Dear Friends of Pretty Lake Camp,

For 103 years, through devastating world events, there has always been Pretty Lake Camp, providing a totally cost free summer camp to children our communities. As Pretty Lake adjusts to the current environment we will adapt our services and delivery methods to ensure that we continue to safely meet the needs of our campers, clients, staff and community.

In the mealtime, we are carefully monitoring the rapidly changing guidelines and regulations of both CDC and local health authorities. As restrictions lift, we will continue to keep health and safely our number one priority while offering support, encouragement, and a sense of normalcy to those we serve.

With this in mind, we have enacted Pretty Lake’s COVID-19 PREPAREDNESS & RESPONSE PLAN and are sharing this plan with you as required by EXECUTIVE ORDERS 2020-91 AND 2020-97. We are looking forward to providing youth in our communities with an educational, fun and memorable experience.

Thank you for your continued support.

Eric L. Wimbley
Chief Executive Officer
Pretty Lake Camp
Dear Staff:

As you return to Pretty Lake there are some new policies and procedures to combat COVID-19 and keep us in compliance with federal and state law. COVID-19 training will be provided the morning of return.

You have already received via email and will receive again at COVID-19 Training, a packet of handouts providing instructions and answers to some questions you may have regarding COVID-19. While some restrictions may be lifted we will continue to work at providing a safe environment.

As part of the CDC recommendations daily screening of employees is required. All staff are required each morning to come into the main office prior to start of the work day to complete a screening questionnaire and have your temperature taken and documented by Operations. You are not eligible to work until that process has been completed and you have clearance for the day. Administrative hours of operations are 8-4, Monday-Friday. Employees are not allowed to work without screening the earliest start time is 8 a.m. for any department until further notice.

Congregation in small areas and personal offices are prohibited. All meetings/communications in the work place will take place by teleconference, phone, walkie-talkie, or other social distancing format. Outdoor meetings are allowed as long as social distancing practices are followed.

Sanitization stations are located in active areas, additional stations will be added as locations open for use. Stations are located in the main lobby, the copy room, the lakeside room, and at the Adventure Centre.

Restrooms in the lakeside room and at the Adventure Centre are open for use. You are required to follow all handwashing procedures and to wipe all areas of contact with the sanitizer provided after each use.

Tools and equipment should not be shared and must be sanitized upon return. Tape tags should be used during operating hours to avoid shared use.

PPE should be worn at all times in vehicles. Staggered seating should be implemented when possible. You are required to sanitize your vehicle upon return. (AC Truck, Van, Taurus or Golf Cart)

You are required to follow the morning screenings, general practices outlined in your handouts regarding masks, social distancing, respiratory etiquette and sanitization practices.

Please notify Operations with any questions or if restocking is needed at any of the open areas.

The Facilities Department will provide daily sanitization of restrooms and common areas. Since sharing personal workspace is prohibited at this time, we are responsible for our personal work spaces on a daily basis. The facilities department will sanitize personal workspaces once a week. All supplies will be
provided, please notify facilities/operations as your supplies reach the half way point so we can maintain a proper supply.

As always, our goal is to follow all state and federal laws, to keep our staff and our community supported and to continue our mission.

Please let the CEO/Operations know if you have any questions or concerns.

Thank you and welcome back.
DAILY SCREENING

COVID-19 SYMPTOMS:
Cough, Shortness of Breath, Headache, Fever, Chills, Repeated Shaking with Chills, Muscle Pain, Sore Throat, Loss of Taste/Smell.

NAME: 

<table>
<thead>
<tr>
<th>Date:</th>
<th>Temperature</th>
<th>Symptoms In household</th>
<th>Exposed to individual with symptoms/diagnosis of COVID-19</th>
<th>If yes, explain</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
CDC:

Prepare to Implement Basic Infection Prevention Measures.

For most employers, protecting workers will depend on emphasizing basic infection prevention measures. As appropriate, all employers should implement good hygiene and infection control practices, including:

* Promote frequent and thorough hand washing, including by providing workers, customers, and worksite visitors with a place to wash their hands. If soap and running water are not immediately available, provide alcohol-based hand rubs containing at least 60% alcohol.

PLC encourages frequent and thorough hand washing and has provided EPA approved products for same.

* Encourage workers to stay home if they are sick.

PLC requires all staff to notify HR if they are sick and to stay home in the event of illness.

* Encourage respiratory etiquette, including covering coughs and sneezes.

PLC encourages respiratory etiquette, frequent and thorough hand washing and has provided CDC approved products for same.

* Provide customers and the public with tissues and trash receptacles.

PLC provides proper paper products and trash receptacles.

* Employers should explore whether they can establish policies and practices, such as flexible worksites (e.g., telecommuting) and flexible work hours (e.g., staggered shifts), to increase the physical distance among employees and between employees and others if state and local health authorities recommend the use of social distancing strategies.

PLC requires Social Distancing. All meetings must be held by telephone, walkie-talkie, web-based such as Zoom or outdoors to assure Social Distancing. Office meetings are prohibited at this time.

* Discourage workers from using other workers' phones, desks, offices, or other work tools and equipment, when possible.

PLC provides each Director with a personal work space, sharing personal office space and equipment should be avoided at this time.

* Maintain regular housekeeping practices, including routine cleaning and disinfecting of surfaces, equipment, and other elements of the work environment. When choosing cleaning chemicals, employers should consult information on Environmental Protection Agency (EPA)-approved disinfectant labels with claims against emerging viral pathogens. Products with EPA-approved emerging viral pathogens claims are expected to be effective against SARS-CoV-2, based on data for harder to kill viruses. Follow the manufacturer’s instructions for use of all cleaning and disinfection products (e.g., concentration, application method and contact time, PPE).

PLC has sanitized all areas that have been active since the Stay at Home Order went into effect. All employees are required to maintain their personal office space with the sanitization products provided. Facilities will maintain public spaces.
Communicable Disease Procedures

For the purpose of Pretty Lake Camp procedures, two types of communicable diseases shall be considered for this statement.

Type 1 – Diseases which MAY be transmitted through casual (non-sexual) person-to-person contact.

Type 2 – Diseases that may NOT be transmitted through casual (non-sexual) person-to-person contact.

Type 1 Diseases

Shall include, but not limited to:

*influenza  *measles  *chicken pox  *impetigo
*pink eye  *severe cold  *ringworm  *shingles
*head lice  *severe cough  *mononucleosis  *COVID-19

Employees who are in the communicable stage of these or other contagious diseases are NOT permitted to work because of the highly contagious nature of these diseases. Employees are required to notify Administration of illness and to stay home while sick. Staff who arrive at camp and then are suspected of having type 1 communicable disease will be sent home or quarantined in a designated area until they are able to be sent home by Administration for the purpose of self-quarantine, diagnosis and treatment. Administration will complete any required paperwork per licensing to report illness and to prevent the spread of infection. Sanitization protocols will be followed.

**COVID-19:

The 2020 pandemic has required additional safeguards to slow/stop the spread of the virus.

Employees are required to stay home if sick or experiencing symptoms such as cough, shortness of breath, headache, fever, chills, repeated shaking with chills, muscle pain, sore throat, or loss of taste/smell.

Employees are required to follow handwashing protocols, social distancing, respiratory etiquette, daily screening, PPE and sanitization guidelines as directed by the CDC, OSHA, and the EPA. Handouts have been provided. Sanitization stations have been implemented. In accordance with Executive Order 2020-91, Safeguards to protect Michigan’s workers from Covid-19 are in effect until further notice.

** Employees who are in the communicable stage of these or other contagious diseases are NOT permitted to work because of the highly contagious nature of these diseases. Employees who reside on site are limited to their place of residence and prohibited from accessing any other areas of camp.

[MEDIUM RISK EMPLOYER’S] COVID-19 Preparedness and Response Plan

In accordance with Executive Order 2020-59, Pretty Lake institutes this COVID-19 Preparedness and Response Plan.

Pretty Lake aims to protect its workforce by enacting all appropriate prevention efforts. Pretty Lake is continually monitoring guidance from local, state, and federal health officials and implementing workplace and Plan modifications where appropriate.
Employees with questions are encouraged to contact CEO/Operations.

1. Prevention Efforts and Workplace Controls

   a. Cleanliness and Social Distancing

Employees who are able to perform their essential duties remotely may be permitted to work from home in accordance with approved telework arrangements.

Only critical infrastructure workers performing necessary work are directed to report on-site. For such workers, Pretty Lake abides by the recommended social distancing and other safety measures and establishes the following:

- Large gatherings are minimized whenever possible; staff meetings are postponed, cancelled or held remotely;
- Employees are encouraged to maintain physical distance even when on break, as well as before and after working hours;
- Employees are required to maintain physical distance when reporting to work, clocking in, leaving work, and clocking out;
- Employees’ work stations are no fewer than six feet apart;
- Pretty Lake may utilize flexible work hours, wherever possible, to limit the number of employees simultaneously working on-site;
- Employees’ interactions with the general public are modified to allow for additional physical space between parties; and
- Non-essential travel is postponed or cancelled.

Pretty Lake provides employees with, at a minimum, non-medical grade face coverings.

In addition, Pretty Lake is instituting the following cleanliness measures:

- Where possible, increasing ventilation rates and circulation throughout work sites;
- Performing routine environmental cleaning and disinfection, especially of common areas; and
- Where available, providing hand sanitizer in high-traffic areas.

Employees are expected to minimize COVID-19 exposure by:

- Cleaning work stations at the beginning and end of each shift;
- Avoiding, when possible, the use of other employees’ phones, desks, offices, or other work tools and equipment;
- Frequently washing hands with soap and water for at least 20 seconds;
- Utilizing hand sanitizer when soap and water are unavailable;
- Avoiding touching their faces with unwashed hands;
- Avoiding handshakes or other physical contact;
- Avoiding close contact with sick people;
- Practicing respiratory etiquette, including covering coughs and sneezes;
- Immediately reporting unsafe or unsanitary conditions on Pretty Lake premises;
- Complying with Pretty Lake’s daily screening processes;
- Seeking medical attention and/or following medical advice if experiencing COVID-19 symptoms; and
- Complying with self-isolation or quarantine orders.
b. Supplemental Measures Upon Notification of Employee’s COVID-19 Diagnosis and/or Symptoms

An employee with a COVID-19 diagnosis or who displays symptoms consistent with COVID-19 must be immediately removed from the worksite.

In response to a confirmed diagnosis or display of COVID-19 symptoms, Pretty Lake:

- Informs all employees with and near whom the diagnosed/symptomatic employee worked of a potential exposure;
- Keeps confidential the identity of the diagnosed/symptomatic employee; and
- Conducts deep cleaning of the diagnosed/symptomatic employee’s workstation, as well as those common areas potentially infected by the employee.

All employees who worked in sustained, close proximity to the diagnosed/symptomatic employee are also removed from the worksite for at least 14 days; however, should these exposed employees later develop COVID-19 symptoms and/or receive a confirmed diagnosis, they may not report on-site until all return-to-work requirements are met, defined below.

Pretty Lake completes an OSHA Form 300, as well as a Form 301, “if it is more likely than not that a factor or exposure in the workplace caused or contributed to the illness.” If an employee infects a coworker, the coworker has suffered a work-related illness if one of the recording criteria (e.g., medical treatment or days away from work) is met.

c. Worker Exposure Classification

Employees’ “worker exposure” is classified as medium risk by the Occupational Safety and Health Administration’s guidance because they frequently and/or closely interact with the general public.

Given this classification, Pretty Lake provides the following controls in addition to the above-summarized prevention efforts: installing physical barriers where feasible, limiting exposure to the general public, and minimizing face-to-face contact.

2. Identification and Isolation of Sick and/or Exposed Employees

Risk and exposure determinations are made without regard to employees’ protected characteristics, as defined by local, state, and federal law.

Any health-related information and documentation gathered from employees is maintained confidentially and in compliance with state and federal law. Specifically, medical documentation is stored separate from employees’ personnel documentation.

a. Employees’ Self-Monitoring

The following employees should not report to work and, upon notification to Pretty Lake, will be removed from the regular work schedule:

- Employees who display COVID-19 symptoms, such as fever, cough, shortness of breath, sore throat, new loss of smell or taste, and/or gastrointestinal problems, including nausea, diarrhea, and vomiting, whether or not accompanied by a formal COVID-19 diagnosis;
- Employees who, in the last 14 days, have had close contact with and/or live with any person having a confirmed COVID-19 diagnosis; and
• Employees who, in the last 14 days, have had close contact with and/or live with any person displaying COVID-19 symptoms, such as fever, cough, shortness of breath, sore throat, new loss of smell or taste, and/or gastrointestinal problems, including nausea, diarrhea, and vomiting.

Such employees may only resume in-person work upon meeting all return-to-work requirements, defined below.

b. Daily Screenings

To prevent the spread of COVID-19 and reduce the potential risk of exposure, Pretty Lake screens employees on a daily basis.

Employees are asked the following questions before entering the worksite:

1. Are you currently suffering from any of the following symptoms – fever, cough, shortness of breath, sore throat, new loss of smell or taste, and/or gastrointestinal problems, including nausea, diarrhea, and vomiting?
   a. If a temporal/touchless thermometer is available, temperature checks are performed.
   b. If yes, access is denied, and employee is advised to self-isolate/self-quarantine at home, until employee is permitted to return to work as defined below.

2. Have you lived with, or had close contact with, someone in the last 14 days diagnosed with or displaying the symptoms of COVID-19?
   a. If yes, access is denied, and employee is advised to self-isolate/self-quarantine at home, until at least 14 days after the close contact.

3. Have you travelled via airplane internationally or domestically in the last 14 days?
   a. If yes, access is denied, and employee is advised to self-isolate/self-quarantine at home, until at least 14 days after the international or domestic travel.

Employees who develop symptoms during their shift must immediately report to their supervisor and/or Human Resources.

c. Return-to-Work Requirements

Employees who were themselves diagnosed with COVID-19 may only return to work upon confirmation of the cessation of symptoms and contagiousness, proof of which may be acquired via the test-based strategy or the non-test-based strategy.

The test-based strategy is preferred but relies upon the availability of testing supplies and laboratory capacity. Under this strategy, employees may discontinue isolation and return to work upon achieving the following conditions:

• Resolution of fever without the use of fever-reducing medications;
• Improvement in respiratory symptoms (e.g., cough, shortness of breath); and
• Negative results of an FDA Emergency Use Authorized molecular assay for COVID-19 from two consecutive nasopharyngeal swab specimens collected at least 24 hours apart.
Under the non-test-based strategy, employees may discontinue isolation and return to work upon achieving the following conditions:

- At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications;
- Improvement in respiratory symptoms (e.g., cough, shortness of breath); and
- At least 7 days have passed since symptoms first appeared.

Employees who came into close contact with, or live with, an individual with a confirmed diagnosis or symptoms may return to work after either 14 days have passed since the last close contact with the diagnosed/symptomatic individual, or the diagnosed/symptomatic individual receives a negative COVID-19 test.

Employees are typically required to submit a release to return to work from a healthcare provider; given the current stressors on the healthcare system, Pretty Lake may accept written statements from employees confirming all the factors supporting their release.

3. Workplace Flexibilities and Potential Benefits for Employees Affected by COVID-19

Pretty Lake is temporarily suspending the assessment of all attendance points for eligible absences.

In addition, employees may be eligible for paid and unpaid leaves of absence.

Employees may be permitted to utilize available paid-time off provided under Pretty Lake policy concurrently with or to supplement any approved leave.

a. FFCRA

Employees may qualify for two different types of paid leave under the Families First Coronavirus Response Act ("FFCRA").

Under the Emergency Paid Sick Leave Act ("EPSLA"), employees may seek up to two weeks (i.e., 10 business days) of paid leave for the following reasons:

1. Subject to a Federal, State, or local quarantine or isolation order related to COVID-19;
2. Advised to self-quarantine due to concerns related to COVID-19;
3. Experiencing symptoms of COVID-19 and seeking a medical diagnosis;
4. Caring for an individual subject to a quarantine or isolation order or advised to self-quarantine due to concerns related to COVID-19;
5. Caring for a son or daughter whose school or childcare provider is closed or unavailable due to COVID-19 precautions; and
6. Experiencing any other substantially similar condition specified by the Secretary of Health and Human Services, in consultation with the Secretary of the Treasury and the Secretary of Labor. (Please note, the Secretary of Health and Human Services has not defined conditions which trigger this subpart under the EPSLA.)

For full-time employees, two weeks of leave equates to 80 hours; for part-time employees, two weeks of leave equates to a number of hours equivalent to the number of hours usually worked in a two-week period.

Paid leave for reasons 1, 2, and 3, above, is paid at the employee’s regular rate of pay, capped at $511/day. Paid leave for reasons 4, 5, and 6, above, is paid at a rate equivalent to two-thirds of an employee’s regular rate of pay or minimum wage, whichever is greater, capped at $200/day.
Under the Emergency Family and Medical Leave Expansion Act, employees may seek up to twelve weeks of leave to care for a son or daughter whose school or childcare provider is closed or unavailable due to COVID-19 precautions. The first two weeks of leave, which run concurrently with the EPSLA leave, may be unpaid; the remaining ten weeks of leave are paid at a rate equivalent to two-thirds of an employee’s regular rate of pay or minimum wage, whichever is greater, capped at $200/day.

b. Executive Order 2020-36

Employees who require leave beyond the EPSLA because of their own COVID-19 diagnosis/symptoms, or because they have had close contact or live with an individual with a COVID-19 diagnosis/symptoms, may be eligible for unpaid leave under Executive Order 2020-36 until permitted thereunder to return to work.

c. Unemployment Compensation Benefits

Under Executive Order 2020-57, and the federal CARES Act, unemployment compensation benefits are expanded in terms of eligibility, amount, and duration.

Employees who are unable to report to work for reasons related to COVID-19 are referred to Human Resources for information on unemployment compensation benefits. Such reasons include the following:

- Being under self-isolation or self-quarantine in response to elevated risk from COVID-19 due to being immunocompromised;
- Displaying at least one of the principal symptoms of COVID-19 (i.e., fever, atypical cough, atypical shortness of breath);
- Having close contact in the last 14 days with a confirmed COVID-19 diagnosis;
  - [FOR HEALTHCARE EMPLOYERS] Contact for the purposes of healthcare exposures is defined as: a) being within approximately 6 feet of a person with COVID-19 for a prolonged period of time without appropriate PPE; or b) having unprotected direct contact with infectious secretions or excretions of a patient;
- Needing to care for someone with a confirmed COVID-19 diagnosis; and
- Fulfilling a family care responsibility as a result of a government directive (e.g., caring for a child whose school or childcare provider is closed or otherwise unavailable due to COVID-19).

d. FMLA and ADA

Employees may be entitled to unpaid leave under the Family and Medical Leave Act ("FMLA") if their absence is related to their own serious health condition or that of a family member. COVID-19 may constitute a serious health condition where "complications arise."

Pretty Lake is also mindful of its obligations under the Americans with Disabilities Act ("ADA"). Specifically, if an employee requests an accommodation because of a condition that may be complicated by COVID-19 (e.g., cystic fibrosis, emphysema, COPD), then Pretty Lake engages in the interactive process to provide a reasonable accommodation. This may mean allowing the employee to work remotely (if reasonable) or work an alternative schedule.

4. Plan Updates and Expiration

This Plan responds to the COVID-19 outbreak. As this pandemic progresses, Pretty Lake will update this Plan and its corresponding processes.
Type 2 Diseases

Shall include, but not limited to:  *HIV  *Hepatitis Virus Type A, B, or C.

Employees who are known to be carriers of Type 2 disease may be permitted to work at Pretty Lake Camp under the conditions outlined below.

Individual Responsibilities:

1. Employees should have control of all bodily secretions.
2. Employees should not be aggressive and/or biting others.
3. Employees should not have open sores or lesions that cannot be covered.

Employees working directly with the carrier shall be advised of precautions and hygiene measures recommended for minimizing potential transmission.

Knowledge that an individual has a communicable disease shall be confined to those employees with direct need to know. The employees shall be provided with information on minimizing potential transmission.

The individual will be considered eligible for all rights, privileges, and services that all other employees receive.
FEVER

COUGH

SHORTNESS OF BREATH

If you feel unwell or have the following symptoms:

Please leave the building and contact your healthcare provider.

Then follow-up with your supervisor.

Stay home when you are sick!

Feeling Sick?

cdc.gov/COVID-19
How to Protect Yourself and Others

Know how it spreads

- There is currently no vaccine to prevent coronavirus disease 2019 (COVID-19).
- The best way to prevent illness is to avoid being exposed to this virus.
- The virus is thought to spread mainly from person-to-person.
  » Between people who are in close contact with one another (within about 6 feet).
  » Through respiratory droplets produced when an infected person coughs, sneezes or talks.
  » These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.
  » Some recent studies have suggested that COVID-19 may be spread by people who are not showing symptoms.

Everyone should

Clean your hands often

- **Wash your hands** often with soap and water for at least 20 seconds especially after you have been in a public place, or after blowing your nose, coughing, or sneezing.
- If soap and water are not readily available, **use a hand sanitizer that contains at least 60% alcohol**. Cover all surfaces of your hands and rub them together until they feel dry.
- **Avoid touching your eyes, nose, and mouth** with unwashed hands.

Avoid close contact

- Stay home if you are sick.
- Avoid close contact with people who are sick.
- **Put distance between yourself and other people.**
  » Remember that some people without symptoms may be able to spread virus.
  » This is especially important for people who are at higher risk of getting very sick. [www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-higher-risk.html](http://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-higher-risk.html)

[cdc.gov/coronavirus](http://cdc.gov/coronavirus)
Cover your mouth and nose with a cloth face cover when around others

- You could spread COVID-19 to others even if you do not feel sick.
- Everyone should wear a cloth face cover when they have to go out in public, for example to the grocery store or to pick up other necessities.
  - Cloth face coverings should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance.
- The cloth face cover is meant to protect other people in case you are infected.
- Do NOT use a facemask meant for a healthcare worker.
- Continue to keep about 6 feet between yourself and others. The cloth face cover is not a substitute for social distancing.

Cover coughs and sneezes

- If you are in a private setting and do not have on your cloth face covering, remember to always cover your mouth and nose with a tissue when you cough or sneeze or use the inside of your elbow.
- Throw used tissues in the trash.
- Immediately wash your hands with soap and water for at least 20 seconds. If soap and water are not readily available, clean your hands with a hand sanitizer that contains at least 60% alcohol.

Clean and disinfect

- If surfaces are dirty, clean them: Use detergent or soap and water prior to disinfection.
- Then, use a household disinfectant. You can see a list of [EPA-registered household disinfectants here](#)

[cdc.gov/coronavirus](http://cdc.gov/coronavirus)
**Protect yourself**

- Clean your hands regularly.
- Wash your hands with soap and water, and dry them thoroughly.
- Use alcohol-based handrub if you don’t have immediate access to soap and water.

**How do I wash my hands properly?**

Washing your hands properly takes about as long as singing "Happy Birthday" twice, using the images below.

<table>
<thead>
<tr>
<th>Step</th>
<th>Image</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td><img src="#" alt="Image" /></td>
<td>Wet hands with water</td>
</tr>
<tr>
<td>1</td>
<td><img src="#" alt="Image" /></td>
<td>apply enough soap to cover all hand surfaces.</td>
</tr>
<tr>
<td>2</td>
<td><img src="#" alt="Image" /></td>
<td>Rub hands palm to palm</td>
</tr>
<tr>
<td>3</td>
<td><img src="#" alt="Image" /></td>
<td>right palm over left dorsum with interlaced fingers and vice versa</td>
</tr>
<tr>
<td>4</td>
<td><img src="#" alt="Image" /></td>
<td>palm to palm with fingers interlaced</td>
</tr>
<tr>
<td>5</td>
<td><img src="#" alt="Image" /></td>
<td>backs of fingers to opposing palms with fingers interlocked</td>
</tr>
<tr>
<td>6</td>
<td><img src="#" alt="Image" /></td>
<td>rotational rubbing of left thumb clasped in right palm and vice versa</td>
</tr>
<tr>
<td>7</td>
<td><img src="#" alt="Image" /></td>
<td>rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa.</td>
</tr>
<tr>
<td>8</td>
<td><img src="#" alt="Image" /></td>
<td>Rinse hands with water</td>
</tr>
<tr>
<td>9</td>
<td><img src="#" alt="Image" /></td>
<td>dry thoroughly with a single use towel</td>
</tr>
<tr>
<td>10</td>
<td><img src="#" alt="Image" /></td>
<td>use towel to turn off faucet</td>
</tr>
<tr>
<td>11</td>
<td><img src="#" alt="Image" /></td>
<td>...and your hands are safe.</td>
</tr>
</tbody>
</table>
SOCIAL DISTANCING

Social distancing, also called “physical distancing,” means keeping space between yourself and other people outside of your home. To practice social or physical distancing:

- Stay at least 6 feet (about 2 arms’ length) from other people
- Do not gather in groups
- Stay out of crowded places and avoid mass gatherings

In addition to everyday steps to prevent COVID-19, keeping space between you and others is one of the best tools we have to avoid being exposed to this virus and slowing its spread locally and across the country and world.

When COVID-19 is spreading in your area, everyone should limit close contact with individuals outside your household in indoor and outdoor spaces. Since people can spread the virus before they know they are sick, it is important to stay away from others when possible, even if you have no symptoms. Social distancing is especially important for people who are at higher risk of getting very sick.
Help prevent the spread of respiratory diseases like COVID-19.

Avoid close contact with people who are sick.

Cover your mouth and nose with a tissue, throw the tissue in the trash.

Clean and disinfect frequently touched objects and surfaces.

Avoid touching your eyes, nose, and mouth.

When in public, wear a cloth face covering over your nose and mouth.

Stay home when you are sick, except to get medical care.

Wash your hands often with soap and water for at least 20 seconds.

cdc.gov/coronavirus


1. Develop Your Plan

2. Implement

3. Maintain and Revise

---

**Cleaning & Disinfecting Guidance for Schools, and Homes, Public Spaces, Workplaces, Businesses**

---

**Maintain Safe Practices**
- Frequent handwashing when cloth face coverings are removed.
- Continue routine cleaning and disinfection.
- Inspect instruction, keep disinfectants out of reach of children.

---

**Follow the Directions**
- Always follow the directions on the label. The label will include safety information and application instructions.
- If the surface is contaminated by a virus, the label will say the product is effective against COVID-19.
- Use the appropriate cleaning and disinfecting method.

---

**Consider the Resources Available**
- Consider the type of surface to be cleaned.
- Determine how areas will be cleaned.
- Determine what needs to be cleaned.

---

**Evaluate**
- The potential for infection.
- The need for cleaning and disinfection.
- The level of risk associated with it.
- The ability to provide resources.

---

**For More Information**
- Scan the QR code to access more information.
- Keep in mind the need for cleaning and disinfection.

---

**Guidance for Teachers and Educators**
- Local and territorial authorities.
- Follow guidance from state, tribal, local, and territorial authorities.
- Local and territorial authorities.
- Follow guidance from state, tribal, local, and territorial authorities.
- Local and territorial authorities.
- Follow guidance from state, tribal, local, and territorial authorities.
Disinfecting During Pandemic

**Seating areas:** the #19 disinfectant should be used on the tables and chair backs, wherever someone would touch. Let the disinfectant sit for 10 minutes and then wipe with a wet paper towel.

**Kitchenette/Refrigerator:** countertops, faucet handles, coffee maker, and refrigerator door handle should all be sprayed with #19 disinfectant, allowed to set and wiped with a wet paper towel.

Throughout all door handles and sanitizer dispensers should be sprayed with #19 disinfectant, it can be sprayed on these surfaces and left to dry.

**Bathroom:** Areas of the bathroom that are frequently touched can be sprayed with #19 and left on for 10 minutes, then wiped. The toilet handles, door handles can be sprayed and left to dry or wiped off.

Toilets should be thoroughly cleaned once a week and toilet seats wiped with a wet paper towel after allowing the disinfectant to stay on for 10 minutes.

Floors should be mopped once a week also using the disinfectant. No need to rinse, just let dry.
Cleaning Procedures: Shower Room Cleaning

A. First Circuit
2. Empty trash containers. If there is only paper in the trash can it may be emptied. If there are liquids, food or other items that have solidified the liner, change it. If the liner leaks, replace the inside of the trash can and allow it to air dry before refilling. Wipe down the lobby and other affected areas.

3. Sweep and dust pan to pick up small debris. Use your lobby broom and dust pan. Place "wet floor" signs and damp mop floor using a dedicated standard damp mop and bucket/ wringer or microfiber damp mopping pads with disinfectant cleaner. Begin mopping at the corner farthest from the door and work outward.

4. Check and refill dispensers as necessary. Spray and wipe the outside of the dispensers with disinfectant cleaner. Apply disinfectant cleaner, clean surfaces and allow to air dry.

5. Damp mop with disinfectant, place "wet floor" signs and damp mop floor, leave signage in place until floor is completely dry.

B. Second Circuit

1. Sweep small debris with lobby broom and dust pan. Use your lobby broom and dust pan to pick up small debris.

Disinfect vertical and horizontal surfaces following the rules for disposal of the trash can with disinfectant cleaner to remove spots and stains. Can be discarded in the trash can without any further action.
Disinfecting Retreat Center During Pandemic

There are hand sanitizer dispensers located at the doors of each building to be used as you enter.

**Dining areas,** the #19 disinfectant should be used on the tables and chair backs, wherever someone would touch. Let the disinfectant sit for 10 minutes and then wipe with a wet paper towel.

**Kitchen** countertops, faucet handles, coffee maker, and refrigerator door handle should all be sprayed with #19 disinfectant, allowed to set and wiped with a wet paper towel.

Throughout the Retreat Center all door handles and sanitizer dispensers should be sprayed with #19 disinfectant, it can be sprayed on these surfaces and left to dry.

**Bathroom** showers can be sprayed after showering using the gallon sprayers of #19 disinfectant and left on the walls, floors and faucet handles. Wait 10 minutes before the next person showers for the disinfectant to work. You do not need to rinse.

Other areas of the bathroom that are frequently touched can be sprayed with #19 and left on for 10 minutes, then wiped. The toilet handles, door handles can be sprayed and left to dry or wiped off.

Toilets should be thoroughly cleaned once a week and toilet seats wiped with a wet paper towel after allowing the disinfectant to stay on for 10 minutes.

Floors should be mopped once a week also using the disinfectant. No need to rinse, just let dry.
Cleaning Procedures
Shower Room Cleaning

Routine Cleaning Tasks

1. Sweep small debris with lobby broom and dust pan
2. Empty trash containers / spray interior / spot clean exterior / reline
3. Check and refill dispensers / disinfect dispensers
4. Disinfect vertical and horizontal surfaces
5. Damp mop floor with disinfectant

Of major concern when cleaning shower rooms is the threat of cross-contamination. Preventing the cross-contamination of surfaces and areas should be as important to you as cleaning the shower rooms well. To prevent cross-contamination, use tools dedicated to only cleaning shower rooms, i.e. utility pails, damp mops and mop buckets used in shower rooms should not be used to clean other areas; just as you would not use the same cleaning cloth to wipe the outsides of toilets/urinals and the sinks or nearby drinking fountains.

Routine Cleaning Procedures

A. First Circuit

1. **Sweep small debris** with lobby broom and dustpan. Use your lobby broom and dustpan to pick up small debris.

2. **Empty trash containers.** If there is only paper in the trash can it may be emptied. If there are liquids, food or other item that have soiled the liner, change it. If the liner leaked, rinse the inside of the trash can and allow it to air-dry before relining. Wipe down the exterior of the trash can with disinfectant cleaner to remove spots and stray marks.

3. **Check and refill dispensers** as necessary. Spray and wipe the outside of dispensers with disinfectant cleaner.

4. **Disinfect vertical and horizontal surfaces** following the rules for disinfection. Apply disinfectant cleaner, clean surfaces and allow to air dry.

B. Second Circuit

5. **Damp Mop with Disinfectant:** Place “wet floor” signs and damp mop floor using a dedicated standard damp mop and bucket/wringer or microfiber damp mopping pads with disinfectant cleaner. Begin mopping at the corner farthest from the door and work outwards. Pour about half a gallon of cleaning solution from the mop bucket down each floor drain to prevent sewer gasses from backing up into the room. Leave signage in place until floor is completely dry.
# RESTROOM CLEANING VERIFICATION

<table>
<thead>
<tr>
<th>Name</th>
<th>Date</th>
<th>Time</th>
<th>Done</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
COVID-19 LIFESPAN ON SURFACES

According to a newly published study from the National Institutes of Health, CDC, UCLA, and Princeton University published in *The New England Journal of Medicine*, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), the virus that causes COVID-19, can remain stable for hours to days outside of the body depending on its environment. The study was conducted by simulating infected individuals transmitting the virus onto common surfaces found in households and hospitals through coughing or touching. The NIH scientists observed the duration the virus remained infectious on these surfaces, the results of which are summarized in the table below:

<table>
<thead>
<tr>
<th>Environment</th>
<th>Time Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>In aerosols</td>
<td>Up to 3 hours</td>
</tr>
<tr>
<td>On copper</td>
<td>Up to 4 hours</td>
</tr>
<tr>
<td>On cardboard</td>
<td>Up to 24 hours</td>
</tr>
<tr>
<td>On plastic</td>
<td>Up to 2-3 days</td>
</tr>
<tr>
<td>On stainless steel</td>
<td>Up to 2-3 days</td>
</tr>
<tr>
<td>On non-porous</td>
<td>Up to 4 days</td>
</tr>
<tr>
<td>On glass</td>
<td>Up to 9 days</td>
</tr>
<tr>
<td>On paper</td>
<td>Up to 3 hours</td>
</tr>
<tr>
<td>On wood</td>
<td>Up to 4 days</td>
</tr>
<tr>
<td>On cloth</td>
<td>Up to 2 days</td>
</tr>
</tbody>
</table>

These results suggest that the virus can be acquired through the air and after contact with contaminated objects. The CDC recommends appropriate handwashing as the first line of defense against the spread.
Face Coverings: Frequently Asked Questions

The Michigan Department of Health and Human Services recommends that Michiganders wear a face covering when outside of their home to help stop the spread of coronavirus disease 2019 (COVID-19).

Wearing a face covering is an additional precaution we can take that may help stop the spread of COVID-19. The best way to keep from getting sick is to stay home as much as possible, practice social distancing – keep at least 6 feet of distance from others, and good hand hygiene.

What is a face covering?
- A face covering is any well-secured cloth (like a bandana or scarf) that covers your mouth and nose.
- A face covering is different from a surgical or N95 mask which must be reserved for healthcare workers.

Who should and should not wear a face covering?
Cloth face coverings should not be placed on:
- young children under age 2,
- anyone who has trouble breathing, is unconscious, incapacitated, and
- anyone otherwise unable to remove the mask without assistance.

Cloth face coverings should be worn by:
- All others when they need to be outside their home and within 6 feet of others.
- People who are sick should wear a face covering while at home if they cannot maintain at least 6 feet of distance from others.
- People who are sick and who need to leave home, such as to get urgent medical care, should always wear a face covering.

Do I need to wear a face covering all the time when outside my house?
- If you are sick, yes. Remember you must stay home if you are sick and only leave for essential medical care. Arrange for essential items, like groceries, to be delivered to you through a delivery service or through friends or family.
- If you are not sick, you should wear a face covering whenever you need to leave home and might be closer than 6 feet from others. Examples include using public transportation, riding in a taxi or car service, walking on a busy street, going to pharmacies and grocery stores, and going to the doctor or a hospital.
- Essential workers should also wear a face covering at work when they cannot maintain at least 6 feet of distance between themselves and others.
Do I need to wear a face covering when I am exercising?
No — as long as you maintain at least 6 feet from others.

People should only do exercises that allow them keep physical distance from others. Walking, running, and biking outside are good examples of activities that do not require shared equipment or close contact with others.

I was confirmed to have COVID-19 and am better now. Do I still need to wear a face covering?
Yes — everyone that is able should wear a face covering when outside of their home and it is not possible to maintain at least 6 feet of distance between others. Social distancing is still necessary, even when using a face covering.

We don’t yet know how long the virus remains in a person’s body, or whether it is possible to get sick again. Using facemasks in public and practicing social distancing is still important for people who were sick and recovered.

Remember if you had or may have had COVID-19, you should not leave the house except for essential medical care or to get essential needs until all the following are true:

- It has been at least 7 days since your symptoms started or since you tested positive for COVID-19 and
- You have been fever-free for the last 3 days without taking fever-reducing drugs such as Tylenol or ibuprofen and
- Your overall illness has improved (for example, when your cough or shortness of breath have improved).

Why is this being recommended now?
As we learn more about COVID-19, sometimes recommendations change. There is increasing evidence that people without symptoms may be able to spread the virus, and that droplets produced when breathing, speaking, or singing may spread COVID-19 from person to person.

This evidence informed the decision to recommend face coverings. The use of face coverings is one more simple tool that may help reduce the spread of the virus — especially from people who are infected and don’t know it yet.

How often do I need to wash my face covering?
If you are using a cloth face covering, we recommend washing once a day by hand or machine using detergent. The face covering should be fully dry before using. You should have a couple of face coverings so you can rotate for washing.

Are there precautions I should take with my face covering?
- In taking on and off a face covering, you will likely touch your face. As such, please wash your hands with soap and warm water for at least 20 seconds. If soap and warm water are not
available, use an alcohol-based sanitizer that contains at least 60% alcohol every time before and after removing or putting on your mask.

- Do not put a used face covering in places where others can touch them or where germs trapped in your face covering can touch other surfaces, such as counter tops or your kitchen table.
- Do not throw your face covering loose in a bag or backpack. We recommend keeping a paper bag with you to store your face covering if you will be taking it off outside your house.

**Is it possible to make your own face covering?**
Yes! A face covering can be a scarf, bandana or other cloth. [Watch this video from the U.S. Surgeon General](#) to see ideas about creating a face covering with household items.

**What is the best fabric for a mask?**
Use tightly woven cotton, such as quilting fabric or cotton sheets.

**Are medical grade masks such as N95 or surgical masks better than homemade masks?**
Medical grade masks need to be saved for use by health care providers only. Use of homemade masks for people with lower risk exposure is a good way to decrease the chance of exposure to COVID-19.
When is it safe to leave home if you have symptoms of COVID-19 or live with someone who does?

Employers can't retaliate against workers for taking time away from work under these circumstances. File a complaint with MIOSHA. Learn more at Michigan.gov/MIOSHAcomplaint.

**For Me**

I have been diagnosed with COVID-19. 

Stay home for **7 days** after you were tested or developed symptoms.

After staying home for 7 days, have you been **symptom-free for 3 days**?

- **YES**
  - You may leave if you are symptom-free.

- **NO**
  - Stay home until 3 days have passed after all symptoms have stopped.

**Close Contacts**

I have developed one or more symptoms of COVID-19.

I live with someone diagnosed with COVID-19.

I live with someone who has developed one or more symptoms of COVID-19.

Stay home for **14 days** after your **last contact** with the sick person. Monitor yourself for symptoms.

You may leave if you are symptom-free.

**Should I wear a mask?**

If you or your close contact is symptomatic and you must leave home, you should cover your nose and mouth with a homemade mask, scarf, bandana or handkerchief.

*Process for general public, does not specifically apply to workers at a health-care facility, first responders (e.g., police officers, fire fighters, paramedics), and prison employees.*
COVID-19, what should I do?

Close Contacts

- I live with or am caring for someone with COVID-19
- Someone that has COVID-19 coughed or sneezed on me
- I think my coworker has COVID-19
- I think someone I know has COVID-19

You should self-quarantine and monitor yourself for symptoms. The local health department may ask you to do so.*

Have you developed symptoms of respiratory illness such as fever, cough, or shortness of breath?

Yes → Are you having severe symptoms like difficulty breathing, persistent pain or pressure in the chest, new confusion or inability to arouse or bluish lips or face?

- Yes → Seek immediate medical attention.
- No → Continue to monitor yourself for symptoms.

No → Contact your health care provider to discuss your symptoms.

If your doctor decides you should be tested for COVID-19, your health care provider can order testing for you.

- Health care provider takes a sample
- Sample is sent to a laboratory for testing
- Laboratory sends result to health care provider
- Health care provider informs patient of result. The state health department will not provide results.

*Quarantine process for general public does not specifically apply to health care workers.
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 “cope[e] with dangers to this state or the people of this state presented by a disaster or emergency,” which the governor may implement through “executive orders, proclamations, and directives having the force and effect of law.” MCL 30.403(1)-(2). Similarly, the Emergency Powers of the Governor Act of 1945 provides that, after declaring a state of emergency, “the governor may promulgate reasonable orders, rules, and regulations as he or she considers necessary to protect life and property or to bring the emergency situation within the affected area under control.” MCL 10.31(1).
To suppress the spread of COVID-19, 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.

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

GRETCHEN WHITMER
GOVERNOR

By the Governor:

SECRETARY OF STATE
EXECUTIVE ORDER

No. 2020-91

Safeguards to protect Michigan’s workers from COVID-19

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 “cope with dangers to this state or the people of this state presented by a disaster or emergency,” which the governor may implement through “executive orders, proclamations, and directives having the force and effect of law.” MCL 30.403(1)-(2). Similarly, the Emergency Powers of the Governor Act of 1945 provides that, after declaring a state of emergency, “the governor may promulgate reasonable orders, rules, and regulations as he or she considers necessary to protect life and property or to bring the emergency situation within the affected area under control.” MCL 10.31(1).
To suppress the spread of COVID-19, 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, and 2020-77, 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 17, 2020, Michigan reported 51,142 confirmed cases and 4,891 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 this order, I am creating an enforceable set of workplace standards that apply to all businesses across the state. These standards will have the force and effect of agency rules and will be vigorously enforced by the agencies that oversee compliance with other health-and-safety rules. Any failure to abide by the rules will also constitute a failure to provide a workplace that is free from recognized hazards within the meaning of the Michigan Occupational Safety and Health Act, MCL 408.1011.

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) 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.

(m) 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.

(n) Restrict business-related travel for employees to essential travel only.

(o) Encourage employees to use personal protective equipment and hand sanitizer on public transportation.

(p) Promote remote work to the fullest extent possible.

(q) 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.

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 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...
(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 bar stools 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 FDA and the Center for Disease Control. Such cleaning may occur overnight.

(o) Require a doctor’s written release to return to work if an employee has a confirmed case of COVID-19.

(p) 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.

(q) 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. Employers must maintain a record of the requirements set forth in Sections 1(c), (d), and (k).

10. The rules described in sections 1 through 9 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 9 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.

11. Any business or operation that violates the rules in sections 1 through 9 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.

12. 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 18, 2020
Time: 1:15 pm

GRETCHEN WHITMER
GOVERNOR

By the Governor:

SECRETARY OF STATE