regulated and access limited. Notification was provided on change of access.

B. Visitors:

- Persons needing crisis services continued to have the ability to walk in at our treatment locations. or preferring to see clinical staff face to face being allowed access.
- All clients meeting with Med Services staff also had access to CWN locations.
- Client screenings; all person who entered the building received a brief screen regarding symptoms of COVID

C. Work Schedules:

- Staff were provided with options to work from home, using laptops remote access is available.
- Treatment alternatives implemented (such as telehealth) for Case Mgt, Therapy and other services as outlined by MDHHS allowances during the COVID-19 pandemic.

D. Adherence to Protective Measures:

- Remote access for staff to work from home
- Guidelines on use of PPE and Social Distancing provided all staff
- Supply review and management of all Personal Protective Equipment and supply of these items
- Redistribution of supplies
- Coordination with Emergency Mgt, Public Health in both counties for PPE supplies.
- Staff initiative to make masks for CWN
- Masks mailed to all persons working on site and completing community contacts.

3. REDISTRIBUTION OF STAFF EFFECTIVE June 1,2020.

OSHA and the CDC have provided the following preventive guidance for all workers, regardless of exposure risk, CWN chooses to implement guidelines using OSHA can CDC outline and guidance: Frequently wash your hands with soap and water for at least 20 seconds. When soap and running water are unavailable, use an alcohol-based hand rub with at least 60% alcohol.

- Avoid touching your eyes, nose, or mouth with unwashed hands.
- Follow appropriate respiratory etiquette, which includes covering for coughs and sneezes.
- Avoid close contact with anyone who is sick.
- Maintain appropriate social distance of six feet to the greatest extent possible.

Additionally, employees must familiarize themselves with the symptoms and exposure risks of COVID-19. The primary symptoms of COVID-19 include the following:

- Dry cough;
- Shortness of breath or difficulty breathing

Or at least two of these symptoms:

- Fever (either feeling feverish or a temperature of 100.4 degrees or higher);
- Chills
- Repeated shaking with chills
- Muscle pain
- Headache
- Sore throat
- New loss of taste or smell

Individuals with COVID-19 may also have early symptoms such as, diarrhea, nausea/vomiting, and runny nose.

Groups of 10 or less are acceptable using social distancing and PPE. Also prolonged or close contact is a factor in using PPE.

CDC defines “close contact” as either:

- Being within roughly six feet of a COVID-19 infected person or a person with any symptom(s) for

CDC defines a “prolonged period of time;” (the CDC estimates range from 10 to 30 minutes, or,

- Having direct contact with infectious secretions of a COVID-19 infected person or a

person with any COVID-19 symptom(s) (i.e., being coughed on).

4. AGENCY AND EMPLOYEE RESPONSIBILITIES:

A. OFFICE HOURS AND APPOINTMENTS:

- CWN offices hours remain 8am-5pm (Monday through Friday) with access to crisis services 24/7.
- Visitor/clients driving to the office will be asked to check in by calling 1-877-398-2013 when arriving at BCRC or MWC. They call on arrival the staff answering the phone will let clinician/staff know client is parked in the parking lot. Staff person will let clinician know type of car driving and they have screened over the phone if client is ill or around others that may be ill/or quarantined.
- Clinician/Staff will go to the parking lot to ask visitor/client to come into building.
- Visitor/clients using public transportation will be asked to stay in reception area and sit in accordance to social distancing.
- Visitors/clients will be required to complete monitoring before entering CWN treatment areas. They will be asked a series of questions and asked to allow their temperature to be taken, allowing us to certify to their wellness. (If visitor/client notes yes to any question and/or has a temperature 100.4 F, they will not be allowed to enter any further and will be directed to return home. (refer to section 9)

B. RETURN TO WORK/OCCUPATION OF OFFICES:

- The ability to work safely in our workspaces will require us to limit the number of persons in the building areas we occupy at any given time.
- BCRC (lower level) has a maximum occupancy of **9-10 staff** in that assigned area at any given time. BCRC (upper level) has a maximum capacity of **12-14 staff** in that assigned area at any given time.
- MWC has a maximum occupancy of **16 staff** at any one time
- Administrative Offices have a maximum occupancy of **9-10 staff** in the building for any length of time.

All three locations may see fluctuations in the numbers if people drop in, drop things off, or meet for an hour or less with a colleague. The maximum occupancy numbers should be followed by all staff.

Each program Supervisor/Director will meet with staff to review all work adjustment proposals, hours of work, locations and days required in the office. This is an extensive process but does not meet all possible issues as there remain many unknowns to how to provide security and deliver services. Practices provided by MDHHHS, Public Health and the CDC are formulated in this plan. Implementation and success for all of us will require patience, observation and discussions of any barriers found, or processes to be updated. These discussions and ideas can be

C. PROTECTIVE MEASURES/SCREENING:

1. Self-Monitoring Prior to Coming to Work:

As part of the self-monitoring all staff prior to coming to work will answer the following questions:

- Have a Fever/feeling feverish
- Cough
- Shortness of Breath
- Sore throat
- Vomiting/Diarrhea (past 24 hours)
- Other signs of illness (e.g. fatigue without explanation, muscle aches, general malaise, cold symptoms etc)
- Have I engaged in any activity or travel within the last 14 days that failed to comply with the most recent Stay Home; Stay Safe executive order? (in large crowds not using mask)
- Have I been directed by a health care provider or the health department to self-isolate or self-quarantine?

If you have answered **YES** to any of the above questions, the employee must contact their supervisor discussing the noted symptoms before coming to the office or conducting any field/home-based work.

2. Self-Screening by staff at work: USE PRECAUTIONS AND ASSURE YOU DISENFECT ALL EQUIPEMENT AND WORK ARES IF USING CHECK IN STATION:

- All staff at each CWN location if unable to self-monitor at home before work, will have a check in area available at the office. Staff monitoring at the office will **be required to go directly to the “check in station”** and complete your daily screening upon entering the building. **DO NOT GO TO YOUR OFFICE AND ANWHERE ELSE IN THE BUILDIGN BEFORE SCREENING IS DONE.**
- Staff will complete the self-monitoring form sign and place it in the identified container for transport to the Administrative Offices/HR.

D. CERTIFICATION OF SCREENING/SELF:

- **Staff will be required to have answered all the questions in the self-screening and certify daily their lack of symptoms. Again, certification requires you answer the following questions:**
 - *In the last 24 hours, have you experienced: fever (100.4⁰ F), new or worsening cough (other than allergies), shortness of breath, sore throat, vomiting/diarrhea? (for FEVER you will be taking your temperature at least daily and DO NOT COME/or STAY AT WORK if you have temp).*

Employees Response:

- **Staff not reporting symptoms** of illness, who have not violated the Stay Home, Stay Safe executive order, have not traveled, and who have not been otherwise directed to self-isolate or self-quarantine may come to work.
- All staff at the start of work will be required to certify their self-monitoring of that morning or will screen themselves at work at the start of the day. Staff will record their responses to the self-monitoring tool and their ability to work. **PRIOR TO GOING TO THEIR OFFICE.**

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- If you answered “yes” to any of the symptoms or your temp at least 100.4⁰ F, please **leave the building immediately**. **Do not** seek out your supervisor or anyone else, do not speak with anyone, please gather items and leave the office immediately. Once out of the building call your direct supervisor or HR report symptoms.

If Symptoms do arise during the day you can use the check in equipment to monitor, your temperature throughout the day. If temperature does occur staff must leave the building, not stopping to talk with anyone. Send an e-mail you are leaving and call supervisor from car/home for instructions (noted above). Self-isolate at home and contact your primary care physician for direction. Before considering return to work you need to consult with HR.

Staff taking vacation, leaving the state, traveling while COVID-19 remains active as a Health Crisis will have to inform their Supervisors of their travel. It will be IMPERATIVE that staff closely monitor themselves before returning to work. All staff are encouraged to follow CDC, State and Local Health Dept directives regarding social distancing precautions and other technique to slow the spread at all times.

Supervisory Response to staff reporting symptoms:

- In discussing the symptoms with employee note if symptoms are related to some other issue, such as allergies, or cold. Supervisor and staff can discuss options of work from home or PTO. If shat reports temperature they are not to return to office until 3 days have passed post fever.
- Supervisor will contact HR and report symptoms. All staff with symptoms will contact HR before returning to work.

E. SOCIAL DISTANCING:

- All staff will adhere to social distancing by standing 6 feet away from other employees/clients. Always use social distancing. Walking in hallways will be tricky, make sure to allow people to pass, step in doorways or wait until the person passes to go into an area already occupied.
- Attempt to avoid areas where people congregate such as lunchrooms, lobby's or hallways.
- It is recommended staff eat lunch in their office, not gather in lunchroom unless 6 ft distancing can occur.
- All staff can voice their preference to assure others adhere to their preference for social distancing of at least 6 feet. If others are not practicing, staff should be encouraging in redirecting others to follow social distancing process.

F. WEARING MASKS/OR FACE SHIELDS

<https://www.youtube.com/watch?v=JwPWdkbyizw>

****Masks are for the protection of others and for yourself. As we go about our day throughout the building you will meet several other staff and colleagues. You have no idea if your co-worker may be in a high-risk category or have family members that are at risk. Not only should you wear your mask when appropriate for your safety but also to keep your teammates safe.**

<https://www.youtube.com/watch?v=JwPWdkbyizw>

- Face mask/or shields while at work have been recommended by the CDC by the Governor's Executive Orders (20-77) and by Public Health Officials (BLPHD and District #10 PHD). CWN will follow these recommendations. ** (Staff can make decision for themselves, assessing if they want to wear a mask when alone in their office)
- Masks are for use in public areas or areas with people gathered in larger quantities
- Masks are to be used in areas in which you can't assure 6 ft. social distancing between yourself and others.
- Wearing a mask will only be beneficial to you and others if worn accurately. Be sure to wear masks that cover your nose and mouth. Each staff person should have cloth masks provided by CWN, be sure to sanitize your mask between uses and care for the allotted masks. CWN will not be replacing or providing cloth masks ongoing.
- Staff when working in the community are to wear face mask to and from work or meeting with a client in the community
- The use of N95 masks should be restricted to all medical staff. If medical staff are in the community or in the office, they can use N95 masks when working closely with clients. The N95 masks are worn to protect staff, however there is a limited supply of these. *N95 masks can be reused and cleaned per CDC guidelines when supplies become depleted.*
- Surgical masks are available for clients coming into the agency (if they don't have a mask to wear) to meet with the doctor, nurse or clinicians. All clinical staff can make determinations of clients need (or ability) to use a mask. If client has specific issues using masks an alternative option may be the face shield. If there are clients or visitors refusing to participate in mask use, staff will use PPE and social distancing to resolve the issue.

G. ENHANCED HYGIENE: <https://www.youtube.com/watch?v=d914EnpU4Fo>

- Best practice and safety from contamination is good handwashing hygiene. Make sure to wash your hands or use sanitizer between each client contact.
- When unable to wash hands, hand sanitizer can be a good substitute in the interim. Hand sanitizer has been made available to all staff. **Please do not throw away the sanitizer containers. We have purchased gallon jugs and can refill containers.**
- Handwashing includes soapy hands vigorously rubbed together for at least 20 seconds, then rinsed.

- Do not touch your eyes, nose or mouth if you have not been able to sanitize or wash your hands. These are areas of contact the virus spreads in (especially lungs)

H. USE OF GLOVES:

Use of gloves can give a false sense of safety. For gloves to be effective you must know how/when to use them, and how to remove them safely after use.

https://www.youtube.com/watch?v=3I_kKVNrEMo

- Apply gloves when working directly with a client where you must touch them, give an injection or assist with mobility. If you have cuts, soars on your hands, gloves should be worn.
- If you are working on a project and there is a concern of contamination you can apply gloves, as you work on that project you can wear the same gloves through the project's duration. If you leave the area to a new location and/or project you should remove gloves and apply new ones if needed before starting the new project or returning to the prior project.
- To remove gloves with R hand grab base of the glove and pull glove off, keep glove in right hand, take L hand and grab inside the base of R glove with your fingers and pull off allowing for another glove to be pulled into the R handed glove.(There is a demonstration link noted above). This is a gentle motion as to not snap the gloves spreading any contaminates. Dispose of gloves in the garbage.
- Once you remove your gloves the best practice would be to wash your hands with soapy water for 20 seconds, however you can use hand sanitizer if unable to wash hands.

5. REMOTE WORK: (Attachments E, F, G, H, I)

- Floor Plan for Admins
- Floor Plan for MWC
- Floor Plan for BCRC upstairs/downstairs
- Madison School:
- Employment Services Site:

6. PERSONAL MANAGEMENT OF WORK ENVIRONMENT:

All staff will be required to manage and maintain a clean, healthy work site.

- Staff are required to clean and sanitize their offices, and any area where they worked. This requires staff to clean all surfaces and disinfect. This should be done preferably after each meeting with a client or peer. Surfaces to consider are arms of chairs, doorknobs, pens or pencils used, tables, desks and area where you work.
- When using another space, you are responsible to clean, remove all items that are left behind (papers, pens, pencils etc..) and disinfect the surfaces, arms of chairs, doorknobs etc.
- Kitchen and break room responsibilities for CWN staff includes cleaning/disinfecting the surface after eating or preparing food/or coffee. **Do not leave dishes in the sink**

CLEAN AND PUT AWAY ALL CUPS, SILVERWEAR, PLATES ETC. that you are using throughout the course of the day.

- Staff should try to keep office doors closed providing a barrier to persons in the hallway, especially if you are in an area with high traffic
- When consulting with peers, staff should be respectful of social distancing and talk from doorway (*remember if it is client related you can't breach confidentiality*). If there are program/client issues find a location that allows for the 6-foot distancing and wear masks.

7. TRAVEL:

A. **Use of Vans** may be limited due to restrictions on transportation and activities available in the community limited.

- Staff with high utilization of vans will have an identified van for their use only (CST, Employment Spec.).
- High Utilization Staff (CST, ES) may keep keys for the van which they are assigned. Staff will not be required to return keys daily. This practice will allow staff to skip entering the buildings to get van keys. Staff are responsible to keep van keys safe.
- Staff will be required to use masks or/shields, and gloves when transporting and in the community. Staff will be responsible to manage their supplies of PPE in the vans.
- Staff will clean and disinfect all areas in the vans that are high touch. Steering wheel, handles, and seats.
- Staff during COVID-19 Health Emergency will be responsible to assure the van they are assigned will be maintained, including having oil changes and cleaning is completed.

B. Transporting:

- All client transports will require use of social distancing. Staff will wear PPE and will require clients to use masks as well. Clients must sit behind the driver in the farthest seat provided in the van. No client will sit in the front passenger seat with staff. All masks will be worn throughout the transport, and activities in the community.
- Refusals by a client to wear a mask will not be transported (staff can offer a face shield or can make an adjustment based on the clients "physical tolerance" to the mask). Refusal of clients to wear a mask or shield will be reviewed with Supervisors and clinical staff (If one is assigned) Discussions re: client response and review of treatment needs will be discussed with team and client so further determinations on further transports by staff.
- Staff will complete an IR on all refusals by clients to adhere to safety guidelines of using masks, sitting in van using social distancing rules. Supervisor/Staff will **follow IR procedures**.

C. Work Related Travel

- All staff conferences, seminars, trainings requiring physical attendance are suspended until a time that allows for in person participation with crowds of 10 or more. The travel guidelines will adjust as recommendations are provided by MDHHS, Public Health and Governor's Office. **Directors' Team and HR will review as needed.**

8. CLIENT SERVICE DELIVERY PRECAUTIONS:

The remainder of this document will provide details in regarding to staff behaviors and

environmental factors that we will deploy to mitigate risk to staff clients seeking services at any of our clinic locations. For persons working in the community with clients, the document: *COVID-19 RESULTS WORKFLOW outlines* the expected practices of all staff providing direct service to clients. This document outlines practices to keep client's safe (Attachment J).

A. Meeting with Clients:

- When meeting Clients in the office for *Face to Face* appointments be sure to schedule rooms such as conference space/intake room that allow for adherence to 6-foot social distancing guidelines.
- Staff can set their office space to allow for social distancing
- Staff can use alternatives to meet a person in their office they can use alternatives such as:
 - Using MS TEAMS. Client can be in another space in the building, and clinician in their office using TEAMS to communicate.
 - Use of conference spaces at each location or larger areas such as intake room at BCRC. STAFF WILL HAVE TO SCHEDULE THESE LOCATIONS
- When in the community:
 - Be creative when checking on clients in the community; talk through window or doorway, not entering the home if possible. If you must enter the home not only wear a mask but also gloves would be helpful. Limit having to touch anything, take your own supplies in the house (pen, paper etc.) Do not share items with Clients.

B. Reminder and scheduling calls:

- Clients are called and reminded of appointments with a therapist. When making these calls (which all staff should consider calling clients prior to visits) are to ask the following questions:
 - Have a Fever/feeling feverish
 - Cough
 - Shortness of Breath
 - Sore throat
 - Vomiting/Diarrhea (past 24 hours)
 - Other signs of illness (e.g. fatigue without explanation, muscle aches, general malaise, cold symptoms etc...)
 - Have I engaged in any activity or travel within the last 14 days that failed to comply with the most recent Stay Home; Stay Safe executive order? (in large crowds not using mask)
 - Have I been directed by a health care provider or the health department to self-isolate or self-quarantine?
 - If the client or their care giver report yes to any of these, you should provide instruction to quarantine and contact the PCP.

C. New Check in Process at MWC and BCRC:

- When staff are calling clients inform of appointments, or to follow-up on messaged be sure to review the new check in process at each location. a) Masks will be required. b) if driving to the center client should remain in the car, contacting CAPS (1-877398-2013). CAPS will provide the proper notification to alert staff/clinician or nurse the client is waiting. It may

take some time for staff to get the message and get to the parking lot to bring you into the building.

- Clients coming to the office using public transportation or walk in on crisis will be allowed entrance to the waiting area. Staff will monitor that social distancing occurs in the waiting area. (Lobby arranged to accommodate distancing guidelines).
- Clients will be screened before meeting with staff, they will be asked questions such as; have you had a fever, sore throat or cough (not related to allergies) or have you been traveling in the past 14 days, or been around someone who was diagnosed or exposed to COVID-19. Staff will provide client with thermometer to take their temperature.

If yes to any question and/or a temperature it noted client will be encouraged to return home, contact their PCP. Staff will report the client's condition and the refusal of entry and arrange for follow up to assure they have contacted PCP and/or if they have developed symptoms.

9. EMPLOYEE BENEFITS:

CWN has a long history of assuring staff needs are met to the best of their abilities. CWN has a diverse number of benefits that can assist you while we all experience the COVID-19 pandemic. Here are some reminders of services available:

All staff are encouraged to care for their well-being during this difficult time. Recognizing the strains and stressors of our daily lives, and the added anxiety and worries regarding the pandemic it is more important than ever for staff find techniques for stress management:

All staff have access to our EAP program through Aetna- Anytime Support:

<http://intranet.centrawellness.org/intranetsite/userfiles/filemanager/3798/>

<http://intranet.centrawellness.org/intranetsite/userfiles/filemanager/3809/>

<http://intranet.centrawellness.org/intranetsite/userfiles/filemanager/3773/>

<http://intranet.centrawellness.org/intranetsite/userfiles/filemanager/3772/>

10. TRAUMA AND TOXIC STRESS: As an agency building our Trauma Informed Care practices, it is strange to have such a large-scale Traumatic Event, and significant amounts of Toxic Stress put upon us at this time. We are building our skills and living through the experience all at the same time. Be aware that we will need

One of the major obstacles to self-care is giving in to the endless demands of others, both at work and at home. We encourage all staff to remember the importance of self-care;

Walks outside, knitting, sewing, reading a good book, meditation, yoga, on-line courses from photography to health and fitness, gardening, or just organizing. Remember to keep distance between your work stressors and your personal life. Below is a quick ABC of self-care to review.

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Saakvitne and colleagues (1996) describe three essential components, the “ABCs,” of self-care that effectively address the negative impact of secondary traumatization on counselors:

- 1. We must have an **Awareness** of our needs, limits, feelings, and internal/external resources. Awareness involves mindful/nonjudgmental attention to one’s physical, psychological, emotional, and spiritual needs. Such attention requires quiet time and space that supports self-reflection.
- 2. **Balance of activities** at work, between work and play, between activity and rest, and between focusing on self and focusing on others. Balance provides stability and helps counselors be more grounded when stress levels are high.
- 3. **Connection** to oneself, to others, and to something greater than the self. Connection decreases isolation increases hope, diffuses stress, and helps counselors share the burden of responsibility for client care. It provides an anchor that enhances counselors’ ability to witness tremendous suffering

11. ATTACHMENTS:

- CERTIFICATION DOCUMENT
- CENTRA WELLNESS PLAN FOR COVID-19 PANDEMIC RESPONSE
- HEALTHY WORKPLACE CAUTIONARY PLAN
 - LEVEL 1
 - LEVEL 2
 - LEVEL 3
- DAILY BUILDING OCCUPANCY COUNTS/ASSIGNMENTS:
 - ADMINISTRATIVE OFFICE
 - MANISTEE WELLNESS CENTER
 - BENZIE COMMUNITY RESOURCE CENTER
 - MADISON SCHOOL/TBD
 - EMPLOYMENT SERVICES/GROUP LOCATION/ ECHO/TBD
- POWER POINT TOXIC STRESS/TRAUMA (external attachment)
- MDHHS, CDC AND OTHERS INFORMATIONAL MATERIALS ON COVID-19 (external attachments)

ATTACHMENTS

ATTACHMENT A:

COVID-19 PLAN – LEVEL 4

CERTIFICATION DOCUMENT:

This is to certify I have reviewed the Centra Wellness Network COVID-19 Preparedness and Response (LEVEL 4) document.

I understand the importance of self-monitoring and reporting prior to work and throughout the day.

I understand the required personal protection measures outlined throughout the document and my responsibility to adhere to CWNs expectation that masks /or face shields be used as outlines, that social distancing be practiced and gloves and enhance hygiene be practiced.

I _____ agree to follow CWN COVID-19 Plan, Level 4.

Signature/Date

Personal safety practices provided by MDHHHS, Public Health and the CDC are formulated in this plan. Implementation and success for all of us will require patience, observation and discussions of any barriers found, or processes to be updated. These discussions and ideas can be shared with HR and reviewed with leadership groups as needed. Staff will be expected to follow all practices as outlined by CWN and no practice will divert from this document until a unanimous decision is made through an Administrative process to adapt the guidelines and processes.

FORWARD TO YOUR SUPERVISOR/SUPERVISORS SEND TO HR

ATTACHMENT B:

**CENTRA WELLNESS NETWORK
ONGOING PLAN FOR COVID-19
PANDEMIC RESPONSE 2020**

Preventative Management Response

The world health community continues to monitor closely the emergence of the SARS-CoV-2 virus and the disease it causes, named "coronavirus disease 2019" (COVID-19). At this time, no one knows how severe this outbreak will be. Given this uncertainty, and the fact that the seasonal influenza (flu) virus is also widespread, we are taking proactive steps to address areas of concern. First and foremost, we want to maintain a safe workplace and encourage and/or adopt practices protecting the health of employees, customers, visitors or others. The World Health Organization, as of March 11, 2020, has declared the COVID-19 an pandemic and we want to ensure continuity of business operations during this pandemic. fight the spread of the coronavirus, some companies across the globe are imposing self-quarantines, with clearly defined rules about who can come to the office, who can't, and what travel arrangements are allowable or advisable.

To all staff we will communicate how our organization will address your concerns as we develop and implement practices to help slow the spread of this virus and continue to provide services as needed.

CWN has a policy and practices on Infection Control, PTO, and Health and Safety. Additionally, CWN has a comprehensive Safety plan.

The following items will be added to CWN's practices to decrease or slow the spread of COVID-19

ADDRESSING STAFF ISSUES:

According to the CDC, symptoms may appear in as few as two days or as long as 14 days after exposure to the virus.

Symptoms include:

- Fever (100.4° F or higher)
- Dry Cough
- Muscle Ache
- Fatigue
- Shortness of Breath

Staff are to do self-monitoring every day and report to their supervisor if they experience any symptoms related to COVID-19 If staff experience any of these symptoms they shall:

- **Stay home.** Do not come to work if you have a fever, cough (especially if you have been traveling 14 days or less). Recommendation is to stay at home at least seven days after symptoms. Self-isolation can last up to 14 days or more.
- All staff must notify their Supervisor of your decision to take PTO/let them know your symptoms
- Monitor your condition and contact your Physician's office to get tested if you have the identified symptoms
- Notify HR with the results of the tests when you receive the results of the test.
 - If all clear and coronavirus is ruled out, return when feeling better.
 - If positive for coronavirus you will be required to follow guidelines provided by the Health Department. All positive cases are being reported and at least a 14-day quarantine is being advised.

- The best and most effective interventions include **handwashing and not touching your face (mouth, nose or eyes) with your hands.**
- **Use sanitizer** if/when unable to wash your hands, however it is not a substitute for good handwashing.
- **Avoid contact with people that are sick.**
- **Covering your mouth and nose with tissue or upper sleeve when coughing or sneezing.**
- **Clean, Clean and Clean.** Most offices are locked by staff so it will be up to you to thoroughly clean and sanitize your workspace. Clean offices by using disinfectant wipes. Areas to clean include your workstation, your mouse, arms on your chairs, doorknobs, pencils, pens and any other items you may use frequently or may be used when meeting with others.
- **Handshakes, hugs, etc. are discouraged.** Applying a 6FT circumference around you and the next person is a good practice, however not realistic in our jobs.
- **Implement social distancing measures as feasible, including in-person meetings when possible.**
- Limiting non-essential work travel
- Consider **NOT** eating meals in large group areas.
- Avoid large gatherings, events over 100 if possible.

CWN has policies and practices on Infection Control, PTO, and Health and Safety. These Policies provide clear instruction for staff regarding health, safety, time off and illness, they include:

1. **09.04.03b Infection Control**
2. **09.04.08 Emergency Conditions/Continuity of operation**
3. **09.06.04 Temporary Assignment**
4. **09.07 Time off/Leaves**
5. **09. 07.01 Paid Time Off**
6. **Safety, Crisis Preparedness and Risk management Manual**
7. **CWN Safety Manual**

ADDRESSING THE CONTINUATION OF SERVICES:

Policy 09.04.08 identifies types of emergencies including “other”, such as the current pandemic. Even if CWN experiences an emergency the essential services must be maintained, these services include:

1. Access
2. Emergency Services/Crisis Intervention
3. Supports/Case Management
4. Psychiatric Services

CWN Executive Director and his/her executive team will meet and determine a plan of action.

The ED and or his/her designee will determine the scope of operation including

- Closing or modifying hours of operation at all work sites
- Suspending some of the essential services or redefining how those services will continue.
- Limiting access to CWN employees by restricting public entry to work sites.
- Allowing work from home and/or clinical therapy and medication reviews using technology such as face time or video chats with persons in their home.

CENTRA WELLNESS NETWORK

- Allowing access to locations where persons can come and participate in video conferencing using a location or site managed by CWN staff.

CWN will continue services through several options including third party support, using technology to provide video conferencing and face time with clients, use of PPE and social distancing along with other manners that allow for distancing for safety. and providing a rapid response team to continue operational expectations.

- **Emergency Services:** CWN will continue to operate after hours services utilizing a third-party provider to answer and screen crisis calls. This provider if able could continue to operate 24 hours assisting in the screening and referral process for crisis services.

CWN currently has capacity to allow for video consultation through Teams and can expand their capabilities by providing equipment at the hospital and other locations to allow for consultation and evaluation by video link. The jail and hospital would be two other locations appropriate to connect and/or provide video capabilities to for crisis reviews and consultation.

- **Case Coordination/Case Management:** CWN provides clinical staff with agency phones allowing staff the capacity to video chat with clients and check on them.

The use of technology allows for staff to work from home, or to contact and check on clients who may become ill. Case Managers can continue to assist in linking and monitoring of needs as necessary. Though this time is non-billable it will provide clients support and assurance during these uneasy times. Case Managers also continue to meet in the community at client's homes but will practice social distancing and wear masks.

- **Med Services:** All psychiatric, Nursing appointments, follow-ups, and medication meetings will continue. Nursing staff will be using precautions such as personal protection equipment in the office and in the field. Nursing personnel in all programs with screen client's for COVID-19 asking questions regarding symptoms, fever, exposure and travel.
- **ACT and Home Base:** continue to provide services in the field as necessary. All staff working in the field (and in office) will use all precautionary techniques such as a mask in public, social distancing, hand washing, and use of hand sanitizers.
- **Therapy and Crisis Walk Ins:** both therapy and crisis services have continued. Therapy staff have the option to provide therapy via video, or if a person come to the building they can meet in rooms/areas that provide 6 ft social distancing and privacy. Use of video conferencing can occur at the office as well if a person walks in the clinician has an ability to meet via video from another location in the building.
- **Other:** As additional services such as prevention, ABA services, Skills Training, Employment Services and supports services all return to the work environment, at least a couple times a week, additional safety measures will be added to assure safe workspace and practices to meet our needs.

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CWN capacity to sustain practices: CWN staff have adapted quickly to a new normal for performing their duties. Essential staff to us had two categories, those required and essential in the office and those providing required services in the community but could work remotely.

Review of these two categories allowed CWN administration to review these two groups and assign them to on site or a remote location (such as their home) based on their job duties and operational needs of the organization.

Programs reviewed:

1. Finance
2. HR
3. CST
4. Employment Specialists
5. Clinical Services (outlined above)
6. Recipient Rights
7. Support Services
8. CAPS
9. Data management
10. Contract management
11. Administrative Team

ATTACHMENT C:

**HEALTHY WORKPLACE CAUTIONARY PERIOD
PANDEMIC**

Implementation 3/24/20

The Director of Human Resources has been identified as point of contact for all information and enrolled in the Michigan Health Alert Network (MiHN). All contacts and information with Local and State Emergency Services and or Public Health Departments will be coordinated through HR Director.

For the duration of a Healthy Workplace Cautionary Period, such special discretionary policies shall (to the extent such policies do not violate State or Federal law) take precedence over any existing conflicting employer practices policies or directives. Such special discretionary policies may include, but are not limited to:

1. During a Healthy Workplace Cautionary Period, the CMHP may implement (in an expedited manner):
 - A. Policies or measures to protect staff, the public or promote social distancing in order to limit the number of persons concentrated in the workplace.
 - B. Policies/processes for completing timesheets, call-in and notice requirements, or the requirement and timing for medical certifications both necessary to justify an absence or authorize a return to work.
 - C. Consider and approve, PTO flexible work schedules, job sharing, or FMLA to assist employees in meeting the medical needs of family members.

2. During a Healthy Workplace Cautionary Period, employees may be instructed not to report to work if the Director/Supervisor (or designee) reasonably believes the employee has been exposed to, or infected with, a severe communicable disease. Symptoms of a severe communicable disease include, for example, coughing, sneezing, fever, diarrhea, nausea, etc. The Director/Supervisor will work in conjunction with HR with all leaves due to possible exposure or symptoms of communicable disease
 - A. The employee may not report to work until they are free of fever (less than medically recommended 100.4 degrees) and free of any other symptoms (coughing, sneezing) for at least 72 hours prior to the start of their shift, without the use of fever-reducing or other symptom altering medicines (cough suppressants) and/or they are released by a healthcare provider, whichever is deemed necessary by Human Resources and Director/Supervisor.
 - B. **Following Public Health Guidelines and instructions to [review the Interim Recommendations to Mitigate the Spread of COVID-19 \(March 11, 2020\)](#). Information about this outbreak is changing rapidly. You can stay informed by regularly visiting Michigan.gov/Coronavirus and CDC.gov/Coronavirus.**
 - C. CDC Guidance provided to all employees:
Practice good hygiene
 - Stop handshaking –use other noncontact methods of greeting
 - Clean hands at the door and schedule regular hand washing reminders by email
 - Create habits and reminders to avoid touching their faces and cover coughs and sneezes
 - Disinfect surfaces like doorknobs, tables, desks, and handrails regularly
 - Increase ventilation by opening windows or adjusting air conditioning

Be careful with meetings and travel

- Use videoconferencing for meetings when possible
- When not possible, hold meetings in open, well-ventilated spaces
- Consider adjusting or postponing large meetings or gatherings
- Assess the risks of business travel

Handle food carefully

- Limit food sharing
- Strengthen health screening for cafeteria staff and their close contacts
- Ensure cafeteria staff and their close contacts practice strict hygiene

Stay home if...

- They are feeling sick
- They have a sick family member in their home

3. CRITICAL POSITIONS

- A. During a Healthy Workplace Cautionary Period, employees assigned to essential position will be required to work as directed.
- i. An employee assigned to an essential position who fails to report to work as directed (unless the absence is excused by operation or law or authorization of the employer), may be subject to potential disciplinary action up to and including termination. The level of discipline and any mitigating circumstances underlying an unauthorized absence will be reviewed on a case-by-case basis.
 - ii. An employee assigned as an essential position may have previously granted authorizations for vacation, compensatory time, leave of absences (other than for legally required sick or family leave purposes), flexible scheduling, training, conferences, etc. rescinded with minimal notice. All scheduling will be at the discretion of the Director/Supervisor in response to need.
- B. During a Healthy Workplace Cautionary Period, employees assigned to a critical position may be required to:
- i. Change their work schedules and/or hours of work with minimal notice.
 - ii. Report to the office with minimal notice.
 - iii. Telecommute with minimal notice.
 - iv. Work overtime with minimal notice.
 - v. Complete special duties with minimal notice.
 - vi. Work at alternate work locations (Home) with minimal notice.
- C. The Director/Supervisor (or designee) may authorize a request for Healthy Workplace Leave for employees assigned to critical positions who are directed to report to work.
- This may include: Persons with certification from the employee's health care provider or public health body that the employee has been infected with a severe communicable disease, is reasonably likely to spread a severe communicable disease to coworkers or residents through the performance of the employee's regular job duties, and/or is unable to perform the essential functions of his/her job without possible harm to himself/herself or others.

4. ESSENTIAL POSITIONS

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- A. All Leadership is determined as essential staff in fulfilling and maintaining the operation of their department and the CMHP system. Each Director/Supervisor will provide will work with staff to assure assignments/duties continue when working remotely and that they remain accessible to clients, and function to meet their needs.
- B. During a Healthy Workplace Cautionary Period, employees assigned to essential positions must continue to be available for work as determined by their Director/Supervisor and will be provided further guidance and instruction throughout the crisis through HR, Director or Executive Director
- C. If an essential employee is required to report to their place of work or perform work remotely, they shall be required to work as directed.
 - i. An employee assigned to an essential position who fails to report to work as directed (unless the absence is excused by operation or law or authorization of the employer), may be subject to potential disciplinary action up to and including termination. The level of discipline and any mitigating circumstances underlying an unauthorized absence will be reviewed on a case-by-case basis.
- D. Employees assigned to essential positions may be required to:
 - i. Change their work schedules and/or hours of work with minimal notice.
 - I. Report for work with minimal notice.
 - II. Telecommute with minimal notice.
 - III. Work overtime with minimal notice.
 - IV. Complete special duties with minimal notice.
 - V. Work at alternate work locations with minimal notice.
- E. A HR, Director and/or Supervisor may authorize a request for Healthy Workplace Leave for employees assigned to essential positions who are directed to report to work.

This may include: certification from the employee's health care provider or public health entities, that the employee has been infected with a severe communicable disease, is reasonably likely to spread a severe communicable disease to coworkers or residents through the performance of the employee's regular job duties, and/or is unable to perform the essential functions of his/her job without possible harm to himself/herself or others.

5. NON-ESSENTIAL/NON-CRITICAL POSITIONS:

- A. During a Healthy Workplace Cautionary Period, employees assigned to a nonessential/non-critical position may be instructed not to report to work until contacted by Human Resources with further directions.
- B. Depending on the nature and severity of the situation, Human Resources in consultation with Director/Supervisor may authorize a request for Healthy Workplace Leave for employees assigned to non-essential/non-critical position.
- C. All leave requests will follow policy and any union contract guidelines suitable to the situation.

Level 1 Plan for addressing disruptions in operations due to Coronavirus Pandemic:

- A. Notifications (signage) will be placed at all CWN sites. These notification signs will ask clients and visitors not to enter the building if ill. Additionally, a letter will be mailed to all clients regarding our potential to operational changes.

Operational Changes from March 16th through April 6th (Monday April 6th there will be a review of operational changes).

Areas immediately impacted:

1. SafeNet – SafeNet staff will be able to work from home or take PTO during the next three weeks. The Prevention Supervisor has a work plan that will be implemented and all SafeNet staff will follow.
2. ABA Behavioral Techs: Center based services will continue at Madison. Staff will coordinate with families and staff to cancel and reschedule services for clients/families presenting with cough/fever. Home based ABA will follow section B home visit guidelines below. All cancelations related to health and safety will be carefully documented in the client record
3. SIS Assessors – SIS assessments will be suspended and reviewed in three weeks.
4. CST/Peer Support Services – Community groups/outings continue as long as residential home settings maintain open home settings. For nonresidential services clients, call ahead and inquire about illness. As a reminder, staff are able to cancel/reschedule outings if clients confirm cough/fever or if staff have concerns about the health of the client, other clients or themselves. Cancellations related to health and safety will be carefully documented in the client record. During canceled appointment time, plan on training and Relias will be developed by the supervisors, other duties will be reviewed, additionally staff may choose to use their PTO. Peer groups should be considered for cancellation.

B. How to manage Home Visits:

1. IF you are planning to meet a client/child in their home here are the things you will need to do:
 - 1a. Call client/parent or guardian prior to your visit
 - Ask them how they are feeling, anyone sick, or if they have been around someone ill or have traveled.
 - Discuss the time you are going to be there, again before ending the conversation let them know you are coming and hope everyone is well
 - Upon arrival make sure to keep a distance, if sneezing/coughing politely remove yourself from the home
 - Wash hands, use sanitizer, do not touch face, mouth, nose or eyes.
2. If planning to meet clients, you can also send a text message reminding them and asking the same questions noted above.
3. As a reminder, staff are able to cancel/reschedule outings if clients confirm cough/fever or if staff have concerns about the health of the client, other clients or

themselves. Cancellations related to health and safety will be carefully documented in the client record.

4. Please consult with your supervisor on activities you can be engaging in outside of face to face time as part of paid work.

5. Depending on staff position, supervisor may approve work from home.

C. Office based services

- Crisis coverage will continue as currently scheduled.
- As a reminder, staff are able to cancel/reschedule sessions if clients confirm cough/fever or if staff have concerns about the health of the client, other clients or themselves. Cancellations related to health and safety will be carefully documented in the client record.

D. Out of office trainings and events:

- All conference and out of agency meetings scheduled for staff are to be suspended. All conference requests will be re-evaluated April 6th.
- Participation in organizational meetings and events can be completed by Skype, Teams or other video conference technology suitable to the need.

E. CAPS staff will continue to provide reminder calls for all appointments, they will inform clients at that time of our process change of calls by staff before appointments and will also ask about illness and travel. If clients report yes to either, further follow-up will be; CAPS staff will contract the therapist/CSM or Nurse and report the client response. Staff will follow up and call the client for more detail to determine if they should meet.

Level 2 Response:

Due to COVID19 we are making some very difficult decisions balancing client needs with staff needs. We want to be respectful of all persons, and assure we are balance the wellbeing and safety of clients and staff. The administrative and leadership team have been working to develop a plan that sustains our required/mandated services responsibility while also following directives given by the Governor and Public Health Officials.

At the BCRC location and MWC our partners have set up screening stations in the front lobby. Everyone walking into either of these locations will have to participate in a health check. Refusal could require the person to leave the building.

Effective immediately we will be asking clients and general public not to enter CWN locations except for crisis or med services appointments. CWN will follow the below options during this Health Crisis:

HOUSEKEEPING ITEMS:

Mandated services will continue; these include, ACT, Crisis Services, and Nursing/Med Services. All Directors and Supervisors are mandated to report to work.

CENTRA WELLNESS NETWORK

Morning Huddles will be set for the Director Teams and by Supervisors to review daily operations. This allows us to keep everyone informed and adjust our operational duties as dictated by the Governor.

All approved PTO requests made by staff whose services delivery is suspended will be reviewed by Supervisors. All PTO requests for Mandated Staff will also be reviewed with discussions toward adequate coverage. All staff need to know that PTO may be rescinded. Supervisors will regulate the amount of time off for staff and the impact on the workforce on a case-by-case basis.

FOR PERSONS WORKING FROM HOME OR ON WORK PLANS consider the ability to complete some of your Relias training.

Directors and Supervisors are considered essential to daily operations and continue to report to work.

SERVICES DELIVERIES SUSPENDED:

Suspending services for unmandated programs or programs impacted by Governors Orders:

- SafeNet/School Clinician
- ABA Techs
- CSTs
- Recovery Coach
- Peer Support
- Employment Specialists
- Mail Services
- Program Aid

**OBRA screenings will be reviewed individually; most LTC facilities are closed to outside public.*

**Court Screenings for Guardianship will be case by case and determined by the court*

Some of these programs are impacted by external resources closing in the community and an inability to practice social distancing. These are just some of the reasons this group has been addressed first.

SERVICES MANDATED TO CONTINUE:

1. CAPS Department: Call center and Front Desk operations will need to continue.

Work plans being developed by Supervisor and Director for Phone Coverage.

- Network Specialists: Director review regarding work from home
- Data Management Analyst: Director review regarding work from home

2. Information Technology Team (IT): All IT services can be provided remotely. All staff have access to IT, and they have remote capability.

Jamie will be on call for all remote options being instituted with Jails/Hospitals.

3. ACT: Act team will be required to work with ACT clients, their mode of contact can change to intensive phone outreach, and restricted or protected contacts. Supervisor will instruct and assist members of the team on restricted or protected interventions/contacts.

4. Nursing/Med Services: All nursing staff will remain, Med clinics, OHH, MAT, Integrated Health and Behavioral Health Homes will continue.

- Nursing staff will modify contact with clients as possible
- Remote access will be available for all providers
- Clients will have to be escorted to an area in which Tele-Psych services can be provided
- Providers can perform phone reviews
- Nursing staff will be responsible to wipe down/clean area after client is escorted out of office.
- Med Assistant/Administrative Support will remain
- Urine testing is suspended
- All Precautions should be used when giving injections. Injections should be at the office allowing for person to be screened prior to injections. IF unusual situation occurs with client unable to get to office full precautions will be applied by the Nurse when completing the injection.

5. Crisis Coverage: ****most important this service remains 24/7.** Protocol will remain available for after hours. Day crisis primary and secondary staff will be available in the office for walk in or phone crisis contacts.

6. Case Management and Therapy Services: Case Managers and Therapist can work in the office or from home. (Review the options with your supervisor. Work from home can only occur IF the location in the home is private and would not put patient information at risk). Clinical staff can contact clients and complete their monitoring and therapy by phone during the State of Emergency. It will be important to keep connected with clients during these times of high anxiety. Documentation instructions have been provided to all supervisors they will be able to assist you in assuring you are accurately documenting these contacts. As noted above, people will remain on Crisis rotation during the day, there will be time for paperwork to be completed and Relias training.

7. Administrative Support/Administrative Secretary will remain to assist their assigned groups and teams

8. Contracted Staff:

- Munson Health Services Clinician is following all directions applied at the Munson's Physician Offices.
- MAPS contracted staff will be required to be at the office to make outreach calls to students, and other duties assigned.

9. RECIPIENT RIGHTS WILL CONTINUE TO BE AVAILABLE: Customer Services and Recipient Rights Officer will be available however they can work from home.

10. Finance Department: Most finance duties can be performed from home. Those duties not accessible will require staff to come to the office. Department Director will work with staff to assure all services are covered and staff can rotate their work from home.

11. Human Resources: HR services will be available, both Credentialing and HR services can allow for staff to work from home. HR staff will work with the Director to develop schedules for time in the office.

12. Psychological Services: These services will be limited however the Psychologist has ability to work on plans, complete paperwork, make outreach calls and provide crisis services as needed.

13. Jail Services: Jail services will continue at this time. Supervisor and Jail Worker will work with Jail Administrators in assessing continued in person appointments. (Currently Jail Worker is in+ area protected by glass but allowing for interaction with inmate. Options have been developed if Jail Worker and Administrator feel risk increases, a Laptop will be available with Teams for use in the jail.

How to deliver Services if people walk into our offices:

We have secured rooms 40/41 at MWC and Upper Conference Room at BCRC. These spaces will have a laptop when clients walk in and need to be seen the clinical staff can see them in person using these rooms. These rooms also allow staff to utilize the 6ft radios for social distancing if face to face contact is needed.

Back up spaces to utilize for other people coming in would be the Kitchen Conference Space at MWC, and the Intake Room at BCRC. Laptop backups will be available as needed

Staff can escort people to these locations and explain the use of social distancing with them – provide directions on where to go while keeping a distance.

People screened at the entrance may be symptomatic, if so, they will be encouraged to meet with PCP or contact Health Department for screening information. At this point clinical staff can made decision on course of services. If client can/willing they can leave their name and phone number and we will reach out for follow-up. A second option is in distress would to request use of mask and allow entrance to conference area for tele-services. There is not clear path in managing our behavioral health services with health crisis of this proportion. Staff are encouraged to assess and apply solutions beneficial to the safety and wellbeing of client and staff.

If using video chat in Teams to connect with the client, staff will need to set computer with clinician on prior to bringing person into room, then return after appointment and wipe down the area.

Level 3 Response:

For staff that are affected by the suspension of programs there will be options available. Currently staff in SafeNet are working under option 1. However, the determination of full suspension/shut down of specific services temporarily will change current status of some employees.

CENTRA WELLNESS NETWORK

Suspending services for unmandated programs or programs impacted by Governors Orders:

- SafeNet/School Clinician
- ABA Techs
- CSTs
- Recovery Coach
- Peer Support
- Employment Specialists
- Mail Services
- Program Aid

**OBRA screenings will be reviewed individually; most LTC facilities are closed to outside public.*

**Court Screenings for Guardianship will be case by case and determined by the court*

Some of these programs are impacted by external resources closing in the community and an inability to practice social distancing. These are just some of the reasons this group has been addressed first.

Staff in these categories have 4 options based on their work locations/duties and Supervisor assignments. These options are on a continuum and may change accordingly.

1. Work from home with an approved work plan from your Supervisor including Relias training and reporting to your supervisor on tasks as outlined in the plan.
2. Unpaid Leave – Choosing unpaid leave can classify you as a temporary Lay-Off and eligible for Unemployment – the Governor has made Unemployment benefits easily accessible. We do not have reports on turn around and pay outs of your unemployment benefits.
3. Use your PTO time
4. Work until work plans are completed then take PTO/Unpaid leave

For staff at home or temporarily taking unpaid time or PTO there will be no requirement to make a trip into the office with laptops or phones. If you have your laptop or phone at home keep it there, if you left it at work it is fine there as well.

Refer to Level 2 Response for information on Mandated Services

CENTRA WELLNESS NETWORK

ATTACHMENT D: DAILY BUILDING OCCUPANCY CHART:

Occupancy for each Bldg. during COVID-19 (Level 4 Plan)					
	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
ADMIN	Jaylyn (CST)	Tom (CST)	Mark (CST)	Julie (CST)	
	Jane (CST)	Penny (ES)	Dan (SUP)	Dan (SUP)	Katelyn (F/HR)
				Judy (CST)	
	Hope (FIN)	Allison (FIN)	Hope (FIN)	Allison (FIN)	Cassie
		Tiffany (FIN)	Tiffany (FIN)	Katelyn (F/HR)	
		Connie (HR/SIS)	Connie (HR/SIS)		
	Kate (ORR)	Jan (ORR)		Jan (ORR)	Kate (ORR)
	Nicole (ADM)	Nicole (ADM)	Nicole (ADM)	Nicole (ADM)	Nicole (ADM)
	Donna	Donna	DN	Donna	Donna
	Karen	KG	Karen	Karen	Karen
TOTAL:	#7	#9	#8	#9	#6
Admin capacity at 10					
MWC	Maripat	Maripat	Maripat	Maripat	Maripat
	Gail (OP)	Abby (OP)		Abby (OP)	
	Lori/Judy	Lori/Judy	Lori/Judy	Lori/Judy	Lori/Judy
	Carolyn (PSS)	Jamie (OP)	Savannah (ACT)	Jamie (OP)	
	Felice (JS)	David (PSS)		David (PSS)	
	Mel (ACT)			Emelee (SUP)	
		Janeen (SUP)		Janeen (SUP)	
	Erin		Erin		Erin
CSMs in building scheduled CRISIS					
Heather	Barb	Chantelle	Julie	Jackie	Jo'Dee
	RN (OHH)	RN (OHH)			RN (OHH)
	Joie (SUP)	Dr. Dion	Joie (SUP)		Dr. Dion
		Tammy (MA)	Tammy (MA)	Tammy (MA)	
	Becky (RN)	Becky (RN)	Tamlynn (NP)	Becky (RN)	
	Dr. P		Sandy (RN)		
	Dr. T (MAT)				
	Sandy (RN)	Amanda (BHH)	Amanda (BHH)	Sandy (RN)	Amanda (BHH)
TOTAL:	#14	#12	#10	#11	#6
MWC capacity at 16					

CENTRA WELLNESS NETWORK

Occupancy of BCRC Upper and Lower Levels

BCRC	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Upper	Dawn	Dawn	Dawn	Dawn	Dawn
	Heath (SUP)		Heath (SUP)		Heath (SUP)
	Candi (OP)		Candi (OP)		
		Blake (OP)		Blake (OP)	
	Rene' (SUP)		Katie (SUP)	Katie (SUP)	
	Bill (OP)	Darby (OP)	Darby (OP)	Bill (OP)	Asia (OP)
	Meagan (HB)			Leah (HB)	
Case Mgt will work at office on crisis service day					
Case Managers	Brian (CSM)	Connie (CSM)	Heather CSM)		
		Jade (SS)	Jade (SS)	Jade (SS)	
		Natalie (IHH)	Natalie (IHH)	Natalie (IHH)	
	Randy (OHH PS)	Tamlynn (NP)		Randy (OHH.PS)	
		Sandy (RN)	Becky (RN)		Becky (RN)
	Anna (SS)	Anna (SS)	Anna (SS)	Anna (SS)	Anna (SS)
	Dr T. (MAT)				
	Sandy 1x month			Chris B (SUP)	
TOTALS:	#9/1x month 11	#9	#10	#10	#5
Max capacity 16 persons for upstairs					
BCRC	Brenna (SUP)	Brenna (SUP)		Brenna (SUP)	
Lower Level	Brenda (CAPS)	Kacey (CAPS)	Brenda (CAPS)	Kacey (CAPS)	Brenda (CAPS)
	Jami (CAPS)	Jami (CAPS)	Jami (CAPS)	Jami (CAPS)	Jami (CAPS)
	Karen (CAPS)	Karen (CAPS)	Karen (CAPS)	Karen (CAPS)	Karen (CAPS)
	Laura (CAPS)	Laura (CAPS)	Laura (CAPS)	Laura (CAPS)	Laura (CAPS)
	Melisa (CAPS)	Melisa (CAPS)	Melisa (CAPS)	Melisa (CAPS)	Melisa (CAPS)
	Tonya (CAPS)	Tonya (CAPS)	Tonya (CAPS)	Tonya (CAPS)	Tonya (CAPS)
	Pat		Pat		Pat

CENTRA WELLNESS NETWORK

	Julie (ES)			Cassie (HR)	
	Sherry (PSS)	Peggy (CST)	Rachel (CST)	Gabe (CST)	Denise (SCT)
	Kristi (SafeNet)				Kristi (SafeNet)
TOTAL:	#11**	#8	#8	#9	#9
Max capacity lower level 10 persons					

E. POWER POINT TOXIC STRESS/TRAUMA (sent separate e-mail all staff and loaded to intranet for reference)

ATTACHMENT F: PUBLIC HEALTH/MDHHS/CDC AND OTHER RESOURCES ON COVID-19 AND SAFETY PRACTICES FOR STAFF

What do I do when my employee shows up to work ill?

If an employee comes to work ill, or becomes ill while at work, they should be directed to go home immediately and self-quarantine, even if their symptoms are mild. If they are having trouble breathing or cannot keep fluids down, have them contact their doctor right away. COVID-19 symptoms are very similar to the symptoms seen in a typical cold or flu. However, it is best to be cautious. Take care not to over-react in order to prevent panic among your team. Consider alternative work options like teleworking if your employee is well enough to do so.

What should I do if visitors or customers have symptoms of illness, such as coughing or sneezing?

You and your employees should follow social distancing guidance and maintain at least a **6-foot distance** from anyone, especially those who are having symptoms. If your employee must be closer to the customer, advise them to minimize time spent with symptomatic customers to less than 10 minutes, if possible. Be sure to provide the public with tissues and trash receptacles. Have hand sanitizer dispenser near customer entrances, if feasible and offer masks if they don't have one.

One of our employees just tested positive for COVID-19. What should I do?

HR/Supervisors will instruct the employee to stay home and self-isolate. They should not return to work for at least **7 days after symptoms first started and 72 hours after fever has resolved without the use of fever-reducing medicines and symptoms have improved**, whichever is longer. Offer telework assignments if the employee is well enough to work. **IMPORTANT:** confidentiality of employee is maintained.

Thoroughly clean and disinfect equipment and other elements of the work environment of the employee along with frequently touched surfaces and objects such as doorknobs/push bars, elevator buttons, restroom doors, arms of chairs etc. Use EPA-approved disinfectants and use according to label instructions.

If the employee had been working while ill, identify co-workers and individuals that the employee may have encountered and advise them to self-monitor their symptoms. If employees who may have been exposed to an ill individual do not have symptoms, they can continue working but must adhere to social distancing guidelines, wear a mask the entire day, and disinfect and clean their workspace. Common areas, including bathrooms and break rooms, should be disinfected as well. If an employee starts to have symptoms during the workday, send them home immediately. Track exposed employees on the form provided and regularly monitor them for symptoms.

One of our employee's family members has a "suspected" (but unconfirmed) case of COVID-19. What should we do?

Employees who have had close contact to a suspect or known case of COVID-19 can *continue working but should self-monitor their symptoms and adhere to social distancing guidelines, wear a mask the entire day, and disinfect and clean their workspace*. Common areas, including bathrooms and break rooms, should be disinfected as well. If an employee starts to have symptoms during the workday, send them home immediately. Track exposed employees on the form provided and regularly monitor them for symptoms.

One of our employees has a "suspected" (but unconfirmed) case of COVID-19. Should I send everyone home?

You would follow all the same steps outlined above for an employee who tested positive for COVID-19. If employees who may have been exposed to an ill individual do not have symptoms, they can continue working but must continue *to self-monitor their symptoms, adhere to social distancing guidelines, wear a mask the entire day, and disinfect and clean their workspace*. Common areas, including bathrooms and break rooms, should be disinfected as well. If an employee starts to have symptoms during the workday, send them home immediately. Track exposed employees on the form provided and regularly monitor them for symptoms.

One of my employees has self-reported that they encountered someone believed to be positive for COVID-19. What should I do?

Review the nature of the exposure. *They can continue working but must self-monitor their symptoms, adhere to social distancing guidelines, wear a mask the entire day, and disinfect and clean their workspace*. Common areas, including bathrooms and break rooms, should be disinfected as well. If an employee starts to have symptoms during the workday, send them home immediately. Track exposed employees on the form provided and regularly monitor them for symptoms.

One of our employees just found out that they were exposed to COVID-19 after interacting with a member of the public (or vendor, or contractor). What steps do I take?

Review the nature of the exposure. They can continue working but must *self-monitor their symptoms, adhere to social distancing guidelines, wear a mask the entire day, and disinfect and clean their workspace*. Common areas, including bathrooms and break rooms, should be disinfected as well. If an employee starts to have symptoms during the workday, send them home immediately. Track exposed employees on the form provided and regularly monitor them for symptoms.

When can my employee come back to work if they have been ill?

Employees who have been ill with symptoms of an upper respiratory illness [new onset of fever (subjective or temperature of $\geq 100.4^{\circ}\text{F}$ or 37.8°C) OR symptoms of possible COVID-19 (cough OR shortness of breath OR sore throat)] ***can return to work 7 days after symptoms started and 72 hours after fevers have resolved without the use of fever reducing medications and symptoms improved, whichever is longer.***

Please refer to the guidelines for Social Distancing, Self-Monitoring, and Self-Isolation on the subsequent pages. For additional guidance, please go to:

- District Health Department #10: www.dhd10.org/coronavirus
- Michigan: michigan.gov/coronavirus
- National: cdc.gov/COVID19

Under no circumstance should you go to work, school or public places. You should only consider leaving your home if you need medical attention.

- Avoid using public transportation to get to your medical provider or emergency department. Do not use busses, Uber, Lyft, or taxi cabs.
- Wear a mask over your nose and mouth if you must leave your house to seek medical care.

Avoid handling pets or other animals while you are sick.

- Cover your coughs and sneezes with a disposable tissue or the upper part of your sleeve. Dispose of tissues in a lined trash can. Wash your hands immediately afterward.
- Wash your hands frequently with soap and water for at least 20 seconds. This includes after using the restroom, coughing or sneezing, or when they are visibly dirty. If you do not have access to soap and water, use a hand sanitizer with 60% - 95% alcohol.
- Avoid touching your eyes, nose and mouth with unwashed hands.
- Clean your frequently used surfaces with a solution of ¼ cup bleach to a gallon of water or disinfectant sprays or wipes daily. This includes “high-touch” surfaces such as phones, tablets, keyboards, doorknobs, bathroom fixtures, toilets, counters, tabletops and bedside tables. Wear rubber gloves if necessary and make sure the area is properly ventilated.
- Clean any item or surface that may have blood, mucus, vomit, urine, stool or other body fluids on them.
- Make sure your home has good airflow, open windows if weather permits or use the air conditioner.

If you live with others:

- Separate yourself from other household members and pets whenever possible.
 - You should stay in a specific room and away from other household members.
 - Use a separate bathroom if possible.
 - If you must share a bathroom wipe down all surfaces after the patient uses it. Separate toothbrushes.
 - If you share a shower, do not share razors, washcloths or body sponges/poufs
 - If you must enter a shared space put a mask over your nose and mouth before leaving your room
- Do not share items with your household members or pets such as dishes, drinking cups, silverware, towels or bedding. After using these items, they should be washed with soap and hot water
- Household members should practice Self-quarantine (see page 2)

If you live alone:

- Do not open your door to anyone. If someone is dropping off groceries or other items for you, have them leave it at your doorstep and wait until they leave to open the door.
- Do not cook food for anyone other than yourself

When seeking care at a healthcare facility:

- Call ahead to get direction from your health care provider. They may ask you to meet them outside or usher you into a different entrance than the general public uses
- Avoid using public transportation to get to your medical provider or emergency department. Do not use busses, Uber, Lyft, taxi cabs or rail lines.
 - If you are unable to drive yourself and do not have a ride, call 9-1-1 for transport by ambulance
 - If someone is giving you a ride, wear a mask that covers your mouth and nose while you are in the vehicle with them
- If you are driving yourself, apply a mask that covers your mouth and nose before exiting your vehicle

How to clean and disinfect.

Surfaces

If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection.

For disinfection, diluted household bleach solutions, alcohol solutions with at least 70% alcohol, and most common EPA-registered household disinfectants should be effective.

- Diluted household bleach solutions can be used if appropriate for the surface. Follow manufacturer's instructions for application and proper ventilation.
- Check to ensure the product is not past its expiration date. Never mix household bleach with ammonia or any other cleanser.
- Unexpired household bleach will be effective against coronaviruses when properly diluted. Prepare a bleach solution by mixing:
 - Five tablespoons (1/3 cup) bleach per gallon of water, or
 - Four teaspoons bleach per quart of water.

Soft Surfaces

For soft (porous) surfaces such as carpeted floor, rugs, and drapes, remove visible contamination if present and clean with appropriate cleaners indicated for use on these surfaces. After cleaning:

- If the items can be laundered, launder items in accordance with the manufacturer's instructions using the warmest appropriate water setting for the items and then dry items completely.

Otherwise, use products with the EPA- approved emerging viral pathogens claims [that are suitable for porous surfaces](#).

Linens, Clothing, and Other Items That Go in the Laundry

- Do not shake dirty laundry; this minimizes the possibility of dispersing virus through the air.
- Wash items as appropriate in accordance with the manufacturer's instructions. If possible, launder items using the warmest appropriate water setting for the items and dry items completely. Dirty laundry that has been in contact with an ill person can be washed with other people's items.
- Clean and disinfect hampers or other carts for transporting laundry according to guidance above for hard or soft surfaces.

Personal protective equipment (PPE) and hand hygiene considerations.

Cleaning staff should wear disposable gloves and gowns for all tasks in the cleaning process, including handling trash.

- Gloves and gowns should be compatible with the disinfectant products being used.
- Additional PPE might be required based on the cleaning/disinfectant products being used and whether there is a risk of splash.
- Gloves and gowns should be removed carefully to avoid contamination of the wearer and the surrounding area. Be sure to **clean hands** after removing gloves.
- Gloves should be removed after cleaning a room or area occupied by ill persons. [Clean hands](#) immediately after gloves are removed.
- Cleaning staff should immediately report breaches in PPE (e.g., tear in gloves) or any potential exposures to their supervisor.

Cleaning staff and others should clean hands often.

Clean hands often including immediately after removing gloves and after contact with an ill person, by washing hands with soap and warm water for 20 seconds. If soap and warm water are not available and hands are not visibly dirty, an alcohol-based hand sanitizer that contains at least 60% alcohol may be used. However, if hands are visibly dirty, always wash hands with soap and warm water.

Follow normal preventive actions while at work and home, including cleaning hands and avoiding touching eyes, nose, or mouth. Additional key times to clean hands include:

- After blowing one's nose, coughing, or sneezing
- After using the restroom
- Before eating or preparing food
- After contact with animals or pets
- Before and after providing routine care for another person who needs assistance (e.g., a child)

*If the negative forces can grow stronger by joining and feeding one another, we also need to **join our positive forces**, so we can **feed one another's power** as well.*

We are in this together!