



COVID-19 Preparedness, Response & Prevention Plan

Phyxius is committed to providing a safe and healthy workplace for all our team members, clients and visitors. To ensure we have a safe and healthy workplace, Phyxius has developed the following COVID-19 Preparedness, Response & Prevention Plan in response to the COVID-19 pandemic. Phyxius team members 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 team members. Only through this cooperative effort can we establish and maintain the safety and health of all persons in our workplaces.

The COVID-19 Preparedness, Response & Prevention Plan is administered by Amy Larson, who maintains the overall authority and responsibility for the plan. Our Workplace Coordinator is Brandon Jensen, who handles the day-to-day oversight of the plan. However, all Phyxius team members are equally responsible for supporting, implementing, complying with and providing recommendations to further improve all aspects of this COVID-19 Preparedness, Response & Prevention Plan.

Phyxius COVID-19 Preparedness, Response & Prevention Plan follows the industry guidance developed by the state of Minnesota, 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 team members stay home and prompt identification and isolation of sick persons;
- social distancing – must be at least six-feet apart;
- worker hygiene, food, visitation and source controls;
- workplace building and ventilation protocol;
- workplace cleaning and disinfection protocol;
- drop-off, pick-up, delivery and transportation practices and protocol
- communications and training practices and protocol; and
- COVID-19 vaccine

Phyxius 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 for Employees and Residents of Licensed Group Homes.

Ensure Sick Team Members Stay Home and Prompt Identification and Isolation of Sick Persons

Team members have been informed of and encouraged to stay home when they are sick. They have been asked to self-monitor for signs and symptoms of COVID-19. The following policies and procedures are being implemented to assess team members' health status prior to entering the workplace and for team members to report when they are sick or experiencing symptoms. All team members will review the health screening checklist posted on the exterior door prior to entering our facility.

Effective 4/24/20 we are asking all team members to take their temperature every day prior to entering our facility. If you have your own thermometer and can check your temperature prior to leaving your home that is best.

If you do not have your own thermometer, we have a touchless/infrared forehead thermometer for your use when you arrive at the house. Once you arrive to the house, please call/Deputy the staff person currently working and ask for the thermometer to conduct a self-check of your temperature. The staff person will set it outside on the porch, and not make physical contact with you.

If you have a temperature of 100.4 F or higher, or are experiencing COVID-19 symptoms, you will not be able to work or enter the home. Call/Deputy the staff working and let them know due to COVID-19 protocol you are unable work. Also, notify your Program Leader/Director.

If you develop a temperature of 100.4 F or higher or are experiencing COVID-19 symptoms while you are working on a shift immediately notify your Program Leader and once the staff ratios are determined to be safe for the client, leave the workplace.

Health care providers such as us, are a high priority for testing. Because of the severe potential for COVID-19 spread in congregate settings, testing is strongly encouraged for those working in these settings who are experiencing symptoms or have confirmed exposure.

We will be checking the temperature of our **clients** daily and recording it in their MAR.

Team members should monitor our clients daily for symptoms of COVID-19 (ex. Fever, cough, shortness of breath, chills, headache, muscle pain, sore throat, or new loss of taste or smell). Other less common symptoms could include gastrointestinal symptoms like nausea, vomiting or diarrhea.

Team members will assist clients to seek medical testing/treatment and the team members will be notified of any positive COVID result.

Team members should encourage our clients with COVID-19 symptoms/exposure to self-isolate and limit their use of shared spaces as much as possible. Should a client test positive for COVID-19 and not require hospitalization, we will make an attempt for that person to be served in an environment with less risk of transmission, such as with family. If there isn't a more suitable option for the client, we will continue serving the client in one of our facilities which may include temporary cohort living arrangements.

Any COVID-19 symptoms should be documented and reported immediately to the Program Leader/Director.

Team members who have **traveled** should continue to follow CDC travel recommendations and requirements, including restriction from work when recommended for any traveler.

Effective 1/12/22:

QUARANTINE

If you are **NOT** up to date on vaccinations: Team members with suspected COVID-19 or confirmed exposure to COVID-19 may return to work after 10 days have passed since exposure ended/symptoms first appeared **and** improvement in respiratory symptoms (cough, shortness of breath, etc.) **and** at least 3 days (72hrs) have passed since recovery. Recovery is defined as no fever without the use of fever-reducing medications. **Or** Staff may return to work after 2 negative test results, taken more than 24 hours apart (at least 1 of the tests needs to be at least 5 days after you had close contact with someone with COVID-19) **and** improvement in respiratory symptoms **and** resolution of fever without the use of fever-reducing medications. In some situations (example: COVID positive client) you may be asked to work if you are asymptomatic.

If you are **ARE** up to date on vaccinations OR had confirmed COVID-19 within the past 90 days: Team members with suspected COVID-19 or confirmed exposure to COVID-19 do not need to quarantine unless you develop symptoms. You do need to get tested at least 5 days after you had close contact with someone with COVID-19, unless you had confirmed COVID-19 in the past 90 days).

ISOLATION

Regardless of vaccination status: Team members with confirmed COVID-19 must notify Phyxius of their test result as soon as they receive it and may return to work after 10 days have passed since notifying Phyxius **and** improvement in respiratory symptoms (cough, shortness of breath, etc.) **and** at least 3 days (72hrs) have passed since recovery. Recovery is defined as no fever without the use of fever-reducing medications.

Phyxius has implemented a COVID-19 Emergency Leave Policy that allows you to take time off to promote team members staying at home when you 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. We also are continuing our pre-COVID-19 leave policies and practices to support employees including those high-risk individuals. Please contact your Program Leader/Director for more information.

Phyxius Program Leader/Director will contact you via phone/Deputy informing you if you have been exposed to an anonymous team member or client with confirmed COVID-19. You may be required to quarantine for the required amount of time see above guidance.

A Director or designee will work with MDH and comply with their directive when given regarding COVID+ client/staff case.

Social Distancing – must be at least six-feet apart

Social distancing of at least six feet will be implemented and maintained between team members, clients and visitors in the workplace through the following controls:

The office is only open for scheduled work. Team members, clients and visitors needing access to the office will call ahead/have an appointment to keep the number of people in the office limited.

01/12/2022

Orientations and trainings will occur with limited class sizes. The instructor and participants will be asked to wash hands at the start of class and wear a face mask. Classes/trainings will occur during off peak hours whenever possible to limit the number of individuals in the area. Outside trainings and the use of electronic media will be used if/whenever possible.

Program Leaders will complete their weekly office work remotely. Directors and Officers will work remotely whenever possible.

Meetings and appointments will be conducted remotely whenever possible.

Phyxius will continue striving to meet or exceed the executive orders set forth by our governor, CDC, MDH, and MNOSHA as the situation continues to evolve.

Worker Hygiene, Food, Visitation and Source Controls

Team members generally work in a home environment. Cooking, cleaning, charting, communicating and caretaking of our clients is expected on all shifts. Due to the risks assessed with the nature of our work, basic infection prevention measures are being implemented at our workplaces at all times. Team members are instructed to wash their hands for at least 30 seconds with soap and water frequently throughout the day, but especially upon entering the home/workplace at the start of your shift, after using the restroom, after blowing your nose, coughing or sneezing, after smoking, before and after eating/food prep, after putting on, touching, or removing PPE or face coverings. All clients and visitors to the workplace will also be asked to wash or sanitize their hands immediately upon entering the home/workplace.

Phyxius has made cloth masks for each team member and client of ours. Please understand that our Phyxius homemade masks do have a pocket where an additional barrier/ filter can be placed. However, these homemade masks are NOT a replacement for Medical Grade Personal Protection Equipment. The decision to use this specific mask is solely your own. We also have disposable masks to be used when working with a COVID-19 positive client, or if preferred over the cloth reusable masks. These are located in the PPE tote at each location.

Additional PPE such as gloves, safety glasses, face shields and gowns are located in the PPE tote at each location. Instructions on when and how to wear PPE and how to care for it, as well as visual diagrams on the PPE sequence can be found in the OSHA book at each location. PPE supply is audited at each location, and requests for PPE replenishment can be submitted on Deputy to your Program Leader/Director.

Team Members, clients and visitors are being instructed to cover their mouth and nose with their sleeve or a tissue when coughing or sneezing, and to avoid touching their face, particularly their mouth, nose and eyes, with their hands. Team members, clients and visitors are expected to dispose of tissues in provided trash receptacles and wash or sanitize their hands immediately afterward.

Gatherings of clients and team members in the home (ex. meals, entertainment) should be considered to reduce close contact. Food, beverage, and utensil sharing between clients and team members will be prohibited.

All team members, clients and visitors should remain six feet apart whenever possible.

All team members, clients and visitors are asked to wear a mask whenever possible.

Visitation preferences include using electronic media, driving by to see family/friends, meeting outside and staying at least six feet apart.

Workplace Building and Ventilation Protocol

Operation of the home/building in which the workplace is located, includes necessary cleaning, assessment and maintenance of building systems, including water, plumbing, electrical, and heating, ventilation and air conditioning (HVAC) systems. 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 air flow blowing across people.

When conditions allow, increase fresh outdoor air by opening windows and doors (unless doing so poses a safety or health risk). Turn the HVAC fan to the “on” position instead of “auto” which will operate the fan continuously even when heating or air-conditioning isn’t required. Kitchen and bathroom exhaust fans can also be used to increase air movement and circulation.

Workplace Cleaning and Disinfection Protocol

Team members will regularly clean and disinfect the home/work area, especially shared areas and frequently touched surfaces including tables, countertops, phones, keyboards, touch screens, controls, door handles/knobs, light switches, railings, copy machines, pens, desks, toilets, faucets, sinks, etc. using EPA-registered disinfectants more than once daily, if possible. Shared bathrooms will be cleaned at least twice daily and will be stocked with hand soap and paper towels.

When washing towels, bedding, soft and porous materials, launder them (if possible) using the warmest appropriate water setting and dry items completely.

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.

Coronaviruses on surfaces and objects naturally die within hours to days. Warmer temperatures and exposure to sunlight will reduce the time the virus survives on surfaces and objects.

Normal routine cleaning with soap and water will decrease how much of the virus is on surfaces and objects which reduces the risk of exposure.

Disinfection can also help reduce the risk. Frequent disinfection of surfaces and objects touched by multiple people is important.

If disinfection products are not available, bleach solutions can be used if appropriate for the surface and will be effective against coronaviruses when properly diluted.

- Most household bleach contains 5%–9% sodium hypochlorite. Do not use a bleach product if the percentage is not in this range or is not specified, such as some types of laundry bleach or splash-less bleach as these are not appropriate for disinfection.
- Follow the directions on the bleach bottle for preparing a diluted bleach solution. If your bottle does not have directions, you can make a bleach solution for disinfecting by mixing:

- 5 tablespoons (1/3 cup) of bleach per gallon of room temperature water OR
- 4 teaspoons of bleach per quart of room temperature water OR 70% alcohol solutions to disinfect.
- Follow the manufacturer’s application instructions for the surface. If instructions are not available, leave the diluted bleach solution on the surface for at least 1 minute before removing or wiping. This is known as the “contact time” for disinfection. The surface should remain visibly wet during the contact time.
- Ensure proper ventilation during and after application (for example, open windows).
- Never mix household bleach (or any disinfectants) with any other cleaners or disinfectants. This can cause vapors that may be very dangerous to breathe in.
- Make a new diluted bleach solution daily. Bleach solutions will not be as effective after being mixed with water for over 24 hours.

Use chemical disinfectants safely. Always read and follow the directions on the label of cleaning and disinfection products to ensure safe and effective use.

- Wear gloves and consider glasses or goggles for potential splash hazards to eyes
- Ensure adequate ventilation (for example, open windows)
- Use only the amount recommended on the label
- Use water at room temperature for dilution (unless stated otherwise on the label)
- Label diluted cleaning solutions
- Store and use chemicals out of the reach of children and pets
- Do not mix products or chemicals
- Do not eat, drink, breathe, or inject cleaning and disinfection products into your body or apply directly to your skin as they can cause serious harm

If someone has suspected or confirmed COVID-19, the following enhanced cleaning and disinfection procedure should be followed in addition to all the above cleaning guidelines:

- Closing areas used by the potentially infected person for enhanced cleaning.
- Opening outside doors and windows to increase air circulation in the area.
- Waiting as long as practical before cleaning or disinfecting (24 hours is optimal).
- Cleaning and disinfecting all immediate work areas and equipment used by the potentially infected person, such as offices, bathrooms, shared tools and workplace items, tables or work surfaces, and shared electronic equipment like tablets, touch screens, keyboards, and remote controls.
- Vacuuming the space if needed. Use a vacuum equipped with a high-efficiency particulate air (HEPA) filter, if available. Wait until the room or space is unoccupied to vacuum.
- Providing cleaning workers with disposable gloves. Additional PPE (e.g., safety glasses, goggles, aprons) might be required based on the cleaning/disinfectant products being used and whether there is a risk of splash.
- After cleaning disinfect per the above instructions.

Drop-off, Pick-up, Delivery and Transportation Practices and Protocol

Any drop-off, pick-up, delivery services or transportation used (public or in our vehicle) will continue to follow the social distancing, mask use, hand hygiene, etc. procedures outlined in this plan for team members and clients.

Communications and Training Practices and Protocol

As an essential health care facility, our COVID-19 response began on March 12th 2020. Continued information, modifications and training have been passed on to all team members via Deputy/onsite. Additional communication and training will be ongoing for all new hires as well as current team members.

01/12/2022

This COVID-19 Preparedness, Response & Prevention Plan has been certified by the Phyxius Director team and the plan was posted throughout the workplace and made readily available to employees 06/26/20. It will continue to be modified and updated as necessary by Amy Larson.

Vaccine

As an essential health care facility, our employees are encouraged to receive a COVID-19 vaccination. The CDC has information online detailing the safety of vaccinations and the benefits. Team members were offered to participate in a MDH organized COVID-19 vaccine clinic. The Moderna vaccine was offered free of charge on: 2/5/21, 3/5/21, 4/2/21. There are multiple manufactures of the vaccine currently being administered with community partners for anyone else who wasn't able to attend. The specific site locations can be found online through the MN Dept of Health COVID-19 Response. Please refer to the "Phyxius Employee Choice COVID-19 Vaccination or Testing and Mask Policy" for additional information.

Additional Protections and Protocols

Interim Guidance on the Prevention of COVID-19 for Employees and Residents of Licensed Group Homes was reviewed and integrated into this plan.

Attached:

-“We need to ensure you are healthy before you enter” STOP sign posted on workplace entrance

-“Personal Protective Equipment (PPE)” What, When, How

-“How to Safely Remove & Put On PPE” 3 CDC visual guides

-COVID-19 Daily Disinfection Checklist

Certified by:

Amy Larson, COO - 06/26/20

Amy Larson Updated: 01/12/21

Co-authored by: Brandon Jensen, UPL - 03/25/21

Amy Larson Updated: 01/12/22

We need to ensure you're healthy before you enter



Have you taken your temperature?

If not, please call/deputy the staff person currently working and ask for the thermometer to conduct a self-check of your temperature. The staff person will set it outside on the porch, and will not make physical contact with you.

If you have a temperature of 100.4°F or higher, you will not be able to work or enter the home. Call/Deputy the staff working and let them know due to COVID-19 protocol, you are unable to work. Also notify your Program Leader/Director.

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

Fever or feeling feverish

New loss of taste or smell

Chills

A new cough

Shortness of breath

New headaches

A new sore throat

New muscle aches



Personal Protective Equipment (PPE)

What is PPE?

Personal protective equipment, or PPE, as defined by the Occupational Safety and Health Administration, or OSHA, is “specialized clothing or equipment, worn by an employee for protection against infectious materials.” Our facility provides gloves, masks (not respirators), safety glasses, face shields and gowns for protection.

When should I wear it?

Due to COVID-19, CDC is asking health care providers to wear a cloth mask at all times when at work.

It is recommended that you put on PPE before you come into contact with any body fluids.

Aside from the mask, it is not necessary to wear PPE if you are not coming into contact with body fluids and there is no known infectious agent present in the home.

How do I put it on or take it off?

See the PPE Sequence Attached.

How do I take care of it?

Cloth/Washable Reusable PPE:

Used unsoiled: Wash in washing machine after each use.

Used soiled: Remove soiled PPE immediately or as soon as feasible and wash in washing machine with hot water. If you are unable to wash it immediately, put into designated red tote until it can be washed. Wear gloves when washing biohazard materials.

Plastic/Un-washable Reusable PPE:

Used unsoiled: Disinfect after each use.

Used soiled: Remove soiled PPE immediately or as soon as feasible and disinfect. If you are unable to disinfect it immediately, put into designated red tote until it can be disinfected.

Disposable PPE:

Used unsoiled: Dispose of in plastic garbage bag.

Used soiled: Remove soiled PPE immediately or as soon as feasible and dispose of in a plastic garbage bag and bring it immediately outside to the garbage can.

You must wash your hands immediately or as soon as feasible after removal of gloves or other PPE.

Only clean, ready to use PPE is stored in the designated PPE tote.

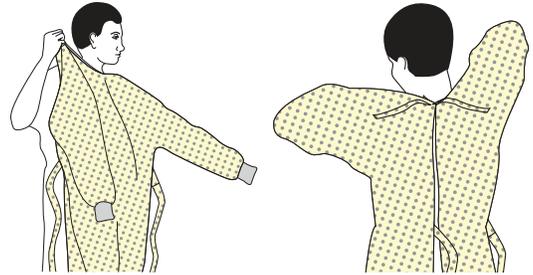
Once PPE is torn, broken, or no longer functional it should be thrown away and the Program Leader/Director notified.

SEQUENCE FOR **PUTTING ON** PERSONAL PROTECTIVE EQUIPMENT (PPE)

The type of PPE used will vary based on the level of precautions required, such as standard and contact, droplet or airborne infection isolation precautions. The procedure for putting on and removing PPE should be tailored to the specific type of PPE.

1. GOWN

- Fully cover torso from neck to knees, arms to end of wrists, and wrap around the back
- Fasten in back of neck and waist



2. MASK OR RESPIRATOR

- Secure ties or elastic bands at middle of head and neck
- Fit flexible band to nose bridge
- Fit snug to face and below chin
- Fit-check respirator



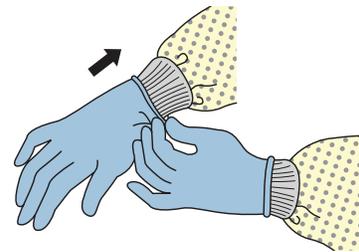
3. GOGGLES OR FACE SHIELD

- Place over face and eyes and adjust to fit



4. GLOVES

- Extend to cover wrist of isolation gown



USE SAFE WORK PRACTICES TO PROTECT YOURSELF AND LIMIT THE SPREAD OF CONTAMINATION

- Keep hands away from face
- Limit surfaces touched
- Change gloves when torn or heavily contaminated
- Perform hand hygiene



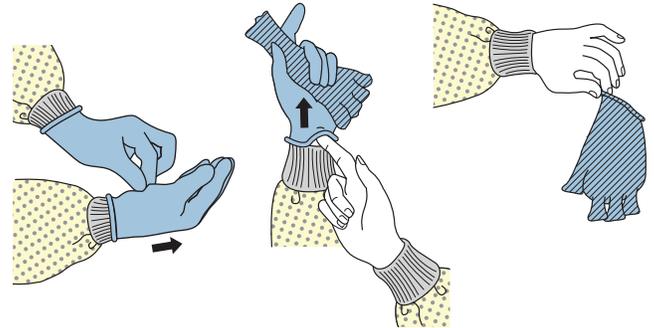
HOW TO SAFELY REMOVE PERSONAL PROTECTIVE EQUIPMENT (PPE)

EXAMPLE 1

There are a variety of ways to safely remove PPE without contaminating your clothing, skin, or mucous membranes with potentially infectious materials. Here is one example. **Remove all PPE before exiting the patient room** except a respirator, if worn. Remove the respirator **after** leaving the patient room and closing the door. Remove PPE in the following sequence:

1. GLOVES

- Outside of gloves are contaminated!
- If your hands get contaminated during glove removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Using a gloved hand, grasp the palm area of the other gloved hand and peel off first glove
- Hold removed glove in gloved hand
- Slide fingers of ungloved hand under remaining glove at wrist and peel off second glove over first glove
- Discard gloves in a waste container



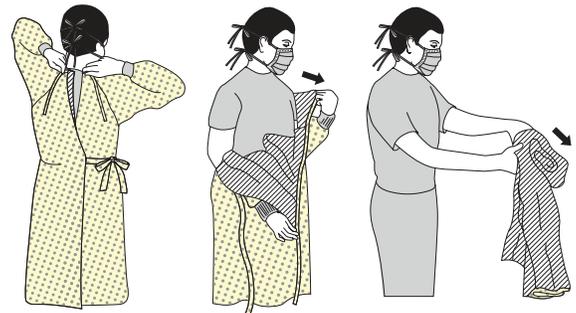
2. GOGGLES OR FACE SHIELD

- Outside of goggles or face shield are contaminated!
- If your hands get contaminated during goggle or face shield removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Remove goggles or face shield from the back by lifting head band or ear pieces
- If the item is reusable, place in designated receptacle for reprocessing. Otherwise, discard in a waste container



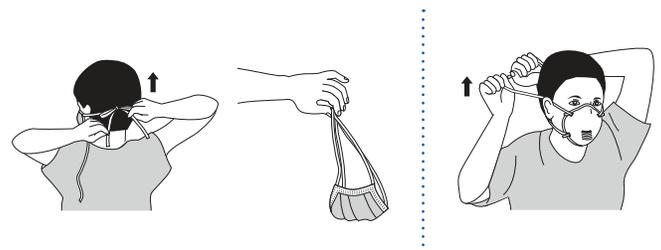
3. GOWN

- Gown front and sleeves are contaminated!
- If your hands get contaminated during gown removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Unfasten gown ties, taking care that sleeves don't contact your body when reaching for ties
- Pull gown away from neck and shoulders, touching inside of gown only
- Turn gown inside out
- Fold or roll into a bundle and discard in a waste container

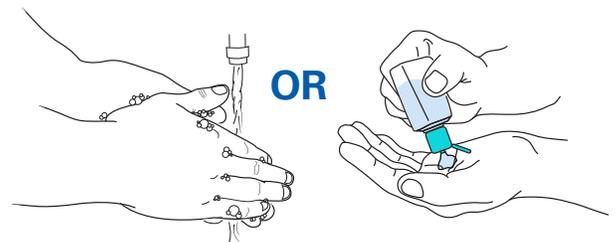


4. MASK OR RESPIRATOR

- Front of mask/respirator is contaminated — **DO NOT TOUCH!**
- If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp bottom ties or elastics of the mask/respirator, then the ones at the top, and remove without touching the front
- Discard in a waste container



5. WASH HANDS OR USE AN ALCOHOL-BASED HAND SANITIZER IMMEDIATELY AFTER REMOVING ALL PPE



PERFORM HAND HYGIENE BETWEEN STEPS IF HANDS BECOME CONTAMINATED AND IMMEDIATELY AFTER REMOVING ALL PPE

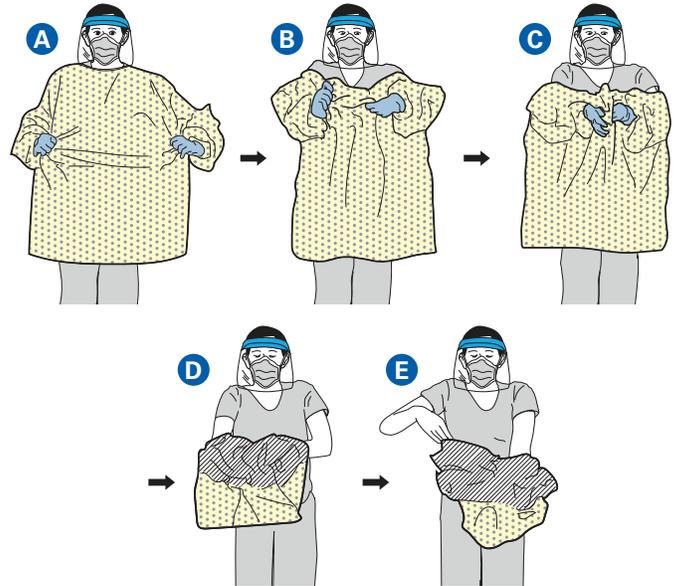


HOW TO SAFELY REMOVE PERSONAL PROTECTIVE EQUIPMENT (PPE) EXAMPLE 2

Here is another way to safely remove PPE without contaminating your clothing, skin, or mucous membranes with potentially infectious materials. **Remove all PPE before exiting the patient room** except a respirator, if worn. Remove the respirator **after** leaving the patient room and closing the door. Remove PPE in the following sequence:

1. GOWN AND GLOVES

- Gown front and sleeves and the outside of gloves are contaminated!
- If your hands get contaminated during gown or glove removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp the gown in the front and pull away from your body so that the ties break, touching outside of gown only with gloved hands
- While removing the gown, fold or roll the gown inside-out into a bundle
- As you are removing the gown, peel off your gloves at the same time, only touching the inside of the gloves and gown with your bare hands. Place the gown and gloves into a waste container



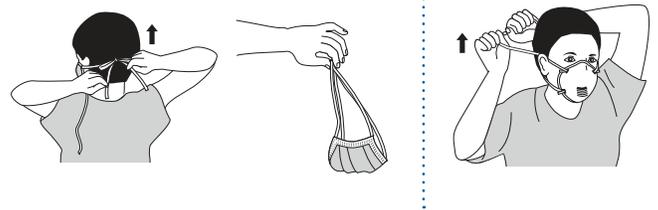
2. GOGGLES OR FACE SHIELD

- Outside of goggles or face shield are contaminated!
- If your hands get contaminated during goggle or face shield removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Remove goggles or face shield from the back by lifting head band and without touching the front of the goggles or face shield
- If the item is reusable, place in designated receptacle for reprocessing. Otherwise, discard in a waste container

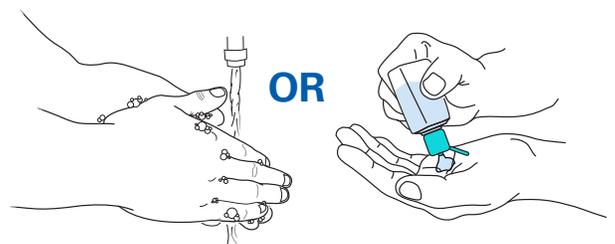


3. MASK OR RESPIRATOR

- Front of mask/respirator is contaminated — DO NOT TOUCH!
- If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp bottom ties or elastics of the mask/respirator, then the ones at the top, and remove without touching the front
- Discard in a waste container



4. WASH HANDS OR USE AN ALCOHOL-BASED HAND SANITIZER IMMEDIATELY AFTER REMOVING ALL PPE



**PERFORM HAND HYGIENE BETWEEN STEPS IF HANDS
BECOME CONTAMINATED AND IMMEDIATELY AFTER
REMOVING ALL PPE**



March 2021

Disinfectant Daily Checklist

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31		
Office																																	
Kitchen																																	
Living Room																																	
Individuals room																																	
Individuals room																																	
Individuals room																																	
Bathroom #1																																	
Bathroom #2																																	
Basement																																	
Laundry Room																																	
Cleaning Supplies Checked																																	
Order Sent? N/A if none needed																																	

This Disinfectant list is to ensure all commonly used items in the house are getting disinfected 2x a day. Once by day staff, and once by each overnight staff.

The following is a list of items that need disinfected: **Door Handles, Surfaces, Cabinet handles, Light switches, Sink, Faucet, Furniture, Phone, Pens, Covers of program books, stovetop, toilet, remotes, controllers, shelves, etc.**

Anything commonly touched must be disinfected in the corresponding room before you sign off on this checklist.

Cleaning supplies need to be checked daily, and a PPE order must be sent urgently if you need cleaning supplies.

The following is the bare minimum your house should have. If the location does not meet these requirements, please place a PPE order.

10x Disposable Face Masks, 1 Unused Container of Disinfectant, 3 small bottles worth of extra soap, 1 full bottle of hand sanitizer, enough gowns and eyewear for staff to use, 1 Unused box of gloves.

Place PPE order here: <https://forms.gle/4pH88bRPtagn9Se99>