

Leslie Township

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COVID-19 Preparedness and Response Plan

Date Implemented: June 17, 2020

COVID-19 Preparedness and Response Plan

In order to respond to the current state of emergency related to the novel coronavirus (“COVID-19”) and to comply with relevant state and local orders related to COVID-19, Leslie Township has prepared the following COVID-19 Preparedness and Response Plan (“Plan”). This Plan may be updated as this situation evolves or as state or local orders related to COVID-19 are issued or amended.

Restrictions for Onsite Work

Executive Order 2020-110 requires persons and entities operating a business or conducting any operations that require workers to leave their homes to do so consistent with social distancing and mitigation measures required under any relevant executive order or public health order.

Protective Safety Measures

Sick Leave

Employees are permitted to take paid leave consistent with the Families First Coronavirus Response Act and the Township’s applicable vacation, sick, and personal time policies. Any onsite employee who displays symptoms of a respiratory illness will be separated from other employees and sent home.

Remote Work

All employees whose job duties reasonably allow them to telework, as determined in the Township’s sole discretion, will work remotely. All other Township employees may be required to perform in-person work.

Employee Screening Before Entering the Workplace

The Township will use the Ingham County Health Department’s Employee Entry Screening Questionnaire. That questionnaire is attached as Appendix A. The screening questionnaire will be completed by employees immediately upon entry to the workplace. Each Township building or work area where employees begin work will have a designated area for employees to complete the screening questionnaire. The completed questionnaire shall be collected by the Township Clerk or any other individual designated by the Township Clerk. The Township Clerk shall ensure that employees are completing the screening questionnaires and shall maintain records of those completed questionnaires. Any individual taking temperatures of other employees will be required to wear appropriate personal protective equipment to the extent such screening is used by the Township. If an employee fails the screening process provided on the screening questionnaire, he or she will be sent home until allowed to return to work by the Township, as explained in further detail in the Employee Wellness Protocol, attached as Appendix B.

Enhanced Social Distancing

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

Employees will be restricted from remaining in any break room or lunchroom longer than reasonably necessary to obtain any items, such as drinks or food, and other office activities shall be limited to ensure social distancing restrictions can be followed. Employees should remain in their assigned work areas to the extent possible. Employees whose job duties regularly require them to be within six feet of members of the public or other employees will be provided with personal protective equipment or physical barriers commensurate with their level of risk of exposure to COVID-19.

Enhanced Hygiene

Employees are instructed to wash their hands frequently, to use tissue paper to shield their face during any coughs and sneezes, and to avoid touching their faces. Employees shall wear face masks in any enclosed public place, or when interfacing directly with the public or other employees when consistently maintaining proper social distancing is not feasible. The Township will provide any other protective equipment such as gloves, goggles, and face shields, as appropriate for the activity being performed by Township employees on behalf of the Township. The Township will make masks and protective gear available to its employees. Employees may use their own face masks and protective gear, except to the extent the Township determines that such masks do not meet the mitigation measures required to inhibit the spread of COVID-19. Employees will be provided with access to places and with adequate time to frequently wash hands or to access hand sanitizer. Employees will also be provided with access to tissues and face masks and to places to properly dispose of them. Signs regarding proper personal hygiene will be posted in all Township buildings. Hand shaking is also prohibited to ensure good hand hygiene.

Enhanced Cleaning and Disinfecting

Increased cleaning and disinfecting of surfaces, equipment, and other elements of the work environment will be performed at a minimum of twice daily using products containing EPA-approved disinfectants. Employees will be provided with access to disposable disinfectant wipes so that any commonly used surfaces can be wiped down before each use. If an employee that has been in the workplace in the past 14 days tests positive for COVID-19, the work area and/or vehicle will be thoroughly sanitized using EPA-approved disinfectants.

Non-employees (i.e., Third-Party Contractors)

A non-employee refers to a third-party contractor (e.g., a contracted plumber, electrician, etc.) onsite to address issues related to critical infrastructure. This category does not apply to Township residents or members of the general public or members of Township boards, commission, or committees. Members of the public are addressed below in the “General Public” Section of this Plan. Members of Township boards, commission, or committees will be treated similarly to Township employees. Non-employees are not allowed in the workplace unless they are deemed essential to address an issue related to critical infrastructure functions or minimum basic operations. All non-employees entering any Township building shall be screened prior to entering. The screening questionnaire attached as Appendix C will be utilized to decide if the non-employee can enter the building. Whoever allows the non-employee into the building will be responsible for completing the screening questionnaire, will determine if a non-employee may enter Township

buildings based on their responses in the questionnaire, and will supervise the non-employee while onsite. If a non-employee presents with symptoms of COVID-19 or answers yes to any of the screening questions, Township staff shall not permit the individual to enter any Township building. If the non-employee passes the screening questionnaire, he or she will have full access to Township facilities and must wear a face covering at all times while onsite.

General Public

Township residents or members of the general public are permitted to enter the Township Hall only if their physical presence is absolutely necessary. Questions or other matters that can be handled remotely (i.e., over the phone or via electronic means) must be handled remotely. To the maximum extent possible, the public must use the Township Hall's drop box instead of entering the Township Hall. The public will not be required to complete a screening questionnaire prior to entry, but the Township will post a notice on the outside of the Hall advising the public that they should not enter if they are experiencing any of the symptoms related to COVID-19 and advising of alternatives to entry, such as the drop box or a phone call.

If presence in the Township Hall is necessary, the public shall not be allowed beyond the lobby of the Township Hall. While inside the Township Hall, the public must wear face coverings for the safety of Township employees and other members of the public. Only 2 members of the public may be present in the lobby at one time; others will be required to wait outside. The Township will use ground markings to the extent possible to encourage proper social distancing for those in the lobby.

Employees with Suspected or Confirmed COVID-19 Cases

Suspected Cases

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

- They are experiencing any of the following primary COVID-19 symptoms:
 - New or worsening cough;
 - Shortness of breath or difficulty breathing;
 - Or two or more of the following:
 - Fever;
 - Chills
 - Muscle aches
 - Headaches
 - Sore throat
 - Loss of taste or smell
- They have been exposed to a COVID-19 positive person, meaning:
 - An immediate family member has tested positive for or exhibited symptoms of COVID-19; or
 - In the last 14 days, the employee has come in close contact with someone who has tested positive for COVID-19 (being within approximately six feet for a prolonged period of time without personal protective equipment).

An employee who believes that he or she qualifies as a Suspected Case must:

- Immediately notify his or her supervisor;
- Stop in-person work and self-quarantine immediately; and
- Seek immediate medical care.

If any employee qualifies as a Suspected Case, Leslie Township will:

- Notify all employees who may have come into close contact (being within approximately six feet for a prolonged period of time without personal protective equipment) with the employee in the past 14 days (without disclosing the identity of the employee to ensure the employee's privacy); and
- Close off the employee's work area until it can be thoroughly cleaned in accordance with applicable guidance from the United States Centers for Disease Control and Prevent ("CDC").

Confirmed Cases

An employee will be considered a Confirmed Case of COVID-19 if the employee has tested positive for COVID-19.

An employee who believes that he or she qualifies as a Confirmed Case must:

- Immediately notify his or her supervisor of his or her diagnosis; and
- Remain out of the workplace until he or she is cleared to return to in-person work.

If any employee qualifies as a Confirmed Case and has been performing in-person operations, the Township will:

- Notify all employees who may have come into close contact with the employee (being within approximately six feet for a prolonged period of time without personal protective equipment) in the past 14 days. Such notification shall not disclose the identity of the Confirmed Case to ensure the employee's privacy;
- Immediately notify the local health department;
- Close the work area or workplace until all necessary cleaning and disinfecting is completed;
- Wait 24 hours and then ensure that the entire workplace, or affected parts thereof (depending on employee's presence in the workplace), is thoroughly cleaned and disinfected per applicable CDC facility cleaning guidelines;
- Communicate with employees about the presence of a Confirmed Case (without disclosing the employee's identity), the cleaning/disinfecting plans, and when the workplace will reopen (if applicable).

Business Continuity Plans

The Township will: (1) cross-train employees to perform essential functions so the workplace can operate even if key employees or Township officials are absent; (2) identify alternate supply chains

for critical goods and services in the event of disruption; and (3) develop an emergency communication plan to communicate important messages to employees and constituents.

Classification of Workers' Exposure

Following OSHA Standards for classifying workers' exposures, Leslie Township employees have been categorized as below:

- Firefighters and Fire Chief: High exposure risk while treating or transporting known or suspected COVID-19 patients;
- Facilities personnel: Medium risk while performing activities, such maintenance and cleaning of Township buildings, due to exposure to various workspaces, offices, hard surfaces, and areas where employees prior to known COVID-19 detection may have been present;
- All other Leslie Township employees: low risk.

Emergency Communication Plan

All emergency communications will be provided by the Township Supervisor, Township Clerk, or Township Fire Chief.



Coronavirus Disease (COVID-19) Workplace Health Screening

Company Name: _____

Employee Name: _____ Date: _____

Time In: _____

In the past 24 hours, have you experienced:

New or worsening cough:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Shortness of breath or difficulty breathing:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
OR TWO (2) or more of the following		
Fever (or subjective/felt feverish): Temperature if taken: _____ <i>Fever is a temperature of 100.4 °F or higher.</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Chills:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Muscle aches:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Headaches:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Sore throat:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Loss of taste or smell:	<input type="checkbox"/> Yes	<input type="checkbox"/> No

If you answered “yes” to the first two symptoms above, or “yes” to two (2) or more of the last five symptoms above in light gray, please do not go to into work. Self-isolate at home and contact your primary care physician’s office or nearest urgent care facility for direction.

- You should isolate at home for a minimum of 10 days since symptoms first appeared.
- You must also have 3 days without fevers and improvement in respiratory symptoms.

In the past 14 days, have you:

Had close contact with an individual diagnosed with COVID-19? Yes No

Appendix A

If you answer “yes”, please do not go into work (unless exempt or otherwise approved for work with appropriate safety precautions). Self-quarantine at home for 14 day since return or exposure.

For questions, visit hd.ingham.org/coronavirus or contact Ingham County Health Department at (517) 887-4517.

Appendix B

Leslie Township COVID-19 Employee Wellness Protocol

Consistent with Executive Order 2020-36 or any superseding order, employees who fail entrance screening will only be permitted to return to work under the following circumstances:

Employees who test positive for COVID-19 or display one or more of the principal or secondary symptoms of COVID-19 will not be permitted to return to work until either:

1. 3 days have passed since their symptoms have resolved *and* 7 days have passed since (i) their symptoms first appeared or (ii) since they were swabbed for the test that yielded the positive result; or
2. They receive a negative COVID-19 test result.

Additionally, employees may not return to work under they are no longer infectious according to the latest guidelines from the CDC and they are released from any quarantine or isolation by the local public health department.t

Employees who have been in “close contact” (being within approximately six feet for a prolonged period of time) with an individual who tests positive for COVID-19 or who displays one or more of the principal symptoms of COVID-19 will not be permitted to return to work until either:

1. 14 days have passed since the last close contact with the sick or symptomatic individual; or
2. The symptomatic individual receives a negative COVID-19 test.

The “close contact” rule does not apply to first responders (e.g., police officers, fire fighters).

Appendix C

Coronavirus Disease (COVID-19) Non-Employee Health Screening

Company Name: _____

Visitor Name: _____ Date: _____

Time In: _____

In the past 24 hours, have you experienced:

New or worsening cough:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Shortness of breath or difficulty breathing:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
OR TWO (2) or more of the following		
Fever (or subjective/felt feverish): Temperature if taken: _____ <i>Fever is a temperature of 100.4 °F or higher.</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Chills:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Muscle aches:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Headaches:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Sore throat:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Loss of taste or smell:	<input type="checkbox"/> Yes	<input type="checkbox"/> No

If you answered “yes” to the first two symptoms above, or “yes” to two (2) or more of the last five symptoms above in light gray, please do enter the premises. Self-isolate at home and contact your primary care physician’s office or nearest urgent care facility for direction.

- You should isolate at home for a minimum of 10 days since symptoms first appeared.
- You must also have 3 days without fevers and improvement in respiratory symptoms.

In the past 14 days, have you:

Had close contact with an individual diagnosed with COVID-19? Yes No

If you answer “yes”, please do not go into work (unless exempt or otherwise approved for work with appropriate safety precautions). Self-quarantine at home for 14 day since return or exposure.

Appendix D

Leslie Township Worksite Confirmed COVID-19 Case Protocol

Pursuant to Executive Order 2020-114's requirement that the Township adopt a protocol for cleaning and disinfecting Township facilities in the event of a positive COVID-19 case in the workplace, the Township will adhere to the United States Centers for Disease Control and Prevention ("CDC") guidance found at <https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html> on cleaning and disinfecting a facility in the event of a confirmed COVID-19 case onsite.

Appendix E

Quick Links and Resources

Governor Whitmer's Executive Orders:

https://www.michigan.gov/whitmer/0,9309,7-387-90499_90705---,00.html

Helpful CDC Guidance:

<https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html>

CDC Handwashing Fact Sheet:

<https://www.cdc.gov/handwashing/pdf/hand-sanitizer-factsheet.pdf>

CDC Fact Sheet and Poster on Preventing the Spread of Germs:

<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention-H.pdf>

<https://www.cdc.gov/coronavirus/2019-ncov/downloads/stop-the-spread-of-germs-11x17-en.pdf>

CDC Fact Sheet on What to Do if You Are Sick:

<https://www.cdc.gov/coronavirus/2019-ncov/downloads/sick-with-2019-nCoV-fact-sheet.pdf>

CDC Poster for Entrance Reminding Employees Not to Enter When Sick:

<https://www.cdc.gov/coronavirus/2019-ncov/downloads/stayhomefromwork.pdf>

Families First Coronavirus Response Act

<https://www.congress.gov/bill/116th-congress/house-bill/6201/text>

Ingham County Health Department COVID-19 Resources

[http://hd.ingham.org/DepartmentalDirectory/CommunicableDisease/Coronavirus\(COVID19\).aspx#8789289-printer-ready-fact-sheets-and-flyers](http://hd.ingham.org/DepartmentalDirectory/CommunicableDisease/Coronavirus(COVID19).aspx#8789289-printer-ready-fact-sheets-and-flyers)

Appendix F

Leslie Township COVID-19 Preparedness and Response Plan

Certification by Responsible Public Official

This is to certify that I have reviewed Leslie Township's COVID-19 Preparedness and Response Plan attached hereto and to the best of my knowledge and belief:

1. It complies with Michigan Executive Order No. 2020-114, dated June 5, 2020;
2. The plan is consistent with the guidance from the United States Department of Labor, Occupational Health and Safety Administration publication OSHA 3990-03-2020, Guidance on Preparing Workplaces for COVID-19;
3. The plan is available on the Township's website, <https://www.leslietownship.org/> and at each Leslie Township facility where in-person operations take place during the COVID-19 emergency.

I declare that the foregoing is true and correct.

Municipality/Entity: Leslie Township

Signature:

Name of Official: Sheryl Feazel

Title: Township Clerk

Date: June 17, 2020