Local Businesses,

The resources provided in the following pages are meant to provide you with ideas to implement strategies to keep our employees and clients safe. Ultimately, employers must determine how to best implement these screening measures to keep their employees and clients safe.

If you still have questions, please utilize our Public Health Information Line at 231-882-2197.
COVID-19 RE-ENGAGEMENT
RESOURCES FOR BUSINESSES

Resource Navigation
What to Expect from Public Health
Workplace Health & Safety Hierarchy of Controls
Industry Specific Risk Assessment

Handouts for Employers
EO 2020-92 Response Requirements
Coronavirus (COVID-19) SAMPLE Workplace Health Screening Preventive Practices
Checklist Of Governor Whitmer's Executive Orders For Reopening
BLDHD Public Health Advisory
MDHHS: Cleaning & Disinfection for Facilities After Suspected or Confirmed COVID-19 Exposure
CDC: Top 10 Tips to Protect Employees’ Health
PPE Resources

Handouts for Employees
CDC: Important Information About Your Cloth Face Coverings
CDC: How to Safely Wear and Take Off a Cloth Face Covering
CDC: Use of Cloth Face Coverings to Help Slow the Spread of COVID-19
MDHHS: Face Coverings: How to wear a face covering
MDHHS: I think I have been exposed to COVID-19, what should I do?
MDHHS: When is it safe to leave home
MDHHS: COVID-19 testing process
Information for Community Supports

Signs for the Workplace
Social Distancing for Indoor Facilities
Face Mask or Face Covering for Indoor Facilities
CDC: Stop – Feeling Sick?
CDC: Clean Hands Keep You Healthy
What to Expect from PUBLIC HEALTH

The Benzie-Leelanau District Health Department (BLDHD) is committed to our mission of protecting the health of all persons in Benzie and Leelanau County. As an employer, you may be wondering what to expect if a staff member becomes a positive case.

1. A call from a local public health department will notify the employer of a positive case at the workplace. Depending on where the employee resides, this may be a different public health department than Benzie and Leelanau County. Local public health departments will follow-up with cases that live in their jurisdiction.

2. Public health will give the positive case (employee) isolation orders and exclude case (employee) from working.

3. Public health will request assistance from case (employee) and potentially employer to identify and possibly get in touch with workplace contacts (e.g. other employees, clients, visitors). Do not share case name, details or health information with others.

4. Public health will give quarantine notice to contacts which may exclude them from work and will ask contacts to monitor symptoms.

Positive COVID-19 Case Identified

- Communicable Disease Nurse interviews case
- Isolation order issued to positive case
- Employer(s) identified for notification & follow-up interviews
- Employer(s) contacted to notify of case and interviewed to identify close contacts
- Close contacts are contacted and quarantined

Communicable Disease case work is a critical function of public health. Confidentiality of personal information is essential. As part of a public health investigation, the local health department may ask for information about staff and other persons in connection with the case. This is routine public health practice and follows the Michigan Public Health Code 333.2433 & 333.2446:

To assure compliance with laws enforced by a local health department, the local health department may inspect, investigate, or authorize an inspection or investigation to be made of, any matter, thing, premise, place, person, record, vehicle, incident, or event. Section. 2241 to 2247 apply to an inspection or investigation made under this section.
When businesses, recreational activities, or social events resume, it is critical for these operations to have guidance on how to do so in a safe manner. COVID-19 is highly transmittable virus, and public health responses must attempt to prevent extensive, asymptomatic spread. While widespread testing and swift isolation and quarantine of those infected or exposed is important; due to resource constraints they are not as effective as social distancing.

Controlling exposures to occupational hazards is the fundamental method of protecting workers. Traditionally, a hierarchy of controls has been used as a means of determining how to implement feasible and effective control solutions. One representation of this hierarchy is as follows:

The idea behind this hierarchy is that the control methods at the top of graphic are potentially more effective and protective than those at the bottom. Following this hierarchy normally leads to the implementation of inherently safer systems, where the risk of illness or injury has been substantially reduced.

**Elimination and Substitution**

The most effective at reducing hazards, but tends to be the most difficult to implement in an existing process. Whenever possible, have people work from home. Restructure responsibilities to minimize the numbers of workers that need to be physically present.

**Engineering Controls**

Designed to remove the hazard at the source before it comes in contact with the worker. Create physical barriers between people, such as Plexiglas dividers or tape off seating

**Administrative Controls and PPE**

Frequently used with existing processes where hazards are not well controlled. Redistribute responsibilities to reduce contact between individuals. Provide PPE for workers as necessary and available.

Until a vaccine or treatment is available, *social distancing measures* are crucial in preventing illness and death from COVID-19 within a community.

Content source: The National Institute for Occupational Safety and Health (NIOSH)
Industry Specific RISK ASSESSMENT

This section provides risk level assessment for a variety of organizations and settings. Each of these categories was assessed along three dimensions: contact intensity, number of contacts, and the degree to which the activities are considered to be modifiable (through mitigation measures such as enabling people to remain six feet apart) to reduce risk. These assessments are qualitative and based on expert judgment.

<table>
<thead>
<tr>
<th>Category</th>
<th>Contact Intensity (ranging from close to distant)</th>
<th>Number of Contacts (# of people in setting)</th>
<th>Modification Potential (degree to reduce risk)</th>
<th>Mitigation Resources</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-essential Business</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Restaurants</td>
<td>Medium</td>
<td>Medium</td>
<td>Medium</td>
<td>National Restaurant Association, FDA</td>
</tr>
<tr>
<td>Bars</td>
<td>High</td>
<td>High</td>
<td>Medium</td>
<td>FDA</td>
</tr>
<tr>
<td>Salon, spas, other personal care industries</td>
<td>Medium/high</td>
<td>Low</td>
<td>Medium</td>
<td>State Cosmetology &amp; Barber Guidelines</td>
</tr>
<tr>
<td>Retailers</td>
<td>Low</td>
<td>Medium</td>
<td>Medium</td>
<td>State Guidance, OSHA</td>
</tr>
<tr>
<td>Gyms/Fitness Centers</td>
<td>Medium</td>
<td>Medium</td>
<td>Medium</td>
<td>CDC Small Business guidance</td>
</tr>
<tr>
<td>Theaters, museums, other indoor leisure spaces</td>
<td>Medium</td>
<td>High</td>
<td>Medium</td>
<td>Entertainment venue guidance, American for the Arts, American Alliance of Museums</td>
</tr>
<tr>
<td>Outdoor large venues (concerts, sports)</td>
<td>High</td>
<td>High</td>
<td>Medium</td>
<td>CDC Mass Gathering guidance</td>
</tr>
<tr>
<td>Indoor large venues (concerts, sports)</td>
<td>High</td>
<td>High</td>
<td>Low</td>
<td>CDC Mass Gathering guidance</td>
</tr>
<tr>
<td>Schools &amp; Childcare Facilities</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Childcare facilities (daycare/preschool)</td>
<td>High</td>
<td>Medium/High</td>
<td>Low/Medium</td>
<td>CDC, WHO</td>
</tr>
<tr>
<td>Schools (K-12)</td>
<td>High</td>
<td>High</td>
<td>Low</td>
<td>CDC, WHO</td>
</tr>
<tr>
<td>Contact school sport</td>
<td>High</td>
<td>Medium/High</td>
<td>Low</td>
<td>NCAA, CDC</td>
</tr>
<tr>
<td>Noncontact school sport</td>
<td>High</td>
<td>Medium</td>
<td>High</td>
<td>NCAA, CDC</td>
</tr>
<tr>
<td>Summer camps</td>
<td>High</td>
<td>High</td>
<td>Low</td>
<td>American Camp Association, Association of Camp Nursing</td>
</tr>
<tr>
<td>Institutions of Higher Learning</td>
<td>High</td>
<td>High</td>
<td>High</td>
<td>CDC, American College Health Association</td>
</tr>
<tr>
<td>Residence halls/overnight programs</td>
<td>High</td>
<td>Medium</td>
<td>Low</td>
<td>State guidance for congregate settings and residential buildings</td>
</tr>
<tr>
<td>Outdoor Spaces</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Parks, walking paths/trails, dog parks</td>
<td>Low</td>
<td>Low/High</td>
<td>Low</td>
<td>State guidance</td>
</tr>
<tr>
<td>Athletic fields and outdoor congregate settings</td>
<td>Medium</td>
<td>Medium</td>
<td>Low</td>
<td>State guidance</td>
</tr>
<tr>
<td>Pools</td>
<td>Medium</td>
<td>Low</td>
<td>High</td>
<td>CDC, State guidance</td>
</tr>
<tr>
<td>Beaches, piers</td>
<td>Low</td>
<td>High</td>
<td>Medium</td>
<td>State guidance</td>
</tr>
<tr>
<td>Playgrounds, skate parks, outdoor recreation spaces</td>
<td>Medium</td>
<td>Medium</td>
<td>Medium</td>
<td>State guidance</td>
</tr>
</tbody>
</table>
## Industry Specific Risk Assessment

<table>
<thead>
<tr>
<th>Category</th>
<th>Contact Intensity (ranging from close to distant)</th>
<th>Number of Contacts (# of people in setting)</th>
<th>Modification Potential (degree to reduce risk)</th>
<th>Mitigation Resources</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Community Gathering Spaces</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Places of Worship</td>
<td>High</td>
<td>High</td>
<td>Medium</td>
<td>CDC</td>
</tr>
<tr>
<td>Libraries</td>
<td>Low</td>
<td>Low</td>
<td>Medium</td>
<td>CDC</td>
</tr>
<tr>
<td>Community Centers</td>
<td>Medium</td>
<td>High</td>
<td>Medium</td>
<td>CDC</td>
</tr>
<tr>
<td><strong>Transportation</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Buses</td>
<td>High</td>
<td>High</td>
<td>Medium</td>
<td>CDC, State guidance for public transportation</td>
</tr>
<tr>
<td>Metros/rails</td>
<td>High</td>
<td>High</td>
<td>Medium</td>
<td>CDC Transit Station, CDC Transit Workers</td>
</tr>
<tr>
<td>Airplanes</td>
<td>High</td>
<td>High</td>
<td>Medium</td>
<td>CDC</td>
</tr>
<tr>
<td>Rideshare/taxis</td>
<td>High</td>
<td>Low</td>
<td>Low</td>
<td>State guidance</td>
</tr>
<tr>
<td><strong>Mass Gatherings</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sports – tournaments, championships</td>
<td>High</td>
<td>High</td>
<td>Medium</td>
<td>CDC for Mass Gatherings</td>
</tr>
<tr>
<td>Sports – trainings</td>
<td>High (sport dependent)</td>
<td>Medium</td>
<td>Medium</td>
<td>CDC for Mass Gatherings</td>
</tr>
<tr>
<td>Religious gatherings – celebrations, festivals, pilgrimages</td>
<td>High</td>
<td>High</td>
<td>Medium</td>
<td>CDC for Mass Gatherings</td>
</tr>
<tr>
<td>Business – trades shows, conferences, conventions, workshops, retreats</td>
<td>High</td>
<td>High</td>
<td>High</td>
<td>CDC for Mass Gatherings</td>
</tr>
<tr>
<td>Entertainment – large concerts, festivals, carnivals, conventions, shows</td>
<td>High</td>
<td>High</td>
<td>Medium</td>
<td>CDC for Mass Gatherings</td>
</tr>
<tr>
<td>Politics – election rallies, polling centers, parades, speeches/addresses</td>
<td>High</td>
<td>High</td>
<td>Medium</td>
<td>CDC for Mass Gatherings</td>
</tr>
<tr>
<td><strong>Interpersonal Gatherings</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Small social parties (birthdays)</td>
<td>High</td>
<td>Medium</td>
<td>High</td>
<td>CDC guidance</td>
</tr>
<tr>
<td>Large social parties (weddings, funerals w/many attendees)</td>
<td>High</td>
<td>High</td>
<td>High</td>
<td>CDC guidance</td>
</tr>
</tbody>
</table>
Handouts for Employers

EO 2020-92 Response Requirements
Coronavirus (COVID-19) SAMPLE Workplace Health Screening Preventive Practices
Checklist Of Governor Whitmer's Executive Orders For Reopening
BLDHD Public Health Advisory
MDHHS: Cleaning & Disinfection for Facilities After Suspected or Confirmed COVID-19 Exposure
CDC: Top 10 Tips to Protect Employees’ Health
PPE Resources
Business Reopening Response to EO2020-114 REQUIRES:

- **Conduct a risk assessment of the workplace.**
  Ask if your business currently participates in any activities that promote transmission.

- **Screen employees for COVID-19 symptoms**
  A Sample Employee Screening Checklist is included for your convenience.

- **Provide visible guidance of 6-ft physical distancing**
  Guidance included in this packet about Social Distancing and how to establish visual distance markings in your office facility for customers and employees.

- **Limit capacity to comply with 6-ft social distancing**
  Capacity should be limited based on the size of your facility to maintain appropriate social distancing requirements.

- **Make hand-washing and hand-sanitizing stations available and accessible**

- **Provide masks and allow employees to wear PPE**

- **OSHA COVID-19 Guidance**

- **MIOSHA COVID-19 Worksite Guidelines**
Coronavirus Disease (COVID-19) Workplace Health Screening

Company Name: ____________________________________________________________

Employee Name: ____________________________  Date: ___________________  Time In: _________

In the past 24 hours, have you experienced:

Subjective fever (felt feverish):  □ Yes  □ No

New or worsening cough:  □ Yes  □ No

Shortness of breath:  □ Yes  □ No

Sore throat:  □ Yes  □ No

Vomiting/Diarrhea:  □ Yes  □ No

Current temperature: _______________________

If you answer “yes” to any of the symptoms listed above, or your temperature is 100.4°F or higher, please do not go into work. Self-isolate at home and contact your primary care physician’s office for direction.

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

Have you engaged in any activity or travel within the last 14 days which fails to comply with the Stay Home, Stay Safe Executive Order?  □ Yes  □ No

Have you been directed or told by the local health department or your healthcare provider to self-isolate or self-quarantine?  □ Yes  □ No

If you answer “yes” to either of these questions, please do not go into work. Self-quarantine at home for 14 days.
<table>
<thead>
<tr>
<th>Employee Name</th>
<th>Time in:</th>
<th>In the past 24 hours, have you experienced:</th>
<th>Current Temp:</th>
<th>Have you had close contact in the last 14 days with an individual diagnosed with COVID-19?</th>
<th>Have you engaged in any activity or travel within the last 14 days which fails to comply with the <em>Stay Home, Stay Safe</em> Executive Order?</th>
<th>Have you been directed or told by the local health department or your healthcare provider to self-isolate or self-quarantine?</th>
<th>PASS or FAIL SCREENING</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Practices to Provide a Safe and Healthy Workplace and Prevent COVID-19:

Conduct A Risk Assessment - evaluate the current workplace
- Does your business have existing cleaning procedures?
- Do you have employees and customers that need resources in multiple languages?
- Are there locations where employees routinely congregate?
- Do you frequently use tools or equipment shared by staff members?
- Does customer flow and staff work space allow for social distancing?

Workplace Distancing - staff/customers should stay away from others
- Everyone who can work remotely, should work remotely
- Restrict access to common areas and actively discourage congregating (break rooms, cafeterias, meeting rooms, etc)
- Restrict in-person meetings as much as possible
- Create physical barriers between workspaces
- Restrict travel, external meetings, other in-person interactions
- Stagger breaks, lunches, and shifts if possible

*Additional information and sign on social distancing included.

Sanitation and Hygiene - keep things clean and well ventilated
- Frequently disinfect facilities, equipment, and surfaces
- Make handwashing facilities easily accessible and promote regular usage
- Place restrictions on shared tools, machinery, equipment
- Use HEPA filters on HVAC systems
- Provide improved ventilation to minimize recirculation
Contract Tracing, Isolation and Isolation - Create a system for contact identification and workplace exclusion

- Ensure there is a process to quickly identify close contacts of all workers
- Develop notification protocols (co-workers, Human Resources, local health department, etc.)
- Develop quarantine and return-to-work procedures (may differ for critical infrastructure workers and resumed businesses, as well as situation)
- Establish facility cleaning and shutdown procedure

Access Control - keeping the sick away

- Ask everyone, at least once a day, about COVID-19 symptoms
- Perform on-site temperature checks with a touchless thermometer (where possible)
- Determine and provide an intake procedure for visitors
- Create and post guidelines for delivery areas

*Symptom checklist for employee monitoring is included.

Personal Protective Equipment (PPE)

- At the minimum, everyone should wear a cloth face cover at work in common areas
- Disposable gloves can be used - gloves should be put on, removed, and disposed of properly
- Allow employees to wear their own PPE if it's more protective than the minimum standard
- Other types of PPE should be used for the workplace if appropriate (gowns, face shields, etc)
Overview Guide for Reopening Businesses

PREVENTION & RESPONSE

PREVENTION

IDENTIFY, EXCLUDE, PROTECT

1. Identify and exclude contagious employee(s) from contact with others.
2. Exclude exposed employee(s) from contact with others.
3. Protect workers from exposure to asymptomatic or symptomatic customers or co-workers.
4. Protect customers from exposure to asymptomatic or symptomatic workers or other customers.

CONDUCT AN ASSESSMENT

1. Who are the staff and employees at high risk?
2. Is our business participating in activities that promote transmission?
3. Does our business have existing cleaning procedures?
4. Can we quickly communicate with our employees?
5. Do we have employees and customers that need resources in multiple languages?
6. Are there locations where employees routinely congregate?
7. Do we frequently use tools or equipment shared by staff members?
8. Does our customer flow allow for social distancing?
9. Are there areas in our business that would not allow customers and or staff to distance?

• PHYSICAL DISTANCING wherever possible having people work or access the business from home; restructure responsibilities to minimize the numbers of workers that need to be physically present.

• ENGINEERING CONTROLS creating physical barriers between people, such as plexiglass dividers or taping off seating.

• ADMINISTRATIVE CONTROLS redistributing responsibilities to reduce contact between individuals.

• PERSONAL PROTECTIVE EQUIPMENT (PPE) having people wear nonmedical cloth face coverings.
RESPONSE

What if an employee becomes a case?

ISOLATION is for people who are already sick. Isolation separates and restricts the movement of sick people so they can’t spread the disease to healthy people.

QUARANTINE is for people who are not sick but may have been exposed. Quarantined people may or may not become sick.

Critical Infrastructure Workers/Essential Employees
who are identified as close contacts who are not experiencing symptoms may continue to work, however, the following practices must be in place:

• Pre-Screen: Employers must measure the employee’s temperature and assess symptoms before they start work. Ideally, temperature checks should happen before the individual enters the facility.

• Regular Monitoring: As long as the employee doesn’t have a temperature or symptoms, they should self-monitor daily under the supervision of their employer’s occupational health program.

• Wear a Mask: The employee should wear a face mask at all times while in the workplace for 14 days after the last exposure. Employers can issue facemasks or can approve employees’ supplied cloth face coverings in the event of shortages.

• Social Distance: The employee should maintain a distance of 6 feet or more from others and practice social distancing as work duties permit in the workplace.

• Disinfect and Clean Workspaces: Clean and disinfect all areas such as offices, bathrooms, common areas and shared electronic equipment routinely.

If the employee becomes sick during the day, send them home immediately. Clean and disinfect surfaces in their workspace. Compile information on people who had contact with the ill employee during the time the employee had symptoms and two days before symptoms to share with public health. Others at the facility with close contact (within 6 feet of the employee during this time) could be considered exposed.

Non-Critical Infrastructure Workers/Non-essential Employees
who are identified as close contacts will be required to quarantine until released by public health to return to work. Employers should implement the recommendations in the CDC’s Interim Guidance for Businesses and Employers to Plan and Respond to Coronavirus Disease 2019 to help prevent and slow the spread of COVID-19 in the workplace.

RESOURCES

• Safe Start Plan to Re-engage Michigan’s Economy
• COVID-19 Business Response Center & Industry-specific Guidance
  - Construction Facilities
  - Industrial Facilities
  - Retail
  - Office Spaces
  - Restaurants
  - Healthcare Outpatient
  - Research Laboratory
  - Protocol Specific
• OSHA: Guidance on Preparing Workplaces
• CDC: Plan, Prepare and Respond to COVID-2019
• CDC: Print Resources (Signs and Posters)
• CDC: Crisis & Emergency Risk Communication Training & Tools
PUBLIC HEALTH ADVISORY
Issued March 31, 2020

The Benzie-Leelanau District Health Department, in collaboration with the Northern Michigan Public Health Alliance (NMPHA), issues the following advisory to protect the health of the public in the 31-county NMPHA region:

Northern Michigan Counties are seeing an influx of individuals who are seeking shelter from areas with significant COVID-19 community spread or returning from travel outside of these counties. While we understand the desire to seek shelter in our communities with fewer COVID cases, this potentially poses an unnecessary risk to all residents of Northern Michigan.

The increased population to the northern Michigan area puts a substantial strain on our communities as travelers seek supplies, such as groceries and toiletries, as well as potentially needing health care in the event they become sick. During this public health crisis, many rural communities may not be equipped with personnel, supplies or resources for a surge in population.

If you still choose to travel to your seasonal home or return home from travel, the Benzie-Leelanau District Health Department, in addition to the Northern Michigan Public Health Alliance, is advising that you abide by the following guidelines:

1. If you are sick, stay at home and do not leave your residence.
2. If you have symptoms suggestive of COVID-19, contact your healthcare provider for assistance. If you do not have a healthcare provider, call the Munson hotline at 231-935-0951.
3. All individuals traveling to seasonal homes or returning home from areas with significant COVID-19 should self-quarantine for 14 days upon arrival to your destination.
4. Following the 14-day self-quarantine period, please obey the Governor’s “Stay at Home” order and do not go out unless absolutely necessary.
5. All residents, whether full time or seasonal, should adhere to the Governor’s Stay at Home order and only venture out to obtain essential supplies and services when absolutely necessary. If you do need to go out, please adhere to social distancing protocols and limit the number of people going out for supplies or services.

By following the above simple guidelines, the risk for spreading COVID-19 lowers significantly, thus protecting everyone who lives, works, and plays in beautiful northern Michigan.

This advisory will remain in effective until lifted.

Benzie and Leelanau County residents who need resources can call 211 or utilize the Health Department’s free Community Connections program by calling 1-833-674-2159 and/or bldhd.org.

Lisa Peacock, RN, MSN, WHNP-BC
Health Officer
Timing and location of cleaning and disinfection of surfaces.

At a school, daycare center, office, or other facility that does not house people overnight:

It is recommended to close off areas used by the ill persons and wait as long as practical before beginning cleaning and disinfection to minimize potential for exposure to respiratory droplets. Open outside doors and windows to increase air circulation in the area. If possible, wait up to 24 hours before beginning cleaning and disinfection.

How to clean and disinfect.

**Surfaces**
If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection.

For disinfection, diluted household bleach solutions, alcohol solutions with at least 70% alcohol, and most common EPA-registered household disinfectants should be effective.

- Diluted household bleach solutions can be used if appropriate for the surface. Follow manufacturer’s instructions for application and proper ventilation.
- Check to ensure the product is not past its expiration date. Never mix household bleach with ammonia or any other cleanser.

- Unexpired household bleach will be effective against coronaviruses when properly diluted.
  - Prepare a bleach solution by mixing:
    - Five tablespoons (1/3 cup) bleach per gallon of water, or
    - Four teaspoons bleach per quart of water.

**Products with EPA-approved emerging viral pathogens claims** are expected to be effective against COVID-19 based on data for harder to kill viruses. Follow the manufacturer’s instructions for all cleaning and disinfection products (e.g., concentration, application method and contact time, etc.).

**Soft Surfaces**
For soft (porous) surfaces such as carpeted floor, rugs, and drapes, remove visible contamination if present and clean with appropriate cleaners indicated for use on these surfaces. After cleaning:

- If the items can be laundered, launder items in accordance with the manufacturer’s instructions using the warmest appropriate water setting for the items and then dry items completely. Otherwise, use products with the EPA-approved emerging viral pathogens claims that are suitable for porous surfaces.
Linens, Clothing, and Other Items That Go in the Laundry

- Do not shake dirty laundry; this minimizes the possibility of dispersing virus through the air.
- Wash items as appropriate in accordance with the manufacturer’s instructions. If possible, launder items using the warmest appropriate water setting for the items and dry items completely. Dirty laundry that has been in contact with an ill person can be washed with other people’s items.
- Clean and disinfect hampers or other carts for transporting laundry according to guidance above for hard or soft surfaces.

Personal protective equipment (PPE) and hand hygiene considerations.

Cleaning staff should wear disposable gloves and gowns for all tasks in the cleaning process, including handling trash.

- Gloves and gowns should be compatible with the disinfectant products being used.
- Additional PPE might be required based on the cleaning/disinfectant products being used and whether there is a risk of splash.
- Gloves and gowns should be removed carefully to avoid contamination of the wearer and the surrounding area. Be sure to clean hands after removing gloves.
- Gloves should be removed after cleaning a room or area occupied by ill persons. Clean hands immediately after gloves are removed.
- Cleaning staff should immediately report breaches in PPE (e.g., tear in gloves) or any potential exposures to their supervisor.

Cleaning staff and others should clean hands often.

Clean hands often including immediately after removing gloves and after contact with an ill person, by washing hands with soap and warm water for 20 seconds. If soap and warm water are not available and hands are not visibly dirty, an alcohol-based hand sanitizer that contains at least 60% alcohol may be used. However, if hands are visibly dirty, always wash hands with soap and warm water.

Follow normal preventive actions while at work and home, including cleaning hands and avoiding touching eyes, nose, or mouth. Additional key times to clean hands include:

- After blowing one’s nose, coughing, or sneezing
- After using the restroom
- Before eating or preparing food
- After contact with animals or pets
- Before and after providing routine care for another person who needs assistance (e.g., a child)
Prepare your Small Business and Employees for the Effects of COVID-19

During an infectious disease outbreak, such as the current outbreak of COVID-19, small business owners must prepare for disruption in their business as well as prepare to protect their employees’ health and safety in the workplace.

These steps are recommended to protect employees and prepare your business for disruption:

**Coronavirus disease 2019 (COVID-19)** is a respiratory illness that can spread from person to person. It spreads between people who are in close contact with one another (within about 6 feet) and through respiratory droplets produced when an infected person coughs or sneezes. Symptoms ([https://www.cdc.gov/coronavirus/2019-ncov/about/symptoms.html](https://www.cdc.gov/coronavirus/2019-ncov/about/symptoms.html)) can include fever, cough, or difficulty breathing, which may appear 2-14 days after exposure.

**Identify a workplace coordinator** who will be responsible for COVID-19 issues and their impact at the workplace.

**Examine policies for leave, telework, and employee compensation.**

- Leave policies should be flexible and non-punitive, and allow sick employees to stay home and away from co-workers. Leave policies should also account for employees who need to stay home with their children if there are school or childcare closures, or to care for sick family members.
- When possible, use flexible worksites (e.g., telework) and flexible work hours (e.g., staggered shifts) to help establish policies and practices for social distancing (maintaining distance of approximately 6 feet or 2 meters) between employees and others, especially if social distancing is recommended by state and local health authorities.

**Review your leave policies with all employees** and provide information about available employee assistance services. Share information on steps they can take to protect themselves at work and at home, and any available.

**Identify essential employees and business functions, and other critical inputs** such as raw materials, suppliers, subcontractor services/products, and logistics required to maintain business operations. Explore ways you can continue business operations if there are disruptions.

**Prepare business continuity plans** for significant absenteeism, supply chain disruptions, or changes in the way you need to conduct business.

**Establish an emergency communications plan.** Identify key contacts (with back-ups), chain of communications (including suppliers and customers), and processes for tracking and communicating about business and employee status.

**Share your response plans with employees and clearly communicate expectations.** It is important to let employees know plans and expectations if COVID-19 occurs in communities where you have a workplace.
Top 10 Tips to Protect Employees’ Health

Healthy employees are crucial to your business. Here are 10 ways to help them stay healthy.

• Actively encourage sick employees to stay home. Develop policies that encourage sick employees to stay at home without fear of reprisals, and ensure employees are aware of these policies.

• Have conversations with employees about their concerns. Some employees may be at higher risk for severe illness, such as older adults and those with chronic medical conditions.

• Develop other flexible policies for scheduling and telework (if feasible) and create leave policies to allow employees to stay home to care for sick family members or care for children if schools and childcare close.

• Talk with companies that provide your business with contract or temporary employees about their plans. Discuss the importance of sick employees staying home and encourage them to develop non-punitive “emergency sick leave” policies.

• Plan to implement practices to minimize face-to-face contact between employees if social distancing is recommended by your state or local health department. Actively encourage flexible work arrangements such as teleworking or staggered shifts.

• Consider the need for travel and explore alternatives. Check CDC’s Travelers’ Health for the latest guidance and recommendations. Consider using teleconferencing and video conferencing for meetings, when possible.

• If an employee becomes sick while at work, they should be separated from other employees, customers, and visitors and sent home immediately. Follow CDC guidelines for cleaning and disinfecting areas the sick employee visited.

For more tips and information see the CDC Interim Guidance for Businesses and Employers and the OSHA Guidance for Preparing Workplaces for COVID-19.
COVID-19 RE-ENGAGEMENT RESOURCES FOR BUSINESSES

PPE Resources
Pure Michigan Business Connect COVID-19 Procurement Platform
Michigan Chamber of Commerce PPE Resources
COVID-19 RE-ENGAGEMENT RESOURCES FOR BUSINESSES

Handouts for Employees

CDC: Important Information About Your Cloth Face Coverings
CDC: How to Safely Wear and Take Off a Cloth Face Covering
CDC: Use of Cloth Face Coverings to Help Slow the Spread of COVID-19
MDHHS: Face Coverings: How to wear a face covering
MDHHS: I think I have been exposed to COVID-19, what should I do?
MDHHS: When is it safe to leave home
MDHHS: COVID-19 testing process

Information for Community Supports
Important Information About Your Cloth Face Coverings

As COVID-19 continues to spread within the United States, CDC has recommended additional measures to prevent the spread of SARS-CoV-2, the virus that causes COVID-19. In the context of community transmission, CDC recommends that you:

- Stay at home as much as possible
- Practice social distancing (remaining at least 6 feet away from others)
- Clean your hands often

In addition, CDC also recommends that everyone wear cloth face coverings when leaving their homes, regardless of whether they have fever or symptoms of COVID-19. This is because of evidence that people with COVID-19 can spread the disease, even when they don’t have any symptoms. 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.

How cloth face coverings work

Cloth face coverings prevent the person wearing the mask from spreading respiratory droplets when talking, sneezing, or coughing. If everyone wears a cloth face covering when out in public, such as going to the grocery store, the risk of exposure to SARS-CoV-2 can be reduced for the community. Since people can spread the virus before symptoms start, or even if people never have symptoms, wearing a cloth face covering can protect others around you. Face coverings worn by others protect you from getting the virus from people carrying the virus.

How cloth face coverings are different from other types of masks

Cloth face coverings are NOT the same as the medical facemasks, surgical masks, or respirators (such as N95 respirators) worn by healthcare personnel, first responders, and workers in other industries. These masks and respirators are personal protective equipment (PPE). Medical PPE should be used by healthcare personnel and first responders for their protection. Healthcare personnel and first responders should not wear cloth face coverings instead of PPE when respirators or facemasks are indicated.

General considerations for the use of cloth face coverings

When using a cloth face covering, make sure:

- The mouth and nose are fully covered
- The covering fits snugly against the sides of the face so there are no gaps
- You do not have any difficulty breathing while wearing the cloth face covering
- The cloth face covering can be tied or otherwise secured to prevent slipping

Avoid touching your face as much as possible. Keep the covering clean. Clean hands with soap and water or alcohol-based hand sanitizer immediately, before putting on, after touching or adjusting, and after removing the cloth face covering. Don’t share it with anyone else unless it’s washed and dried first. You should be the only person handling your covering. Laundry instructions will depend on the cloth used to make the face covering. In general, cloth face coverings should be washed regularly (e.g., daily and whenever soiled) using water and a mild detergent, dried completely in a hot dryer, and stored in a clean container or bag.

For more information, go to: https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover-faq.html
How to Safely Wear and Take Off a Cloth Face Covering

WEAR YOUR FACE COVERING CORRECTLY

- Wash your hands before putting on your face covering
- Put it over your nose and mouth and secure it under your chin
- Try to fit it snugly against the sides of your face
- Make sure you can breathe easily
- Do not place a mask on a child younger than 2

USE THE FACE COVERING TO PROTECT OTHERS

- Wear a face covering to protect others in case you’re infected but don’t have symptoms
- Keep the covering on your face the entire time you’re in public
- Don’t put the covering around your neck or up on your forehead
- Don’t touch the face covering, and, if you do, clean your hands

FOLLOW EVERYDAY HEALTH HABITS

- Stay at least 6 feet away from others
- Avoid contact with people who are sick
- Wash your hands often, with soap and water, for at least 20 seconds each time
- Use hand sanitizer if soap and water are not available

TAKE OFF YOUR CLOTH FACE COVERING CAREFULLY, WHEN YOU’RE HOME

- Untie the strings behind your head or stretch the ear loops
- Handle only by the ear loops or ties
- Fold outside corners together
- Place covering in the washing machine
- Wash your hands with soap and water

Cloth face coverings are not surgical masks or N-95 respirators, both of which should be saved for health care workers and other medical first responders.

For instructions on making a cloth face covering, see: cdc.gov/coronavirus
How to Wear Cloth Face Coverings

Cloth face coverings should—
- fit snugly but comfortably against the side of the face
- be secured with ties or ear loops
- include multiple layers of fabric
- allow for breathing without restriction
- be able to be laundered and machine dried without damage or change to shape

CDC on Homemade Cloth Face Coverings

CDC recommends wearing cloth face coverings in public settings where other social distancing measures are difficult to maintain (e.g., grocery stores and pharmacies), especially in areas of significant community-based transmission.

CDC also advises the use of simple cloth face coverings to slow the spread of the virus and help people who may have the virus and do not know it from transmitting it to others. Cloth face coverings fashioned from household items or made at home from common materials at low cost can be used as an additional, voluntary public health measure.

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 cloth face covering without assistance.

The cloth face coverings recommended are not surgical masks or N-95 respirators. Those are critical supplies that must continue to be reserved for healthcare workers and other medical first responders, as recommended by current CDC guidance.

Should cloth face coverings be washed or otherwise cleaned regularly? How regularly?
Yes. They should be routinely washed depending on the frequency of use.

How does one safely sterilize/clean a cloth face covering?
A washing machine should suffice in properly washing a cloth face covering.

How does one safely remove a used cloth face covering?
Individuals should be careful not to touch their eyes, nose, and mouth when removing their cloth face covering and wash hands immediately after removing.
Sewn Cloth Face Covering

Materials

- Two 10”x6” rectangles of cotton fabric
- Two 6” pieces of elastic (or rubber bands, string, cloth strips, or hair ties)
- Needle and thread (or bobby pin)
- Scissors
- Sewing machine

Tutorial

1. Cut out two 10-by-6-inch rectangles of cotton fabric. Use tightly woven cotton, such as quilting fabric or cotton sheets. T-shirt fabric will work in a pinch. Stack the two rectangles; you will sew the cloth face covering as if it was a single piece of fabric.

2. Fold over the long sides ¼ inch and hem. Then fold the double layer of fabric over ½ inch along the short sides and stitch down.

3. Run a 6-inch length of 1/8-inch wide elastic through the wider hem on each side of the cloth face covering. These will be the ear loops. Use a large needle or a bobby pin to thread it through. Tie the ends tight. Don’t have elastic? Use hair ties or elastic head bands. If you only have string, you can make the ties longer and tie the cloth face covering behind your head.

4. Gently pull on the elastic so that the knots are tucked inside the hem. Gather the sides of the cloth face covering on the elastic and adjust so the cloth face covering fits your face. Then securely stitch the elastic in place to keep it from slipping.
Quick Cut T-shirt Cloth Face Covering (no sew method)

Materials

• T-shirt
• Scissors

Tutorial

1. Cut T-shirt 7–8 inches below neckline.

2. Cut coffee filter 6–7 inches.

3. Cut tie strings.

4. Tie strings around neck, then over top of head.

5. Place rubber bands or hair ties about 6 inches apart.

6. Fold side to the middle and tuck.

7. Fold filter in center of folded bandana. Fold top down. Fold bottom up.

Bandana Cloth Face Covering (no sew method)

Materials

• Bandana (or square cotton cloth approximately 20”x20”)
• Coffee filter
• Rubber bands (or hair ties)
• Scissors (if you are cutting your own cloth)

Tutorial

1. Cut coffee filter.

2. Fold in center of folded bandana.

3. Fold top down. Fold bottom up.

4. Place rubber bands or hair ties about 6 inches apart.

5. Fold side to the middle and tuck.
The first respirator was certified in the United States one hundred years ago and requirements for respiratory protection in healthcare were made mandatory in the 1990s (CDC, 2019). A lot of information is available about using respirators and masks in healthcare and the workplace in safe and effective ways.

There is not as much information about cloth face coverings, and there is a wide variety in the styles and materials. Because of this, there aren’t standard recommendations available, but we can use what we know about medical masks and respirators to guide how to use cloth face coverings in the safest and most effective way.

Cloth face coverings do not prevent illness in those who wear them like medical masks do (MacIntyre, et al, 2015). Wearing a cloth face covering is hoped to protect those around you in case you are infected. A cloth face covering should be worn whenever people are in a community setting, especially when you may be near people, like in grocery stores and pharmacies. It is not a substitute for social distancing. Cloth face coverings should be able to be laundered and machine dried without damage or change to shape (CDC, 2020).

**How to wear a face covering appropriately (CDC, 2020):**

- Clean your hands with soap and water or alcohol-based hand sanitizer before putting on your face covering.
- Put the face covering over your nose and mouth and secure it under your chin. Cloth face coverings should fit snugly but comfortably against the side of your face, secured with ties or ear loops.
- Make sure you can breathe easily without restriction when wearing the face covering.
- Avoid touching the face covering while wearing, and if you do, clean your hands.
- When removing a face covering, handle only by the ties or ear loops, and fold outside corners together to avoid touching the front of the covering.
- Clean your hands with soap and water or alcohol-based hand sanitizer after removing and handling your face covering.

Cloth face coverings should not be placed on children younger than 2 years of age, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the cover without assistance.
While safe for most people, it is possible that wearing a face covering could interfere with your (Johnson, 2016):

1. Breathing
2. Vision
3. Ability to communicate clearly
4. Self-care
5. Ability to regulate your temperature
6. Overall feelings of well-being

Below are some suggestions that may be helpful if you are having any of these problems:

1. Breathing

The cloth face covering may cause you to rebreathe some of the carbon dioxide you have breathed out, which may cause your breathing rate to increase. If the face covering is too tight or too thick, and causes too much resistance, it may cause breathing to slow down. These changes in breathing may cause you to get lightheaded or not feel well. You may not be able to do as much or work as hard when you are wearing a face covering (Johnson, 2016).

People with allergies, runny nose, asthma, or COPD may not be able to tolerate breathing in a face covering well or for as long. Face coverings made with too many layers of cloth, tightly woven cloth, or cloth that has gotten wet from saliva or mucus are often hard to breathe through.

Suggestions:

- Take breaks from your face covering
  - If you are getting episodes of lightheadedness or shortness of breath, make sure to take breaks throughout the day. Go to a private bathroom stall, go outside, go to your car, or somewhere else where you are away from others and remove your face covering for a little while. Remove the face covering by ear straps/ties, wash your hands with soap and water or use an alcohol-based hand sanitizer after removing.
- Make sure the face covering is not too tight and the material is not too thick.
- Change face coverings if it gets wet or damp.
- If you have a health condition that makes wearing a face covering difficult, you do not have to wear one. Try to limit trips and if you do have to go out, social distance to the best of your ability.
- You do not have to wear a face covering if you are exercising or working outside as long as you can maintain social distancing.
2. Vision

Using a poorly placed face covering can cause vision to become obstructed. Glasses or goggles can become fogged up, especially in cold weather or when going from hot weather to an air-conditioned building or vehicle.

Suggestions:

- It is not recommended that you wear a face covering while driving due to these potential hazards.
- To stop glasses from fogging, wash glasses in soapy water and let them air dry. You can also rub a dab of shaving cream into the inside of the lenses. When they are dry, use a clean dry cloth to buff off any extra. The soap or shaving cream residue will prevent fog from forming.

3. Ability to communicate clearly

A covering over the mouth can make it difficult for others to understand what we are saying because words are muffled and visual cues are blocked. This is worse with short or one-word statements because there isn’t context to help others figure out what we are trying to say.

Face coverings also make it harder for the hard of hearing and hearing impaired to understand what you are saying.

Suggestions:

- Be sure to face the person you are talking to and speak in clear, complete sentences.
- Consider coming up with hand singles to use for common questions and answers.
- If you are talking to someone with hearing impairments make sure there is as little background noise as possible, talk slowly and clearly, and consider using a face covering with a clear front so your mouth movements can help with communication.
  - Instructions for making a clear face covering can be found at:
    - How to Make An Accessible, Deaf-Friendly Face Mask
    - Communicator Face Mask
      https://www.9and10news.com/content/uploads/2020/04/Communicator-Face-Mask.pdf
4. Self-care

Wearing a face covering makes it difficult to eat, drink, scratch your nose, blow your nose, and so on.

Suggestions:
- It is important to take breaks to safely take care of these needs during the day.

5. Ability to regulate your temperature

Using a face covering in hot temperatures can cause you to feel uncomfortable and may cause you to overheat faster. Sweat and wetness may soak into the cloth face covering, and this makes it harder to breathe through the face covering as well, making it less effective.

Suggestions:
- Take extra breaks during hot weather, focusing on hydration and cooling down.
- Pay close attention for signs of heat illness.
- Change face coverings if yours gets wet or damp.

6. Overall feelings of well-being

It is not uncommon to feel some irritation or discomfort from your face covering. For some, it is much worse, and wearing a face covering can cause anxiety or feelings of claustrophobia.

Suggestions:
- If you are worried or nervous about wearing a face covering, start by wearing it loosely for very short periods of time around the house.
  - If this isn’t possible, wear it around your neck or chin until that is tolerable before putting it over your mouth.
- Gradually increase the time until you feel comfortable wearing it outside your home. Make sure you get a face covering you like that feels comfortable.

Other Considerations:

Some experts worry that wearing a face covering or mask may cause people to touch their faces more often as they fit and adjust it. While this hasn’t been proven, be aware of this possibility and avoid touching your face and face covering.
Exhaled air may be forced up into your eyes while you are wearing a face covering which might irritate your eyes. If you notice this happening, use over-the-counter lubricating eye drops but wash hands prior to use.

Dirty face coverings could be a source of germs and infection. Your face covering should be washed and dried routinely depending on the frequency of use. Use a bag or bin to store cloth face coverings until they can be laundered. Use the appropriate washer and dryer settings and detergents for the materials your face covering is made of. The cloth face covering should be washed right away if you were around someone with COVID-19 or if the covering is visibly dirty. If you must re-wear your cloth face covering before washing, wash your hands immediately after putting it back on and avoid touching your face. Over time, washing and drying your cloth face covering will decrease its ability to filter out particles from your breath (Neupane, et al, 2019). Consider replacing your cloth face covering after four or five washes.

In addition, discard cloth face coverings that:

- No longer cover the nose and mouth
- Have stretched out or damaged ties or straps
- Cannot stay on the face
- Have holes or tears in the fabric

References

I think I have been exposed to 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

**I think I have been exposed to COVID-19, what should I do?**

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.*

**Michigan.gov/Coronavirus**
### When is it safe to leave home if you have symptoms of COVID-19 or live with someone who does?

#### For Me (Home Isolation)
- I have been diagnosed with COVID-19.
- You have had no fever for **at least 72 hours (3 full days), without the use of medicine that reduces fevers**, — AND — other symptoms, like cough or shortness of breath, **have improved**, — AND — **at least 10 days** have passed since your symptoms first appeared.
- If you answered yes to all conditions, you may end home isolation.

#### Close Contacts (Quarantine)
- I live with someone diagnosed with COVID-19.
- Stay home for **14 days** after your last contact with the sick person.
- Monitor yourself for symptoms twice a day.
  - If one or more symptoms **do not appear within the 14-day quarantine period**, you may end home quarantine.

### Should I wear a face covering?
- If you must leave home, every person regardless of health, should cover their nose and mouth with a homemade mask, scarf, bandana or handkerchief, especially when a 6-feet distance is difficult to maintain.

### How do I monitor myself?
- Check your temperature twice a day and look for common symptoms like:
  - Fever
  - Cough
  - Shortness of breath

For a full list of symptoms, visit [bit.ly/2xQkl60](http://bit.ly/2xQkl60). If you are concerned about your health or have developed symptoms, contact your health care provider or urgent care.

*If you had a test to determine if you are still contagious, you can leave home after you had a negative COVID-19 test OR you are cleared by your health care provider or the Health Department. All processes on this chart are for the general public. They do not specifically apply to workers at a health-care facility, first responders (e.g., police officers, fire fighters, paramedics), and prison employees.*
COVID-19 TESTING PROCESS*

Local Health Department monitors travelers and individuals who are close contacts with COVID-19 cases, as appropriate.

Cough, fever, shortness of breath? **YES**

Refer to health care provider to discuss symptoms.

Individual contacts or presents at health care provider.

If no symptoms develop during monitoring period, **DISCONTINUE MONITORING**

OPTION A
CALL PROVIDER HOTLINE

OPTION B
CONTACT LOCAL HEALTH DEPARTMENT

Screening at health care provider.

Doctor determines patient meets prioritization criteria. **YES**

Health care provider obtains MDSS Investigation ID **NO**

Order test from commercial or hospital laboratory

Doctor determines patient does not need testing.

Submitter (health care provider) receives results

Send sample to Bureau of Laboratories

ENTER POSITIVE RESULTS INTO MDSS
Results are available for the county in which the patient resides and to the submitting provider.

POSITIVE RESULTS provided to local health department

Submitter provides result to patient

*Testing process for general public, does not specifically apply to health care workers.

SEOC TA 2594043 03/25/2020
Community Connections is a FREE program offering connections to community resources for adults, children and families. Community Health Workers in your local health department will help you access community resources. Please call:

**1-888-217-3904 (option #3)**
District Health Department #10 HUB serving Crawford, Kalkaska, Manistee, Missaukee, Wexford, Lake, Mason, Mecosta, Newaygo, Oceana

**1-800-432-4121**
Northwest Michigan HUB serving Antrim, Charlevoix, Emmet, Otsego

**1-800-221-0294**
Northeast Michigan HUB serving Cheboygan, Presque Isle, Montmorency, Alpena

If you need assistance finding food, paying housing bills, or other essential services, go to 211.org or dial 211 to speak with a community resource specialist in your area who will help with:

- food and nutrition programs
- shelter, housing and utilities assistance
- employment and education
- health care, vaccination and health epidemic information
- support groups for individuals with mental illnesses or special needs
- a safe, confidential path out of physical and/or emotional domestic abuse
- emergency information/disaster relief services for veterans
- addiction prevention and rehabilitation programs

The Michigan Department of Health and Human Services has launched several statewide platforms to answer questions about Coronavirus Disease (COVID-19) and to keep residents up to date as information continues to change rapidly during this pandemic. For the latest news and information, or to subscribe to the statewide e-newsletter go to Michigan.gov/Coronavirus

**888-535-6136 COVID-19 hotline**
8:00am to 5:00pm every day

**COVID-19@michigan.gov** Email
8:00am to 5:00pm every day

“Follow” and “Like” your Local Health Department for current information and additional resources available in your area.
COVID-19 RE-ENGAGEMENT RESOURCES FOR BUSINESSES

Signs for the Workplace
Social Distancing for Indoor Facilities
Face Mask or Face Covering for Indoor Facilities
CDC: Stop – Feeling Sick?
CDC: Clean Hands Keep You Healthy
Social distancing  
What You Need to Know

Social distancing means keeping a physical separation from other people. This includes avoiding groups of people and keeping space between yourself and others. It can include larger measures like closing public spaces and canceling group events. It helps protect people from illness, especially those who are more vulnerable. Social distancing limits the spread of disease by lowering the chance of contact with someone with COVID-19. Please create specific business plans based on these guidelines.

**PRACTICE SOCIAL DISTANCING**

**Individuals Can**

- Keep six (6) feet between yourself and others.
- Avoid getting together in social groups and gatherings.
- Use Skype and FaceTime to visit family and friends.

**Businesses can**

- Have employees tele-work when possible.
- Modify operations to provide online options.
- Restrict areas where people may gather.
- Limit in-person meetings and use electronic communication methods.
- Assess store layout and modify high traffic areas (i.e. checkout lines, pharmacy counter etc.) to create six (6) feet of space between people:
  - Special store hours for seniors, healthcare workers and first responders to shop.
  - Signage asking people to remain at least 6 feet apart from others.
  - Mark floors of checkout lines with tape for 6 foot spacing between customers.
  - Promote curbside pick-up, delivery and online services.

**Everyone should**

- Stay home when sick.
- Avoid hugging, high-fives, shaking hands, and sharing cups or eating utensils.
- Use good personal hygiene practices whenever you are out in public:
  - Washing your hands often with soap and warm water for 20 seconds, and help young children do the same. If soap and water are not available, use an alcohol-based hand sanitizer with at least 60% alcohol.
  - Covering your nose and mouth with a tissue when you cough or sneeze, or cough/sneeze in your upper sleeve. Immediately throw away used tissues in the trash, then wash hands.
  - Avoiding touching your eyes, nose, and mouth with unwashed hands.
  - Cleaning and disinfecting frequently touched surfaces, such as toys and doorknobs.

EMPLOYEES MUST KEEP

CUSTOMERS & EMPLOYEES MUST KEEP

6- FEET SOCIAL DISTANCE

WHILE INSIDE THIS FACILITY
YOU MUST WEAR A FACE MASK TO ENTER THE BUILDING

A face mask includes a homemade cloth mask, scarf, or bandana. Your mask must cover your nose and mouth.

Per the Latest Executive Order(s)
If you feel unwell or have the following symptoms please leave the building and contact your health care provider. Then follow-up with your supervisor.

DO NOT ENTER if you have:

FEVER

COUGH

SHORTNESS OF BREATH
CLEAN HANDS KEEP YOU HEALTHY.

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

LIFE IS BETTER WITH CLEAN HANDS

www.cdc.gov/handwashing

This material was developed by CDC. The Life is Better with Clean Hands Campaign is made possible by a partnership between the CDC Foundation, GOJO, and Staples. HHS/CDC does not endorse commercial products, services, or companies.