



JD Home Healthcare, Inc.

COVID-19 Preparedness Plan

Meets Minnesota Plan requirements released on July 22nd, 2020

Updated on December 11th, 2020

COVID-19 Preparedness Plan for JD Home Healthcare, Inc.

JD Home Healthcare, Inc. is committed to providing a safe and healthy workplace for all our workers, service recipients, volunteers, and visitors. To ensure we have a safe and healthy workplace, JD Home Healthcare, Inc. has developed the following COVID-19 Preparedness Plan in response to the COVID-19 pandemic. Managers and workers are all responsible for implementing this plan. Our goal is to mitigate the potential for transmission of COVID-19 in our workplaces and communities, and that requires full cooperation among our workers and management. Only through this cooperative effort can we establish and maintain the safety and health of all persons in our workplaces.

The COVID-19 Preparedness Plan is administered by Joshua Schott, CEO, who maintains the overall authority and responsibility for the plan. However, management and workers are equally responsible for supporting, implementing, complying with and providing recommendations to further improve all aspects of this COVID-19 Preparedness Plan. JD Home Healthcare, Inc.'s managers, supervisors, and staff have our full support in enforcing the provisions of this plan.

Our workers are our most important assets. JD Home Healthcare, Inc. is serious about safety and health and protecting our workers. Worker involvement is essential in developing and implementing a successful COVID-19 Preparedness Plan. We have involved our workers in this process by: Acknowledging and addressing employee concerns, implementing preventative safety plans, as well as following the COVID-19 Preparedness guidance provided by the Minnesota Department of Health.

JD Home Healthcare, Inc.'s COVID-19 Preparedness Plan follows the industry guidance developed by the state of Minnesota, available at the Stay Safe Minnesota website (<https://staysafe.mn.gov>), which is based upon Centers for Disease Control and Prevention (CDC) and Minnesota Department of Health (MDH) guidelines for COVID-19, Minnesota Occupational Safety and Health Administration (MNOSHA) statutes, rules and standards, and Minnesota's relevant and current executive orders. It addresses:

- ensuring sick workers stay home and prompt identification and isolation of sick persons;
- social distancing – workers must be at least six-feet apart;
- worker hygiene and source controls, including face coverings;
- workplace building and ventilation protocol;
- workplace cleaning and disinfection protocol;
- drop-off, pick-up and delivery practices and protocol; and
- communications and training practices and protocol.

JD Home Healthcare, Inc. has reviewed and incorporated the industry guidance applicable to our business provided by the state of Minnesota for the development of this plan, including the following industry guidance of Licensed or Certified Non-Residential Services COVID-19 Preparedness Planning. Other conditions and circumstances included in the industry guidance and addressed in the plan that are specific to our business include:

- additional protections and protocols for customers, clients, guests and visitors;
- additional protections and protocols for face coverings and personal protective equipment (PPE);
- additional protections and protocol for access and assignment;
- additional protections and protocol for sanitation and hygiene;
- additional protections and protocols for work clothes and handwashing;
- additional protections and protocol for distancing and barriers;
- additional protections and protocols for managing occupancy;
- additional protocols to limit face-to-face interaction;
- additional protections for receiving or exchanging payment; and
- additional protections and protocols for certain types of businesses within an industry.

Ensure sick workers stay home and prompt identification and isolation of sick persons

Workers have been informed of and encouraged to self-monitor for signs and symptoms of COVID-19. The following policies and procedures are being implemented to assess workers' health status prior to entering the workplace and for workers to report when they are sick or experiencing symptoms. Workers experiencing any symptoms of COVID-19, or have a known direct exposure, will not present to the workplace in-person. Workers will immediately make their supervisor aware of their symptoms or possible exposure. Supervisors will strongly encourage workers to promptly reach out to their health care providers in order to be tested for COVID-19. Workers will not be allowed to return to work with service recipients until they have received a negative COVID-19 test result or have been quarantined for at least 10 days and have been symptom free for a minimum of 3 days. Workers will also immediately report, to their supervisor, any suspected service recipient who is displaying potential COVID-19 symptoms or has had a potential exposure to COVID-19.

JD Home Healthcare, Inc. has implemented leave policies that promote workers staying at home when they are sick, when household members are sick, or when required by a health care provider to isolate or quarantine themselves or a member of their household. Workers who are experiencing symptoms, have had a direct exposure, or have tested positive for COVID-19 and are unable to return to work promptly, may request FMLA leave up to 12 weeks. Employees who have been instructed to quarantine may be eligible for sick pay. This pay falls under the Families First Coronavirus Response Act (FFCRA) and specifies that employees may request up to 80 hours of paid sick leave, at a full rate of pay, to care for themselves, or may request up to 80 hours of paid sick leave, at a rate of 2/3 pay, to care for a family member who is experiencing COVID-19. Employees, who have been employed for a minimum of 30 days, may only request the additional 10 weeks of pay, at 2/3 rate of pay, if the employee has a bona fide reason and are responsible for the care of a young child and the child's school or daycare has closed, with no other viable options than to remain home to provide child care. At the time of the most recent update to this plan, the FFCRA is set to expire on December 31st, 2020 and there are, at present time, no plans to continue the FFCRA after December 31st, 2020. The expiration date of the FFCRA is in no way a decision of the company and is solely based on federally determined laws. In the event the

FFCRA is continued, JD Home Healthcare will continue to ensure staff receive sick pay when they meet the criteria listed. Small businesses with under 50 employees may request an exemption to the 10-week school or daycare closing child leave pay if they can prove it would jeopardize the viability of the business.

Accommodations for workers with underlying medical conditions or who have household members with underlying health conditions have been implemented. Staff with underlying health conditions or who have family members with underlying health conditions will be granted the ability to restrict their availability with high risk service recipients and a lower risk location placement will be offered if available.

JD Home Healthcare, Inc. has also implemented a policy for informing workers if they have been directly or indirectly exposed to a person with COVID-19 at their workplace and requiring them to quarantine for the required amount of time determined by the level of contact, use of personal protective equipment, and COVID-19 testing results as considering factors. In the event a supervisor is made aware of a service recipient has had a direct exposure, is displaying symptoms of COVID-19, or has received a positive COVID-19 test result, it is the responsibility of the supervisor to immediately pause services provided, until a determination is made to either continue services with the acknowledgement and agreement of management and staff, with CDC, MDH and company approved safety and personal protective equipment followed guidelines, or discontinue sending staff to the location until the service recipient has received a negative COVID test result, or has been quarantined for 10 days along with 3 days minimum symptom free. Staff with known direct exposure to the service recipient will be subject to the same preventative and determination standards. Staff who choose to remain working with a service recipient regardless of recipient exposure, symptoms, or positive test results will always use all required personal protective equipment while working in respect to MDH barrier protection. Staff will not work with any other service recipients and will be isolated to only the singular work site until all members of the service recipient's home have surpassed the 10 day quarantine period with no symptoms for 3 days. Staff must also provide a negative COVID-19 test result before returning to work with other service recipients.

In addition, a policy has been implemented to protect the privacy of workers' health status and health information. All employees of JD Home Healthcare are to be familiar with and expected to uphold and respect HIPAA laws and regulations when addressing health information of service recipients, staff, volunteers, and visitors. All submitted health information, including COVID-19 test results, will be treated with confidence and will not be shared beyond necessary members of JD Home Healthcare management in order to make an informed decision about an employee's ability to perform work functions safely, with the exception of state or federal reporting requirements. To maintain confidentiality, employees should only submit their results to their direct manager and human resources through company email, and not from their personal email or text message.

Social distancing – Workers must be at least six-feet apart

Social distancing of at least six feet will be implemented and maintained between service recipients, staff, volunteers, and visitors in the workplace through the following engineering and administrative

controls: When working with service recipients, staff will be encouraged to maintain a distance of 6' feet whenever possible. Paper or cloth masks use by staff is mandated at all times when working with service recipients, unless an accepted health restriction by the staff is presented with a physician excused document, or the service recipient has a psychological concern that would cause extreme stress during the time services are being provided. Staff with underlying health conditions or household family members with underlying health conditions may request to limit availability to high risk recipients and a lower risk service recipient will be offered to the staff member, if available. When in the office setting, desk/chairs will be placed at least 6' apart in order to maintain social distancing. Visitors will only be allowed into the office by appointment only. Shared office supplies will be limited, and high contact personal use supplies, such as pens, pencils, staplers, etc, will be provided to the individual and not shared. Personal protective equipment is not to be shared and only used by one individual. All meetings and required communication will be conducted via the telephone and/or virtual meetings, along with staff and members of management will be encouraged to work from home, whenever possible. Shared areas and high touch items (such as light switches and door handles), such as the office, and service recipient residences, where more than one staff member works, will be disinfected by following a sanitation schedule created and enforced by the Direct Managers, Coordinators, and Supervisors assigned to oversee the specific service recipient's program through a use of a checklist provided to staff. Limiting shared transportation will be encouraged whenever possible. Staff will be provided with and instructed on the use of personal protective equipment.

Worker hygiene and source controls

Basic infection prevention measures are being implemented at our workplaces at all times. Workers are instructed to wash their hands for at least 20 seconds with soap and water frequently throughout the day, but especially at the beginning and end of their shift, prior to any mealtimes and after using the restroom. All service recipients, staff, volunteers, and visitors to the workplace are required to wash or sanitize their hands prior to or immediately upon entering the facility. Hand-sanitizer dispensers (that use sanitizers of greater than 60% alcohol) are at entrances and locations in the workplace so they can be used for hand hygiene in place of soap and water, as long as hands are not visibly soiled. When visiting the office, service recipient residences, and public locations, staff will use proper handwashing procedures whenever possible, as well as utilize hand sanitizer. In the JD Home Healthcare office, hand sanitizer and masks will be made available upon entrance. Personal protective equipment will be provided to the staff, as well as refill of any necessary items, upon request. Personal protective equipment will include, but is not limited to, cloth and paper masks, hand sanitizer, and medically accepted gloves. Source controls are always being implemented at our workplaces. Staff may request to visit the office to obtain new/more supplies, or they may request that a supervisor bring them to the work site or other place of agreed upon meeting.

Service recipients, staff, volunteers, and visitors are being instructed to cover their mouth and nose with their sleeve or a tissue when coughing or sneezing, even during mask use, and to avoid touching their face, particularly their mouth, nose and eyes, with their hands. Service recipients, staff, volunteers, and visitors are expected to dispose of tissues in provided trash receptacles and wash or sanitize their hands immediately afterward. Respiratory etiquette will be demonstrated on posters and supported by making tissues and trash receptacles available to all workers and other persons entering the workplace.

Cover your Cough, Proper hand washing procedures, mask requirement, and a visitor/employee health screening checklist signs will be posted in a conspicuous location located in the JD Home Healthcare office, as well as provided in the online training material.

Workplace building and ventilation protocol

Operation of the building in which the workplace is located, includes necessary sanitation, assessment and maintenance of building systems, including water, plumbing, electrical, and heating, ventilation and air conditioning (HVAC) systems. While in the JD Home Healthcare office, windows will be open if possible. Staff and service recipients will utilize windows and ventilation whenever possible when in the service recipient's residence, at the acknowledgement and permission of the service recipient. The maximum amount of fresh air is being brought into the workplace, air recirculation is being limited, and ventilation systems are being properly used and maintained. Steps are also being taken to minimize recycled air flow blowing across people.

Workplace cleaning and disinfection protocol

Regular practices of cleaning and disinfecting have been implemented, including a schedule for routine cleaning and disinfecting of work surfaces, equipment, tools and machinery, vehicles and areas in the work environment, including restrooms, break rooms, lunch rooms, meeting rooms, checkout stations, fitting rooms, and drop-off and pick-up locations. Frequent cleaning and disinfecting is being conducted of high-touch areas, including phones, keyboards, touch screens, controls, door handles, elevator panels, railings, copy machines, credit card readers, delivery equipment, etc. When in the JD Home Healthcare office, members of management are responsible for the cleaning and sanitizing of their own desk space and personal use items, such as pens, staplers, etc. A member of management will also use an approved sanitizer (listed in COVID-19 Preparedness Plan) to disinfect shared areas at a minimum of one to three times a day. Sanitizing checklists recognizing frequently touched locations and items will be provided to staff at service recipient's residences when the personal residence has more than one staff that works at the individual location and will be completed at a minimum of twice per 8 hour shift, with the permission of the service recipient/resident responsible for the personal residence. If a frequent cleaning and disinfecting is being conducted of high-touch areas, including phones, keyboards, touch screens, controls, door handles, elevator panels, railings, copy machines, credit card readers, delivery equipment, etc. If a service recipient, staff, volunteer, or visitor is having potential COVID-19 symptoms, and services cannot be paused due to a severe adverse response resulting in a dangerous or life threatening situation of the service recipient, extra disinfecting steps will be taken to sanitize the residence of the service recipient.

Appropriate and effective cleaning and disinfecting supplies have been purchased and are available for use in accordance with product labels, safety data sheets and manufacturer specifications, and are being used with required personal protective equipment for the product. Appropriate and effective cleaning and disinfecting supplies have been purchased and are available for use in accordance with product labels, safety data sheets and manufacturer specifications, and are being used with required personal

protective equipment for the product. Use EPA-registered disinfectants recommended by the CDC to clean surfaces. The following are acceptable and commonly found disinfectants that work against SARS-CoV-2; Lysol disinfectant wipes, sprays, or cleaners, Clorox Bleach wipes, sprays, or cleaners, Glycerin Hard Surface Cleaner, Scrubbing Bubbles disinfectant cleaners, Soft Scrub with Bleach, Arm & Hammer disinfecting wipes, Windex disinfectant cleaner, Comet disinfecting bathroom cleaner. For a full list, visit <https://www.epa.gov/coronavirus>

Drop-off, pick-up and delivery practices and protocol

If a service recipient is experiencing symptoms, has a known exposure, or a positive COVID-19 test result, and remote services are being implemented, a supervisor may choose to give permission to staff, or deliver items themselves, such as necessary groceries or personal needs items, and may leave the items directly outside the residence door with the previous knowledge of the service recipient, as well as a delivery confirmation performed through the phone immediately after delivery.

Communications and training practices and protocol

This COVID-19 Preparedness Plan will be communicated through STARs Online training services to all workers on Monday August 10th, 2020, and necessary training was provided. Additional communication and training will be ongoing by JD Home Healthcare through the utilization of STAR Services online employee training programs for staff, as well as notification of change through USPS mail, email, or during meetings with a direct manager or direct coordinator to service recipients and case managers. Training will be provided to all workers who did not receive the initial training and prior to initial assignment or reassignment.

Instructions will be communicated to all workers, including employees, temporary workers, staffing and labor pools, independent contractors, subcontractors, vendors and outside technicians, as well as service recipients, about protections and protocols, including: 1) social distancing protocols and practices; 2) drop-off, pick-up, delivery and general in-store shopping; 3) practices for hygiene and respiratory etiquette; 4) requirements regarding the use of face-coverings and/or face-shields by workers and service recipients. All service recipients, staff, volunteers and visitors will also be advised not to enter the workplace if they are experiencing symptoms or have contracted COVID-19. If symptoms are suspected or if staff has had a direct exposure, staff must not attempt to attend work and must immediately call their direct supervisor to report concerns of COVID-19. Management will report all potential COVID-19 instances and follow-up information to Josh Schott, CEO, Jennifer Wonsever, QAQC Manager, and Delisa Green, HR Generalist.

Managers and supervisors are expected to monitor how effective the program has been implemented. Managers and supervisors are to report all staff instances of suspected COVID-19 to Human Resources for tracking. Supervisors, managers, and staff will strongly encourage the use of masks to all service recipients, staff, volunteers, and visitors during services performed and public outings. All management and workers are to take an active role and collaborate in carrying out the various aspects of this plan, and update the protections, protocols, work-practices and training as necessary. This COVID-19

Preparedness Plan has been certified by JD Home Healthcare, Inc management and the plan was posted throughout the workplace and made readily available to employees and service recipients on Monday August 10th, 2020. It will be updated as necessary by Delisa Green, Human Resources Generalist, in cooperation with Josh Schott, CEO, and Jennifer Wonsever, VP & QAQC Manager. Updates to this plan were released on December 11th, 2020 to reflect changes to CDC, MDH, and JD Home Healthcare guidelines and policies implemented since the original release of this COVID Preparedness Plan.

Additional protections and protocols

Other conditions and circumstances addressed in this plan that are specific to our business include:

** Please review JD Home Healthcare, Inc COVID-19 Preparedness Planning attachment for more specific details regarding our policies.

Certified by:

Delisa Green, HR Generalist



August 5th, 2020

Joshua Schott, CEO



August 5th, 2020

Delisa Green, HR Generalist



December 11th, 2020

Joshua Schott, CEO



December 11th, 2020

COVID-19 Preparedness Plan

DHS Licensed or Certified Nonresidential Services Deemed Critical Businesses during Peacetime Emergency

(excluding child care programs or programs certified by the Behavioral Health Division)

According to Executive Order 20-48, critical businesses, including providers licensed or certified by the

Department of Human Services to deliver nonresidential services, are required to follow guidance from the [Minnesota Department of Health \(MDH\)](#) and the [Centers for Disease Control and Prevention \(CDC\)](#) to mitigate the spread of COVID-19. Because there is currently no vaccine for this virus, you will need to operate your program for many months with the possibility that COVID-19 could be confirmed in your program. The MDH/CDC guidance is designed to prevent, mitigate, or respond to the transmission of COVID-19.

[Executive Order 20-74](#), signed by Gov. Walz on June 5, 2020, requires all critical businesses to develop and implement a COVID-19 Preparedness Plan (“Plan”) that describes how your business will implement, at a minimum, the following components, in compliance with MDH and CDC guidelines:

1. hygiene and source control;
2. cleaning and disinfecting;
3. policies related to arrivals and departures;
4. screening and policies for staff and volunteers exhibiting signs or symptoms of COVID-19;
5. screening and policies for service recipients exhibiting signs or symptoms of COVID-19;
6. social distancing;
7. food preparation and meals;
8. ventilation;
9. communication and training about the Plan.

You must develop your Plan by June 29, 2020. Providers need to evaluate, monitor, and update their plans if necessary, on a regular basis. The Plan needs to be posted at all of the business’s workplaces in readily accessible locations that will allow for the Plan to be readily reviewed by all workers.

Hygiene and source controls

- Encourage proper handwashing procedures of all service recipients, staff, volunteers and visitors, as well as the frequent use of hand sanitizer when handwashing is not available, and hands are not visibly soiled.
- Provide all staff with personal protective equipment. Readily available equipment is to include but is not limited to access to cloth and paper masks, nitrile or vinyl exam gloves, hand sanitizer, disinfectant wipes, and laundry sanitizer. Cloth or paper masks are required to be used by all staff while working with service recipients and their household members, staff, volunteers, and visitors. Personal protective equipment that may be harder to obtain due to allocations will be distributed in a triage manner until supply can be increased. It will be very strongly encouraged that all staff working with high risk-service recipients utilize allocated personal protective equipment. In the event currently allocated supplies become more consistently and readily available, JD Home Healthcare reserves the right to mandate the use and effective use of any personal protective equipment deemed necessary to aid in the prevention of the spread of COVID-19. Refusal to use or effectively use mandated personal protective equipment by staff may result in verbal or written warning up to and including termination. Staff will be given access to refill personal protective supplies as needed through scheduled office pick-up or supervisor delivery to a pre-approved location.
- Service recipients and visitors will be strongly encouraged to wear facemasks while in a person's served residence, in public, or during transportation. Staff are mandated to wear a cloth or paper mask at all times while working with a service recipient unless an accepted medical reason is given and physician documentation is provided excusing the staff member from the use of a mask, or in the event the service recipient would experience extreme stress and strongly opposes mask use due to psychological concerns. If this occurs, both the staff member and service recipient/guardian must agree to use social distancing guidelines and are to be strongly enforced whenever possible. If service recipients/guardians and staff are unable to agree on proper mask usage, staff or the service recipient/guardian may decide, after speaking with a member of management, they are refusing to provide/accept services until a new staff/recipient placement decision is made, if possible.
- Encourage the use of disposable towels and tissues in person's served personal residence by service recipients, staff, volunteers, and visitors.
- Discourage the touching of the face area, which included the eyes, nose, and mouth.
- Discourage the use of water fountains and other public water supplies wherein contact with the mouth is used. The use of touchless water filling stations is encouraged as an alternative.

- Plans will also be enforced in the company office whenever service recipients, staff, volunteers and visitors enter. Proper handwashing instructions, mask required, cover your cough signs, and health screen checklist will be posted inside and outside the company office, as well as attached to this COVID-19 Preparedness Plan document.

Cleaning and disinfecting

- Encourage service recipients and visitors to actively participate in using a documented sanitation schedule and checklist when in a person's served residence.
- Sanitation schedule will be created by supervisors and management, staff is required to implement and actively participate in sanitation schedule, as long as the service recipient has authorized permission to allow staff to conduct disinfection procedures.
- Sanitation checklists will recognize frequently touched surfaces, such as doorknobs, light switches, stair rails, counters, tables and chairs, phones, keyboards, program equipment and other shared items. Receptacles will be created and utilized for used and dirty items in need of disinfecting before reuse.
- Minimize the use of shared items, such as arts and crafts and office supplies.
- If a service recipient is having potential COVID-19 symptoms, has had a confirmed exposure, or positive COVID-19 test results and a decision to continue services has been made, extra disinfecting steps will be taken to sanitize the residence of the service recipient in order to reduce chance of transmission. Entering staff must be reminded of all safety and protection procedures before entering the service recipient's home including but not limited to required personal protective equipment, proper handwashing procedures, and preventative measures. If a staff member refuses to follow precautions, they will not be allowed into the service recipient's home.
- Use of EPA-registered disinfectants recommended by the CDC to clean surfaces. The following are acceptable and commonly found disinfectants that work against SARS- CoV-2; Lysol disinfectant wipes, sprays, or cleaners, Clorox Bleach wipes, sprays, or cleaners, Glycerin Hard Surface Cleaner, Scrubbing Bubbles disinfectant cleaners, Soft Scrub with Bleach, Arm & Hammer disinfecting wipes, Windex disinfectant cleaner, Comet disinfecting bathroom cleaner. For a full list, visit <https://www.epa.gov/coronavirus>
- Appropriate and effective cleaning and disinfecting supplies will be made available for use in accordance with product labels, safety data sheets and manufacturer specifications, and are to be used in conjunction with required personal protective equipment.

Arrivals and departures

- Service recipients and staff will be given a health screening tool questionnaire, as provided by the MDH and encouraged to conduct screening before entering service recipient's home, entering new environments, and/or performing services or visits. Screening includes: Yes or No. Fever or feeling feverish? Chills? A new cough? Shortness of Breath? A new sore throat? New muscle aches? New headache? New loss of smell or taste? It is strongly encouraged to monitor temperature before, and upon staff arrival to, a service recipient's residence.
- If service recipients, members of the household, or visitors are showing new symptoms potentially related to COVID-19, have had a direct exposure, or a positive COVID-19 test result, staff will not enter, or will immediately exit, a service recipient's home and immediately report to management regarding the level of exposure to all potential contacts for a decision regarding the continuation of services. Staff will be instructed to report for testing in approximately 5 days from any known low-risk or high-risk exposure. If necessary, services will be paused until a negative COVID test has been obtained and/or up to 10 days quarantine and potential symptoms have been absent for a minimum of 3 days.
- If service recipients, staff, volunteers and visitors have a known direct exposure to COVID-19, are experiencing symptoms, or have tested positive for COVID-19, staffing services may be temporarily paused at the discretion of the service recipient, guardian, or the service provider with the emphasis of maintained health and safety of service recipients, staff, volunteers, and visitors, until a negative COVID test has been obtained by either the potential carrier or service recipient, staff, volunteer or visitor and/or up to 10 days of quarantine and potential symptoms have been absent for a minimum of 3 days.
- Avoid all large gathering and confined spaces, including entrances and exits, and use timed entrance and exit in order to avoid close contact, when possible.
- Staff with underlying health conditions or who live with or care for family members with underlying health conditions will be granted the ability to restrict their availability with high risk service recipients and a lower risk location placement will be offered if available.
- If a service recipient is experiencing symptoms, has a known exposure, or a positive COVID-19 test result, and remote services are being implemented, a supervisor may choose to give permission to staff, or deliver items themselves, such as necessary groceries or personal needs items. Delivered items may be left directly outside the residence exterior door with the previous knowledge of the service recipient, as well as a delivery confirmation performed through the phone immediately after delivery.
- Visitors will only be allowed into the office by appointment only.

Employee Travel

- Out-of-state travel is highly discouraged unless deemed necessary. The Minnesota Department of Health strongly suggests that incoming visitors and Minnesotans that have traveled outside of the state quarantine for 14 days. Staff that have domestically traveled outside the state of Minnesota will be required to quarantine for 10 days, after their return, with no symptoms and will provide a negative COVID-19 test result before returning to work. If an employee develops symptoms, quarantine will extend to 14 days with 3 days symptom free in addition to a negative COVID-19 test result before return to work criteria is met.
- Any employee that travels internationally will be required to quarantine, upon return, for 14 days and have 3 days symptom free and will be required to provide negative COVID-19 test results before return to work criteria is met.

Screening and policies for staff and volunteers exhibiting signs or symptoms of COVID-19

- Staff will self-monitor for signs of illness using screen procedures and immediately notify their Manager or Supervisor if they have begun to or are experiencing any symptoms of COVID-19. Staff will not report to work sites if they are experiencing symptoms of COVID-19, have had a known direct exposure to COVID-19, or have received a positive COVID-19 test result. Staff will make their manager aware of any known low-risk exposures as soon as possible and before reporting to a work site in order to give company management proper time to evaluate risk level and make a safe decision regarding staffing and services.
- Ensure staff knows the proper procedures when experiencing symptoms, and are encouraged, as well as supported, when reporting potential symptoms of COVID-19
- Ensure that emergency contact information is up to date for staff, volunteers and visitors, where applicable.
- Managers and supervisors will develop and implement a back-up plan if a staff member becomes ill and is unable to perform services, when possible. In the event a staff member begins feeling ill during their scheduled time, they are to immediately inform their supervisor of their symptoms and discontinue providing services until the staff has been quarantined for 10 days and have been symptom free for a minimum of 3 days and/or have provided a negative COVID19 test result. It is the duty and responsibility of management to inform and update service recipients about potential exposures from staff, volunteers, and visitors of the company.

- In the event a manager or supervisor is made aware of a service recipient displaying symptoms of COVID-19, has had a direct exposure, or has received a positive COVID-19 test result, it is the responsibility of the supervisor to pause services provided and discontinue sending staff to the location until risk can be minimized substantially through the use of sanitation supplies and barrier personal protection equipment or the service recipient has received a negative COVID test result after 5 days from exposure and is showing no symptoms, or has been quarantined for 10 days along with 3 days of no symptoms. Staff with a known direct exposure to the service recipient will be subject to the same preventative standards or test result requirements.
- Employees will be strongly encouraged to participate in regular, weekly, COVID-19 testing even when there are no symptoms or a known exposure.
- Cover your Cough, Proper hand washing procedures, mask requirement, and a visitor/employee health screening checklist signs will be posted in a conspicuous location located in the JD Home Healthcare office, as well as provided in the online training material.
- Notify the Minnesota Department of Health and follow their directions if a staff member or service recipient is diagnosed with COVID-19 within 24 hours of receiving notification of a positive COVID-19 test result. It is the responsibility of managers and supervisors to report any confirmed cases of COVID-19 to the human resources department. Managers will be sent an internal form to fill out for information and recording purposes. Staff are encouraged to provide as much information as possible for reporting purposes. Required notification to the MDH will be the responsibility of the human resources department. High risk and low risk workplace exposures may be recorded and reported to MDH as required.
- Follow proper OSHA recording and notification of workplace illness transmission as well as report transmission incidences to the assigned workplace compensation insurance company. This will be the responsibility of the human resources department.

Screening and policies for service recipients exhibiting signs or symptoms of COVID-19

- Staff will be encouraged to monitor service recipients for signs of COVID-19 by visually assessing for symptoms using the MDH health screening tool.
- Staff will be encouraged to verbally ask if service recipients are experiencing any symptoms of or have had any known exposures of COVID-19.
- Service recipients will be encouraged to verbally ask staff, volunteers, and visitors if they are experiencing any symptoms of or have had any know exposure to COVID-19.

- Ensure that service recipient's emergency contact information is up to date.
- All staff are to be familiar with and expected to uphold and respect HIPAA laws and regulations when addressing health information of service recipients, staff, volunteers, and visitors.
- Personal protective equipment is not to be shared and only to be used by a single individual.
- Limit the number of persons accompanying service recipients.
- Staff will report service recipients with suspected COVID-19 symptoms to their direct manager or supervisor.

Social distancing throughout the day

- Office desks and chairs will be placed at a distance of 6' or more to encourage social distancing.
- Encourage the use of masks, in the office and other workplace settings, when social distancing cannot be accomplished, such as during interviews and meetings.
- When possible and approved, services will be provided remotely to service recipients.
- All staff will be encouraged to work from home, and all meetings will be held remotely, when possible.
- Limit physical interactions between staff through the utilization of remote communications, such as phones and computers, when possible.

Food preparation and meals

- Service recipients, staff, volunteers and visitors will not share food or drinks.
- If staff is responsible for meal preparation during services provided - proper handwashing, and the use of masks will be required, unless there is an acceptable health restriction by the staff with physician documentation or the service recipient has psychological reasons that will cause extreme stress if a mask is worn. Both the staff and the service recipient must agree to a "no mask" setting, and social distancing, along with all other precautionary procedures, will be practiced to the fullest extent possible.

- If meals are to be served in a “family style setting”, one person will be designated to plate each meal when serving, to ensure multiple people are not using the same utensils.
- Dishes and utensils will be washed in a dishwasher that reaches a minimum temperature of 145 degrees Fahrenheit, or if a dishwasher is not available, with hot water and anti-bacterial dish soap as well as properly rinsed and dried. Staff will assist service recipients in proper dish sanitation procedures if necessary.

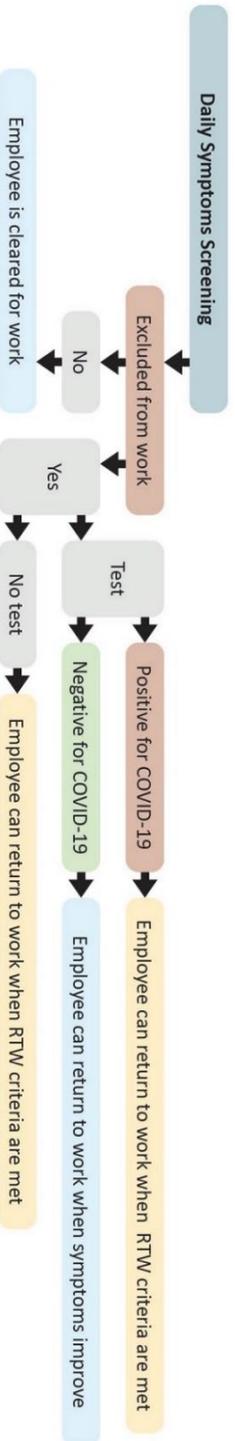
Ventilation

- Service recipients, staff, volunteers, and visitors will be encouraged to maximize the amount of fresh air being brought into indoor settings through open windows, as well as ensuring ventilation systems are being properly used and maintained.
- Service recipients, staff, volunteers and visitors will be encouraged to minimize recirculated air flow blowing across people.

Communication and training

- Current staff and volunteers will be provided access to a copy of this plan through company online training programs, as well as sign an electronic confirmation that they have been made aware of and received access to the company’s COVID-19 Preparedness Plan within 30 days of release of the plan, or within 30 days from date of hire. Service Recipients will be mailed a copy of the COVID-19 Preparedness Plan upon release of plan.
- Management team members will provide any clarification to service recipients, staff, volunteers and visitors, if any questions arise regarding how the plan works and is implemented.
- This COVID-19 Preparedness Plan will be presented in a prominent place that is accessible to Commissioners, as well as staff and volunteers who would like to review plan specifics.
- Staff or volunteers with concerns about their employer’s COVID-19 Preparedness Plan or questions about their rights should contact MNOSHA Compliance at osha.compliance@state.mn.us or 651-284-5050 or 877-470-6742

Decision Tree for Critical Infrastructure Businesses and Industries



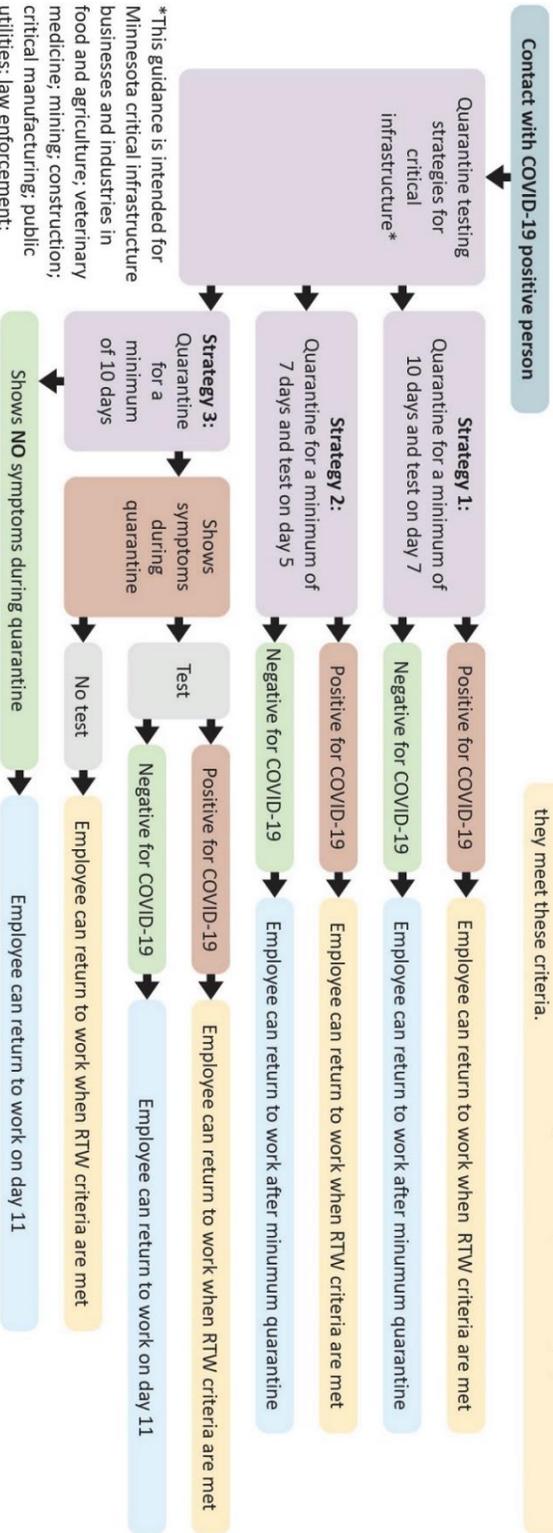
Contact is defined as interacting within 6 feet of an infectious person for a cumulative total of 15 minutes or more, except if all individuals were using a face covering and a face shield (or) if all individuals were using a face covering and there was a physical barrier (ex. full plexi-glass screen) between them during their period of contact.

RETURN TO WORK (RTW) CRITERIA AFTER A POSITIVE COVID-19 TEST RESULT

All three must be true for employees to return to work:

- 10 Days since symptoms started
- Fever-free in the last 24 hours (without the use of fever reducing medications)
- Overall improvement of symptoms

No medical exam or additional testing is necessary to clear employees when they meet these criteria.



*This guidance is intended for Minnesota critical infrastructure businesses and industries in food and agriculture; veterinary medicine; mining; construction; critical manufacturing; public utilities; law enforcement; transportation; and community financial banks.

IF EMPLOYEES HAVE SYMPTOMS OR AN EXPOSURE, THEY MUST REMAIN HOME UNTIL TEST RESULTS ARE RETURNED.



Minnesota Department of Health | health.mn.gov | 651-201-5000 | 625 Robert St N, PO Box 64975, St Paul, MN, 55164-0975
 Contact health.communications@state.mn.us to request an alternate format. | Updated 12/03/2020

Contact is defined as spending a cumulative total of 15 minutes or more within 6 feet of someone who has COVID-19 during their infectious period. For businesses covered by this guidance, co-workers can be exempted from this definition of contact, if during their period of contact, everyone was using a face covering and a face shield, OR, if everyone was using a face covering and there was a physical barrier between them, such as a full Plexiglas screen.

People with COVID-19 can give the disease to others two days before they show symptoms until 10 days after their first symptoms (this is termed the infectious period). Therefore, contact tracing should include co-workers who were exposed to a worker with confirmed COVID-19 beginning two days before the individual's symptoms started (for workers without symptoms, two days before their test date) until the time the case was at home and isolated away from others.

1. If an employee is determined to have had contact with a person who has tested positive for COVID-19, they should stay home and self-quarantine.
2. Minnesota has return-to-work quarantine strategies for critical infrastructure that may be adopted to avoid staffing shortages because of the essential services that critical infrastructure workers provide:

Strategy 1: Employees should quarantine at home for a minimum of 10 days and get tested on day seven. If the COVID-19 test is negative and the employee does not develop symptoms, they may return to work on day 11.

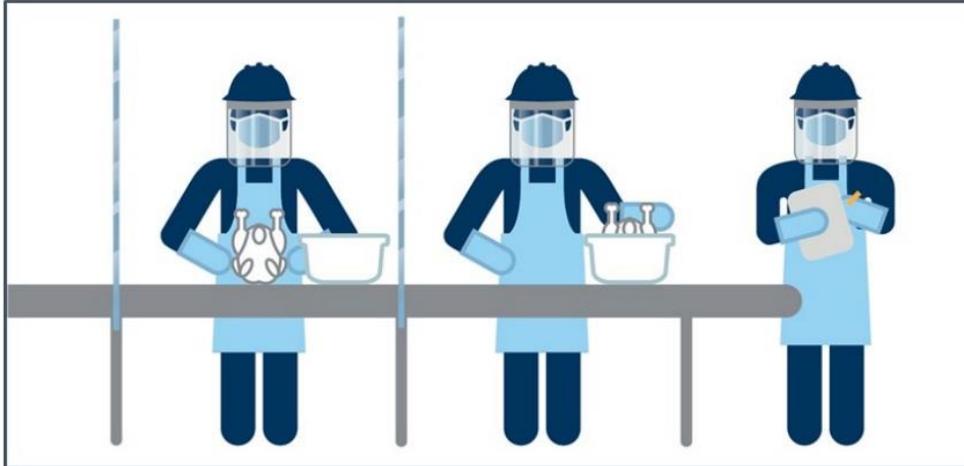
Strategy 2: Employees should quarantine at home for a minimum of seven days and get tested on day five. If the COVID-19 test is negative and the employee does not develop symptoms, they may return to work on day eight. This strategy should only be adopted in facilities with severe staffing shortages.

Strategy 3: Employees should quarantine at home for 10 days. If symptoms develop, the employee should get tested and remain home until results are available. If the employee does not develop symptoms, they may return to work on day 11, without any restrictions; no medical exam or testing is required

3. If an employee under quarantine tests positive, they must remain at home isolated away from others until return to work criteria have been met.
4. If an employee under quarantine tests negative, they must remain at home until their quarantine period is complete.
5. If symptoms develop during quarantine, the employee should be tested immediately. ▪ If an employee tests positive, they must remain isolated at home and away from others until return to work criteria have been met. If an employee tests negative, they should remain at home until their quarantine period is complete.

Employers play a critical role in identifying workplace contacts and asking them to quarantine at home so that others in the workplace are not exposed. Supervisors and human resources personnel have the tools to identify workplace contacts quickly and efficiently. Local public health and MDH are best positioned, through routine case interviews and contact tracing activities, to identify close contacts who live with or have social ties to a worker who has COVID-19.

Figure 1: Workers using face coverings and face shields, with barrier in place between workstations



If any *one* of these workers tested positive for COVID-19, neither of the other two workers would be contacts, because everyone was using both a facemask and a face shield.

Figure 2: Workers using face coverings, with barriers in place between workstations



If either of the two middle workers at the table tested positive for COVID-19, the corresponding worker on the far left or far right would be a contact because there was no face shield or workplace barrier between them (assuming they had spent a cumulative total of 15 minutes together within 6 feet). However, the co-workers separated by the barrier would not be contacts of each other, because both of them were using a face covering and there was a physical barrier between them.

VISITOR AND EMPLOYEE HEALTH SCREENING CHECKLIST



CONDUCT HEALTH SCREENING EACH TIME EMPLOYEES OR VISITORS ENTER THE FACILITY.

You may also opt to conduct temperature screening if it can be done with proper social distancing, protection, and hygiene protocols. However, temperature screening is not required.

If a worker or visitor answers “Yes” to any of the screening questions, they should be advised to go home, stay away from other people, and contact their health care provider.

Have you had any of the following symptoms since your last day at work or the last time you were here that you cannot attribute to another health condition?

Please answer “Yes” or “No” to each question. Do you have:

- Fever or feeling feverish?
 - Chills?
 - A new cough?
- Shortness of breath?
- A new sore throat?
- New muscle aches?
 - New headache?
- New loss of smell or taste?

DON'T FORGET TO WASH



mi DEPARTMENT OF HEALTH

800-224-5414, www.health.state.mn.us

Don't forget to scrub between your fingers, under your nails, and the top of your hands.

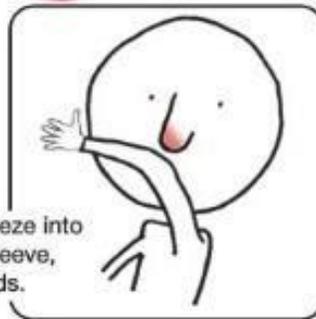
Stop the spread of germs that make you and others sick!

Cover your Cough

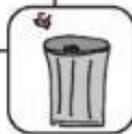


Cover your mouth and nose with a tissue when you cough or sneeze

or
cough or sneeze into your upper sleeve, not your hands.



Put your used tissue in a waste basket.



You may be asked to wear a surgical mask in public. Don't worry if you see staff and others wearing masks. They are preventing the spread of germs.



Special thanks to the Minnesota Department of Health and the Minnesota Antibiotic Resistance Collaborative.

Wash your Hands

after coughing or sneezing.



Wash with soap and water

or
clean with alcohol-based hand cleaner.





Masks are not required for those with disabilities or special health needs.

MASK UP, MINNESOTA

STAY SAFE MN

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staysafe.mn.gov