

## **Midland Center for the Arts COVID-19 Preparedness and Response Plan**

In accordance with Executive Order 2020-70 Midland Center for the Arts (“Center”) institutes this COVID-19 Preparedness and Response Plan (“Plan”).

The Center aims to protect its workforce by enacting all appropriate prevention efforts. The Center is continually monitoring guidance from local, state, and federal health officials and implementing workplace and Plan modifications where appropriate.

The following employees have been designated as worksite supervisors to implement, monitor, and report on the COVID-19 control strategies that have been developed and included in this plan. One of these supervisors will be on-site at all times when employees are present on site.

Heath Hetherington, Director of Technical Services – Extension 1280  
Larry Salva, Facilities Director – Extension 1220  
Jon Loos, Vice President of Operations – Extension 1207  
Tina Siegmund, HR, Payroll & Benefits Manager  
Lynn Booms, Vice President of Finance – Extension 1211  
Dexter Brigham, Director of Theatre Programs – Extension 1270

Employees with questions are encouraged to contact Tina Siegmund (HR, Payroll & Benefits Manager) via phone at 989-631-5930 Extension 1201 and/or email at [siegmund@midlandcenter.org](mailto:siegmund@midlandcenter.org) or any of the other designated COVID-19 work site supervisor.

### **Prevention Efforts and Workplace Controls**

#### **1. Cleanliness and Social Distancing**

The Center will restrict the number of employees present on premises to no more than is strictly necessary, and employees who are able to perform their essential duties remotely may be permitted to work from home in accordance with approved telework arrangements.

When employees performing necessary work are directed to report on-site, the Center will abide by the recommended social distancing and other safety measures and establishes the following:

- Large gatherings will be minimized whenever possible; all staff meetings will be held remotely or in an area where social distancing can be maintained;
- Employees are encouraged to maintain physical distance even when on break, as well as before and after working hours;
- Employees are required to maintain physical distance when reporting to work, and, leaving work;
- The Center may utilize flexible work hours, wherever possible, to limit the number of employees simultaneously working on-site;
- Employees’ interactions with the general public are modified to allow for

- additional physical space between parties; and
- Non-essential travel is postponed or cancelled.

The Center will provide employees with, at a minimum, non-medical grade face coverings. Employees are required to wear a face covering when arriving to work, and at **ALL times when unable to maintain 6 ft social distancing.**

In addition, the Center is instituting the following cleanliness measures:

- Where possible, increasing ventilation rates and circulation throughout the facilities;
- Performing routine environmental cleaning and disinfection, especially of common areas; and
- Where available, providing hand sanitizer in high-traffic areas.

Employees are expected to minimize COVID-19 exposure by:

- Cleaning their workstations/offices at the beginning and end of each shift. The Center will provide recommended cleaning supplies;
- Avoiding, when possible, the use of other employees' phones, desks, offices, or other work tools and equipment;
- Frequently washing hands with soap and water for at least 20 seconds;
- Utilizing hand sanitizer when soap and water are unavailable;
- Avoiding touching their faces with unwashed hands;
- Avoiding handshakes or other physical contact;
- Avoiding close contact with sick people;
- Practicing respiratory etiquette, including covering coughs and sneezes;
- Immediately reporting unsafe or unsanitary conditions at our facilities;
- Complying with the Center's daily screening processes;
- Seeking medical attention and/or following medical advice if experiencing COVID-19 symptoms; and
- Complying with self-isolation or quarantine orders.

## **2. Supplemental Measures Upon Notification of Employee's COVID-19 Diagnosis and/or Symptoms**

An employee with a COVID-19 diagnosis or who displays symptoms consistent with COVID-19 will be immediately removed from the Center.

In response to a confirmed diagnosis or display of COVID-19 symptoms, The Center will:

- Inform all employees with and near whom the diagnosed/symptomatic employee worked of a potential exposure. Notification will be by letter to affected employees.;
- Keep confidential the identity of the diagnosed/symptomatic employee. Employees should not inquire as to who was infected; and
- Conduct deep cleaning of the diagnosed/symptomatic employee's workstation, as well as those common areas potentially infected by the employee.

All employees who worked in sustained, close proximity to the diagnosed/symptomatic employee will also be removed from the Center for at least 14 days; however, should these exposed employees later develop COVID-19 symptoms and/or receive a confirmed diagnosis, they may not report on-site until all return-to-work requirements are met, defined below.

The Center completes an OSHA Form 300, as well as a Form 301, “if it is more likely than not that a factor or exposure in the workplace caused or contributed to the illness.” If an employee infects a coworker, the coworker has suffered a work-related illness if one of the recording criteria (e.g., medical treatment or days away from work) is met.

### **3. Worker Exposure Classification**

The Center has two exposure classifications for employees based on how much the employee will be interacting with the public:

- a) Employees’ “worker exposure” is classified as lower risk by the Occupational Safety and Health Administration’s guidance when they do not frequently and/or closely interact with the general public, and social distancing can be maintained between coworkers.
  - Given this classification, no additional controls are recommended or required by OSHA at this time.
- b) Employees’ “worker exposure” is classified as medium risk by the Occupational Safety and Health Administration’s guidance when they frequently and/or closely interact with the general public, and social distancing cannot be maintained between coworkers.
  - Given this classification, the Center will provide the following controls in addition to the above- summarized prevention efforts:
    - installing physical barriers where feasible;
    - requiring public to wear masks when in the building
    - creating directional walking patterns

### **Identification and Isolation of Sick and/or Exposed Employees**

Risk and exposure determinations are made without regard to employees’ protected characteristics, as defined by local, state, and federal law.

Any health-related information and documentation gathered from employees is maintained confidentially and in compliance with state and federal law. Specifically, medical documentation is stored separate from employees’ personnel documentation.

#### **1. Employees’ Self-Monitoring**

The following employees should **not** report to work:

- Employees who display COVID-19 symptoms, such as fever, cough, shortness of breath, sore throat, new loss of smell or taste, and/or gastrointestinal

problems, including nausea, diarrhea, and vomiting, whether or not accompanied by a formal COVID-19 diagnosis;

- Employees who, in the last 14 days, have had close contact with and/or live with any person having a confirmed COVID-19 diagnosis; and
- Employees who, in the last 14 days, have had close contact with and/or live with any person displaying COVID-19 symptoms, such as fever, cough, shortness of breath, sore throat, new loss of smell or taste, and/or gastrointestinal problems, including nausea, diarrhea, and vomiting.

Such employees may only resume in-person work upon meeting all return-to-work requirements, defined below.

## **2. Daily Screenings**

To prevent the spread of COVID-19 and reduce the potential risk of exposure, the Center will screen employees on a daily basis.

All Employees prior to entering one of the Center Facilities will scan a QR Code with their cell phone, or complete a COVID-19 Self-Assessment online. If an employee does not have access to a cell phone or computer prior to arriving to our facilities, the employee can complete the Self-Assessment at their assigned workstation immediately upon arrival.

The Assessment will contain the following questions:

- 1) Have you been diagnosed with COVID-19 in the last 14 days?
  - a) If yes, access is denied, and employee is advised to self-isolate/self-quarantine at home, until employee is permitted to return to work as defined below.
- 2) Have you been in close contact with anyone diagnosed with COVID-19 in the last 14 days?
  - a) If yes, access is denied, and employee is advised to contact their supervisor or Human Resources immediately and self-isolate/self-quarantine at home, until at least 14 days after the close contact.
- 3) Are you currently experiencing COVID-19 symptoms, including any of the following: cough, respiratory illness, shortness of breath, sore throat, loss of taste or smell, or other cold/flu symptoms?
  - a) If yes, access is denied, an employee is advised to contact their supervisor or Human Resources and to self-isolate/self-quarantine at home, until employee is permitted to return to work as defined below.
- 4) Do you have a fever of 100.4 degrees Fahrenheit or higher?

- a) If yes, access is denied, and employee is advised to self-isolate/self-quarantine at home, until employee is permitted to return to work as defined below.

Employees who develop symptoms during the work day must immediately notify their supervisor and/or Human Resources.

### **3. Return-to-Work Requirements**

Employees who were themselves diagnosed with COVID-19 may only return to work upon confirmation of the cessation of symptoms and contagiousness, proof of which may be acquired via the test-based strategy or the non-test-based strategy.

The test-based strategy is preferred but relies upon the availability of testing supplies and laboratory capacity. Under this strategy, employees may discontinue isolation and return to work upon achieving the following conditions:

- Resolution of fever without the use of fever-reducing medications;
- Improvement in respiratory symptoms (e.g., cough, shortness of breath); **and**
- Negative results of an FDA Emergency Use Authorized molecular assay for COVID-19 from two consecutive nasopharyngeal swab specimens collected at least 24 hours apart.

Under the non-test-based strategy, employees may discontinue isolation and return to work upon achieving the following conditions:

- At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications;
- Improvement in respiratory symptoms (e.g., cough, shortness of breath); **and**
- At least 7 days have passed since symptoms first appeared.

Employees who came into close contact with, or live with, an individual with a confirmed diagnosis or symptoms may return to work after either 14 days have passed since the last close contact with the diagnosed/symptomatic individual, or the diagnosed/symptomatic individual receives a negative COVID-19 test.

Employees are typically required to submit a release to return to work from a healthcare provider; given the current stressors on the healthcare system, the Center may accept written statements from employees confirming all the factors supporting their release.

### **Workplace Flexibilities and Potential Benefits for Employees Affected by COVID-19**

Employees may be eligible for paid and unpaid leaves of absence.

Employees may be permitted to utilize available paid-time off provided under the Center policy concurrently with or to supplement any approved leave.

## 1. FFCRA

Employees may qualify for two different types of paid leave under the Families First Coronavirus Response Act (“FFCRA”).

Under the Emergency Paid Sick Leave Act (“EPSLA”), employees may seek up to two weeks (i.e., 10 business days) of paid leave for the following reasons:

- 1) Subject to a Federal, State, or local quarantine or isolation order related to COVID-19;
- 2) Advised to self-quarantine due to concerns related to COVID-19;
- 3) Experiencing symptoms of COVID-19 and seeking a medical diagnosis;
- 4) Caring for an individual subject to a quarantine or isolation order or advised to self-quarantine due to concerns related to COVID-19;
- 5) Caring for a son or daughter whose school or childcare provider is closed or unavailable due to COVID-19 precautions; and
- 6) Experiencing any other substantially similar condition specified by the Secretary of Health and Human Services, in consultation with the Secretary of the Treasury and the Secretary of Labor. (Please note, the Secretary of Health and Human Services has not defined conditions which trigger this subpart under the EPSLA.)

For full-time employees, two weeks of leave equates to 80 hours; for part-time employees, two weeks of leave equates to a number of hours equivalent to the number of hours usually worked in a two-week period.

Paid leave for reasons 1, 2, and 3, above, is paid at the employee’s regular rate of pay, capped at \$511/day. Paid leave for reasons 4, 5, and 6, above, is paid at a rate equivalent to two-thirds of an employee’s regular rate of pay or minimum wage, whichever is greater, capped at \$200/day.

Under the Emergency Family and Medical Leave Expansion Act, employees may seek up to twelve weeks of leave to care for a son or daughter whose school or childcare provider is closed or unavailable due to COVID-19 precautions. The first two weeks of leave, which run concurrently with the EPSLA leave, may be unpaid; the remaining ten weeks of leave are paid at a rate equivalent to two-thirds of an employee’s regular rate of pay or minimum wage, whichever is greater, capped at \$200/day.

## 2. Executive Order 2020-36

Employees who require leave beyond the EPSLA because of their own COVID-19 diagnosis/symptoms, or because they have had close contact or live with an individual with a COVID-19 diagnosis/symptoms, may be eligible for unpaid leave under Executive Order 2020-36 until permitted thereunder to return to work.

## 3. Unemployment Compensation Benefits

Under Executive Order 2020-57, and the federal CARES Act, unemployment compensation benefits are expanded in terms of eligibility, amount, and duration.

Employees who are unable to report to work for reasons related to COVID-19 are referred to Human Resources for information on unemployment compensation benefits. Such reasons include the following:

- Being under self-isolation or self-quarantine in response to elevated risk from COVID-19 due to being immunocompromised;
- Displaying at least one of the principal symptoms of COVID-19 (i.e., fever, atypical cough, atypical shortness of breath);
- Having close contact in the last 14 days with a confirmed COVID-19 diagnosis;
- Needing to care for someone with a confirmed COVID-19 diagnosis; and
- Fulfilling a family care responsibility as a result of a government directive (e.g., caring for a child whose school or childcare provider is closed or otherwise unavailable due to COVID-19).

#### **4. FMLA and ADA**

Employees may be entitled to unpaid leave under the Family and Medical Leave Act (“FMLA”) if their absence is related to their own serious health condition or that of a family member. COVID-19 may constitute a serious health condition where “complications arise.”

The Center is also mindful of its obligations under the Americans with Disabilities Act (“ADA”). Specifically, if an employee requests an accommodation because of a condition that may be complicated by COVID-19 (e.g., cystic fibrosis, emphysema, COPD), then the Center engages in the interactive process to provide a reasonable accommodation. This may mean allowing the employee to work remotely (if reasonable) or work an alternative schedule.

#### **Plan Updates and Expiration**

This Plan responds to the COVID-19 outbreak. As this pandemic progresses, the Center will update this Plan and its corresponding processes.

This Plan will expire upon conclusion of its need, as determined by the Center and in accordance with guidance from local, state, and federal health officials.