Bay Area Women’s Center
COVID-19 Preparedness and Response Plan

Bay Area Women’s Center [BAWC] is committed to providing a safe and healthy facility and workplace for all our staff, clients, and visitors. To ensure we maintain as safe and healthy of a workplace possible, we have developed the following COVID-19 Preparedness and Response Plan. Management, as well as every staff person will be responsible for ensuring this plan is consistently followed and enforced. Our goal is to mitigate, to the extent possible, the potential for transmission of COVID-19 in our facility and communities, when COVID is identified as a threat in the community by health officials.

Our staff is the most important asset we have as an organization. To that end, the leadership and board of BAWC is deeply committed to maintaining a safe and healthy facility for both staff and clients. To ensure successful implementation and execution, it is essential for all staff to fully understand their role and responsibilities as outlined below. Any staff person unclear as to what will be expected of them will need to reach out to their supervisor, immediately, for clarification. Our COVID-19 Preparedness Plan follows Centers for Disease Control and Prevention (CDC 800-232-4636), Michigan Department of Health and Human Services (MDHHS 517-241-3740) guidelines, and Michigan Occupational Safety and Health Administration (MIOSHAinfo@michigan.gov, 855-723-3219, www.michigan.gov/MIOSHAcomplaint) standards related to COVID-19, and addresses:

- Hygiene and respiratory etiquette.
- Controls for social distancing.
- Cleaning, disinfecting, decontamination, and ventilation.
- Prompt identification and isolation of sick persons.
- Communications and training that will be provided to managers and workers.
- Communications and instructions for clients.

BAWC has elected to maintain a COVID Preparedness & Response Plan to provide guidance when staff are experiencing symptoms, a positive case has been identified in the workplace, or health officials deem COVID-19 a threat to the community.

When necessary, a COVID-19 On-Site Response Supervisor will be designated for each shift to monitor COVID-19 response activities within the facility. The designee will be provided a COVID-19 On-site Response Supervisor job description which outlines, in detail, their responsibility (Attachment A). The designee will be posted on the Master Schedule. Staff on shift should report workplace concerns over COVID-19 to a supervisor immediately.

**Risk Classification & Essential Tasks:**
Direct care staff, both paid and unpaid, provide essential services that may require frequent and/or close contact with clients/visitors who may be infected with SARS-CoV-2, but who are not known or suspected COVID-19 patients. Administrative staff have periodic contact with clients and visitors. As such, BAWC categorizes responsibilities of all positions in the medium risk exposure category.
Staff and tasks essential to operations:
Janitorial services and all staff performing direct care tasks are essential to the safe and effective operation of Bay Area Women’s Center. Efficient staff will be scheduled to respond to the various day to day needs of the agency.

When COVID-19 is deemed a threat, in-person meetings and services will be limited to those deemed to be necessary to health and well-being, or an emergency/crisis need. Administrative staff may be required to work from home to complete all tasks that can be feasibly completed outside of the workplace. The nature of BAWC operations often requires use of agency equipment and supplies not available with work from home activities such as the agency copier/printer to prepare donor appeal letters, creating copies of client related paperwork in order to meet contract requirements, processing donations and payments to the agency, certain technical issues that cannot be addressed remotely, etc. When such emergency orders are in place, in-office administrative activities may be limited to those essential to the operations of the agency that cannot be completed remotely. Administrative staff may be required to assess the feasibility of completing essential tasks from home prior to scheduling in-office hours. The ability to protect and maintain confidentiality of sensitive and protected information, must be considered when determining work from home activities. Such necessary in office activities may include, but are not limited to:

- Activities necessary to the collection of client service information per contract requirements.
- Facility repairs/maintenance.
- Executive tasks: financial and banking activities/needs, purchasing, payables, other Executive tasks that cannot be completed remotely.
- Fundraising/grant activities necessary for the continuation of operations.
- Technical/equipment needs that cannot be addressed remotely
- Organizing/monitoring facility modifications and upgrades being made in response to COVID.
- Staff management/HR when not appropriate to be virtual.
Screening, Reporting, and Leave Policies:
These measures are in place to safely and effectively ensure services are continuously provided and that employees and visitors are safe within our workplace. BAWC will comply with current government regulations, MI‐OSHA and County Emergency Orders as well as meet the best practices recommended by local Health Departments and Centers for Disease Control and Prevention. Adherence to the protocol will reduce the risk of exposure for staff, clients, and guests and allow for the most reliable contact tracing should exposure become a concern.

Signs depicting the symptoms of COVID-19 and screening criteria are displayed in the screening area along with an infrared thermometer. Staff providing services to non‐residential clients will keep note of the date, time, and contact information for the client in their office to ensure client confidentiality is protected.

Staff should encourage clients with non-emergent needs who are experiencing symptoms to isolate and seek testing. When meeting face to face with clients who are visibly ill, staff should maintain social distancing when possible, and wear personal protection equipment.

Definitions:
- “Respiratory system” is made up of the following organs and should be considered when screening:
  - Nose (such as runny or stuffy nose without an identifiable reason)
  - Throat
  - Small & large airways (bronchioles & bronchi)
  - Lungs
- “Infected with COVID-19” which means “displaying the principal symptoms of COVID-19 or having tested positive for COVID-19 prior to the end of the isolation period.”
- “Isolation Period” which means “the recommended number of days that an individual be in isolation after the individual first displays the principal symptoms of COVID-19 as prescribed” in the CDC guidelines.
- “Quarantine Period” which means “the recommended number of days that the individual be in quarantine after the individual is in close contact as prescribed” in the CDC guidelines.
- “Close contact”:
  - Being within six feet of someone who has COVID-19 for a total of 15 minutes or more within a 24-hour period;
  - Providing care at home to someone who is sick with COVID-19;
  - Having direct physical contact with the person (hugged or kissed them);
  - Sharing eating or drinking utensils with someone who has COVID-19; or
  - Someone with COVID-19 sneezed, coughed or got respiratory droplets on you.
- “Fully Vaccinated” means it has been less than six months since receiving the Johnson & Johnson vaccine, or the second dose of a two-dose of the Pfizer or Moderna vaccine, or the booster for either of the vaccines.
Screening & Reporting
  • If begin to feel like you are getting sick, contact your supervisor immediately to discuss your situation and/or symptoms.
  • You may be required to remain away from the workplace.
  • You may be required to wait a certain period before seeking testing due to guidance on the incubation period of COVID-19.
  • You may be required to seek medical advice from Covenant COVID Hotline, or similar clinic, or physician of your choice.
  • As essential employees, you may be required to return to the workplace early if you are not experiencing symptoms and can respond to residential needs and crisis calls.

1. Employees are required to stay home from work if they:
   • test positive for COVID 19;
   • display the “principal symptoms” of COVID 19; or
   • Are non-vaccinated and have been in close contact with someone who tested positive for COVID-19.

2. Employees who test positive or display one of the principal symptoms of COVID 19 must stay home until they are advised by a health care provider or public health professional that they have completed their isolation period or meet both of the following:
   • If fever was present, 24 hours have passed since the fever has stopped without the use of fever-reducing medications.
   • The employee’s principal symptoms of COVID 19 have improved and it has been at least five days since they began

3. Employees who have been in “close contact” with an individual who has tested positive for COVID 19 are prohibited from returning to work until they meet one of the following:
   • Employee is not experiencing symptoms and a COVID test taken five days after exposure had negative results; or
   • Employee is not experiencing symptoms and ten days have passed since the employee last had contact with the individual; or
   • The individual to whom they were exposed receives a “medical determination” that they did not have COVID 19 at the time of the close contact with the employee.

4. Research surrounding vaccination protection is continuously evolving. Return to work considerations will be based on current recommendations and guidelines. People are considered fully vaccinated:
   • 2 weeks after and within six months of the second dose in a 2-dose series, such as the Pfizer or Moderna vaccines, or
   • 2 weeks after and within six months of a single-dose vaccine, such as Johnson & Johnson’s vaccine
   • 2 weeks after and within six months of a booster dose.
   • Proof of vaccination will be required.

5. **Shelter and SANE screening and services:**
   • Signs depicting symptoms are located at building entrances.
   • Staff will remind residents daily to report symptoms.
   • Staff should encourage clients who are experiencing symptoms to stay home, isolate, and seek testing (unless an emergency).
Contact the Residential Program Manager or Director of Crisis & Forensic Services if a residential client reports symptoms to determine a course of action suitable to the client’s situation and shelter needs.

When meeting face to face with clients who are visibly ill, staff should maintain social distancing, wear personal protection equipment, and follow disinfecting recommendations.

Infections in the Workplace:
If an employee experiences symptoms of COVID-19 in the workplace at any time, the following protocol should be followed. BAWC will assist the employee(s) with obtaining testing and will provide guidance on available time off. When possible, work from home plans will be put in place for the employee(s). BAWC will follow the current MI-OSHA, CDC, and health organizations’ recommendations for possible exposure when determining when staff are allowed to return to the office.

Staff who begin to experience symptoms while in the facility are required to:

- Immediately place a mask on (unless a medical reason prevents the employee from wearing one)
- Leave the premises as soon as possible or isolate until you can leave the premises.
- Report the symptoms to a supervisor or the Director of Business Operations, via phone or other social distancing method. The report must include where the person has been in the agency and who they may have come into contact with within the last two days, if anyone.

  - The CDC defines close contact as:
    - Being within six feet of someone who has COVID 19 for a total of 15 minutes or more in a 24-hour period;
    - Providing care at home to someone who is sick with COVID 19;
    - Having direct physical contact with an infected person (hugged or kissed them);
    - Sharing eating or drinking utensils with someone who has COVID 19; or
    - Someone with COVID 19 symptoms sneezed, coughed or got respiratory droplets on you.

- Wherever possible, open windows to increase circulation.
- On-site staff will implement the UV disinfecting system followed by cleaning with a disinfectant in any shared spaces.

Staff who are not reporting to the office but are experiencing symptoms, have been diagnosed with, or exposed to someone diagnosed with COVID-19 must contact their supervisor immediately. The supervisor will collect contact information (as defined above) from the employee if they have been in the workplace two days prior to feeling symptoms. If the supervisor is not available, contact the Director of Business Operations.

Leave Policies:
BAWC has policies that promote workers staying at home when they are sick or when required by a health care provider to isolate or quarantine themselves or a member of their household. In addition to regular Paid Time Off hours, employees have tools available for telework opportunities, availability of flexible scheduling, and unpaid time off under our Family & Medical Leave (HR Policy #16) if PTO is exhausted.
Telework:
BAWC has implemented work-from-home policies for those whose job responsibilities allow such work to limit staffing within the agency during an outbreak in the community. These policies were implemented to further accommodate workers with underlying medical conditions or who have household members with underlying health conditions. Those requesting accommodation due to medical reasons may be required to provide supportive documentation of such need. Requests for work-from-home and PTO will be considered on a case-by-case basis. Work-from-home accommodations will be reassessed weekly, or as needed.

Notification:
BAWC has implemented procedures for informing individuals if they have been exposed to a person with COVID-19 and requiring them to quarantine for the recommended amount of time. Written notification will be distributed within 24 hours to all individuals who may have been exposed by close contact. The Bay County Health Department may also be notified, when required by emergency orders. All measures will be taken, to the extent possible, to protect the privacy of individuals’ health status and health information. Documentation of all health-related information will be kept in a secure manner with limited access.

Handwashing:
Basic infection prevention measures have been implemented at our workplace. Workers are instructed to wash their hands for at least 20 seconds with soap and water frequently throughout the day, but especially at the beginning and end of their shift, prior to any mealtimes and after using the toilet. Hand-sanitizer dispensers (that use sanitizers of greater than 60% alcohol) are at entrances and locations in the workplace so they can be used for hand hygiene in place of soap and water, if hands are not visibly soiled. Hygiene signs are placed throughout the building where staff, clients, and visitors frequent. Supervisors or the Director of Business Operations should be informed of items needing to be ordered.

Respiratory etiquette - Cover your cough or sneeze:
Workers, clients, and visitors are being instructed to cover their mouth and nose with their sleeve or a tissue when coughing or sneezing whenever face coverings are not in place. Avoid touching their face, in particular their mouth, nose and eyes, with their hands. Tissues are to be disposed of in provided trash receptacles and hands need to be wash or sanitize immediately afterward. Respiratory etiquette is demonstrated on posters and supported by making tissues and trash receptacles available to all workers, clients, and visitors. Cover your cough/sneeze signs are placed throughout the building where staff, clients, and visitors frequent.

Social Distancing & Face Coverings:
Face shields, safety goggles, KN95/N95 masks, and protective clothing are available for response to emergency situations where COVID-19 may be a factor. Disposable and reusable cloth masks are available to staff and residents for daily use. Disposable masks are also available for non-residential clients and visitors to the agency. In the event disposable masks cannot be restocked, reasonable efforts will be made to acquire additional cloth masks as quickly as possible. KN95/N95 and disposable masks are one-size. If these items do not fit appropriately, ear saver/mask adjusters are available. These supplies are in the supply room located in the Work Center.
The following engineering and administrative controls are implemented to mitigate exposure to COVID-19:

- Masks must be worn during in-person meetings with multiple people in attendance.
- Masks must be worn in the crisis office when more than one person is present.
- Masks must be worn by staff in all other shared spaces when social distancing cannot be maintained, including hallways, bathrooms, and offices. It is the responsibility of both the outgoing and incoming staff to disinfect the crisis office area when taking over a shift.
- Staff should avoid occupying the crisis office if not scheduled for coverage and your presence is not necessary.
- Scheduling for on-site staff may be reduced, rotated, or increased, when deemed necessary to maintain an acceptable level of service delivery.
- Maintain social distancing whenever possible.
- Phones, computers, keyboards, etc., should not be shared. If sharing is necessary, each person is required to disinfect the device before and after use.
- Masks and other Personal Protection Equipment are not to be shared.
- No more than one individual, or one family who is staying together, at a time in the elevator.
- Crisis office door remains locked. Residents are not allowed to enter the crisis office.
- Residential individuals/families will not be doubled up in bedrooms.
- Signs reminding clients to social distance, wear masks, wash their hands, and disinfect often will remain posted throughout client areas.
- Personal needs/supplies will be passed to residents through the window and residents are instructed to go to foyer for assistance. Staff should use hand sanitizer or wash their hands when handling items passed back through the window. If a resident needs the agency phone to make calls, staff are required to pass the portable phone through the window. After the call is completed, staff are required to disinfect the phone and sanitize their hands.
- Staff limit time in the shelter area to necessary tasks such as disinfecting, food prep, etc. If there is an emergency, please use your own discretion within the scope of our protocols, policies, and procedures. Staff are encouraged to utilize a KN95/N95 filtration mask when occupying client spaces and responding to emergency situations.
- Staff providing transportation for clients is limited until there is no longer a threat of COVID-19.

Cleaning, disinfection, and ventilation:
Regular housekeeping practices, including routine cleaning and disinfecting of work surfaces, equipment, and areas in the work environment will be maintained in accordance with Attachment B. A bleach solution, or other approved disinfectant, is available for disinfecting surfaces. Personal Protection Equipment is available for use when disinfecting. Safety Data Sheet (SDS) for disinfectants other than normal household cleaners will be saved to the company folder and posted in the supply room. When available, staff may use disinfectant wipes on door handles, phones, etc. – staff should review the guidelines regarding the proper use of products to appropriately disinfect surfaces. Staff are to notify management immediately if supplies are low or not available.
BAWC has worked to improve air quality within the facility. Air purification devices have been installed in each of the HVAC systems. These filtration systems use a triple filtration system that includes a HEPPA filter, a charcoal filter, and ultraviolet lighting.

**Communications and training:**
This COVID-19 Preparedness and Response Plan was initially communicated via email and virtual staff meeting on May 29th, 2020. Staff complete COVID-19 and Blood Born Pathogen training through Pro Training. Additional communication and training will be ongoing as guidance and recommendations evolve and training needs are identified. Managers and supervisors are to monitor how effective the program has been implemented. This COVID-19 Preparedness and Response Plan has been certified by Bay Area Women’s Center management and was posted throughout the workplace on or before May 30th, 2020. Revisions distributed and posted October 23rd, November 23rd, December 11th, 2020, January 6th, 2021, June 25, 2021, August 25, 2021, and January 4, 2022.

Certified by:

Jeremy Rick  
Executive Director  
Bay Area Women’s Center
Attachment A

COVID-19 On-site Response Supervisor
(Commonly called COVID Response Site Manager - CRSM)

As part of the COVID-19 Response Protocol, a COVID-19 On-site Response Supervisor will be assigned for each shift (1st shift, 2nd shift, & 3rd shift) at Bay Area Women’s Center. This requirement was established by Governor Whitmer and MI-OSHA’s Emergency Orders. As the designated COVID-19 On-site Response Supervisor there will be both monitoring and reporting requirements as outlined below.

Responsibilities

- Assure adherence to the Disinfecting Schedule.
- Complete Health Screening checks with residents throughout the shift if checks have not already been completed within the last 24 hours.
- Identify and immediately report breaches of COVID-19 Response Protocols within the agency, including lack of social distancing or mask usage by residents or staff, lack of mask wearing in offices where more than one employee is working, refusal of visitor or resident to comply with Health Screening upon entry to the facility, or a report by a resident or employee of positive symptoms or responses to Health Screening.
- Breaches of the COVID-19 Response Protocols should be immediately reported to the Director of Crisis Services. If the Director of Crisis Services is not reachable, the report should be made to the Executive Director.
- Breaches in protocol are to be reported only to management to ensure confidential health information is protected.
- Actively identify and report any other risks within the agency.
- Additional responsibilities may be assigned by management staff throughout the shift.

Please remember health information is confidential and is to be reported only to the Director of Crisis Services, Director of Business Operations, or the Executive Director.

The COVID-19 On-site Response Supervisor will be designated on the Master Schedule for the agency by the designation CRSM or CORS after the employees’ name.
Attachment B
Disinfecting Schedule

The following cleaning schedule will be implemented when a positive case of COVID-19 has been identified in the workplace, or health officials have identified a threat in the community. Management may elect to implement such procedures if deemed necessary to the health and safety of all individuals entering the facility.

- Disinfect all touch points and common areas every 4 hours. Crisis office, work center, board room, waiting rooms, residential areas, phones, hallways, door handles, equipment, chairs, etc. are included. Exceptions may be made to areas that have not been occupied in that 4-hour block of time.
- Disinfect Children's room and toys after each use.
- SANE Exam Room and SANE waiting room are to be thoroughly disinfected after each use (Assigned by daily on-call or exam attendance).
- Residential bedrooms must be sanitized first with the UV sanitizing system and then all surfaces must be disinfected before placing another residential client in the vacated room. Staff are to follow instructions and safety requirements for the UV system and wear required PPE, such as mask, gloves, and eye protection when disinfecting bedrooms.
- Residents should be encouraged to disinfect common areas after each use and their bedroom/bathroom on a regular basis.

*Please remember that all residential spaces should be disinfected regularly, and bedrooms are to be disinfected and cleaned between clients to mitigate all communicable diseases, regardless of the level of threat from COVID.