WYOMING COUNTY COMMUNITY HEALTH SYSTEM (WCCHS) COVID-19 Plan

1. Purpose and Scope

WCCHS is committed to providing a safe and healthy workplace for all our employees. WCCHS has developed the following COVID-19 plan, which includes policies and procedures to minimize the risk of transmission of COVID-19, in accordance with OSHA's COVID-19 Emergency Temporary Standard (ETS).

WCCHS has multiple workplaces that are substantially similar, and therefore has developed a single COVID-19 plan for the substantially similar workplaces, with site-specific considerations included in the table below.

2. Roles and Responsibilities

WCCHS's goal is to prevent the transmission of COVID-19 in the workplace(s). Managers as well as non-managerial employees and their representatives are all responsible for supporting, complying with, and providing recommendations to further improve this COVID-19 plan.

The COVID-19 Safety Coordinator(s), listed below, implements and monitors this COVID-19 plan. The COVID-19 Safety Coordinator(s) has WCCHS's full support in implementing and monitoring this COVID-19 plan, and has authority to ensure compliance with all aspects of this plan.

WCCHS and the COVID-19 Safety Coordinator(s) will work cooperatively with non-managerial employees and their representatives to conduct a workplace-specific hazard assessment and in the development, implementation, and updating of this COVID-19 plan.

A survey will be conducted of all staff members to solicit input and any concerns they may have. Results will be incorporated into the Covid-19 plan. In addition prior to the start of all meetings and huddles team members will be asked if there are any quality or patient safety concerns to assure ongoing concerns are addressed. Annual recertification education will include information regarding how to provide input of quality and safety.

COVID-19 Safety Coordinator(s)		
Name	Title/Facility Location	Contact Information (office location, phone, email address)
Peggy Cunningham		
Kelly Smith		
Margaret Ronan		
Renée Post		

3. Hazard Assessment and Worker Protections

WCCHS will conduct a workplace-specific hazard assessment of its workplace(s) to determine potential workplace hazards related to COVID-19. A hazard assessment will be conducted initially and whenever changes at the workplace create a new potential risk of employee exposure to COVID-19 (e.g., new work activities at the workplace).

WCCHS and the COVID-19 Safety Coordinator(s) will work collaboratively with non-managerial employees and their representatives to conduct the workplace-specific hazard assessment. All completed hazard assessment forms and results will be attached to this plan and will be accessible to all employees and their representatives at each facility.

WCCHS will address the hazards identified by the assessment, and include policies and procedures to minimize the risk of transmission of COVID-19 for each employee. These policies and procedures are as follows:

Transmission based precautions – Standard and Airborne

Covid-19

Visitation

Discontinuing Precautions

Patient Screening and Management

In settings where direct patient care is provided, WCCHS will:

- Limit and monitor points of entry to the setting;
- Screen and triage all clients, patients, residents, delivery people, visitors, and other non-employees entering the setting for symptoms of COVID-19;
- Implement other applicable patient management strategies in accordance with the CDC's "COVID-19 Infection Prevention and Control Recommendations"; and
- Telehealth services, where available and appropriate, will be utilized in order to limit the number of people entering the workplace.

WCCHS has policies and procedures in place to assist in prevention of the spread of the coronavirus disease 2019 (COVID-19) throughout the facility. All employees and providers will be screened prior to their shift each day. If an employee does not pass screening, they will be referred to Infection RN (SNF) to be tested or to WPHS to be tested for all other departments. Visitors and clinic registrants will also be screened prior to entering facility. From 7:00am-7:00pm all outpatient registrants and visitors will be screened in the main lobby, after 7:00pm screening will be performed in ED registration. If a visitor fails the screening, a call to unit/floor where visit is to take place should be called. If an outpatient registrant fails the screening, a courtesy call should be made to the outpatient clinic by the screeners. Visits will be allowed but limited to compassionate caregivers (SNF), patient support persons, family members and/or legal representatives of patients/residents in imminent end-of-life situations. Visitors are restricted to patient/resident rooms and to wear appropriate PPE required by the facility.

Points of entry are limited to visitors and outpatients entering through the main lobby area from 7:00am-7:00pm and through the ED entrance after 7:00pm. Preferably, all hospital healthcare employees and provider will enter through the "R" door and be screened in the education room. Preferably, all SNF healthcare employees and providers will enter through "F" or "U" door and be screened at screening table in front of administration offices.

Standard and Transmission-Based Precautions

WCCHS will develop and implement policies and procedures to adhere to Standard and Transmission-Based Precautions in accordance with CDC's "Guidelines for Isolation Precautions."

WCCHS and the COVID-19 Safety Coordinator(s) will work collaboratively with non-managerial employees and their representatives to develop and implement these policies and procedures.

Personal Protective Equipment (PPE)

WCCHS will provide, and ensure that employees wear, facemasks or a higher level of respiratory protection. Facemasks must be worn by employees over the nose and mouth when indoors and when occupying a vehicle with another person for work purposes. Policies and procedures for facemasks will be implemented, along with the other provisions required by OSHA's COVID-19 ETS, as part of a multi-layered infection control approach.

Facemasks provided by WCCHS will be FDA-cleared, authorized by an FDA Emergency Use Authorization, or otherwise offered or distributed as described in an FDA enforcement policy. WCCHS will provide employees with a sufficient number of facemasks, which must be changed at least once a day, whenever they are soiled or damaged, and more frequently as necessary (e.g., patient care reasons). WCCHS may also provide a respirator to employees when only a facemask is required (i.e., when a respirator is not otherwise required by OSHA's COVID-19 ETS) and, when doing so, will comply with OSHA's COVID-19 ETS mini respiratory protection program (29 CFR 1910.504). WCCHS will also permit employees to wear their own respirator instead of a facemask and, in such cases, will comply with OSHA's COVID-19 ETS mini respiratory protection program (29 CFR 1910.504). Additional information about when respirator use is required can be found below.

Employees will be supplied with a new facemask when they are screened before the start of their shift and going to patient/resident care areas. The facemasks will be applied by employee before leaving the screening area. Employees will wear facemasks at all times.

The following are exceptions to WCCHS's requirements for facemasks:

- 1. When an employee is alone in a room.
- 2. While an employee is eating and drinking at the workplace, provided each employee is at least 6 feet away from any other person, or separated from other people by a physical barrier.
- 3. When employees are wearing respirators in accordance with 29 CFR 1910.134 or paragraph (f) of OSHA's COVID-19 ETS.
- 4. When it is important to see a person's mouth (e.g., communicating with an individual who is deaf or hard of hearing) and the conditions do not permit a facemask that is constructed of clear plastic (or includes a clear plastic window). When this is the case, WCCHS will ensure that each employee wears an alternative, such as a face shield, if the conditions permit.
- 5. When employees cannot wear facemasks due to a medical necessity, medical condition, or disability as defined in the Americans with Disabilities Act (42 USC 12101 et seq.), or due to religious belief. Exceptions will be provided for a narrow subset of persons with a disability who cannot wear a facemask or cannot safely wear a facemask, because of the disability, as defined with the Americans with Disability Act (42 USC 12101 et seq.), including a person who cannot independently remove the facemask. The remaining portion of the subset who cannot wear a facemask may be exempted on a case-by-case basis as required by the Americans with Disability Act and other applicable laws. When an exception applies, WCCHS will ensure that any such employee wears a face shield, if their condition or disability permits it. WCCHS will provide accommodations for religious beliefs consistent with Title VII of the Civil Rights Act.

If a face shield is required to comply with OSHA's COVID-19 ETS or WCCHS otherwise requires use of a face shield, WCCHS will ensure that face shields are cleaned at least daily and are not damaged.

WCCHS will not prevent any employee from voluntarily wearing their own facemask and/or face shield in situations when they are not required unless doing so would create a hazard of serious injury or death, such as interfering with the safe operation of equipment.

In addition to providing, and ensuring employees wear, facemasks, WCCHS will provide protective clothing and equipment (e.g., respirators, gloves, gowns, goggles, face shields) to each employee in accordance with Standard and Transmission-Based Precautions in healthcare settings in accordance with CDC's "Guidelines for Isolation Precautions,"

and ensure that the protective clothing and equipment is used in accordance with OSHA's PPE standards (29 CFR 1910 subpart I).

For employees with exposure to people with suspected or confirmed COVID-19, WCCHS will provide respirators and other PPE, including gloves, an isolation gown or protective clothing, and eye protection. WCCHS will ensure respirators are used in accordance with the OSHA Respiratory Protection standard (29 CFR 1910.134), and other PPE is used in accordance with OSHA's PPE standards (29 CFR 1910 subpart I).

For aerosol-generating procedures (AGPs) on a person with suspected or confirmed COVID-19, WCCHS will provide a respirator to each employee and ensure it is used in accordance with the OSHA Respiratory Protection standard (29 CFR 1910.134). WCCHS will also provide gloves, an isolation gown or protective clothing, and eye protection to each employee, and ensure use in accordance with OSHA's PPE standards (29 CFR 1910 subpart I).

WCCHS and the COVID-19 Safety Coordinator(s) will work collaboratively with non-managerial employees or representatives to assess and address COVID-19 hazards, including when there is employee exposure to people with suspected or confirmed COVID-19. [OSHA's COVID-19 Healthcare Worksite Checklist & Employee Job Hazard Analysis may be used.]

Aerosol-generating procedures (AGPs) on a person with suspected or confirmed COVID-19.

When an AGP is performed on a person with suspected or confirmed COVID-19, WCCHS will:

- Provide a respirator and other PPE, as discussed in the previous section;
- Limit the number of employees present during the procedure to only those essential for patient care and procedure support;
- Ensure that the procedure is performed in an existing airborne infection isolation room (AIIR), if available; and
- Clean and disinfect the surfaces and equipment in the room or area where the procedure was performed, after the procedure is completed.

WCCHS and the COVID-19 Safety Coordinator(s) will work collaboratively with non-managerial employees and their representatives to assess and address COVID-19 hazards while performing AGPs.

Physical Distancing

WCCHS will ensure that each employee is separated from all other people in the workplace by at least 6 feet when indoors, unless it can be demonstrated that such physical distance is not feasible for a specific activity. Where maintaining 6 feet of physical distance is not feasible, WCCHS will ensure employees are as far apart from other people as possible. Physical distancing will be implemented, along with the other provisions required by OSHA's COVID-19 ETS, as part of a multi-layered infection control approach.

WCCHS and the COVID-19 Safety Coordinator(s) will work collaboratively with non-managerial employees and their representatives to assess physical distancing in the workplace.— Please refer to the following facility policies: SNF — Covid -19

Physical Barriers

WCCHS will install physical barriers at each fixed work location outside of direct patient care areas where each employee is not separated from all other people by at least 6 feet of distance and spacing cannot be increased, unless it can be demonstrated that it is not feasible to install such physical barriers. Physical barriers will be implemented, along with the other provisions required by OSHA's COVID-19 ETS, as part of a multi-layered infection control approach.

WCCHS and the COVID-19 Safety Coordinator(s) will work collaboratively with non-managerial employees and their representatives to identify where physical barriers are needed. Physical barriers are not required in direct patient care areas or resident rooms.

Where feasible, WCCHS will ensure that:

- Physical barriers are solid and made from impermeable materials;
- Physical barriers are easily cleanable or disposable;
- Physical barriers are sized (i.e., height and width) and located to block face-to-face pathways between individuals based on where each person would normally stand or sit;
- Physical barriers are secured so that they do not fall or shift, causing injury or creating a trip or fall hazard;
- Physical barriers do not block workspace air flow or interfere with the heating, ventilation, and air conditioning (HVAC) system operation;
- Physical barriers are transparent in cases where employees and others have to see each other for safety; and
- Physical barriers do not interfere with effective communication between individuals.

Cleaning and Disinfection

WCCHS will implement policies and procedures for cleaning, disinfection, and hand hygiene, along with the other provisions required by OSHA's COVID-19 ETS, as part of a multi-layered infection control approach. WCCHS and the COVID-19 Safety Coordinator(s) will work collaboratively with non-managerial employees and their representatives to implement cleaning, disinfection, and hand hygiene in the workplace.

Refer to the following policies:

Hand Hygiene Guidelines
Discharge Checkout Cleaning
Cleaning Protocol for Resident/Patient Room
Laundry
Linen Distribution
Procedure for Handling and Disposal of Linen and Trash/Corridors
Regulated Medical Waste Disposal
Evaluation of Effectiveness

In patient care areas, resident rooms, and for medical devices and equipment:

WCCHS will follow standard practices for cleaning and disinfection of surfaces and equipment in accordance with CDC's "COVID-19 Infection Prevention and Control Recommendations" and CDC's "Guidelines for Environmental Infection Control."

In all other areas:

WCCHS requires the cleaning of high-touch surfaces and equipment at least once a day, following manufacturers' instructions for the application of cleaners.

When a person who is COVID-19 positive has been in the workplace within the last 24 hours, WCCHS requires cleaning and disinfection, in accordance with CDC's "Cleaning and Disinfecting Guidance," of any areas, materials, and equipment that have likely been contaminated by that person (e.g., rooms they occupied, items they touched). Refer to previously listed policies.

WCCHS will provide alcohol-based hand rub that is at least 60% alcohol or provide readily accessible hand washing facilities. In addition, signs will be posted encouraging frequent handwashing and use of hand sanitizers.

Ventilation

WCCHS will implement policies and procedures for each facility's heating, ventilation, and air conditioning (HVAC) system and ensure that:

- The HVAC system(s) is used in accordance with the manufacturer's instructions and the design specifications of the HVAC system(s);
- The amount of outside air circulated through the HVAC system(s) and the number of air changes per hour are maximized to the extent appropriate;
- All air filters are rated Minimum Efficiency Reporting Value (MERV) 13 or higher, if compatible with the HVAC system(s); if not compatible, the filter with the highest compatible filtering efficiency is used;
- All air filters are maintained and replaced as necessary to ensure the proper function and performance of the HVAC system;
- All intake ports that provide outside air to the HVAC system(s) are cleaned, maintained, and cleared of any debris that may affect the function and performance of the HVAC system(s); and
- Existing airborne infection isolation rooms (AIIRs), if any, are maintained and operated in accordance with their design and construction criteria.

Ventilation policies and procedures will be implemented, along with the other provisions required by OSHA's COVID-19 ETS, as part of a multi-layered infection control approach. WCCHS will identify the building manager, HVAC professional, or maintenance staff member who can certify that the HVAC system(s) are operating in accordance with the ventilation provisions of OSHA's COVID-19 ETS and list the individual(s) below.

- Opening windows and doors during work hours when outdoor climate allows, and when doing so would not
 present other health or safety hazards;
- Placing fans in windows, but not where potentially contaminated air flows directly from one person to another;
- Running the HVAC system for at least 2 hours before and after the building is occupied;
- Using portable high-efficiency particulate air (HEPA) fan/filtration systems;

The following individual(s) is responsible for maintaining the HVAC system(s) and can certify that it is operating in			
accordance with the ventilation provisions of OSHA's COVID-19 ETS.			
(e.g., Maintenance staff, HVAC service contractor(s))			
Name/Contact Information:	<u>Location:</u>		
Tim Cook	Maintenance Department		
Name/Contact Information:	<u>Location:</u>		

Health Screening and Medical Management

Health Screening

WCCHS will screen each employee before each workday and each shift.

All employees and providers will be scre4ened prior to their shift each day. If an employee does not pass screening, they will be referred to the Infection Control RN (SNF) to be tested or to WPHS for all other departments. Preferably, all hospital healthcare employees and providers will enter through the "R" door and be screened in the education room. All SNF healthcare employees and providers will enter through "F" or "U" door and be screened at the screening table in front of administration.

Employee Notification to Employer of COVID-19 Illness or Symptoms

WCCHS will require employees to promptly notify [their supervisor or COVID-19 Safety Coordinator] when they have tested positive for COVID-19 or been diagnosed with COVID-19 by a licensed healthcare provider, have been told by a licensed healthcare provider that they are suspected to have COVID-19, are experiencing recent loss of taste and/or smell with no other explanation, or are experiencing both fever (≥100.4° F) and new unexplained cough associated with shortness of breath.

Employees will contact the Nursing Supervisor if they are sick or experiencing symptoms while at home or at work. The nursing supervisor will direct the employee to the appropriate place.

WCCHS will implement the sick leave and FMLA policies to promote employees staying at home when they are sick, when household members are sick, or when required by a healthcare provider to isolate or quarantine themselves or a member of their household.

Employer Notification to Employees of COVID-19 Exposure in the Workplace

WCCHS will notify employees if they have been exposed to a person with COVID-19 at their workplace, as described below. The notification provisions below are not triggered by the presence of a patient with confirmed COVID-19 in a workplace where services are normally provided to suspected or confirmed COVID-19 patients (e.g., emergency rooms, urgent care facilities, COVID-19 testing sites, COVID-19 wards in hospitals). When WCCHS is notified that a person who has been in the workplace (including employees, clients, patients, residents, vendors, contractors, customers, delivery people and other visitors, or other non-employees) is COVID-19 positive, WCCHS will, within 24 hours:

- Notify each employee who was not wearing a respirator and any other required PPE and has been in close contact with the person with COVID-19 in the workplace. The notification must state the fact that the employee was in close contact with someone with COVID-19 along with the date(s) the contact occurred.
- Notify all other employees who were not wearing a respirator and any other required PPE and worked in a well-defined portion of a workplace (e.g., a particular floor) in which the person with COVID-19 was present during the potential transmission period. The notification must specify the date(s) the person with COVID-19 was in the workplace during the potential transmission period.
- Notify other employers whose employees were not wearing a respirator and any other required PPE and have been in close contact with the person with COVID-19, or worked in a well-defined portion of a workplace (e.g., a particular floor) in which that person was present, during the potential transmission period. The notification must specify the date(s) the person with COVID-19 was in the workplace during the potential transmission period and the location(s) where the person with COVID-19 was in the workplace.

Notifications will <u>not</u> include the name, contact information, or occupation of the COVID-19 positive person.

Note: Close contact means being within 6 feet of the person for a cumulative total of 15 minutes or more over a 24-hour period during the person's potential transmission period. The potential transmission period runs from 2 days before the person felt sick (or, if not showing symptoms, 2 days before testing) until the time the person is isolated.

Medical Removal from the Workplace

WCCHS has also implemented a policy for removing employees from the workplace in certain circumstances. WCCHS will immediately remove an employee from the workplace when:

- The employee is COVID-19 positive (i.e., confirmed positive test for, or has been diagnosed by a licensed healthcare provider with, COVID-19);
- The employee has been told by a licensed healthcare provider that they are suspected to have COVID-19;
- The employee is experiencing recent loss of taste and/or smell with no other explanation; or

• The employee is experiencing both a fever of at least 100.4°F and new unexplained cough associated with shortness of breath.

For employees removed because they are COVID-19 positive, WCCHS will keep them removed until they meet the return-to-work criteria discussed below. For employees removed because they have been told by a licensed healthcare provider that they are suspected to have COVID-19, or are experiencing symptoms as discussed above, WCCHS will keep them removed until they meet the return-to-work criteria discussed below or keep them removed and provide a COVID-19 polymerase chain reaction (PCR) test at no cost to the employee. If the employee tests negative, they can return to work immediately. If the employee tests positive or refuses a test, they must remain excluded from the workplace until the return-to-work criteria below are met. If the employee refuses to take the test, WCCHS will continue to keep the employee removed from the workplace, but is not obligated to provide the medical removal protection benefits discussed below Note: absent undue hardship, employers must make reasonable accommodations for employees who cannot take the test for religious or disability-related medical reasons, consistent with applicable non-discrimination laws.

If WCCHS notifies an employee that they were in close contact with a person in the workplace (including employees, clients, patients, residents, vendors, contractors, customers, delivery people and other visitors, or other non-employees) who is COVID-19 positive when that employee was not wearing a respirator and any other required PPE, WCCHS will immediately remove the employee from the workplace unless:

- 1. The employee does not experience recent loss of taste and/or smell with no other explanation, or fever of at least 100.4°F and new unexplained cough associated with shortness of breath; AND
- 2. The employee has either been fully vaccinated against COVID-19 (i.e., 2 weeks or more following the final dose) or had COVID-19 and recovered within the past 3 months.

WCCHS will keep the employee removed from the workplace for 14 days or will keep the employee removed and provide a COVID-19 test at least 5 days after the exposure at no cost to the employee. If the employee tests negative, they may return to work 7 days following exposure. If the employee tests positive, the employee must remain excluded from the workplace until the return-to-work criteria below are met. If the employee refuses a test, WCCHS will keep the employee excluded for 14 days, but is not obligated to provide the medical removal protection benefits discussed below (Note: absent undue hardship, employers must make reasonable accommodations for employees who cannot take the test for religious or disability-related medical reasons, consistent with applicable non-discrimination laws.

Any time an employee must be removed from the workplace, WCCHS may require the employee to work remotely or in isolation if suitable work is available. When allowing an employee to work remotely or in insolation, WCCHS will continue to pay that employee the same regular pay and benefits the employee would have received had the employee not been absent.

WCCHS will not subject its employees to any adverse action or deprivation of rights or benefits because of their removal from the workplace due to COVID-19.

Return to Work Criteria

WCCHS will only allow employees who have been removed from the workplace to return to work in accordance with guidance from a licensed healthcare provider or in accordance with the CDC's "<u>Isolation Guidance</u>" and "<u>Return to Work Healthcare Guidance</u>." https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-in-homepatients. Pursuant to CDC guidance, symptomatic employees may return to work after all the following are true:

- At least 10 days have passed since symptoms first appeared, and
- At least 24 hours have passed with no fever without fever-reducing medication, and
- Other symptoms of COVID-19 are improving (loss of taste and smell may persist for weeks or months and need not delay the end of isolation).

If an employee has severe COVID-19 or an immune disease, WCCHS will follow the guidance of a licensed healthcare provider regarding return to work.

Pursuant to CDC guidance, asymptomatic employees may return to work after at least 10 days have passed since a positive COVID-19 test. If an employer receives guidance from a healthcare provider that the employee may not return to work, they must follow that guidance.

Medical Removal Protection Benefits

WCCHS will continue to pay employees who have been removed from the workplace under the medical removal provisions of OSHA's COVID-19 ETS. When an employee has been removed from the workplace and is not working remotely or in isolation, WCCHS will

Note the following requirements under OSHA's COVID-19 ETS:

- Employers must continue to provide the benefits to which the employee is normally entitled and pay the employee the same regular pay the employee would have received had the employee not been absent from work, up to \$1,400 per week per employee. For employers with fewer than 500 employees, the employer must pay the employee up to the \$1,400 per week cap but, beginning in the third week of an employee's removal, the amount is reduced to only two-thirds of the same regular pay the employee would have received had the employee not been absent from work, up to \$200 per day (\$1000 per week in most cases).
- The ETS also provides that the employer's payment obligation is reduced by the amount of compensation the employee receives from any other source, such as a publicly or employer-funded compensation program (e.g., paid sick leave, administrative leave), for earnings lost during the period of removal or any additional source of income the employee receives that is made possible by virtue of the employee's removal.

Vaccination

WCCHS encourages employees to receive the COVID-19 vaccination as a part of a multi-layered infection control approach. WCCHS will support COVID-19 vaccination for each employee by providing reasonable time and paid leave to each employee for vaccination and any side effects experienced following vaccination.

Training

WCCHS will implement policies and procedures for employee training, along with the other provisions required by OSHA's COVID-19 ETS, as part of a multi-layered infection control approach. WCCHS and the COVID-19 Safety Coordinator(s) will work collaboratively with non-managerial employees and their representatives to assess COVID-19 hazards and implement an employee training program at each facility

WCCHS's COVID-19 training program will be accessible in the following ways:

Accessible on the intranet, morning huddles, department meetings, discussion with managers and supervisors, education with staff.

WCCHS will ensure that each employee receives training, in a language and at a literacy level the employee understands, on the following topics:

- COVID-19, including:
 - How COVID-19 is transmitted (including pre-symptomatic and asymptomatic transmission);
 - The importance of hand hygiene to reduce the risk of spreading COVID-19 infections;
 - Ways to reduce the risk of spreading COVID-19 through proper covering of the nose and mouth;
 - The signs and symptoms of COVID-19;
 - Risk factors for severe illness; and
 - When to seek medical attention;

- WCCHS's policies and procedures on patient screening and management;
- Tasks and situations in the workplace that could result in COVID-19 infection;
- Workplace-specific policies and procedures to prevent the spread of COVID-19 that are applicable to the employee's duties (e.g., policies on Standard and Transmission-Based Precautions, physical distancing, physical barriers, ventilation, aerosol-generating procedures);
- Employer-specific multi-employer workplace agreements related to infection control policies and procedures, the use of common areas, and the use of shared equipment that affect employees at the workplace;
- WCCHS's policies and procedures for PPE worn to comply with OSHA's COVID-19 ETS, including:
 - When PPE is required for protection against COVID-19;
 - Limitations of PPE for protection against COVID-19;
 - O How to properly put on, wear, and take off PPE;
 - o How to properly care for, store, clean, maintain, and dispose of PPE; and
 - Any modifications to donning, doffing, cleaning, storage, maintenance, and disposal procedures needed to address COVID-19 when PPE is worn to address workplace hazards other than COVID-19;
- Workplace-specific policies and procedures for cleaning and disinfection;
- WCCHS's policies and procedures on health screening and medical management;
- Available sick leave policies, any COVID-19-related benefits to which the employee may be entitled under applicable federal, state, or local laws, and other supportive policies and practices (e.g., telework, flexible hours);
- The identity of WCCHS's Safety Coordinator(s) specified in this COVID-19 plan;
- OSHA's COVID-19 ETS; and
- How the employee can obtain copies of OSHA's COVID-19 ETS and any employer-specific policies and procedures developed under OSHA's COVID-19 ETS, including this written COVID-19 plan.

WCCHS will ensure that the training is overseen or conducted by a person knowledgeable in the covered subject matter as it relates to the employee's job duties, and that the training provides an opportunity for interactive questions and answers with a person knowledgeable in the covered subject matter as it relates to the employee's job duties.

WCCHS will provide additional training whenever changes occur that affect the employee's risk of contracting COVID-19 at work (e.g., new job tasks), policies or procedures are changed, or there is an indication that the employee has not retained the necessary understanding or skill.

Anti-Retaliation

WCCHS will inform each employee that employees have a right to the protections required by OSHA's COVID-19 ETS, and that employers are prohibited from discharging or in any manner discriminating against any employee for exercising their right to protections required by OSHA's COVID-19 ETS, or for engaging in actions that are required by OSHA's COVID-19 ETS.

WCCHS will not discharge or in any manner discriminate against any employee for exercising their right to the protections required by OSHA's COVID-19 ETS, or for engaging in actions that are required by OSHA's COVID-19 ETS.

Requirements implemented at no cost to employees

WCCHS will comply with the provisions of OSHA's COVID-19 ETS at no cost to its employees, with the exception of any employee self-monitoring conducted under the Health Screening and Medical Management section of this Plan.

Recordkeeping

WCCHS will retain all versions of this COVID-19 plan implemented to comply with OSHA's COVID-19 ETS while the ETS remains in effect.

WCCHS will establish and maintain a COVID-19 log to record each instance in which an employee is COVID-19 positive, regardless of whether the instance is connected to exposure to COVID-19 at work. The COVID-19 log will contain, for each instance, the employee's name, one form of contact information, occupation, location where the employee worked, the date of the employee's last day at the workplace, the date of the positive test for, or diagnosis of, COVID-19, and the date the employee first had one or more COVID-19 symptoms, if any were experienced.

WCCHS will record the information on the COVID-19 log within 24 hours of learning that the employee is COVID-19 positive. WCCHS will maintain the COVID-19 log as a confidential medical record and will not disclose it except as required by OSHA's COVID-19 ETS or other federal law.

WCCHS will maintain and preserve the COVID-19 log while OSHA's COVID-19 ETS remains in effect.

By the end of the next business day after a request, WCCHS will provide, for examination and copying:

- All versions of the written COVID-19 plan to all of the following: any employees, their personal representatives, and their authorized representatives.
- The individual COVID-19 log entry for a particular employee to that employee and to anyone having written authorized consent of that employee;
- A version of the COVID-19 log that removes the names of employees, contact information, and occupation, and only includes, for each employee in the COVID-19 log, the location where the employee worked, the last day that the employee was at the workplace before removal, the date of that employee's positive test for, or diagnosis of, COVID-19, and the date the employee first had one or more COVID-19 symptoms, if any were experienced, to all of the following: any employees, their potential representatives, and their authorized representatives.

Reporting

WCCHS will report to OSHA:

- Each work-related COVID-19 fatality within 8 hours of WCCHS learning about the fatality;
- Each work-related COVID-19 in-patient hospitalization within 24 hours of WCCHS learning about the in-patient hospitalization.

4. Monitoring Effectiveness

WCCHS and the COVID-19 Safety Coordinator(s) will work collaboratively with non-managerial employees and their representatives to monitor the effectiveness of this COVID-19 plan so as to ensure ongoing progress and efficacy.

WCCHS will update this COVID-19 plan as needed to address changes in workplace-specific COVID-19 hazards and exposures.

WCCHS will adjust this COVID-19 plan to address any particular hazards presented by employees of other employers at the worksite.