

COVID-19 AMBASSADOR ASSESSMENT



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COMPANY NAME		DATE	
.....		
ADDRESS		PHONE NUMBER	
.....		
CONTACT NAME	PHONE NUMBER	EMAIL	
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CONSULTANT NAME	PHONE NUMBER	EMAIL	
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This assessment is limited to the requirements of MIOSHA's COVID-19 Emergency Rules. Employers should continue to review [Michigan.gov/COVIDWorkplaceSafety](https://www.michigan.gov/COVIDWorkplaceSafety) to ensure their workplace COVID-19 policies and procedures are based on the most up-to-date information available.

This form assesses the COVID-19 Preparedness and Response Plan at your facility. If an item is not marked fully implemented, it represents an opportunity for improvement in workplace protection.

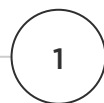
Status Key



Fully
Implemented



Partially
Implemented



Not
Implemented



Not
Applicable

GENERAL REQUIREMENTS

COVID-19 Preparedness & Response Plan	
	<p>Develop and implement a written COVID-19 preparedness and response plan.</p> <p>The plan shall include the measures the employer will implement to prevent employee exposure, including any applicable:</p> <ul style="list-style-type: none">• Engineering controls• Administrative controls• Basic infection prevention measures• Personal protective equipment• Health surveillance and training
	<p>Make the preparedness and response plan readily available to employees and their representatives.</p>
<p>Recommended Actions:</p>	
Basic Infection Prevention Measures	
	<p>Promote frequent and thorough hand washing. If soap and running water are not immediately available, provide antiseptic hand sanitizers or alcohol-based hand towelettes.</p>
	<p>Require workers who are experiencing symptoms of COVID-19 to not report to work or work in an isolated location.</p>
	<p>Increase facility <u>cleaning and disinfection</u>, in accordance with the latest CDC guidance.</p>

Basic Infection Prevention Measures (cont'd)

Use Environmental Protection Agency (EPA)-approved disinfectants that are expected to be effective against SARS-CoV-2.

Recommended Actions:

Health Surveillance

Conduct a daily entry self-screening protocol.

Direct employees to promptly report any signs and symptoms of COVID-19 to the employer.

Isolate any employees known or suspected to have COVID-19.

Notify any co-workers, contractors, or suppliers who may have come into contact with a known case of COVID-19.

Allow employees with a known or suspected case of COVID-19 to return to the workplace only after they are no longer infectious.

Recommended Actions:

Workplace Controls

Designate one or more worksite COVID-19 safety coordinators.

Workplace Controls (cont'd)

Ensure that any employees, except fully vaccinated persons, remain at least 6 feet from one another to the maximum extent feasible.

Provide non-medical grade face coverings to non-vaccinated employees at no cost to the employee.

Require any employee, except fully vaccinated persons, to wear face coverings when employees cannot consistently maintain 6 feet of separation from other individuals indoors. Fully vaccinated persons must continue to wear face coverings when in the healthcare setting where patients may be present and when using public transportation.

Recommended Actions:

Training

Provide training to employees on SARS-CoV-2 and COVID-19.

Provide any communication and training on COVID-19 infection control practices in the primary languages common in the employee population.

Training shall cover:

- Workplace infection-control practices (including information on vaccinations available for COVID-19).
- Proper use of personal protective equipment.
- Steps the employee must take to notify the business or operation of any symptoms of COVID-19 or a suspected or confirmed diagnosis of COVID-19.
- How to report unsafe working conditions.

Training (cont'd)	
	Provide updated training if it changes its preparedness and response plan, or new information becomes available about the transmission of SARS-CoV-2 or diagnosis of COVID-19.
Recommended Actions:	
Recordkeeping	
	<p>Maintain a record of the following:</p> <ul style="list-style-type: none"> • Training • Health screening protocols for each non-vaccinated employee or contractor • Vaccination information, if applicable under Rule 6(5)(a) • Required notifications
	Maintain records for 6 months from time of generation.
Recommended Actions:	

ADDITIONAL RESOURCES

Websites

[Michigan.gov/Coronavirus](https://www.michigan.gov/Coronavirus) | [Michigan.gov/MIOSHA](https://www.michigan.gov/MIOSHA) | [OSHA.gov](https://www.osha.gov) | [CDC.gov](https://www.cdc.gov)
[Michigan.gov/COVIDWorkplaceSafety](https://www.michigan.gov/COVIDWorkplaceSafety) | [Michigan.gov/MDHHS](https://www.michigan.gov/MDHHS)

Contact

MIOSHA Hotline — 855-SAFE-C19 (855-723-3219)

Ask MIOSHA — [Michigan.gov/AskMIOSHA](https://www.michigan.gov/AskMIOSHA)

Request for Consultation Assistance — 517-284-7720 or visit [Michigan.gov/CETRCA](https://www.michigan.gov/CETRCA)