



Section: <b>SWMBH Administration</b>	Procedure Name: <b>Infection Control - COVID-19 Return to Work</b>	Procedure #: <b>P01.09.01</b>
Overarching Policy: <b>01.09 Infection Control</b>		
Owner: <b>Chief Administrative Officer</b>	Reviewed By: <b>Anne Wickham</b>	Total Pages: <b>5</b>
Required By: <input type="checkbox"/> BBA <input type="checkbox"/> MDHHS <input type="checkbox"/> NCQA <input type="checkbox"/> Other (please specify): _____	Final Approval By: <i>Anne Wickham</i> Anne Wickham (Jan 24, 2022 10:33 EST)	Date Approved: <b>Jan 24, 2022</b>
Application: <input checked="" type="checkbox"/> SWMBH Staff/Ops <input type="checkbox"/> Participant CMHSPs <input type="checkbox"/> SUD Providers <input type="checkbox"/> MH/IDD Providers <input type="checkbox"/> Other (please specify): _____	Line of Business: <input type="checkbox"/> Medicaid <input type="checkbox"/> Other (please specify): <input type="checkbox"/> Healthy Michigan <input type="checkbox"/> SUD Block Grant <input type="checkbox"/> SUD Medicaid <input type="checkbox"/> MI Health Link	Effective Date: <b>6/1/2020</b>

**Policy:** Southwest Michigan Behavioral Health (SWMBH) will have guidelines, processes and procedures in place to mitigate the spread of infectious disease.

**Purpose:** To minimize, to the extent possible, risks to SWMBH staff, board members, consumers, volunteers, and visitors which may arise due to COVID-19 and adhere to Michigan Occupational Health & Safety Administration Emergency Rules regarding COVID-19.

**Scope:** SWMBH staff and visitors

**Responsibilities:** All staff

#### Definitions:

**Close contact** - someone is within 6 feet for a total of 15 minutes or more within 2 days prior to illness onset, regardless of whether the contact was wearing a mask.

**Fully Vaccinated** – 2 weeks post vaccination of either 2<sup>nd</sup> dose of a 2-dose regimen or 2 weeks post vaccination of a 1 dose regimen of COVID-19 vaccine.

#### Procedure:

A. Health Screenings



- All employees will complete a daily health screening prior to arrival to SWMBH offices.
1. Each morning before coming to the office employees will log in to the ADP Mobile Solutions App and complete the Return-to-Work Screening.
  2. Employees who are working remotely for the day are not required to complete the daily health screen.
  3. The employee must present their green Yes clearance on their phone screen when entering the office.
  4. Employees who receive less than a green "Yes" result on the ADP App will not come to the office before contacting their Senior Leader via phone or email.
    - a. Senior Leaders who receive notification from an employee that they have received other than a green "Yes" checkmark will notify HR and encourage the employee to contact their primary care physician for follow up as needed.
    - b. Only those employees cleared by Chief Administrative Officer or HR Generalist with "No" screening result will be allowed into the office.
    - c. Employees will not be allowed to come to the office until they are symptom free without medication for 24 hours and can pass the health screening questionnaire or be cleared by CAO or HR Generalist.
    - d. The ability to work from home or to take PTO will be at the discretion of the Senior Leader after discussion with the employee.
    - e. For purposes of defining close contact within the mobile app SWMBH will follow the CDC definition.
  5. Upon arrival at the office each morning employees will report to the front desk for verification of health screening questionnaire from the identified ADP App before reporting to their office. Front desk staff will ensure each employee on site has been screened by completing the Daily Health Screening spreadsheet as Pass/Fail only. Individual health screenings will not be maintained. The Daily Health Screening spreadsheets will be maintained for a period of not less than 6 months.
  6. Employees who are too sick to work are not required to complete the Health Screening in the morning. Those employees should follow the protocol of their Senior Leader for "calling in sick". Individuals who call in sick should not work from home while ill and should take PTO. In the event an employee should be diagnosed with COVID-19 they shall report that to their Senior Leader and/or Human Resources.
  7. Human Resources will track employee absences and reports of illness and will maintain this information in a separate area from any personnel records. These records will be used only for the purpose of tracking any infectious disease that may be reportable to the Kalamazoo County Health department or used to determine any additional notification necessary to additional employees or enhanced cleaning protocols that may be necessary.
  8. Any employee who tests positive for COVID-19 will remain at home until they are no longer considered infectious according to the latest guidance from the CDC. Employees shall immediately report any positive COVID-19 test to their Senior Leader and/or Human Resources. If a Senior Leader is notified of an employee testing positive for COVID-19 they



will immediately notify Human Resources via the COVID-19 Self Report Form or via email if necessary.

#### B. Environmental Safety

SWMBH will contract with a professional cleaning service to perform cleaning protocols on a daily basis to include all common areas and high touch surfaces. Facility's HVAC system has been adjusted to increase airflow from the outside into the building on a continuous basis.

1. All employees will have access to disinfecting sprays and wipes in order to maintain the cleanliness of their own office space and other common areas throughout the office on a regular and ongoing basis. SWMBH will contract with a professional cleaning service to have all office areas professionally disinfected weekly or as necessary.
2. SWMBH will allow only disposable plastic and paper products to be maintained within employee break areas. Employees wishing to provide their own eating utensils, coffee cups etc. will not be allowed to store them in common areas where they might be used by others.
3. SWMBH-provided sanitizing sprays can be utilized on commonly used surfaces such as microwave or refrigerator door handles.

#### C. Hand Hygiene and Social Distancing

Infectious disease risks are mitigated when employees employ best practices in hand hygiene and social distancing measures.

1. SWMBH employees are encouraged to wash hands for 20 seconds frequently throughout the day. SWMBH will encourage this practice through training and strategically placed posters with reminders to do so. Hand sanitizer stations are placed throughout SWMBH, and employees are encouraged to use them frequently and as a best practice anytime they enter or exit the area.
2. In shared workspaces employees should utilize a clean in, clean out method to the workspace they will be utilizing for the day. Alcohol wipes are available to the employees for this purpose. Only alcohol wipes should be used on any electronic devices.
3. Employees should avoid touching their face with unwashed hands.
4. Employees and visitors will maintain 6 ft of social distancing whenever possible. Employees will not congregate in common areas or employee break rooms.
5. Conference rooms should not be overly congested. Employees should have the ability to spread out and if necessary, consider remote technologies if there will be too many attendees to comfortably accommodate.
6. Employees should use electronic or telephonic means to have brief conversations with other staff whenever possible.
7. 2 or more employees will not gather in or near cubicle areas for meetings or conversations. If face to face conversation is necessary, it should be held in an appropriate conference room.

#### D. Personal Protective Equipment

SWMBH will require varying levels of Personal Protective Equipment (PPE) be utilized by staff depending upon the current level of risk and MIOSHA Emergency Rules. Staff who work solely



within the office environment are deemed at low risk of contracting infection per MIOSHA standards.

1. Staff who leave the office to meet with Providers or Members are considered at medium risk and will adhere to the procedures as set forth within their department related to such as these staff have a medium risk of disease contraction. Those departmental procedures are attachments to this document. (P01.09A and P01.09B)
2. Staff or visitors will be required to adhere to current office mask protocols in the office environment.
3. SWMBH may at any time require staff to provide proof of full vaccination against COVID-19.
4. Staff will be allowed to wear their own masks or those provided by SWMBH and must meet current CDC standards covering the nose and mouth.
5. SWMBH will have cloth or disposable medical masks available for any staff or visitor upon request.
6. SWMBH staff who visit the offices of any external stakeholder will comply with any and all requirements related to masks or other PPE as determined by the stakeholder.

**Effectiveness Criteria:** None

**References:** CDC Interim Guidelines for Businesses  
OSHA Guidelines on Preparing Workplaces for COVID-19  
MIOSHA Emergency Rules for Coronavirus Disease 2019  
SWMBH COVID-19 Response Plan

**Attachments:**

- A. 01.09A Infection Precaution Plan for Community Visits
- B. 01.09B Infection Precautions for Provider Visits



## Revision History

Revision #	Revision Date	Revision Location	Revision Summary	Revisor
Initial	6/1/2020	Throughout	New procedure	A. Wickham
2	4/13/2021	Procedure C & D	Revised to reflect ADP Screening and MIOHSA emergency orders Added MIOSHA Emergency Orders Reference.	A. Wickham
3	4/16/2021	Add Definition of Close Contact		A. Wickham
4	6/10/2021	Throughout	Significant Revision to reflect change to MIOSHA Emergency Rules	A. Wickham
5	1/13/22	Added A.4.b., Amended D.2., A4.c., A.8	Clarifies "No" response may be cleared by CAO or HR per current CDC guidelines. Visitors must adhere to current mask protocols Must be symptom free 24 hours without medication to return to office. Allows for email notification to CAO or HR in lieu of Covid-19 Self Report Form	A. Wickham






# P01.09.01 Infection Control - COVID-19 Return to Work

Final Audit Report

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# **SWMBH 1.09A**

Section: <b>SWMBH Administration</b>	Attachment Name: <b>Infection Precaution Plan for Community Visits</b>	Procedure #: <b>1.09A</b>
Overarching Policy: <b>P01.09.01 Infection Control Procedure</b>		
Owner: <b>Integrated Healthcare Manager</b>	Reviewed By: <b>Sarah Green</b>	Total Pages: <b>3</b>
Required By: <input type="checkbox"/> BBA <input type="checkbox"/> MDHHS <input type="checkbox"/> NCQA <input type="checkbox"/> Other (please specify): 	Final Approval By: <i>Sarah Green</i> Sarah Green (Sep 30, 2021 16:11 EDT)	Date Approved: <b>Sep 30, 2021</b>
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**Policy:** Southwest Michigan Behavioral Health (SWMBH) will have guidelines, processes and procedures in place to mitigate the spread of infectious disease.

**Purpose:** Present proper protocols for safe in-person interactions between staff and members.

**Scope:** Staff who have in-person contact with members.

**Responsibilities:** All staff

## **Definitions:**

- A. **Facemask** – PPE and are often referred to as surgical masks or procedure masks. Use facemasks according to product labeling and local, state, and federal requirements. FDA-cleared surgical masks are designed to protect against splashes and sprays and are prioritized for use when such exposures are anticipated, including surgical procedures. Facemasks that are not regulated by FDA, such as some procedure masks, which are typically used for isolation purposes, may not provide protection against splashes and sprays. (CDC)
- B. **Fully Vaccinated** – 2 weeks post vaccination of either 2nd dose of a 2-dose regimen or 2 weeks post vaccination of a 1 dose regimen of COVID19 vaccine.
- C. **Bodily Fluids** – are liquids within the human body such as blood, mucous or sputum.

## **Procedure:**

In-person contact between SWMBH staff and members will exist as needed to meet member's needs and goals.



### SWMBH 1.09A

#### A. SWMBH staff will:

1. Complete the ADP health screening according to SWMBH policy P01.09.01 and provide the result to the staff's Senior Leader or designee prior to a community visit.
  2. Utilize appropriate cleaning supplies on all equipment prior to and following each visit.
  3. Practice hand hygiene which includes utilizing hand sanitizer upon initiation and departure from a community visit.
  4. Wear face masks during community visits, regardless of vaccination status. The members and others in the home must wear a mask when they are in the same room and/or within 6 feet of the staff member. SWMBH may provide a disposable medical mask to anyone in the home who needs one during the visit. The staff will dispose of masks properly.
  5. Utilize disposable gloves when touching member's bodily fluids or as needed throughout a community visit. The staff will dispose of gloves properly and use hand sanitizer or wash hands with soap and water after removing gloves.
  6. Perform the following screening:
    - a. Have you been vaccinated for COVID-19? (If the response is "Yes", continue to 1.a, if the response is "No", continue to question 2.)
      - i. Did you receive a single dose vaccination or a two-dose series?
      - ii. If a two-dose series, did you receive both shots? (If no, the person is not considered fully vaccinated)
      - iii. What was the date of your last shot? (If the date was more than two weeks ago, the individual is considered to be complete for receiving the COVID-19 vaccine if they had the single dose vaccine or if they had both doses in the two-dose series vaccine.)
    - b. In the past 24 hours, have you experienced?
      - i. Fever or chills
      - ii. Cough (new onset)
      - iii. Shortness of breath or difficulty breathing (new onset)
      - iv. Fatigue of unknown onset or that is persistent and unusual
      - v. Muscle or body aches of unknown onset or that is persistent and unusual
      - vi. Headache that is persistent or unusual
      - vii. New loss of taste or smell
      - viii. Sore throat
      - ix. Congestion or runny nose of unknown onset (not allergies)
      - x. Nausea or vomiting
      - xi. Diarrhea
    - c. Have you traveled by plane internationally in the past 14 days?
    - d. In the past 14 days, have you:
      - i. Had close contact with an individual diagnosed with COVID-19?
      - ii. Had contact with any Persons Under Investigation (PUIs) for COVID-19?
- If the screening is to be conducted upon arrival at the in-person visit, maintain a 6-foot physical distance when screening.
- If member answers *yes* to any of the screening questions, numbers 2-4, SWMBH staff should not continue the visit. Reschedule for another date when the screen can be passed and/or 72 hours after the member is symptom free without medications. Refer the member to primary care provider if needed.





### **SWMBH 1.09A**

7. Obtain member's temperature at the start of the community visit. If the member's temperature is above 100 degrees, the SWMBH staff should not continue the visit. Reschedule for another date when the screen can be passed and/or 72 hours after the member is symptom free without medications. Refer the member to primary care provider if needed.
8. Any member who "passes" the screening and is not feverish should receive an in-person visit as planned. Each department will have a tracking sheet for tracking member's who received an in-person visit. This will be maintained according to department protocols for contact tracing purposes.
9. If the member refuses the screening or temperature check, the visit should not be completed in person.

#### **B. Community Visits in an office or congregate setting**

1. The staff member will provide ADP screening result to Senior Leader or designee prior to the visit.
2. The staff member will follow office or congregate setting Covid 19 protocols.
3. Document the member's visit on the departmental in-person tracking sheet for contact tracing purposes.

#### **C. Equipment**

1. SWMBH will provide:
  - a. Disinfecting and/or technology disinfecting wipes
  - b. Hand sanitizer
  - c. Masks
  - d. Thermometer
2. Staff should take only items into the community space that are required (such as laptop, cleaning supplies, etc.). Other equipment or belongings that are not needed should not be taken to the visit.

**Effectiveness Criteria:** None

#### **References:**

- A. Resuming Standard Operations for Case Management and Home and Community Based Services - MDHHS - MI Health Link ([michigan.gov](https://michigan.gov))
- B. MIOSHA Emergency Rules for Coronavirus Disease 2019

#### **Attachments:**

- A. In-Person Visit Member Tracking – Sample








# 01.09A Infection Precaution Plan for Community Visits v2 Aug 2021

Final Audit Report

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### SWMBH Attachment 1.09B

Section: <b>SWMBH Administration</b>	Attachment Name: <b>Infection Precaution Plan for Provider Visits</b>	Attachment #: <b>1.09B</b>
Overarching Policy: <b>01.09 Infection Control</b>		
Owner: <b>Chief Administrative Officer</b>	Reviewed By: <b>Anne Wickham</b>	Total Pages: <b>3</b>
Required By: <input type="checkbox"/> BBA <input type="checkbox"/> MDHHS <input type="checkbox"/> NCQA <input type="checkbox"/> Other (please specify): _____	Final Approval By: <i>Anne Wickham</i> Anne Wickham (Dec 9, 2020 11:21 EST)	Date Approved: Dec 9, 2020
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**Policy:** Southwest Michigan Behavioral Health (SWMBH) will have guidelines, processes and procedures in place to mitigate the spread of infectious disease.

**Purpose:** To present ways to implement proper protocols for safe in-person interactions during Coronavirus (COVID-19) response.

**Scope:** Staff interactions that require provider on-site visits.

**Responsibilities:** Staff will follow steps below when an in-person visit is considered essential.

#### Definitions:

- A. **Cloth face covering:** Textile (cloth) covers that are intended to keep the person wearing one from spreading respiratory secretions when talking, sneezing, or coughing. **They are not PPE and it is uncertain whether cloth face coverings protect the wearer.** Guidance on design, use, and maintenance of cloth face coverings is [available](#). (CDC)
- B. **Facemask:** Facemasks are PPE and are often referred to as surgical masks or procedure masks. Use facemasks according to product labeling and local, state, and federal requirements. FDA-cleared surgical masks are designed to protect against splashes and sprays and are prioritized for use when such exposures are anticipated, including surgical procedures. Facemasks that are not regulated by FDA, such as some procedure masks, which are typically used for isolation purposes, may not provide protection against splashes and sprays. (CDC)



## **SWMBH Attachment 1.09B**

### **Procedure:**

During Coronavirus response, any in-person contact with a provider site must be discussed and approved by the appropriate Senior Leader. The first option is always to conduct any business via a remote manner whenever feasible. **Only** in the event the business cannot be conducted remotely, the following guidelines must be followed prior to and while on-site at a provider entity.

SWMBH staff should discuss with provider any agency rules they have in place for COVID19 screening or social distancing and must adhere to those rules or guidelines when on site. Staff should ensure that provider site has sufficient space available such that SWMBH staff may maintain social distancing guidelines while at the provider site. If the provider has no such accommodation or guidelines available to the SWMBH staff the work must be done via a remote method.

Prior to visiting, SWMBH staff will conduct infection control screening as per SWMBH Procedure P 01.09. If screening indicates the staff member is likely to have COVID-19 based on symptoms the staff member will follow the procedure described in SWMBH procedure P01.09. In addition, they will

- Immediately notify coworkers and create a plan to meet the member's needs
- Reschedule with the provider

During the visit, the following should occur:

- The staff member should take in as little equipment as possible to complete the visit.
- Staff members should travel to the provider site in their own vehicle with no carpooling with other staff members attending the same visit.
- The staff member will wear the following personal protective equipment under the following circumstances
  - Cloth face covering or Facemask: either a cloth face covering or a facemask should be applied by the staff member prior to entering the provider site and must remain on the staff person for the entirety of their visit.. Always immediately wash hands with soap and water or hand sanitizer when facemask is removed.
  - Staff may, at their discretion, wear gloves during the visit. Gloves should be removed upon exiting the provider site and be properly disposed.
- Disinfectant should be used on both the staff member's hands throughout the visit after touching files and upon leaving the provider site. Focus disinfectant on areas of the hand that touched surfaces; special attention on fingers.
- Remain 6 feet apart whenever possible during the visit.

After the visit, the following should occur:

- Disinfect any equipment that went into the visit (i.e. computer, pen, phone, keys, etc.).
- Disinfect hands
- Dispose of any gloves or facemask in a proper trash receptacle.

### **Effectiveness Criteria:**

Provider site visits will not be correlated to outbreaks of COVID-19.

### **References:**

A. OSHA. *Guidance on Preparing Workplaces for COVID-19*. OSHA.gov  
1.09B Infection Precaution Plan  
For Provider Visits

Initial Revision

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### **SWMBH Attachment 1.09B**

- B. MIOSHA Emergency Rules Coronavirus 2019 dated October 14, 2020.
- C. CDC. April 14, 2020. *Screening and Triage at Intake*. <https://www.cdc.gov/coronavirus/2019-ncov/hcp/dialysis/screening.html>
- D. CDC. May 18, 2020. *Interim infection prevention and control recommendations for patients with suspected or confirmed coronavirus disease 2019 (COVID-19) in healthcare settings*. <https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html>

#### **Attachments:**

COVID screening site: <https://www.spectrumhealth.org/covid19/covid-virtual-screening>.



**SWMBH Attachment 1.09B**

**Revision History**

Revision #	Revision Date	Revision Location	Revision Summary	Revisor
Initial	11/9/2020	Throughout	New attachment	A. Wickham






# 01.09B Infection Precaution Plan for Provider Visits

Final Audit Report

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