

Lincoln Health System's COVID-19 Plan

1. Purpose and Scope

LHS is committed to providing a safe and healthy workplace for all our employees. LHS 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).

LHS 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. LHS refers to all entities unless otherwise defined by specific location.

| Facility Location | Worksite-Specific COVID-19 Considerations |
|---|---|
| Donalson Care Center | Long Term Care and Skilled Nursing Facility with additional visiting and CMS guidance specific to these areas. Employees are tested for COVID-19 based on CMS guidance and community spread. Due to type of care provided, physical distancing is a challenge in some areas, and barrier placement is inappropriate as it violates the residents' right to a home-like environment, hinders communication between residents and staff, and can cause increased risk of resident incidents/accidents due to decreased ability for staff behind the barriers to adequately supervise resident activities. No airborne isolation rooms are available. Respiratory Protection Program is in place with 3M N95's and PAPR's. |
| Lincoln Medical Home Health and Hospice | Employees are in the homes of others more than in the office. Patients and Families are educated on employee safety. |
| Patrick Rehab and Wellness Center | Facility is shared with wellness center with shared waiting room. Wellness members are discouraged from waiting in waiting rooms. Therapy is conducted in an area of the building separate from wellness. |
| Lincoln EMS | Emergency calls are often not controlled environments where physical distancing is possible. |
| Lincoln Medical Center | Acute Care Center with Emergency Department Services, Outpatient Services, Surgical Services, and Inpatient Services. Units specific for COVID – 19 are designated, but in ICU, there may be a need for a non-COVID ICU patient to be housed in this unit with the door closed. |
| Lincoln Medical Provider Offices | Scheduled appointments in the Medical Office Building. |

2. Roles and Responsibilities

LHS'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 the CEO's and the Board of Trustee's full support in implementing and monitoring this COVID-19 plan, and has authority to ensure compliance with all aspects of this plan.

[LHS] 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.

[Frontline employees will be utilized to complete the workplace specific hazards assessment. Frontline staff suggestions will be requested by department directors and returned to coordinators by email. Annually and PRN as risk or structure changes, staff will be engaged to help the team decided how to best meet the guidelines and provide a safe workplace without impeding job functions.

| COVID-19 Safety Coordinator(s) | | |
|---------------------------------------|--|--|
| Name | Title/Facility Location | Contact Information (office location, phone, email address) |
| Jack Grove | Nursing Home Administrator /DCC | Jack Grove Donalson Care Center 1861 Winchester Hwy Fayetteville, TN 37334 931-438-5180 Jack.grove@lchealthsystem.com |
| Debbie Yorba | Administrator /Lincoln Medical Home Health and Hospice/Quality | Debbie Yorba LMHHH 106 Medical Center Blvd Fayetteville, TN 37334 931-433-8088 Debbie.yorba@lchealthsystem.com |
| Justin Groce | Director / Patrick Rehab and Wellness Center | Justin Groce PRWC 1001 Huntsville Hwy Fayetteville, TN 37334 931-433-0273 Justin.Groce@lchealthsystem.com |
| Richard Wright | Director / Lincoln Medical EMS | Richard Wright Lincoln Medical EMS 106 Medical Center Blvd Fayetteville, TN 37334 931-438-7408 Richard.wright@lchealthsystem.com |
| Nick Knight | Lincoln Medical Provider Offices | Nick Knight Lincoln Medical Provider Offices 106 Medical Center Blvd Fayetteville, TN 37334 931-438-6123 Nick.knight@lchealthsystem.com |
| Shanna Rodriguez | Lincoln Medical Center IP/Staff Education | Shanna Rodriguez Infection Prevention Lincoln Medical Center 106 Medical Center Blvd Fayetteville, TN 37334 931-438-1100 Shanna.rodriguez@lchealthsystem.com |

3. Hazard Assessment and Worker Protections

LHS 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).

LHS has identified the following well-defined areas of the workplace where fully vaccinated employees are exempt from the personal protective equipment (PPE), physical distancing, and physical barrier requirements of the ETS because there is no reasonable expectation that any person with suspected or confirmed COVID-19 will be present: At all LHS entities, employee break rooms are well defined areas. At DCC, all break rooms and office spaces are considered well-defined areas. In accordance with CMS requirements for participation. At LMHH and LMEMS, the entire physical structure is considered a well-defined area. At LMC, the administrative area and office areas are considered well defined areas. LHS has developed the following policies and procedures to determine employees' vaccination status: Employees have the option to be identified as fully vaccinated through the employee health office. The employee health office will identify employees who wish to be identified utilizing a unique check mark sticker on their badge. [

LHS and the COVID-19 Safety Coordinator(s) will work collaboratively with non-managerial employees and their representatives to conduct the workplace-specific hazard assessment. OSHA's [COVID-19 Healthcare Worksite Checklist & Employee Job Hazard Analysis](#) may be used to assess hazards related to COVID-19 at each facility and develop and implement policies and procedures for worker protection.

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.

[LHS] 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:

Patient Screening and Management

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

- Limit and monitor points of entry to the setting;
- Visitation may be limited during times of surge with an effort to keep the physical and emotional well-being of patients in the forefront of the decision. At DCC, visitation will only be limited in accordance with guidance from CMS. As this guidance may change during the course of the declared pandemic, DCC administration will update visitation protocol accordingly.
- Some patients may be asked to remain outside until called for their appointment
- Waiting areas are closed to extra visitors. Chairs are to remain at a minimum of 6ft apart.
- 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
- [Encourage the use of telehealth services where available and appropriate in order to limit the number of people entering the workplace.]

Standard and Transmission-Based Precautions

[LHS] has implemented policies and procedures to adhere to Standard and Transmission-Based Precautions in accordance with CDC's "[Guidelines for Isolation Precautions](#)."

Personal Protective Equipment (PPE)

LHS 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 LHS will be FDA-cleared, authorized by an FDA Emergency Use Authorization, or otherwise offered or distributed as described in an FDA enforcement policy. LHS 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). LHS 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. LHS will also permit employees to wear their own respirator instead of a facemask. Additional information about when respirator use is required can be found below.

Employees will be provided facemasks on arrival to the facility at the point of entry. Employees will change facemask at least once per day and in accordance with CDC guidelines and stage of PPE conservation LHS is currently under whether it be Conventional, contingency, or crisis mode. Additional facemasks are available in clinical areas.

Paragraph (a)(4) of the ETS exempts fully vaccinated employees from the PPE requirements of the ETS when in well-defined areas where there is no reasonable expectation that any person with suspected or confirmed COVID-19 will be present. The following are additional exceptions to LHS's requirements for facemasks:

1. When an employee is alone in a room.
2. While an employee is eating and/or drinking at the workplace, provided either 1) all employees present are fully vaccinated in which scenario social distancing is not required, or 2) at least one employee present (if more than one employee is in the space/room) is not fully vaccinated then at least 6 feet of social distancing is maintained between employees or employees are 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, LHS 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, LHS will ensure that any such employee wears a face shield, if their condition or disability permits it. LHS will provide accommodations for religious beliefs consistent with Title VII of the Civil Rights Act.
6. When LHS has demonstrated that the use of a facemask presents a hazard to an employee of serious injury or death (e.g., arc flash, heat stress, interfering with the safe operation of equipment). Outside work during extreme temperatures may present a hazard. When this is the case, LHS will ensure that each employee wears an alternative, such as a face shield, if the conditions permit. Any employee not wearing a facemask must remain at least 6 feet away from all other people unless the employer can demonstrate it is not feasible. The employee must resume wearing a facemask when not engaged in the activity where the facemask presents a hazard.

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

LHS 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, LHS 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, LHS will provide respirators and other PPE, including gloves, an isolation gown or protective clothing, and eye protection. LHS 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).

PPE is provided at the point of use in all clinical areas and is to be used in accordance with current CDC guidelines for isolation precautions. Excess PPE is accessible in materials management at all times through either Materials Management Staff or House Charge.

For aerosol-generating procedures (AGPs) on a person with suspected or confirmed COVID-19, LHS will provide a respirator to each employee and ensure it is used in accordance with the OSHA Respiratory Protection standard (29 CFR 1910.134). LHS 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).

LHS 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.

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, LHS 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.

LHS 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

LHS 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, LHS 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.

Measures include: signage at front entrances, floor markings at front entrances at LMC and DCC. Barriers have been placed at all outpatient check in/registration desks and screening areas. Education to all employees on OSHA ETS.

Physical Barriers

LHS 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.

Where feasible, LHS 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.
- At Donalson Care Center, with the exception of the kitchen and the front lobby, the entire facility is considered a patient care area as staff have a reasonable expectation of interacting with residents at any time in any part of the facility. As a result, these areas are exempt from the physical barrier requirement. Physical barriers cannot be placed in the kitchen in any practical or safe manner, as they would inhibit the staff from completing their required tasks and would pose a risk of physical injury or harm to the staff.

Cleaning and Disinfection

LHS 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. LHS 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.

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

LHS 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](#)." At all direct patient care areas on all campuses, Environmental services staff are responsible for cleaning and disinfection in patient rooms/patient areas. Products used by the EVS staff include: Clorox Disinfectant, Spray & Wipe, Oxivir, Virex, Lemon Zip. Any room of a positive COVID patient will be deep cleaned and fully disinfected upon determination that the patient has met CDC requirements of recovery and is moved to a room off the designated COVID unit or is transferred out of the facility or discharged.

In all other areas:

LHS 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, LHS 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).

LMHHH staff will disinfect work stations and offices daily during defined work hours. ABHR is available at all entrances and throughout the office.

LMC EMS- will disinfect personal areas at the end of 24 hour shifts, Trucks are disinfected between patients. All common areas are disinfected every 24 hours by staff.

Patrick Rehab and Wellness staff will disinfect therapy areas between patients. All non-patient areas are cleaned by staff daily. ABHR is available at all entrances and throughout the office.

LHS 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. EVS is responsible for ensuring ABHR supplies are adequate, stocked, and in date. ABHR is available at all open entrances.

Ventilation

LHS 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. LHS 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.

[OSHA's [COVID-19 Healthcare Worksite Checklist & Employee Job Hazard Analysis](#) may be used to assess the HVAC system and develop and implement ventilation measures for the workplace.]

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:

Randall Parker
LHS Office Located at Lincoln Medical Center
931-438-7441 – may also be contacted through the switchboard operator
Randall.parker@lchealthsystem.com

Location:

ALL LHS Locations

Health Screening and Medical Management

Health Screening

LHS requires each employee to self-screen each work day and each shift at Lincoln Medical Center, Patrick Rehab and Wellness Center, Lincoln Medical EMS, and Lincoln Medical Home Health and Hospice. Donalson Care Center employees are required to actively screen each time they enter the building for their start of their shift, or when they return after leaving the property during their shift. COVID-19 testing for screening purposes may be required during the pandemic. When required, this is done at no cost to employees.

Employee Notification to Employer of COVID-19 Illness or Symptoms

LHS will require employees to promptly notify their supervisor who will notify employee health 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 ($\geq 100.4^{\circ}$ F) and new unexplained cough associated with shortness of breath.

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

LHS 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 LHS 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, LHS 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 not 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.

Employee messaging system (RAVE Notification), text, email, health stream communication or phone call will be utilized to notify employees of exposure to COVID-19.

Medical Removal from the Workplace

LHS has also implemented a policy for removing employees from the workplace in certain circumstances. LHS 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.

Note: This list represents the minimum medical removal requirements for compliance with OSHA's COVID-19 ETS. The full list of COVID-19 symptoms provided by the CDC includes additional symptoms not listed above. LHS may choose to remove or test employees with additional symptoms from the CDC list, or refer the employees to a healthcare provider.

For employees removed because they are COVID-19 positive, LHS 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, LHS 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, LHS 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 LHS 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, LHS 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.

LHS 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, LHS 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, LHS may require the employee to work remotely or in isolation if suitable work is available. When allowing an employee to work remotely or in isolation, LHS will continue to pay that employee the same regular pay and benefits the employee would have received had the employee not been absent.

LHS 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

LHS 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 "[Isolation Guidance](#)" and "[Return to Work Healthcare Guidance](#)." 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, LHS 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

LHS 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, LHS will describe Employer policy for pay and benefits to employees removed from the workplace and not working remotely.

- 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

LHS encourages employees to receive the COVID-19 vaccination as a part of a multi-layered infection control approach. LHS 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 per OSHA Emergency Temporary Standards. Employees are offered COVID-19 vaccination upon hire and are requested to sign either an attestation or declination. Employees may at any time contact employee health to schedule an appointment for COVID-19 immunization.

Training

LHS 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.

LHS's COVID-19 training program will be accessible in the following ways: Health Stream Computer based learning, staff meetings, and the intranet page.

LHS 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;
- LHS'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;
- LHS'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;
 - How to properly put on, wear, and take off PPE;
 - 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;
- LHS'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 LHS'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.

LHS 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.

LHS 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

LHS 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.

LHS 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

LHS 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

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

LHS 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.

LHS will record the information on the COVID-19 log within 24 hours of learning that the employee is COVID-19 positive. LHS 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.

LHS 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, LHS 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

LHS will report to OSHA:

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

Monitoring Effectiveness

LHS 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.

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

Coordination with Other Employers

LHS will communicate this COVID-19 plan with all other employers that share the same worksite, and will coordinate with each employer to ensure that all workers are protected.

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

This COVID-19 plan may be sent to vendors, students, contractors through email or access on the intranet at any LHS computer.

LHS has identified below all other employers to coordinate with to ensure employees are protected.

| Other Worksite Employers | |
|---|---|
| Employer Name / Employer Representative: | Contact Information: |
| CPS | |
| CLINICAL AFFILIATIONS | Shanna Rodriguez 931-438-1100 Shanna.rodriguez@lchealthsystem.com |
| MEDICAL STAFF | Tammy Wells 931-438-1100 Tammy.wells@lchealthsystem.com |
| LAB CORP | Vickie Golden 931-438-1100 Vickie.golden@lchealthsystem.com |
| PATHGROUP | Vickie Golden 931-438-1100 Vickie.golden@lchealthsystem.com |

| Other Worksite Employers | |
|---------------------------------|---|
| A-Z | Dave Wagner 931-438-1100 Dave.wagner@lchealthsystem.com |
| PLANT OPS CONTRACTORS | Randall Parker 931-438-1100 Randall.parker@lchealthsystem.com |
| APP | Bobbie Ball 931-433-1100 bball@americanphysicians.partners |
| AGENCY STAFF | Wendy Nogler 931-438-1100 Wendy.nogler@lchealthsystem.com |

Entering Residences

LHS will identify potential hazards and implement measures to protect employees who, in the course of their employment, enter into private residences and other physical locations controlled by a person not covered by the Occupational Safety & Health Act of 1970 (OSH Act). LHS requires that COVID-19 protocols be communicated to homeowners and sole proprietors prior to conducting work activities at private residences or other physical locations not covered by the OSH Act.

Signature and Plan Availability

LHS has completed and issued this COVID-19 plan on 9/13/2021

Signing Official for employer: Darrell Blaylock CEO

Signature:

Date:

| | |
|-----------------|-------------------------|
| Employer Name: | Lincoln Health System |
| Address: | 106 Medical Center Blvd |
| Business Owner: | County Government |

This COVID-19 plan is available:

| | | |
|---|---|--|
| <p>X Via hard copy at Public Drive OSHA ETS</p> | <p><input type="checkbox"/> Posted to [business intranet, shared drive, etc.]</p> | <p>X Available by request. Shanna Rodriguez Infection Prevention Lincoln Medical Center 106 Medical Center Blvd Fayetteville, TN 37334 931-438-1100 Shanna.rodriguez@lhealthsystem.com</p> |
|---|---|--|

This model plan is intended to provide information about OSHA's COVID-19 Emergency Temporary Standard. The Occupational Safety and Health Act requires employers to comply with safety and health standards promulgated by OSHA or by a state with an OSHA-approved state plan. However, this model plan is not itself a standard or regulation, and it creates no new legal obligations.