

**CLARKSVILLE CITY COUNCIL
SPECIAL SESSION
MARCH 18, 2020, 3:00 P.M.**

**COUNCIL CHAMBERS
106 PUBLIC SQUARE
CLARKSVILLE, TENNESSEE**

AGENDA

- 1) CALL TO ORDER *Mayor Joe Pitts*
- 2) PRAYER *Councilman Jeff Burkhart*
- 3) PLEDGE OF ALLEGIANCE *Councillady Valerie Guzman*
- 4) ATTENDANCE *City Clerk*
- 5) MAYOR'S DECLARATION OF STATE OF EMERGENCY
 1. **RESOLUTION 47-2019-20** Approving and adoption Mayoral Executive Order No. 001 declaring a Local State of Emergency due to the Novel Coronavirus in order to prevent the spread of and to facilitate the containment of the COVID-19 disease
- 6) ADJOURNMENT

A RESOLUTION APPROVING AND ADOPTING MAYORAL EXECUTIVE ORDER No. 001 DECLARING A LOCAL STATE OF EMERGENCY DUE TO THE NOVEL CORONAVIRUS IN ORDER TO PREVENT THE SPREAD OF, AND TO FACILITATE THE CONTAINMENT OF, THE COVID-19 DISEASE

WHEREAS, Coronavirus Disease 2019 (COVID-19) is a respiratory disease caused by the SARS-CoV-2 virus that can result in mild or severe symptoms, including fever, cough, and shortness of breath, and can lead to serious illness or death, particularly in the case of older adults and persons with serious chronic medical conditions; and

WHEREAS, in late 2019, a significant outbreak of COVID-19 occurred, and this disease has since spread to many countries; and

WHEREAS, to date, according to the Centers for Disease Control and Prevention (CDC), there have been 5704 cases of COVID-19 identified in the United States, which have resulted in 97 deaths; and

WHEREAS, to date, according to the Tennessee Department of Health there have been 73 cases of COVID-19 identified in the State of Tennessee; and

WHEREAS, on January 16, 2020, the Tennessee Department of Health activated the State Health Operations Center (SHOC), and on January 21, 2020, following CDC guidance, the Department designated COVID-19 as a reportable disease in Tennessee; and

WHEREAS, on March 4, 2020, Governor Bill Lee of the State of Tennessee announced the formation of a Coronavirus Task Force to enhance Tennessee's coordinated efforts to prevent, identify, and treat potential cases of COVID-19; and

WHEREAS, on March 4, 2020, the first case of COVID-19 in the State of Tennessee was identified, and several additional confirmed or presumptively positive cases of COVID-19 have since been identified in Tennessee; and

WHEREAS, on March 11, 2020, the World Health Organization (WHO) declared the novel coronavirus (COVID-19) outbreak a global pandemic; and

WHEREAS, on January 31, 2020, the U.S. Secretary of Health and Human Services declared a public health emergency to aid the nation's healthcare community in responding to COVID-19; and

WHEREAS, several states, counties, and cities throughout the country have declared states of emergency to facilitate their responses to COVID-19; and

WHEREAS, a state of emergency has been declared through Executive Order issued March 12, 2020, by Governor Bill Lee of the State of Tennessee in connection with the COVID-19 disease outbreak; and

WHEREAS, the spread and identification of additional cases of COVID-19 in Tennessee is likely to continue, and therefore, taking proactive steps to prevent a substantial risk to public health and safety is paramount; and

WHEREAS, although no confirmed cases of COVID-19 have yet been identified in Clarksville, Montgomery County, Tennessee, nevertheless it is advisable to be pro-active in adopting local measures to prevent the spread of COVID-19, and to aid in its containment should it spread to Clarksville; and

WHEREAS, the City of Clarksville, the Mayor, and the City Council has a responsibility to take all reasonably possible actions to ensure public health, safety, and welfare in the event of an infectious disease pandemic; and

WHEREAS, empirical medical evidence and expert reports strongly indicate and advise that the spread of the COVID-19 disease is effectively slowed by frequent hand washing, social

distancing, self-quarantine, and the reduction of public interactions and gatherings of groups of people; and

WHEREAS, the provisions of this Order are necessary to maximize efforts to protect the health and safety of City employees and all Clarksville residents and visitors; and

WHEREAS, the City government desires and intends to continue to provide exemplary government services of the highest quality to Clarksville residents and visitors while dealing effectively with the challenges presented by the pandemic through a reasoned, flexible response and pro-active steps to stem the spread of the pandemic and lessen its impact on public health, safety, and welfare, and on local economic activity; and

WHEREAS, Tennessee Code Annotated §58-2-110 and §58-8-104 provides the City Mayor with the power and authority to declare a local state of emergency, to include in cases of disease outbreaks and epidemics, which shall have an immediate effect when declared for a period of seven (7) days, but may have continuing effect beyond seven (7) days in seven (7) day increments upon approval by the City Council by resolution; and

WHEREAS, the state law, private act, City Charter confers general police powers upon the City, and authorizes the City to act and to regulate in the interests of public health and welfare; and

WHEREAS, the City Code Section 1-1204, provides that the Mayor shall power and authority to declare a state of emergency, which shall have an immediate effect when declared for a period of seven (7) days, but may have continuing effect beyond seven (7) days upon approval by the City Council by resolution.

WHEREAS, the City Council finds that the Mayor's Executive Order is in the public interest and serves public health and welfare.

NOW, THEREFORE, the Mayor's Executive Order No. 001 DECLARING A LOCAL STATE OF EMERGENCY DUE TO THE NOVEL CORONAVIRUS IN ORDER TO PREVENT THE SPREAD OF, AND TO FACILITATE THE CONTAINMENT OF, THE COVID-19 DISEASE, attached hereto and incorporated herein as Attachment One (1), together with any Exhibits, Attachments or Annexes thereto, is hereby approved and adopted, effective as of 3:00 p.m. this 18th day March 2020, and same shall have effect for a period seven (7) days, and is hereby approved to be extended, in seven (7) day increments, as may be determined prudent by the Mayor in his discretion, up to and until, and including, April 2, 2020, at 11:59 p.m.(CDT).

ADOPTED:



CITY OF CLARKSVILLE

EXECUTIVE ORDER

BY THE MAYOR

No. 001

AN ORDER DECLARING A LOCAL STATE OF EMERGENCY DUE TO THE NOVEL CORONAVIRUS IN ORDER TO PREVENT THE SPREAD OF AND TO FACILITATE THE CONTAINMENT OF COVID-19

WHEREAS, Coronavirus Disease 2019 (COVID-19) is a respiratory disease caused by the SARS-CoV-2 virus that can result in mild or severe symptoms, including fever, cough, and shortness of breath, and can lead to serious illness or death, particularly in the case of older adults and persons with serious chronic medical conditions; and

WHEREAS, in late 2019, a significant outbreak of COVID-19 occurred, and this disease has since spread to many countries; and

WHEREAS, to date, according to the Centers for Disease Control and Prevention (CDC), there have been 5704 cases of COVID-19 identified in the United States, which have resulted in 97 deaths; and

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WHEREAS, several states, counties, and cities throughout the country have declared states of emergency to facilitate their responses to COVID-19; and

WHEREAS, a state of emergency has been declared through Executive Order issued March 12, 2020, by Governor Bill Lee of the State of Tennessee in connection with the COVID-19 disease outbreak; and

WHEREAS, the spread and identification of additional cases of COVID-19 in Tennessee is likely to continue, and therefore, taking proactive steps to prevent a substantial risk to public health and safety is paramount; and

WHEREAS, although no confirmed cases of COVID-19 have yet been identified in Clarksville, Montgomery County, Tennessee, nevertheless it is advisable to be pro-active in adopting local measures to prevent the spread of COVID-19, and to aid in its containment should it spread to Clarksville; and

WHEREAS, the City of Clarksville, the Mayor, and the City Council has a responsibility to take all reasonably possible actions to ensure public health, safety, and welfare in the event of an infectious disease pandemic; and

WHEREAS, empirical medical evidence and expert reports strongly indicate and advise that the spread of the COVID-19 disease is effectively slowed by frequent hand washing, social distancing, self-quarantine, and the reduction of public interactions and gatherings of groups of people; and

WHEREAS, the provisions of this Order are necessary to maximize efforts to protect the health and safety of City employees and all Clarksville residents and visitors; and

WHEREAS, the City government desires and intends to continue to provide exemplary government services of the highest quality to Clarksville residents and visitors while dealing effectively with the challenges presented by the pandemic through a reasoned, flexible response and pro-active steps to stem the spread of the pandemic and lessen its impact on public health, safety, and welfare, and on local economic activity; and

WHEREAS, Tennessee Code Annotated §58-2-110 and §58-8-104 provides the City Mayor with the power and authority to declare a local state of emergency, to include in cases of disease outbreaks and epidemics, which shall have an immediate effect when declared for a period

of seven (7) days, but may have continuing effect beyond seven (7) days in seven (7) day increments upon approval by the City Council by resolution; and

WHEREAS, the state law, private act, City Charter confers general police powers upon the City, and authorizes the City to act and to regulate in the interests of public health and welfare; and

WHEREAS, the City Code Section 1-1204, provides that the Mayor shall power and authority to declare a state of emergency, which shall have an immediate effect when declared for a period of seven (7) days, but may have continuing effect beyond seven (7) days upon approval by the City Council by resolution.

NOW THEREFORE, I, Joe Pitts, Mayor of the City of Clarksville, Tennessee, by virtue of the power and authority vested in me by the Charter for the City of Clarksville, Tennessee, and the City Code, and other applicable law, do hereby declare a state of emergency exists in the City of Clarksville to facilitate an effective response to prevent the spread of COVID-19 and to aid in its containment, and do hereby order the following:

1. The provisions of the City municipal Emergency Management Program and Plan are ordered into effect as applicable, pursuant to City Code, Title 1 (Administration, Officers, and Personnel), Chapter 12 (Emergency Management). Specifically, the City COVID-19 Response Plan attached hereto and incorporated herein is ordered into effect upon City Council approval.
2. All Parks & Recreation Department events, activities, and programs are canceled during the time period of this declared state of emergency, and any extension thereof.
3. All Parks & Recreation facilities normally open to the public are closed, to include, but not limited to, all City owned or leased ball fields, parks, swimming pools, recreation or community centers.
4. All City departments / offices, to include City public utilities, to the maximum extent possible, shall limit person-to-person public access; instead, utilization of drive through window service, and electronic, telephonic and mail methods of communication shall be used whenever possible. Department heads are authorized to develop and implement policies and procedures to carry out any necessary measures to protect the public and employees during this pandemic while allowing person-to-person to access as may be absolutely necessary for the conduct of City business and as may be required by law.
5. All non-essential City employees, and all essential employees who can perform their job function / duties while working from home, as determined and authorized by department heads, shall work from home. Department heads shall take steps to ensure this requirement is not abused and that healthy workers perform their job duties and functions while working from home.

6. All City Code laws as authorized by Section 1-1203(6) of the City Code may be and are suspended as reasonably required to the extent necessary to prevent the spread of COVID-19, or aid in its suppression or in the treatment of City residents, visitors, and employees.
7. All department heads are directed to be pro-active and are authorized to take any lawful action pertaining to their departments they may deem necessary to effectuate the provisions of this Executive Order and Declaration of a Local State of Emergency, and Exhibit A attached hereto, in furtherance of the purpose of preventing the spread of the COVID-19 disease, or aiding in its suppression or in the treatment of City residents, visitors and employees, while continuing to provide and maintaining City services.
8. All members of the public and businesses are strongly encouraged to follow and comply with guidance and directives issued by the federal CDC and state and local departments of health.
9. All members of the public are strongly encouraged to remain calm, to resist panic purchasing, consider their neighbors who have need, and to look after and help those most at risk to this pandemic to include the elderly and those with suppressed immune systems. Our faith prescribes life, and life more abundantly. Our finest hour is at hand.
10. This Executive Order and Declaration of a Local State of Emergency shall remain in effect until 3:00 p.m., Central Daylight Time, on March 25, 2020, at which time this Order and declaration of emergency shall cease and be of no further force and effect, unless sooner terminated, or extended, by written amendment hereof, or by subsequent written order issued, in accordance with law, and upon approval of the City Council, shall remain in force and effect, and shall continue, in seven (7) day increments, until 11:59 p.m. (CDT) on April 2, 2020.

IN WITNESS WHEREOF, I have subscribed by signature and caused the Seal of the City of Clarksville to be affixed this 18th day of March, 2020.

MAYOR

ATTEST:

City Clerk

APPROVED AS TO LEGAL FORM:

City Attorney

EXHIBIT A

City of Clarksville COVID-19 Response Plan

PURPOSE

The goal of this document is to implement engineering controls, administrative and work practice controls, and personal protective equipment (PPE) to reduce the impact of COVID-19. The City of Clarksville has a duty to protect the employees from all known hazards.

SCOPE

Effective March 17, 2020, and until further notice, this document applies to all City of Clarksville facilities and employees.

ABOUT COVID-19

Symptoms of COVID-19 - Infection with SARS-CoV-2, the virus that causes COVID-19, can cause illness ranging from mild to severe and, in some cases, can be fatal. Symptoms typically include fever, cough, and shortness of breath. Some people infected with the virus have reported experiencing other non-respiratory symptoms. Other people, referred to as asymptomatic cases, have experienced no symptoms at all. According to the CDC, symptoms of COVID-19 may appear in as few as 2 days or as long as 14 days after exposure.

How COVID-19 Spreads - Although the first human cases of COVID-19 likely resulted from exposure to infected animals, infected people can spread SARS-CoV-2 to other people. The virus is thought to spread mainly from person-to-person, including:

- Between people who are in close contact with one another (within about 6 feet).
- Through respiratory droplets produced when an infected person coughs or sneezes.

These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs. It may be possible that a person can get COVID-19 by touching a surface or object that has SARS-CoV-2 on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the primary way the virus spreads. People are thought to be most contagious when they are most symptomatic (i.e., experiencing fever, cough, and/or shortness of breath). Some spread might be possible before people show symptoms; there have been reports of this type of asymptomatic transmission with this new coronavirus, but this is also not thought to be the main way the virus spreads. Although the United States has implemented public health measures to limit the spread of the virus, it is likely that some person-to-person transmission will continue to occur. The CDC website provides the latest information about COVID-19 transmission: www.cdc.gov/coronavirus/2019-ncov/about/transmission.html.

HOW THE COVID-19 OUTBREAK CAN AFFECT THE CITY'S WORKPLACE

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Similar to influenza viruses, SARS-CoV-2, the virus that causes COVID-19, has the potential to cause extensive outbreaks. Under conditions associated with widespread person-to-person spread, multiple areas of the United States and other countries may see impacts at the same time. In the absence of a vaccine, an outbreak may also be an extended event. As a result, the City of Clarksville may experience:

- Absenteeism. Employees could be absent because they are sick; are caregivers for sick family members; are caregivers for children if schools or day care centers are closed; have at-risk people at home, such as immunocompromised family members; or are afraid to come to work because of fear of possible exposure.
- Change in patterns of commerce. Consumer demand for items related to infection prevention (e.g., respirators) is likely to increase significantly, while consumer interest in other goods may decline. Consumers may also change shopping patterns because of a COVID-19 outbreak. Consumers may try to shop at off-peak hours to reduce contact with other people, show increased interest in home delivery services, or prefer other options, such as drive-through service, to reduce person-to-person contact.
- Interrupted supply/delivery. Shipments of items from geographic areas severely affected by COVID-19 may be delayed or cancelled with or without notification. This interruption can include PPE and other safety related items needed to protect the City employees and the public.

STEPS TO REDUCE EMPLOYEES' RISK OF EXPOSURE TO SARS-CoV-2

The City of Clarksville will stay abreast of guidance from federal, state, and local health agencies, and consider how to incorporate those recommendations and resources into workplace-specific plans.

The City of Clarksville will follow federal and state recommendations such as:

- **Prompt identification and isolation** of potentially infectious individuals is a critical step in protecting employees, customers, visitors, and others at our facilities.
 - Inform and encourage employees to self-monitor for signs and symptoms of COVID-19 if they suspect possible exposure.
 - When sick or experiencing symptoms of COVID-19 employees shall report to their supervisor while taking measures to not expose the supervisor or others.
 - Measures such as calling by phone, texting a picture of the doctor's excuse, or sending an email in order not to expose the supervisor or others.
 - Move potentially infectious people to a location away from workers, customers, and other visitors. Although some worksites do not have specific isolation rooms,

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- designated areas with closable doors may serve as isolation rooms until potentially sick people can be removed from the worksite.
- Take steps to limit spread of the respiratory secretions of a person who may have COVID-19. Provide a face mask, if feasible and available, and ask the person to wear it, if tolerated. Note: A face mask (also called a surgical mask, procedure mask, or other similar terms) on a patient or other sick person should not be confused with PPE for a worker; the mask acts to contain potentially infectious respiratory secretions at the source (i.e., the person's nose and mouth).
 - Protect employees in close contact with (i.e., within 6 feet of) a sick person or who have prolonged/repeated contact with such persons by using additional engineering and administrative controls, safe work practices, and PPE. Employees whose activities involve close or prolonged/ repeated contact with sick people are addressed further in later sections covering workplaces classified at medium and very high or high exposure risk.
- **Workplace flexibilities and protections**
 - Actively encourage sick employees to stay home. Department heads and their designees do have the authority to send sick employees home.
 - During this time the City will not require a healthcare provider's note for employees who are sick with acute respiratory illness to validate their illness or to return to work, as healthcare provider offices and medical facilities may be extremely busy and not able to provide such documentation in a timely way.
 - Employees not able to work or work from home will be required to use sick and/or annual leave. If leave is not available the employee shall be allowed to go into a negative leave balance during this time.
 - Be aware of employees' concerns about pay, leave, safety, health, and other issues that may arise during infectious disease outbreaks. Provide adequate, usable, and appropriate training, education, and informational material about essential job functions and employee health and safety, including proper hygiene practices and the use of any workplace controls (including PPE). Informed employees who feel safe at work are less likely to be unnecessarily absent.
 - Consider cross-training individuals so multiple roles are covered if needed due to limited onsite staffing.
 - For employees that test positive or are quarantined by a physician for COVID-19 they shall receive up to an additional 2 weeks of paid leave, this leave is separate from accrued annual and sick leave. This is limited to 2 weeks per employee (80 hours for full-time employees / 120 hours for Clarksville Fire Rescue shift personnel / 2 calendar weeks per their defined schedule for regular part time employees).
 - **Workplace Controls**
 - Occupational safety and health professionals use a framework called the "hierarchy of controls" to select ways of controlling workplace hazards. In other

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words, the best way to control a hazard is to systematically remove it from the workplace, rather than relying on workers to reduce their exposure. During a COVID-19 outbreak, when it may not be possible to eliminate the hazard, the most effective protection measures are (listed from most effective to least effective): engineering controls, administrative controls, safe work practices (a type of administrative control), and PPE. There are advantages and disadvantages to each type of control measure when considering the ease of implementation, effectiveness, and cost. In most cases, a combination of control measures will be necessary to protect workers from exposure to SARS-CoV-2.

- In addition to the types of workplace controls discussed below, CDC guidance for businesses provides employers and workers with recommended SARS-CoV-2 infection prevention strategies to implement in workplaces:
www.cdc.gov/coronavirus/2019-ncov/specific-groups/guidance-business-responses.html.
- **Engineering Controls** - Engineering controls involve isolating employees from work related hazards. In workplaces where they are appropriate, these types of controls reduce exposure to hazards without relying on employee behavior and can be the most cost-effective solution to implement. Engineering controls for SARS-CoV-2 include:
 - Installing physical barriers, such as clear plastic sneeze guards.
 - Increasing ventilation rates in the work environment.
 - Using drive-through windows for customer service when possible.
- **Administration Controls** - Administrative controls require action by the worker or employer. Typically, administrative controls are changes in work policy or procedures to reduce or minimize exposure to a hazard. Examples of administrative controls for SARS-CoV-2 include:
 - Encouraging sick workers to stay at home.
 - Minimizing contact among employees, customers, and visitors.
 - Replacing face-to-face meetings with virtual communications and implementing telework if feasible.
 - Keeping distances of 6 feet or greater between people when face-to-face meetings are necessary (i.e. keeping empty chairs between people at the meeting table).
 - Not allowing employees' children or unnecessary visitors in the workplace.
 - Establishing alternating days or extra shifts that reduce the total number of employees in a facility at a given time, allowing them to maintain distance from one another while maintaining a full onsite work week.
 - Discontinuing nonessential travel. Regularly check CDC travel warning levels at: www.cdc.gov/coronavirus/2019-ncov/travelers

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- Providing employees with up-to-date education and training on COVID-19 risk factors and protective behaviors. This will be communicated through newsletters, emails, flyers, and training.
- Training employees who need to use protective clothing and equipment how to put it on, use/wear it, and take it off correctly, including in the context of their current and potential duties. Training material should be easy to understand and available in the appropriate language and literacy level for all workers.
- **Safe Work Practices** - Safe work practices are types of administrative controls that include procedures for safe and proper work used to reduce the duration, frequency, or intensity of exposure to a hazard. Examples of safe work practices for SARS-CoV-2 include:
 - Providing resources and a work environment that promotes personal hygiene. For example, provide tissues, no-touch trash cans, hand soap, alcohol-based hand rubs containing at least 60 percent alcohol, disinfectants, and disposable towels for workers to clean their work surfaces.
 - Requiring regular hand washing or using of alcohol-based hand rubs. Workers should always wash hands when they are visibly soiled and after removing any PPE.
 - Post handwashing signs in restrooms.
 - Increasing the frequency of housekeeping and sanitation.
- **Personal Protective Equipment (PPE)** - While engineering and administrative controls are considered more effective in minimizing exposure to SARS-CoV-2, PPE may also be needed to prevent certain exposures. While correctly using PPE can help prevent some exposures, it should not take the place of other prevention strategies. Examples of PPE include: gloves, goggles, face shields, face masks, and respiratory protection, when appropriate. The City will not prohibit employees or visitors from wearing protective masks or other PPE.
 - During an outbreak of an infectious disease, such as COVID-19, recommendations for PPE specific to occupations or job tasks may change depending on geographic location, updated risk assessments for workers, and information on PPE effectiveness in preventing the spread of COVID-19. The City of Clarksville will check OSHA and CDC websites regularly for updates about recommended PPE.
 - Employers are obligated to provide their workers with PPE needed to keep them safe while performing their jobs. The types of PPE required during a COVID-19 outbreak will be based on the risk of being infected with SARS-CoV-2 while working and job tasks that may lead to exposure.
 - Workers, including those who work within 6 feet of patients known to be, or suspected of being, infected with SARS-CoV-2 and those performing aerosol-generating procedures, need to use respirators:

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- National Institute for Occupational Safety and Health (NIOSH)-approved, N95 filtering facepiece respirators or better.
- When disposable N95 filtering facepiece respirators are not available, consider using other respirators that provide greater protection and improve worker comfort. Other types of acceptable respirators include: a R/P95, N/R/P99, or N/R/P100 filtering facepiece respirator; an air-purifying elastomeric (e.g., half-face or full-face) respirator with appropriate filters or cartridges; powered air purifying respirator (PAPR) with high-efficiency particulate arrestance (HEPA) filter; or supplied air respirator (SAR). See CDC/ NIOSH guidance for optimizing respirator supplies at: www.cdc.gov/coronavirus/2019-ncov/hcp/respirators-strategy

CLASSIFYING WORKER EXPOSURE TO SARS-CoV-2

Worker risk of occupational exposure to SARS-CoV-2, the virus that causes COVID-19, during an outbreak may vary from very high to high, medium, or lower (caution) risk. The level of risk depends in part on the type of work, need for contact within 6 feet of people known to be, or suspected of being, infected with SARS-CoV-2, or requirement for repeated or extended contact with persons known to be, or suspected of being, infected with SARS-CoV-2. To help determine appropriate precautions, OSHA has divided job tasks into four risk exposure levels: very high, high, medium, and lower risk. Most American workers will likely fall in the lower exposure risk (caution) or medium exposure risk levels.

- **Very High Exposure Risk** - Very high exposure risk jobs are those with high potential for exposure to known or suspected sources of COVID-19 during specific medical, postmortem, or laboratory procedures. Workers in this category include:
 - Healthcare workers (e.g., doctors, nurses, dentists, paramedics, emergency medical technicians) performing aerosol-generating procedures (e.g., intubation, cough induction procedures, bronchoscopies, some dental procedures and exams, or invasive specimen collection) on known or suspected COVID-19 patients.
- **High Exposure Risk** - High exposure risk jobs are those with high potential for exposure to known or suspected sources of COVID-19. Workers in this category include:
 - Healthcare delivery and support staff (e.g., first responders, doctors, nurses, and other hospital staff who must enter patients' rooms) exposed to known or suspected COVID-19 patients. (Note: when such workers perform aerosol-generating procedures, their exposure risk level becomes very high.)
 - Medical transport workers (e.g., ambulance vehicle operators) moving known or suspected COVID-19 patients in enclosed vehicles.
 - Mortuary workers involved in preparing (e.g., for burial or cremation) the bodies of people who are known to have, or suspected of having, COVID-19 at the time of their death.

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- **Medium Exposure Risk** - Medium exposure risk jobs include those that require frequent and/or close contact with (i.e., within 6 feet of) people who may be infected with SARS-CoV-2, but who are not known or suspected COVID-19 patients. In areas without ongoing community transmission, workers in this risk group may have frequent contact with travelers who may return from international locations with widespread COVID-19 transmission. In areas where there is ongoing community transmission, workers in this category may have contact with the general public (e.g., in schools, high-population-density work environments, and some high-volume retail settings).
- **Lower Exposure Risk** - Lower exposure risk (caution) jobs are those that do not require contact with people known to be, or suspected of being, infected with SARS-CoV-2 nor frequent close contact with (i.e., within 6 feet of) the general public. Workers in this category have minimal occupational contact with the public and other coworkers.

LOWER EXPOSURE RISK (CAUTION): What to do to protect employees

For workers who do not have frequent contact with the general public, departments should follow the "**Steps To Reduce Employees' Risk of Exposure to SAR-CoV-2**" on page 2 and implement control measures described in this section.

- **Engineering Controls**
 - Additional engineering controls are not recommended for workers in the lower exposure risk group. Departments should ensure that engineering controls, if any, used to protect workers from other job hazards continue to function as intended.
- **Administrative Controls**
 - Monitor public health communications about COVID-19 recommendations and ensure that workers have access to that information. Frequently check the CDC COVID-19 website: www.cdc.gov/coronavirus/2019-ncov
 - Collaborate with workers to designate effective means of communicating important COVID-19 information.
- **Personal Protective Equipment**
 - Additional PPE is not recommended for workers in the lower exposure risk group. Workers should continue to use the PPE, if any, that they would ordinarily use for other job tasks. The City will not prohibit employees or visitors from wearing protective masks or other PPE.

MEDIUM EXPOSURE RISK: What to do to protect employees

In workplaces where workers have medium exposure risk, departments should follow the "**Steps To Reduce Employees' Risk of Exposure to SAR-CoV-2**" on page 2 and implement

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control measures described in this section. The best practice is to put measures in place to reduce the risk for these jobs to the Low Risk category.

- **Engineering Controls**
 - Install physical barriers, such as clear plastic sneeze guards, where feasible.
 - Utilize drive-through only options when available.

- **Administrative Controls**
 - Consider offering face masks to ill employees and customers to contain respiratory secretions until they are able leave the workplace (i.e., for medical evaluation/care or to return home). In the event of a shortage of masks, a reusable face shield that can be decontaminated may be an acceptable method of protecting against droplet transmission. See CDC/ NIOSH guidance for optimizing respirator supplies, which discusses the use of surgical masks, at: www.cdc.gov/coronavirus/2019-ncov/hcp/respirators-strategy
 - Keep customers informed about symptoms of COVID-19 and ask sick customers to minimize contact with workers until healthy again, such as by posting signs about COVID-19 in locations where sick customers may visit (e.g., police and fire stations) or including COVID-19 information in automated messages
 - Where appropriate, limit customers' and the public's access to the worksite, or restrict access to only certain workplace areas.
 - Consider strategies to minimize face-to-face contact (e.g., drive through windows, phone-based communication, telework).
 - Communicate the availability of medical screening or other worker health resources as it becomes available (e.g., on-site clinic; telemedicine services).

- **Personal Protective Equipment (PPE)** Each department should select the combination of PPE that protects workers specific to their workplace. Workers with medium exposure risk may need to wear some combination of gloves, a gown, a face mask, and/or a face shield or goggles. PPE ensembles for workers in the medium exposure risk category will vary by work task, the results of the hazard assessment, and the types of exposures workers have on the job.
 - H&S Coordinators will assist the departments in the PPE hazard assessments.

HIGH OR VERY HIGH EXPOSURE RISK: What to do to protect employees

In workplaces where workers have high or very high exposure risk, departments should follow the "Steps To Reduce Employees' Risk of Exposure to SAR-CoV-2" on page 2 and implement control measures described in this section.

- **Engineering Controls**

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- Use isolation rooms when available for performing aerosol-generating procedures on patients with known or suspected COVID-19. This is primarily for medical environments.
- Use special precautions associated with Biosafety Level 3 when handling specimens from known or suspected COVID-19 patients. For more information about biosafety levels, consult the U.S. Department of Health and Human Services (HHS) "Biosafety in Microbiological and Biomedical Laboratories" at www.cdc.gov/biosafety/publications/bmbl5
- **Administrative Controls**
 - If working on medical calls or in a healthcare facility, follow existing guidelines and facility standards of practice for identifying and isolating infected individuals and for protecting workers.
 - Departments with employees in the High or Very High Risk categories shall develop COVID-19 Response & Precaution Plans.
 - When available, offer enhanced medical monitoring for employees.
 - Provide employees with job-specific education and training on preventing transmission, including routine/refresher training.
 - Psychological and behavioral support is available to address employee stress through the Employee Assistance Program. Flyers and other materials will be provided to the departments.
- **Safe Work Practices**
 - Provide emergency responders and other essential personnel who may be exposed while working away from fixed facilities with alcohol-based hand rubs containing at least 60% alcohol for decontamination in the field.
- **Personal Protective Equipment (PPE)**
 - Most workers at high or very high exposure risk likely need to wear gloves, a gown, a face shield or goggles, and either a face mask or a respirator, depending on their job tasks and exposure risks. Departments with workers in these categories shall perform risk assessments and include the written Response & Precaution Plans.

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APPENDIX #1

SUBJECT: COVID-19 Leave Procedure

PURPOSE: To provide a mechanism whereby employees may be away from the workplace, using either employer, or employee, paid or unpaid leave.

APPLICABILITY: This procedure applies to regular, full-time employees of the City of Clarksville.

REFERENCES:

City Code Title 1.5, Chapter 6, Sec 1.5-601, 602, 607

POLICY STATEMENT: Regular, full-time employees of the City of Clarksville are hereby authorized to use accumulated paid leave to care for a sick household member while that household member is quarantined for the COVID-19 virus. Employees are eligible for employer paid leave when quarantined by their personal treating physician for their COVID-19 virus diagnosis. For employees that test positive or are quarantined by a physician for COVID-19 they shall receive up to an additional 2 weeks of paid leave, this leave is separate from accrued annual and sick leave. This is limited to 2 weeks per employee (80 hours for full-time employees / 120 hours for Clarksville Fire Rescue shift personnel / 2 calendar weeks per their defined schedule for regular part time employees).

IMPLEMENTATION:

A. When an employee experiences COVID-19 symptoms (as outlined in the below link), the affected employee will present to a healthcare provider and be tested. <https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html> If the healthcare provider places the employee on quarantine, the employee will submit said quarantine mandate to HRBenefits@cityofclarksville.com, and remain off work, on employer paid leave, until the test results are received. If the test results are positive, the employee will submit said test results to HRBenefits@cityofclarksville.com, and remain off work, on employer paid leave, until released by their healthcare professional. If the test results are negative, the employee will present to work on the next regular work day, and submit said test results to their supervisor.

B. When a member of the employee's household experiences COVID-19 symptoms (as outlined in the below link), the affected household member will present to a healthcare provider and be tested. <https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html> If the healthcare provider places the household member on quarantine, the employee will submit said quarantine mandate to HRBenefits@cityofclarksville.com, and remain off work, on employee paid leave, until the test results are received. If the test results are positive, the employee will submit said test results to HRBenefits@cityofclarksville.com, and remain off work,

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on employee paid leave, until released by their healthcare professional. If an employee has no leave time available, they will remain off work on unpaid leave. If the test results are negative, the employee will present to work on the next regular work day, and submit said test results to their supervisor.

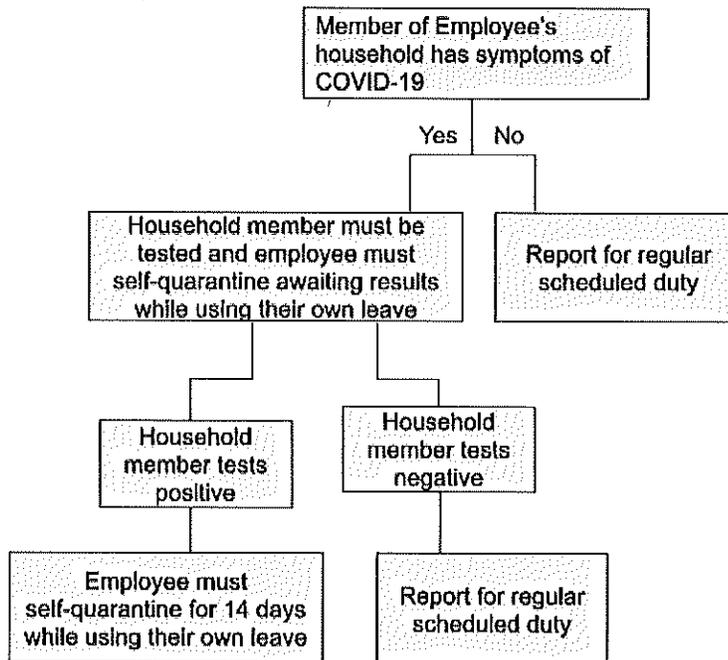
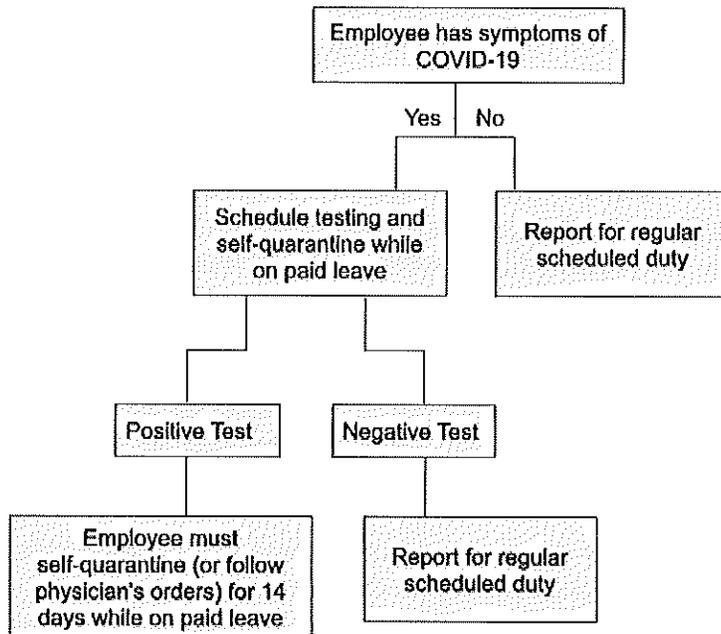
C. When an employee experiences COVID-19 symptoms (as outlined in the below link) while quarantined due to an affected household member, the affected employee will present to a healthcare provider and be tested. <https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html> If the healthcare provider places the employee on quarantine, the employee will submit said quarantine mandate to HRBenefits@cityofclarksville.com, and remain off work, on employer paid leave, until the test results are received. If the test results are positive, the employee will submit said test results to HRBenefits@cityofclarksville.com, and remain off work, on employer paid leave, until released by their healthcare professional. If the test results are negative, the employee will present to work on the next regular work day, and submit said test results to their supervisor.

D. When an employee or member of the employee's household is considered high risk, based on the CDC guidelines, the employee may request to self quarantine for 14 days. The request will be made to their department head. If approved, the employee will use available leave time. If their leave balance is insufficient, the employee will be allowed for their leave balance to go into arrears.

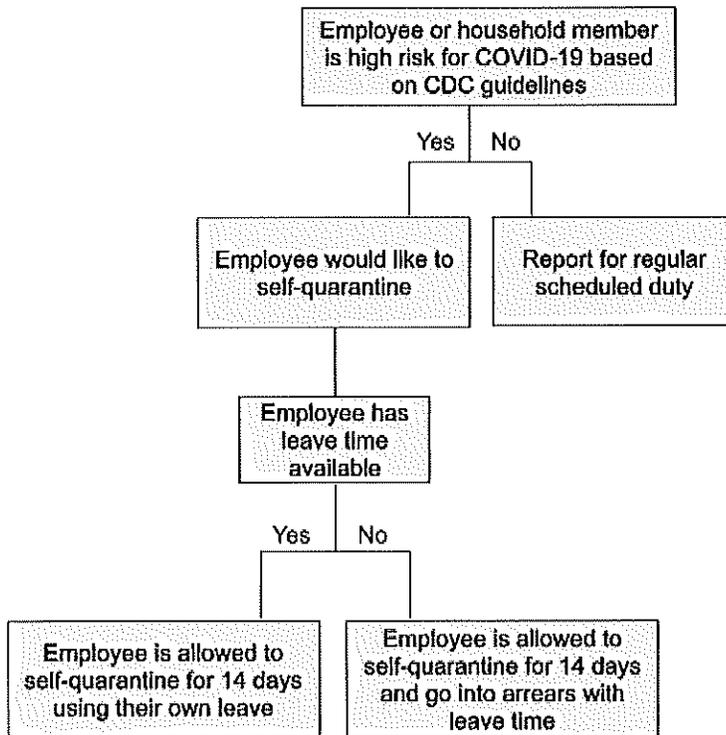
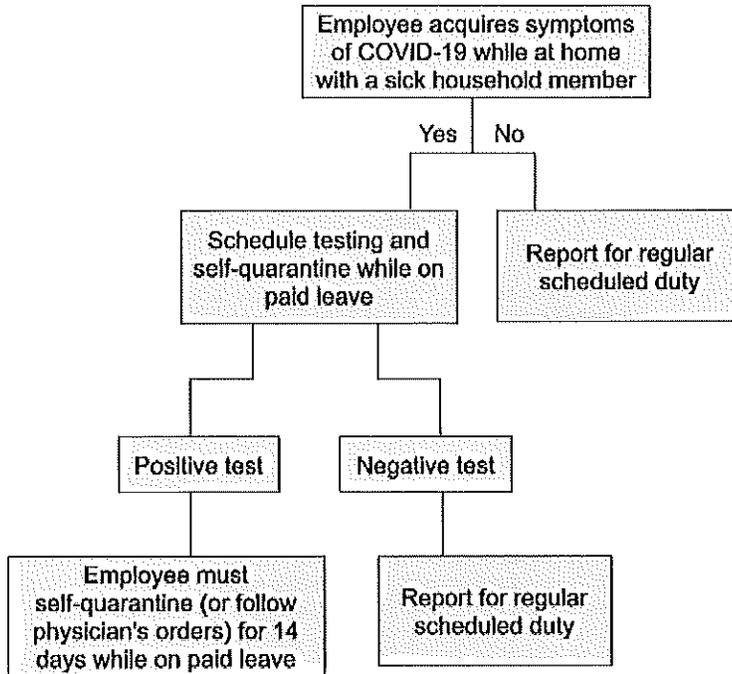
E. When an employee experiences an undue hardship, due to COVID-19, and has to be away from the workplace the employee will inform their supervisor of said undue hardship. The employee will be allowed to remain off work, using their available leave time for up to 14 days. If the employee has insufficient leave time they will be allowed for their leave balance to go into arrears.

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APPENDIX #2



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