

One Crocker Boulevard Mount Clemens, Michigan 48043

Re-Opening Plan

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<u>Introduction</u>

The COVID-19 outbreak has impacted the city of Mount Clemens in unprecedented and insidious ways. By threatening public health in a widespread and lethal manner, overwhelming health care systems' ability to treat the afflicted, disrupting primary, high school and higher education, and devastating the local, regional, state and national economies, COVID-19 continues to command a response comparable to the threat presented.

At this point in time, there is no vaccine available to protect against infection by COVID-19 and by most conservative estimates, a safe and effective vaccine is eighteen to twenty-four months away under ideal research, testing, and approval protocols. Effective medical treatments for the most severely affected patients are lacking and hospitals remain vulnerable to being overwhelmed by this patient population. Consequently, social distancing is the most effective means to protecting public health at this stage. In Michigan, Governor Gretchen Whitmer by executive order implemented "Stay Home, Stay Safe" which has only recently been relaxed. COVID-19 data compiled through this end date and other factors cited in the recently issued "MI Safe Start" plan will likely dictate whether there will be an extension, or a relaxation of the restrictions imposed to date.

The City of Mount Clemens moved aggressively and quickly to protect residents and employees by closing facilities as of March 13. The ice arena, community center and Wilson Gym were closed on that date. The following week, all city buildings were closed to the public and public meetings were cancelled or postponed. Parks remained open but play equipment was taped off with barricade tape and basketball hoops were removed. Most office employees were sent to work from home.

Essential services such as fire, DPS, water plant, wastewater treatment plant, water and sewer service crews and Dial-A-Ride operations remained opened. The county sheriff's Mount Clemens patrol unit also continued to operate.

Office operations were well prepared for *Stay Home, Stay Safe* upon its implementation. Employees have been able to maintain key city services despite many having to work remotely from home. Employees, who needed one, were assigned a city owned laptop computer equipped to run the same software used in the office. They were also provided access to the city's network so they could look up and maintain records for voter registration, water and sewer billing, accounts payable, tax billing, employee data and payroll, and other applications. City telephones were forwarded to home phones or cell phones. Many of us found we could be as productive working from home as we could in the office environment.

The impending challenge is how to safely reopen city facilities to the public, without jeopardizing the health of city personnel and members of the public.

Most public health experts are advocating for the continuation of social distancing as a best practice for preventing the transmission of COVID-19. Many of these experts cite the risk of relaxing social distancing and returning to business as usual. With such a large population that has not been exposed to COVID-19, there is high probability that the virus will rapidly spread and, once again, force the imposition of a Stay Home, Stay Safe order. This risk will remain prevalent until such time as a vaccine is readily available. Accordingly, the city fully anticipates that executive orders

permitting re-opening of city facilities and resumption of non-essential services will be conditioned on a plan that provides assurances for social distancing at all times.

With so much at stake and with the state mandating social distancing, it is imperative the City of Mount Clemens develop and implement a plan for safely re-opening city facilities.

Re-Opening of City Facilities

City Hall

City Hall employees, currently working from home, will be called back to city hall on June 15. Some particularly vulnerable employees may continue to work from home.

The building will remain closed to the public until noon on June 15 so employees can be prepared for the opening.

Only the parking lot entrance to city hall will be open. The Crocker entrance will remain locked and will serve as an emergency exit only. Crash bar locks have been installed at both entrances so no one should ever be locked in the building. The outer doors at the parking lot entrance will be locked at night. The police call box has been relocated outside of the building. Any callers should be directed to use the drop box in the parking lot, not the drop box in the vestibule as that will not be available after hours. Lines will be placed floors to provide a visual indicator of appropriate spacing.

Public access will be limited to hallways and walk up counters. There will be no public access to back office areas or to private offices without escort. Doors to back office areas will always be locked. These now have combination locks installed. The combination will be provided to you separately. When someone comes to the counter requesting to see a back-office employee, the employee will be called, and will come to the counter. They may escort the person to their private office, the conference room, or address the person's concerns at the counter.

Barricade tape reels have been installed at the community development counter and between the assessing and human resources counters. These are always to be used. If they prove ineffective, we will install locking swing gates in these locations.

All public counters now have glass partitions installed. While these may look like bank security windows, they are not. They are more like sneeze guards. Their function is to reduce the potential for direct transmittal of the virus between customers and employees.

Minor adjustments were made to ensure all employee workstations are at least six feet from the nearest other workstation (measured from the chair position) or are separated by a wall or cubical partition.

Employees will be required to wear a mask when serving customers at a counter or when they must work within six feet of another employee or customer. This includes any in person meetings between employees. There will be a supply of masks in the conference room.

Employees handling money or documents also handled by the public will wear gloves.

Employees in back office areas will not be required to wear a mask, except when in close interaction with other employees or a member of the public. All employees will always have a mask on their person or desk.

All employees will be required to complete a quick health assessment and have their temperature taken every day on entering the building. We have purchased contact-less thermometers for this purpose. These are very quick and easy to use. The individual points the thermometer at the center of the forehead of the employee getting their temperature taken while keeping the thermometer 5-8 cm away. A simple click of the measurement button will register the temperature. Employees are to record this reading on their screening questionnaire. First floor employees will get their temperatures taken at the community development counter. Second floor employees will get their temperatures taken at the human resources counter.

The floor at all counters will be marked with tape to indicate six-foot separations.

Signs will be posted asking all visitors to wear a mask inside the building. If a visitor does not have a mask, one will be provided. Please report any instances of visitors refusing to wear masks to the respective department head or supervisor.

Disinfectant spray, hand sanitizer, sanitary wipes and sanitary wipes suitable for use on computers and other electronic equipment will be provided and should be used regularly. Employees should clean surfaces they touch at least twice per day. Faucet handles, doorknobs and surfaces touched by many employees should be disinfected frequently.

Disposable gloves and masks will be provided but employees may use a cloth mask, if they prefer.

The drinking fountains have been ordered to be turned off.

Employees should not congregate in the break rooms. The upstairs break room should be occupied by no more than two employees at a time, who are maintaining social distancing. The downstairs break room should be occupied by no more than one person at a time. We ask that employees not eat in the breakrooms. Employees should eat at their desks. Social gatherings of employees are prohibited. All employee meetings must comply with six-foot social distancing recommendations and masks are to be worn if distance is less.

The elevator should also not be occupied by more than one person at a time except when someone needs assistance. It is not possible to observe proper social distancing in the elevator.

To reduce trips to the mail room, a mail drop box will be provided at the HR counter.

Employees entering the public areas of the building should be wearing a mask. This is also the case for rest rooms. Ideally, only one person should be using a rest room at a time. All downstairs employees are encouraged to use the rest room in community development rather than the public restroom.

The cleaning crew is cleaning and disinfecting all knobs, sinks, counters, and white boards every evening. Employees are responsible for wiping down their personal workstation with disinfectant wipes at least twice per day. Disinfectant supplies are available in all office areas.

Signs will be posted reminding employees of the importance of personal hygiene.

Do not share pens, pencils, markers, keyboards, computer mice, telephones, or any object without disinfecting it first. Be sure to use materials and methods appropriate for electronic equipment when cleaning and disinfecting computers and other electronic equipment.

Department of Public Services

The DPS building will remain closed to the public for the foreseeable future. The only reason for the public to access to this facility is to purchase recycling bins. DPS will handle that without bringing the public into the building, as they have during the closure.

Employees shall enter the facility using the side entrance. Upon entering, all employees shall complete a health assessment screening and have their temperature taken using a contactless thermometer.

Employees will be assigned staggered break times and mealtimes to reduce the number of employees needing to use the break room simultaneously. Employees are to maintain at least six feet distance from other employees in the break room. Employees are encouraged to take breaks and consume meals outdoors.

All deliveries will come to the front door of the DPS for direction on where to unload.

Workers shall wear personal protective equipment appropriate for the task at hand.

Tools and equipment must be cleaned and disinfected daily. Employees should not share tools and equipment without further disinfecting between users. Gloves shall be worn whenever possible.

Frequent use of hand sanitizer is encouraged.

Outdoor Workers

Outdoor workers are always to maintain a minimum distance from other workers and members of the public of six feet. When distances of less than ten feet cannot be maintained, workers shall wear a mask. When distances of six feet cannot be maintained, employees shall wear an N95 mask and gloves.

Interaction with the public should be limited to the maximum extent possible.

Workers shall wear personal protective equipment appropriate for the task at hand.

Tools and equipment must be cleaned and disinfected daily. Employees should not share tools and equipment without further disinfecting between users. Gloves shall be worn whenever possible.

Employees shall not ride together in a city truck.

Water Plant and Wastewater Treatment Plant

The water plant and wastewater treatment plant will remain closed to the public permanently. Contractors and associated business personnel allowed on premises will need to adhere to social distancing and PPE guidelines. The Water Treatment Plant maintains an electronic gate system, so safe delivery drop-offs can be coordinated on a case-by-case basis. The Wastewater Treatment Plant will continue to provide a designated drop off area for deliveries, and additionally, will have an access window and doorbell should any paperwork need to be exchanged.

Employees, upon entering the facility and after punching their timecard, shall complete a health assessment screening and have their temperature taken using a contactless thermometer before their shift begins.

Employees are to maintain a minimum distance from other workers of six feet at all times. When distances of less than ten feet cannot be maintained, employees shall wear a mask. When distances of six feet cannot be maintained, employees shall wear an N95 mask and gloves.

Employees are encouraged to take staggered break and mealtimes to reduce the number of employees needing to use the break room simultaneously. Employees are to maintain at least six feet distance from other employees in the break room. Employees are encouraged to take breaks and consume meals outdoors.

Workers shall wear personal protective equipment appropriate for the task at hand.

Tools and equipment must be cleaned and disinfected daily. Employees should not share tools and equipment without further disinfecting between users. Gloves shall be worn whenever possible.

Frequent use of hand sanitizer is encouraged.

Recreation

The Community Center will remain closed to the public until the MI Safe Start Plan indicates we are in the post -pandemic phase. The activities held in this facility make proper social distancing very difficult.

Wilson Gym will remain closed to the public until the MI Safe Start Plan indicates we are in the post - pandemic. The activities held in this facility make proper social distancing impossible.

Parks were never closed to the public but play structures were taped off with barricade tape and rims were removed from basketball backboards. Play structures and basketball courts are being reopened as DPS can get the barricades removed and rims re-installed.

Softball and baseball fields will open Saturday, June 13. All leagues must adhere to the United States Specialty Sports Association Post COVID-19 Return to Play Guidelines, Procedures and Recommendations. In addition, a health assessment screening of all players, coaches, umpires and spectators shall be completed and temperatures taken with a contact less thermometer.

Dial-A-Ride

During the pandemic, Dial-A-Ride services were significantly reduced. We will continue to operate the service subject to availability of drivers and in response to service need.

The Dial-A-Ride building will remain closed to the public.

Drivers must wear a mask and gloves. Protective measures have been installed to protect the driver from the public.

Passengers must always wear a mask while on the bus.

Passengers must be seated in separate seats with every other row to remain empty to maintain proper social distancing.

Within the DAR facility, employee workstations are located more than six feet apart. When it is necessary to interact with staff members, employees are required to stay at least six feet apart or wear masks if spacing does not allow for six feet distancing.

The individual responsible for handling money must wear gloves when that task is being performed.

Shared equipment will be wiped down between uses.

Buses are cleaned and disinfected daily or more frequently if needed. Buses are assigned to individual employees and are not shared between drivers.

Fire Department

The fire station and all equipment will be cleaned and sanitized each morning and as appropriate after each call for service. Cleaning and disinfecting will be done in accordance with all Center for Disease Control (CDC) guidelines.

All members will have their temperature taken each morning at roll call or when they arrive at work. All members will self-monitor for signs and symptoms of COVID-19.

Proper Personal Protective Equipment (PPE) shall be worn on all calls for service. PPE shall be in accordance with all Macomb County Medical Control Authority (MCMCA) protocols for EMS responses. All other responses will require a minimum of an N95 mask.

All EMS procedures will be in accordance the MCMCA protocols.

All visitors to the station will be required to wear a mask that covers the mouth and nose.

Protecting the Health of Employees (All Departments and Facilities)

While preservation of social distancing within city facilities is critical, protecting the health of all city employees requires that additional best practices and protocols be instituted. The following outreach, physical improvements, and protocols will be implemented at all city facilities and integrated into policies developed for city operations that occur offsite:

Employee Education – Employees will receive direct communications on how to protect themselves and others in the workplace from the potential for transmission of COVID-19. Please see attached brochure at Exhibit B.

Policies for Off-Site Work – Employees who provide public services outside of city facilities are subject to detailed policies developed by Directors to protect their health and observe best practices while in the field. Please see attached policies at Exhibit C.

Health Monitoring – Every city employee reporting for work will complete a health screening that includes a health assessment questionnaire and temperature check. Employees with an elevated temperature are directed to notify their supervisor and will not be allowed to enter the work area.

Personal Protective Equipment – Employees will be provided with personal protective equipment, including gloves, masks, and face shields, as appropriate to their job activities. A mask or face shield must be worn, if the employee is able to medically tolerate a face covering, whenever an employee enters, moves around, and exits a city facility and whenever dealing with a member of the public or where social distancing of six feet is not possible. Masks are optional when sitting at a desk or workstation, only. Gloves are available and use is mandatory if you are exchanging money, documents, or articles with a member of the public.

Barriers – Plexiglass and sneeze guards are being installed at all service counters and in confined work areas where social distancing is not achievable as a physical barrier to the person-to-person transmission of COVID-19.

Hand Sanitizer Stations – city facilities will be outfitted with multiple wall-mounted and free-standing hand sanitizer stations for use by employee and visitors.

Enhanced Cleaning/Disinfecting of Facilities – In addition to the schedule of daily cleaning, the city's contracted janitorial service provider will be conducting periodic wipe downs within facilities throughout the workday and completing a deep cleaning of city facilities every weekend. The city is prepared to have areas where there has been contact involving an individual known to be COVID-19 positive disinfected by a service provider that specializes in this level of cleaning.

Ambient Air Quality – The HVAC filters used at all facilities will be upgraded to the highest attainable standard based on current HVAC capacities consistent with best practices recommended by the "MI Safe Start" plan.

Cleaning/Disinfecting of Tools and Equipment - Should any sharing of tools be required, employees must disinfect and clean each tool or piece of equipment following their use of same

and before any other employee uses the tool or piece of equipment. Disinfecting wipes and other disinfecting products will be supplied to employees for this purpose.

Signage – To ensure there is proper observance of protocols in place for the safety of employees, signage will be placed on the exterior and interior of city facilities. Please see Exhibit D for copies of signage.

Visitors – For the protection of employees, all visitors are required to wear a mask while inside a city facility if they can medically tolerate a face covering. Gloves will be optional for visitors. A supply of masks and gloves will be available to visitors at the entrance to city facilities.

Employee Suspected or Confirmed as a COVID-19 Case

A screening questionnaire must be completed by each staff member prior to starting their shift. Answering yes to any question on the screening questionnaire will prompt additional questions being asked by supervisors or the human resources department. The employee may be sent home for follow up care from a physician or to self-monitor their symptoms.

An employee will be considered to have a Suspected Case of COVID-19 if:

- 1. The employee is experiencing any of the following COVID-19 symptoms: fever, shortness of breath, and/or continuous cough; or
- 2. The employee is experiencing at least two of the following COVID-19 symptoms: chills, repeated shaking with chills, muscle pain, headache, sore throat, and/or loss of taste or smell.
- 3. An immediate family member or a person who the employee is residing with has tested positive for or exhibited symptoms of COVID-19; or,
- 4. In the last fourteen (14) days, the employee has been exposed to a person who has tested positive for COVID-19.

An employee suspected as a COVID-19 Case is required to:

- 1. Immediately notify the employee's direct supervisor and/or human resources.
- 2. Self-quarantine for fourteen (14) days.
- Seek immediate medical evaluation and care.

If an employee qualifies as a suspected COVID-19 case, the city will:

1. Notify all employees who may have come into close contact (defined as being within six feet for a prolonged period of time without personal protection equipment) with the employee in the

past fourteen (14) days; and,

2. Ensure that the employee's work area is thoroughly disinfected.

An employee will be considered to have a Confirmed Case of COVID-19 if the employee has been working on-site in the past fourteen (14) days and tested positive for COVID-19.

An employee suspected as a COVID-19 Case is required to:

- 1. Immediately notify the employee's direct supervisor and/or Human Resources; and,
- 2. Remain off work until cleared to return in accordance with the requirements of this plan.
- 3. If an employee qualifies as a suspected COVID-19 case, the city will:
- 4. Notify all employees who may have come into close contact (defined as being within six feet for a prolonged period of time without personal protection equipment) with the employee in the past fourteen (14) days;
- 5. Ensure that the employee's work area is thoroughly disinfected.
- 6. If necessary, close the work area until all necessary disinfecting is completed; and,
- 7. Communicate with employees about the presence of a confirmed COVID- 19 case and the disinfecting plan, including when the work area will be available

Employee Return to Work – An employee who has a suspected COVID-19 case is prohibited from returning to work until:

- 1. Fourteen (14) days have lapsed since the employee was quarantined; or,
- 2. The employee has had no fever for at least 72 hours (i.e. 3 full days of no fever without the use of medicine that reduces fevers), other symptoms have improved, and at least 7 days have passed since symptoms first appeared; or,
- 3. The employee receives a negative COVID-19 test.

The city reserves the right to require a COVID-19 test as a condition of return to work.

In the case of a confirmed case of COVID-19, the employee will be permitted to return to work if

- 1. The employee no longer has a fever (without the use of medicine that reduces fevers)
- 2. Other symptoms have improved, and

3. the employee tests negative on two COVID-19 tests administered 24 hours apart following CDC guidelines.

Return to work rules for firefighters will be administered in accordance with Center for Disease Control (CDC) guidelines for first responders, as amended.

Exhibits

Health assessment card

Signs

Crocker Doors

This entrance is closed. Please use the parking lot entrance. Hours 8:00 am-4:30 pm

Parking Lot Doors

Please wear a mask inside city hall Check in at community development counter Hours 8:00 am-4:00 pm

Bathrooms

Wash hands well

MI Safe Start Plan – Please visit

https://www.michigan.gov/documents/whitmer/MI_SAFE_START_PLAN_689875_7.pdf

Executive Order – Please visit https://www.michigan.gov/coronavirus/ for the latest Executive Orders.

Exhibit ## MI Safe Start Plan



Governor Gretchen Whitmer

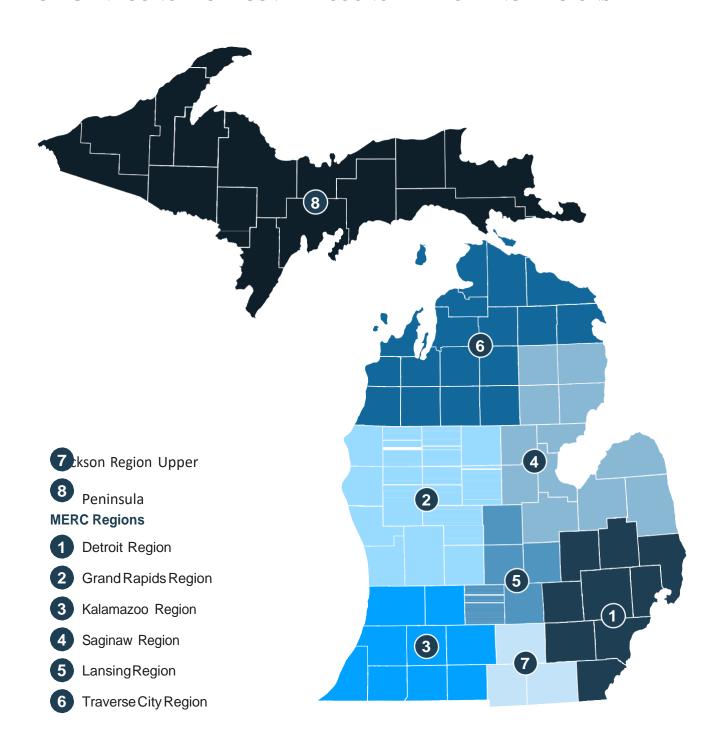
May 7, 2020

MISAFESTARTPLAN

		controlled 2 Persis		- Elatte		ning	4 Improving		5 Containing		6 Post-	mic
What's happening with the disease?	Increasing number of new cases every day, likely to overwhelm the health system		Continue to see high case levels with concern about health system capacity		Case growth is gradually declining		Cases, hospitalizations and deaths are clearly declining		Continued case and death rate improvements and outbreaks can be quickly contained		Community sp expected to re	
What do we need to do to stay safe?	Strict soc travel res coverings	me, Stay Safe: cial distancing, strictions, face s, hygiene best remote work	Stay Home, Stay Safe: Strict social distancing, travel reduction, face coverings, hygiene best practices, remote work			reased face face co erings workpla		istancing, gs, safe ractices	Stay Safe: An new guideline Continued discoverings, mi workplaces Increased siz gatherings	es. stancing, tigated	Sufficient com immunity and of treatment	
What work can we do? (Examples)	 First Healt Critic manu Food Esse (e.g., 	ofrastructure responders h care workers al ifacturing and agriculture ntial retail grocery) sportation	Critical infrastructure Additional types of recreation allowed		Specified lower-risk businesses with strict workplace safety measures Construction Manufacturing Real estate Outdoor work		Additional lower-risk businesses with strict safety measures Other retail, with capacity limits Offices, but telework required if possible		Most businesses, with strict mitigation measures Restaurants / bars K-12 and higher ed. (live instruction) Travel		All businesses Events and gatherings of all sizes with new safety guidance and procedures Social distancing rules are relaxed and large events are permitted	
What factors determine progression to next phase? Hospital and capacity built, care facilities Infrastructure response and systems to m		Analysis shows growth rates slo Hospital and trecapacity built, al care facilities es Infrastructure for response and daystems to moniprogression are	wing atment ternative tablished crisis ata tor in place	Cases, deaths decline for extended period Monitor impact on vulnerable populations Sufficient health system capacity in place Improved testing, contact tracing and containment capacity		Cases and deaths decline more sharply, percent positivity decreasing Healthcare system capacity continues to strengthen Robust testing, contact tracing and containment protocols in place		low absolute capita Health syste is very stron Robust testi tracing and protocols in	Health system capacity s very strong Robust testing, contact racing and containment protocols in place		e of an erapy	
becomes available			It is also	possible to m	nove backward	s if risk increas	ses and if we s	top adhering to	safe practices			



MICHIGANECONOMICRECOVERY COUNCIL REPORTING REGIONS



INTRODUCTION

- We have made tremendous progress in fighting COVID-19 in Michigan. Our medical workers, first responders, and other critical workers have put their lives on the line for us every day, and we owe it to them to do whatever we can to stop the spread of the virus.
- All of us know the importance of getting the economy moving again. We have already loosened some restrictions on landscaping, construction, and manufacturing. But the worst thing we could do is open up in a way that causes a second wave of infections and death, puts health care workers at further risk, and wipes out all the progress we've made.
- We will keep listening to experts and examining the data here in Michigan to reduce deaths, keep our healthcare system from collapsing, and protect those working on the front lines.

Together, we will move forward.

- **Governor Gretchen Whitmer's MI Safe Start Plan** outlines how we will begin to re-engage while continuing to keep our communities safe. Re-engagement will happen in phases. Those businesses that are necessary to protect and sustain life are already open. As we move into lower-risk phases, additional business categories will re-open and the restrictions on public gatherings and social interactions will ease.
- As always, we will be guided by the facts in deciding whether to transition from one phase to another. We are looking at data every day to understand where we are: data that tells us where the epidemic is spreading, whether our hospitals and other health-care providers can safely cope with any surge in infections, and whether our public health system is up to the task of suppressing new outbreaks.
- We need to keep working to expand testing and require people who test positive, or are close contacts of those who do, to self-isolate. Moving too fast without the tests we need could put Michigan at risk of a second wave of infections. The most important thing right now is to listen to the experts and follow the medical science.
- We are also looking at the best available evidence on the risks that different business sectors present and the steps that can be taken to mitigate those risks and protect workers. Our Safe Start Plan has been guided by the state's top public health and university experts, and is based on input from a wide range of experts, including the CEOs of major Michigan companies, labor and union leaders, and small business owners around Michigan.
- We must reopen gradually and safely. By proceeding incrementally, we can evaluate the effects of our decisions. If cases start to surge, we may need to tighten up again. If the disease is contained, we can keep relaxing. The MI Safe Start Plan will re-engage our economy carefully and



deliberately to avoid a second wave of infections.

This will be a long process. Our ability to move forward depends on all of us and on our collective commitment to protecting ourselves and others—whether at home, at work, or anywhere else we go. We will always put the health and safety of Michiganders first.



STAGES OF OUR RESPONSE

In Governor Whitmer's Safe Start Plan, we evaluate where the state and each of its regions are across six phases of this epidemic:

- 1. **Uncontrolled growth:** Increasing number of new cases every day, likely to overwhelm the health system. Only critical infrastructure remains open.
- 2. **Persistent spread:** Continue to see high case levels with concern about health system capacity. Only critical infrastructure remains open, with lower-risk recreational activities allowed.
- 3. **Flattening:** Epidemic is no longer increasing and health system capacity is sufficient for current needs. Specified lower-risk businesses can reopen given adherence to strict safety measures.
- 4. **Improving:** Epidemic clearly decreasing and health system capacity is strong with robust testing and contact tracing. Additional businesses can reopen given adherence to strict safety measures.
- 5. **Containing:** Epidemic levels are extremely low and outbreaks can be quickly contained. Health system capacity is strong with robust testing and tracing. Most businesses can reopen given adherence to strict safety measures.
- 6. **Post-pandemic:** Community spread is not expected to return (e.g., because of a vaccine) and the economy is fully reopened.

Assessing which phase we are in involves a comprehensive review of the facts on the ground. Guided by our experts, we are closely monitoring data that allows us to answer three questions:

- A. Is the epidemic growing, flattening, or declining?
- B. Does our health system have the capacity to address current needs? Can it cope with a potential surge of new cases?
- C. Are our testing and tracing efforts sufficient to monitor the epidemic and control its spread?
- We have also worked with our best public health experts and the business community to assess the infection risks posed by workplaces across every sector of the economy. In general, those businesses that are likely to re-open sooner are those that present lower levels of infection risk and whose work cannot be performed remotely. We have also evaluated risk mitigation strategies to minimize the chance that any infection will spread at the workplace. Within each phase, businesses may reopen
- in a staggered manner to ensure safety. Finally, as our understanding of this disease improves, our assessments of what is appropriate in each phase could change to match the latest scientific evidence.



We are also establishing working groups to advise the state on how we can safely re-engage child care and summer camps, as well as businesses such as restaurants and bars, travel and tourism, and entertainment venues, so that when it is safe, there are best practices established for how to partially open in a low-risk manner.

The following sections outline our approach for moving between phases as well as details on each phase of the MI Safe Start Plan.



When do we move between phases?

Guided by our public health experts, we are carefully evaluating the best available data to understand the degree of risk and readiness in Michigan. We are complementing that analysis with an understanding of the on-the-ground contextual realities. This comprehensive assessment is a critical input into whether we are prepared to move to the next phase and – just as importantly – whether the disease is surging and we need to adjust our approach.

It is crucial that we monitor the impact of each set of re-engagement activities before moving into the next phase. New transmission can take some time to become visible, and we need to understand any impact of previous re-engagement activities on new disease spread before evaluating a transition to the next stage. As we move into later phases, or if our progress stalls out, it may take longer to move from one phase to another.

Furthermore, it is important to evaluate indicators together: even though some may point to a lower level of risk, others may not. For example, if cases are declining but the health system does not have capacity to address a sudden uptick in cases, the degree of overall risk may still be high.

We will also examine whether different regions within Michigan may be at different phases. That inquiry, too, must be holistic: a region with a low rate of infection may have limited hospital capacity, for example, which puts it at relatively greater risk if an outbreak occurs. Where appropriate, however, regional tailoring makes sense for a state as large and diverse as ours.

Examples of the evidence reviewed for each of the three questions is described below:

A. Is the epidemic growing, flattening, or declining?

Evidence analyzed includes:

- The number of new cases per million: low levels of new cases can suggest limited continued transmission; high levels of new cases can suggest continued transmission activity.
- **Trends in new daily cases:** sustained decreases may suggest that there has not been new takeoff of the disease; increases would provide concern that there has been new takeoff.
- % positive tests: if testing levels are high, a low proportion of positive tests is further evidence of declining spread, and also suggests that we have a good understanding of the state of the

epidemic. If there is a high proportion of positive tests, it could suggest further disease spread,



or $\,$ that we have a poor understanding of the true extent of the epidemic.



B. Does our health system have the capacity to address current needs as well as a potential increase, should new cases emerge?

Evidence analyzed includes:

- Hospital capacity: if hospitals are able to surge to accommodate a higher case load, it
 suggests that, if a small uptick in new cases occurred during additional re-engagement, our
 health system would not be overwhelmed. If hospitals are not able to surge in this way, any
 new case spread could threaten our health system.
- **PPE availability:** if hospitals have sufficient PPE to manage increased caseloads, it suggests health system capability to handle a small uptick in new cases.

C. Are our testing and tracing efforts sufficient to monitor the epidemic and control its spread?

Evidence analyzed includes:

- **Testing capacity:** if we are able to ensure that the individuals at risk in each re-engagement phase have access to testing when needed, we will be able to give individuals the information they need to stay safe and, at the same time, allow us to closely track the impact of re-engagement activities on our case growth. If we do not have this testing capacity, it will be harder to give our people and our decision-makers the information they need.
- Tracing and containment effectiveness: if we are able to quickly follow up on any newly identified cases and associated contacts, and if those individuals effectively self-isolate, we can more successfully contain any new increase in disease spread. Otherwise, transmission is likely to be higher, increasing our risk.

As new guidance continues to be provided by the CDC and other public health experts, our assessment will adjust to be continually informed by the best available science.



PHASE 1: UNCONTROLLED GROWTH

What does it look like



he number of daily new cases increases by a constant rate every day, which leads to an increasingly accelerating case curve. If a community remains in this phase for an extended period of time, healthcare facilities could quickly be overwhelmed. Because unmitigated behavior contributes to the exponential growth, communities can slow the growth rate and exit this phase by introducing social distancing practices and wearing masks when in public.

What work can we do

What do we need to do to stay safe

Businesses and organizations

only work that is necessary to protect or sustain life will be permitted

- Retail: Limited to grocery stores and other critical retail (e.g., pharmacies)
- Public Transportation: Permitted
- Restaurants & Bars: Available for take-out, delivery and drive-through only
- Manufacturing: Critical manufacturing only
- Construction: Only permitted for critical infrastructure projects
- Food & Agriculture: Permitted
- Offices: Closed to all non-critical workers during this phase
- Education & Child Care: Remote learning in K-12 and higher educaion, child care for critical workers

Personal and social

- **Social Distancing:** In place, maintain a six-foot distance from others when outdoors / in public
- Face coverings: Required
- Gatherings: Not permitted
- Outdoor Recreation: Walking, hiking, biking permitted
- Quarantine/Isolation: Individuals who have confirmed or suspected COVID-19 must isolate, and any individual with a known exposure must quarantine, according to CDC and public health guidance
- At-risk populations: All at-risk individuals should continue to shelter
 in place. Members of households with at-risk residents should be
 aware that by returning to work or other environments where
 distancing is not possible, they could carry the virus back home.
 Precautions should be





taken to isolate from at-risk residents. Businesses should strongly consider special accommodations for personnel who are members of an at-risk population



PHASE 2: PERSISTENT SPREAD

What does it look like



his phase occurs after the Uncontrolled Growth phase, but when the epidemic is still expanding in the community. There are still high case levels, but the growth rate might gradually decrease. Within this phase, the epidemic is widespread in a community and source of infection is more difficult to trace. Even though the growth rate of new cases is decreasing, high volumes of infected individuals mean that health systems could become overwhelmed, leading to higher mortality rates. During this phase, it is important to maintain social distancing practices in order to slow the spread to a level that health systems can handle as they are continuing to build capacity.

What work can we do

What do we need to do to stay safe

Businesses and organizations

nly work that is necessary to protect or sustain life will be permitted

- **Retail:** Limited to grocery stores and other critical retail (e.g., pharmacies), plus curbside or delivery for nonessential retail
- Public Transportation: Permitted
- Restaurants & Bars: Available for take-out, delivery and drive-through only
- Manufacturing: Critical manufacturing only
- Construction: Only permitted for critical infrastructure projects
- Food & Agriculture: Permitted
- Offices: Closed to all non-critical workers during this phase
- Education & Child Care: Remote learning in K-12 and higher education, child care for critical workers

Personal and social

- **Social Distancing:** In place, maintain a six-foot distance from other when outdoors / in public
- Face coverings: Required
- Gatherings: Not permitted
- Outdoor Recreation: Walking, hiking, biking permitted.
 Additional recreationallowed, including golfing and motorboating
- Quarantine/Isolation: Individuals who have confirmed or suspected COVID-19 must isolate, and any individual with a known exposure must quarantine, according to CDC and public health guidance





At-risk populations: All at-risk individuals should continue to shelter
in place. Members of households with at-risk residents should be
aware that by returning to work or other environments where
distancing is not possible, they could carry the virus back home.
Precautions should be

taken to isolate from at-risk residents. Businesses should strongly consider special accommodations for personnel who are members of an at-risk population



PHASE 3: FLATTENING

What does it look like



What work can we do

What do we need to do to stay safe

his phase occurs when daily new cases and deaths remain relatively constant over a time period. Often, this occurs because communities have started use social distancing practices and transmission rates have fallen to manageable levels. Because new cases are not constantly increasing, health system capacity has time to expand to epidemic needs and is not typically overwhelmed. During this phase, testing and contact tracing efforts are ramped up statewide. To prevent each infected individual from spreading the virus unchecked, rapid case investigation, contact tracing, and containment practices are necessary within a community.

Businesses and organizations

on-critical businesses that pose lower risk of infection are able to open with increased safety measures during this phase:

- Retail: Limited to grocery stores and other critical retail (e.g., pharmacies), plus curbside or delivery for nonessential retail
- Public Transportation: Permitted
- Restaurants & Bars: Available for take-out, delivery and drive-through only
- Manufacturing: Permitted with additional safety measures and guidelines
- **Construction:** Permitted with additional safety measures and guidelines
- Food & Agriculture: Permitted
- Offices: Closed to all non-critical workers
- Education & Child Care: Remote learning in K-12 and higher education, child care for critical workers and anyone resuming work activities
- Outdoor work: Permitted with additional safety measures and guidelines

Personal and social

- **Social Distancing:** In place, maintain a six-foot distance from other when outdoors / in public
- Face coverings: Required
- Gatherings: Not permitted
- Outdoor Recreation: Walking, hiking, biking, golfing, boating permitted
- Quarantine/Isolation: Individuals who have confirmed or suspected COVID-19 must isolate, and any individual with a known exposure must quarantine, according to CDC and public health guidance
- At-risk populations: All at-risk individuals should continue to shelter





in place. Members of households with at-risk residents should be aware that by returning to work or other environments where distancing is not possible, they could carry the virus back home. Precautions should be

taken to isolate from at-risk residents. Businesses should strongly consider special accommodations for personnel who are members of an at-risk population



PHASE 4: IMPROVING

What does it look like



his phase occurs when the number of new cases and deaths has fallen for a period of time, but overall case levels are still high. When in the Improving phase, most new outbreaks are quickly identified, traced, and contained

ue to robust testing infrastructure and rapid contact tracing. Health system capacity can typically handle these new outbreaks, and therefore case fatality rate does not rise above typical levels. Though a community might be in a declining phase, the overall number of infected individuals still indicate the need for distancing to stop transmission and move to the next phase.

What work can we do

What do we need to do to stay safe

Businesses and organizations

1ost business and organizations will be open throughout this phase under strict safety measures. These include:

- Retail: Permitted with additional safety measures and guidelines (e.g., limited capacity)
- Public Transportation: Permitted
- Restaurants & Bars: Available for take-out, delivery and drive-through only
- Manufacturing: Permitted with additional safety measures and guidelines
- Construction: Permitted with additional safety measures and guidelines
- Food & Agriculture: Permitted
- Offices: Open (remote work still required where feasible)
- **Education:** Remote learning in K-12 and higher education, summer programs in small groups
- Outdoor work: Permitted with additional safety measures and guidelines

Personal and social

- **Social Distancing:** In place, maintain a six-foot distance from other when outdoors / in public
- Face coverings: Required
- Gatherings: Limited to small groups with social distancing
- Outdoor Recreation: Walking, hiking, biking, golfing, boating permitted. Activities permitted in small groups with social distancing
- Quarantine/Isolation: Individuals who have confirmed or suspected COVID-19 must isolate, and any individual with a known exposure must quarantine, according to CDC and public health





guidance

At-risk populations: All at-risk individuals should continue to shelter
in place. Members of households with at-risk residents should be
aware that by returning to work or other environments where
distancing is not possible, they could carry the virus back home.
Precautions should be

taken to isolate from at-risk residents. Businesses should strongly consider special accommodations for personnel who are members of an at-risk population



PHASE 5: CONTAINING

What does it look like



uring the Containing phase, new cases and deaths continue to decrease for an additional period of time. At this point, the number of active cases has

eached a point where infection from other members of the community is less common. With widespread testing, positivity rates often fall much lower than earlier phases. Rapid case investigation, contact tracing, and containment strategies cause new cases to continue to fall. However, if distancing and other risk mitigation efforts are not continued, infections could begin to grow again because a permanent solution to the epidemic has not yet been identified.

What work can we do

What do we need to do to stay safe

Businesses and organizations

1ost business and organizations will be open throughout this phase under strictsafety measures

- **Retail:** Permitted with additional safety measures and guidelines (e.g., limited capacity)
- Public Transportation: Permitted
- Restaurants & Bars: Available for dine-in with additional safety measures and guidelines
- Manufacturing: Permitted with additional safety measures and guidelines
- Construction: Permitted with additional safety measures and guidelines
- Food & Agriculture: Permitted
- Offices: Open with additional safety measures and guidelines
- Education: Live instruction in K-12 and higher education
- Outdoor work: Permitted with additional safety measures and guidelines

Personal and social

- Social Distancing: In place, maintain a six-foot distance from other when outdoors / in public
- Face coverings: Required wherever possible
- Gatherings: Incrased but still limited-sized groups with social distancing
- Outdoor Recreation: All outdoor recreation allowed
- Quarantine/Isolation: Individuals who have confirmed or suspected COVID-19 must isolate, and any individual with a known exposure must quarantine, according to CDC and public health guidance





At-risk populations: All at-risk individuals should continue to shelter
in place. Members of households with at-risk residents should be
aware that by returning to work or other environments where
distancing is not possible, they could carry the virus back home.
Precautions should be

taken to isolate from at-risk residents. Businesses should strongly consider special accommodations for personnel who are members of an at-risk population



PHASE 6: POST-PANDEMIC

What does it look like



eaching this phase would mean that community spread is not expected to return, because of sufficient community immunity and availability of treatment. Because of this, the number of infected individuals falls to nearly zero and the community does not typically experience this strain of the epidemic returning. All areas of the economy reopen, and gatherings of all sizes resume.

What work can we do

What do we need to do to stay safe

Businesses and organizations

ll businesses and organizations open with some lasting safety requirements

Personal and social

linimal to no lasting limitations on personal and/or social activities





CONTROLLING SPREAD IN THE WORKPLACE

There are best practices workplaces should follow, with different levels of importance depending on the industry. The proper implementation of these best practices will mitigate risk in the workplace and allow for a safe and sustained return to work. If workplaces fail to follow some or all of these guidelines, it may curb the state-wide progress toward the revitalization phase and result in a

re-instating of stricter social limitations.

These best practices fall into five

categories:

A. Access control: Implementing best practices to quickly identify and catalogue potential introductions of COVID-19 into the workplace

- Daily symptom diaries (mandatory questionnaires self-attesting to symptoms and contacts)
- On-site temperature checks
- Rapid diagnostic testing protocols
- Intake procedures for visitors
- Guidelines for delivery areas

B. Social distancing: Minimizing levels of close contact within the workplace to limit the spread of COVID-19 among workers

- Remote work (standards for who can work in person, social distancing guidelines for work from home)
- Restrictions on common instances of non-essential close contact (e.g., crowded conference rooms, cafeterias)
- Restriction on in-person meeting size
- Physical barriers between workspaces

C. Sanitation / Hygiene: Increasing both the frequency and vigor of common cleaning practices as well as implementing new ones to reduce the amount of time COVID-19 can live on surfaces

- Frequent disinfection / cleaning (facilities and equipment)
- Local exhaust ventilation
- HEPA filters on HVAC units



- Availability of hand-washing facilities
- Restrictions on shared tooling / machinery



D. PPE: Ensuring all employees have access to personal protective equipment to keep them from both contracting and transmitting the COVID-19 virus

- Masks to be worn whenever workers cannot consistently maintain six-feet of separation
- Gloves as necessary
- Face shields as necessary

E. Contact tracing / Isolation: Designing and imparting to employees important procedures and protocols on what occurs if an employee is suspected to have and/ or diagnosed with COVID-19

- Isolation protocols
- Notification protocols (HR, first responders, government authorities)
- Investigation standards
- Facility cleaning / shutdown procedure
- Quarantine and return-to-work guidelines





GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN OFFICE OF THE GOVERNOR LANSING

GARLIN GILCHRIST II LT. GOVERNOR

EXECUTIVE

ORDER No. 2020-97

Safeguards to protect Michigan's workers from

COVID-19 Rescission of Executive Order 2020-91

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 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 et seq., and the Emergency Powers of the Governor Act of 1945, 1945 PA 302, as amended, MCL 10.31 et seq.

Since then, the virus spread across Michigan, bringing deaths in the thousands, confirmed cases in the tens of thousands, and deep disruption to this state's economy, homes, and educational, civic, social, and religious institutions. On April 1, 2020, in response to the widespread and severe health, economic, and social harms posed by the COVID-19 pandemic, I issued Executive Order 2020-33. 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. And on April 30, 2020, finding that COVID-19 had created emergency and disaster conditions across the State of Michigan, I issued Executive Order 2020-67 to continue the emergency declaration under the Emergency Powers of the Governor Act, as well as Executive Order 2020-68 to issue new emergency and disaster declarations under the Emergency Management Act.

The Emergency Management Act vests the governor with broad powers and duties to "cop[ewith 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).

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To suppress the spread of COVID-19, to prevent the state's health care system from being overwhelmed, to allow time for the production of critical test kits, ventilators, and personal protective equipment, to establish the public health infrastructure necessary to contain the spread of infection, and to avoid needless deaths, it is reasonable and necessary to direct residents to remain at home or in their place of residence to the maximum extent feasible. To that end, on March 23, 2020, I issued Executive Order 2020-21, ordering all people in Michigan to stay home and stay safe. In Executive Orders 2020-42, 2020-59, 2020-70, 2020-77, and 2020-92, I extended that initial order, modifying its scope as needed and appropriate to match the ever-changing circumstances presented by this pandemic.

The measures put in place by these executive orders have been effective: the number of new confirmed cases each day has started to drop. Although the virus remains aggressive and persistent—on May 20, 2020, Michigan reported 53,009 confirmed cases and 5,060 deaths—the strain on our health care system has begun to relent, even as our testing capacity has increased. We have now begun the process of gradually resuming in-person work and activities that were temporarily suspended under my prior orders. In so doing, however, we must move with care, patience, and vigilance, recognizing the grave harm that this virus continues to inflict on our state and how quickly our progress in suppressing it can be undone.

In particular, businesses must do their part to protect their employees, their patrons, and their communities. Many businesses have already done so by implementing robust safeguards to prevent viral transmission. But we can and must do more: no one should feel unsafe at work. With Executive Order 2020-91, I created an enforceable set of workplace standards that apply to all businesses across the state. I am now amending those standards to include new provisions governing outpatient health-care facilities.

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

- 1. All businesses or operations that are permitted to require their employees to leave the homes or residences for work under Executive Order 2020-92, and any order that follows it, must, at a minimum:
 - (a) Develop a COVID-19 preparedness and response plan, consistent with recommendations in Guidance on Preparing Workplaces for COVID-19, developed by the Occupational Health and Safety Administration and available here. By June 1, 2020, or within two weeks of resuming in-person activities, whichever is later, a business's or operation's plan must be made readily available to employees, labor unions, and customers, whether via website, internal network, or by hard copy.
 - (b) Designate one or more worksite supervisors to implement, monitor, and report on the COVID-19 control strategies developed under subsection (a). The supervisor must remain on-site at all times when employees are present on site. An on-site employee may be designated to perform the supervisory role.

(c) Provide COVID-19 training to employees that covers, at a minimum:

- (1) Workplace infection-control practices.
- (2) The proper use of personal protective equipment.
- (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.
- (4) How to report unsafe working conditions.
- (d) Conduct a daily entry self-screening protocol for all employees or contractors entering the workplace, including, at a minimum, a questionnaire covering symptoms and suspected or confirmed exposure to people with possible COVID-19.
- (e) Keep everyone on the worksite premises at least six feet from one another to the maximum extent possible, including through the use of ground markings, signs, and physical barriers, as appropriate to the worksite.
- (f) Provide non-medical grade face coverings to their employees, with supplies of N95 masks and surgical masks reserved, for now, for health care professionals, first responders (e.g., police officers, fire fighters, paramedics), and other critical workers.
- (g) Require face coverings to be worn when employees cannot consistently maintain six feet of separation from other individuals in the workplace, and consider face shields when employees cannot consistently maintain three feet of separation from other individuals in the workplace.
- (h) Increase facility cleaning and disinfection 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).
- (i) Adopt protocols to clean and disinfect the facility in the event of a positive COVID-19 case in the workplace.
- (j) 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.
- (k) 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 come into contact

with the person with a confirmed case of COVID-19.

(l) An employer 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").

- (m) Follow Executive Order 2020-36, 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.
- (n) Establish a response plan for dealing with a confirmed infection in the workplace, including protocols for sending employees home and for temporary closures of all or part of the worksite to allow for deep cleaning.
- (o) Restrict business-related travel for employees to essential travel only.
- (p) Encourage employees to use personal protective equipment and hand sanitizer on public transportation.
- (q) Promote remote work to the fullest extent possible.
- (r) Adopt any additional infection-control measures that are reasonable in light of the work performed at the worksite and the rate of infection in the surrounding community.
- 2. Businesses or operations whose work is primarily and traditionally performed outdoors must:
 - (a) Prohibit gatherings of any size in which people cannot maintain six feet of distance from one another.
 - (b) Limit in-person interaction with clients and patrons to the maximum extent possible, and bar any such interaction in which people cannot maintain six feet of distance from one another.
 - (c) Provide and require the use of personal protective equipment such as gloves, goggles, face shields, and face coverings, as appropriate for the activity being performed.
 - (d) Adopt protocols to limit the sharing of tools and equipment to the maximum extent possible and to ensure frequent and thorough cleaning and disinfection of tools, equipment, and frequently touched surfaces.
- 3. Businesses or operations in the construction industry must:
 - (a) Conduct a daily entry screening protocol for employees, contractors, suppliers, and any other individuals entering a worksite, including a questionnaire covering

symptoms and suspected or confirmed exposure to people with possible COVID-19, together with, if possible, a temperature screening.

- (b) Create dedicated entry point(s) at every worksite, if possible, for daily screening as provided in sub-provision (b) of this section, or in the alternative issue stickers or other indicators to employees to show that they received a screening before entering the worksite that day.
- (c) Provide instructions for the distribution of personal protective equipment and designate on-site locations for soiled face coverings.
- (d) Require the use of work gloves where appropriate to prevent skin contact with contaminated surfaces.
- (e) Identify choke points and high-risk areas where employees must stand near one another (such as hallways, hoists and elevators, break areas, water stations, and buses) and control their access and use (including through physical barriers) so that social distancing is maintained.
- (f) Ensure there are sufficient hand-washing or hand-sanitizing stations at the worksite to enable easy access by employees.
- (g) Notify contractors (if a subcontractor) or owners (if a contractor) of any confirmed COVID-19 cases among employees at the worksite.
- (h) Restrict unnecessary movement between project sites.
- (i) Create protocols for minimizing personal contact upon delivery of materials to the worksite.

Water Plant and Sewage Treatment Plant

4. Manufacturing facilities must:

- (a) Conduct a daily entry screening protocol for employees, contractors, suppliers, and any other individuals entering the facility, including a questionnaire covering symptoms and suspected or confirmed exposure to people with possible COVID-19, together with temperature screening as soon as no-touch thermometers can be obtained.
- (b) Create dedicated entry point(s) at every facility for daily screening as provided in sub-provision (a) of this section, and ensure physical barriers are in place to prevent anyone from bypassing the screening.
- (c) Suspend all non-essential in-person visits, including tours.
- (d) Train employees on, at a minimum:

- (1) Routes by which the virus causing COVID-19 is transmitted from person to person.
- (2) Distance that the virus can travel in the air, as well as the time it remains viable in the air and on environmental surfaces.
- (3) The use of personal protective equipment, including the proper steps for putting it on and taking it off.
- (e) Reduce congestion in common spaces wherever practicable by, for example, closing salad bars and buffets within cafeterias and kitchens, requiring individuals to sit at least six feet from one another, placing markings on the floor to allow social distancing while standing in line, offering boxed food via delivery or pick-up points, and reducing cash payments.
- (f) Implement rotational shift schedules where possible (e.g., increasing the number of shifts, alternating days or weeks) to reduce the number of employees in the facility at the same time.
- (g) Stagger meal and break times, as well as start times at each entrance, where possible.
- (h) Install temporary physical barriers, where practicable, between work stations and cafeteria tables.
- (i) Create protocols for minimizing personal contact upon delivery of materials to the facility.
- (j) Adopt protocols to limit the sharing of tools and equipment to the maximum extent possible.
- (k) Ensure there are sufficient hand-washing or hand-sanitizing stations at the worksite to enable easy access by employees, and discontinue use of hand dryers.
- (l) Notify plant leaders and potentially exposed individuals upon identification of a positive case of COVID-19 in the facility, as well as maintain a central log for symptomatic employees or employees who received a positive test for COVID-19.
- (m) Send potentially exposed individuals home upon identification of a positive case of COVID-19 in the facility.
- (n) Require employees to self-report to plant leaders as soon as possible after developing symptoms of COVID-19.

- (o) Shut areas of the manufacturing facility for cleaning and disinfection, as necessary, if an employee goes home because he or she is displaying symptoms of COVID-19.
- 5. Research laboratories, but not laboratories that perform diagnostic testing, must:
 - (a) Assign dedicated entry point(s) and/or times into lab buildings.
 - (b) Conduct a daily entry screening protocol for employees, contractors, suppliers, and any other individuals entering a worksite, including a questionnaire

- covering symptoms and suspected or confirmed exposure to people with possible COVID-19, together with, if possible, a temperature screening.
- (c) Create protocols and/or checklists as necessary to conform to the facility's COVID-19 preparedness and response plan under section 1(a).
- (d) Suspend all non-essential in-person visitors (including visiting scholars and undergraduate students) until further notice.
- (e) Establish and implement a plan for distributing face coverings.
- (f) Limit the number of people per square feet of floor space permitted in a particular laboratory at one time.
- (g) Close open workspaces, cafeterias, and conference rooms.
- (h) As necessary, use tape on the floor to demarcate socially distanced workspaces and to create one-way traffic flow.
- (i) Require all office and dry lab work to be conducted remotely.
- (j) Minimize the use of shared lab equipment and shared lab tools and create protocols for disinfecting lab equipment and lab tools.
- (k) Provide disinfecting supplies and require employees to wipe down their work stations at least twice daily.
- (l) Implement an audit and compliance procedure to ensure that cleaning criteria are followed.
- (m) Establish a clear reporting process for any symptomatic individual or any individual with a confirmed case of COVID-19, including the notification of lab leaders and the maintenance of a central log.
- (n) Clean and disinfect the work site when an employee is sent home with symptoms or with a confirmed case of COVID-19.
- (o) Send any potentially exposed co-workers home if there is a positive case in the facility.
- (p) Restrict all non-essential work travel, including in-person conference events.
- 6. Retail stores that are open for in-store sales must:
 - (a) Create communications material for customers (e.g., signs or pamphlets) to

inform them of changes to store practices and to explain the precautions the store is taking to prevent infection.

- (b) Establish lines to regulate entry in accordance with subsection (c) of this section, with markings for patrons to enable them to stand at least six feet apart from one another while waiting. Stores should also explore alternatives to lines, including by allowing customers to wait in their cars for a text message or phone call, to enable social distancing and to accommodate seniors and those with disabilities.
- (c) Adhere to the following restrictions:
 - (1) For stores of less than 50,000 square feet of customer floor space, must limit the number of people in the store (including employees) to 25% of the total occupancy limits established by the State Fire Marshal or a local fire marshal. Stores of more than 50,000 square feet must:
 - (A) Limit the number of customers in the store at one time (excluding employees) to 4 people per 1,000 square feet of customer floor space.
 - (B) Create at least two hours per week of dedicated shopping time for vulnerable populations, which for purposes of this order are people over 60, pregnant women, and those with chronic conditions like heart disease, diabetes, and lung disease.
 - (2) The director of the Department of Health and Human Services is authorized to issue an emergency order varying the capacity limits described in this subsection as necessary to protect the public health.
- (d) Post signs at store entrance(s) instructing customers of their legal obligation to wear a face covering when inside the store.
- (e) Post signs at store entrance(s) informing customers not to enter if they are or have recently been sick.
- (f) Design spaces and store activities in a manner that encourages employees and customers to maintain six feet of distance from one another.
- (g) Install physical barriers at checkout or other service points that require interaction, including plexiglass barriers, tape markers, or tables, as appropriate.
- (h) Establish an enhanced cleaning and sanitizing protocol for high-touch areas like restrooms, credit-card machines, keypads, counters, shopping carts, and other surfaces.
- (i) Train employees on:
 - (1) Appropriate cleaning procedures, including training for cashiers on cleaning

between customers.

- (2) How to manage symptomatic customers upon entry or in the store.
- (j) Notify employees if the employer learns that an individual (including a customer or supplier) with a confirmed case of COVID-19 has visited the store.
- (k) Limit staffing to the minimum number necessary to operate.

7. Offices must:

- (a) Assign dedicated entry point(s) for all employees to reduce congestion at the main entrance.
- (b) Provide visual indicators of appropriate spacing for employees outside the building in case of congestion.
- (c) Take steps to reduce entry congestion and to ensure the effectiveness of screening (e.g., by staggering start times, adopting a rotational schedule in only half of employees are in the office at a particular time).
- (d) Require face coverings in shared spaces, including during in-person meetings and in restrooms and hallways.
- (e) Increase distancing between employees by spreading out workspaces, staggering workspace usage, restricting non-essential common space (e.g., cafeterias), providing visual cues to guide movement and activity (e.g., restricting elevator capacity with markings, locking conference rooms).
- (f) Turn off water fountains.
- (g) Prohibit social gatherings and meetings that do not allow for social distancing or that create unnecessary movement through the office.
- (h) Provide disinfecting supplies and require employees wipe down their work stations at least twice daily.
- (i) Post signs about the importance of personal hygiene.
- (j) Disinfect high-touch surfaces in offices (e.g., whiteboard markers, restrooms, handles) and minimize shared items when possible (e.g., pens, remotes, whiteboards).
- (k) Institute cleaning and communications protocols when employees are sent home with symptoms.

- (l) Notify employees if the employer learns that an individual (including a customer, supplier, or visitor) with a confirmed case of COVID-19 has visited the office.
- (m) Suspend all nonessential visitors.
- (n) Restrict all non-essential travel, including in-person conference events.

8. Restaurants and bars must:

- (a) Limit capacity to 50% of normal seating.
- (b) Require six feet of separation between parties or groups at different tables or bar tops (e.g., spread tables out, use every other table, remove or put up chairs or barstools that are not in use).
- (c) Create communications material for customers (e.g., signs, pamphlets) to inform them of changes to restaurant or bar practices and to explain the precautions that are being taken to prevent infection.
- (d) Close waiting areas and ask customers to wait in cars for a call when their table is ready.
- (e) Close self-serve food or drink options, such as buffets, salad bars, and drink stations.
- (f) Provide physical guides, such as tape on floors or sidewalks and signage on walls to ensure that customers remain at least six feet apart in any lines.
- (g) Post sign(s) at store entrance(s) informing customers not to enter if they are or have recently been sick.
- (h) Post sign(s) instructing customers to wear face coverings until they get to their table.
- (i) Require hosts and servers to wear face coverings in the dining area.
- (j) Require employees to wear face coverings and gloves in the kitchen area when handling food, consistent with guidelines from the Food and Drug Administration ("FDA").
- (k) Limit shared items for customers (e.g., condiments, menus) and clean high-contact areas after each customer (e.g., tables, chairs, menus, payment tools, condiments).
- (l) Train employees on:
 - (1) Appropriate use of personal protective equipment in conjunction with food

safety guidelines.

- (2) Food safety health protocols (e.g., cleaning between customers, especially shared condiments).
- (3) How to manage symptomatic customers upon entry or in the restaurant.
- (m) Notify employees if the employer learns that an individual (including an employee, customer, or supplier) with a confirmed case of COVID-19 has visited the store.
- (n) Close restaurant immediately if an employee shows multiple symptoms of COVID-19 (fever, atypical shortness of breath, atypical cough) and perform a deep clean, consistent with guidance from the FDA and the CDC. Such cleaning may occur overnight.
- (o) Install physical barriers, such as sneeze guards and partitions at cash registers, bars, host stands, and other areas where maintaining physical distance of six feet is difficult.
- (p) To the maximum extent possible, limit the number of employees in shared spaces, including kitchens, break rooms, and offices, to maintain at least a six- foot distance between employees.
- 9. Outpatient health-care facilities, including clinics, primary care physician offices, or dental offices, and also including veterinary clinics, must:
 - (a) Post signs at entrance(s) instructing patients to wear a face covering when inside.
 - (b) Limit waiting-area occupancy to the number of individuals who can be present while staying six feet away from one another and ask patients, if possible, to wait in cars for their appointment to be called.
 - (c) Mark waiting rooms to enable six feet of social distancing (e.g., by placing X's on the ground and/or removing seats in the waiting room).
 - (d) Enable contactless sign-in (e.g., sign in on phone app) as soon as practicable.
 - (e) Add special hours for highly vulnerable patients, including the elderly and those with chronic conditions.
 - (f) Conduct a common screening protocol for all patients, including a temperature check and questions about COVID-19 symptoms.
 - (g) Place hand sanitizer and face coverings at patient entrance(s).
 - (h) Require employees to make proper use of personal protective equipment in

- accordance with guidance from the CDC and the U.S. Occupational Health and Safety Administration.
- (i) Require patients to wear a face covering when in the facility, except as necessary for identification or to facilitate an examination or procedure.
- (j) Install physical barriers at sign-in, temperature screening, or other service points that normally require personal interaction (e.g., plexiglass, cardboard, tables).
- (k) Employ telehealth and telemedicine to the greatest extent possible.
- (l) Limit the number of appointments to maintain social distancing and allow adequate time between appointments for cleaning.
- (m) Employ specialized procedures for patients with high temperatures or respiratory symptoms (e.g., special entrances, having them wait in their car) to avoid exposing other patients in the waiting room.
- (n) Deep clean examination rooms after patients with respiratory symptoms and clean rooms between all patients.
- (o) Establish procedures for building disinfection in accordance with CDC guidance if it is suspected that an employee or patient has COVID-19 or if there is a confirmed case.
- 10. Employers must maintain a record of the requirements set forth in Sections 1(c), (d), and (k).
- 11. The rules described in sections 1 through 10 have the force and effect of regulations adopted by the departments and agencies with responsibility for overseeing compliance with workplace health-and-safety standards and are fully enforceable by such agencies. Any challenge to penalties imposed by a department or agency for violating any of the rules described in sections 1 through 10 of this order will proceed through the same administrative review process as any challenge to a penalty imposed by the department or agency for a violation of its rules.
- 12. Any business or operation that violates the rules in sections 1 through 10 has failed to provide a place of employment that is free from recognized hazards that are causing, or are likely to cause, death or serious physical harm to an employee, within the meaning of the Michigan Occupational Safety and Health Act, MCL 408.1011.
- 13. Nothing in this order shall be taken to limit or affect any rights or remedies otherwise available under law. Given under my hand and the Great Seal of the State of Michigan.

Date: May 21, 2020	
Time: 9:49 am	
Jutolen Warten	
GRETCHEN WHITMER GOVERNOR	
By the Governor:	
SEC	