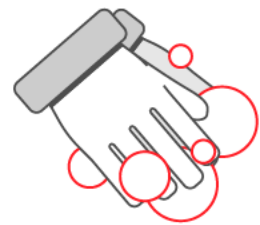


# RETURN TO WORK ACTION PLAN

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# RETURN TO WORK ACTION PLAN

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# RETURN TO WORK ACTION PLAN

## Introduction

The organization continues to closely monitor the directives and guidance from federal, state, and local authorities concerning the COVID-19 pandemic. Governor Whitmer's Executive Order 2020-77 suspend certain in-person activities and operations beginning on May 7, 2020. Under the Executive Order, we are required to take certain precautions to limit the risk of the spread of COVID-19. There have been and will continue to be updates to the Executive Order, this plan will be updated as local, state, and federal governments make/change requirements. The following plan has policies and procedures adopted in furtherance of the Executive Order. Some provisions in these Policies and Procedures apply to clients and visitors and some provisions apply specifically to staff.

Echoing the sentiments of public health officials, a return to normalcy will not be like flipping a switch, but rather a gradual effort. At Perspectives of Troy PC DBA Heron Ridge Associates, PLC, Oakland Psychological Clinic, PC and Perspectives Counseling Centers, it is our priority to keep our staff and clients along with their families healthy, especially during the COVID-19 pandemic. As such, we will abide by governmental guidelines when possible as we strive to balance public health concerns with the needs of our business. This return to work action plan details how we plan to have more staff return to the clinics and keep everyone safe to every extent possible. This plan, which pulls from local government, Centers for Disease Control and Prevention (CDC) and Occupational Safety and Health Administration (OSHA) guidance, highlights the responsibilities of managers and staff, and outlines the steps the organization is taking to address COVID-19.

While we will implement various protocols to ensure your safety, it is up to you and your co-workers to execute these protocols daily. By releasing this return to work action plan, Perspectives of Troy PC DBA Heron Ridge Associates, PLC, Oakland Psychological Clinic, PC and Perspectives Counseling Centers hopes to clearly communicate our plans moving forward, highlight workplace protocols in place to protect your safety and establish a level of comfort for all of our staff and clients as we begin transitioning from remote working to return to the clinics.

We understand that every staff's situation is different and encourage those with specific risks or concerns to reach out to their manager or Leslie Johnsen, Executive Director to discuss alternate arrangements, should they be necessary.

## Pandemic Response Team

To ensure that staff receive clear communications and that everyone is on the same page when it comes to our return to work action plan, we have created a pandemic response team. A pandemic response team is a cross-functional team that recommends and oversees workplace protocols to control the spread of COVID-19.

**Team leads:** Leslie Johnsen, Executive Director; Candy Gilbert, Business Director; Felicia Davis, Administrative Director and Keith Szymkiw, Financial Director are responsible for the overall action plan and responsible for working with company stakeholders and relevant health and safety bodies to manage this action plan.

# RETURN TO WORK ACTION PLAN

- **COVID-19 prevention and protocols leads:** Leslie Johnsen, Executive Director; Candy Gilbert, Business Director and Felicia Davis, Administrative Director are responsible for recommending and developing protocols to ensure the wellness of all staff.
- **Sanitization and disinfection lead:** Felicia Davis, Administrative Director manages logistics related to daily and periodic sanitation and disinfection efforts. Her responsibilities include ensuring that routine cleanings are completed and overseeing procedures for isolating staff should they become sick at work.
- **Purchasing lead:** Keith Szymkiw, Financial Director is responsible for ensuring that the necessary cleaning supplies are readily available at all clinics including hand sanitizer, disposable face masks, bleach wipes and Lysol spray.
- **Communication lead:** Candy Gilbert, Business Director is tasked with managing pandemic-related communications. She will work with Felicia Davis, Administrative Director and Office Managers to ensure COVID-19 training is completed and that staff understand their role in preventing the spread of the disease. She will provide COVID-19 related updates as needed.

## Return to Work Timeline

Due to the evolving nature of the COVID-19 pandemic, creating an exact timeline for resuming “normal” operations is not feasible. The organization will continue to monitor applicable state and local guidance and determine next steps for reopening the clinics.

At this time, we have created a tentative phased approach for asking our staff to return to the clinics. To remain consistent with federal guidance, our phased approach mirrors the guidelines included in the White House’s [Opening Up America Again Guidelines](#).

## Office Closure

This is the current stage we are in, as state and local guidance prohibits gatherings of 10 or more people. At this time, our clinics will remain closed to staff, clients, and visitors other than support staff and clinical members with prior approval from Leslie Johnsen, Executive Director. All other staff who can work remotely are asked to continue doing so.

## Phase One

Under Phase One, the clinics will reopen 6/8/2020 for furloughed support staff. On 6/15/2020 we will reopen for Prescribers to see high risk clients face to face and continue to provide telehealth services to the remaining clients on their caseloads. Clinical staff that provide services such as TMS, EMDR and Psychological Testing which cannot be provided utilizing the telehealth platform will have the option at this time to return to the clinics. Clinical staff who have high risks clients whose severity outweighs the need for telehealth may also chose to return to the clinics at this time. Social distancing protocols will be put in place and should be followed. Staff and clients will be required to sign a Consent to Return to Work/Office form prior to seeing clients/clinical staff. Staff and clients will also be required to wear face masks while in the clinics and complete a COVID19 screening form and temperature check upon entering. Any other staff who can do so should continue to remain home and work remotely.

# RETURN TO WORK ACTION PLAN

We will modify high-touch surfaces where possible (e.g., propping doors open) to avoid staff unnecessarily touching surfaces.

Social distancing protocols will continue to be in place and workplace modifications will be made to ensure social distancing can be maintained throughout the workday. The following protocols will be in place to promote social distancing efforts:

- **Staggered and monitored schedules**—We will implement a new office space utilization. Staff may not be assigned the office they were in prior to the pandemic. The Management Team with the assistance of Office Managers will assign office space including days and times to ensure staff and clients can be 6 feet away from one another during session. Some of the clinical offices will not be able to be used until this requirement is lifted by the government. This procedure will include rotating schedules for clinical and support staff until all restrictions are lifted to minimize staff and client contact.
- **Lobby modifications**—We will modify the lobby layouts to create at least 6 feet of distance between clients and/or family members sitting in the lobbies. For clinics on the first floor, the clients will be required to wait in their vehicles until clinical staff are available for their appointments.
- **Prohibition of in-person meetings**—Until all social distancing requirements are lifted, we will not conduct in-person meetings. Meetings will be continued to be held utilizing Microsoft TEAMS. Staff who are in the clinics should avoid gathering in groups.

## Phase Two

Under Phase Two, which will tentatively take place on 7/13/2020 the clinics will be available for additional staff to return based on the staff survey and medical necessity for client care. In this phase clinical staff will be providing a combination of face to face and telehealth services in the clinics. The organization will observe governmental guidelines related to occupancy and capacity given all clinic's square footage. Similar to Phase One, staff who can work from home should continue to do so.

## Phase Three

Under Phase Three, which will tentatively take place on 8/10/2020 the clinics will be available for additional staff based on the staff survey and medical necessity for client care. In this phase clinical staff will be providing a combination of face to face and telehealth services.

## Phase Four

Under Phase Four, which will tentatively take place on 9/7/2020 everyone will be back in the clinics, with ideally some telehealth services still being provided for clients and staff that chose to do so.

## Considerations

It is important to note that these phases are tentative and are subject to change based on state and local guidance, and the pandemic itself. Should a staff member test positive for COVID-19 after the clinics reopen, our plan may change in an effort to protect our staff and clients. In addition, if cases of COVID-19 spike again in our state or in our local area, we will consider whether to remain open or go back to working remotely.

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We recognize that everyone will need to make a personal decision as to when he/she is comfortable returning to the clinics based on individual circumstances. That is why the survey was sent to all clinical staff. Most support staff have remained working in the clinics during this crisis. If you have changed your mind regarding what phase you would like to return to the office, please contact Leslie Johnsen, Executive Director to discuss your personal situation.

## **Workplace Protocols to Follow When Returning to Work**

Perspectives of Troy PC DBA Heron Ridge Associates, PLC, Oakland Psychological Clinic, PC and Perspectives Counseling Centers has implemented various workplace protocols designed to preserve the health and safety of our staff and clients as additional staff return to the clinics. This section further explains these protocols. For additional information, please reach out to a member of the pandemic response team.

### **Screening for Clients and Permitted Visitors**

All should be pre-screened for COVID-19 symptoms and risk factors before their appointment. Staff should inform clients of the protocol when scheduling appointments. Large signs will be placed at the entrance of all lobbies. This may also take place during appointment reminder phone calls. Clients should be informed of the organization's visitor and screening policy set forth below.

In compliance with Executive Order 2020-72, we are required to prohibit visitors from entering a clinic unless the visitor is visiting under one or more of the following circumstances:

1. Visitor is required for the provision of medical care or support of activities of daily living (as determined on a case-by-case basis by clinical staff or management).
2. Visitor is the power of attorney or court-appointed guardian for a client.
3. If client is 21 years of age or under, visitor is patient's parent, foster parent, or guardian.
4. Visitor is visiting client in serious or critical condition or in hospice care.
5. Visitor is visiting under exigent circumstances or for the purpose of performing official government functions.

No other visitors are permitted to enter the offices.

Every client and visitor must be screened prior to receiving services and must wear a face mask while inside the clinics. No client or visitors are allowed to enter the clinics if they have experienced any fever (above 100.4 degrees), cough, shortness of breath or difficulty breathing, sore throat, chills, repeated shaking with chills, muscle pain, headache, new loss of taste or smell, flu-like symptoms or diarrhea within the past 24 hours, have had any contact with a person with a confirmed COVID-19 diagnosis, or have recently traveled from an area with widespread or ongoing community spread of COVID-19.

A member of management or an assigned staff member (clinical staff will be responsible for this if no support staff are present) will check client's and visitor's temperature upon entrance to a clinic in lieu of verbal confirmation and record the individual's temperature on the screening form. An individual is considered to have a fever if their temperature is above 100.4 degrees.

If a client has symptoms or fails to meet other screening criteria, services will be provided through telehealth until the client can meet the screening criteria.

# RETURN TO WORK ACTION PLAN

## Staff Screening, Exposure and Confirmed Illness Protocols

Keeping staff and clients safe is our priority. To accomplish this task, we have created various procedures for screening staff who enter the clinics, dealing with exposure to COVID-19, responding to a confirmed case of COVID-19 and reporting transparency.

### *Staff Screening Protocols*

The Equal Employment Opportunity Commission permits employers to measure staffs body temperatures before allowing them to enter the worksite. Any staff screening will be implemented on a nondiscriminatory basis, and all information gleaned will be treated as confidential medical information—specifically, the identity of staff exhibiting a fever or other COVID-19 symptoms should only be shared with members of company management with a true need to know. Staff will be asked to confirm the status of their health as part of working in the clinics. A Staff Screening checklist will need to be completed along with a temperature check upon entering any clinic. A member of management or an assigned team member at each site will be responsible for the temperature check and confirming the screening checklist has been completed. Results will be tracked separately from any personnel records and will be kept confidential. This protocol will commonly be implemented upon Phase 1. Staff unwilling to complete a screening will be required to take the day off if they are support staff, clinical staff will be required to work remotely. Support staff will be required to use sick/personal/vacation time if available, if they do not have sick/personal/vacation time available the day will be unpaid time off.

Data on screening forms will be used solely for the purpose of evaluating the potential hazards presented to the workplace and not for disability-related or other inquires prohibited by law. In the event of a positive COVID-19 test of a staff member or client, or in the event that a staff member or client is symptomatic or at risk per the screening criteria, the Pandemic Response Team will assess possible exposure to COVID-19 in the workplace and notify other staff members and other individuals whom it reasonably believes could be affected. For the privacy of staff member, and in compliance with the Americans with Disabilities Act, the data (including staff's name) will be kept confidential, except if and limited to the extent that disclosure is permitted or required by law or if the staff member (or the staff member's authorized representative in the event of incapacity) voluntarily authorizes disclosure in writing.

### Screening for Staff

Every staff member will complete each day, on which entrance to a clinic is sought, a COVID-19 Screening Form for Staff which includes screening criteria such as:

1. Within the last 24 hours, have you experienced any symptoms (excluding symptoms due to other known medical reasons) such as fever (above 100.4 degrees), cough, shortness of breath or difficulty breathing, sore throat, chills, repeated shaking with chills, muscle pain, headache, new loss of taste or smell, flu-like symptoms or diarrhea?
2. Have you had any close contact during the last 14 days with someone diagnosed with COVID-19?
3. Have they recently traveled from an area with widespread or ongoing community spread of COVID-19?

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A member of management or an assigned staff member (clinical staff will be responsible for this if no support staff are present) will check staff's temperature upon entrance to a clinic in lieu of verbal confirmation and record the individual's temperature on the screening form. An individual is considered to have a fever if their temperature is above 100.4 degrees.

Completed screening forms will be maintained by a supervisor or manager.

If an individual answers "YES" to any of the screening questions on the COVID-19 Screening Form for Staff, the individual must be excluded from the clinics until:

- At least 72 hours have passed since recovery with no fever (below 100.4 degrees without the use of fever-reducing medications) and improvement in symptoms and at least 7 days have passed since symptoms first appeared.
- 14 days have passed since the individual has had close contact with someone diagnosed with COVID-19.
- Ask that staff member to go home, seek testing, notify the center if they start showing symptoms, test positive, or discover they have been in contact with someone who has tested positive.

If a symptomatic individual presents written laboratory test results which are negative for COVID-19, with the specimen taken on or after the date of the "YES" answer above, the individual is still required to be excluded from the facility until:

1. The individual has a resolution of fever (below 100.4 degrees without the use of fever-reducing medications); and
2. The individual has an improvement in symptoms.

If before a staff member reports for their next shift, they experiences any symptoms (excluding symptoms due to other known medical reasons) such as fever (above 100.4 degrees), cough, shortness of breath or difficulty breathing, sore throat, chills, repeated shaking with chills, muscle pain, headache, new loss of taste or smell, flu-like symptoms, diarrhea or fails to satisfy any additional exclusion screening criteria established by the organization, the staff must first call their supervisor/manager and not report for work.

If a staff member develops symptoms included in the screening criteria while at work or outside of working hours, the employee must notify his or her immediate supervisor. The supervisor will direct the employee to leave the clinic or not return to work until the staff satisfies the return-to-work conditions set forth below.

## *COVID-19 Exposure and Confirmed Illness Protocol*

Staff who test positive for COVID-19 or believe they have been infected will be instructed to follow the advice of a qualified medical professional and self-quarantine. When self-quarantining, staff should:

- Stay away from other people in their home as much as possible, staying in a separate room and using a separate bathroom if available.
- Not allow visitors.
- Wear a face mask if they must be around people.
- Avoid sharing household items, including drinking cups, eating utensils, towels, and bedding.



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- Clean high touch surfaces daily.
- Continue monitoring their symptoms, calling their health care provider if their condition worsens.

Notably, staff who are symptomatic or who have tested positive should not return to a clinic until the conditions outlined in the table below are met:

Return to Work Considerations	
<b>Staff was symptomatic but was not tested for COVID-19.</b>	<b>Staff was tested for COVID-19.</b>
The staff member may return to work if: <ul style="list-style-type: none"><li>• They have not had a fever for at least 72 hours and have not used fever-reducing medication during that time.</li><li>• Coughs and other symptoms have improved.</li><li>• Seven days have passed since they first experienced symptoms.</li></ul>	The staff member may return to work if: <ul style="list-style-type: none"><li>• They have been medically cleared.</li><li>• They have not had a fever for at least 72 hours and have not used fever-reducing medication during that time.</li><li>• Coughs and other symptoms have improved.</li></ul>

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When a staff member tests positive for COVID-19, deep-cleaning procedures will be triggered. Furthermore, staff and clients who have been in close contact with an individual who has tested positive for COVID-19 will be instructed to self-quarantine.

## **Reporting Transparency Protocol**

Any staff member who experiences COVID-19 symptoms or has tested positive for COVID-19 must notify their manager as soon as practicable. The staff member will be asked to assist with contact tracing. This information will be tracked separately from personnel records, and names will not be released. Depending on the circumstances, the organization will notify impacted staff if there is a confirmed case of COVID-19 in the workplace. The clinic will be closed for a period of time following a confirmed case to allow for sanitized cleaning and natural deactivation of the virus.

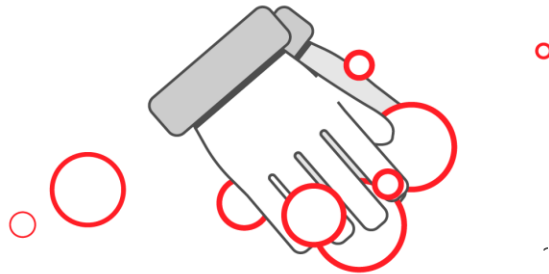
## **Social Distancing Protocol**

Staff should follow social distancing best practices while at the clinics, including but not limited to workstations, common areas and office spaces. Specifically, staff are asked to:

- Stay 6 feet away from others when working or on breaks. Where a minimum distance cannot be maintained or engineered administrative controls will be in place.
- Avoid in-person conversations unrelated to clinic operations to the maximum extent possible.
- Avoid job tasks that require face-to-face work with others when possible.
- Avoid contact with others whenever possible (e.g., handshakes).
- Avoid touching surfaces that may have been touched by others when possible.
- Distance themselves from anyone who appears to be sick.
- Avoid gathering when entering and exiting the offices and/or clinics. Staff and clients should only enter and exit in designated areas. Clinics that have more than one entrance/exit will be traffic controlled to one way so staff/clients will enter from one door and exit from a different door.
- Follow any posted signage regarding COVID-19 social distancing practices.
- Disinfect their workspace often.
- Avoid touching their face.
- Avoid nonessential gatherings.
- Stagger lunches to limit the number of individuals in the break rooms.
- Avoid using common areas.

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We may extend our social distancing guidelines after more staff return to the clinics, if needed. If social/physical distancing becomes impractical or infeasible due to capacity or other limitations within the clinics, we may take additional action to further restrict capacity or reassign staff, as necessary. Visual markings and signage may be placed throughout the clinics to further implement social/physical distancing among staff and clients. Additional or other social/physical distancing measures may be implemented from time to time consistent with guidance issued by federal, state, and local authorities which must also be strictly followed by all staff. Please monitor your email and adhere to any additional guidance as it is provided.



## **Staff Health and Safety Protocols**

The success of our return to work action plan relies on how well our staff follow social distancing and health and safety protocols. As such, the following protocols have been implemented to ensure your health and safety. Please bring any concerns regarding the following protocols to a manager or supervisor immediately.

### *General Staff Health and Hygiene*

Practicing good hygiene is essential to prevent the spread of COVID-19. Do your part by practicing good hygiene at work and at home:

- Regularly wash your hands for at least 20 seconds throughout the day with warm water and soap, specifically before eating.
- Cover coughs and sneezes.
- Avoid touching your eyes, nose, and mouth.

To help staff remain healthy, we have hand sanitizer, disinfecting wipes and Lysol spray available throughout the clinics. We have limited amounts of these supplies and will continue to restock as we are able. It is suggested that staff wash their hands more frequently than normal. Additionally, building management at all sites has instructed the office cleaning crew to disinfect key areas such as faucets and door handles daily where daily cleaning is provided. Support staff at each clinic will be responsible for disinfecting lobbies, interior bathrooms, and common areas throughout the day. Lobbies chairs must be disinfected after every use. Clinical staff will be responsible for disinfecting their offices in between each session.

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Face masks have been ordered with each company logo on it. One mask per staff member will be provided. Masks are to be placed over your nose and cover your mouth. Masks have an elastic secure tie that goes around your ears. Staff must wear masks in the correct fashion for them to be effective. Mask are washable and it will be the responsibility of each staff member to maintain the hygiene of their mask. Staff may also choose to wear a different mask. It is required that staff wear face coverings when entering a clinic and during the entire time they are in the clinic. Disposable gloves will continue to be available for support staff that chose to use them. We will maintain a small inventory of disposable masks as a backup for staff and clients that forget their face mask when entering the clinics. Inventory quantities will be regularly tracked but cannot be guaranteed.

Finally, staff who are feeling sick are asked to stay home. Staff who have symptoms of acute respiratory illness, should immediately seek medical attention, and follow the guidance of a health care provider. Staff with symptoms are required to work remotely, if possible or take time off. Staff who have been diagnosed with or are aware they have been directly exposed to COVID-19 should notify their manager or supervisor.

## *Staff Mental Health Considerations*

The organization understands that the COVID-19 pandemic has increased stress levels of staff across the country. We want to prioritize our staff's mental health during these uncertain times. As such, we have made every effort to ensure that the workplace is safe for staff to return to the clinics and are ready to discuss personal situations. Managers and supervisors are aware of mental health considerations during this transition. Staff with concerns regarding their mental health should request additional resources from their manager or supervisor.

## *Cleaning and Disinfecting Protocol*

The organization will utilize standards of facility cleaning and disinfection to limit staff and client exposure to COVID-19, as well as adopting protocols to clean and disinfect in the event of a positive COVID-19 case in the workplace. In the event of a positive COVID-19 case in the workplace, the Practice will identify all potentially contaminated areas of the facility and will abide by CDC guidelines when cleaning and disinfecting contaminated areas. Staff are required to utilize generally accepted infection control practices while at work, such as regular hand washing (with soap for at least twenty seconds), coughing and sneezing etiquette, and proper tissue usage and disposal.

Staff should do their part to help keep the clinics/offices as clean as possible by cleaning and disinfecting their offices/workstations and surfaces they commonly use. Staff should also avoid using others' workstations, tools, and equipment. Additionally, whenever a staff member uses a common piece of equipment (e.g., printer or fax machine), it should be wiped down prior to and following use. Proper cleaning and disinfecting supplies will be provided. Staff should wash their hands with warm water and soap for at least 20 seconds after cleaning or sanitizing a surface.

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Clinical staff members should clean and disinfect the office they are using upon arrival to work, between every session and again at the end of the day. Support staff will be responsible for cleaning and disinfecting the lobbies and common areas throughout the day.

**Clean first, then disinfect**—Disinfectant works best on already clean surfaces. As such, do a general cleaning before you start disinfecting. Go beyond the standard cleaning routine, and make sure to pay close attention to the following areas:

- Entryways and exits
- High-touch common surfaces (e.g., light switches and plate covers, doors, cabinets, sinks, stair railings, countertops, refrigerators, and elevator buttons, if applicable)
- Employee workstations
- Electronics
- Tables, chairs, and desks, from the lobby and throughout the clinic

## Office Procedures

In addition to the guidance outlined above, Perspectives of Troy PC DBA Heron Ridge Associates, PLC, Oakland Psychological Clinic, PC and Perspectives Counseling Centers has implemented the following workplace procedures to be followed until social distancing guidelines are lifted:

- **Deliveries**—We will set up contactless drop zones for all deliveries, including mail and packages. An assigned contact or contacts will process mail and packages at least three times per week, utilizing gloves. Staff ordering food delivery service will need to meet drivers outside of the offices for delivery.
- **Visitors**—Until further notice, all nonessential visitors are prohibited, and any interviews should be conducted virtually. For business-critical visits (e.g., drug sample delivery), we will take steps to safeguard

staff, clients, and visitors by:

- Requiring visitors to go directly to their assigned work area without unnecessarily interacting with employees.
- Requiring visitors to practice social distancing and good hygiene while on-site.

The organization may add to this list of workplace procedures as staff and clients return to the clinics. Staff should monitor workplace communications to ensure they are up to date on all health and safety communications.

## Posting

A copy of the Executive Order, any applicable county and municipality executive orders, and the Notice of Visitor and COVID-19 Screening Policy will be physically posted at the entrance of each clinic in a conspicuous location

# RETURN TO WORK **ACTION PLAN**

to ensure that they are viewable by all staff, clients, visitors and members of the public. The organization will post additional posters as may be required by federal or state law.

## **Miscellaneous**

Staff are encouraged to hold each other accountable with respect to the policies and procedures contained herein. To the extent that anyone is not complying with the policies and procedures, staff should report such behavior to a member of the Pandemic Response Team.

Additionally, if a staff member is made aware or has reason to suspect that another may have COVID-19 symptoms, such staff should report their concerns to a member of the Pandemic Response Team.

The organization will restrict the number of staff present on premises to no more than is strictly necessary to perform the needs of the business and according to what Phase we are in. We will promote remote work to the fullest extent deemed reasonably possible. The organization will impose any other social distancing practices and mitigation measures recommended by the Centers for Disease Control.

## **Conclusion**

Perspectives of Troy PC DBA Heron Ridge Associates, PLC, Oakland Psychological Clinic, PC and Perspectives Counseling Centers looks forward to the future of our staff and clients returning to the clinics. The COVID-19 pandemic has created uncertain times and resulted in unprecedented workplace changes. As communicated throughout this return to work action plan, we are prioritizing the health of our staff and clients every step of the way as we consider returning to face to face sessions and more staff present in the clinics.

We will execute on our plan cautiously, following applicable state and local guidance as much as possible. We also understand that each employee's needs and situations will be different.

Finally, we ask that staff are patient and understanding of the fact that the COVID-19 pandemic may require our

plan to change. Staff will be given as much notice as possible in the event of an unforeseen setback or clinic closure.

Staff should discuss any concerns or questions they have about this plan as it relates to their personal health or situation with their manager or supervisor. Furthermore, while the strategies highlighted in this document can protect staff from COVID-19, it is always important to follow CDC guidance. For more information, please refer to the websites of the local and national governments including the CDC.