

**St. Clair County Community Mental Health Authority**

**COVID-19 Preparedness & Response Plan**

Developed June, 2020  
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## About COVID-19

Infection with SARS-CoV-2, the virus that causes COVID-19, can cause illness ranging from mild to severe, and in some cases, can be fatal. Symptoms typically include fever, cough, and shortness of breath. Some people infected with the virus have reported experiencing other non-respiratory symptoms. Other people, referred to as *asymptomatic cases*, have experienced no symptoms at all.

According to the CDC, symptoms of COVID-19 may appear 2-14 days after exposure.

## How COVID-19 Spreads

Although the first human cases of COVID-19 likely resulted from exposure to infected animals, infected people can spread SARS-CoV-2 to other people.

Medium exposure risk jobs include those that require frequent and/or close contact with (i.e. within six feet of) other people who may be infected with SARS-CoV-2.

The virus is thought to spread mainly from person-to-person, including:

- Between people who are in close contact with one another (within about six feet).
- Through respiratory droplets produced when an infected person coughs or sneezes. These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.

It may be possible that a person can get COVID-19 by touching a surface or object that has SARS-CoV-2 on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the primary way the virus spreads.

People are thought to be most contagious when they are most symptomatic (i.e., experiencing fever, cough, and/or shortness of breath). Some spread might be possible before people show symptoms; there have been reports of this type of asymptomatic transmission with this new coronavirus, but this is also not thought to be the main way the virus spreads.

Although the United States has implemented public health measures to limit the spread of the virus, it is likely that some person-to-person transmission will occur.

The CDC website provides the latest information about COVID-19 transmission:  
[www.cdc.gov/coronavirus/2019-ncov/about/transmission.html](https://www.cdc.gov/coronavirus/2019-ncov/about/transmission.html).

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In this document, St. Clair County Community Mental Health Authority (SCCCMHA) provides detailed procedures to follow during the COVID-19 Pandemic.

**MANAGEMENT TEAM RESPONSE PLAN**

1. Consult and/or follow requirements of the Michigan Department of Health and Human Services, Community Mental Health Association of Michigan, St. Clair County Emergency Operations Management, St. Clair County Health Department, and local hospitals.
2. Follow state pandemic protocol, including the requirements of the Governor's Executive Orders.
3. Meet regularly as a Management Team to assess the situation (identify unique attributes, pro/cons for SCCCMHA) and make informed decisions on actions.
4. Identify SCCCMHA staff to receive Michigan Health Alert Network notifications and provide the state with critical information.
5. Implement COVID-19 Pandemic Infection Control Plan procedures at all SCCCMHA locations.
6. Identify and implement SCCCMHA essential services and hours of operation.
7. Identify SCCCMHA staff positions to work from home and provide necessary equipment for staff to do so.
8. Provide daily (or as needed if not daily) information sharing with SCCCMHA staff.
9. Provide information sharing with individuals served by SCCCMHA and SCCCMHA contract provider agencies.
10. Network and information share with community agencies.
11. Ensure SCCCMHA contract agencies have and are implementing their own pandemic plans.
12. Implement compensation (sick time benefit) package for SCCCMHA staff affected by COVID-19.
13. Monitor situation daily and make revisions/update plan as applicable.
14. Support SCCCMHA employees' mental health and praise their efforts.

**EMPLOYEE RESPONSIBILITIES**

1. Employees will wear face masks at all times when in the SCCCMHA buildings, unless able to maintain six feet of distance between themselves and other individuals. When a mask has been removed, the employee will have it readily accessible to immediately put on if an individual enters their space or they are moving about the building into any common areas.
2. Employees will ensure they participate in the building health screening every day they are in the SCCCMHA office.

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3. Employees working in the community will ensure they participate in the self-screening survey every day they are working in the community on behalf of SCCCMHA (and not visiting a SCCCMH building first).
4. Employees working in the community must inquire prior to entering an individual's home, if the individual or anyone in the household has been diagnosed with COVID-19, is experiencing symptoms of COVID-19, or has had close contact with someone diagnosed with COVID-19. If so, the appointment will be rescheduled and performed electronically.
5. Employees experiencing COVID-19 symptoms must not report to work, but shall notify their supervisor and follow up with their healthcare provider for direction and follow CDC guidelines. The supervisor must immediately notify HR.
6. Employees experiencing the onset of COVID-19 symptoms while at work must immediately notify their supervisor and leave the building, contact their healthcare provider for direction and follow CDC guidelines. The supervisor must immediately notify HR.
7. Employees who become aware of having close contact with someone who has tested COVID-19 positive, must notify their supervisor immediately. The supervisor must immediately notify HR. Each situation will be looked at individually and CDC guidelines followed.
8. Employees must follow all COVID-19 related Agency Directives and updates.
9. Employees who become aware of any SCCCMHA employee not following the COVID-19 Preparedness & Response Plan and potentially affecting the safety of the work environment, must immediately report this to their Supervisor, the On-Call Supervisor, or any member of the Management Team.

**SCCCMHA COVID-19 PANDEMIC INFECTION CONTROL PLAN**

The SCCCMHA workplace supervisor designated to implement, monitor, and report on COVID-19 control strategies outlined in this document is the On-Call Supervisor or any member of Management Team. These individuals are on-site at all times during normal business hours.

SCCCMHA has issued a number of Agency Directives relating to COVID-19, including Use of Masks by Visitors; Use of Masks by Employees; Daily COVID-19 Screening, and Social Distancing. Employees and all building visitors are required to follow these Directives. Additions and updates to the Directives are made as new information becomes available or a need is identified.

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Daily Building Entry Procedure

1. Signs shall remain posted at all entrances stating that individuals (with the exception of infants under 2 years of age) entering the building must wear face coverings and wait outside the door until admitted by the nurse/designated staff.
2. Nurses/designated staff to complete health screenings at the entrance door (inside the vestibule) of each open SCCCMHA location, prior to allowing the individual into a CMH location.
3. Hygiene stations to include hand sanitizer, tissues, masks and a trash receptor at the front entrance of each SCCCMHA location.

SCCCMHA In-Building Health Screenings

Only Nurses/designated staff are authorized to complete health screenings and must use Personal Protective Equipment (PPE), including N-95 masks. Gloves are optional PPE and if used, must be changed after using on one individual with hand hygiene performed after removing/before donning a new pair for the next individual. Gloves are not an alternative to hand hygiene.

At the entrance of each SCCCMHA location:

1. Individuals (SCCCMHA employees and visitors) will be admitted into the vestibule area, asked a series of health-related questions, and have their temperature taken.
2. Individuals with a temperature over 100.4, or who respond yes for pandemic symptoms or exposure will be denied further entry and asked to contact their health care provider for direction. Should an employee be denied entry, they must immediately notify their supervisor. The supervisor must then immediately notify HR. The nurse/designated staff denying entry shall also notify HR.
  - Employees who do not pass the health screening must provide a doctor note indicating they are able to return to work and/or are negative for COVID-19.
  - Alternative service methods (i.e., telehealth, etc.) will be explored for individuals served who do not pass the health screening and are not allowed entry to the building.
3. Individuals permitted into the building will be asked to use “reduce the spread” hygiene skills. These skills include wearing a mask and using hand sanitizer or washing hands for 20 seconds with soap and warm water.

Note: If it is determined a COVID-positive individual was in a CMH building and/or exposed to CMH staff for what is determined to have been “close contact,” employees will be notified of this potential exposure and CDC guidelines followed.

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SCCCMHA Self-Screening for Employees Working in the Community

Any employee who will be working in the community on behalf of SCCCMA but who will not first be entering a SCCCMA building, must conduct their own health screening and submit results to their supervisor. Employees must utilize the Daily Self-Screening Survey for SCCCMA Employees. Instructions for the Daily Self-Screening will be shared with employees outside of this Preparedness & Response Plan.

Self-Screening questions include if employee has a temperature of 100.4 degrees or higher; if they are experiencing any symptoms and what those are; and have they tested positive for COVID or been exposed to someone who has. If any answer is yes, employee must not report to work, but immediately contact their supervisor. Employee will be directed to contact their health care provider for further direction. The supervisor must then immediately notify HR.

Employees\* with Symptoms, “Close Contact”, and Return-To-Work Guidelines

*(\*The process and timelines in this section are also to be applied to individuals who receive SCCCMA services, such as CIS, etc.)*

If an employee becomes sick, or exhibits any possible COVID-related symptoms during the workday, a supervisor must immediately direct them to leave the workplace. The supervisor must then immediately notify HR. That employee cannot return to work without a doctor’s written clearance or in accordance with the CDC guidelines included below.

If an employee is sent home from the workplace because they are sick, or exhibit any recognized COVID-19 symptoms (including fatigue, cough, shortness of breath or difficulty breathing, fever or chills, muscle or body aches, headache, sore throat, congestion or runny nose, nausea or vomiting, diarrhea, and/or recent loss of smell or taste), the supervisor must do the following:

- Supervisor, after consulting with HR, must send home any staff that worked in “close contact” with the employee exhibiting symptoms. SCCCMA defines “close contact” as being within six feet or fewer for 10 or more minutes, or six feet or fewer for any length of time if the infected person coughs or sneezes, or if there is any other exchange of bodily fluids.
- Supervisor notifies Facilities of the area possibly contaminated for thorough cleaning according to CDC guidelines.
- Supervisor moves staff to another area if able, until cleaning is completed.
- If any staff is uncomfortable being in the workplace, the employee may submit a request to work from home to their supervisor for consideration, in accordance with the Remote Work policy.

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- If the supervisor receives a positive COVID-19 result notification from the employee, the supervisor immediately informs HR. The supervisor/HR asks the employee who they had exposure to while in the office and 48 hours prior to exhibiting symptoms.
  - The supervisor/HR completes the Protocol for Positive COVID-19 Diagnosis: Employee and, if not already completed, the HIPAA Authorization to Release Medical Information (employee's discretion whether they complete the Release)
- Based on the information provided above, the supervisor/HR informs any other employee(s) regarding in-office exposure.
- If any staff is symptomatic, start at the beginning again.

Employees diagnosed with COVID-19 who have stayed home can stop home isolation and return to work when they have met one of the following sets of criteria. HR must be kept informed either directly by the employee or the supervisor of the plan to return to work.

- Option 1: If, in consultation with a healthcare provider and local public health authorities knowledgeable about locally available testing resources, it is determined **an employee will not have a test** to determine if they are still contagious, the employee can leave home and return to work after these three conditions have been met:
  - The employee has had no fever for at least 24 hours (without the use of medicine that reduces fevers)  
AND
  - respiratory symptoms have improved (for example, cough or shortness of breath have improved)  
AND
  - at least 10 days have passed since their symptoms first appeared
- Option 2: If, in consultation with a healthcare provider and local public health authorities knowledgeable about locally available testing resources, it is determined **the employee will be tested** to determine if the employee is still contagious, the employee can leave home and return to work after these three conditions have been met:
  - The employee no longer has a fever (without the use of medicine that reduces fevers)  
AND
  - respiratory symptoms have improved (for example, cough or shortness of breath have improved)  
AND
  - have received two negative tests in a row, at least 24 hours apart.

Employees advised to quarantine due to “close contact” exposure to others diagnosed with COVID-19, can stop home isolation and return to work after 14 days have passed with no symptoms. HR must be kept informed either directly by the employee or the supervisor of the plan to return to work.

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Nursing Services (Nurses, Medical Assistants, Designated Staff) Sanitization

1. Clean thermometer probe and cord (or ear thermometer if used) with an alcohol prep pad after every use.
2. Wash hands or use hand sanitizer after each individual's temperature is taken as appropriate.
3. When blood pressure cuff is used, wipe down with Clorox wipes after every use.
4. When pulse oximeter is used, wipe with alcohol prep pads after every use.

Process for Returning Used Medication Boxes

1. Return medication boxes to bin in Facilities Department labeled "MED BOXES TO BE DISINFECTED." It is located inside of the Facilities Department entry door. (The door with the key return bin.)
2. Use the Facilities Department entry door to bring med boxes in from the outside so that potentially contaminated med boxes are not carried through the building.
3. Ensure that there are NO PILLS REMAINING in the returned med boxes.
4. If pills are returned, they need to be disposed of per SCCCMHA policy. It is recommended that they be removed from the used med boxes outside of the Facilities Department entry door and placed into a sealable plastic bag then taken to the medication disposal bin.
5. Prior to placing the used med boxes into the return bin, be sure to open all of the boxes, if the lids are permanently attached, or remove the lids from the boxes, if able.
6. After depositing used med boxes into the return bin, wash hands for at least 20 seconds. Use hand sanitizer if soap and water are not available.

Disinfecting Medication Boxes

1. Always wear PPE (gloves) when handling med boxes and med box totes.
2. When the return med box bin is halfway full, place the used med boxes into the tote and fill the tote with hot bleach water (1/3 cup of bleach per 1 gallon of water).
3. Be sure to cover all parts of used med boxes with bleach water.
4. Soak for 10 minutes.
5. Wear PPE (gloves) to remove disinfected med boxes from the tote and place onto a designated table to thoroughly air dry.
6. Dump used bleach water solution down the drain.
7. Remove gloves using glove-over-glove removal technique and put into the trash receptacle. <https://www.cdc.gov/vhf/ebola/pdf/poster-how-to-remove-gloves.pdf>

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8. Wash hands with warm soapy water for 20 seconds. Use hand sanitizer if soap and water are not available.
9. Return completely dried med boxes to usage.

Sanitation Practices Treatment Rooms

1. Disinfect doorknobs on both sides.
2. Disinfect tabletops, chairs and stools.
3. Disinfect telephone handset (include mouthpiece) and dial pad.
4. Disinfect computer keyboard and mouse.
5. Disinfect countertops.
6. Disinfect sink taps.
7. Disinfect arms on lab draw chair.

Sanitation Practices throughout the Building

1. Disinfect chairs in waiting rooms after each use and at least one time per hour.
2. Disinfect doorknobs on both sides continually throughout the day downstairs, one time per hour upstairs.
3. Disinfect light switches throughout the day downstairs, one time per hour upstairs.
4. Disinfect common area countertops/filing cabinet tops throughout the day downstairs, one time per hour upstairs.
5. Disinfect restrooms throughout the day downstairs, one time per hour upstairs.
6. Disinfect meeting room tables after each meeting/training.
7. Disinfect arms of meeting room chairs after each meeting/training.
8. Disinfect copy machines throughout the day downstairs, one time per hour upstairs.
9. Recommend employees disinfect/sanitize their office work stations at least twice daily.
10. Cleaning supplies are available throughout the building in each department. Additional supplies are available upon request to the Facilities Department.

Sanitization Practices in the Event of a Suspected or Confirmed COVID-19 Case

1. Supervisor/Management Team member notifies Facilities Supervisor of a potential positive or confirmed positive case of COVID-19 and the need to sanitize/disinfect the work area.
2. Identified areas are closed off for cleaning. This does not necessarily mean an entire program or building will need to close, as long as the area can be closed off without impacting the safety of others.

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3. Facilities staff will clean and disinfect all areas used by the person who is/may be sick, such as offices, bathrooms, common areas, shared electronic equipment such as computers, printers, copy machine touch screens, keyboards, remote controls, etc.
4. Vacuum the space using a vacuum equipped with high-efficiency particulate air (HEPA) filter, if available. Wait until the room or space is empty to vacuum.
5. Once the area has been appropriately disinfected, it can be opened for use. Workers without close contact with the person who is/may be sick can return to work immediately after disinfection.
6. If more than 7 days have passed since the person who is/may be sick was in the area, additional cleaning or disinfection is not necessary.

## **STAFF TRAINING**

All staff will receive training on:

- Workplace infection-control practices.
- The proper use of personal protective equipment.
- 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.
- How to report unsafe working conditions.

## **OPERATIONAL MODIFICATIONS**

### Facemasks and Social Distancing

Employees will wear face masks at all times when in the SCCCMHA buildings, unless able to maintain six feet of distance between themselves and other individuals. When a mask has been removed, the employee will have it readily accessible to immediately put on if an individual enters their space or they are moving about the building into any common areas. Additionally staff must maintain six feet of separation from other individuals in the workplace to the maximum extent possible. N95 masks and other PPE are to be reserved for medical staff primarily, which is in line with CDC guidelines and helps to preserve the supply. Should an employee feel they are performing a service that elicits additional safety concerns, they are to discuss with their supervisor and follow the chain of command to request additional PPE.

### Appointments and Waiting Areas

Appointments will be staggered to maximize waiting area and waiting room occupancy while maintaining social distancing. Individuals are being asked to arrive alone for appointments and not arrive more than 15 minutes prior to their appointment if possible. Additionally individuals may be asked to wait in their vehicle or outside. Seating in the waiting areas has been spread out so individuals will be six feet apart. Facilities staff sanitizes waiting areas ongoing.

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Daily Health Screenings

Employees and building visitors must participate in the health screening before building entry which includes taking the individual's temperature to ensure it is not 100.4 or higher and asking a series of symptom and COVID-19 exposure questions. Employees who will not visit a SCCCMHA building prior to working in the community must complete a Daily Self-Screening Survey and submit to their supervisor before beginning work.

COVID-19 Guidelines for In-Office Services

If an employee is aware that an individual served or someone in their household is ill, staff should request the individual not arrive for their appointment, but reschedule it or provide a virtual/phone visit, and also encourage the individual to follow up with their healthcare provider.

Individuals coming to a SCCCMHA building for their appointment will be required to undergo a health screening prior to their entry into the building (see section "SCCCMHA In-Building Health Screenings). Should the individual not pass the screening and be denied entry, they will be directed to follow up with their healthcare provider. Staff should offer a virtual/phone visit instead.

Employees and individuals served are required to wear a facemask during service provision and maintain a six foot distance from each other and others in the building. Employees should utilize agency provided sanitization products after each session.

Review and follow policy 09-003-0045 Safety Precautions for In Office Services.

COVID-19 Guidelines for In-Community Services

Employees who are to provide a home visit should contact the individual prior to the visit to ask if they (or anyone in their household) has a fever of 100.4 degrees or higher, has been exposed to someone with COVID-19, are awaiting COVID-19 test results, have COVID-19 related symptoms such as fatigue, cough, shortness of breath or difficulty breathing, fever or chills, muscle or body aches, headache, sore throat, congestion or runny nose, nausea or vomiting, diarrhea and a new loss of smell or taste. If the answer is yes, a virtual/phone visit should be offered.

Employees are to wear a facemask during the in-community service and require the individual served to also wear a mask (or virtual/phone visit will be offered). Social distancing must also be maintained during the appointment. The only exception to both parties wearing a mask during the in-community service is if both parties are more than six feet from any other person and both parties agree to remove the mask.

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Employees are encouraged to bring a chair that can be sanitized to utilize during the visit, and to sit outside the home if possible. Sanitizing products (wipes, hand sanitizer are in agency vehicles) should be utilized following the visit.

Review and follow policy 09-003-0020 Safety Precautions for Out of the Office Services.

Work Station Disinfection/Sanitization

It is recommended employees disinfect/sanitize their office work stations at least twice daily. Minimally this should include disinfection upon arrival and mid-shift. This is especially important for those employees who share desks with others. Work station is defined as computer keyboard, telephone and dial pads, desktops, drawer pulls, pens, and any other high touch surface around desks.

CMH Transportation

Social distancing must be maintained during transportation. Masks are also required to be worn by everyone in the vehicle. When utilizing agency vans, individuals being transported should be seated in the farthest row from the driver. When utilizing agency cars, plastic screens have been installed between the front and back row. Passengers in the cars, must sit in the back seat. Utilize sanitizing products before and after utilizing agency or personal vehicles.

Community Integration Services (CIS) Plan for Service Provision

CIS has developed and will follow a program-specific Plan for providing services based on following CDC guidelines for safe service provision. Alternate methods of providing services for those who receive services from CIS will continue to be implemented, including in-home services.

**FACILITY MODIFICATIONS**

1. Staff work areas have been modified when possible to include dividers between desks that are less than six feet apart. Staff have also been scheduled in a staggered fashion so when in the building, they will not be working within 6 feet of each other.
2. Reception areas have been modified to include screens between staff and individuals approaching the reception counters. The floors have been taped to indicate areas for people to stand when waiting in line, or when they are speaking to the receptionists.
3. Meeting room capacity limits have been modified to ensure individuals within the room are seated six feet apart with or without tables.
4. Waiting areas have been modified to ensure individual seating is six feet apart.
5. Restrooms have been modified to include touchless hand towel dispensers.

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6. Drinking fountains have been retrofitted with touchless water bottle filling stations.
7. The Galley area is currently being renovated to ensure appropriate social distancing when individuals are dining.
8. The elevator has had signage added relating to social distancing and tape has been added to indicate where individuals should stand.
9. Building entrances have been locked so that anyone entering the building must do so at the east and west entrance where they are met by a nurse/designated staff, who will take their temperature and ask them the appropriate screening questions.
10. A sanitation station is located at the front entrance of the building. Individuals are instructed to sanitize their hands upon entry.
11. The outlying CMH sites have also been modified to ensure the same social distancing and sanitizing practices outlined above.

### **VEHICLE FLEET MODIFICATIONS**

1. Vehicles are sanitized after every use.
2. Sanitizing wipes and gloves are provided within each vehicle for staff to utilize as needed.
3. Select vehicles have been retrofitted with screens to provide a barrier between the driver and passenger compartments where six feet distancing is not possible due to vehicle size.

### **IMPLEMENT SCCCMHA ESSENTIAL SERVICES AND HOURS OF OPERATION**

#### Essential Services

1. Medication injection
2. Pharmacy
3. People's Clinic service
4. Medication reviews
5. Crisis intervention/support
6. Mobile Crisis Unit, including pre-admission screenings (minimum of 2 staff on site)
7. ACT Team (minimum of 2 staff on site)
8. Nursing Services

#### Building Hours of Operation (subject to change)

1. Electric Avenue - open Monday - Friday 8:30 a.m. - 5:00 p.m. by appointment only
2. Child and Family Services - open Monday - Friday 8:30 a.m. - 5:00 p.m. by appointment only
3. Capac - open Monday - Friday 8:30 a.m. - 5:00 p.m. by appointment only

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4. Marine City - open Monday - Friday 8:30 a.m. - 5:00 p.m. by appointment only  
Note: Revised hours of operation will be posted at each site. Signage for main entrance will be posted on SCCCMHA Facebook and website.

### **IDENTIFY SCCCMHA STAFF TO WORK FROM HOME**

1. First tier - management, supervisors and direct service staff whose main task is to work in the community (clinicians, case managers, mental health assistants, peer support, etc.), are assigned the equipment they need (tablets, laptops, cell phones, etc) with access to OASIS. ACT and Mobile Crisis Unit will continue to work in the community as needed.
2. Second tier - support staff who can do most of their work from home are assigned the equipment they need (tablets, laptops, etc). Note, access on mobile devices may be limited.
3. Identify rotating staff positions (clerical, FIPA techs, nurses, med techs, etc.).
4. IT to distribute computer equipment to staff (tablets, laptops, cell phones) as applicable.
5. IT to ensure computers have communication links for all staff to access intranet information, SCCCMHA forms and policies, MyLearningPointe, etc. on The Compass.
6. Develop and implement a work time tracking form. (Excel task tracker).
7. Inform staff and implement on-call protocol.
8. Finalize and implement Remote Work policy.

### **INFORMATION SHARING WITH SCCCMHA STAFF**

1. During stay-at-home order, provide daily/regular email updates with pandemic information and requirement: work letters, masks, etc
2. Provide work information: how to check voicemails, document time, cancel appointments, HIPAA, consents/releases, personal development courses/trainings, etc.
3. Support/encourage staff: kudos, inspirational sayings, events, and relaxation techniques/information.
4. Provide information regarding volunteer opportunities.
5. Provide information regarding items needed: sewing scrub hats, masks, Soup Kitchen containers, assisting United Way, etc.
6. Resources for school aged children: [www.michiganallianceforfamilies.org/covid19/](http://www.michiganallianceforfamilies.org/covid19/)
7. Managing Anxiety:
  - [adaa.org/learning-from-us/from-the-experts/blog-post/consumer/covid-19-lockdown-guide-how-manage-anxiety-and](http://adaa.org/learning-from-us/from-the-experts/blog-post/consumer/covid-19-lockdown-guide-how-manage-anxiety-and)
  - [www.prevention.com/health/mental-health/a31469215/coronavirus-anxiety-tips/](http://www.prevention.com/health/mental-health/a31469215/coronavirus-anxiety-tips/)
8. View CMH videos “Individuals We Serve Return to the Building” and “Staff Return to Work in the Building.”

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**INFORMATION SHARING WITH INDIVIDUALS SERVED BY SCCCMHA**

1. Provide pandemic information, self-help links, food giveaways, etc.
  - NA online meetings: <https://virtual-na.org/>
  - AA online meetings: <https://www.aa-intergroup.org/>
  - AA by topic: [www.recoveryaudio.org/](http://www.recoveryaudio.org/)
  - Online multi-pathway meetings: [www.intherooms.com/home/](http://www.intherooms.com/home/)
  - Unity Recovery - partnered with WeConnect to offer free daily online recovery meetings [www.unityrecovery.org/](http://www.unityrecovery.org/)
  - AA speakers on the web through YouTube, Apple Music and Spotify: [www.aaspeaker.com/](http://www.aaspeaker.com/)
  - SCCCMHA Support line
  - Social Security Administration New Release: Economic Impact Payments for SS and SSI Beneficiaries
  - Cornell University: COVID-19 and Social Insurance and Benefit Programs
  - Understanding COVID-19 Posters
  - Food giveaways: [www.fbem.org/food-bank-of-eastern-michigan-covid19-resources](http://www.fbem.org/food-bank-of-eastern-michigan-covid19-resources)
2. People's Clinic hours
3. Genoa Pharmacy hours
4. Share video on Individuals We Serve Return to the Building

**SCCCMHA NETWORK SHARING WITH COMMUNITY AGENCIES**

1. COVID-19 POSTERS
2. St. Clair County Press Releases
3. MSU Extension Online Resources for Michigan Communities
4. Food Pantries, per city
5. Food Distribution List with dates
6. Area Agency on Aging 1-B coronavirus link: [aa1b.org/coronavirus](http://aa1b.org/coronavirus)
7. Michigan COVID-19 Pandemic Resource Guide
8. Community Resource Guide

**ENSURE SCCCMHA CONTRACT AGENCIES IMPLEMENT THEIR PANDEMIC PLANS**

SCCCMHA contract managers to ensure contract agency providers have pandemic plans in place, included on the contract monitor tool and reviewed during contract monitoring reviews.

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**SCCCMHA STAFF COMPENSATION PACKAGE**

1. Provide 5 additional sick days. (If quarantined due to COVID-19 symptoms, diagnosis or exposure or have a doctor's note attesting to a medical condition placing the employee at-risk due to COVID-19.)
2. Provide for additional online trainings.
3. Encourage flex/variable scheduling pre-approved by the supervisor for work completion, ensuring it meets the needs of the agency/individual served. For example, complete 7.5 hours of work in a 24-hour period.
4. Michigan Paid Leave Medical Act will remain in effect.
5. Hazard duty pay. (For staff working in the office and in the community during the stay-at-home order.)

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