Anton Art Center
Reopening Plan
July 1, 2020

In response to the COVID-19 pandemic, the Anton Art Center will use this reopening plan which is aligned with Governor Whitmer’s MI Safe Start Plan, issued May 7, 2020, and guidance from MIOSHA, OSHA, and the CDC. This plan is reviewed by administration regularly to ensure compliance with updated guidance from relevant authorities, as well as appropriate consideration for employee comfort and confidence in these measures. Updates to this plan will be made by administration as deemed appropriate and necessary.

It is important to note that this plan does not lay out specific dates; rather, it is designed to allow administrative discretion on timelines, and to facilitate operations under different phases of the MI Safe Start plan.

Section 1: Organizational Response

<table>
<thead>
<tr>
<th>Phase 1: Uncontrolled Growth</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full facility closed to the public, only essential staff allowed to report</td>
</tr>
</tbody>
</table>

- Telework implemented for all staff
- Only essential staff may report to the building, and only for work that cannot be completed remotely
- All public programming transitioned online, postponed, or canceled as appropriate; refunds issued as appropriate
- Implement Exposure Controls (see Section 2: Exposure Controls)
- Information on AAC response and personal risk mitigation will be provided to staff, volunteers, students, and other stakeholders
- Feedback will be gathered on administrative concerns such as return of tuition payments, artwork pickup from current exhibits, etc.
- Evaluations will be administered to stakeholders in an effort to continuously gauge effectiveness of customer service, program operations, feelings on reopening, etc.

<table>
<thead>
<tr>
<th>Phase 2: Persistent Spread</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full facility closed to the public, only essential staff allowed to report</td>
</tr>
</tbody>
</table>

- Telework implemented for all staff
- Only essential staff may report to the building, and only for work that cannot be completed remotely
- All public programming transitioned online, postponed, or canceled as appropriate; refunds issued as appropriate
- Implement Exposure Controls (see Section 2: Exposure Controls)
• Information on AAC response and personal risk mitigation will be provided to staff, volunteers, students, and other stakeholders
• Feedback will be gathered on administrative concerns such as return of tuition payments, artwork pickup from current exhibits, etc.
• Evaluations will be administered to stakeholders in an effort to continuously gauge effectiveness of customer service, program operations, feelings on reopening, etc.

<table>
<thead>
<tr>
<th>Phase 3: Flattening</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full facility closed to the public, only essential staff allowed to report</td>
</tr>
</tbody>
</table>

• Telework implemented for all staff
• Only essential staff may report to the building, and only for work that cannot be completed remotely
• All public programming transitioned online, postponed, or canceled as appropriate; refunds issued as appropriate
• Implement Exposure Controls (see Section 2: Exposure Controls)
• Information on AAC response and personal risk mitigation will be provided to staff, volunteers, students, and other stakeholders
• Feedback will be gathered on administrative concerns such as return of tuition payments, artwork pickup from current exhibits, etc.
• Evaluations will be administered to stakeholders in an effort to continuously gauge effectiveness of customer service, program operations, feelings on reopening, etc.

<table>
<thead>
<tr>
<th>Phase 4: Improving</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full facility closed to the public, essential staff allowed to report and other staff may be scheduled if appropriate and necessary; classes may be held with restrictions if deemed safe</td>
</tr>
</tbody>
</table>

• Telework implemented for all staff
• Essential staff may report to the building, and only for work that cannot be completed remotely
• Some non-essential staff may be scheduled to report to the building if appropriate, schedules will be staggered to limit the number of people in the building
• All public programming transitioned online, postponed, or canceled as appropriate; limited in-person programming may proceed if allowed by applicable guidance
• Operate retail as curbside or shipped goods
• Implement Exposure Controls (see Section 2: Exposure Controls)
• Information on AAC response and personal risk mitigation will be provided to staff, volunteers, students, and other stakeholders
• Feedback will be gathered on administrative concerns such as return of tuition payments, artwork pickup from current exhibits, etc.
• Evaluations will be administered to stakeholders in an effort to continuously gauge effectiveness of customer service, program operations, feelings on reopening, etc.
Phase 5: Containing

Galleries and classes open with attendance/access by appointment only, Gift Shop remains closed, staff scheduled as necessary

- Open to public with attendance/access by appointment only, though staff will discuss possibilities and opportunities for opening with limited occupancy rather than by appointment
- Limited in-person programming if appropriate
- Telework implemented for all staff, though some on-site scheduling may be allowed if appropriate and necessary
- In-person programming held on a limited basis as allowed, all other public programming transitioned online, postponed, or canceled as appropriate; refunds issued as appropriate
- Implement Exposure Controls (see Section 2: Exposure Controls)
- Information on AAC response and personal risk mitigation will be provided to staff, volunteers, students, and other stakeholders
- Feedback will be gathered on administrative concerns such as return of tuition payments, artwork pickup from current exhibits, etc.
- Evaluations will be administered to stakeholders in an effort to continuously gauge effectiveness of customer service, program operations, feelings on reopening, etc.

Phase 6: Post-pandemic

Full facility reopens to the public

- Return to normal operations with continued vigilance
- Implement Exposure Controls (see Section 2: Exposure Controls)
- Information on AAC response and personal risk mitigation will be provided to staff, volunteers, students, and other stakeholders
- Evaluations will be administered to stakeholders in an effort to continuously gauge effectiveness of customer service, program operations, feelings on reopening, etc.

Section 2: Exposure Controls

<table>
<thead>
<tr>
<th>Sources of Exposure</th>
<th>Co-workers</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Volunteers</td>
</tr>
<tr>
<td></td>
<td>Students</td>
</tr>
<tr>
<td></td>
<td>General public</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Shared Equipment &amp; Workstations</th>
<th>Administrative Office</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Reception area</td>
</tr>
<tr>
<td></td>
<td>Copier</td>
</tr>
<tr>
<td></td>
<td>Shredder</td>
</tr>
</tbody>
</table>
| Exhibit Galleries          | • Fax  
|                          | • Laminator  
|                          | • Postage machine  
| Gift Shop                | • Volunteer station  
|                          | • Loading dock area  
|                          | • Other furniture and fixtures  
| Classrooms               | • Storage units  
|                          | • Tables and chairs  
|                          | • Sinks  
|                          | • Other furniture and fixtures  
| Kitchens – Basement and 2\textsuperscript{nd} Floor |  
| Basic Infection Prevention | • Hand sanitizer containing greater than 60% alcohol provided for each employee workspace, as well as in common areas throughout the building  
|                          | • Disposable tissues and lined trash receptacles located in restrooms and common areas, incl. elevator  
|                          | • Restrooms located on each floor, kitchen areas in basement and second floor, and classrooms in basement available for handwashing  
|                          | • Regular cleaning and disinfecting of common areas, equipment, etc. (see Section 3: Items/Areas for Regular Cleaning & Disinfection)  
| Exposure Controls: Engineering | • High-efficiency air filters installed in mechanical systems  
|                          | • Increased ventilation where possible  
|                          | • Plastic barrier at volunteer station in Gift Shop  
|                          | • Use plastic barriers in classroom spaces as appropriate  
|                          | • Limit number of chairs at classroom tables to facilitate social distancing, spread tables out as appropriate  
|                          | • Office door remains closed and number of guests will be limited to one at a time  
| Exposure Controls: Administrative | • Implement telework and limit number of staff on site  
|                          | • Daily employee health screenings (see Appendix D: COVID-19 Workplace Health Screening Form)  
|                          | • Volunteer and visitor health screenings for those with appointments; to be completed by the employee hosting the visitor (see Appendix D: COVID-19 Workplace Health Screening Form)  
|
- Increase physical space between employees by moving workspaces; staff should only use equipment and supplies at their personal workstations
- Move classes or other programs to areas of the building away from other activities to ensure appropriate social distancing
- Practice social distancing and provide visual cues where appropriate
- Encourage hand hygiene etiquette & use of noncontact methods of greeting
- Post signage related to COVID-19 signs, symptoms & related resources
- Minimize in-person contact for meetings or other reasons, utilize virtual meetings as often as possible
- Staff and volunteer training on personal risk mitigation (see Section 4: Personal Risk Mitigation)
- Staff, volunteers, students and visitors must stay home if they are sick or caring for a sick individual, particularly if they are experiencing symptoms of COVID-19
- Any person who came in close contact with another person who has been diagnosed with COVID-19 should not report to the facility and instead self-quarantine for the recommended amount of time
- Any employee, instructor, student or volunteer who tests positive for COVID-19 should report that result to administration for appropriate followup
- Any employee, instructor, student or volunteer who has been diagnosed with COVID-19 or believes they have contracted COVID-19 must stay home until:
  - At least three (3) days have passed without fever or use of fever-reducing medications
  - AND improvement in respiratory symptoms (cough/shortness of breath)
  - AND at least seven (7) days have passed since symptoms first appeared
  - All three conditions must be met before an employee or volunteer will be approved to return to work.
- Assign COVID-19 Response Coordinator

<table>
<thead>
<tr>
<th>Personal Protective Equipment</th>
<th>Medium Risk Exposure when facility is open to the public or holding classes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Face masks required to be worn by visitors and volunteers</td>
</tr>
<tr>
<td></td>
<td>Face masks must be worn by staff when interacting with visitors and volunteers, and when not seated at their workspace</td>
</tr>
</tbody>
</table>
Lower Risk Exposure when facility is closed to the public

- Face masks must be worn when social distancing is not possible

If an individual begins experiencing symptoms of COVID-19 on site, they will be asked to wear a mask and leave as soon as possible. If they require isolation or medical care, they will be isolated in the Loading Dock area until appropriate medical attention can be provided. In the case that someone needs medical attention, the COVID-19 Response Coordinator or designee should contact 911 for assistance. See Section 6: Chain of Command for Immediate Response

Section 3: Items/Areas for Regular Cleaning & Disinfection

High-use items and areas are to be cleaned and disinfected daily, Gift Shop areas will be cleaned and disinfected twice daily when in use, and classroom areas will be cleaned and disinfected after each class. Items and areas that are visibly dirty will be cleaned using soap and water prior to disinfection, and all items and areas will be disinfected with an EPA-approved product effective against COVID-19 and following area-specific checklists for each part of the facility. See Appendix E: CDC Cleaning & Disinfection Decision Tool.

These items include:
- Elevator, including call buttons on all floors
- Light switches
- Doorknobs
- Handrails on stairs and in bathrooms
- Tables and chairs that are in use or have been used that day
- Phones
- Gift Shop checkout area
- Bathrooms
- Kitchens
- Toilets
- Countertops
- Keys
- Refrigerator, microwave, coffee maker, etc.
- Copy machine
- Cupboards in office and kitchen
- Filing cabinets
- Thermostats
- Keys
- Alarm keypads
- Radios
- Kilns
- Supplies
Section 4: Personal Risk Mitigation
Use CDC best practices to prevent illness:

- Clean your hands often using soap and water, or a hand sanitizer containing at least 60% alcohol
- Cover coughs and sneezes
- Avoid close contact with others – a minimum of six feet where possible
- Wear a facemask in enclosed public spaces and where social distancing is not possible
- If you get sick, leave as soon as possible
- Clean and disinfect frequently touched surfaces daily
- Stay home if you’re sick or caring for a sick individual
- Stay home if you have come into contact with someone who was diagnosed with COVID-19

Section 5: Essential Business Functions and Personnel
Essential business functions must be maintained by the Office Manager during any required closure as outlined in this reopening plan. The Office Manager will be designated as “Essential Staff” by the Executive Director and allowed access to the facility to ensure these essential business functions will be addressed:

- Bill payment, including utilities
- Monitoring of mechanical systems to ensure proper operation
- Collecting and sending mail as needed
- Processing payments and making bank deposits as needed

Access to the facility for other staff during any periods of closure will require the approval of the Executive Director.

Section 6: Chain of Command for Immediate Response
The Executive Director will serve as the COVID-19 Coordinator, though in the Executive Director’s absence, this chain of command will indicate an appropriate designee. In the circumstance that a problem or issue arises related to COVID-19 which requires immediate attention (such as the isolation of someone who developed symptoms on-site and needs medical care), this chain of command should be followed to facilitate an immediate response:

1. Executive Director
2. Office Manager
3. Exhibition Manager
4. Education Coordinator
5. Grant Coordinator

If an individual is not on site, the next person in the chain of command should respond.

Steps to take in case an immediate response is required:
These steps are to be implemented by the COVID-19 Coordinator or appropriate designee as indicated in the chain of command.
1. Ask affected individuals to leave the premises immediately or isolate in the Loading Dock area if they are unable to leave due to a need for medical attention. If medical attention is refused or unnecessary, individual in question is required to leave the premises. Call 911 if medical attention is necessary.

2. Call the Executive Director to apprise them of the situation, if they are not already on site.

3. Close the facility to the public.

4. Dismiss all volunteers on site.

5. Instruct staff to implement cleaning protocols in all areas of the building.

6. Once cleaning protocols are completed, dismiss staff and vacate facility.

7. Executive Director will make a determination on how soon to reopen the facility and coordinate telework for any employee who may have been exposed to COVID-19 for an appropriate period of time.

**Appendices**

Appendix A      MI Safe Start Plan
Appendix B      Understanding COVID-19 Precautions
Appendix C      CDC Reopening Decision Tree
Appendix D      COVID-19 Workplace Health Screening Form
Appendix E      CDC Cleaning & Disinfection Decision Tool
MI SAFE START
A PLAN TO RE-ENGAGE
MICHIGAN'S ECONOMY

Governor Gretchen Whitmer

May 7, 2020
### MI SAFE START PLAN

<table>
<thead>
<tr>
<th>1 Uncontrolled growth</th>
<th>2 Persistent spread</th>
<th>3 Flattening</th>
<th>4 Improving</th>
<th>5 Containing</th>
<th>6 Post-pandemic</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>What’s happening with the disease?</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Increasing number of new cases every day, likely to overwhelm the health system</td>
<td>Continue to see high case levels with concern about health system capacity</td>
<td>Case growth is gradually declining</td>
<td>Cases, hospitalizations and deaths are clearly declining</td>
<td>Continued case and death rate improvements and outbreaks can be quickly contained</td>
<td>Community spread not expected to return</td>
</tr>
<tr>
<td>Stay Home, Stay Safe: Strict social distancing, travel restrictions, face coverings, hygiene best practices, remote work</td>
<td>Stay Home, Stay Safe: Continued distancing, face coverings, safe workplace practices, remote work</td>
<td>Safer at Home: Continued distancing, increased face coverings No gatherings</td>
<td>Safer at Home: Continued distancing, face coverings, safe workplace practices Small gatherings</td>
<td>Stay Safe: Adherence to new guidelines. Continued distancing, coverings, mitigated workplaces</td>
<td>Sufficient community immunity and availability of treatment</td>
</tr>
<tr>
<td><strong>What work can we do?</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Critical infrastructure • First responders • Health care workers • Critical manufacturing • Food and agriculture • Essential retail (e.g., grocery) • Transportation</td>
<td>Critical infrastructure • Additional types of recreation allowed</td>
<td>Specified lower-risk businesses with strict workplace safety measures • Construction • Manufacturing • Real estate • Outdoor work</td>
<td>Additional lower-risk businesses with strict safety measures • Other retail, with capacity limits • Offices, but telework required if possible</td>
<td>Increased size gatherings Most businesses, with strict mitigation measures • Restaurants / bars • K-12 and higher ed. (live instruction) • Travel</td>
<td>All businesses Events and gatherings of all sizes with new safety guidance and procedures Social distancing rules are relaxed and large events are permitted</td>
</tr>
<tr>
<td><strong>What factors determine progression to next phase?</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Analysis shows epidemic growth rates slowing Hospital and treatment capacity built, alternative care facilities established Infrastructure for crisis response and data systems to monitor progression are in place</td>
<td>Cases, deaths decline for extended period Monitor impact on vulnerable populations Sufficient health system capacity in place Improved testing, contact tracing and containment capacity</td>
<td>Cases and deaths decline more sharply, percent positivity decreasing Healthcare system capacity continues to strengthen Robust testing, contact tracing and containment protocols in place</td>
<td>Cases and deaths at low absolute rates per capita Health system capacity is very strong Robust testing, contact tracing and containment protocols in place</td>
<td>High uptake of an effective therapy or vaccine</td>
<td></td>
</tr>
</tbody>
</table>

**Note:** This framing is being updated and refined as additional guidance from CDC and public health experts becomes available.

**It is also possible to move backwards if risk increases and if we stop adhering to safe practices.**
MICHIGAN ECONOMIC RECOVERY COUNCIL REPORTING REGIONS

MERC Regions
1 Detroit Region
2 Grand Rapids Region
3 Kalamazoo Region
4 Saginaw Region
5 Lansing Region
6 Traverse City Region
7 Jackson Region
8 Upper Peninsula

MI Safe Start: A Plan to Re-Engage Michigan’s Economy
INTRODUCTION

We have made tremendous progress in fighting COVID-19 in Michigan. Our medical workers, first responders, and other critical workers have put their lives on the line for us every day, and we owe it to them to do whatever we can to stop the spread of the virus.

All of us know the importance of getting the economy moving again. We have already loosened some restrictions on landscaping, construction, and manufacturing. But the worst thing we could do is open up in a way that causes a second wave of infections and death, puts health care workers at further risk, and wipes out all the progress we’ve made.

We will keep listening to experts and examining the data here in Michigan to reduce deaths, keep our healthcare system from collapsing, and protect those working on the front lines.

Together, we will move forward.

Governor Gretchen Whitmer’s MI Safe Start Plan outlines how we will begin to re-engage while continuing to keep our communities safe. Re-engagement will happen in phases. Those businesses that are necessary to protect and sustain life are already open. As we move into lower-risk phases, additional business categories will re-open and the restrictions on public gatherings and social interactions will ease.

As always, we will be guided by the facts in deciding whether to transition from one phase to another. We are looking at data every day to understand where we are: data that tells us where the epidemic is spreading, whether our hospitals and other health-care providers can safely cope with any surge in infections, and whether our public health system is up to the task of suppressing new outbreaks.

We need to keep working to expand testing and require people who test positive, or are close contacts of those who do, to self-isolate. Moving too fast without the tests we need could put Michigan at risk of a second wave of infections. The most important thing right now is to listen to the experts and follow the medical science.

We are also looking at the best available evidence on the risks that different business sectors present and the steps that can be taken to mitigate those risks and protect workers. Our Safe Start Plan has been guided by the state’s top public health and university experts, and is based on input from a wide range of experts, including the CEOs of major Michigan companies, labor and union leaders, and small business owners around Michigan.

We must reopen gradually and safely. By proceeding incrementally, we can evaluate the effects of our decisions. If cases start to surge, we may need to tighten up again. If the disease is contained, we can keep relaxing. The MI Safe Start Plan will re-engage our economy carefully and deliberately to avoid a second wave of infections.

This will be a long process. Our ability to move forward depends on all of us and on our collective commitment to protecting ourselves and others—whether at home, at work, or anywhere else we go. We will always put the health and safety of Michiganders first.
STAGES OF OUR RESPONSE

In Governor Whitmer’s Safe Start Plan, we evaluate where the state and each of its regions are across six phases of this epidemic:

1. **Uncontrolled growth**: Increasing number of new cases every day, likely to overwhelm the health system. Only critical infrastructure remains open.

2. **Persistent spread**: Continue to see high case levels with concern about health system capacity. Only critical infrastructure remains open, with lower-risk recreational activities allowed.

3. **Flattening**: Epidemic is no longer increasing and health system capacity is sufficient for current needs. Specified lower-risk businesses can reopen given adherence to strict safety measures.

4. **Improving**: Epidemic clearly decreasing and health system capacity is strong with robust testing and contact tracing. Additional businesses can reopen given adherence to strict safety measures.

5. **Containing**: Epidemic levels are extremely low and outbreaks can be quickly contained. Health system capacity is strong with robust testing and tracing. Most businesses can reopen given adherence to strict safety measures.

6. **Post-pandemic**: Community spread is not expected to return (e.g., because of a vaccine) and the economy is fully reopened.

Assessing which phase we are in involves a comprehensive review of the facts on the ground. Guided by our experts, we are closely monitoring data that allows us to answer three questions:

A. Is the epidemic growing, flattening, or declining?

B. Does our health system have the capacity to address current needs? Can it cope with a potential surge of new cases?

C. Are our testing and tracing efforts sufficient to monitor the epidemic and control its spread?

We have also worked with our best public health experts and the business community to assess the infection risks posed by workplaces across every sector of the economy. In general, those businesses that are likely to re-open sooner are those that present lower levels of infection risk and whose work cannot be performed remotely. We have also evaluated risk mitigation strategies to minimize the chance that any infection will spread at the workplace. Within each phase, businesses may reopen in a staggered manner to ensure safety. Finally, as our understanding of this disease improves, our assessments of what is appropriate in each phase could change to match the latest scientific evidence.

We are also establishing working groups to advise the state on how we can safely re-engage child care and summer camps, as well as businesses such as restaurants and bars, travel and tourism, and entertainment venues, so that when it is safe, there are best practices established for how to partially open in a low-risk manner.

The following sections outline our approach for moving between phases as well as details on each phase of the MI Safe Start Plan.
When do we move between phases?

Guided by our public health experts, we are carefully evaluating the best available data to understand the degree of risk and readiness in Michigan. We are complementing that analysis with an understanding of the on-the-ground contextual realities. This comprehensive assessment is a critical input into whether we are prepared to move to the next phase and – just as importantly – whether the disease is surging and we need to adjust our approach.

It is crucial that we monitor the impact of each set of re-engagement activities before moving into the next phase. New transmission can take some time to become visible, and we need to understand any impact of previous re-engagement activities on new disease spread before evaluating a transition to the next stage. As we move into later phases, or if our progress stalls out, it may take longer to move from one phase to another.

Furthermore, it is important to evaluate indicators together: even though some may point to a lower level of risk, others may not. For example, if cases are declining but the health system does not have capacity to address a sudden uptick in cases, the degree of overall risk may still be high.

We will also examine whether different regions within Michigan may be at different phases. That inquiry, too, must be holistic: a region with a low rate of infection may have limited hospital capacity, for example, which puts it at relatively greater risk if an outbreak occurs. Where appropriate, however, regional tailoring makes sense for a state as large and diverse as ours.

Examples of the evidence reviewed for each of the three questions is described below:

A. Is the epidemic growing, flattening, or declining?

Evidence analyzed includes:

- **The number of new cases per million**: low levels of new cases can suggest limited continued transmission; high levels of new cases can suggest continued transmission activity.

- **Trends in new daily cases**: sustained decreases may suggest that there has not been new takeoff of the disease; increases would provide concern that there has been new takeoff.

- **% positive tests**: if testing levels are high, a low proportion of positive tests is further evidence of declining spread, and also suggests that we have a good understanding of the state of the epidemic. If there is a high proportion of positive tests, it could suggest further disease spread, or that we have a poor understanding of the true extent of the epidemic.
B. Does our health system have the capacity to address current needs as well as a potential increase, should new cases emerge?

Evidence analyzed includes:

- **Hospital capacity:** if hospitals are able to surge to accommodate a higher case load, it suggests that, if a small uptick in new cases occurred during additional re-engagement, our health system would not be overwhelmed. If hospitals are not able to surge in this way, any new case spread could threaten our health system.

- **PPE availability:** if hospitals have sufficient PPE to manage increased caseloads, it suggests health system capability to handle a small uptick in new cases.

C. Are our testing and tracing efforts sufficient to monitor the epidemic and control its spread?

Evidence analyzed includes:

- **Testing capacity:** if we are able to ensure that the individuals at risk in each re-engagement phase have access to testing when needed, we will be able to give individuals the information they need to stay safe and, at the same time, allow us to closely track the impact of re-engagement activities on our case growth. If we do not have this testing capacity, it will be harder to give our people and our decision-makers the information they need.

- **Tracing and containment effectiveness:** if we are able to quickly follow up on any newly identified cases and associated contacts, and if those individuals effectively self-isolate, we can more successfully contain any new increase in disease spread. Otherwise, transmission is likely to be higher, increasing our risk.

As new guidance continues to be provided by the CDC and other public health experts, our assessment will adjust to be continually informed by the best available science.
PHASE 1: UNCONTROLLED GROWTH

The number of daily new cases increases by a constant rate every day, which leads to an increasingly accelerating case curve. If a community remains in this phase for an extended period of time, healthcare facilities could quickly be overwhelmed. Because unmitigated behavior contributes to the exponential growth, communities can slow the growth rate and exit this phase by introducing social distancing practices and wearing masks when in public.

**What does it look like**

**What work can we do**

**What do we need to do to stay safe**

**Businesses and organizations**

Only work that is necessary to protect or sustain life will be permitted

- **Retail:** Limited to grocery stores and other critical retail (e.g., pharmacies)
- **Public Transportation:** Permitted
- **Restaurants & Bars:** Available for take-out, delivery and drive-through only
- **Manufacturing:** Critical manufacturing only
- **Construction:** Only permitted for critical infrastructure projects
- **Food & Agriculture:** Permitted
- **Offices:** Closed to all non-critical workers during this phase
- **Education & Child Care:** Remote learning in K-12 and higher education, child care for critical workers

**Personal and social**

- **Social Distancing:** In place, maintain a six-foot distance from others when outdoors / in public
- **Face coverings:** Required
- **Gatherings:** Not permitted
- **Outdoor Recreation:** Walking, hiking, biking permitted
- **Quarantine/Isolation:** Individuals who have confirmed or suspected COVID-19 must isolate, and any individual with a known exposure must quarantine, according to CDC and public health guidance
- **At-risk populations:** All at-risk individuals should continue to shelter in place. Members of households with at-risk residents should be aware that by returning to work or other environments where distancing is not possible, they could carry the virus back home. Precautions should be taken to isolate from at-risk residents. Businesses should strongly consider special accommodations for personnel who are members of an at-risk population
### PHASE 2: PERSISTENT SPREAD

#### What does it look like

This phase occurs after the Uncontrolled Growth phase, but when the epidemic is still expanding in the community. There are still high case levels, but the growth rate might gradually decrease. Within this phase, the epidemic is widespread in a community and source of infection is more difficult to trace. Even though the growth rate of new cases is decreasing, high volumes of infected individuals mean that health systems could become overwhelmed, leading to higher mortality rates. During this phase, it is important to maintain social distancing practices in order to slow the spread to a level that health systems can handle as they are continuing to build capacity.

#### What work can we do

**Businesses and organizations**

Only work that is necessary to protect or sustain life will be permitted

- **Retail:** Limited to grocery stores and other critical retail (e.g., pharmacies), plus curbside or delivery for nonessential retail
- **Public Transportation:** Permitted
- **Restaurants & Bars:** Available for take-out, delivery and drive-through only
- **Manufacturing:** Critical manufacturing only
- **Construction:** Only permitted for critical infrastructure projects
- **Food & Agriculture:** Permitted
- **Offices:** Closed to all non-critical workers during this phase
- **Education & Child Care:** Remote learning in K-12 and higher education, child care for critical workers

#### What do we need to do to stay safe

**Personal and social**

- **Social Distancing:** In place, maintain a six-foot distance from other when outdoors / in public
- **Face coverings:** Required
- **Gatherings:** Not permitted
- **Outdoor Recreation:** Walking, hiking, biking permitted. Additional recreation allowed, including golfing and motorboating
- **Quarantine/Isolation:** Individuals who have confirmed or suspected COVID-19 must isolate, and any individual with a known exposure must quarantine, according to CDC and public health guidance
- **At-risk populations:** All at-risk individuals should continue to shelter in place. Members of households with at-risk residents should be aware that by returning to work or other environments where distancing is not possible, they could carry the virus back home. Precautions should be taken to isolate from at-risk residents. Businesses should strongly consider special accommodations for personnel who are members of an at-risk population
This phase occurs when daily new cases and deaths remain relatively constant over a time period. Often, this occurs because communities have started to use social distancing practices and transmission rates have fallen to manageable levels. Because new cases are not constantly increasing, health system capacity has time to expand to epidemic needs and is not typically overwhelmed. During this phase, testing and contact tracing efforts are ramped up statewide. To prevent each infected individual from spreading the virus unchecked, rapid case investigation, contact tracing, and containment practices are necessary within a community.

**Businesses and organizations**

Non-critical businesses that pose lower risk of infection are able to open with increased safety measures during this phase:

- **Retail**: Limited to grocery stores and other critical retail (e.g., pharmacies), plus curbside or delivery for nonessential retail
- **Public Transportation**: Permitted
- **Restaurants & Bars**: Available for take-out, delivery and drive-through only
- **Manufacturing**: Permitted with additional safety measures and guidelines
- **Construction**: Permitted with additional safety measures and guidelines
- **Food & Agriculture**: Permitted
- **Offices**: Closed to all non-critical workers
- **Education & Child Care**: Remote learning in K-12 and higher education, child care for critical workers and anyone resuming work activities
- **Outdoor work**: Permitted with additional safety measures and guidelines

**Personal and social**

- **Social Distancing**: In place, maintain a six-foot distance from other when outdoors / in public
- **Face coverings**: Required
- **Gatherings**: Not permitted
- **Outdoor Recreation**: Walking, hiking, biking, golfing, boating permitted
- **Quarantine/Isolation**: Individuals who have confirmed or suspected COVID-19 must isolate, and any individual with a known exposure must quarantine, according to CDC and public health guidance
- **At-risk populations**: All at-risk individuals should continue to shelter in place. Members of households with at-risk residents should be aware that by returning to work or other environments where distancing is not possible, they could carry the virus back home. Precautions should be taken to isolate from at-risk residents. Businesses should strongly consider special accommodations for personnel who are members of an at-risk population
PHASE 4: IMPROVING

What does it look like

This phase occurs when the number of new cases and deaths has fallen for a period of time, but overall case levels are still high. When in the Improving phase, most new outbreaks are quickly identified, traced, and contained due to robust testing infrastructure and rapid contact tracing. Health system capacity can typically handle these new outbreaks, and therefore case fatality rate does not rise above typical levels. Though a community might be in a declining phase, the overall number of infected individuals still indicate the need for distancing to stop transmission and move to the next phase.

Businesses and organizations

Most business and organizations will be open throughout this phase under strict safety measures. These include:

- **Retail**: Permitted with additional safety measures and guidelines (e.g., limited capacity)
- **Public Transportation**: Permitted
- **Restaurants & Bars**: Available for take-out, delivery and drive-through only
- **Manufacturing**: Permitted with additional safety measures and guidelines
- **Construction**: Permitted with additional safety measures and guidelines
- **Food & Agriculture**: Permitted
- **Offices**: Open (remote work still required where feasible)
- **Education**: Remote learning in K-12 and higher education, summer programs in small groups
- **Outdoor work**: Permitted with additional safety measures and guidelines

Personal and social

- **Social Distancing**: In place, maintain a six-foot distance from other when outdoors / in public
- **Face coverings**: Required
- **Gatherings**: Limited to small groups with social distancing
- **Outdoor Recreation**: Walking, hiking, biking, golfing, boating permitted. Activities permitted in small groups with social distancing
- **Quarantine/Isolation**: Individuals who have confirmed or suspected COVID-19 must isolate, and any individual with a known exposure must quarantine, according to CDC and public health guidance
- **At-risk populations**: All at-risk individuals should continue to shelter in place. Members of households with at-risk residents should be aware that by returning to work or other environments where distancing is not possible, they could carry the virus back home. Precautions should be taken to isolate from at-risk residents. Businesses should strongly consider special accommodations for personnel who are members of an at-risk population

What work can we do

What do we need to do to stay safe
During the Containing phase, new cases and deaths continue to decrease for an additional period of time. At this point, the number of active cases has reached a point where infection from other members of the community is less common. With widespread testing, positivity rates often fall much lower than earlier phases. Rapid case investigation, contact tracing, and containment strategies cause new cases to continue to fall. However, if distancing and other risk mitigation efforts are not continued, infections could begin to grow again because a permanent solution to the epidemic has not yet been identified.

**Businesses and organizations**
Most business and organizations will be open throughout this phase under strict safety measures

- **Retail:** Permitted with additional safety measures and guidelines (e.g., limited capacity)
- **Public Transportation:** Permitted
- **Restaurants & Bars:** Available for dine-in with additional safety measures and guidelines
- **Manufacturing:** Permitted with additional safety measures and guidelines
- **Construction:** Permitted with additional safety measures and guidelines
- **Food & Agriculture:** Permitted
- **Offices:** Open with additional safety measures and guidelines
- **Education:** Live instruction in K-12 and higher education
- **Outdoor work:** Permitted with additional safety measures and guidelines

**Personal and social**

- **Social Distancing:** In place, maintain a six-foot distance from other when outdoors / in public
- **Face coverings:** Required wherever possible
- **Gatherings:** Increased but still limited-sized groups with social distancing
- **Outdoor Recreation:** All outdoor recreation allowed
- **Quarantine/Isolation:** Individuals who have confirmed or suspected COVID-19 must isolate, and any individual with a known exposure must quarantine, according to CDC and public health guidance
- **At-risk populations:** All at-risk individuals should continue to shelter in place. Members of households with at-risk residents should be aware that by returning to work or other environments where distancing is not possible, they could carry the virus back home. Precautions should be taken to isolate from at-risk residents. Businesses should strongly consider special accommodations for personnel who are members of an at-risk population
Reaching this phase would mean that community spread is not expected to return, because of sufficient community immunity and availability of treatment. Because of this, the number of infected individuals falls to nearly zero and the community does not typically experience this strain of the epidemic returning. All areas of the economy reopen, and gatherings of all sizes resume.

**Businesses and organizations**
All businesses and organizations open with some lasting safety requirements

**Personal and social**
Minimal to no lasting limitations on personal and/or social activities
CONTROLLING SPREAD IN THE WORKPLACE

There are best practices workplaces should follow, with different levels of importance depending on the industry. The proper implementation of these best practices will mitigate risk in the workplace and allow for a safe and sustained return to work. If workplaces fail to follow some or all of these guidelines, it may curb the state-wide progress toward the revitalization phase and result in a re-instating of stricter social limitations.

These best practices fall into five categories:

A. Access control: Implementing best practices to quickly identify and catalogue potential introductions of COVID-19 into the workplace
   • Daily symptom diaries (mandatory questionnaires self-attesting to symptoms and contacts)
   • On-site temperature checks
   • Rapid diagnostic testing protocols
   • Intake procedures for visitors
   • Guidelines for delivery areas

B. Social distancing: Minimizing levels of close contact within the workplace to limit the spread of COVID-19 among workers
   • Remote work (standards for who can work in person, social distancing guidelines for work from home)
   • Restrictions on common instances of non-essential close contact (e.g., crowded conference rooms, cafeterias)
   • Restriction on in-person meeting size
   • Physical barriers between workspaces

C. Sanitation / Hygiene: Increasing both the frequency and vigor of common cleaning practices as well as implementing new ones to reduce the amount of time COVID-19 can live on surfaces
   • Frequent disinfection / cleaning (facilities and equipment)
   • Local exhaust ventilation
   • HEPA filters on HVAC units
   • Availability of hand-washing facilities
   • Restrictions on shared tooling / machinery
D. PPE: Ensuring all employees have access to personal protective equipment to keep them from both contracting and transmitting the COVID-19 virus

- Masks to be worn whenever workers cannot consistently maintain six-feet of separation
- Gloves as necessary
- Face shields as necessary

E. Contact tracing / Isolation: Designing and imparting to employees important procedures and protocols on what occurs if an employee is suspected to have and/or diagnosed with COVID-19

- Isolation protocols
- Notification protocols (HR, first responders, government authorities)
- Investigation standards
- Facility cleaning / shutdown procedure
- Quarantine and return-to-work guidelines
UNDERSTANDING COVID-19 PRECAUTIONS:
Social Distancing, Self-monitoring, Quarantine, Isolation, and Actions everyone should take

What do these terms mean? What actions do I take if asked?

### ACTIONS FOR EVERYONE

- **Wash your hands frequently with soap and water for at least 20 seconds.** This includes after using the restroom, coughing or sneezing, or when they are visibly dirty. If you do not have soap and water nearby, use a hand sanitizer with 60-95% alcohol.
- **Avoid touching your eyes, nose, and mouth with unwashed hands.**
- **Cover your coughs and sneezes** with a disposable tissue or upper part of your sleeve. Dispose of tissues in a lined trash can. Wash your hands immediately afterward.
- **Clean your frequently touched or used surfaces daily** with a solution of 1/4 cup bleach and a gallon of water. Disinfectant sprays or wipes can also be used. These surfaces includes phones, tablets, keyboards, doorknobs, bathroom fixtures, toilets, counters, tabletops, and bedside tables. Wear rubber gloves if necessary and make sure the area is properly ventilated.
- **Monitor yourself daily for symptoms of COVID-19.**
- **Stay home when feeling sick.**
- **Wear a face covering whenever in enclosed public spaces.** This can be a homemade cloth mask, bandana, or scarf.
- **If you need medical care, call your doctor.**

### SOCIAL DISTANCING

**We should ALL be practicing social distancing.** It help protect everyone in our community, especially those who are most vulnerable, from illness. What does this look like?

**Individuals can:**
- Keep six feet between people as much as possible.
- Get curbside pick up for groceries or restaurant orders instead of going inside.
- Use online or drive-through services at the bank.
- Avoid public places at their busiest times.
- Avoid getting together in large social groups.

**Businesses & organizations can:**
- Have employees tele-work.
- Limit in-person meetings and travel.
- Modify operations to provide more online options and restrict people from gathering.

### SELF-MONITORING

**Who should do it?** People without symptoms.

**Actions to take**
- Practice social distancing.
- Record your temperature and watch for symptoms, daily.
- If symptoms develop, **CALL** your doctor to explain symptoms and possible exposure before going in.
- If symptoms develop, you may move into self-isolation.

### SELF-QUARANTINE

**Who should do it?** People without symptoms, but who have a higher potential of becoming sick because of where they traveled or having had contact with someone being tested for COVID-19.

**Actions to take**
- Stay home and self-monitor for 14 days.
- Under no circumstances should you go to work or leave your home during this time.
- Household members should practice social distancing.
- Report your daily temperature and symptoms to the Health Department during your quarantine.
**Self-Isolation**

**Who should do it?** People sick with symptoms of COVID-19, test positive for COVID-19, or diagnosed as a probable for COVID-19. Not sick enough to be hospitalized.

**Actions to take**

- **Under no circumstance should you go to work, school or public places.** You should only consider leaving your home if you need medical attention.
  - Avoid using public transportation to get to your medical provider or emergency department.
  - Wear a mask over your nose and mouth if you must leave your house to seek medical care.
- **Avoid handling pets or other animals** while you are sick.
- **Cover your coughs and sneezes** with a disposable tissue or the upper part of your sleeve. Dispose of tissues in a lined trash can. Wash your hands immediately afterward.
- **Wash your hands frequently** with soap and water for at least 20 seconds. This includes after using the restroom, coughing or sneezing, or when they are visibly dirty. If you do not have access to soap and water, use a hand sanitizer with 60% - 95% alcohol.
- **Avoid touching your eyes, nose and mouth** with unwashed hands.
- **Clean your frequently touched or used surfaces daily** with a solution of 1/4 cup bleach and a gallon of water. Disinfectant sprays or wipes can also be used. These surfaces includes phones, tablets, keyboards, doorknobs, bathroom fixtures, toilets, counters, tabletops, and bedside tables. Wear rubber gloves if necessary and make sure the area is properly ventilated.
- **Clean any item or surface that may have blood, mucus, vomit, urine, stool or other body fluids on them.**
- **Make sure your home has good airflow.** Open windows if weather permits or use the air conditioner.

**If you live with others:**

- Separate yourself from other household members and pets whenever possible.
  - You should stay in a specific room and away from other household members.
  - Use a separate bathroom if possible.
  - If you must share a bathroom wipe down all surfaces after the patient uses it. Separate toothbrushes.
  - If you share a shower, do not share razors, washcloths or body sponges/poufs.
  - If you must enter a shared space put a mask over your nose and mouth before leaving your room.
- Do not share items with your household members or pets such as dishes, drinking cups, silverware, towels or bedding. After using these items, they should be washed with soap and hot water.
- Household members should practice self-quarantine.

**If you live alone:**

- Do not open your door to anyone. If someone is dropping off groceries or other items for you, have them leave it at your doorstep and wait until they leave to open the door.
- Do not cook food for anyone other than yourself.

**When seeking care at a healthcare facility:**

- Call ahead to get direction from your health care provider. They may ask you to meet them outside or usher you into a different entrance than the general public uses.
- Avoid using public transportation to get to your medical provider or emergency department.
  - If you are unable to drive yourself and do not have a ride, call 9-1-1 for transport by ambulance.
  - If someone is giving you a ride, wear a mask that covers your mouth and nose while you are in the vehicle with them.
- If you are driving yourself, apply a mask that covers your mouth and nose before exiting your vehicle.
The purpose of this tool is to assist directors or administrators in making decisions regarding youth programs and camps during the COVID-19 pandemic. It is important to check with state and local health officials and other partners to determine the most appropriate actions. Note: In areas requiring significant mitigation, youth programs and camps that remain open to serve the children of essential workers should refer to Guidance for Child Care Programs that Remain Open.

**Should you consider opening?**

- ✓ Is the youth program or camp in a community no longer requiring significant mitigation?
- ✓ Will reopening be in compliance with state and local orders?
- ✓ Will the youth program or camp limit attendance to children and staff who live in the local area?
- ✓ Will the youth program or camp be ready to protect children and staff at higher risk for severe illness?

**Are recommended safety actions in place?**

- ✓ Promote healthy hygiene practices such as hand washing, staff wearing a cloth face covering
- ✓ Intensify cleaning, disinfection, and ventilation
- ✓ Ensure social distancing such as increased spacing, small groups, limited mixing between groups
- ✓ Limit sharing of items such as toys, belongings, supplies, and equipment
- ✓ Train all staff on safety actions

**Is ongoing monitoring in place?**

- ✓ Check for signs and symptoms in children and staff
- ✓ Encourage anyone who is sick to stay home
- ✓ Plan for if children or staff get sick
- ✓ Regularly communicate with local authorities, staff, and families
- ✓ Monitor child and staff absences and have flexible leave policies and practices
- ✓ Be ready to close if there are increased cases

---

**Open and Monitor**

For more information, please visit [CORONAVIRUS.GOV](https://www.coronavirus.gov)
The purpose of this tool is to assist employers in making decisions during the COVID-19 pandemic, especially to protect vulnerable workers. It is important to check with state and local health officials and other partners to determine the most appropriate actions.

**Should you consider opening?**
- ✓ Is the workplace in a community no longer requiring significant mitigation?  
- ✓ Will reopening be in compliance with state and local orders?  
- ✓ Will you be ready to protect employees at higher risk for severe illness?

**Are recommended safety actions in place?**
- ✓ Promote healthy hygiene practices such as hand washing, wearing a cloth face covering  
- ✓ Intensify cleaning, disinfection, and ventilation  
- ✓ Ensure social distancing such as installing physical barriers, changing layout of workspaces, encouraging telework, closing communal spaces, staggering shifts and breaks, no large events  
- ✓ Limit travel and modify commuting practices  
- ✓ Train all staff on safety actions

**Is ongoing monitoring in place?**
- ✓ Check for signs and symptoms of employees  
- ✓ Encourage employees who are sick to stay home  
- ✓ Plan for when an employee gets sick  
- ✓ Regularly communicate with local authorities and employees  
- ✓ Monitor staff absences and have flexible leave policies and practices  
- ✓ Be ready to close if there are increased cases

---

*Or in an area with significant mitigation and providing essential, critical infrastructure
COVID-19 Workplace Health Screening

Company Name: _____________________________________________________________

Employee: ________________________________________________________________ Date: ___________

Time In: ___________

In the last 24 hours, have you experienced:

<table>
<thead>
<tr>
<th>Symptom</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Subjective fever (felt feverish)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chills</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Headache</td>
<td></td>
<td></td>
</tr>
<tr>
<td>New or worsening cough</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Shortness of breath</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sore throat</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Loss of smell or taste</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Runny nose or congestion</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Muscle aches</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Abdominal pain</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fatigue</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nausea</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vomiting</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diarrhea</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Current Temperature: ___________

If you answer “yes” to any of the symptoms listed above, or your temperature is 100.4°F or higher, please do not go into work. Self-isolate at home and contact your primary care physician’s office for direction.

- You should isolate at home for minimum of 7 days since symptoms first appear or per guidance of your local health department.
  - If diagnosed as a probable COVID-19 or test positive they should call their local health department and make them aware of their diagnosis or testing status.
- You must also have 3 days without fevers and improvement in respiratory symptoms.

In the past 14 days, have you:

Had close contact with an individual diagnosed with COVID-19? □ Yes □ No

Traveled via airplane internationally or domestically? □ Yes □ No

If you answer “yes” to either of these questions, please do not go into work. Self-quarantine at home for 14 days. Contact your medical provider if you have symptoms or have had close contact with an individual for evaluation. If you are given a probable diagnosis or test positive call your local health department to ensure they are aware.

For questions, visit macombgov.org/covid19, or contact the Macomb County Health Department at (586) 463-3750.

May 7, 2020
GUIDANCE FOR CLEANING & DISINFECTING
PUBLIC SPACES, WORKPLACES, BUSINESSES, SCHOOLS, AND HOMES

1 DEVELOP YOUR PLAN
DETERMINE WHAT NEEDS TO BE CLEANED. Areas unoccupied for 7 or more days need only routine cleaning. Maintain existing cleaning practices for outdoor areas.

DETERMINE HOW AREAS WILL BE DISINFECTED. Consider the type of surface and how often the surface is touched. Prioritize disinfecting frequently touched surfaces.

CONSIDER THE RESOURCES AND EQUIPMENT NEEDED. Keep in mind the availability of cleaning products and personal protective equipment (PPE) appropriate for cleaners and disinfectants.

Follow guidance from state, tribal, local, and territorial authorities.

2 IMPLEMENT
CLEAN VISIBLY DIRTY SURFACES WITH SOAP AND WATER prior to disinfection.

USE THE APPROPRIATE CLEANING OR DISINFECTANT PRODUCT. Use an EPA-approved disinfectant against COVID-19, and read the label to make sure it meets your needs.

ALWAYS FOLLOW THE DIRECTIONS ON THE LABEL. The label will include safety information and application instructions. Keep disinfectants out of the reach of children.

3 MAINTAIN AND REVISE
CONTINUE ROUTINE CLEANING AND DISINFECTION. Continue or revise your plan based upon appropriate disinfectant and PPE availability. Dirty surfaces should be cleaned with soap and water prior to disinfection. Routinely disinfect frequently touched surfaces at least daily.

MAINTAIN SAFE PRACTICES such as frequent handwashing, using cloth face coverings, and staying home if you are sick.

CONTINUE PRACTICES THAT REDUCE THE POTENTIAL FOR EXPOSURE. Maintain social distancing, staying six feet away from others. Reduce sharing of common spaces and frequently touched objects.

For more information, please visit CORONAVIRUS.GOV
MAKING YOUR PLAN TO CLEAN AND DISINFECT

Cleaning with soap and water removes germs, dirt, and impurities from surfaces. It lowers the risk of spreading infection.

Disinfecting kills germs on surfaces. By killing germs on a surface after cleaning, it can further lower the risk of spreading infection.

Is the area indoors?

YES

It is an indoor area.

NO

Maintain existing cleaning practices.
Coronaviruses naturally die in hours to days in typical indoor and outdoor environments. Viruses are killed more quickly by warmer temperatures and sunlight.

Has the area been occupied within the last 7 days?

YES

Yes, the area has been occupied within the last 7 days.

NO

The area has been unoccupied within the last 7 days.
The area will need only routine cleaning.

Is it a frequently touched surface or object?

YES

Yes, it is a frequently touched surface or object.

NO

Thoroughly clean these materials.
Consider setting a schedule for routine cleaning and disinfection, as appropriate.

What type of material is the surface or object?

Hard and non-porous materials like glass, metal, or plastic.
Visibly dirty surfaces should be cleaned prior to disinfection.
Consult EPA’s list of disinfectants for use against COVID-19, specifically for use on hard, non-porous surfaces and for your specific application need. More frequent cleaning and disinfection is necessary to reduce exposure.

Soft and porous materials like carpet, rugs, or material in seating areas.
Thoroughly clean or launder materials.
Consider removing soft and porous materials in high traffic areas. Disinfect materials if appropriate products are available.