

GRETCHEN WHITMER GOVERNOR

STATE OF MICHIGAN OFFICE OF THE GOVERNOR LANSING

GARLIN GILCHRIST II

Michigan Department of Health and Human Services (MDHHS) Interim Recommendations for COVID-19 Community Mitigation Strategies March 11, 2020

[The most up-to-date guidance on these and other mitigation strategies is available at www.Michigan.gov/coronavirus. This matter is rapidly evolving and MDHHS may provide updated guidance.]

Community mitigation strategies are crucial to slowing the transmission of coronavirus disease 2019 (COVID-19) in Michigan, particularly before a vaccine or treatment becomes available. These strategies provide essential protections to individuals at risk of severe illness and to health care and other critical infrastructure workforces. Preventing a sudden, sharp increase in the number of people infected with COVID-19 will help minimize disruptions to daily life and limit the demand on health care providers and facilities.

These recommended strategies apply at the individual, organizational, and community levels. They apply to businesses, workplaces, schools, community organizations, health care institutions, and individuals of all ages, backgrounds, and health profiles. Everyone has some measure of responsibility to help limit the spread of this disease. Even individuals who are healthy can help prevent the spread of COVID-19 to others.

Michiganders have been preparing for COVID-19 for weeks, and all individuals should continue to take the following basic personal-hygiene measures to prevent the spread of the virus:

- wash your hands often with soap and water or use hand sanitizer;
- avoid touching your eyes, nose, or mouth with unwashed hands;
- cover your mouth and nose with a tissue when coughing or sneezing;
- avoid handshakes;
- avoid contact with sick people who are sick; and
- stay home when you are sick.

Michigan must take further action, however. To help avoid a rapid increase of cases in the state, MDHHS recommends implementing now the following community mitigation strategies. Please note, guidance for health care providers is not addressed in this document, but is available at www.Michigan.gov/coronavirus.

Individuals and families at home:

- 1. Learn about the signs and symptoms of COVID-19. Symptoms include fever, cough, and difficulty breathing.
- 2. If you have respiratory symptoms, **STAY HOME WHEN YOU ARE SICK**. Call your health care provider's office in advance of your visit.
- Regularly clean and disinfect frequently touched surfaces, like doorknobs, keyboards, cell phones, and light switches.
- Communicate and reinforce best practices for washing hands and covering coughs and sneezes.
- 5. Be prepared if there is COVID-19 in your household or a disruption of daily activities in your community. For example, maintain a supply of medications, food, and other essentials in your house. Consider alternative shopping options such as curbside pickups or online deliveries.
- 6. Access services as much as possible online or by phone.

Individuals at risk of severe illness:

These individuals include, but are not limited to, older adults and persons of any age with underlying medical conditions, such as persons with a blood disorder (e.g., sickle cell disease or a disorder being treated with blood thinners), an endocrine disorder (e.g., diabetes mellitus), or a metabolic disorder (such as inborn error of metabolism); those with heart disease, lung disease (including asthma or chronic obstructive pulmonary disease), chronic kidney disease, or chronic liver disease; those with a compromised immune system (e.g., those who are receiving treatments such as radiation or chemotherapy, who have received an organ or bone marrow transplant, who are taking high doses of immunosuppressant, or who have HIV or AIDS); those who are currently pregnant or were pregnant in the last two weeks; and those with neurological or neurologic and neurodevelopment conditions.

- 1. Individuals at risk of severe illness should stay at home and keep away from others who are sick, except in exceptional circumstances. Wash your hands often, particularly after contact with high-touch surfaces. Avoid crowds and closed-in settings with little air ventilation as much as possible. Avoid cruise travel and non-essential air travel.
- 2. Regularly clean and disinfect frequently touched surfaces, like doorknobs, keyboards, cell phones, and light switches.
- 3. In households with individuals at risk of severe illness, provide a protected space for those individuals and have healthy people conduct themselves as if they were a significant risk to those individuals. For example, healthy people should wash their hands before feeding or caring for an at-risk individual.
- 4. Have a plan for if you get sick, and stay in touch with others by phone or email.
- 5. Watch for symptoms and emergency warning signs that require immediate medical attention.
- 6. Family members and caregivers can support older adults by knowing what medications they are taking and ensuring there is an extra supply on hand.
- 7. Family members and caregivers can support older adults by monitoring food and other necessary medical supplies (e.g., oxygen, incontinence, dialysis, and wound care supplies) and by creating a back-up plan for securing those essentials if they run out.

Assisted living facilities, adult day care programs, and senior living facilities:

- 1. Encourage personal protective measures among residents, clients, and staff, including handwashing and covering coughs and sneezes.
- 2. Encourage residents, clients, and staff to stay home (or in their private quarters) when sick and to notify program administrators of illness.
- 3. Regularly clean and disinfect frequently touched surfaces, like doorknobs, keyboards, cell phones, and light switches.
- 4. Ensure hand hygiene supplies are readily accessible throughout the facility.
- 5. If caring for an individual living in a care facility, monitor the situation, ask about the health of the other residents frequently, and know the protocol if there is an outbreak.
- 6. Implement social distancing measures as feasible, such as reducing large gatherings, altering meal schedules to reduce mixing, and limiting programs with external staff.

- 7. Limit visitors to only those who are absolutely necessary and implement screening of visitors for temperature and respiratory symptoms.
- 8. Maintain contact with individuals at risk of severe illness who are no longer able to attend day care programs.

Universities and colleges:

- 1. Educate students and the community about COVID-19 and preventative hygiene practices.
- 2. Regularly clean and disinfect frequently touched surfaces, like doorknobs, keyboards, cell phones, and light switches.
- 3. Encourage staff and students to stay home when sick.
- 4. Cancel or postpone large gatherings, conferences, and sporting events (e.g., greater than 100 people in a shared space).
- 5. Consider tele-learning opportunities, as feasible.
- 6. Communicate and reinforce best practices for washing hands and covering coughs and sneezes.
- 7. Students and faculty at risk of severe illness should implement plans for distance learning.

Schools and childcare facilities:

- 1. Educate students and the community about COVID-19 and preventative hygiene practices.
- 2. Encourage staff and students to stay home when sick.
- 3. Report influenza-like activity, absenteeism, and potential school dismissals to public health officials.
- 4. Separate sick students and staff from others until they can go home. When feasible, identify a "sick room" through which others do not regularly pass.
- 5. Communicate and reinforce best practices for washing hands and covering coughs and sneezes.

- Regularly clean and disinfect frequently touched surfaces, like doorknobs, keyboards, cell phones, and light switches.
- 7. Consider having students eat meals in their classrooms as opposed to a cafeteria-like setting, or alter meal schedules for smaller-group gatherings.
- 8. Limit large gatherings such as assemblies and limit inter-school interactions.
- 9. Alter schedules for recess and entry/dismissal to reduce the mixing of large numbers of students and staff.
- 10. Schools with students at risk of severe illness should consider implementing plans for distance learning for those students, to the extent feasible.

Workplaces:

- 1. Encourage employees to stay home when sick and to notify supervisors of illness.
- 2. Communicate and reinforce best practices for washing hands covering coughs and sneezes.
- 3. Regularly clean and disinfect frequently touched surfaces, like doorknobs, keyboards, cell phones, and light switches.
- 4. Ensure hand hygiene supplies are readily accessible throughout the workplace.
- 5. Encourage staff to tele-work when feasible, particularly individuals at risk of severe illness.
- 6. Implement social distancing measures as feasible, including limiting in-person meetings.
- 7. Limit large work-related gatherings (e.g., staff meetings and after-work functions).
- 8. Limit non-essential work travel.
- 9. Cancel or postpone large gatherings, conferences, and sporting events (e.g., greater than 100 people in a shared space).
- 10. Discourage employees from eating meals in a large group setting, such as a cafeteria.
- 11. Tailor continuity of operation plans to the COVID-19 threat.

Community and faith-based organizations:

- 1. Identify safe ways to serve those who are at high risk or vulnerable through outreach and assistance.
- 2. Encourage staff and members to stay home when sick and to notify the organization of illness.
- 3. Communicate and reinforce best practices for washing hands and covering coughs and sneezes.
- Regularly clean and disinfect frequently touched surfaces, like doorknobs, keyboards, cell phones, and light switches.
- 5. Ensure hand hygiene supplies are readily accessible.
- 6. Implement social distancing measures as feasible.
- 7. Reduce in-person gatherings and activities, especially for organizations with individuals at risk of severe illness. Consider offering video or audio of events.
- 8. Determine ways to continue providing support services to individuals at risk of severe illness while limiting group settings and exposures.
- 9. Avoid large gatherings (e.g., greater than 100 people in a shared space) or move to smaller and staggered gatherings.
- 10. For organizations that serve high-risk communities, cancel gatherings of more than 10 people.

Other mass events:

- 1. Cancel or postpone large gatherings, conferences, and sporting events (e.g., greater than 100 people in a shared space).
- 2. Regularly clean and disinfect frequently touched surfaces, like doorknobs, keyboards, and light switches.
- 3. Communicate and reinforce best practices for washing hands and covering coughs and sneezes.



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN OFFICE OF THE GOVERNOR LANSING

GARLIN GILCHRIST II

EXECUTIVE ORDER

No. 2020-4

Declaration of State of Emergency

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 that had not been previously identified in humans and can easily spread from person to person.

COVID-19 has been identified as the cause of an outbreak of respiratory illness first detected in Wuhan City in the Hubei Province of China. Person-to-person spread of the virus has occurred in the United States, with some of those occurring in people with no travel history and no known source of exposure. On January 31, 2020, the United States Department of Health and Human Services Secretary Alex Azar declared a public health emergency for COVID-19, and affected state and local governments have also declared states of emergency.

The State of Michigan has been taking proactive steps to prevent and prepare for the spread of this disease. On February 3, 2020, the Michigan Department of Health and Human Services (MDHHS) activated the Community Health Emergency Coordination Center, and has been working diligently with local health departments, health systems, and medical providers throughout Michigan to make sure appropriate screening and preparations for COVID-19 are being made. On February 28, 2020, I activated the State Emergency Operations Center to maximize coordination with state, local and federal agencies, as well as private partners, and to help prevent the spread of the disease. On March 3, 2020, I created four task forces comprising key state government agencies to coordinate the state's response and work closely with the appropriate community and nongovernmental stakeholders to combat the spread of COVID-19 and assess the impact it may have on Michiganders' day-to-day lives. And throughout this time, the State has been working with schools, businesses, medical providers, local health departments, and residents to make sure they have the information they need to prepare for potential cases.

On March 10, 2020, MDHHS identified the first two presumptive-positive cases of COVID-19 in Michigan.

Section 1 of article 5 of the Michigan Constitution of 1963 vests the executive power of the State of Michigan in the governor.

The Emergency Management Act, 1976 PA 390, as amended, MCL 30.403(4), provides that "[t]he governor shall, by executive order or proclamation, declare a state of emergency if he or she finds that an emergency has occurred or that the threat of an emergency exists."

The Emergency Powers of the Governor Act of 1945, 1945 PA 302, as amended, MCL 10.31(1), provides that "Id]uring times of great public crisis, disaster, rioting, catastrophe, or similar public emergency within the state, or reasonable apprehension of immediate danger of a public emergency of that kind, . . . the governor may proclaim a state of emergency and designate the area involved."

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

- 1. A state of emergency is declared across the State of Michigan.
- The Emergency Management and Homeland Security Division of the Department of State Police must coordinate and maximize all state efforts that may be activated to state service to assist local governments and officials and may call upon all state departments to utilize available resources to assist.
- 3. The state of emergency is terminated when emergency conditions no longer exist and appropriate programs have been implemented to recover from any effects of the emergency conditions, consistent with the legal authorities upon which this declaration is based and any limits on duration imposed by those authorities.

Given under my hand and the Great Seal of the State of Michigan.

Date: March 10, 2020

GRÉTCHEN WHITMER

GOVERNOR

By the Governor:

SECRETARY OF STATE

FILED WITH SECRETARY OF STATE

ON 3/10/2020 AT 11:30pm

AG Nessel, MDHHS Issue Warning to Consumers Regarding Coronavirus Scams

Contact: Kelly Rossman-McKinney 517-355-7666

Agency: Attorney General

February 26, 2020

LANSING – Michigan Attorney General Dana Nessel and the Michigan Department of Health and Human Services (MDHHS) today warned Michigan residents to watch for scams related to the coronavirus disease 2019. These scams include websites selling fake products, and fabricated emails, texts and social media posts used to steal money and personal information.

The emails and posts may be promoting awareness and prevention tips along with phony information about cases in residents' neighborhoods. They may also ask for donations to victims, provide advice on unproven treatments or contain damaging attachments.

"While the threat of coronavirus disease 2019 is real, there have been no confirmed cases in Michigan," said Nessel. "Do NOT fall for these scams. In fact, this is the perfect example of criminals preying on people's fears. Don't give a single piece of personal information to anyone reaching out to you regarding coronavirus."

The Federal Trade Commission has offered the following tips to help you avoid these scammers:

- Don't click on links from sources you don't know;
- Watch for emails claiming to be from the Centers for Disease Control and Prevention (CDC) or experts saying they have information about the virus;
- Ignore online offers for vaccinations; and
- Be alert to "investment opportunities."

"While the current risk of COVID-19 in the United States is low, we are working with our local and federal partners to make sure our public health system is prepared," said Dr. Joneigh Khaldun, chief medical executive and chief deputy for health at MDHHS. "The best way Michiganders can stay healthy is to wash their hands often with soap and water, cover their coughs and sneezes, stay away from people who are sick and stay home if they are not feeling well. For accurate, up-to-date information, visit the CDC's website or the MDHHS' webpage."

Regardless of who they claim to be, people who text or email asking for personal or financial information should be treated as potential thieves who may be trying to steal someone's identity. Resist their believable scenarios and confirm the identity of a contact by independently speaking with the identified source. Do NOT provide any personal information to people who call or email seeking it. Remember, identity thieves are crafty, and they may attempt to contact people numerous times using various aliases.

For more information and tips, please read this **Consumer Alert** from the FTC.

Consumers are encouraged to <u>file consumer complaints online</u> with the Michigan Department of Attorney General or call 877-765-8388.

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WASH YOUR HANDS OFTEN WITH SOAP and warm water for at least 20 seconds.

How does COVID-19 spread?

- · Coughing and sneezing without proper cover.
- Close personal contact (within six feet of a laboratory confirmed person).
- Touching an object or surface with the virus on it, then touching your mouth, nose or eyes.

Symptoms

People who have been diagnosed with COVID-19 have reported fever, cough and difficulty breathing. These symptoms may appear in as few as two days or as long as 14 days after exposure.

How do I help prevent the spread of illnesses?

- Wash hands often with soap and warm water for at least 20 seconds, especially after going to the bathroom; before eating; and after blowing your nose, coughing or sneezing.
- Use an alcohol-based hand sanitizer with at least 60% alcohol if soap and water are not readily available.
- Avoid touching your eyes, nose and mouth.
- Stay home when you are sick.
- Clean and disinfect frequently touched objects and surfaces.

What about facemasks?

- CDC does not recommend that healthy people wear a facemask.
- Facemasks should be worn by healthcare workers and people taking care of someone with COVID-19.
- If you are sick with respiratory illness and visit a healthcare provider, you may be asked to wear a facemask during your visit.

For food establishments:

- Employees who are sick or showing respiratory symptoms should not work until they are symptom free.
- Make sure alcohol-based hand sanitizers and extra napkins/tissues are available for customers to use.
- Continue to regularly clean and sanitize any objects or surfaces, with special attention to surfaces that may have been touched by an ill worker or customer.
- Follow safe food handling requirements, including handwashing with warm, soapy water for at least 20 seconds.

What about my food?

The Food and Drug Administration isn't aware of any reports of human illnesses transmitted by food or food packaging. It is always important to follow good hygiene practices, i.e., wash hands and surfaces often, separate raw meat from other foods, cook to the right temperature, and refrigerate foods promptly, when handling or preparing foods.

What about my pets?

There is no evidence that companion animals including pets can spread COVID-19. However, since animals can spread other diseases to people, it's always a good idea to wash your hands with soap after being around animals. Restrict contact with pets and other animals while you are sick with COVID-19, just like you would around other people.

WHEN IN DOUBT, WASH YOUR HANDS! Handwashing is your best defense against illness.

For more information, visit **Michigan.gov/Coronavirus** or **CDC.gov/Coronavirus**.







GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF TECHNOLOGY, MANAGEMENT & BUDGET LANSING

TRICIA L. FOSTER

March 12, 2020

Dear Lessor:

Subject: Michigan has confirmed cases of COVID-19 - New Cleaning Guidelines

The Michigan Department of Health and Human Services (DHHS) has identified two presumptive positive cases of COVID-19 (Coronavirus) in Michigan. To date, more than 1,000 cases of COVID-19 have been confirmed in the U.S., with over 30 confirmed deaths. As preventing COVID-19 from reaching Michigan is no longer an option, we are now tasked with taking preventative measures to slow the spread of the virus. DHHS has established a website to help keep you and your family safe. Please visit: www.michigan.gov/coronavirus for commonsense measures we should all be aware of.

In addition to these commonsense guidelines, the state of Michigan has received new cleaning guidelines from DHHS, aimed at reducing the risk of further transmission of the virus. We are seeking your help to keep our staff and visitors safe as we conduct our day-to-day business operations.

How you can help:

We are asking that you work with your janitorial service provider to incorporate the following cleaning quidelines, effective immediately:

Increase cleaning procedures: 2 x a day

- Thoroughly disinfect all interior and exterior entry door hardware. This includes all push/panic bars, doorknobs, door levers and handicap entry buttons.
- Thoroughly disinfect all handrails in building entries or other common areas.
- Thoroughly disinfect all lobby mounted and cab mounted elevator call buttons. To avoid damage
 to elevator control systems and other electrical components, the appropriate disinfectant must not
 be sprayed directly onto elevator call buttons or panels. The disinfectant should first be applied to
 a cloth then wiped on the surface to be disinfected.
- Thoroughly disinfect all push/panic bars, doorknobs, door levers or other door opening devices on stairwell doors.
- Thoroughly disinfect all push/panic bars, doorknobs, door levers or other door opening devices on restroom doors.

We thank you for your partnership and for your efforts in helping to reduce the transmission of this virus.

Please contact Marchan Darby, DTMB Leasing Manager, at 517-282-6045 or <u>DarbyM@Michigan.gov</u> with any questions.

Sincerely,

Marchan Darby

DTMB Leasing Manager



Centers for Disease Control and Prevention (CDC) Atlanta GA 30333

Interim Recommendations regarding Shelter Characteristics for the 2019 Novel Coronavirus Outbreak United States Government Repatriation Operation 1 February 2020

Background:

In the setting of the expanding outbreak associated with a novel coronavirus from Wuhan, the United States Government has arranged for evacuation of US personnel in affected areas. Because these individuals will be evacuating from an outbreak zone, health screening and exposure risk assessments will be required to determine presence of illness or history of high-risk exposures upon entry to the US. Upon entry into the United States, these individuals will be placed under a quarantine order for 14 days after their last potential exposure to allow for illness detection and health monitoring. Individuals within the group will have different antecedent exposure risks. They should not be housed together in congregate settings, where an individual who becomes symptomatic could expose the rest of the evacuees.

Shelter requirements:

- 1) Separate quarters with separate bathroom facilities for each individual or family group are preferred.
 - a. Cleaning supplies, e.g. household cleaning wipes, must be provided in any shared bathroom.
 - b. If an individual sharing a bathroom becomes symptomatic, all others sharing the bathroom should be considered PUI contacts until the symptomatic person is appropriately evaluated and cleared.
- 2) No close congregation for social or dining activities. Food should be delivered to the individual quarters.
- 3) Overhead announcements and group SMS should be used instead of physical gatherings to share information.
- 4) Quarters should have a supply of face masks for individuals to put on if they become symptomatic.
- 5) Other support services (e.g. laundry, prescription medication refills, telephone/wifi/communication capability) will need to be provided.
- 6) Garbage should be bagged and left outside by the door of each of the quarters for routine pick up. Special handling is not required.
- Appropriate infection control capabilities to manage initial clinical assessment of individuals who become ill should include a designated room(s) with a door that can be closed. The room(s) should be separate from residential facilities. Symptomatic individuals should be promptly evaluated and, if appropriate, await transfer to a medical facility in the room keeping the door closed. The room should be supplied with disposable facemasks for the ill individual to wear throughout the evaluation and

- transport process. Cleaning supplies e.g., hospital disinfectant spray or wipes, should be stocked in each evaluation room to clean and disinfect the room's surfaces after it's vacated by the ill individual. Current CDC healthcare guidance is here: https://www.cdc.gov/coronavirus/2019-nCoV/hcp/index.html
- 8) Each residential space, all common areas for staff members, and each clinical evaluation room must have supplies of alcohol-based hand rubs, as well as sinks with soap and water, and paper towels.
- 9) PPE supplies (disposable face shields, N95 disposable respirators, disposable gowns and gloves) should be maintained in each clinical assessment area to allow for response and assessment of individuals who become ill.
- 10) A system for temperature and symptom monitoring should provide assessment in-place for the individuals/family groups in their separate quarters.
- Nearby medical facilities should have the capability to manage the assessment and treatment of ill persons (to include normal airborne infection isolation rooms)
- 12) The location should be secure against unauthorized access and be appropriate for enforcing quarantine, if enacted.

X on

Michael Bell, MD Deputy Director, Division of Healthcare Quality Promotion Centers for Disease Control and Prevention