

Parkdale Animal Hospital
Manistee, MI
COVID-19 Preparedness and Response Plan
06/06/2020



This plan is prepared to comply with Michigan Governor Whitmer's Executive Order 2020-97 and OSHA Guidance on Preparing Workplaces for COVID-19.

DESIGNATED WORKSITE SUPERVISOR

Laura Betts, DVM will serve as the worksite supervisor with responsibility to implement, monitor, and report on the COVID-19 control strategies. In Dr Betts's absence, the Client Care Supervisor, Bonnie Knysz, will act as the supervisor. In case neither of them is present the team member with the most seniority working the front desk will be the supervisor. The supervisor will remain on-site at all times when employees are present on site. After regular business hours including lodging, the last remaining on-site employee is designated to perform the supervisory role.

COVID-19 TRAINING AND EDUCATION PROVIDED TO EMPLOYEES

The following materials have been presented to staff in preparation for offering services to our clients on 06/06/2020.

- (1) Workplace infection-control practices – see [CDC Cleaning and Disinfecting Your Facility.PDF](#)
- (2) The proper use of personal protective equipment, see:
 - a. [CDC PPE-Sequence.PDF](#)
 - b. [PPE use in specific situations.JPG](#)
- (3) Steps the employee must take to notify the business or operation of any symptoms of COVID-19 or a suspected or confirmed diagnosis of COVID-19.
 - a. Employees who have symptoms should notify their supervisor and stay home.
 - b. Sick employees should follow CDC-recommended steps. Employees should not return to work until the criteria to discontinue home isolation are met, in consultation with healthcare providers.
 - c. Employees who are well but who have a sick family member at home with COVID-19 should notify their supervisor and follow CDC recommended precautions.
- (4) How to report unsafe working conditions.
 - a. Contact your worksite supervisor immediately
 - b. If you do not receive satisfaction, you should file a complaint with MIOSHA https://www.michigan.gov/leo/0,5863,7-336-78421_11407-93835--,00.html
 - c. You should not fear retaliation as it is illegal to retaliate against workers who report unsafe conditions during the pandemic

HEALTH ASSESSMENTS FOR STAFF

We will conduct a daily entry self-screening protocol for all employees or contractors entering the workplace, including, temperature check, a questionnaire covering symptoms and suspected or confirmed exposure to people with possible COVID-19 utilizing the [COVID-19 Daily Self Screening Form \(attached\)](#).

ONSITE STAFF PROTOCOL: SOCIAL DISTANCING AND PERSONAL PROTECTION EQUIPMENT

- Staff are encouraged to maintain least six feet from one another to the extent possible.
- We will provide surgical and/or non-medical grade face coverings to our employees.
- We require face coverings to be worn when employees cannot consistently maintain six feet of separation from other individuals in the workplace.
- Employees may choose to use face shields or eye protection when three feet of separation cannot be maintained from other individuals in the workplace.
- Consider Petriage when appropriate.

SERVICE DELIVERY PROTOCOL

We will utilize "curbside care" and telemedicine for all of our clients until at least Michigan is in Phase 6 of reopening. If, however, we elect to allow clients inside the hospital before we are in Phase 6 of reopening of Michigan the following protocol will be followed:

- Clients will be admitted into the clinic at the discretion of the doctor.
- All staff will be notified in advance of entry.
- Clients will be questioned regarding the following:
 - their current health status and any illness or quarantine in the past 30 days
 - the health status of any person they have been in contact with over the past 7 days.
 - travel to Detroit or outside Michigan in the last 14 days.
- Clients will wait in their vehicle until contacted (phone or text) and instructed enter.
- Clients will use our hand sanitizer before entering.
- Clients will not be admitted without a face mask.
- Clients will be immediately directed to a predetermined seat in the lobby since our exam rooms are so small.
- Clients will maintain social distancing in the lobby as directed by the doctor and staff.
- All business will be conducted within the same room.
- Clients will not have access to the restroom.
- Clients will be escorted out of the building.
- The all surfaces in the lobby (or wherever the client was) will be cleaned and disinfected by wipes (Rescue, Lysol) or spray disinfectant (Rescue).
- If we do end up in an exam room the exam room will be ventilated for 10 minutes after the visit.
- The glass barriers at the front desk will remain in place until at least we are 100% open to clients and perhaps much longer.
- Only 1 client is allowed per pet.
- No children are allowed inside (do not leave children in a vehicle unattended, curbside required if there is no one else to supervise the children).
- Even if we allow clients in the building under special circumstances before we're 100% open to all we will not allow product pick up/purchase/sample drop off to happen inside – those transactions will continue by phone/table by front door.
- We will have obvious marks on the floor every 6 feet to assist with social distancing.

Protocols for "curbside care":

- to further distance us from clients we have adjusted how patients will enter the building
 - as usual: cats must be a carrier, no exceptions
 - pet must not be wearing any clothes
 - we will not be interacting closely with clients
 - if the clients have traveled/are quarantining/have respiratory illness in the car we will wear gloves/gown/eye protection
- the client will call from the car
- tech will direct the client to (one pet at a time):
 - bring their pet inside through the lodging door (there is a sign there) and **close the door behind them** and someone will be far away from them (more than 6 feet) but there to help direct them – no contact
 - place the pet in the cage with the open door (people don't know what a run is)
 - remove everything but the collar and take it with them, leave fecal/other samples in the run bin
 - latch the cage door, **shake the door to make sure it's latched** then leave
 - assure them that we have our powerful **air exchange fan on** and every surface is **disinfected between each client**
 - **Carriers** – how to handle them – this is a 2 person job
 - gloved = person wearing gloves
 - friend = person not wearing gloves
 - gloved gets carrier from lodging and brings it to treatment, with friend present opens door and removes patient, friend takes patient, gloved puts carrier on the floor/out of the way then washes gloved hands and removes gloves
 - in the meantime lodging friend decontaminates everything the client touches
 - carrier is decontaminated
 - after exam pet is put back in the decontaminated carrier and returned to lodging
- **Dogs**
 - 1 person going back there (should be 2 if at all possible)
 - wear gloves and bring pet to treatment
 - a friend will exchange your leash w/theirs and you will toss your leash in the laundry and wash or dispose of gloves
 - 2 people going back there (yay, teamwork)
 - 1 gets the pet but doesn't touch anything the client touched
 - 2nd person, wearing gloves, opens the run then decontaminates everything the client touched (do not clean run yet)
 - then the dog is returned to the same run once the client has been directed to retrieve the dog
- to be prepared for this:
 - keep fan on during appt hours
 - use runs 1-4, partially open the door so the client know where to go
 - someone must be standing at the lodging/lobby door to answer questions/help explain how to close the run door/open after appt is done



Check in and Check Out:

- Clients are scheduled by appointment over the phone.
- Clients check in and check out by phone from the parking lot (contact-less sign-in).
- Clients will wait in their vehicle and will not need waiting room access.
- Special provisions/time will be made for elderly or special needs clients.
- We encourage all financial transactions continue by credit card by phone or online using our payment portal but will accept checks; be sure to wear gloves when handling checks/cash including at the end of the day.

PROTOCOL TO FOLLOW IN THE EVENT OF EXPOSURE TO A POSITIVE COVID-19 CASE

- Cleaning will follow protocols - see [CDC Cleaning and Disinfecting Your Facility.PDF](#)
- Thorough cleaning and disinfection will occur at the end of every work shift.
- Employees are encouraged to not share computer workstations or phones.
- Employees are responsible for cleaning and disinfecting their workstation at end of shift.
- In the event of a positive COVID-19 case clean follow protocols - see [CDC Cleaning and Disinfecting Your Facility.PDF](#)
- Cleaning supplies are available to employees throughout the practice including upon entry.
- Employees are required to wash hands frequently or to use hand sanitizer including between each patient.

PROTOCOL WHEN EMPLOYEE REPORTS CONFIRMED COVID-19 DIAGNOSIS

If an employee is identified with a confirmed case of COVID-19, within 24 hours, we will notify:

- The local public health department: Michigan District 10 Health Department, 231-723-3595, 285 3rd St, Manistee, MI 49660
- Any co-workers, clients, contractors, or suppliers who may have come into contact with the person with a confirmed case of COVID-19.

In addition:

- We will allow employees with a confirmed or suspected case of COVID-19 to return to the workplace only after they are no longer infectious according to the latest guidelines from the Centers for Disease Control and Prevention ("CDC").
- We will follow [Executive Order 2020-36 \(attached\)](#), and any executive orders that follow it, that prohibit discharging, disciplining, or otherwise retaliating against employees who stay home or who leave work when they are at particular risk of infecting others with COVID-19.
- We will immediately send home any employee with a confirmed infection in the workplace, temporarily close all or part of the worksite to allow for deep cleaning.

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CLIENT NOTIFICATION OF BUSINESS PROTOCOLS IF WE ALLOW CLIENTS TO ENTER BEFORE PHASE 6 OF MICHIGAN'S REOPENING

A sign will be posted at the front door with the following information:

- No admittance without prior approval by Doctor
- You must wear a facemask
- You will be escorted into and out of the building to a designated area
- Your access will be limited to the designated area
- Unfortunately, restrooms are not available for public use

All questions should be referred to the Designated Worksite Supervisor.

Attachments begin on the next page.

CDC Cleaning and Disinfecting Your Facility

Everyday Steps, Steps When Someone is Sick, and Considerations for Employers

How to Clean

- **Wear disposable gloves** to clean and disinfect.
- **Clean surfaces using soap and water, then use disinfectant.**
- Cleaning with soap and water **reduces number of germs, dirt and impurities** on the surface. **Disinfecting kills germs** on surfaces.
- **Practice routine cleaning** of frequently touched surfaces.
 - - More frequent cleaning and disinfection may be required based on level of use.
 - Surfaces and objects in public places, such as shopping carts and point of sale keypads should be cleaned and disinfected before each use.
- **High touch surfaces include:**
 - Tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilets, faucets, sinks, etc.

How to Disinfect

- **Follow the instructions on the label** to ensure safe and effective use of the product.
Many products recommend:
 - Keeping surface wet for a period of time (see product label).
 - Precautions such as wearing gloves and making sure you have good ventilation during use of the product.

Always read and follow the directions on the label to ensure safe and effective use.

- Wear skin protection and consider eye protection for potential splash hazards
- Ensure adequate ventilation
- Use no more than the amount recommended on the label
- Use water at room temperature for dilution (unless stated otherwise on the label)
- Avoid mixing chemical products
- Label diluted cleaning solutions
- Store and use chemicals out of the reach of children and pets

You should never eat, drink, breathe or inject these products into your body or apply directly to your skin as they can cause serious harm. Do not wipe or bathe pets with these products or any other products that are not approved for animal use.

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- **Diluted household bleach solutions may also be used** if appropriate for the surface.
 - Check the label to see if your bleach is intended for disinfection and has a sodium hypochlorite concentration of 5%–6%. Ensure the product is not past its expiration date. Some bleaches, such as those designed for safe use on colored clothing or for whitening may not be suitable for disinfection.
 - Unexpired household bleach will be effective against coronaviruses when properly diluted.

Follow manufacturer’s instructions for application and proper ventilation. Never mix household bleach with ammonia or any other cleanser.

Leave solution on the surface for **at least 1 minute.**
 - to dilute bleach add 5 tablespoons (1/3rd cup) bleach per gallon of room temperature water
OR
 - 4 teaspoons bleach per quart of room temperature water
 - bleach solutions are good for only 24 hours

- **Alcohol solutions with at least 70% alcohol may also be used.**

How to Disinfect Soft surfaces: For soft surfaces such as carpeted floor, rugs, and drapes

- **Clean the surface using soap and water** or with cleaners appropriate for use on these surfaces.
- **Launder items** (if possible) according to the manufacturer’s instructions. Use the warmest appropriate water setting and dry items completely.

OR

- **Disinfect with an EPA-registered household disinfectant.**

How to Disinfect Electronics: For electronics, such as tablets, touch screens, keyboards, remote controls, and ATM machines

- Consider putting a **wipeable cover** on electronics.
- **Follow manufacturer’s instruction** for cleaning and disinfecting.
 - If no guidance, **use alcohol-based wipes or sprays containing at least 70% alcohol.** Dry surface thoroughly.

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How to Disinfect Laundry: For clothing, towels, linens and other items

- Launder items according to the manufacturer's instructions. Use the warmest appropriate water setting and dry items completely.
- **Wear disposable gloves** when handling dirty laundry from a person who is sick.
- Dirty laundry from a person who is sick can be washed with other people's items.
- **Do not shake** dirty laundry.
- Clean and **disinfect clothes hampers** according to guidance above for surfaces.
- Remove gloves, and wash hands right away.

Cleaning and disinfecting your building or facility if someone is sick

- **Close off areas** used by the person who is sick.
 - Companies do not necessarily need to close operations, if they can close off affected areas.
- **Open outside doors and windows** to increase air circulation in the area.
- **Wait 24 hours** before you clean or disinfect. If 24 hours is not feasible, wait as long as possible.
- Clean and disinfect **all areas used by the person who is sick**, such as offices, bathrooms, common areas, shared electronic equipment like tablets, touch screens, keyboards, remote controls, and ATM machines.
- Vacuum the space if needed. Use vacuum equipped with high-efficiency particulate air (HEPA) filter, if available.
 - Do not vacuum a room or space that has people in it. Wait until the room or space is empty to vacuum, such as at night, for common spaces, or during the day for private rooms.
 - Consider temporarily turning off room fans and the central HVAC system that services the room or space, so that particles that escape from vacuuming will not circulate throughout the facility.
- Once area has been **appropriately disinfected**, it **can be opened for use**.
 - **Workers without close contact** with the person who is sick can return to work immediately after disinfection.
- If **more than 7 days** since the person who is sick visited or used the facility, additional cleaning and disinfection is not necessary.
 - Continue routine cleaning and disinfection. This includes everyday practices that businesses and communities normally use to maintain a healthy environment.

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Cleaning and disinfecting outdoor areas

- Outdoor areas, like **playgrounds in schools and parks** generally require **normal routine cleaning**, but **do not require disinfection**.
 - Do not spray disinfectant on outdoor playgrounds- it is not an efficient use of supplies and is not proven to reduce risk of COVID-19 to the public.
 - High touch surfaces made of plastic or metal, such as grab bars and railings should be cleaned routinely.
 - Cleaning and disinfection of wooden surfaces (play structures, benches, tables) or groundcovers (mulch, sand) is not recommended.
- **Sidewalks and roads should not be disinfected**.
 - Spread of COVID-19 from these surfaces is very low and disinfection is not effective.

When cleaning

- **Regular cleaning staff** can clean and disinfect community spaces.
 - Ensure they are trained on appropriate use of cleaning and disinfection chemicals.
- **Wear disposable gloves and gowns for all tasks in the cleaning process, including handling trash**.
 - Additional personal protective equipment (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.
- **Wash your hands often** with soap and water for 20 seconds.
 - Always wash immediately after removing gloves and after contact with a person who is sick.
 - Hand sanitizer: If soap and 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 water.

Always read and follow the directions on the label to ensure safe and effective use.

- Keep hand sanitizers away from fire or flame
- For children under six years of age, hand sanitizer should be used with adult supervision
- Always store hand sanitizer out of reach of children and pets
- **Additional key times to wash 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).

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Additional considerations for employers

- **Educate workers** performing cleaning, laundry, and trash pick-up to recognize the symptoms of COVID-19.
- Provide instructions on what to do if they develop symptoms within 14 days after their last possible exposure to the virus.
- **Develop policies for worker protection and provide training** to all cleaning staff on site prior to providing cleaning tasks.
 - Training should include when to use PPE, what PPE is necessary, how to properly don (put on), use, and doff (take off) PPE, and how to properly dispose of PPE.
- Ensure workers are trained on the hazards of the cleaning chemicals used in the workplace in accordance with OSHA's Hazard Communication standard (29 CFR 1910.1200).
- **Comply with OSHA's standards** on Blood borne Pathogens (29 CFR 1910.1030), including proper disposal of regulated waste, and PPE (29 CFR 1910.132).

Alternative disinfection methods

- The efficacy of alternative disinfection methods, such as ultrasonic waves, high intensity UV radiation, and LED blue light against COVID-19 virus is not known.
 - EPA does not routinely review the safety or efficacy of pesticidal devices, such as UV lights, LED lights, or ultrasonic devices. Therefore, EPA cannot confirm whether, or under what circumstances, such products might be effective against the spread of COVID-19.
- CDC does not recommend the use of sanitizing tunnels. There is no evidence that they are effective in reducing the spread of COVID-19. Chemicals used in sanitizing tunnels could cause skin, eye, or respiratory irritation or damage.
- CDC only recommends use of the surface disinfectants identified on List against the virus that causes COVID-19.

End CDC Cleaning and Disinfecting Your Facility

SEQUENCE FOR PUTTING ON PERSONAL PROTECTIVE EQUIPMENT (PPE)

The type of PPE used will vary based on the level of precautions required, such as standard and contact, droplet or airborne infection isolation precautions. The procedure for putting on and removing PPE should be tailored to the specific type of PPE.

1. GOWN

- Fully cover torso from neck to knees, arms to end of wrists, and wrap around the back
- Fasten in back of neck and waist



2. MASK OR RESPIRATOR

- Secure ties or elastic bands at middle of head and neck
- Fit flexible band to nose bridge
- Fit snug to face and below chin
- Fit-check respirator



3. GOGGLES OR FACE SHIELD

- Place over face and eyes and adjust to fit



4. GLOVES

- Extend to cover wrist of isolation gown



USE SAFE WORK PRACTICES TO PROTECT YOURSELF AND LIMIT THE SPREAD OF CONTAMINATION

- Keep hands away from face
- Limit surfaces touched
- Change gloves when torn or heavily contaminated
- Perform hand hygiene

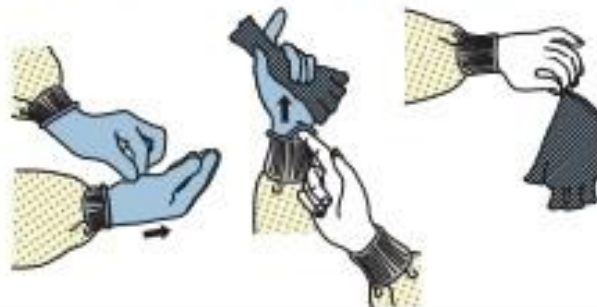


HOW TO SAFELY REMOVE PERSONAL PROTECTIVE EQUIPMENT (PPE) EXAMPLE 1

There are a variety of ways to safely remove PPE without contaminating your clothing, skin, or mucous membranes with potentially infectious materials. Here is one example. **Remove all PPE before exiting the patient room** except a respirator, if worn. Remove the respirator **after** leaving the patient room and closing the door. Remove PPE in the following sequence:

1. GLOVES

- Outside of gloves are contaminated!
- If your hands get contaminated during glove removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Using a gloved hand, grasp the palm area of the other gloved hand and peel off first glove
- Hold removed glove in gloved hand
- Slide fingers of ungloved hand under remaining glove at wrist and peel off second glove over first glove
- Discard gloves in a waste container



2. GOGGLES OR FACE SHIELD

- Outside of goggles or face shield are contaminated!
- If your hands get contaminated during goggle or face shield removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Remove goggles or face shield from the back by lifting head band or ear pieces
- If the item is reusable, place in designated receptacle for reprocessing. Otherwise, discard in a waste container



3. GOWN

- Gown front and sleeves are contaminated!
- If your hands get contaminated during gown removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Unfasten gown ties, taking care that sleeves don't contact your body when reaching for ties
- Pull gown away from neck and shoulders, touching inside of gown only
- Turn gown inside out
- Fold or roll into a bundle and discard in a waste container



4. MASK OR RESPIRATOR

- Front of mask/respirator is contaminated — DO NOT TOUCH!
- If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp bottom ties or elastics of the mask/respirator, then the ones at the top, and remove without touching the front
- Discard in a waste container



5. WASH HANDS OR USE AN ALCOHOL-BASED HAND SANITIZER IMMEDIATELY AFTER REMOVING ALL PPE



**PERFORM HAND HYGIENE BETWEEN STEPS IF HANDS
BECOME CONTAMINATED AND IMMEDIATELY AFTER
REMOVING ALL PPE**



HOW TO SAFELY REMOVE PERSONAL PROTECTIVE EQUIPMENT (PPE) EXAMPLE 2

Here is another way to safely remove PPE without contaminating your clothing, skin, or mucous membranes with potentially infectious materials. **Remove all PPE before exiting the patient room** except a respirator, if worn. Remove the respirator **after** leaving the patient room and closing the door. Remove PPE in the following sequence:

1. GOWN AND GLOVES

- Gown front and sleeves and the outside of gloves are contaminated!
- If your hands get contaminated during gown or glove removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp the gown in the front and pull away from your body so that the ties break, touching outside of gown only with gloved hands
- While removing the gown, fold or roll the gown inside-out into a bundle
- As you are removing the gown, peel off your gloves at the same time, only touching the inside of the gloves and gown with your bare hands. Place the gown and gloves into a waste container



2. GOGGLES OR FACE SHIELD

- Outside of goggles or face shield are contaminated!
- If your hands get contaminated during goggle or face shield removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Remove goggles or face shield from the back by lifting head band and without touching the front of the goggles or face shield
- If the item is reusable, place in designated receptacle for reprocessing. Otherwise, discard in a waste container

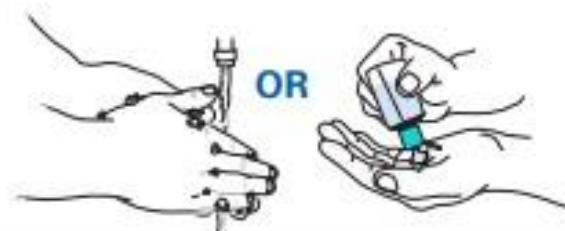


3. MASK OR RESPIRATOR

- Front of mask/respirator is contaminated — **DO NOT TOUCH!**
- If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp bottom ties or elastics of the mask/respirator, then the ones at the top, and remove without touching the front
- Discard in a waste container



4. WASH HANDS OR USE AN ALCOHOL-BASED HAND SANITIZER IMMEDIATELY AFTER REMOVING ALL PPE



**PERFORM HAND HYGIENE BETWEEN STEPS IF HANDS
BECOME CONTAMINATED AND IMMEDIATELY AFTER
REMOVING ALL PPE**




PPE Use in Specific Circumstances

There are no standard approaches to routine PPE use, and clinics should develop their own specific practices. Suggested approaches are outlined below in the chart.

Situation	Gloves	Mask	Outerwear	Eye protection
Situation where 2 metre distance from someone cannot be maintained		Cloth	Routine (e.g. lab coat, coveralls)	
Contact with a healthy animal that has no known SARS-CoV-2 exposure			Routine	
Contact with a healthy animal of a species that can be infected by SARS-CoV-2 (e.g. cat, dog, ferret) that has had known or suspected contact with a person with COVID-19 in the <u>past 14 days</u>	Yes	Surgical	Dedicated, impermeable	Yes
Contact with a healthy animal of a species not known to be susceptible to infection but that has had known or suspected contact with a person with COVID-19 in the <u>past 3 days</u>	Yes	Surgical	Dedicated, impermeable	+/-
Contact with an animal of a species that can be infected by SARS-CoV-2 (e.g. cat, dog, ferret)* that has had known or suspected contact with a person with COVID-19 in the past 14 days and which has signs potentially compatible with COVID-19 (acute respiratory or gastrointestinal disease)	Yes	Surgical or N95	Single use, impermeable	Yes
Aerosol generating procedure (e.g. intubation, dental examination, close contact with the face of a panting dog) involving an animal of a species that can be infected by SARS-CoV-2 (e.g. cat, dog, ferret)* that has had known or suspected contact with a person with COVID-19 in the past 14 days and which has signs potentially compatible with COVID-19	Yes	N95 whenever possible	Single use, impermeable	Yes

* Note: The species range that is susceptible to COVID-19 is still poorly understood. The risks are thought to be highest with cats and ferrets. The risk related to dogs is unclear and likely much lower than cats and ferrets. The list of higher risk species may change over time and veterinarians should follow ongoing developments.

Daily Self Screening Form (in lodging lobby)

Team Covid19 Self-Assessment (required before beginning work, after clocking in)						
Date (2020)	Name/Initials	Body Temperature (F°)	Symptoms?	Contact?	Traveled?	
			Y / N	Y / N	Y / N	Body Temperature:  <b style="color: red;">Tell LB if >99.5
			Y / N	Y / N	Y / N	
			Y / N	Y / N	Y / N	
			Y / N	Y / N	Y / N	
			Y / N	Y / N	Y / N	Symptoms of concern: fever, chills, sore throat, dry cough, difficulty breathing, diarrhea, vomiting, belly pain?
			Y / N	Y / N	Y / N	
			Y / N	Y / N	Y / N	
			Y / N	Y / N	Y / N	
			Y / N	Y / N	Y / N	Contact: been around a person with confirmed or probable Covid19?
			Y / N	Y / N	Y / N	
			Y / N	Y / N	Y / N	
			Y / N	Y / N	Y / N	
			Y / N	Y / N	Y / N	Travel: have you traveled to Detroit or outside of Michigan in the last 14 days?
			Y / N	Y / N	Y / N	
			Y / N	Y / N	Y / N	
			Y / N	Y / N	Y / N	
			Y / N	Y / N	Y / N	Return to LB When Complete

Executive Order 2020-36 (COVID-19)

EXECUTIVE ORDER

No. 2020-36

Protecting workers who stay home, stay safe when they or their close contacts are sick

The novel coronavirus (COVID-19) is a respiratory disease that can result in serious illness or death. It is caused by a new strain of coronavirus not previously identified in humans and easily spread from person to person. There is currently no approved vaccine or antiviral treatment for this disease.

On March 10, 2020, the Michigan Department of Health and Human Services identified the first two presumptive-positive cases of COVID-19 in Michigan. On that same day, I issued Executive Order 2020-4. This order declared a state of emergency across the state of Michigan under section 1 of article 5 of the Michigan Constitution of 1963, the Emergency Management Act, 1976 PA 390, as amended, MCL 30.401-.421, and the Emergency Powers of the Governor Act of 1945, 1945 PA 302, as amended, MCL 10.31-.33.

In the three weeks that followed, the virus spread across Michigan, bringing deaths in the hundreds, confirmed cases in the thousands, and deep disruption to this state's economy, homes, and educational, civic, social, and religious institutions. In response to the widespread and severe health, economic, and social harms posed by the COVID-19 pandemic, I issued Executive Order 2020-33 on April 1, 2020. This order expanded on Executive Order 2020-4 and declared both a state of emergency and a state of disaster across the state of Michigan under section 1 of article 5 of the Michigan Constitution of 1963, the Emergency Management Act, and the Emergency Powers of the Governor Act of 1945.

The Emergency Management Act vests the governor with broad powers and duties to “cop[e] with dangers to this state or the people of this state presented by a disaster or emergency,” which the governor may implement through “executive orders, proclamations, and directives having the force and effect of law.” MCL 30.403(1)-(2). Similarly, the Emergency Powers of the Governor Act of 1945 provides that, after declaring a state of emergency, “the governor may promulgate reasonable orders, rules, and regulations as he or she considers necessary to protect life and property or to bring the emergency situation within the affected area under control.” MCL 10.31(1).

To suppress the spread of COVID-19, protect this state's critical health care resources from rapid depletion, and prevent needless deaths, I issued Executive Order 2020-21, ordering all people in Michigan to stay home and stay safe. This order limited gatherings and travel, and required all workers who are not necessary to sustain or protect life to stay home. Slowing the aggressively persistent spread of this destructive virus, however, requires more. Individuals permitted to go to work under Executive Order 2020-21 must stay home when they or their close contacts are sick—and they must not be punished for doing so. Accordingly, it is reasonable and necessary to provide certain protections against workplace discrimination to such individuals, to ensure they can do what is now most needed from them to protect the health and safety of this state and its residents.

Acting under the Michigan Constitution of 1963 and Michigan law, I order the following:

1. It is the public policy of this state that an employer shall not discharge, discipline, or otherwise retaliate against an employee for staying home when he or she is at particular risk of infecting others with COVID-19. To effectuate that policy:
 - a. Employers are prohibited from discharging, disciplining, or otherwise retaliating against an employee described in sections 2 or 3 of this order for staying home from work for the periods described in those sections.
 - b. Employers must treat such an employee as if he or she were taking medical leave under the Paid Medical Leave Act, 2018 PA 338, as amended, MCL 408.961 et seq.
 1. To the extent that the employee has no paid leave, the leave may be unpaid. Employers are permitted, but not required, to debit any hours that an employee described in sections 2 or 3 of this order stays home from work from the employee's accrued leave.
 2. The length of such leave is not limited by the amount of leave that an employee has accrued under MCL 408.963 and must extend, whether paid or unpaid, as long as the employee remains away from work within the time periods described in sections 2 or 3 of this order.
 - c. Employers are prohibited from discharging, disciplining, or retaliating against an employee described in sections 2 or 3 of this order for failing to comply with a requirement to document that the employee or the individual with whom the employee has had close contact has one or more of the principal symptoms of COVID-19.
 - d. Nothing in this section shall be taken to prevent an employer from discharging or disciplining an employee:
 1. Who is allowed to return to work under sections 2 or 3 of this order but declines to do so;
 2. With the employee's consent; or
 3. For any other reason that is not unlawful.
 - e. The director of the Department of Labor and Economic Opportunity shall have authority to enforce this order in the same manner and to the same extent as the director enforces the Paid Medical Leave Act under section 7 of that act, MCL 408.967. In addition, the director shall refer all credible complaints of violations to the relevant licensing authority.
 2. Subject to the exceptions in section 5 of this order, it is the public policy of this state that any and all individuals who test positive for COVID-19 or who display one or more of the principal symptoms of COVID-19 should remain in their home or place of residence, even if they are otherwise permitted to leave under Executive Order 2020-21 or any executive order that may follow it, until:
 - a. three days have passed since their symptoms have resolved, and
 - b. seven days have passed since their symptoms first appeared or since they were swabbed for the test that yielded the positive result.

This section will cease to apply to anyone who, after showing symptoms, receives a negative COVID-19 test.

3. Subject to the exceptions in section 5 of this order, it is the public policy of this state that any and all people who have had close contact with an individual who tests positive for COVID-19 or with an individual who displays one or more of the principal symptoms of COVID-19 should remain in their home or place of residence, even if they are otherwise permitted to leave under Executive Order 2020-21 or any executive order that may follow it, until either 14 days have passed since the last close contact with the sick or symptomatic individual, or the symptomatic individual receives a negative COVID-19 test.

This section does not apply to the following classes of workers, provided that their employers' rules governing occupational health allow them to go to work:

- a. Health care professionals.
 - b. Workers at a health care facility, as defined in section 7(d) of this order.
 - c. First responders (e.g., police officers, fire fighters, paramedics).
 - d. Child protective service employees.
 - e. Workers at child caring institutions, as defined in section 1 of Public Act 116 of 1973, MCL 722.111.
 - f. Workers at correctional facilities.
4. An individual described in sections 2 or 3 of this order who returns to work prior to the periods specified in sections 2 or 3, respectively, shall not be entitled to the protections against discharge, discipline, or retaliation provided under section 1 of this order.
 5. It is the public policy of this state that individuals described in sections 2 and 3 of this order should leave the home or place of residence only:
 - a. To the extent absolutely necessary to obtain food, medicine, medical care, or supplies that are needed to sustain or protect life, where such food, medicine, medical care, or supplies cannot be obtained via delivery. All food, medicine, and supplies should be picked up at the curbside to the fullest extent possible.
 - b. To engage in outdoor activity, including walking, hiking, running, cycling, or any other recreational activity consistent with remaining at least six feet from people from outside their household.
 6. It is the public policy of this state that if an individual described in sections 2 and 3 of this order leaves the home, he or she should wear some form of covering over their nose and mouth, such as a homemade mask, scarf, bandana, or handkerchief, but that supplies of N95 masks and surgical masks should generally be reserved, for now, for health care professionals, first responders (e.g., police officers, fire fighters, paramedics), and other critical workers.
 7. For purposes of this order:
 - a. "The principal symptoms of COVID-19" are fever, atypical cough, or atypical shortness of breath.
 - b. "Employer" means the same as it does in section 2(f) of the Paid Medical Leave Act, MCL 408.962(f), except that it shall also include employers with fewer than 50 employees.
 - c. "Close contact" means being within approximately six feet of an individual for a prolonged period of time. Close contact can occur, for example, while caring for, living with, visiting, or sharing a health care waiting room with an individual.

- d. "Health care facility" means the following facilities, including those which may operate under shared or joint ownership:
1. The entities listed in section 20106(1) of the Public Health Code, 1978 PA 368, as amended MCL 333.20106(1).
 2. State-owned hospitals and surgical centers.
 3. State-operated outpatient facilities.
 4. State-operated veterans facilities.
 5. Entities used as surge capacity by any of the entities listed in subdivisions (1)-(4) of this subsection.
 8. Nothing in this order shall be taken to diminish or relax the restrictions on leaving the home established in Executive Order 2020-21 or any executive order that may follow it.
 9. Nothing in this order shall be taken to create a private right of action against an employer for failing to comply with section 1 of this order or against an individual for acting contrary to the public policies of sections 2, 3, 5, or 6 of this order.
 10. This order is effective immediately and continues until the end of the declared states of emergency and disaster.

Given under my hand and the Great Seal of the State of Michigan.

End Document