

COVID-19 PREPAREDNESS AND RESPONSE PLAN FRASER CASE MANAGEMENT

In response to the COVID-19 Pandemic and in compliance with state requirements, Fraser developed a Preparedness and Response Plan for each of our program areas. All policies and procedures herein for Fraser employees are also mandated for sub-contractor staff. This plan is subject to frequent changes as COVID-19 guidance is updated by the state. Downloading and Printing this manual is not recommended due to the ever-changing nature of the COVID-19 Pandemic. Any updates to this plan will be available for employees and clients on the Fraser webpage. A paper copy of this plan will be posted at each Fraser location and is available upon request.

FRASER CASE MANAGEMENT COVID-19 PANDEMIC RESPONSE PLAN

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SECTION A: STAFF POLICIES AND PROCEDURES

POLICY #1: Wellness Screening for Staff

DATE ADOPTED: June 2020

DATE REVISED: 6/2/2020; 9/5/2020; 7/1/2021

Policy

This policy outlines how staff should screen for COVID-19 symptoms before starting a shift and what to do if they have symptoms when working from a Fraser location.

Procedure

- 1) All Fraser staff must complete the online [Daily Wellness Screening](#) before reporting to work when:
 - a) Staff or someone in the household has an illness in line with COVID-19 symptoms
 - b) Staff or someone in their household has tested positive or is awaiting COVID-19 testing results
 - c) Staff have had a COVID-19 exposure, even with no symptoms
- 2) If the Daily Wellness Screening guides staff that they can report to work, they can do so without having any additional follow-up.
- 3) If the Daily Wellness Screening guides staff to remain at home, a follow-up and clearance from the Clinical Health and Safety Team is required prior to return.
 - a) Upon receipt of the Wellness Screening with an elevated response, the Clinical Health and Safety Team will reach out to the submitting employee via email to gather more information and identify a plan for next steps.
 - b) The Clinical Health and Safety Team will inform the sick employee's supervisor regarding next steps including an identified return to work timeline. During the employee's isolation period, the Clinical Health and Safety Team will provide regular communication to the Fraser supervisor as well as other key program managers.
- 4) If staff have symptoms similar to COVID-19 due to chronic conditions, staff must consult with the Clinical Health and Safety Team before proceeding to report to work.
- 5) Staff who identify symptoms upon arrival or develop symptoms during their shift must maintain as much distance as safely possible from other individuals and follow instructions given by the Clinical Health & Safety Team.
- 6) All staff must take the [Travel Assessment - Staff](#) to determine risk levels and whether quarantine or testing is required upon return. The travel assessment form has been updated based on the most recent CDC recommendations. This assessment provides guidance based on CDC protocols and informs supervisors of the result.
- 7) Travel within the United States quarantine requirements vary based on vaccination status as well as travel risk level. Fully vaccinated staff do not require any testing or quarantine upon return.
- 8) International travelers must follow the guidance based on their destination: [COVID-19 Travel Recommendations by Destination - CDC](#).

POLICY #2: Staff Exclusion from Work due to Illness or Exposure

DATE ADOPTED: June 2020

DATE REVISED: 6/12/2020; 9/5/2020; 7/1/2021

Policy

This policy outlines when staff are excluded from going into any Fraser site or community location for work purposes due to illness or exposure until they meet Fraser [Return to Work](#) guidelines.

Procedure

- 1) Fully vaccinated staff are able to continue to work and do not need to quarantine or test following a known COVID-19 exposure as long as they have no symptoms. A Wellness Screening is still required if they have symptoms.
- 2) Staff who are not fully vaccinated may not work in Fraser sites and community locations if they have any COVID-19 symptoms which include:
 - a. **More common symptoms of COVID-19:**
 - Fever 100.4 and above
 - New onset or worsening cough
 - Difficulty breathing (wheezing, shallow/rapid breaths, chest tightness)
 - New loss of taste or smell
 - b. **Less common symptoms:**
 - Sore throat
 - Nausea
 - Vomiting
 - Diarrhea
 - Chills
 - Muscle pain
 - Excessive fatigue
 - New onset of severe headache
 - New onset of nasal congestion or runny nose
- 3) Staff who have a confirmed COVID-19 diagnosis, regardless of their symptoms, are not allowed to enter any Fraser site or community location for work purposes.
- 4) Staff who are not fully vaccinated who have had direct exposure to a person with presumed or confirmed COVID-19 may not report to a Fraser site or community location for work purposes. Direct exposure is defined as:
 - a. Face-to-face contact with less than 6 feet of social distancing for 15 minutes or longer within 24 hours to a person with a confirmed or presumptive COVID-19 diagnosis.
 - b. Having someone in their household with a confirmed COVID-19 diagnosis or presumptive COVID-19 symptoms.
 - c. Caring for a friend, family member or others with a confirmed or presumptive COVID-19 diagnosis, regardless of where the person lives.
- 5) Staff who are not fully vaccinated or staff with undisclosed vaccination status may not report to a Fraser site or community location for work purposes regardless of their symptoms following these

situation:

- a) Someone in the household has a confirmed or presumptive COVID-19 diagnosis.
 - b) Someone they care for has a confirmed or presumptive COVID-19 diagnosis, regardless of where the person lives.
- 6) If a staff who is not fully vaccinated identifies or develops symptoms upon arrival or during work at a Fraser location or community location for work purposes, the employee should leave immediately.
 - 7) Staff who are not fully vaccinated who are symptomatic should not clean or disinfect surfaces.
 - 8) During the exclusion timeframe, staff who can work remotely from home can do so under the guidance of their supervisor.
 - 9) Staff are excluded from work until they meet the Fraser [Return to Work](#) guidelines.
 - 10) All illnesses that align with COVID-19 must be reported to the supervisor and the Clinical Health & Safety Team to confirm when staff can expect to return to Fraser sites and community locations used for work purposes.

POLICY #3: Return to Work after Illness or Exposure

DATE ADOPTED: June 2020

DATE REVISED: 6/2/2020; 9/5/2020; 7/1/2021

Policy

Staff who meet any of the exclusion criteria listed in Policy #2 and are unable to report to work as a result can return to work after meeting certain guidelines.

Procedure

- 1) Staff who are excluded due to symptoms consistent with COVID-19 can return to any Fraser site or community location for work purposes after meeting the following [MDH guidelines](#):
 - a. At least 24 hours have passed since resolution of fever without the use of fever-reducing medications
AND
 - b. Improvement in all symptoms
AND
 - c. At least 10 days have passed since symptoms first developed or were identified
- 2) Staff who have an illness with a confirmed alternate diagnosis (e.g., strep throat, tested positive for influenza) will follow return-to-work criteria based on that diagnosis. All alternate diagnoses must also be reported to the Clinical Health & Safety Team.
- 3) Staff who are excluded from working at any Fraser site or community location for work purposes due to a high risk direct exposure to a confirmed or presumptive COVID-19 diagnosis can return to those sites after meeting the following criteria:
 - a. At least 7 days have passed since the last day of exposure
AND
 - b. They have a negative test result.
 - c. If staff develop symptoms during their quarantine due to an exposure, they can return to Fraser sites and community locations for work purposes after meeting return-to-work guidelines for illness (see bullet 1 in this policy).

POLICY #4: Wearing Masks for Staff

DATE ADOPTED: June 2020

DATE REVISED: 6/15/2020; 7/1/2021

Policy

This policy outlines staff requirements for wearing masks and masks available for staff use.

Procedure

- 1) Masks are optional for fully vaccinated employees except during face-to-face visits or external meetings. Administrative staff should wear a mask if individuals served come to the Suite 6 entrance as they may be coming in for a scheduled face-to-face meeting where masks are required.
- 2) Staff who are not fully vaccinated are expected to wear masks when not sitting at their desks alone.
- 3) Staff in shared offices can remove masks if there is mutual agreement among the employees sharing the office space. This includes all staff regardless of their vaccination status.
- 4) When staff who are not fully vaccinated must remove their mask while eating or drinking during their shift, they should stay 6 feet or more away from others.
- 5) All Case Management staff are required to wear masks when providing face-to-face services to individuals served and their support teams.
- 6) Fraser has a supply of handmade masks and surgical masks provided to staff. Handmade masks were manufactured for Fraser by a local vendor following the CDC guidelines. All staff working in Fraser buildings must wear only Fraser-provided handmade masks or surgical masks to assure standard protection levels for everyone.
- 7) Fraser provides two types of masks for staff:
 - a. **Surgical masks:** Fraser has surgical masks available for staff use. Staff will be provided one disposable surgical mask per day. Staff should also change their mask right away if it is torn, soiled, or wet.
 - b. **Handmade masks:** At this time, Fraser recommends that staff wear a surgical mask whenever possible; however, cloth masks are available if a surgical mask does not work for an employee. Handmade masks are washed on site following CDC guidelines, so a clean mask will be ready for staff each day at the designated locations in each building. Staff can enter the building wearing their own personal masks and upon arrival, they will pick up a clean Fraser-provided mask to wear throughout the day. At the end of the day, they will drop the used mask in the soiled mask bin.

Nosepieces and ear savers are also available at the front desks. These additional items are staff's to keep in a paper bag for reuse. Nosepieces can be reused until they no longer function.

- c. If staff have chronic conditions that could make it unsafe for them to wear masks for prolonged time or could cause breathing problems, staff must contact their supervisor and AskHR@fraser.org immediately.

POLICY #5: Hand Hygiene for Staff

DATE ADOPTED: June 2020

DATE REVISED: 6/2/2020

Policy

This policy outlines hand hygiene expectations for staff throughout the day.

Procedure

- 1) Upon arrival to the building, staff are expected to wash their hands with soap and water for at least 20 seconds, following directions posted in the restrooms.
- 2) Staff are also expected to wash hands in the following situations:
 - a. **After** blowing nose, coughing, or sneezing
 - b. **Before** and **after** touching face
 - c. **After** using the bathroom
 - d. **Before, during, and after** preparing food
 - e. **Before** and **after** eating food
 - f. **After** touching garbage
- 3) If soap and water are not readily available, staff should use the hand sanitizer that is provided by squirting enough sanitizer to cover all surfaces of the hands and rubbing hands together until they feel dry.
- 4) **Avoid touching your eyes, nose, and mouth** with unwashed hands.

POLICY #6: Social Distancing for Staff

DATE ADOPTED: June 2020

DATE REVISED: 6/2/2020; 7/1/2021

Policy

Staff are expected to maintain 6 feet of distancing whenever possible.

Procedure:

- 1) When using a shared breakroom space, be aware of others. Try to spread out in the room to create 6 feet of physical distance between yourself and other staff. Eating at your workstation is preferred to reduce the risk of spreading germs while masks cannot be worn.
- 2) When using commonly accessed tools like the copier and the microwave, be aware of others. Take turns to maintain 6 feet of physical distance between yourself and other staff.
- 3) If staff must attend an in-person meeting, spread out to maintain at least 6 feet of physical distance from other attendees and allow participants to join via video conference platforms whenever possible.

POLICY #7: Cleaning Commonly Touched Surfaces for Staff

DATE ADOPTED: June 2020

DATE REVISED: 6/2/2020; 7/1/2021

Policy

This policy outlines individual expectations of cleaning commonly touched surfaces. In addition to these general procedures, refer to program-specific policies for more details.

Procedure

Cleaning kits are available throughout all clinics and administrative buildings and instructions on how to use them are available in each kit.

- 1) Staff are expected to clean and sanitize their workstations daily. This includes shared phones, keyboards, drawer handles, chair armrests, etc.
- 2) Staff must clean and sanitize drop spaces, enclaves, and other meeting rooms before and after each use.

SECTION B: POLICIES AND PROCEDURES FOR INDIVIDUALS SERVED BY CASE MANAGEMENT

POLICY #8: Wellness Screening for Face-to-Face Meetings

DATE ADOPTED: June 2020

DATE REVISED: 6/2/2020; 9/5/2020; 7/1/2021

Policy

Individuals served and any support team members will be subject to a health screening to minimize the risk of exposure and impact on others in the program.

Procedure

- 1) Prior to any in-person meeting, each participant will receive an email (or phone call for those without access to email) from the Case Manager with COVID-19 health screening questions to verify that it is safe for all planning to attend to do so in person.
- 2) If individuals and their support team members do not submit prior to the meeting start time, a Fraser staff member will contact them to gather the wellness screening information over the phone.
- 3) Based on their answers, individuals and their support team members will be informed if they can or cannot proceed with the face-to-face meeting.
- 4) If the Wellness Screening guides meeting participants that they can attend the meeting, they can do so without having any additional follow-up.
- 5) If the Wellness Screening guides meeting participants to avoid meeting in person, the Case Manager will connect with the meeting participants to determine when it is safe to meet or if the meeting should be held via phone or video conference instead.
- 6) All Fraser in-person meeting attendees are asked to follow Center of Disease Control and Prevention (CDC) guidelines for [domestic](#) and [international](#) travels. If quarantine for (7) days is necessary, the meeting participant can return to in-person services with a negative COVID-19 test result. If testing is not available, the quarantine period is 10 days per CDC guidelines. For testing options, please refer to [Find Testing Locations in Minnesota / COVID-19 Updates and Information - State of Minnesota](#).

POLICY #9: Exclusion of Individuals Served from Face-to-Face Services due to Illness or Exposure

DATE ADOPTED: June 2020

DATE REVISED: 6/2/2020; 9/5/2020; 7/1/2021

Policy

This policy outlines when individuals served are excluded from face-to-face services due to illness or exposure and what requirements they must meet under [Resume Services](#) guidelines.

Procedure

- 1) If symptoms of COVID-19 are observed with individuals served or their support team members during an in-person visit, Fraser staff will need to discontinue face-to-face services immediately, regardless of the answers on the person's Wellness Screening.
- 2) Individuals served and their support team members may not meet face-to-face with Fraser staff if they have any COVID-19 symptoms which include:
 - a. **More common symptoms of COVID-19:**
 - Fever 100.4 and above
 - New onset or worsening cough
 - Difficulty breathing (wheezing, shallow/rapid breaths, chest tightness)
 - New loss of taste or smell
 - b. **Less common symptoms:**
 - Sore throat
 - Nausea
 - Vomiting
 - Diarrhea
 - Chills
 - Muscle pain
 - Excessive fatigue
 - New onset of severe headache
 - New onset of nasal congestion or runny nose
- 3) Individuals served and their support team members who have presumptive or confirmed COVID-19 diagnosed by a healthcare professional, regardless of their symptoms, are excluded from face-to-face services.
- 4) Individuals served and their support team members who have had direct exposure to a person with presumed or confirmed COVID-19 are excluded from face-to-face services. Direct exposure is defined as:
 - d. Face-to-face contact with less than 6 feet of social distancing for 15 minutes or longer within 24 hours to a person with a confirmed or presumptive COVID-19 diagnosis.
 - e. Having someone in their household with a confirmed COVID-19 diagnosis or presumptive COVID-19 symptoms.
 - f. Caring for a friend, family member or others with a confirmed or presumptive COVID-19 diagnosis, regardless of where the person lives.

POLICY #10: Resuming Face-to-Face Services after Illness or Exposure

DATE ADOPTED: June 2020

DATE REVISED: 6/2/2020; 9/5/2020; 7/1/2021

Policy

The intent of this policy is to outline the resuming face-to-face service requirements necessary when an individual served or their support team member has been excluded.

Procedure

- 1) COVID-19 In-Person Meeting Exclusion Timelines
 - a) Meeting attendees experiencing symptoms:
 - i. **Attendee does not test for COVID-19 or tests positive for COVID-19 →** Attendee is excluded from in-person meetings for at least 10 days since symptoms first appeared. After 10 days, attendee can return as long as 24 hours have passed since symptoms improve and they have remained fever-free without the use of fever medicine.
 - ii. **Attendee receives an alternative diagnosis (i.e. strep) →** Attendee can return based on the guidance of the alternative diagnosis as directed by the medical provider.
 - iii. **Attendee tests for COVID-19 and receives a negative test result →** Attendee can return to in-person meetings 24 hours after symptoms improve. Attendee must be fever free for at least 24 hours without the use of fever-reducing medications.
 - b) Household members of meeting attendees experiencing symptoms and cannot separate from the ill household member(s) and they remain in direct contact throughout the illness:
 - i. **Household member tests for COVID-19 and receives a negative test result or an alternative diagnosis →** Attendees can return to in-person meetings as long as they do not have any symptoms.
 - ii. **Household member does not test for COVID-19 or tests positive for COVID-19 →** Attendee is excluded from in-person meetings for a total of 24 days. This includes the 10-day isolation period of the ill household member and an additional 14 days of quarantine period for the attendee. Attendee must have no symptoms during this quarantine period in order to return at the end of 24 days.
 - c) Household members of meeting attendees experiencing symptoms and able to separate from the ill household member(s) by living in a different household during the illness period:
 - i. **Household member tests for COVID-19 and receives a negative test result or an alternative diagnosis →** Attendees can return to in-person meetings as long as they do not have any symptoms.
 - ii. **Household member does not test for COVID-19 or tests positive for COVID-19 →** Attendee is excluded from in-person meetings for 14 days from the last day of direct contact with the ill household member.

- d) Meeting attendee is exposed to someone with COVID-19:
 - i. Attendee is excluded from in-person meetings for 14 days from the last contact with the person who tested positive for COVID-19.

2) Travel Guidelines

- a) All Fraser in-person meeting attendees are asked to follow Center of Disease Control and Prevention (CDC) guidelines for [domestic](#) and [international](#) travels.
- b) **If quarantine for (7) days is necessary, the meeting participant can return to in-person services with a negative COVID-19 test result. If testing is not available, the quarantine period is 10 days per CDC guidelines.** For testing options, please refer to [Find Testing Locations in Minnesota / COVID-19 Updates and Information - State of Minnesota \(mn.gov\)](#).

POLICY #11: Wearing Masks for Individuals Served

DATE ADOPTED: June 2020

DATE REVISED: 6/2/2020; 7/1/2021

Policy

This policy outlines when an individual served and their support team members are required to wear masks.

Procedure

- 1) Regardless of vaccination status at this time, Fraser requires all in-person meeting participants, including Case Managers and individuals receiving services, to wear masks during service.
- 2) We realize some individuals may have difficulty wearing masks due to medical needs and we will accommodate those needs.
- 3) Per the Centers for Disease Control (CDC) guidelines, children age 2 and under should never wear a mask.
- 4) Individuals served and support team members who show up to face-to-face appointments without masks will be provided a mask immediately.

SECTION C: PROGRAM-SPECIFIC SAFETY POLICIES AND PROCEDURES

POLICY #12: Cleaning & Visitor Protocols for the Case Management Office Space

DATE ADOPTED: June 2020

DATE REVISED: 6/2/2020; 7/1/2021

Policy

This policy outlines staff expectations for cleaning the Case Management office space at the Bloomington site. These enhanced cleaning and safety requirement will remain in effect until further notification is provided. The intent of these protocols is to reduce unnecessary cross-contamination whenever possible.

Procedure

- 1) In addition to completing the [Daily Wellness Screening](#), staff must sanitize their workstation daily upon arrival to and departure from the office. This includes shared phones, keyboards, drawer handles, chair armrests, etc.
- 2) Operations staff will sanitize surfaces and touched items midway through each business day. In addition, the contracted cleaner will clean and disinfect the entire office in the evening per usual.
- 3) Breakroom space use needs to be staggered to allow for appropriate social distancing of at least 6 feet between people in the breakroom.
- 4) All food service supplies will be one-time-use disposables.
- 5) When IT support is needed, all requests must be made via an emailed IT ticket or by calling 612-798-8377 rather than walking into the IT office in Bloomington. Staff needing support will need to enter and stay at a conference table just inside the IT office. This will allow IT staff to sanitize that area between visits.
- 6) Any individuals served or their support team members who arrive at the Bloomington, Suite 6 office for a scheduled meeting with their assigned Case Manager will be asked to complete a Wellness Screening to assure no risk of illness or exposure is identified prior to meeting face-to-face with Fraser staff.
- 7) Chair armrests and other touched surfaces located in the lobby space will be sanitized by Community Supports Operations staff after each use.
- 8) After visitors leave the building, CM staff are expected to clean and sanitize every touched surface.

SECTION D: GENERAL SAFETY POLICIES AND PROCEDURES

POLICY #13: Mitigation of Presumptive or Confirmed COVID-19 Diagnosis

DATE ADOPTED: June 2020

DATE REVISED: 6/12/2020

Policy

This policy outlines the procedures for a staff or individual served who receives a presumptive or confirmed diagnosis of COVID-19.

Procedure

- 1) If staff or individuals served are present at a Fraser location at the time of receiving the diagnosis, they must immediately be isolated and sent home.
- 2) If an employee receives a presumptive diagnosis of COVID-19, their supervisor must inform the Clinical Health & Safety Team immediately. The employee will be directed to receive testing to confirm their diagnosis. While waiting for test results, the appropriate guidelines from MDH will be followed.
 - a. If testing results come back negative but there is an alternative diagnosis, employee would stay home until symptoms improve and return to work under the specific guidance of the provider for the alternative diagnosis.
 - b. If testing comes back positive, the employee will be isolated until they meet the [Return to Work](#) guidelines.
- 3) The Clinical Health & Safety Team will collect information on the sick employee/individual served to find out which staff and individuals served or support team members they were in close contact within 48 hours prior to the onset of symptoms. Close contact is defined as face-to-face interaction for more than 15 minutes and less than 6 feet apart.
 - a. Employees/individuals served who are not fully vaccinated who have had a high-risk exposure with the sick person need to self-quarantine for 14 days from the last day of exposure.
 - b. Fully vaccinated employees may be able to resume work in the office and community immediately – Fraser will follow current MDH guidelines to determine if quarantine is necessary.
 - c. Employees/individuals served with low risk or no identifiable risk of exposure can continue in person services as long as they have no symptoms.
 - d. Employees and individuals served who develop symptoms within 14 days of an exposure are excluded until they get tested. Their return date must be reevaluated based on the [Return to Work](#) and [Resume Services](#) policies.