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HURON DENTAL, PC

COVID-19 PREPAREDNESS AND RESPONSE PLAN

Prepared: 05/25/2020

COVID-19 PREPAREDNESS AND RESPONSE PLAN

Huron Dental, PC takes the health and safety of our employees seriously. We are all living through the spread of COVID-19 and the need for certain employees to continue in-person work. Others either are or will soon be welcomed back into work, either because they are critical infrastructure workers, because they are needed to conduct minimum basic operations for our business or because our business is once again allowed to open. We want you to know that we are committed to reducing the risk of exposure to COVID-19 and we are ready to provide a healthy and safe workplace for our employees, patients and guests.

Our plan is based on information and guidance from the Centers for Disease Control (CDC), the Occupational Health and Safety Administration (OSHA), American Dental Association (ADA) and Michigan Dental Association (MDA) at the time of its development. Because the COVID-19 situation is frequently changing, the need for modifications may occur based on further guidance provided by the

CDC, OSHA, and other public officials at the state or local levels. **Huron Dental, PC** is focused on three lines of defense:

1. Limiting the number of people together at the same time in the same place,
2. Sanitizing all areas and
3. Requiring appropriate personal protection equipment including masks, face shields, etc
4. Implementing the appropriate changes in the office procedures and steps, to keep patients and staff safety a priority.

Note: **Huron Dental, PC** may amend this Plan based on changing requirements and the need of our business.

The spread of COVID-19 in the workplace can come from several sources:

- Co-workers
- Patients
- Guests - visitors/vendors/family members

Our employees fall into one or more of the following categories as defined by OSHA:

- Lower exposure risk (the work performed does not require direct contact with people known or suspected to be infected with COVID-19 or frequent close contact with the public).
- Medium exposure risk (the work performed requires frequent and/or close contact with people who may be infected with COVID-19, but who are not known COVID-19 patients, or contact with the general public in areas where there is ongoing community transmission).

COVID-19 WORKPLACE COORDINATORS (TASK FORCE)

Huron Dental, PC has designated the following staff as its COVID-19 Workplace Coordinators: *Randa Jundi-Samman, D.M.D (810)434-6022, bsamman@aol.com, and Lindsey J. Adams, D.D.S (810)479-6930, dr.lindseyadams@yahoo.com)*

The Coordinators responsibilities include:

- staying up to date on federal, state and local guidance
- incorporating those recommendations into our workplace
- training our workforce on control practices, proper use of personal protective equipment, the steps employees must take to notify our business of any COVID-19 symptoms or suspected cases of COVID-19.
- reviewing HR policies and practices to ensure they are consistent with this Plan and existing local, state and federal requirements

RESPONSIBILITIES OF Huron Dental, PC SUPERVISORS AND MANAGERS

All **Huron Dental, PC** managers/supervisors must be familiar with this Plan and be ready to answer questions from employees. Additionally, **Huron Dental** expects that all managers/supervisors will set a good example by following this Plan. This includes practicing good personal hygiene and jobsite safety

practices to prevent the spread of the virus. Managers and supervisors must encourage this same behavior from all employees.

Huron Dental will require and keep a record of all self-screening protocols for all employees or contractors entering the worksite, including, at a minimum, a questionnaire covering symptoms and suspected or confirmed cases of COVID -19.

Huron Dental will:

- Keep everyone on the worksite premises at least six feet from one another to the maximum extent possible, including through the use of ground markings, signs, and physical barriers, as appropriate to the worksite.
- Provide non-medical grade face coverings to their front staff employees, with supplies of N95 masks and surgical masks for all clinical staff.
- Require face coverings to be worn when employees cannot consistently maintain six feet of separation from other individuals in the workplace, and face shields when employees cannot consistently maintain three feet of separation from other individuals in the workplace.
- Increase facility cleaning and disinfection to limit exposure to COVID-19, especially on high-touch surfaces (e.g., door handles), paying special attention to parts, products, and shared equipment (e.g., tools, machinery, vehicles).
- Adopt protocols to clean and disinfect the facility in the event of a positive COVID-19 case in the workplace.
- Make cleaning supplies available to employees upon entry and at the worksite and provide time for employees to wash hands frequently or to use hand sanitizer.
- When an employee is identified with a confirmed case of COVID-19, within 24 hours, notify both:
 1. The local public health department, and
 2. Any co-workers, contractors, or suppliers who may have come into contact with the person with a confirmed case of COVID-19.
- Conduct a daily entry self-screening protocol for all employees or contractors entering the workplace, including, at a minimum, a questionnaire covering symptoms and suspected or confirmed exposure to people with possible COVID-19.
- Train employees on how to report unsafe work conditions

RESPONSIBILITIES OF EMPLOYEES

We are asking each of our employees to help with our prevention efforts while at work. **Huron Dental, PC**, understands that in order to minimize the impact of COVID-19 at our facility, everyone needs to play his or her part. We have instituted several best practices to minimize exposure to COVID-19 and prevent its spread in the workplace. This includes specific cleaning efforts and social distancing. While here at work, all employees must follow these best practices for them to be effective. Beyond these best practices, we require employees to report to their managers or supervisors immediately if they are experiencing signs or symptoms of COVID-19, as described below. If employees have specific questions about this Plan or COVID-19, they should ask Dr. Randa Jundi-Samman or Dr. Lindsey Adams.

OSHA and the CDC Prevention Guidelines

OSHA and the CDC have provided the following preventive guidance for all workers, regardless of exposure risk:

- Frequently wash your hands with soap and water for at least 20 seconds. When soap and running water are unavailable, use an alcohol-based hand rub with at least 60% alcohol.
- Avoid touching your eyes, nose, or mouth with unwashed hands.
- Follow appropriate respiratory etiquette, which includes covering for coughs and sneezes.
- Avoid close contact with anyone who is sick.
- Maintain appropriate social distance of six feet to the greatest extent possible.

Additionally, employees must familiarize themselves with the symptoms and exposure risks of COVID-19. The primary symptoms of COVID-19 include the following:

- Dry cough;
- Shortness of breath or difficulty breathing

Or at least two of these symptoms:

- Fever (either feeling feverish or a temperature of 100.4 degrees or higher);
- Chills
- Repeated shaking with chills
- Muscle pain
- Headache
- Sore throat
- New loss of taste or smell

Individuals with COVID-19 may also have early symptoms such as, diarrhea, nausea/vomiting, and runny nose.

If you develop a fever and symptoms of respiratory illness, such as an atypical cough or shortness of breath, do not report to work. You must also notify your supervisor immediately, and consult their healthcare provider. Similarly, if employees come into close contact with someone showing these symptoms, they must notify their supervisor immediately and consult their healthcare provider. We have the responsibility to work to identify and notify all employees who have close contact with individuals with COVID-19 symptoms. "Close contact" is not brief or incidental contact with a person with COVID-19 symptoms.

The CDC defines "close contact" as either:

- Being within roughly six feet of a COVID-19 infected person or a person with any symptom(s) for a "prolonged period of time;" (the CDC estimates range from 10 to 30 minutes, or,

- Having direct contact with infectious secretions of a COVID-19 infected person or a person with any COVID-19 symptom(s) (i.e., being coughed on).

HEALTH AND SAFETY PREVENTATIVE MEASURES FOR Huron Dental, PC

Huron Dental, PC has put a number of best practices and measures in place to ensure the health and safety of identified groups of individuals. With each group of individuals, our Plan is focused on three lines of defense – limiting the number of people together at a time, sanitizing all areas and requiring appropriate personal protection equipment.

Minimizing exposure from co-workers.

Huron Dental takes the following steps to minimize exposure from co-workers to COVID-19 by educating employees on protective behaviors that reduce the spread of COVID-19 and provide employees with the necessary tools for these protective behaviors, including: N95 masks for clinical staff, Fabric masks for front desk staff, Face shields for ALL staff, surgical hats, lab coats, and scrub pants for clinical staff.

General Education:

- Posting CDC information, including recommendations on risk factors
- Providing tissues and no-touch trash bins to minimize exposure to infectious secretions
- Informing employees of the importance of good hand hygiene. Regularly washing hands with soap and water for at least 20 seconds is one of the most effective ways for employees to minimize exposure to COVID-19. If soap and water are not readily available, employees should use alcohol-based hand sanitizer that is at least 60% alcohol. If hands are visibly dirty, soap and water should be chosen over hand sanitizer.
- Encourage good hand hygiene by ensuring that adequate supplies of soap and hand sanitizer are maintained and placing hand sanitizers in multiple locations.
- Discourage handshaking and encourage the use of other non-contact methods of greeting
- When possible, avoid the use of other employees' phones, desks, offices, other work tools and equipment, and other commonly touched surfaces.
- If the above cannot be avoided, clean and disinfect them before and after use
- Universal Precautions will be taken, as we treat all patients as infected.

Social Distancing

- Asking patients to wait in their cars for their scheduled procedures. We will call/text them when we are ready for them
- No one should accompany scheduled patients. If necessary, then those individuals will need to have a non-medical grade mask on.
- Lunch breaks will be staggered to keep employee social distancing.
- Encourage and require social distancing to the greatest extent possible while in the workplace
- Fabric masks for front staff, N95 masks and gloves for clinical staff. Face shields for all staff.
- Do not share food utensils and food with other employees

- computer stations are more than six feet apart. In-operatory computers are covered with a protective shield to be disinfected after every patient visit.

Checklist for Employers when employee tests positive for COVID-19

- Treat positive test results and “suspected but unconfirmed” cases of COVID-19 the same.
- If the source of infection is known, identify if it was at the workplace or outside.
- If the infection was contracted inside the workplace, notify workers’ compensation carrier;
 - Place the employee on workers’ compensation leave (with pay); and
 - Record the infection in the employer’s OSHA 300 log.
- Consider and then include employee benefit plans that may be available including: FMLA, PTP, paid sick leave, etc.
- Ask employee if he or she grants the employer permission to disclose the fact that the employee is infected.
 - If yes:
 - Notify employee’s manager(s) or supervisor(s) that employee is infected with COVID-19 and is out on leave.
 - For everyone else, respond to inquiries by disclosing employee is on a leave of absence for non-disciplinary purposes.
 - If no:
 - Notify employee’s manager(s) or supervisor(s) only that employee is on a leave of absence for non-disciplinary purposes.
 - Regardless of yes or no:
 - Disclose identity of employee to any required notification to OSHA or the health department.
- Notify employee’s co-workers who may have come into contact with employee at work within the past 14 days that they may have been exposed to COVID-19 and may wish to see a healthcare provider.
- DO NOT identify the infected employee by name and to the greatest extent possible, avoid making any direct or indirect references that would lead co-workers to identity of the employee.
- For employees who had close contact with employee in past 14 days, send them home for a 14-day self-quarantine.
- Notify known customers, vendors, or third parties with whom the employee may have come into contact with while at work within the past 14 days that they may have been exposed to COVID-19 and may wish to see a healthcare provider. DO NOT identify the infected employee by name.
- Currently, there is no guidance on how far a company should investigate for third parties who may have come into contact with an employee through work. It is safe to include any parties on the employee’s work calendar, in visitor logs, or otherwise readily available or known.

- Arrange for a professional cleaning of the employee’s workspace, immediate surrounding area, and areas likely visited (break room, restroom, etc.).
- Respond to inquiries by CDC or public health authorities as received.

Restrict employees from the workplace if they display symptoms of COVID-19

- For employees who are completing in-person work, health assessments (temperature checks) and/or questionnaires prior to entry into the facility. Check with St. Clair County Health Department
- Any employee with COVID-19 symptoms will be immediately separated from other individuals and sent home.
- Guidance from the employee’s health care provider on their return to work date will be required.

Actively encourage sick employees to stay home:

- Families First Coronavirus Response Act Policies and Posters should be posted in common places if employees have questions regarding use of emergency paid sick time, employees should contact *Randa Jundi-Samman or Lindsey Adams*.
- **Huron Dental** will follow state and federal guidance for return to work guidance.
- Guidance from the employee’s health care provider will also be considered

If an employee has a confirmed case of COVID-19, Huron Dental, PC ensures the following:

- We will communication with co-workers
- We will work with our local health department to provide them with the name of any identified employees that may have been exposed
- We will report cases to OSHA via their reporting/recordkeeping requirements
- **Huron Dental, PC** will follow CDC and State guideline protocols for return to work, including workplace contact tracing and CDC-recommended cleaning and disinfecting in all affected areas
- Guidance from the employee’s health care provider will also be considered
- We will perform increased environmental cleaning and disinfection
 - Employees should sanitize their work areas upon arrival, throughout the workday, and immediately before leaving for the day
 - We will all routinely clean and disinfect all frequently touched surfaces in the workplace, such as workstations, keyboards, telephones, handrails, and doorknobs.
 - **Huron Dental, PC** provides disposable wipes so that commonly used surfaces (for example, doorknobs, keyboards, copiers, desks, other work tools and equipment) can be wiped down by employees before each use.

Other considerations:

- Employees can also reach out to the following organizations for further assistant.
 - St. Clair County Community mental health at (810)985-8900 or scccmh.org
 - St. Clair County Health Department at (810)987-5300 or stclaircounty.org/offices/health

Minimizing exposure from those outside of our workforce including patients, and guests

- **Huron Dental** business practices are evaluated to ensure safety and health of all individuals. This is done on a phased approach. Beginning with appointment only onsite meetings, no walk-ins and finally transitioning to onsite meetings with appropriate precautions when that time comes.
- **Social distancing practices to be observed:**
 - Patients to wait in cars and check in by phone. We will let them know when we are ready for them.
 - In person meetings are to be made by appointments only/ No walk-ins
- Information is posted throughout the worksite educating individuals on ways to reduce the spread of COVID-19
- Any individual entering **Huron Dental** facility will have their temperature checked and/or a questionnaire completed prior to entry.
- Individual symptoms will be observed and individuals displaying symptoms of COVID -19 will be removed from the workplace.
- Plexi glass Physical barriers are installed in front desk areas
- Air Purifiers have been installed in hallways.

- **Huron Dental** will provide N95 masks to clinical staff and fabric masks to front desk employees, face shields to all staff, surgical hats and scrub pants to clinical staff as well as appropriate disinfectants so that individuals can clean work areas before and after use.

Minimizing exposure from the visitors/vendors

- When possible, **Huron Dental** will limit the number of visitors in the facility.
- visitors/vendors will need to wear fabric masks to enter the facility. Disinfectants and tissue are available in front area for them.

Minimizing exposure from the general public

- Business practices are evaluated to ensure safety and health of all individuals. This is done on a phased approach. Beginning with appointment only onsite meetings, no walk-ins and finally transitioning to onsite meetings with appropriate precautions.
 - Social distancing practices to be observed
 - Limit number of individuals allowed into workplace
 - Minimize face to face contact
 - Computer workstations positioned at least 6 feet apart
- Information is posted **in Huron Dental's waiting room and front door** educating individuals on ways to reduce the spread of COVID-19
- Any individual entering **Huron Dental** need to wear a non-medical grade mask.
- Individual symptoms may be assessed of COVID-19 and individuals with symptoms will be removed from the workplace.
- Plexi glass barriers are installed in front desk areas

This Plan is based on information and guidance from the CDC and OSHA at the time of its development. The safety of our employees and visitors remain the top priority at **Huron Dental, PC**. We recognize that

all individuals are responsible for preventing the spread of COVID-19 and reduce the potential risk of exposure to our workforce and visitors. As the COVID-19 outbreak continues to evolve and spread, **Huron Dental** is monitoring the situation closely and will update our guidance based on the most current recommendations from the CDC, World Health Organization (WHO), OSHA and any other public entities such as American Dental Association ADA, and Michigan Dental Association MDA.

Executive Order 2020-91 is outlined below along with industry specific guidelines for the following industries:

Executive Order 2020-91 (COVID-19)

Safeguards to protect Michigan's workers from COVID-19

The novel coronavirus (COVID-19) is a respiratory disease that can result in serious illness or death. It is caused by a new strain of coronavirus not previously identified in humans and easily spread from person to person. There is currently no approved vaccine or antiviral treatment for this disease.

On March 10, 2020, the Department of Health and Human Services identified the first two presumptive-positive cases of COVID-19 in Michigan. On that same day, I issued Executive Order 2020-4. This order declared a state of emergency across the state of Michigan under section 1 of article 5 of the Michigan Constitution of 1963, the Emergency Management Act, 1976 PA 390, as amended, MCL 30.401 et seq., and the Emergency Powers of the Governor Act of 1945, 1945 PA 302, as amended, MCL 10.31 et seq.

Since then, the virus spread across Michigan, bringing deaths in the thousands, confirmed cases in the tens of thousands, and deep disruption to this state's economy, homes, and educational, civic, social, and religious institutions. On April 1, 2020, in response to the widespread and severe health, economic, and social harms posed by the COVID-19 pandemic, I issued Executive Order 2020-33. This order expanded on Executive Order 2020-4 and declared both a state of emergency and a state of disaster across the State of Michigan under section 1 of article 5 of the Michigan Constitution of 1963, the Emergency Management Act, and the Emergency Powers of the Governor Act of 1945. And on April 30, 2020, finding that COVID-19 had created emergency and disaster conditions across the State of Michigan, I issued Executive Order 2020-67 to continue the emergency declaration under the Emergency Powers of the Governor Act, as well as Executive Order 2020-68 to issue new emergency and disaster declarations under the Emergency Management Act.

The Emergency Management Act vests the governor with broad powers and duties to "cop[e] with dangers to this state or the people of this state presented by a disaster or emergency," which the governor may implement through "executive orders, proclamations, and directives having the force and effect of law." MCL 30.403(1)-(2). Similarly, the Emergency Powers of the Governor Act of 1945 provides that, after declaring a state of emergency, "the governor may promulgate reasonable orders, rules, and regulations as he or she considers necessary to protect life and property or to bring the emergency situation within the affected area under control." MCL 10.31(1).

To suppress the spread of COVID-19, to prevent the state's health care system from being overwhelmed, to allow time for the production of critical test kits, ventilators, and personal protective equipment, to establish the public health infrastructure necessary to contain the spread of infection, and to avoid needless deaths, it is reasonable and necessary to direct residents to remain at home or in their place of

residence to the maximum extent feasible. To that end, on March 23, 2020, I issued Executive Order 2020-21, ordering all people in Michigan to stay home and stay safe. In Executive Orders 2020-42, 2020-59, 2020-70, and 2020-77, I extended that initial order, modifying its scope as needed and appropriate to match the ever-changing circumstances presented by this pandemic.

The measures put in place by these executive orders have been effective: the number of new confirmed cases each day has started to drop. Although the virus remains aggressive and persistent—on May 17, 2020, Michigan reported 51,142 confirmed cases and 4,891 deaths—the strain on our health care system has begun to relent, even as our testing capacity has increased. We have now begun the process of gradually resuming in-person work and activities that were temporarily suspended under my prior orders. In so doing, however, we must move with care, patience, and vigilance, recognizing the grave harm that this virus continues to inflict on our state and how quickly our progress in suppressing it can be undone.

In particular, businesses must do their part to protect their employees, their patrons, and their communities. Many businesses have already done so by implementing robust safeguards to prevent viral transmission. But we can and must do more: no one should feel unsafe at work. With this order, I am creating an enforceable set of workplace standards that apply to all businesses across the state. These standards will have the force and effect of agency rules and will be vigorously enforced by the agencies that oversee compliance with other health-and-safety rules. Any failure to abide by the rules will also constitute a failure to provide a workplace that is free from recognized hazards within the meaning of the Michigan Occupational Safety and Health Act, MCL 408.1011.

Acting under the Michigan Constitution of 1963 and Michigan law, I order the following:

1. All businesses or operations that are permitted to require their employees to leave the homes or residences for work under Executive Order 2020-92, and any order that follows it, must, at a minimum:
 - a. Develop a COVID-19 preparedness and response plan, consistent with recommendations in Guidance on Preparing Workplaces for COVID-19, developed by the Occupational Health and Safety Administration and available [here](#). By June 1, 2020, or within two weeks of resuming in-person activities, whichever is later, a business's or operation's plan must be made readily available to employees, labor unions, and customers, whether via website, internal network, or by hard copy.
 - b. Designate one or more worksite supervisors to implement, monitor, and report on the COVID-19 control strategies developed under subsection (a). The supervisor must remain on-site at all times when employees are present on site. An on-site employee may be designated to perform the supervisory role.
 - c. Provide COVID-19 training to employees that covers, at a minimum:
 - i. Workplace infection-control practices.
 - ii. The proper use of personal protective equipment.
2. Steps the employee must take to notify the business or operation of any symptoms of COVID-19 or a suspected or confirmed diagnosis of COVID-19.

3. How to report unsafe working conditions.

- a. Conduct a daily entry self-screening protocol for all employees or contractors entering the workplace, including, at a minimum, a questionnaire covering symptoms and suspected or confirmed exposure to people with possible COVID-19.
- b. Keep everyone on the worksite premises at least six feet from one another to the maximum extent possible, including through the use of ground markings, signs, and physical barriers, as appropriate to the worksite.
- c. Provide non-medical grade face coverings to their employees, with supplies of N95 masks and surgical masks reserved, for now, for health care professionals, first responders (e.g., police officers, fire fighters, paramedics), and other critical workers.
- d. Require face coverings to be worn when employees cannot consistently maintain six feet of separation from other individuals in the workplace, and consider face shields when employees cannot consistently maintain three feet of separation from other individuals in the workplace.
- e. Increase facility cleaning and disinfection to limit exposure to COVID-19, especially on high-touch surfaces (e.g., door handles), paying special attention to parts, products, and shared equipment (e.g., tools, machinery, vehicles).
- f. Adopt protocols to clean and disinfect the facility in the event of a positive COVID-19 case in the workplace.
 - i. Make cleaning supplies available to employees upon entry and at the worksite and provide time for employees to wash hands frequently or to use hand sanitizer.

When an employee is identified with a confirmed case of COVID-19, within 24 hours, notify both:

- i. The local public health department, and
 - ii. Any co-workers, contractors, or suppliers who may have come into contact with the person with a confirmed case of COVID-19.
- g. Follow Executive Order 2020-36, and any executive orders that follow it, that prohibit discharging, disciplining, or otherwise retaliating against employees who stay home or who leave work when they are at particular risk of infecting others with COVID-19.
 - h. Establish a response plan for dealing with a confirmed infection in the workplace, including protocols for sending employees home and for temporary closures of all or

part of the worksite to allow for deep cleaning.

- i. Adopt any additional infection-control measures that are reasonable in light of the work performed at the worksite and the rate of infection in the surrounding community.

Offices Regulations

- a. Assign dedicated entry point(s) for all employees to reduce congestion at the main entrance.
- b. Provide visual indicators of appropriate spacing for employees outside the building in case of congestion.
- c. Take steps to reduce entry congestion and to ensure the effectiveness of screening (e.g., by staggering start times, adopting a rotational schedule in only half of employees are in the office at a particular time).
- d. Require face coverings in shared spaces, including during in-person meetings and in restrooms and hallways.
- e. Increase distancing between employees by spreading out workspaces, staggering workspace usage, restricting non-essential common space (e.g., cafeterias), providing visual cues to guide movement and activity (e.g., restricting elevator capacity with markings, locking conference rooms).
- f. Turn off water fountains.
- g. Prohibit social gatherings and meetings that do not allow for social distancing or that create unnecessary movement through the office.
- h. Provide disinfecting supplies and require employees wipe down their work stations at least twice daily.
- i. Post signs about the importance of personal hygiene.
- j. Disinfect high-touch surfaces in offices (e.g., whiteboard markers, restrooms, handles) and minimize shared items when possible (e.g., pens, remotes, whiteboards).
- k. Institute cleaning and communications protocols when employees are sent home with symptoms.
- l. Notify employees if the employer learns that an individual (including a customer, supplier, or visitor) with a confirmed case of COVID-19 has visited the office.
- m. Suspend all nonessential visitors.
- n. Restrict all non-essential travel, including in-person conference events.