

# METROPOLITAN COMMUNITY SERVICES

## Updated COVID-19 Preparedness Plan

Metropolitan Community Services (hereinafter, “MCS”) is committed to providing a safe and healthy workplace for all our workers, clients, guests and visitors. To ensure we have a safe and healthy workplace, MCS 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 Anna Guler, Social Security Disability Advocate/Compliance Officer, 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. MCS’ managers and supervisors have our full support in enforcing the provisions of this plan.

Our workers are our most important assets. We are serious about safety and health and protecting its workers. Worker involvement is essential in developing and implementing a successful COVID-19 Preparedness Plan. We have involved our workers in this process by soliciting their feedback and suggestions and integrating them into the plan.

MCS’ COVID-19 Preparedness 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 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;
- 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.

MCS has reviewed and incorporated the industry guidance applicable to our business provided by the state of Minnesota for the development of this plan. 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 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. These symptoms include fever of 100.4 or higher; new and persistent dry cough; difficulty breathing (unable to hold their breath for 20 to 30 seconds) or unusual fatigue. When any of these symptoms are present, the employee must notify Olga Sheveleva, VP of Development and Strategic Planning, by calling our office at 952-658-8995. The worker is to stay home until the fever has been absent for three consecutive days without the use of medication. If the worker exhibits symptoms while at work, they are to ensure the safety of the client and then leave the premises. If they need to stay until another worker can arrive, they are to self-isolate and make sure they are wearing a mask and following other source control measures, e.g., hygiene and social distancing of at least six feet.

Workers with ongoing symptoms are strongly encouraged to contact their health care provider to determine if they should be tested for COVID-19. If they are tested, they are not to work until they receive the results of the test. If they receive a positive test, they are to immediately notify Olga Sheveleva and not report to work until 14 calendar days have passed since the day of initial symptoms. Results of the test are to be reported to: Olga Sheveleva who will track positive cases and contact the Minnesota Department of Health. The Minnesota Department of Health will provide guidance regarding reporting and follow up.

MCS has 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. See the employee policies/handbook. ([See link to Families First Corona Virus Response Act in the business section of the resources in Appendix A.](#))

MCS will follow the Minnesota Department of Health's guidance for informing workers if they have been exposed to a person with COVID-19 at their workplace and requiring them to quarantine for the required amount of time. Any notification will protect the confidentiality of the individual who has contracted COVID-19 virus, according to the standards of the federal Health Insurance Portability and Accountability Act.

## **Social Distancing – Workers must be at least six-feet apart**

Social distancing of at least six feet will be implemented and maintained between workers, clients, guests and visitors whenever possible. Due to the nature of Personal Care Assistant services, social distancing between a worker and a client is not always possible.

For office workers at MCS workers will be encouraged to work remotely when possible. If they need to work in the office, they will be required to maintain social distancing of more than six feet from other coworkers. If this is not possible both workers are required to wear a cloth facemask. Hand sanitizer will be available in the office and workers are encouraged to use it when they arrive and before they leave. Phones, pens, computer equipment, desks, cubicles, workstations, offices or other personal work tools and equipment will not be shared and, if used by more than one person, will be cleaned and disinfected between users.

**Update:** Minnesota now requires face covering to be worn in certain settings. See Executive Order 20-81 Requiring Minnesotans to Wear a Face Covering in Certain Settings – [https://mn.gov/governor/assets/EO%2020-81%20Final%20Filed\\_tcm1055-441323.pdf](https://mn.gov/governor/assets/EO%2020-81%20Final%20Filed_tcm1055-441323.pdf)

## Screening and Policies for Persons Served Exhibiting Signs and Symptoms of COVID-19

**Qualified Professionals** – when a face-to-face visit is required for a Qualified Professional (QP), the QP must ensure that they are not experiencing any symptoms of COVID-19 as described above. If they are, they are to reschedule the visit, or if allowed, use remote technology to perform the visit.

Before conducting the face-to-face visit, the QP or the agency will conduct a screening with the client/responsible party no more than 24 hours before the visit is to occur. The screening shall consist of asking the following three questions:

1. Do you have any signs or symptoms of a respiratory infection, such as a fever, cough, difficulty breathing, or sore throat? Yes or No
2. Have you tested positive for COVID-19? Yes or No, if yes, test date and results, positive, negative or pending?
3. In the past 14 days, have you had contact with a household member who was exposed to the COVID-19 virus? Yes or No. If Yes, explain what the exposure was.

If the person answers “yes” to question 1, the scheduled visit will not be provided until the symptoms have subsided for a minimum of three consecutive days, without the use of medications.

If the person answers “yes” to question 2, the scheduled visit can occur if the results are negative. If the results are positive or pending, the visit should be rescheduled. The QP will work with the individual’s team to ensure care is being provide.

If the person answers “yes” to question 3, discuss the exposure with the person and assist them in determining if they should get tested. Follow the guidelines above for when someone has been tested to COVID-19.

If the person answers “no” to all the questions, or it is determined there is not a risk, e.g., the person was tested, but the results were negative, the visit can occur as scheduled. The QP is required to wear a cloth or surgical face mask during the entire visit, shoe covers in the home are optional, depending on the desires of the client or responsible party. The agency will make a good faith effort to provide each QP with a face mask. QPs may acquire and use personal face masks. QPs must ensure face masks are sanitized after each day, using guidelines from the

Centers for Disease Control (CDC), [www.cdc.gov](http://www.cdc.gov) or the Minnesota Department of Health (MDH), [www.health.state.mn.us](http://www.health.state.mn.us) .

QPs should wash their hands upon arrival and at departure or use hand sanitizer (consisting of at least 60% alcohol).

**Personal Care Assistants** – Personal Care Assistants (PCA) are required to self-monitor for symptoms of COVID-19 as described above. PCAs are required to wear face masks when working with clients. The agency will make good faith efforts to provide PCAs with either cloth or surgical face masks. PCAs may acquire and use personal face masks. PCAs must ensure face masks are sanitized after each day, using guidelines from the Centers for Disease Control (CDC), [www.cdc.gov](http://www.cdc.gov) or the Minnesota Department of Health (MDH), [www.health.state.mn.us](http://www.health.state.mn.us) .

People who receive services may be at a higher risk for COVID-19 because they may be an older adult, have serious chronic medical conditions, and/or live in a shared household. They should be encourage to use standard precautions, and may need assistance to do follow these, such as:

- Practice diligent handwashing
- Avoid touching their eyes, nose and mouth
- Cover coughs and sneezes with tissues and throw the tissues away
- Clean and disinfect frequent touched surfaces
- Wear a facemask to protect others from transmission of the virus.

Additionally, people who receive services should:

- If possible, limit visitors to their home to only those who provide essential supportive services, e.g., PCA services, personal supports, community health worker
- Stay home as much as possible
- Stay at least six feet from other people if it is necessary to go out in public
- Avoid contact with people who are sick.

PCAs are required to wash their hands for at least 20 seconds with soap and water frequently throughout their shift, but especially upon arrival and prior to departure, prior to mealtimes, after using the restroom, after assisting with personal cares, and after blowing their nose.

PCAs are to wear gloves when assisting with meals, personal cares, cleaning and other duties that carry a higher risk of infection. See the agencies policy on Infection Control.

PCAs are required to wear a mask throughout their shift. Management of the agency reserves the right to make wearing masks optional for employees or clients based on recommendations of MDH for those who have a signed directive from their health care provider stating that the person has a health concern that is not compatible with wearing a face mask. Alternative, such as a face shield may be provided.

## PCA Program Guidance

People who receive services will be encouraged to self-monitor for signs and symptoms of COVID-19. If they are experiencing signs and symptoms, they should report these to Olga Sheveleva, VP of Development and Strategic Planning, by calling our office at 952-658-8995. Symptoms vary, and may include:

- Cough
- Shortness of breath
- Fever (temperature of >100.0 Fahrenheit)
- Chills
- Muscle pain
- Headache
- Sore throat
- New loss of taste or smell
- New confusion

Visit CDC for the most up to date information on signs and symptoms and when to seek medical attention:

[https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html?CDC\\_AA\\_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fabout%2Fsymptoms.html](https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fabout%2Fsymptoms.html)

PCAs should use additional precautions when working with an individual who has a suspected or confirmed case of COVID-19. Workers are to wear PPE (at a minimum eye protection and a face mask) for all interactions that may involve contact with the person or potentially contaminated areas of the persons environment. Workers should put on the PPE prior to entering the environment. The person receiving services should wear a mask, if tolerated, and follow the guidance to protect themselves and others. See CDC Infection control for COVID-19: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control.html>

For additional information, see the CDC guidance for home care workers in the resource section of this document.

People who receive PCA services and other in-home services may be reluctant to allow workers into their home for fear of exposure to infection. It is important to respect people's preferences. Agencies should communicate with individuals to determine their preferences. The agency should review the person's emergency back-up plan, update the plan as needed, and assess the persons risk if they are unable to receive services.

## Health Care Worker Assessment Information from MDH

Below you will find an outline of our expectations for assessing the risk level for health care workers (HCW) who had contact with a confirmed COVID-19 positive person.

**Internal HCW Risk Assessment Process:** This risk assessment should be an active process that involves a conversation with the exposed HCW and should occur within 24-hours of exposure notification. A sample *HCW assessment* and *Exposure Risk Assessment Protocol* are attached to this email. These documents can also be found under the "[Infection Prevention and Control](#)" heading on the MDH website. Form updates will be posted on this page of the website.

**Results of the Internal HCW Risk Assessment Process:** There are two possible risk levels, low or high.

**Low-risk exposures:** MDH recommends that the HCW **self-monitor for 14 days** following their last exposure to a COVID-19 positive person.

- There are no other restrictions on the individual's movement or activities. If a HCW has another COVID-19 exposure, their date of last exposure would then be updated and their self-monitoring would continue for 14 days from the most recent exposure date.
- MDH requests the total **number of low-risk HCWs exposed** to each COVID-19 positive person be sent back to this email address.

**High-risk exposures:**

- For **high-risk exposures**, MDH recommends active monitoring and **home quarantine for 14 days**.
- For each confirmed COVID-19 person, please fill out the ***Outpatient HCW Contact List TEMPLATE*** including the positive person's full name and D.O.B. Please list the name, phone numbers, and email addresses of any HCWs that were deemed to be high-risk and send the list back to [health.HCWMonitoring@state.mn.us](mailto:health.HCWMonitoring@state.mn.us).
- **MDH must be provided this information within 24-hours of notification or exposure**, because we must inform HCWs of their quarantine rights and employment protections.
- Active monitoring will be done by MDH for all high risk HCWs. Individuals will be contacted on a daily basis via a RedCap survey or phone in order to collect information as part of the HCW monitoring process. If employees give us permission, we have the ability to share this information with their employer.

MDH will be following up the HCWs that you provide contact information for, but we will not be notifying any other people that could have been exposed to the case in your agency. Agencies are responsible for reaching out to any people that may have been exposed.

Feel free to email [health.hcwmonitoring@state.mn.us](mailto:health.hcwmonitoring@state.mn.us) if you have concerns regarding staffing shortages, issues related to performing risk assessments, or any other concerns that you have related to these expectations and guidance. This email address in-box is monitored 7-days a week by infectious disease epidemiologists and we will get back to you as soon as we can. Check our website for frequent updates – [MDH COVID Website](#).

MDH provided the following documents:

[Sample HCW Assessment 6-24-2020.pdf](#)

[Potential Exposure to Patients with COVID-19 in Outpatient Settings 6-5-2020.pdf](#)

[HCW Recommendations COVID 7-29-2020 \(1\).pdf](#)

[Outpatient HCW Contact List TEMPLATE.xlsx](#)

## 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 clients, guests and visitors to the office are required to wash or sanitize their hands prior to or immediately upon entering the office. 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.

Workers, clients, guests 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. They 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 ([see resources in Appendix A](#)) and supported by making tissues and trash receptacles available to all workers and other persons entering the workplace.

## **Workplace Building and Ventilation Protocol**

The office(s) for MCS includes necessary sanitation, 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.

## **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, lunchrooms, meeting 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. If a worker is diagnosed with COVID-19 and was in the workplace extra disinfecting will be done of the work area, especially in the areas where the worker was. See CDC Guidance: <https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html> Employees will be required to wear gloves when disinfecting surfaces and will be provided with information on donning and doffing of gloves. ([See resources in this document for putting on and taking off PPE](#)) Gloves will not be reused.

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.

For PCAs working in the client's home, they should assist with disinfecting surfaces, focusing on the high touch areas such as doorknobs, handles, counters, etc.

## **Communications and Training Practices and Protocol**

This Updated COVID-19 Preparedness Plan was communicated to all workers on August 26, 2020 by posting a copy on MCS' website and asking all workers to go and read it before the beginning of their next shift, and necessary training was provided. Additional communication and training will be ongoing as we learn more about COVID-19 and ways to reduce the spread by updating this plan and using the same process to communicate with all workers. 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 and customers, clients, patrons, guests and visitors about protections and protocols, including: 1) social distancing protocols and practices; 2) drop-off, pick-up, and delivery; 3) practices for hygiene and respiratory etiquette; 4) recommendations or requirements regarding the use of masks, face-coverings and/or face-shields by workers clients, guests and visitors. They will also be advised not to enter the workplace if they are experiencing symptoms or have contracted COVID-19.

Managers and supervisors are expected to monitor how effective the program has been implemented. MCS is keeping a log of employees who have reported COVID-19 exposure and ensuring that they are properly compensated for their sick leave. MCS is in continuous communications with its clients who have been exposed to COVID-19 and providing them with information to contact their primary care physician to get tested for the virus. MCS will continue to update their policies and training material as necessary for continued success of this program. 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 MCS management and the plan was posted throughout the workplace and made readily available to employees August 26, 2020. It will be updated as necessary by Anna Guler.

## **Additional Protections and Protocols**

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

- Qualified Professionals are to conduct all meetings by telecommunications until notified otherwise.
- Employees will avoid shared preparation and sharing of food. Social distancing will be maintained during meal preparation and eating. See Social Distancing section.
- MCS is providing home care workers and clients with the necessary PPE upon request, such as gloves, masks, wipes, and sanitizers.
- MCS management is planning to work with building management to make the necessary modification to our office suite in order to promote limited contact and social distancing.

Certified by:



Lana Barskiy  
President & CEO  
August 26, 2020

Resources specific to Minnesota's PCA service and COVID-19:

For the latest information about COVID-19 from DSD: <https://mn.gov/dhs/partners-and-providers/news-initiatives-reports-workgroups/long-term-services-and-supports/news/covid19.jsp>

Guidance for PCA agencies providing in-home support during COVID-19 emergency: <https://mn.gov/dhs/partners-and-providers/news-initiatives-reports-workgroups/long-term-services-and-supports/news/covid19.jsp?id=1053-435305>

Sign up to receive updates from DHS regarding COVID-19: [https://public.govdelivery.com/accounts/MNDHS/subscriber/new?topic\\_id=MNDHS\\_381](https://public.govdelivery.com/accounts/MNDHS/subscriber/new?topic_id=MNDHS_381)

Standard precaution training for PCAs: [http://pathlore.dhs.mn.gov/courseware/DisabilityServices/3-DirectAccess/standardprecautions/story\\_html5.html](http://pathlore.dhs.mn.gov/courseware/DisabilityServices/3-DirectAccess/standardprecautions/story_html5.html)

MDH protecting yourself from COVID-19: <https://www.health.state.mn.us/diseases/coronavirus/prevention.html>

CDC symptoms of COVID-19: <https://www.cdc.gov/coronavirus/2019-nCoV/index.html>

Guidance for putting on and taking off PPE: <https://www.cdc.gov/hai/pdfs/ppe/PPE-Sequence.pdf>

MDH COVID website: <https://www.health.state.mn.us/diseases/coronavirus/index.html>

CDC guidance for home care workers: <https://www.cdc.gov/coronavirus/2019-ncov/downloads/guidance-home-care.pdf>

Printable resources on COVID, available in many languages: <https://www.cdc.gov/coronavirus/2019-ncov/communication/print-resources.html?Sort=Date%3A%3Adesc&Search=symptoms>

## Appendix A – COVID-19 Resources for the Preparedness Plan

### General

Centers for Disease Control and Prevention (CDC): Coronavirus (COVID-19) – [www.cdc.gov/coronavirus/2019-nCoV](http://www.cdc.gov/coronavirus/2019-nCoV)

Minnesota Department of Health (MDH): Coronavirus – [www.health.state.mn.us/diseases/coronavirus](http://www.health.state.mn.us/diseases/coronavirus)

State of Minnesota: COVID-19 response – <https://mn.gov/covid19>

### Businesses

CDC: Resources for businesses and employers – [www.cdc.gov/coronavirus/2019-ncov/community/organizations/businesses-employers.html](http://www.cdc.gov/coronavirus/2019-ncov/community/organizations/businesses-employers.html)

CDC: General business frequently asked questions – [www.cdc.gov/coronavirus/2019-ncov/community/general-business-faq.html](http://www.cdc.gov/coronavirus/2019-ncov/community/general-business-faq.html)

CDC: Building/business ventilation – [www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html](http://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html)

MDH: Businesses and employers: COVID-19 – [www.health.state.mn.us/diseases/coronavirus/businesses.html](http://www.health.state.mn.us/diseases/coronavirus/businesses.html)

MDH: Health screening checklist – [www.health.state.mn.us/diseases/coronavirus/facilityhlthscreen.pdf](http://www.health.state.mn.us/diseases/coronavirus/facilityhlthscreen.pdf)

MDH: Materials for businesses and employers – [www.health.state.mn.us/diseases/coronavirus/materials](http://www.health.state.mn.us/diseases/coronavirus/materials)

Minnesota Department of Employment and Economic Development (DEED): COVID-19 information and resources – <https://mn.gov/deed/newscenter/covid/>

Minnesota Department of Labor and Industry (DLI): Updates related to COVID-19 – [www.dli.mn.gov/updates](http://www.dli.mn.gov/updates)

Federal OSHA – [www.osha.gov](http://www.osha.gov)

Families First Corona Virus Response Act: <https://www.dol.gov/agencies/whd/pandemic/ffcra-employer-paid-leave>

### Handwashing

MDH: Handwashing video translated into multiple languages – [www.youtube.com/watch?v=LdQuPGVcceg](http://www.youtube.com/watch?v=LdQuPGVcceg)

### Respiratory etiquette: Cover your cough or sneeze

CDC: [www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html](http://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html)

CDC: [www.cdc.gov/healthywater/hygiene/etiquette/coughing\\_sneezing.html](http://www.cdc.gov/healthywater/hygiene/etiquette/coughing_sneezing.html)

MDH: [www.health.state.mn.us/diseases/coronavirus/prevention.html](http://www.health.state.mn.us/diseases/coronavirus/prevention.html)

## **Social distancing**

CDC: [www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html](http://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html)

MDH: [www.health.state.mn.us/diseases/coronavirus/businesses.html](http://www.health.state.mn.us/diseases/coronavirus/businesses.html)

## **Housekeeping**

CDC: [www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html](http://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html)

CDC: [www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/disinfecting-your-home.html](http://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/disinfecting-your-home.html)

CDC: [www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html](http://www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html)

Environmental Protection Agency (EPA): [www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2](http://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2)

## **Employees exhibiting signs and symptoms of COVID-19**

CDC: [www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html](http://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html)

MDH: [www.health.state.mn.us/diseases/coronavirus/basics.html](http://www.health.state.mn.us/diseases/coronavirus/basics.html)

MDH: [www.health.state.mn.us/diseases/coronavirus/facilityhlthscreen.pdf](http://www.health.state.mn.us/diseases/coronavirus/facilityhlthscreen.pdf)

MDH: [www.health.state.mn.us/diseases/coronavirus/returntowork.pdf](http://www.health.state.mn.us/diseases/coronavirus/returntowork.pdf)

State of Minnesota: <https://mn.gov/covid19/for-minnesotans/if-sick/get-tested/index.jsp>

## **Training**

CDC: [www.cdc.gov/coronavirus/2019-ncov/community/guidance-small-business.html](http://www.cdc.gov/coronavirus/2019-ncov/community/guidance-small-business.html)

Federal OSHA: [www.osha.gov/Publications/OSHA3990.pdf](http://www.osha.gov/Publications/OSHA3990.pdf)

MDH: [www.health.state.mn.us/diseases/coronavirus/about.pdf](http://www.health.state.mn.us/diseases/coronavirus/about.pdf)