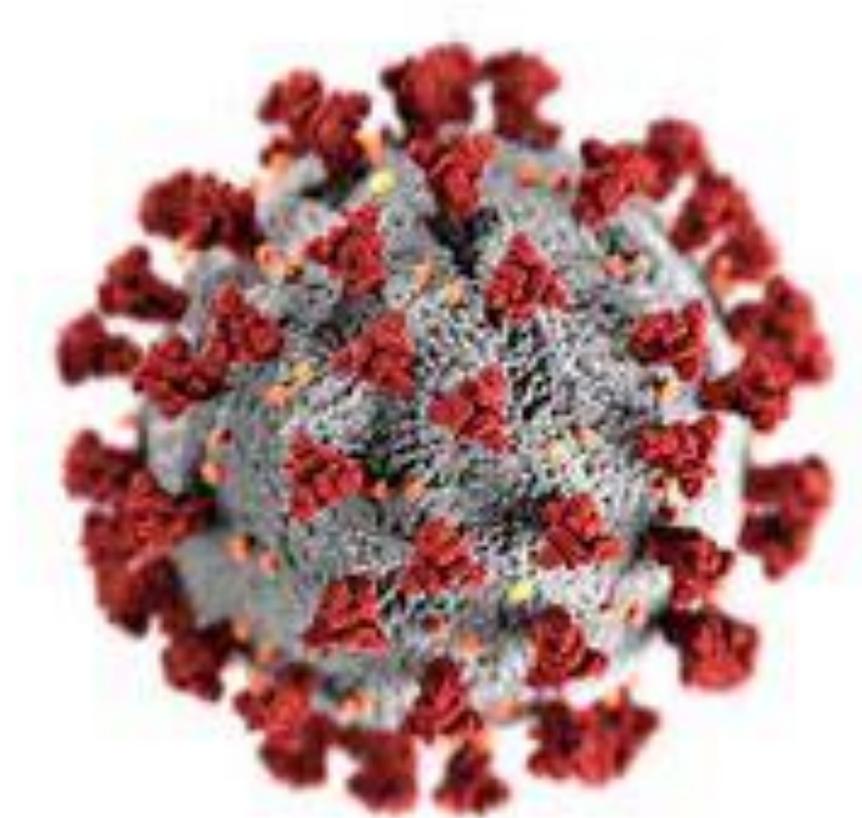


# COVID-19 for Business





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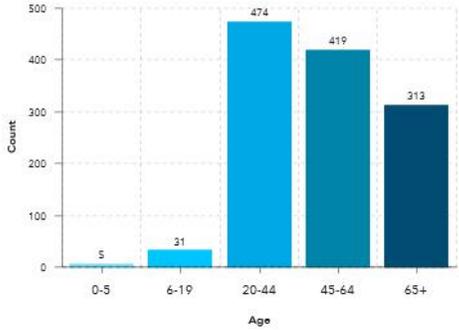
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# MINNESOTA COVID-19 PUBLIC DASHBOARD

Confirmed Case Age Range



Nicollet County: 5

Olmsted County: 114

Otter Tail County: 3

Pine County: 2

Pipestone County: 1

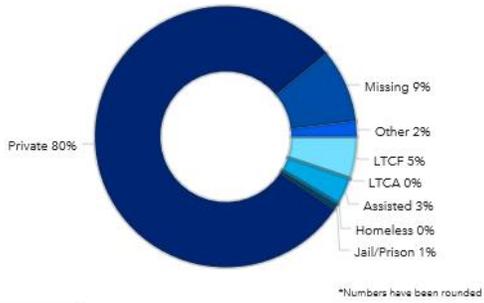
Polk County: 1

Ramsey County: 121

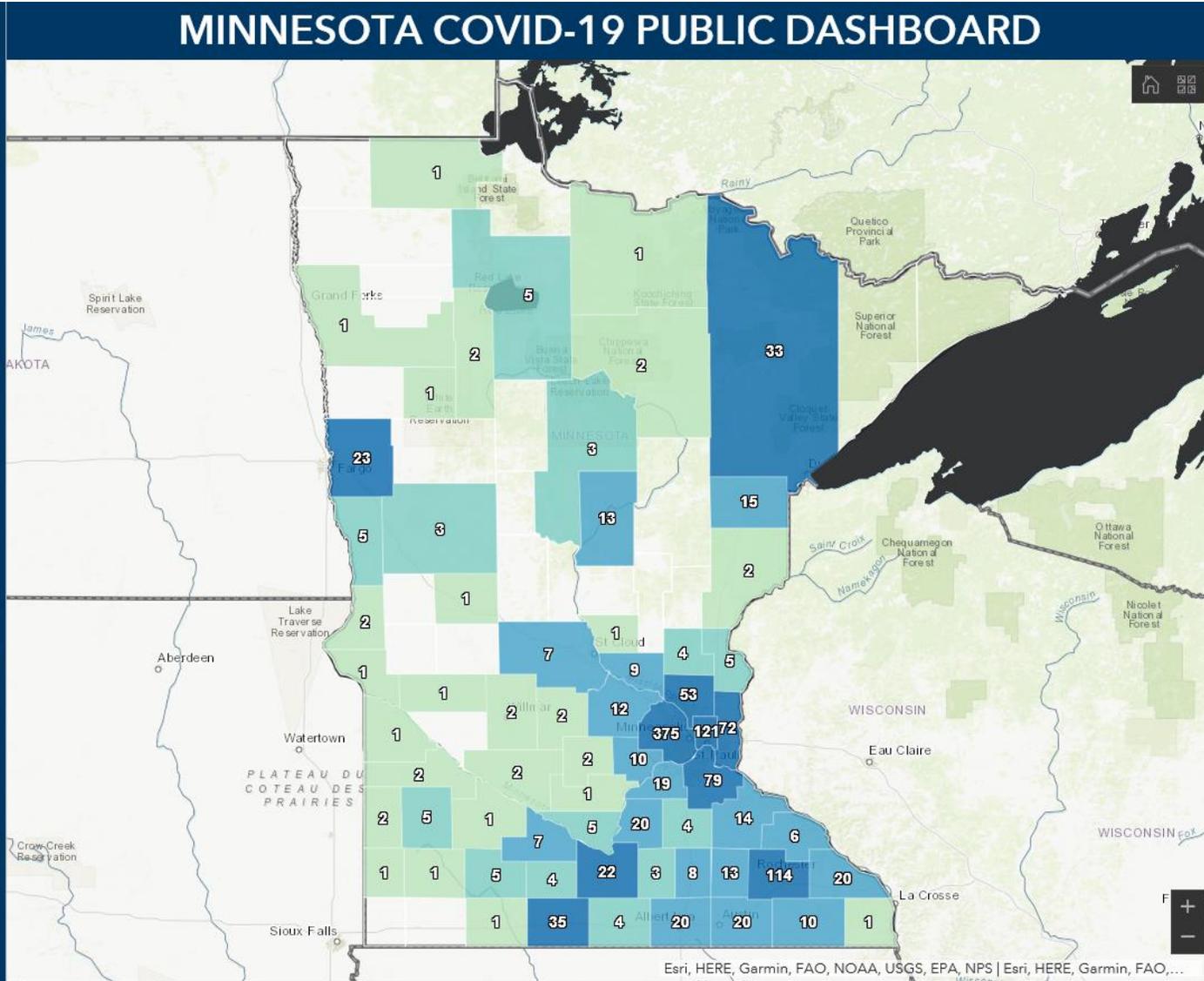
Redwood County: 1

Renville County: 2

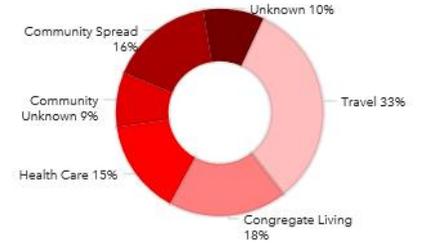
Residence Type



\*Numbers have been rounded



Exposure Type



\*Numbers have been rounded

Case Origin

Hospital Cases

Confirmed Cases

1,242

Last update: a few seconds ago

Released From Isolation

675

Last update: a few seconds ago

Deceased

50

Last update: a few seconds ago

Residence Gender Race

Minnesota Cases Minnesota Department of Health Johns Hopkins University COVID-19 Surveillance CDC

Esri, HERE, Garmin, FAO, NOAA, USGS, EPA, NPS | Esri, HERE, Garmin, FAO,...

# About COVID-19

## **COVID-19 Disease**

- COVID-19 is a viral respiratory illness caused by a coronavirus that has not been found in people before.
- Because this is a new virus, there are still things we do not know, such as how severe the illness can be, how well it is transmitted between people, and other features of the virus. More information will be provided when it is available.

## **Severity**

- Many cases have mild or moderate illness and do not require a clinic visit and most do not require hospitalization.
- Those at highest risk for severe illness include older people or those that have certain underlying health conditions. These include such high risk conditions as a blood disorder, chronic kidney disease, chronic liver disease, compromised immune system, late term or recent pregnancy, endocrine disorders, metabolic disorders, heart disease, lung disease, neurological conditions. Check with your health care provider to see if you are considered high risk.

## How it spreads

- The virus is thought to spread mainly from person-to-person through respiratory droplets produced when an infected person coughs or sneezes.
- It spreads between people who are in close contact with one another (within about 6 feet).
- These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.
- It is also possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes. Wash your hands and clean frequently touched surfaces often.
- Some spread might be possible before people show symptoms (when they are asymptomatic).

# Everyone can work to reduce the spread of COVID-19

- **Cover your coughs and sneezes** with your elbow or sleeve, or a tissue and then throw the tissue in the trash and wash your hands afterwards.
- **Washing your hands often with soap and water for 20 seconds**, especially after going to the bathroom or before eating. If soap and water are not readily available, use an alcohol-based hand sanitizer that contains at least 60% alcohol.
- **Avoid touching your face** – especially your eyes, nose and mouth – with unwashed hands.
- **Stay home if you have cold- or flu-like symptoms**, for seven days after your illness onset or three days after your fever resolves without fever reducing medicine, and avoid close contact with people who are sick.
- **Avoid sharing personal household items**; dishes, towels, bedding, etc.

# Process for notification of a positive case

\*shortage of testing supplies \*Not all who have symptoms are tested

May be different, depending on testing facility

- Patient gets tested by healthcare provider-test gets sent to testing facility (MDH, Mayo, SF, etc.)
- When it comes back positive, they contact MDH and the provider
- Healthcare provider contacts the patient
- MDH notifies LPH and Patient (interview)
- MDH contacts high and medium risk contacts

## COVID-19 Contact Risk Categories

Below are the guidelines that MDH uses to notify contacts of Symptomatic laboratory-confirmed COVID-19 cases

Risk Level	Exposures Identified through Contact Investigation
High	Living in the same household as, being an intimate partner of, or providing care in a <u>nonhealthcare</u> setting (such as a home) for a person with symptomatic laboratory-confirmed COVID-19 infection <i>without using recommended precautions</i> for <a href="#">home care</a> and <a href="#">home isolation</a>
Medium (assumes no exposures in the high-risk category)	<p style="text-align: center;">Close contact with a person with symptomatic laboratory-confirmed COVID-19</p> <p>Close contact is defined as:</p> <p>a) being within approximately 6 feet (2 meters) of a COVID-19 case for a prolonged period of time (e.g., ≥1 hour); close contact can occur while caring for, living with, visiting, or sharing a healthcare waiting area or room with a COVID-19 case</p> <p style="text-align: center;">-or-</p> <p>b) having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on)</p> <p>On an aircraft, being seated within 6 feet (two meters) of a traveler with symptomatic laboratory-confirmed COVID-19 infection; this distance correlates approximately with 2 seats in each direction</p> <p>On a cruise with a laboratory-confirmed COVID-19 case (this assumes the known case does not put the person in the high-risk category - e.g., family member, travel companion)</p> <p>Living in the same household as, an intimate partner of, or caring for a person in a <u>nonhealthcare</u> setting (such as a home) to a person with symptomatic laboratory-confirmed COVID-19 infection <b>while consistently using recommended precautions</b> for <a href="#">home care</a> and <a href="#">home isolation</a></p>
Low (assumes no exposures in the medium or high-risk categories)	Being in the same indoor environment (e.g., a classroom, a hospital waiting room) as a person with symptomatic laboratory-confirmed COVID-19 for a prolonged period of time but not meeting the definition of close contact
No identifiable risk	Interactions with a person with symptomatic laboratory-confirmed COVID-19 infection that do not meet any of the high-, medium- or low-risk conditions above, such as walking by the person or being briefly in the same room.

# Your agency:

- MDH will not contact you unless you specifically are identified as a close contact.
- Please consider HIPAA/Confidentiality laws before sharing an employee's personal/medical information.
- MDH/CDC has guidelines on disinfecting.
- This is where “following the rules” is important. More to come...

## How long to stay home if sick

- If you have symptoms of a respiratory disease (these include fever, coughing, muscle aches, sore throat, and headache), you should stay home for at least 7 days, and for 3 days with no fever and improvement of respiratory symptoms—whichever is longer. (Your fever should be gone for 3 days without using fever-reducing medicine.)
- For example, if you have a fever and coughing for 4 days, you need to stay home 3 more days with no fever for a total of 7 days. Or, if you have a fever and coughing for 5 days, you need to stay home 3 more days with no fever for a total of 8 days.

## Going to the doctor

- If you have symptoms and can manage those symptoms at home, you don't have to seek health care or be tested for COVID-19. Just stay home while you are sick. This prevents you from accidentally spreading COVID-19 to others who may be at higher risk for serious complications.
- If you are older or have underlying medical conditions, it may be helpful to let your health care provider know you are sick. They may have some specific advice for you.
- Some people with COVID-19 have worsened during the second week of illness. Seek medical care right away if your illness is worsening (for example, if you have difficulty breathing, ongoing pain/pressure in your chest, new confusion/not being able to wake up, bluish lips/face). Before going to the doctor's office or emergency room, call ahead and tell them your symptoms. They will tell you what to do.

## COVID-19 SWHHS Employee Guidance

Updated March 30, 2020

\*Guidance provided with information from CDC and MDH



<p>Criteria to stay home (specific to COVID-19)</p>	<p>Call your supervisor if you are ill with an explanation of symptoms. Confidentiality <u>will be maintained</u>.</p> <p>According to CDC, patients with confirmed COVID-19 have had mild to severe respiratory illness with symptoms of :</p> <ul style="list-style-type: none"><li>• Fever (greater than 100.4)</li><li>• Cough</li><li>• Shortness of breath</li></ul> <p><b>SCREENING FOR SWHHS STAFF (FROM MDH):</b> Do you have a temperature or fever of 100.4 or above? Do you have an acute onset persistent cough? Do you have shortness of breath?</p> <p>If <u>any</u> of the above are <b>YES</b> – <u>you will not be allowed to come to work</u>.</p> <p>You shall stay home (self-isolate) for at least 7 <u>days</u>, and for 3 days with no fever and improvement of respiratory symptoms—whichever is longer. (Your fever must be gone for 3 days without using fever-reducing medicine.)</p> <p>For example, if you have a fever and coughing for 4 days, you need to stay home 3 more days with no fever for a total of 7 days. <u>Or</u>, if you have a fever and coughing for 5 days, you need to stay home 3 more days with no fever for a total of 8 days.</p> <p><b>If a household member has any of the symptoms</b> mentioned above (<u>temp</u>, acute onset of persistent cough, or shortness of breath), you shall stay home for 14 days after the last date of exposure. (If additional members of your household become sick, you could be home for much longer than 14 days.)</p> <ul style="list-style-type: none"><li>➤ Incorporate precautions in the home, and monitor for symptoms. Limit activities in public for 14 days after the last date of exposure—you may still leave home to pick up essential needs.</li><li>➤ Practice social distancing –keep at least 6 feet of distance between yourself and other people</li><li>➤ Wash hands often, for minimum 20 seconds each time</li><li>➤ Don't touch eyes, nose, or mouth with unwashed hands</li><li>➤ Cover your cough</li><li>➤ Monitor for symptoms and stay home if you get sick</li></ul> <p><b>If you have had <u>close contact with someone who was diagnosed or suspected to have COVID-19 within the past 14 days</u>, you should not report to work.</b> Close contact means: A person has been within 6 feet of a COVID-19 case or suspected case for one hour or longer. Close contact can occur while caring for, living with, or visiting with a COVID-19 case. – <b>OR</b> -</p>
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## COVID-19 SWHHS Employee Guidance

Updated March 30, 2020

\*Guidance provided with information from CDC and MDH



	<p>A person has had direct contact with body fluids of a COVID-19 case or suspected case from being coughed on, been intimate with, etc.</p> <p><b>If at any time you do not feel safe being at work, please go home – there is no pressure to stay at work.</b></p>
If I have symptoms, when should I see a doctor?	<p>If you have symptoms and can manage those symptoms at home, you don't have to seek health care or be tested for COVID-19. <b>Just stay home while you are sick.</b> If you are older or have underlying medical conditions, it may be helpful to let your health care provider know you are sick. They may have some specific advice for you. Some people with COVID-19 have worsened during the second week of illness. If your symptoms worsen at any point, and you do need to go see a doctor, <b>call ahead before going in.</b></p>
What can EVERYONE do at work to minimize risk:	<ul style="list-style-type: none"><li>• Put distance between yourself and others (within 6 feet)</li><li>• Minimize contact with others (no more than 10 minutes)</li><li>• <b>WASH YOUR HANDS!!!</b> Wash your hands frequently – for at least 20 seconds. If no soap is available, use hand sanitizer with at least 60% alcohol content</li><li>• Avoid touching your face, mouth, nose and eyes</li><li>• Cover your cough/sneeze. Discard tissues after each use.</li><li>• Routinely clean commonly touched surfaces, such as electronics, door handles, and phones.</li><li>• Avoid social gatherings that are non-essential</li><li>• Avoid <b>ANY</b> non-essential travel and shopping trips</li></ul>
Client meetings (in-office; home visits; and client transports)	<p>Defer non-essential face to face contact when possible.</p> <p>If you must meet face to face with clients please utilize the attached "Pre-visit COVID-19 Questions". On the visit to minimize risk:</p> <ul style="list-style-type: none"><li>• Put distance between yourself and others (within 6 feet)</li><li>• Minimize contact with other<ul style="list-style-type: none"><li>○ Do what must be done in person, and complete the rest over the phone when possible</li></ul></li></ul>
How is this virus spread?	<p>Most infection lives in droplets from coughing/sneezing. If a person is not coughing and sneezing and you are practicing good infection control (washing hands), you can curb risk.</p> <p>This virus can sit on surfaces, but it is not the main way we are seeing spread. As long as people are washing their hands and are not laying their head on high touch surfaces, risk is low.</p>

# State of Minnesota's response

Utilizes data from many different sources

- Social distancing
- Stay at Home Order
- Assistance for businesses
- Assistance for individuals
- Supply chain- procuring supplies like vents, masks, and other PPE
- Surge planning
  - Expanding bed capacity
  - Alternative Care sites
  - Volunteers



Stay home except for essential needs

**#StayHomeMN**

Extended until May 4

STAY HOME

STOP THE SPREAD

SAVE LIVES

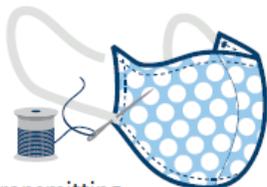
# Social Distancing

- Encourage staff to telework (when feasible), particularly people with underlying medical conditions.
- Implement social distancing measures:
  - Increase physical space between workers at the worksite.
  - Stagger work schedules.
  - Decrease social contacts in the workplace (e.g., limit in-person meetings, limit # of people in break room, etc.)
- Limit large work-related gatherings (e.g., staff meetings, after-work functions).
- Limit non-essential work travel (domestic and international). Only one person per vehicle.
- Consider regular health checks (e.g., temperature and respiratory symptom screening) of staff and visitors entering buildings (if feasible).
- Require workers who are ill to stay home.
- Provide accommodation (e.g., telework or separate office) for people with underlying medical conditions.
- Screen other companies on their policies regarding social distancing, especially in other states.

# The Difference Between Alternative Masks and Surgical Masks for COVID-19

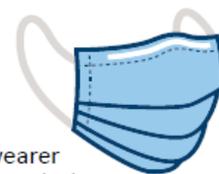
## What is it?

### Alternative Masks



- Non-FDA-regulated masks, including homemade masks.
- May reduce the likelihood of transmitting the virus by the wearer, but they are not proven to protect health care staff or patients.

### Surgical Masks



- FDA-regulated masks that are fluid resistant and provide the wearer protection against large droplets, splashes, or sprays of bodily or other hazardous fluids.

## Who wears it?

- Asymptomatic people.

- Health care staff during the evaluation of and care for suspected or confirmed COVID-19 patients.

## How it works

- **Protects other people** by reducing the amount of respiratory droplets expelled by a person who may be infected but not showing signs of illness.

- Protects the wearer by creating a barrier to the virus or body fluid that may contain the virus.

## Limitations

- Not regulated and do not protect the wearer.
- Not to be used by people who are sick.
- Breathing into a facemask builds up moisture, which can be uncomfortable to wear.
- Need to be regularly washed and sanitized.
- Avoid touching the mask while wearing it; if you do touch it, wash hands thoroughly.

- Due to high demand, supply may be limited.
- Avoid touching the mask while wearing it; if you do touch it, wash hands thoroughly.
- Do not wash the mask.
- Reuse of facemasks may be limited by the type of fastening (e.g., elastic ear hooks may be more robust than ties that are more liable to tearing).
- Discard when it becomes damaged or deformed; becomes wet or visibly dirty; breathing becomes difficult; or if it becomes contaminated with blood, respiratory or nasal secretions, or other bodily fluids.

## Disposal

- During disposal, avoid touching the mask and wash hands thoroughly afterward.

- Should be donned and doffed appropriately.
- During disposal, avoid touching the mask and wash hands thoroughly afterward.

# Sick Leave Policies

- Ensure that your sick leave policies are flexible and consistent with public health guidance and that employees are aware of these policies.
- Do not require a health care provider's note for employees who are sick with acute respiratory illness to validate their illness or to return to work, as health care provider offices and medical facilities may be extremely busy and not able to provide such documentation in a timely way.
- Employers should maintain flexible policies that permit employees to stay home to care for a sick family member. Employers should be aware that more employees may need to stay at home to care for sick children or other sick family members than is usual.
  - Aside from ensuring that sick employees are staying home, it's important for organizations to identify critical functions and develop plans for how to staff those functions even with elevated absences.
  - Some organizations may find it helpful to emphasize cross-training and develop backup plans for those "must-do" functions.
  - Working from home is an option for some people, and we encourage employers to find ways to expand its use.

# Questions?

If you have questions in the future, please don't hesitate to call.