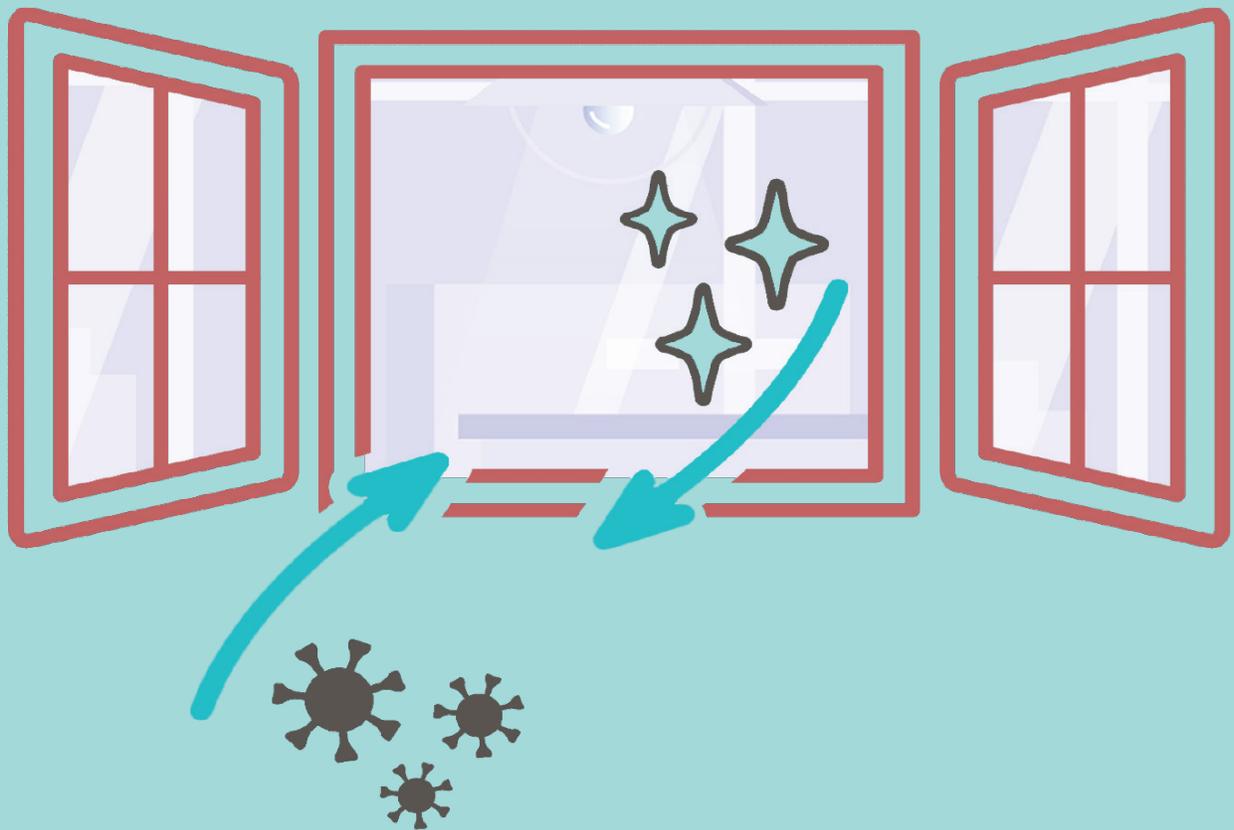


# COVID-19 Mitigation: Workplace Community Care



**A TOOLKIT TO AID IN REDUCING  
LOCAL COVID-19 TRANSMISSION IN  
WORKPLACE SETTINGS**





# INTRODUCTION

The National Indigenous Women's Resource Center (NIWRC) recognizes the impact of the COVID-19 pandemic on Indigenous peoples, a vulnerable population known to be three times as likely to live in extreme poverty as their non-Indigenous counterparts; as the hardships imposed by the Coronavirus are numerous, affecting our communities widely across Indian Country, we found the production of this toolkit imperative.

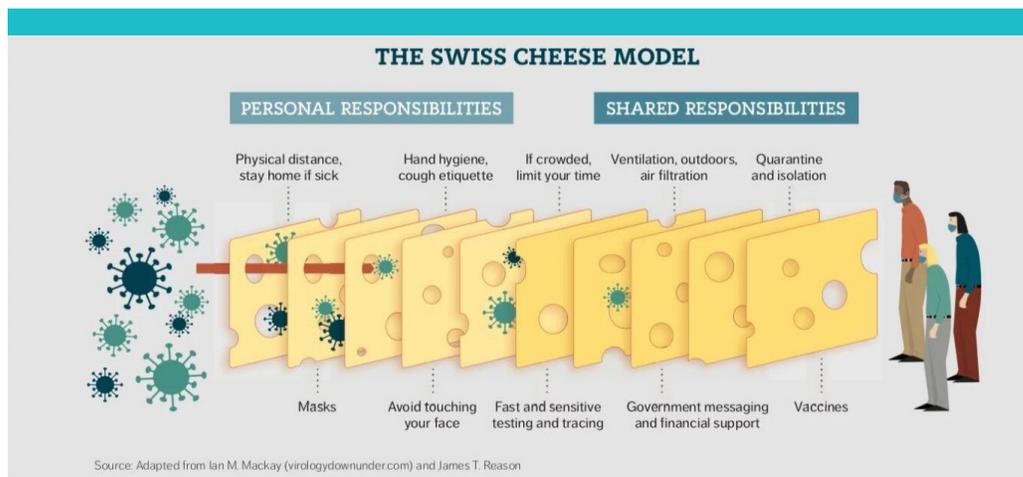
COVID-19 mitigation measures are actions and precautions that may reduce local COVID-19 transmission. This toolkit provides information, strategies, and pre-written correspondence to best ensure the implementation of practices specifically within the workplace, a setting known for close contact.

A browser-friendly version of this toolkit may be found on the official NIWRC website here: [n8ve.net/kLi1avN](https://n8ve.net/kLi1avN).

# LAYERED MITIGATION FOR IN-PERSON MEETINGS & TRAVEL GUIDANCE

Hosting a safer, in-person meeting during this pandemic requires additional preparation and attention. It is important to embrace flexibility, the ability to adapt to rapidly changing conditions that impact the ability of individual participants to attend meetings in person.

This section outlines a layered mitigation approach to reduce the spread of airborne virus transmission, in particular COVID-19, in the event of in-person meetings and travel.



We value the health of immunocompromised staff, staff with multiple comorbidities, staff who are pregnant or have infants, and those who live with high-risk populations. Every staff member deserves access to safe and accessible workspaces. The guidelines and protocols shared in this tool are to help programs and organizations create an equitable and accessible meeting space for all staff during the evolving COVID-19 pandemic. The guidelines can be adjusted as appropriate.

There are several phases of meeting planning and implementation that should be informed by the participants. This will ensure protocol is designed specifically for each meeting; ensure sufficient supplies and supports are in place to better prevent the spread of the Coronavirus and provide options for participation that are responsive to common challenges of meeting in person as a result of COVID-19. The guidance provided in this document is for individuals and organizations planning smaller meetings (up to 30 people).

## BEFORE THE MEETING

One of the first steps is to engage with others who will be attending the event to assess their comfort level for an in-person engagement. It is important to explore key questions such as:

- Do attendees feel comfortable traveling to the selected location?
- Is community spread at the selected location increasing, decreasing, or staying steady?
- What circumstances or agreements will support attendees to feel comfortable meeting in

person? (Open spaces or ventilation in the meeting space, limited number of attendees, mask-wearing during travel or at the meeting, limited public interaction outside of the meeting, COVID-19 testing before and during the meeting, etc.)

- How do COVID-19 mitigation practices impact accessibility for the meeting? (Simultaneous interpretation in ASL or spoken languages, for example. How does mask-wearing impact the ability to hear one another in a meeting space?)

**ACCESSIBILITY:** For those who may be hard of hearing, FDA-approved N99 masks with a clear window may be purchased through Stealth Mask. <https://stealthmask.com/products/stealth-clarity-n99-disposable-x-5-pk>.

## MEETING PLANNING

If the group decides to move forward with an in-person meeting, plan to host a hybrid meeting from the outset that is easily accessible for those wishing to participate virtually. A very important step is to designate at least one participant to join the meeting virtually as a contingency plan to ensure a successful event.

Remember to integrate the preferences from the discussion into all aspects of the meeting planning including hotel selection, meeting space selection, travel considerations, supplies procurement, and more.

### ***Considerations for Hotel Selection***

- Does the hotel follow current Centers for Disease Control and Prevention (CDC) guidance on cleaning and sanitizing rooms and public spaces?
- Do hotel rooms have windows or balcony access to ventilate the rooms with fresh, outdoor air?
- What steps has the hotel taken to ensure adequate air circulation in guest rooms and other areas of the hotel?
- What is the cancellation policy? What considerations can be made if the meeting must be canceled or postponed?
- Should a staff member test positive for COVID-19 while onsite at the meeting, does the hotel allow individuals to quarantine at the hotel? If not, are there nearby lodging options?
- What are the car rental options should participants decide to drive instead of taking public transportation?
- Is there a budget to support staff if they test positive while on work travel and need extended lodging?
- Are there nearby outdoor dining/to-go or meal delivery options to ensure that participants can eat meals in a space that feels safe?

### ***Considerations for Meeting Space Selection***

- Is there adequate ventilation in the meeting space(s) to ensure ongoing air circulation?
- Is there adequate space for social distancing if necessary?
- Is the room outfitted with equipment to host a hybrid meeting with some people in the room and some participating virtually via video and/or audio conferencing?

## ***Travel Considerations***

Update the organization/program travel policy to ensure maximum flexibility with reasonable, allocable, and allowable spending on federal grants, and minimum economic impact on the traveler can be offered. If there are any doubts regarding allowable expenses related to travel, confer with your grant program officer or relevant parties to secure written approval for the expense. Considerations, for example, would include:

- ensuring staff and participants are aware that they are not responsible for travel-related expenses resulting from COVID-related circumstances; and
- ensuring policies reflect allowances in the event of required isolation at a hotel while on work-related travel if a person has a positive COVID. Allowances may include:
  - in-room internet costs to participate virtually and additional days resulting from related quarantine;
  - hotel cost resulting from required periods of quarantine; and
  - flight change fees resulting from COVID-related circumstances.

Alternatively, policies may be changed to ensure the selection of flights with no change fees or rebooking charges or include travel insurance as one of the covered expenses.

Do not make decisions or promote a preference for people about whether they should travel if they test positive. Strictly provide them with the most current recommendation from the CDC about travel under those circumstances so they can self-determine their course of action.

- Offer options for car rental services to use in place of returning home on public transportation or nearby hotels that allow for COVID-19 positive travelers to quarantine following CDC-recommended isolation guidance should the current hotel not be an option for an extended stay.
- Share “Test to Treat” site locator with the person who tested positive so they have the option of accessing therapeutics: <https://aspr.hhs.gov/TestToTreat/Pages/default.aspx>.

Lastly, avoid booking with travel services that have poor customer service in the event of flight cancellations or the need to change flights, even if the lowest fare is found through one of these services.

## ***Considerations for Meeting Supplies***

CDC guidance has consistently promoted mask-wearing in areas with high community transmission, testing, and social distancing for preventing the spread of COVID-19 and its variants. Supplies to consider include:

- a self-administered rapid antigen COVID-19 test per day per attendee to ensure that anyone joining the meeting tests negative each morning *before* gathering in person;
- one N95 or certified KN95 mask per day, per participant (in individually sealed packages if possible);
- individual writing utensils and other supplies for activities during the event. Do not plan on group activities that involve shared supplies or materials used by multiple participants in small

groups. (If so, provide disinfectant or hand sanitizer to share materials);

- a 360-degree microphone that is compatible with the virtual meeting hosting platform. This will ensure that participants who join virtually can hear what is being said around the table or around the room;
- hand sanitizer for all participants;
- EPA-approved disinfectants such as travel-sized hypochlorous acid spray and 70% alcohol wipes (both of which are approved for COVID-19 as well), especially in light of the recent Monkeypox outbreak;
- a CO2 monitor like an Aranet4 to make occupancy and ventilation adjustments as needed (CO2 should levels remain below 1,000 ppm or as close to 400ppm as possible); and
- a large-room or whole-house air purifier or Corsi Rosenthal box sufficient for the square footage of the meeting room.

It is also important to offer and send COVID-19 tests and masks to participants prior to the trip, especially if the participants are survivors or advocates who would otherwise pay for these tests out of pocket.

## COMMUNICATIONS

Prior to the meeting, it is best practice to communicate the procedure and follow-up steps should a staff member test positive while attending the in-person meeting. To determine the appropriate follow-up steps, review current CDC guidance at various points leading up to the meeting related to quarantine recommendations and travel restrictions after a positive test. These recommendations may be viewed through the official CDC website here: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>.

- Current guidelines may prohibit travel until after a number of days of quarantine (5).
- Best practice is to not exit quarantine until (2) negative Rapid Antigen Tests (RAT) are produced on two consecutive days.
- Keep local requirements in mind — review quarantine regulations for the city/county/state/Tribe where the meeting is being held to ensure compliance.

Be clear about the agreements that the group has made about safety protocols and how the group will respond if a meeting participant breaks the agreements that are created to keep everyone safe.

If someone communicates that they will be participating virtually, be sure to share the agenda and all relevant documents or materials via email prior to the start of the meeting.

## DURING THE MEETING

Organizations/programs are more likely to host COVID-19 safe in-person meetings when staff embraces ongoing discussion of prevention practices and safety protocols, as a practice of community care. For example, in-person meeting protocol might include daily engagement with the participants to assess their comfort level and to discuss any changes or adaptations to agreements and protocol.

- Account for the reality that voices will not carry as well within the meeting space. Masks magnify accessibility issues, making it difficult to hear each other.

- Accommodate religious or personal preferences in cases where someone cannot mask by providing time for group activities in well-ventilated spaces, sufficient testing access, or involvement virtually.

The goal of communication and contingency planning prior to and during the meeting is to ensure that participants feel secure in saying that they cannot attend, even at the last minute, due to a positive COVID test, a close contact with someone who tests positive, the need to take care of someone else who contracts COVID or changing community-spread conditions at home or at the destination.

Collective care during this public health crisis is critical to moving through this challenging time together and thoughtful, intentional meeting planning can help support this goal.



# IN-OFFICE COMMUNITY CARE

This section outlines a layered mitigation approach to reduce the spread of airborne virus transmission, in particular COVID-19, in an in-office community.

These procedures will serve as a guide during the evolving COVID-19 pandemic and serve as a promising practice to create an equitable and accessible workspace for staff. Immunocompromised staff, staff who are pregnant or with infants, and who live with high-risk populations deserve access to safe and accessible workspaces. These guidelines once implemented, can be adjusted as appropriate.

## THE BASICS

All staff will be expected to wear a KN95 or N95 well-fitting face mask appropriately covering their mouth and nose inside the office area. Hands should be sanitized before and after shaking hands or using communal touch points such as copy machine, break room areas, and touching doorknobs. Additional measures should be practiced as noted below.

- Perform a daily self-check for symptoms before you come to work (you may want to take your temperature before coming to work).
- Do not come to work if you are feeling sick, and/or have a fever, or have been exposed to someone with confirmed or suspected COVID-19 in the past 5 days.
- Practice regular hand washing - 20 seconds - after entering the building, regularly throughout the day, and before exiting.
- The first person to enter the office must turn on all HEPA air purifiers and open windows 3 inches, the last person to exit the office must turn off air purifiers and close windows.
- A HEPA air purifier or DIY Corsi-Rosenthal box must be in each communal room.
- Air filters must be replaced after 6 months of consistent use or sooner if directed by the manufacturer.
- Corsi-Rosenthal purifiers must be updated with new Merv 13 or 1900 Filtrete filters every six months.
- Maintain clutter-free surfaces and workstations for efficient and regular cleaning and disinfecting.
- The office manager or other designated staff will utilize a CO2 monitor such as an Aranet4 to monitor ventilation levels and adjust ventilation as needed to maintain 'healthy' levels of CO2 (below 1,000 ppm or as close to 400ppm as possible). This can be done by opening windows wider/doors or reducing room occupancy.

## ENTRANCES, CHECK-IN PROTOCOLS

**Everyone should use the designated location for access to a thermometer and symptom check station.**

- Enter and exit through your assigned entrance.
- N95 or KN95 masks are required when you enter the building for the temperature check.

- The self-health assessment survey must be completed upon check-in. Symptoms to assess for include: fever, cough, aches, runny nose, sneezing, scratchy throat, chills, stiff neck (a symptom of the Omicron variant), loss of taste or smell, general malaise, extreme fatigue, breathlessness, and headache.
- Upon entering, please take your temperature with the thermometer that will be placed on the sign-in desk. Please excuse yourself from the office if the temperature is above 100.4. Wipe down the thermometer after use.
- Air ventilation and air purification work hand in hand to ensure healthy airflow and air quality. Upon arriving to the office, air purifiers should be turned on with windows opened at least three (3) inches, weather permitting, for increased ventilation.
- Wash hands and/or use hand sanitizer upon arrival and throughout the day.
- Wipe down / disinfect your workspace before leaving for day.

## **OUTSIDE WORKERS**

In the event that outside workers need to enter the building, they must obtain prior approval and schedule an appointment. They will be required to sign in and out while also following all health and safety protocols. If you are working with an outside essential worker, please contact your department head to coordinate approval and scheduling of work.

## **WORKSPACE HYGIENE**

All staff should support a tidy, hygienic workspace. Custodians will clean and disinfect every night as well. In terms of office restrooms, staff must wipe down handles, knobs, and sink areas after use. A cleaner or disinfectant will be available.

## **BREAK ROOMS**

Staff must adhere to the break room's capacity as posted on signage outside of the room. It is recommended to routinely clean and disinfect high-traffic surfaces, wipe down refrigerator and microwave handles, water dispensers, and sink areas after use. Cleaner or disinfectant will be available.

If there is a dedicated outdoor space to congregate and eat meals, this is ideal for eating and shift breaks.

## **SIGNAGE**

- Facial coverings are required to enter buildings.
- Locations of health and safety stations.
- Health and hand-washing reminders.
- Occupancy signs in every meeting room.
- Workstation reminders with protocols and assigned entrance.

## **MEETING ROOM OCCUPANCY**

Meeting rooms and break rooms will have occupancy signs posted. Only enough chairs and tables will be present in offices and meeting rooms for maximum capacity.

## **MAIL, INTER-DISTRICT MAIL, AND SPECIAL EDUCATION SUPPLIES PROTOCOLS**

Incoming US Postal Service mail will be sorted and placed in mailboxes and delivered on a daily basis.

Outgoing US Postal Service mail should be dropped off in the usual designated areas.

Wipe down delivered items with a disinfectant like Arm and Hammer Essentials Wipes (EPA-approved disinfectant for Monkeypox and Covid-19) before storing the item.

## **ALLERGIES, SELF-MONITORING, COMPASSION, AND SUPPORT**

Many of us experience seasonal allergies that can cause sneezing, coughing, runny nose, etc. We need to take care of one another and trust that each of us will take responsibility to self-monitor and stay home if we are feeling sick. Individuals should go home if symptoms develop during work hours that are unusual and are not related to seasonal allergies. If someone in your work area is experiencing seasonal allergies, please be compassionate and supportive.

If you are experiencing symptoms including allergy-like symptoms it is best practice to schedule a PCR test and return to work only after a negative PCR test. If you have had COVID-19 in the past 90 days or do not have access to PCR testing, two (2) negative Rapid tests (such as iHealth, Flowflex, and Binax tests) on consecutive days suffice in place of a PCR test.

If you have been identified as having close contact with someone who has tested positive, best practice is to not come into the office until you can produce a negative PCR test taken 5 days from the date of exposure. If a PCR test is not accessible, two (2) negative rapid antigen tests taken on days 5 and 6 post-exposure will suffice. The person exposed must continue to wear a KN95 or N95 mask diligently for 5 more days. If it is not possible for the employee to stay away from the office, they must test negative on a rapid antigen test every 48 hours for 6 days and continue to diligently mask for 4 days, and inform staff of their exposure status.

## **VEHICLE SHARING**

- Test and self-symptom check before sharing vehicles with other staff.
- Disinfect all company or shared vehicles before and after use.
- Bring a travel air purifier in the vehicle when sharing vehicles.
- Make sure inside air cabin circulation is turned off when heat and cooling are in use so outdoor air is circulated in the cabin.
- Masks must be worn inside vehicles.

## COMMUNITY CARE AGREEMENTS

Community care is a collective effort and recognition that we all have a responsibility to support the creation of a healthy and accessible workspace that does its best to send our staff back to their families and home communities safely. Thank you for your commitment and cooperation.

- Transparency: When you get a notification on your phone stating you might have been exposed you must notify those you were around or report the names to your supervisor for them to communicate with the staff you were around.
- Holding one another accountable to community agreements is appreciated. For example, “you are a little close, let’s spread out, everyone.”
- Directors will make this safety protocol a part of onboarding.
- Staff who travel should work from home for at least 5 days and produce a negative PCR or two negative rapid antigen tests before returning to the office if possible or test every 48 hours for 6 days on rapid antigen tests if they cannot work from home.
- Whenever possible meetings/gatherings should be held outside or where there is optimal ventilation.



# INTERNAL STAFF CORRESPONDENCE

The following correspondence language may be used to prepare and inform staff of COVID-related precautions and mitigation procedures prior to an in-person gathering.

Greetings Relatives,

As we prepare for our *[staff retreat/in-person meeting/gathering, etc.]*, we want to ensure we are implementing layered mitigations in our practice of community care and being good relatives.

We encourage you to review the following resources to have an understanding of the COVID-19 situation in *[area people are traveling for the event]*:

- CDC Covid Data Tracker: [CDC COVID Data Tracker](#)
- WHO Coronavirus Dashboard: [WHO Coronavirus Dashboard](#)
- People's CDC Weekly Weather Report: [COVID-19 Weather Reports | People's CDC](#)

This a gentle reminder to please **schedule a PCR test within 5 days of travel** (if a PCR test is accessible in your area). PCR results can take up to 48 hours so it would be best to schedule one next week between *[enter dates]*.

For those who do not have access to PCR testing or have recently recovered from COVID -19 in the last 90 days please produce two negative rapid antigen tests (RAT) on consecutive days in lieu of a PCR.

**Here is some information on the COVID-19 layered mitigation tools we have in place:**

- A daily supply of masks and tests (5 RAT tests, 5 KN95 masks) 70% alcohol wipes, hypochlorous acid disinfectant (EPA approved for Monkeypox) and hand sanitizer will be provided at the hotel/meeting site.
- There will be a HEPA air purifier in the meeting room for large room/whole house coverage as well as a Corsi-Rosenthal (CR) DIY box in our meeting space as well as outdoor gathering space.
- The airventilation will be monitored with a CO2 monitor so airflow or occupancy can be adjusted as needed (CO2 should levels remain below 1,000 ppm or as close to 400ppm as possible).

**Community Guidelines:** We ask you to please implement these practices to reduce the likelihood of transmission within our team so we can all more safely enjoy our time together.

- Test each morning before meeting up with the group.
- Wear your KN95 indoors and when in close proximity to others outdoors.
- Wear a KN95 or N95 while traveling to *[meeting location]* if using public transportation and while on public transportation in *[city of meeting location]*.

Should a staff member test positive while at the meeting site, they are expected to excuse themselves from attending the in-person meeting. The staff member should also notify their supervisor to organize travel changes or an extended stay at the hotel for quarantine (if applicable). They must also notify anyone with whom they were in close contact. Those who were in close contact may stay in attendance but should continue to test daily and diligently mask. It is recommended that exposed individuals take a PCR test 5 days after exposure.

Current CDC recommendations as of *[date]* recommend that an individual who tests positive quarantine for 5 days. Currently, it is the choice of the positive staff member to decide how to proceed.

**It is best practice to leave quarantine after testing negative is 2 negative rapid tests on two consecutive days.** Support staff will help locate approved hotels for quarantining in the event the current hotel is not an option for an extended stay. As well as car rental options if the person decides to return home not on public transportation.

- Attached is the link to find a ‘Test to Treat Site’ in the area so the positive staff member has access to therapeutics as soon as possible:

<https://aspr.hhs.gov/TestToTreat/Pages/default.aspx>

Thank you,

*[Management Name or Group]*

### End of Correspondence Language

### LINK & URLS

The following links were used in the correspondence above. Should you be unable to access or embed hyperlinks, the URLs may be used as an alternative (copy and paste in plain text).

- **CDC Covid Data Tracker:** <https://covid.cdc.gov/covid-data-tracker/#datatracker-home>
- **WHO Coronavirus Dashboard:** <https://covid19.who.int/>
- **People’s CDC Weekly Weather Report:** <https://peoplescdc.org/reports/>



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