



SHIAWASSEE  
Health & Wellness



# SHW RE-ENGAGEMENT PLAYBOOK

*Working together to stay strong, safe, and healthy*

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## MESSAGE FROM CEO

Let me begin by acknowledging how incredibly proud and thankful I am for our SHW team. When tested our team proved to be proactive, innovative, and resourceful in a situation unlike any other we have experienced. We demonstrated a willingness and ability to respond. We are beginning to recover and before long—as the post-pandemic world takes shape—we will be thriving.

The health and safety of all involved is our number one priority. The information in this playbook represents our current practices. This is a working document that will be updated to reflect changes in directives and emerging recommendations. It is intended to support the MI Safe Reengagement Plan and provide information and instructions for keeping each of us safe.

The SHW Re-Engagement Playbook is designed to be a guide and resource for how we can work together to create a healthy environment. Each of us plays an important role in keeping us safe. Our level of success is counting on each member of the team to be well informed and prepared to respond. This work will be challenging but we can do it if we continue working together. Stay tuned! Be informed! Stay Well!

Lindsey Hull, CEO



# RETURN TO WORK SAFEGUARDS

## WORKPLACE SAFEGUARDS

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Pursuant to Governor Whitmer's Executive Order No. 2020-97, Safeguards to Protect Michigan's Workers from COVID-19, Shiawassee Health & Wellness (SHW) as a provider of essential behavioral health services shall ensure the following safeguards:

### SHW MI SAFE RE-ENGAGEMENT PLAN

SHW has Re-engagement plans with contingencies for the continued clinical, fiscal, and executive operations during various stages of the initial pandemic.

Tier 4: Evidence of widespread in Shiawassee County transmissions, Stay Home, Stay Safe Order in place.

Tier 3: Sustained decrease in number of cases in the county evidenced by the percent of positive cases remaining at or below 10% and lifting of the Stay Home, Stay Safe Executive Order which deems it is appropriate for our employment sector to begin reengagement.

Tier 2: Percentage of positive cases in the county maintains between 3-7% or trends downward for the last 14 days and/or the ability to test and/or trace in place for all county residents.

Tier 1: No active spread for 30 days or vaccine is made available.

The SHW MI Safe Re-Engagement Plan provides detailed plans for resuming in-person services based on clinical necessity. In-office work will resume based on the Governor's executive orders and the MI Safe Start Plan in which Economic Region 5 (including Shiawassee County) can reopen.

All plans are provided via email to SHW employees and are available on the intranet page.

### COVID-19 WORKSITE SUPERVISORS

SHW designates the following worksite supervisors with responsibility for assuring adherence with and monitoring and reporting on with the safeguards identified in this plan.

- 7:30-8:00am Reception Staff employee is designated
- 8am-5pm, Mon-Friday, Leadership Staff or Clinical Supervisor on-site each day. Rotating calendar available on intranet page.
- Freedom Connection- 1 employee designated per shift

### COVID-19 SPECIFIC TRAINING

SHW will provide and maintain documentation of COVID-19 training for all employees on the following topics:

- a. Workplace infection-control practices.

- b. The proper use of personal protective equipment.
- c. Steps the employee must take to notify SHW of any symptoms of COVID-19 or suspected or confirmed diagnosis of COVID-19.
- d. How to report unsafe working conditions.

## **SHW RESPONSIBILITIES – WORKPLACE SAFEGUARDS**

To promote a safe workplace, SHW will:

- a. Assign dedicated entry points for employees at SHW location. At this time, this is the only SHW building open. As Orders allow, other SHW facilities will have entry points to include visual indicators of appropriate spacing for employees outside the building, and staggered start times or rotational schedules to reduce entry congestion as needed.
- b. Provide two cloth face masks to each employee. N95 masks, face shields, gowns and gloves will be reserved for employees needing to have close or prolonged contact with consumers and/or stakeholders.
- c. Enforce the appropriate use of face coverings.
- d. Increase distancing between employees by spreading out workspaces and staggering work schedules.
- e. Post room capacities outside of work areas, offices, and meeting rooms.
  - a. Conference Room Capacity Levels:
    - i. Board Room #1 – 11 people
    - ii. Conference Room #2- 4 people
    - iii. Conference Room #3- 6 people
    - iv. Conference Room #6- 3 people
    - v. Conference Room #7- Masks on only with 2 people.
- f. Provide visual indicators of six feet distancing in areas of high congestion.
- g. Prohibit social gatherings and meetings that do not allow for social distancing or that create unnecessary movement through the office.
- h. Disinfect high-touch surfaces in offices (e.g., whiteboard markers, restrooms, handles) and minimize shared items when possible (e.g., pens, remotes, whiteboards).
- i. Ensure workspaces are cleaned and disinfected regularly, especially on high-touch surfaces and in shared areas.

- j. Provide disinfecting supplies and require employees wipe down their workspaces at least twice daily.
- k. Post signs about the importance of personal hygiene.
- l. Encourage frequent handwashing and sanitizing of workspaces throughout the day.
- m. Suspend all nonessential visitors.
- n. Restrict all non-essential travel, including in-person conference events.
- o. Turn off water fountains.
- p. Encourage consumers with chronic health conditions to schedule between 8-10am or meeting outdoor if possible.
- q. Maintain a record of the trainings provided on:
  - Workplace infection-control practices
  - Proper use of Personal Protective Equipment

## **EMPLOYEE RESPONSIBILITIES – WORKPLACE SAFEGUARDS**

SHW employees will adhere to the following safeguards to protect themselves, coworkers, and those we serve:

- a. Complete a temperature check upon entry into the worksite. Employee to answer screening questions. Daily list of staff name, temperature, and answer to questions is sent to Human Resources Director, who is maintaining a file of daily screenings.
- b. Do not come to work if you are not feeling well.
- c. Maintain social distancing of at least six feet to the maximum extent possible.
- d. Wear a cloth face mask in shared areas or when six feet of distance is not possible.
- e. Avoid unnecessary gatherings or in-person contact with others while at work.
- f. Clean personal workspaces at start and end of each shift and after each consumer interaction. Surfaces include desk, chairs, equipment, toys, cars, etc.
- g. Clean personal office equipment (phones, keyboard, doorknobs, etc.) at start and end of each shift.
- h. Maintain a stock of pens, paper, post-its, etc. to reduce sharing of such items to the

extent possible.

- i. Practice good hand hygiene with frequent handwashing throughout the day.
- j. Immediately report the onset of any illness or symptoms during the workday to your supervisor.
- k. Immediately report safety concerns to HR or any supervisor.

## **SCREENING PROCESSES**

SHW shall have the following screening processes to minimize the risk of exposure.

- a. Employees working in the office and/or providing face to face services must check temperature and answer screening questions at the start of each shift.
- b. Consumers/Public entering the building must have a temperature check and symptom screen prior to moving into the waiting area. Persons who present with symptoms are asked to reschedule if clinically appropriate.
- c. In home settings, any members in the home directly involved with the appointment must be screened for symptoms prior to entering the home. A thermometer is handed to the individual and household members for self-temperature checks. If any household member is symptomatic, services are provided by telehealth.

## **SERVICES WHEN A PERSON IS SYMPTOMATIC**

If a symptomatic person must be seen due to medical necessity (i.e. receiving an injection or crisis situation), then the individual is provided a surgical mask, moved to a separate area or seen outside in the community if possible. Areas will be deep cleaned after services are provided.

## **SOCIAL DISTANCING AND SANITIZATION PROCESSES**

- a. SHW offices and rooms will be marked with capacity limitations. Employees should social distance at all times to the extent possible. When six feet of social distance cannot be maintained, face coverings should be worn.
- b. All persons served not residing in the same household must maintain six feet of distance when at SHW office.
- c. Persons being served within an SHW facility must wear cloth masks as long as Governor's order to wear masks in public locations is in place, unless the individual has a health condition which prohibits doing so. Persons in home settings will be encouraged to wear a mask during service provision. Cloth masks or surgical masks



will be provided to consumers/families as needed.

- d. Employees are expected to utilize an agency vehicle when delivering services when possible. Vehicles should be wiped down by the transporting employee at the start of use, after each transport and at the end of use.
- e. Each employee should wipe down their workspaces at the start and end of each shift. Disinfecting wipes are available throughout the agency. If you are unable to find, please contact the Maintenance Team.
- f. All rooms will be wiped down between face to face visits.

### **MASK ACCOMMODATION REQUESTS**

SHW Employees who cannot medically tolerate a mask should fill out an accommodation request and provide this to the HR Department.

Consumers of SHW who request our agency to provide documentation for an inability to wear a mask due to a medical intolerance related to a physical health condition will be referred to their Primary Care Physician. If the medical intolerance is related to a behavioral health condition, the clinical team will work with the consumer on how to increase their tolerance for wearing the mask.

### **PERSONAL PROTECTION EQUIPMENT (PPE)**

#### **PPE Storage:**

- Upper Level: Cabinet outside of April Riley’s cubicle. (top of west stairwell)
- Lower Level: Storage Room
- Recycling Center: Storage Room near Facilities Manager’s Office

In each of the cabinets listed, there is a sign-out sheet for you to log what PPE is taken. This is in an effort to track agency inventory to ensure we have enough in stock.

<b>PPE</b>	<b>Situation utilized</b>	<b>Frequency of change/clea</b>	<b>Method of cleaning</b>
Cloth Masks	General interactions with others, no symptoms,	Daily or after exposure	Laundry machines wash warm temp
Surgical Masks	Vitals, transportation, respiratory symptoms within 3 feet	Daily or after exposure	Dispose

N-95 Masks	Injection, known positive, respiratory	Daily (may be reused if shortage) or after exposure	Store in paper bag
Gloves	Vitals, injections, transportation, respiratory symptoms	After each contact	Dispose
Gowns	Vitals, injections, respiratory symptoms	Daily (may be reused if shortage) or after exposure	Wipe with disinfectant
Face Shields	respiratory symptoms within 3 ft,	Daily or after exposure	Wipe with disinfectant
Thermometers (infra-red or temple touch)**	All individuals who enter the agency premises, before home visits	After each contact	Wipe with disinfectant

## **REPORTING ILLNESS**

- a. All employees must report immediately to their supervisor, who will inform the HR Director who is tracking employee illness, any positive symptoms on the screening or development of any symptoms throughout the workday. (Refer to Attendance and Exposure Procedure for more information).
- b. Employees are recommended to quarantine and follow the medical advice from their treating physician.
- c. Suspected or confirmed cases must indicate any staff members, providers, consumers or other work-related contacts they have had contact with in the past 14 days.

## **ILLNESS MANAGEMENT**

- a. Individuals awaiting COVID19 test results or with a positive result will be required to work from home to the extent possible.
- b. COVID19 positive individuals can return to work once fever free for 3 days without fever reducing medication and 10 days have passed since symptoms first appeared.
- c. COVID19 negative individual and those with any general symptoms of illness may return to work once fever free for 72 hours without fever reducing medication and absence of symptoms.
- d. Human Resources will track return to work dates. A negative COVID19 test may be required prior to return to work.

## **ENVIRONMENTAL MANAGEMENT**

After an individual with respiratory symptoms has utilized a workspace, a deep cleaning will occur. This includes wiping down hard services with a disinfectant and spraying soft surfaces with an aerosol disinfectant. Surgical masks and gloves are to be worn during cleaning.

## **SAFETY MONITORING AND REPORTING**

All SHW staff are responsible for monitoring the work environment and for noting and reporting any unsafe condition, situation, or practice. Any unsafe situation shall be reported via email of Work Request to the Human Resources Director.

Unsafe practices or conditions of a clinical nature shall be reported to the Clinical Director in an email as soon as possible and shall be marked "Urgent". A phone call may also be advised depending on the urgency of the situation, but an email provides documentation of the situation and response.

## **EMPLOYEE NON-RETALIATION**

SHW will not retaliate against employees who stays home or who leaves work when

they are at particular risk of infecting others with COVID19.

## **FACILITY AND FLEET READINESS**

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### **CLEANING, DISINFECTING, AND DISTANCING FOR EMPLOYEES**

#### **Work Conditions – General:**

- Minimize extended close contact within the work environment (4)
- Provide physical barriers between workspaces where lacking, and where needed. (4)
- Provide numerous opportunities for hand sanitizing (4); encourage all building occupants to wash frequently (5)
- Minimize shared tools or equipment; sanitize shared tools and surfaces frequently (4)

#### **Spacing Considerations – Social distancing (3,5,6):**

**The CDC definition of a close contact\*(6):**

a) ***being within approximately 6 feet (2 meters) of a COVID-19 case for a prolonged period***; close contact can occur while caring for, ... or sharing a healthcare waiting area or room with a COVID-19 case -OR

b) having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on)

\*if such contact occurs ***while not wearing*** recommended personal protective equipment (PPE) (e.g., gowns, gloves, N95 respirator or facemask, eye protection), the contact is considered an exposure.

- 6' distance between (2, 3, 4) for an extended period (6)
  - Ideally 113 sq. ft. per person
- Challenging spaces at SHW:
  - Back Hall; breakroom, large restroom; elevator; stairwells, front lobby
- Distancing plan – provide markings and/or signage to indicate minimum spacing (3) or occupancy restrictions
  - Back hallway – sign both ends of the hall (east & west) encouraging “masks on” and distancing
  - Breakroom – sign a limit of single person occupancy; discourage gathering
  - Large restrooms – sign encouraging distancing; shut off one of the sinks in each restroom?
  - Elevator – signage up and down; limit of 2 per ride; establish and mark on floor: suggested waiting staging points, standing points in the elevator at opposite corners of the car.

- Stairwells – signage top and bottom to not go up or down in groups: one at a time, spaced out

## **Cleaning & Sanitizing (5,6):**

- Products
  - Disinfectant Wipes or Liquid (e.g. diluted bleach) Wipes available throughout agency. (Conference Rooms, by frequently used equipment, in Break Room, in supply room, in cabinet in Women’s bathroom)
  - Sprays (dwell time is often a consideration)
    - Surface sprays
    - Aerosols area bombs
- Process:
  - Frequency –
    - Cleaning of areas in general is done daily (or for high-traffic or critical areas, frequently throughout the day [5,6])
    - Targeted areas are cleaned as needed after each use.
    - When there is a suspected exposure, the affected room should be vacated for as long as possible up to 24 hours, cleaned and sanitized. If an aerosol sanitizer has been used, and after the chemical manufacturer’s recommended dwell or rest time, the room can be re-opened and aired out, after which it may be used again.
    - A periodic wholesale cleaning and sanitizing of frequent touch points in areas of the facility currently in use should be conducted by Maintenance staff weekly using standard sanitizing products, and additionally using a product with some residual sanitizing effectiveness on a sixty-day rotation, as long as the COVID threat persists.
    - Employees are required to wipe down their workstations at least twice daily (EO 2020-97, 7(h))
    - Minimize the use of shared items when possible. Wipe down high-touch surfaces (e.g., copy machines, door handles, fax machine, pens, shared computers).
  - Coverage
    - Regular wholesale **cleaning** as indicated in the janitorial services contract (Bull Janitorial)
    - Targeted **Disinfecting** using approved household disinfectant products (6).
      - For areas where a sick person has been, wait as long as possible after person leaves before entering the room. Twenty-four hours is preferred, but it is recognized that this may not be universally feasible (6). Sanitize surfaces touched by the

- individual, including surfaces of electronic equipment (keyboard, touch screens, telephone) (1,6)
    - Areas of known exposure may also be fogged using an in-house product or contracted service (Bull Janitorial)
    - For routine cleaning and sanitizing, focus on touch points in areas of high traffic or highest potential for exposure (6)
  - Responsibility –
    - Ongoing continually–
      - as visitors or consumers vacate an area, the staff involved in the contact will (using proper PPE and products provided) clean/sanitize the affected area. Example: After a meeting, the lead staff of meeting will wipe down chairs and tables. Cleaning supplies and gloves available in each conference room.
      - As staff use shared equipment (e.g. copiers and bulk printers), wipe touch points (control pads, handles, etc.) with sanitizing wipes after use.
    - Periodically – Maintenance and Reception staff will periodically clean areas of frequent contact in public areas and high-traffic areas (restrooms, break room) of the agency, or other areas as requested (as supplemental to the “on-going” cleaning above) and will log their activities on the Daily Cleaning Log form.
    - Daily – the contracted cleaning staff (Bull Janitorial) has daily cleaning responsibilities in the upper level, and to a lesser degree, in the lower level. They also are assigned specific additional, focused cleaning tasks as needed and record their activities on the Daily Cleaning Log form.

**References:**

1. CDC – Cleaning and Disinfecting for Community Facilities
2. CMS –Recommendations Opening Facilities for Non-emergent Care
3. ASHE – Reopening Facilities to Non-emergent COVID Healthcare
4. MI-Safe Start: A Plan to re-engage Michigan’s Economy
5. Opening Up America Again – the White House
6. MDHHS - Behavioral Health – Infection Control
7. Executive Order 2020-97, Safeguards to protect Michigan’s workers from COVID-19

# FACILITY AND FLEET READINESS

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## CLEANING / DISINFECTING FLEET VEHICLES

### Passenger Limitations

- Connect, Caravan--- 2 passengers with the driver.
- Avenger--- 1 passenger with driver
- Transits---4 passengers with driver
- Jeep---1 passenger with driver
- Chevy Wheelchair van 010x020---1 wheelchair, 2 passengers with driver
- Ford Wheelchair van 010x021---1 wheelchair, 4 passengers with driver

Recognizably, these restrictions do not conform to the literal six-foot distancing guidance. It is impossible to do so in the SHW fleet environment with 100% compliance. Occupants must remain masked while in the vehicle and lead staff must be vigilant to potential changes in health status of the passengers.

Note: It is advisable to think through the anticipated run and consider points where staff may encounter other people. Minimize these contacts as much as possible for the safety of staff and their consumers.

### Vehicle and Driver Hygiene:

- Every vehicle shall be thoroughly cleaned before putting into service, and when returned from any service work done by outside vendors; rental vehicles shall be thoroughly sanitized prior to fleet use.
- Sanitizing wipes of >66% alcohol content shall be placed in every fleet vehicle, as will a box of medium surgical gloves. Drivers are responsible for restocking PPE from SHW supplies or requesting supplies through the work order system.
- Drivers shall be trained on the proper method of donning and doffing surgical gloves.
- Masks shall be worn to help mitigate the potential for contaminant spread in the close confines of the vehicle.
- A fresh wipe or liquid sanitizer shall be used to sanitize hands before putting on gloves.
- Keys shall be sanitized when picked up prior to each run by wiping thoroughly with a sanitizing wipe.
- Vehicle sanitation is part of the pre-run inspection. Cleanliness shall be enforced by the department supervisor as needed.

- Drivers shall don gloves and use wipes to sanitize all surfaces touched in entering the vehicle, buckling a passenger, driving, fueling, etc. both pre- and post-trip. Do not use wipes on clear plastic components inside the vehicles.
- Focus on hard surfaces.
- Assume the previous driver has not sanitized anything.
- Used gloves and wipes shall be disposed of in the receptacle outside of the agency at each entry.
- Keys returned to the collection box shall be sanitized by maintenance personnel prior to redistribution. If a vehicle is returned mid-day, the keys shall be sanitized by the driver before returning the key to the rack or box/basket.

## **Fueling**

- Sanitize the gas card.
- Use a gloved hand to pump gas. A piece of window washing paper towel may be used (from the window washing kiosk by the pumps) to handle the pump nozzle and lever, with or without a gloved hand.
- To minimize contact, use the pump nozzle locked “on” so you do not need to hold onto the nozzle.
- Doff (remove) the used glove after pumping and properly dispose of in the trash receptacles provided at the fueling station.
- When in doubt, sanitize your hands with liquid sanitizer, then put on fresh gloves.

## **Emergency Situations**

- If an agency vehicle is involved in an accident, trade insurance information with the other driver by placing documents on a hard surface and photographing them with your phone. Do not touch the other driver’s documents and do not allow them to have contact with yours.
- Never get a ride in a tow vehicle. Call for a ride in an agency vehicle.

If a driver begins to feel symptomatic, cease driving as soon as possible and (if driving a consumer) exit the vehicle. Contact your supervisor or SHW Human Resources immediately for further instruction. Follow “Attendance and Exposure Procedure.” Periodic reminders and best-practice briefings for all drivers will help keep COVID issues in their minds.



# PEOPLE HEALTH AND WELLBEING

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## EMPLOYEE, CONSUMER AND VISITOR SCREENING

The health and safety of SHW consumers and staff, and the community, is a top priority. Therefore, a COVID 19 screening tool will be used to pre-screen the consumers at all contacts. These include contacts held on site, via telehealth and in the community.

### Consumers /Visitors/Staff

- All consumers, visitors, and staff will be screened by assigned personnel when entering the building using the COVID 19 screening tool, including a temperature reading with a thermometer. Any individual, staff or visitor, that responds yes to these questions will be asked to leave the building. Employees will be redirected back to their cars and asked to contact their supervisor. Consumers will also be redirected out of the building and told that someone from Access or Nursing will contact them. If the consumer does not have a phone, they will be asked to put on a mask, wash their hands in the lobby bathroom, and directed to the finance room for a video conference to be held with the member of Access or Psychiatric and Nursing services on-site. Additionally, anyone screening positive will be strongly encouraged to call their primary care physician.
- Information on a positive screen of an employee or visitor will be provided to the on-site supervisor. Reception will promptly alert Maintenance of the need to disinfect the areas that the positive screened individual was. New masks will be given to Reception staff.
- As much as possible, and in line with meeting the consumer's clinical needs, contacts will occur via telephone or video conferencing technology.
- Consumers will still be seen at SHW for injections as scheduled by the psychiatric and nursing staff. Consumers may also be seen on-site at SHW for emergency services or an urgent/emergent initial biopsychosocial assessment. Clinicians determining that face to face contact with a consumer in the office or community is clinically necessary to meet the consumer's needs, will first consult with their supervisor. If it is determined that a face-to-face contact will occur, the clinician will obtain a COVID 19 contact kit from Reception Desk and is expected to screen all consumers and household members prior to contact.
- All emergent/urgent consumer contacts will be conducted using non-face-to-face technology if possible. If not possible, staff will wear recommended personal protection equipment (PPE) when making face-to-face contacts with consumers.

- Any consumers walking in who require emergency services, will only be able to have 1 support person enter the building with them. Both will be screened for COVID-19. Those individuals who had a negative COVID-19 screen, will be directed to the office where financials are completed and will have the opportunity to video conference with those staff.
- For community-based appointments, if a consumer is not able to be reached prior to his or her emergent/urgent appointment, the service provider will complete the COVID 19 screening tool with the consumer prior to beginning his or her appointment.
- For any COVID 19 screen completed for walk-ins, or other non-scheduled consumers, the screener will complete a SHIMER message indicating that the screen was completed, and its disposition, and send to the service provider who will be seeing the consumer.
- For any positive COVID 19 screens completed via telephone, the consumer will be asked not to come in and the appointment will be cancelled. Educational information regarding COVID will be provided with instruction to self-quarantine and to call their primary care physician. They will be coached on how services can be provided using COVID-19 approved telehealth options.
- For any positive COVID 19 screens completed in the community, the appointment will be cancelled. Educational information regarding COVID will be provided with instruction to self-quarantine and to call their primary care physician. They will be coached on how services can be provided using COVID-19 approved telehealth options.

### **Consumer ES Appointments in Hospital ER or Jail**

- All hospital prescreens off site will be completed via telephone or video conferencing.
- All hospital prescreens and other ES contacts on-site will occur using video conferencing and other means of technology that is available.

### **New Directions**

New Directions is closed until further notice.

### **ESB**

- Program is suspended until further notice.

- Program staff will be deployed as much as possible to other essential services in the community in an effort to continue to be the safety net in Shiawassee County.

# STAYING HEALTHY TOGETHER

## EMPLOYEE HEALTH AND WELLBEING

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### SHW MI SAFE REENGAGEMENT TO THE WORKPLACE

Shiawassee Health and Wellness will follow a four-tiered phase-in approach for returning to full onsite operations. The SHW goal is to take steps and implement strategies to mitigate risk and do what we can to protect individuals that receive services from SHW, SHW employees, and the greater community of Shiawassee County residents. The tier structure design outlines the data that will drive decision making in each phase of reengagement. Guidance and information available to influence response planning continues to emerge rapidly—**as intel emerges it will be incorporated into the plan** as deemed appropriate by the Leadership Team. Advice from the Center for Disease Control (CDC), county health department, MDHHS, and MSHN will be used to refine our planning and implementation. We will be referencing Governor Whitmer’s MI Safe Start Plan, which has a six-phase plan. For example, SHW can begin our Tier 3, when Governor Whitmer declares we are in Phase 4 of MI Safe Start Plan. If Governor Whitmer reverts to Phase 3, we would in sync return to our Tier 4. (*MI Safe Start Plan* Phases outline can be referenced below).

The reengagement plan provides the foundation for department level action planning. Given the wide variation in work functions and environments our risk assessments, mitigation strategies and surveillance efforts will vary some. As conditions change, we expect to phase through a stabilizing period on the way to recovery. Other procedures being developed to help guide department level action planning include: PPE Guide, PPE inventory, Sanitizing Procedure, Fleet Use, Building Logistics.

Tiers of operation are defined by the community prevalence of Covid-19. Transitions between tiers will be based on the virus prevalence, PPE availability and workforce wellness and ability to effectively implement mitigation strategies. Those strategies will be varied based on available environmental controls in the different work settings.

Surveillance of SHW operations will be ongoing. It will be driven by data. Movement between tiers will be fluid as the environment and the ability to respond changes. Our ability to completely re-engage and successfully keep everyone as safe as possible is dependent upon each employee following the guidelines, doing our part to ensure implementation of risk mitigation strategies, and holding each other accountable.

Each tier will require the use of best-practice risk mitigation strategies: Access Control, Social Distancing, Sanitation/Hygiene, PPE, and Contact tracing/isolation.

**Tier 4: Evidence of Widespread County Transmissions and Stay Home, Stay Safe Executive Order in effect. MI Safe Start Plan Phase-  
-Uncontrolled Spread, Persistent spread, flattening.**

**GOAL:** Maintain service availability by alternative mode. Join Shiawassee County partners in collective impact approach to addressing, protecting, and improving health and wellness, including social determinants of health.

- SHW Stay Home, Stay Safe Procedure Effective 3/24/2020 continues as written
- Screening protocol and strict social distancing requirements are in place, telehealth services provided as a first option, group meetings held via video/audio conference, proper PPE available
- Essential services provided without interruption, plans addressing routine service needs
- Surveillance of community needs and SHW resources available to make an impact
- Establish data elements available and necessary to inform reengagement response planning
- Procuring PPE for all stages of reengagement

**Tier 3:** Sustained decrease in number of cases in the county evidenced by the percent of positive cases remaining at or below 10% and lifting of the Stay Home, Stay Safe Executive Order which deems it is appropriate for our employment sector to begin reengagement. MI Safe Start Plan Phase--Improving.

**GOAL:** Resume face to face service when clinical opinion suggests it is most appropriate. Resume in office work options to manage priority administrative task/projects that cannot be adequately managed remotely. Allow employees to request partial remote work schedules when barrier to remote work arrangements are identified.

*1-week PPE supply on hand*

- SHW Stay Home Stay Safe Procedure modified as needed to account for current reality
- Screening protocol and strict social distancing requirements are in place, group meetings held via video/audio conference, proper PPE available
- Telehealth codes remain active and used unless deemed inappropriate based on clinical assessment.
- Begin adding face to face services- assuming appropriate PPE is available- if a consumer is requesting or a need is clinically identified. All face to face contacts will occur with the approval of the program supervisor.
- Adding minimal staff onsite based on work function needs. Individual team members may request for onsite work time if there are barriers presented by in-home work. Onsite work opportunities depend on space and PPE availability and must be approved by the program director. Modification to the procedure will address partial remote work schedules, staggered office times, workspace options that offer mechanics for maintaining social distancing.
- PPE procedures and requirements continue as is unless guidance suggests modifications are warranted.
- Focus on procedure development for services not conducive to telehealth or that typically include congregation.

**Tier 2: Percentage of positive cases in the county maintains between 3-7% or trends downward for the last 14 days and/or the ability to test and/or trace in place for all county residents. MI Safe Start Plan Phase--Improving, Containing.**

**GOAL:** Resume face to face services on-site and in the community that have telehealth codes potentially expiring or as required by MDHHS. Establish a routine for on-site work—introducing partial remote/onsite work schedules accounting for space and PPE.

*2-weeks PPE supply on hand*

- Increasing amount of staff on-site and increasing amount of face to face activity with

use of PPE and universal precautions

- Screening protocols and social distancing requirements continue as is unless modified to match current reality, group meetings continue via video/audio conferencing unless space is conducive to allowing group to appropriately socially distance for an in-person exchange.
- Each department will implement a rotating schedule of staff to be onsite. Procedure for onsite scheduling will be developed to guide space consideration—ability to socially distance, use of congregate areas, cleaning schedules and responsibilities.
- Staff members declaring “high risk” status needing accommodations/special considerations shall coordinate their work situation with their supervisor and HR Director.
- Crisis services will resume face to face contacts. All other services will continue to add face to face contacts for those deemed most in need as determined by the clinical team.

**Tier 1: No active spread for 30 days or a vaccine has been made available for 30 days. MI Safe Start Plan Phase--Containing, Post-Pandemic.**

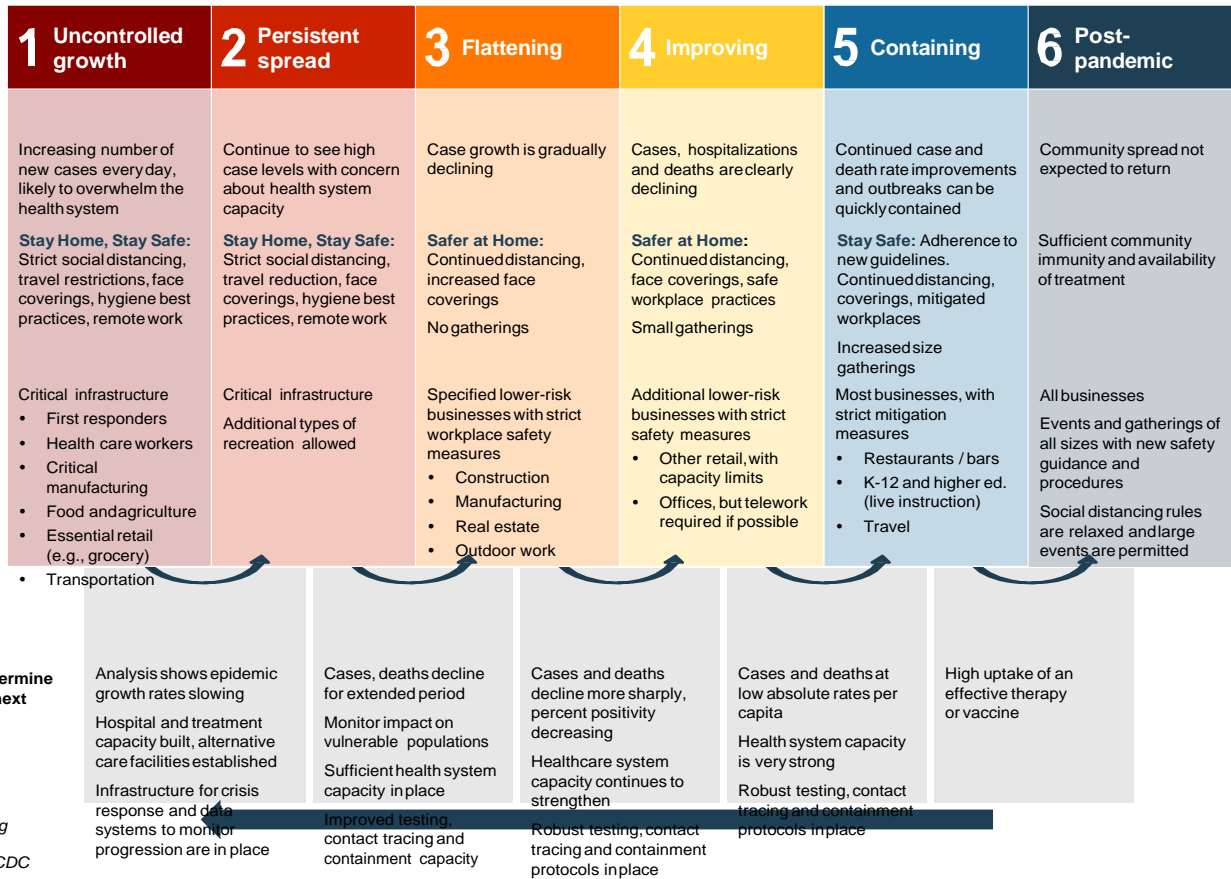
**GOAL:** Build our system back better than before. Operating normally with precautions. Prepared for resurgence.

30-day PPE supply on hand.

- Preparation and prevention planning for reoccurrence.
- Resume all operations adhering to current public health recommendations.
- Establish clear protocols for training, screening, PPE.
- Surveillance of community prevalence data and ability to respond daily for 30 days.
- Integrate new telehealth service codes approved by MDHHS into service delivery models.
- Begin after event review process becomes available.

# STAYING HEALTHY TOGETHER

## MI SAFE START PLAN



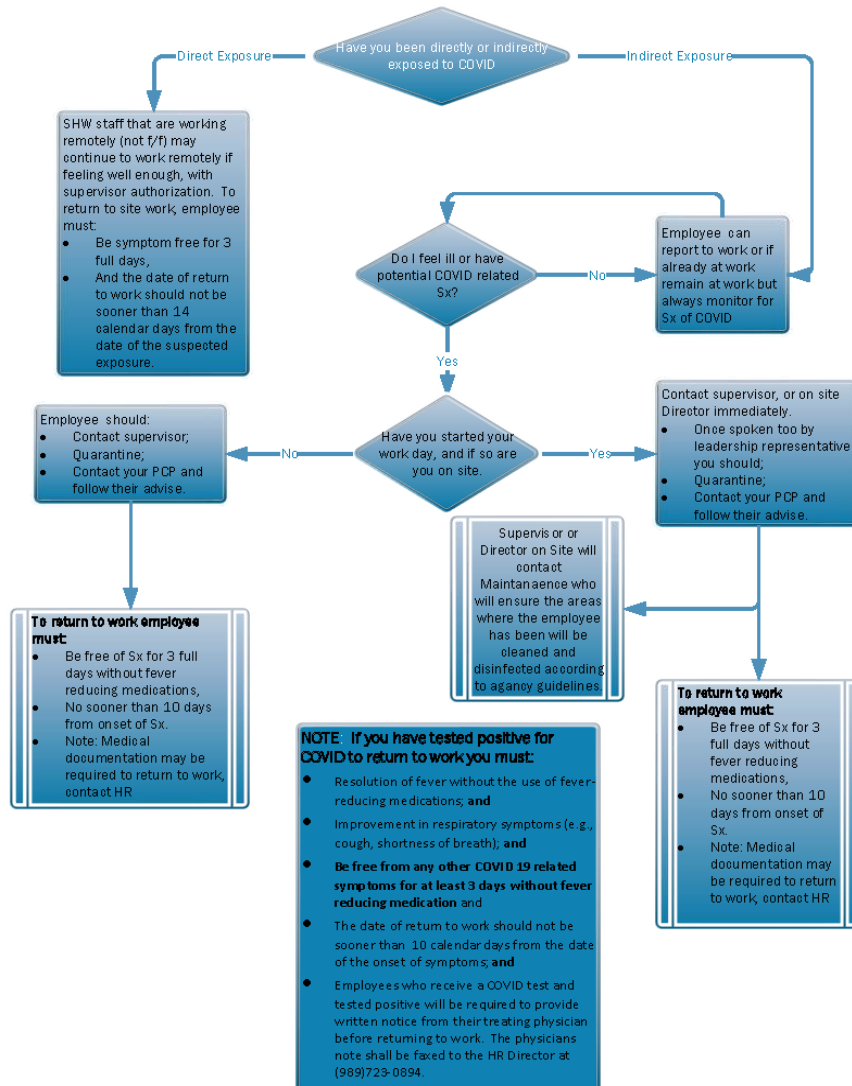
*Note: This framing is being updated and refined as additional guidance from CDC and public health experts*



# EMPLOYEE HEALTH AND WELLBEING'

## Attendance and Staff Exposure

### ATTENDANCE AND STAFF EXPOSURE PROCEDURE DECISION SHEET BASED ON SYMPTOMS



Last updated 6/2/2020

# Scripts for Communicating new standards for Face to Face Appointments

Tier 3 guidance document for both in office and home/community based contacts for case holders arranging face to face visits to use to orient consumers to the new normal.

## **In office appt script:**

“I am looking forward to seeing you. We have changed some of our procedures to keep everyone as safe as possible. When you arrive at the office, we ask that you wear a face covering into the building, in the lobby, and when we are walking down the hallway to my office. If you don't have a mask, we can provide you one when you arrive. Brian or Julie will also ask you some questions to screen for symptoms of coronavirus. Lastly, my office may be set up a little differently to keep the recommended between us during our session. I will be taking steps to sanitize commonly touched surfaces in between sessions. Do you have any questions or concerns about coming in?”

## **In home/community sample script:**

“I am looking forward to seeing you. We have changed some of our procedures to keep everyone as safe as possible. When I arrive at your home, I will be wearing a face covering. I am required to take your temperature (and temps of anyone involved in the session) and ask you some questions to screen for symptoms of coronavirus. If we can sit 6 ft. from one another then we can meet without wearing a mask once I have been able to take your temperature. Weather permitting would you like to sit outside for our session? Do you have any questions or concerns about our upcoming appointment?”

Draft of script that staff can use when individuals decline temperature checks, covid screening, and wearing a mask”

## **Script when consumer/guardian or other involved parties declines allowing temp. checks, COVID screenings, and/or wearing a mask:**

“As an employee of SHW I am required to follow the agencies policies and procedures if you would rather not allow a temperature, covid screening, and/or wear a mask at the required times we will need to continue our sessions by phone/video whichever works best for you until the guidelines change.”

If necessary you could also add something to the effective of, “as a governmental agency we are required to follow the guidance provided by the CDC, the Michigan Department of Health and Human Services (MDHHS), and our local Health Department as a result our policies and procedures require that we check temperatures and administer a covid screening questionnaire to all employees entering agency buildings, all individuals entering the agency, and of individuals receiving or involved in face to face services regardless of location. Additionally, we are required to ensure that all individuals wear a mask when social distancing of 6ft or greater is not possible.

## Safe Mail Handling Procedure

Upon review of safety recommendations and information from the CDC, MDHHS website and Shiawassee County Health Department website, SHW will follow safety guidelines when opening and processing incoming mail and records:

1. Avoid touching your skin and face while opening and/or processing mail and medical records
2. After opening and distributing mail to recipients, staff should follow the recommended guidelines for washing your hands
3. Records received directly from consumers and guardians or home staff should be turned into Medical Records for scanning. Staff should avoid touching their skin or face while handling these records and wash your hands following safety guidelines
4. It is recommended that staff do not share desk space, pens or other supplies, and that they wipe down common surfaces frequently, such as photo copiers, fax machines, scanners, postage machines and keyboards.

## Change Log:

<b>Date of Change</b>	<b>Description of Change</b>	<b>Responsible Party</b>
07/07/2020	Effective Date	Multiple parties including Leadership Team, Facilities Manager, Other Supervisors consulted.
07/09/2020	Updated grammar/spelling after Management Team review	J. Semans
08/04/2020	Added: PPE procedure, log sheet protocol, Mail handling procedure, Conference Room Capacity levels, Tier 2 on-site supervisor	J. Semans
08/14/2020	Updated Tiers from SHW Re-Engagement Plans, Updated on-site supervisor section, Added – mask accommodation requests	J. Semans