

### **Pandemic**

A pandemic is the global outbreak of a new virus that is different from current and recently circulating viruses. Pandemics happen when new (novel) viruses emerge that are able to infect people easily and spread from person to person in an efficient and sustained way. Because the virus is new to humans, very few people will have immunity and a vaccine might not be widely available for many months. How sick people get will depend on the virus' characteristics, whether people have any immunity and the health and age of those infected. With seasonal flu, for example, certain chronic health conditions are known to make some people more susceptible to serious flu infections. A pandemic virus would be highly disruptive to People Serving People's normal operations and would force us to modify our services to continue essential operations and reduce the risk of contagion. In planning for this contingency, we are guided by the safety and wellbeing of our stakeholders their families as well as continuity of our critical mission.

## **Pandemic Preparedness**

**Purpose**: The purpose of pandemic preparedness is to limit illness among People Serving People's stakeholders and preserve continuity of essential operations and services.

**Impact**: The impact of a pandemic illness will be felt in People Serving People's staffing, availability of key supplies, and in extreme cases food and water shortages. Transit, public safety and communications may also be disrupted. There will be challenges getting to and from work, and psychological impacts on those who must work onsite. Our ability to provide uninterrupted shelter services will be challenged.

**Requirements**: Identify People Serving People's essential business functions. Create a framework to safeguard staff and allow those with low risk factors (e.g., no immediate relations with compromised immune symptoms) to augment essential operations with an expected absentee rate of 30 - 70 percent. Develop a communications plan to inform and educate stakeholders on best practices for remaining healthy.

**Response:** People Serving People will maintain routine awareness through national/local reporting (see Table 3). It is expected that People Serving People will receive a warning from the media, federal and/or state and local agencies prior to the declaration of a pandemic.

Issued on: 13 March 2020

**Approved By:** Senior Director of Operations & Planning **Revalidate On:** 13 April 2020 or Until Superseded

## **Essential Operations & Service Modifications**

People Serving People will maintain, modify and/or suspend services in the event of a pandemic to promote wellbeing for its stakeholders. "Essential operations and services" refer strictly to those People Serving People must perform to fulfill its contractual obligations. As of March 2020, these are limited to the services specified in Table 1. These operations and services may be modified, but any change must be coordinated with the contract holder prior to implementation.

**Table 1: Essential Operations & Services** 

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Service	Department	Contract Holder			
Emergency Shelter Rooms	Facilities (Operational) & Resident Resources (Administration)	Hennepin County Contract			
Permanent Supportive Housing	Facilities (Operational) & Advocacy Services (Administrative)	Minnesota Department of Human Services			
Three Meals Daily	Food Services	Hennepin County Contract			
Housekeeping Services, including Linen Exchange	Facilities	Hennepin County Contract			
24 Hour Security	Security	Hennepin County Contract			
24 Hour Front Desk including mail and message service	Resident Resources	Hennepin County Contract			
Administrative Services	Human Resources & Compliance	Hennepin County Contract			
Phones & Internet	IT	Hennepin County Contract			

The decision to modify essential operations, or to temporarily suspend services not required by contract, will be made by People Serving People's Senior Leadership Team in an emergency meeting triggered by one or more of the following developments:

- A public health emergency declaration by Hennepin County or the City of Minneapolis or "social distancing" directive.
- Closure of the Minneapolis Public Schools school system.
- An active or suspected case of pandemic illness within People Serving

People's Emergency Shelter or at the Center of Excellence.

• Staff absentee rate that forces modification or suspension.

The extent of any closures or modifications will guided by the mortality and morbidity of the pandemic illness as determined by the U.S. Center for Disease Control (CDC) and in coordination with public health authorities. Assuming a pandemic illness with a high level of transmission and a mortality rate surpassing that of the typical seasonal flu, People Serving People may maintain, modify or suspend key services as follows:

Table 2: Potential Service Modifications

Service or Program	Maintain	Modify	Suspend	Comments
Emergency Shelter & Permanent Supportive Housing	x	x		Fully maintain Emergency Shelter and Permanent Supportive Housing services, closing public spaces to avoid contagion. Isolate and support affected individuals in specified areas as directed by public health authorities.
Food Services	x	x		Continue producing three meals daily. Deliver food and water to quarantined areas in addition to the Dining Hall. Discontinue food service in Dining Hall upon declaration of a public health emergency or illness at shelter.
Maintenance & Housekeeping	x	x		Maintain housekeeping and maintenance services needed to ensure the continued operation of the shelter facility. Increase sanitizing of key areas upon transmission in the U.S. (see Table 5). Reduce linen exchange to once weekly, decrease frequency of room inspections upon declaration of a public health emergency or illness at shelter. Continue fleet operations as deemed appropriate.
Resident Resources	x	х		Fully continue 24/7 administrative operations. Modify basic supply distribution and cancel Head-to-Toe to reduce contagion upon declaration of a public health emergency or illness at shelter.
Security	X	x		Fully continue 24/7 operations.  Modify procedures if it would decrease the risk of contagion (e.g., nightly check-in, "hands-on" bag inspections) upon declaration of a public health emergency or illness at shelter.

Service or Program	Maintain	Modify	Suspend	Comments
Phones and Internet	x	x		Continue delivering phone and internet service, as well as standard network services. Service degradation may be unavoidable for external reasons.
Advocacy Services	x	x	x	Continue operations in support of basic needs, including clothing closet, move-out basket, transportation assistance, etc., as deemed appropriate.  Discontinue groups upon declaration of public health emergency or illness at shelter.  Staff may work remotely.
Administration	x	x	x	Continue administrative functions required to support essential operations and support workforce. Staff may work remotely and discontinue any functions not immediately required to support the public health emergency.
Systems Change & Community Engagement	x	x	x	Continue functions that directly support essential operations and engagement with key stakeholders, including guests and residents. Staff may work remotely and discontinue any functions not immediately required to support the public health emergency.
Development	x	х	x	Continue functions that directly support essential operations and engagement with key stakeholders, including funders, volunteers and the general public. Staff may work remotely and discontinue any functions not immediately required to support the public health emergency.
Early Childhood Development Program		х	x	Suspend services upon declaration of public health emergency, Minneapolis Public Schools system closure, or illness at shelter. Staff may work remotely if possible.
Center of Excellence Preschool & Early Learning Center		x	x	Suspend services upon declaration of public health emergency, Minneapolis Public Schools system closure, or illness at Center of Excellence. Staff may work remotely if possible.

Service or Program	Maintain	Modify	Suspend	Comments
Volunteers		х	x	Volunteer program would be modified if possible, but most likely suspended, upon declaration of public health emergency, illness at shelter or suspension of service.
K12 Program			x	Suspend services upon declaration of public health emergency, Minneapolis Public Schools system closure, or illness at shelter. Staff may work remotely if possible.
Technology Resource Center			x	The Technology Resource Center will be closed upon declaration of public health emergency or illness at shelter.
Community Partners			х	Onsite community partners visits will be discontinued upon declaration of public health emergency or illness at shelter unless they are materially related to the pandemic or are essential to supporting guests and residents, as determined in conjunction with public health authorities.
Guest Advisory Council			x	Guest Advisory Council meetings will be temporarily canceled upon declaration of public health emergency or illness at shelter. Guests will be engaged in other ways, per Engagement Staff.

# **Continuity of Operations**

People Serving People will need to modify its standard business practices to continue delivering the services specified in Table 2 and reduce the risk of contagion within its facilities and in the broader community. To that end, it will take the following steps to promote continuity of People Serving People's essential business operations.

• Emergency Action Team & Communications: People Serving People will convene an Emergency Action Team to lead the organization's pandemic response. The team will activate upon declaration of a state or local public health emergency, will be chaired by the Senior Director of Operations & Planning and include at minimum representatives from People Serving People's Crisis Communications Management. The Emergency Action Team will be responsible for making decisions regarding service modifications as well as developing and

implementing a stakeholder communications strategy, in accordance with People Serving People's Crisis Communications Management framework as well as with guidance specified in Tables 3 and 4.

**Table 3: Stakeholder Communications Guidance** 

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Stakeholder	Subjects	Methods				
Guests, Residents & Students Lead: OPS, FSS	<ul><li>Situational awareness</li><li>Infection control/prevention</li><li>Service modifications</li><li>Procedural modifications</li></ul>	<ul><li>Digital Display</li><li>Flyers &amp; Posters</li><li>GAC Meetings</li><li>Brightwheel</li></ul>				
<b>Volunteers</b> Lead: DEV	<ul><li>Situational awareness</li><li>Infection control/prevention</li><li>Volunteer program changes</li><li>Procedural modifications</li></ul>	<ul><li>Email</li><li>Phone</li><li>Website</li><li>Digital Display</li></ul>				
Community Partners Lead: SC&CE	<ul> <li>Situational awareness</li> <li>Infection control/prevention</li> <li>Service modifications</li> <li>Procedural modifications</li> </ul>	<ul><li>Email</li><li>Phone</li><li>Website</li><li>Digital Display</li></ul>				
<b>Staff</b> Lead: OPS, HR	<ul> <li>Situational awareness</li> <li>Infection control/prevention</li> <li>Service modifications</li> <li>Procedural modifications</li> <li>Administrative guidance</li> <li>Operational instructions</li> </ul>	<ul><li>Email</li><li>Phone</li><li>Digital Display</li><li>Dept Meetings</li></ul>				
Board Lead: CEO	<ul><li>Situational awareness</li><li>Infection control/prevention</li><li>Service modifications</li><li>Business continuity status</li></ul>	<ul><li>Email</li><li>Phone</li><li>Board Meetings</li></ul>				
<b>General Public</b> Lead: DEV	<ul><li>Situational awareness</li><li>Infection control/prevention</li><li>Financial or In-Kind Needs</li><li>Drive Narrative</li></ul>	<ul><li>Website</li><li>News Releases</li><li>Media Outreach</li></ul>				
<b>Vendors</b> Lead: Staff	<ul><li>Situational awareness</li><li>Procurement/service needs</li><li>Procedural modifications</li></ul>	<ul><li>Email</li><li>Phone</li></ul>				
County Partners  Lead: Relationship Holders	<ul> <li>Situational awareness</li> <li>Service modifications</li> <li>Procedural modifications</li> <li>Administrative coordination</li> <li>Operational coordination</li> </ul>	<ul><li>Email</li><li>Phone</li><li>Meetings</li></ul>				

**Table 4: Risk Information Sourcing** 

Table 4: Risk information Sourcing				
Source	Comments			
Centers for Disease Control & Prevention	The CDC is the primary source of information and guidance at the federal level regarding outbreaks of contagious disease.			
Minnesota Department of Health	MDH works with CDC and provides state-level information for use in planning and outbreak response.			
Hennepin County Public Health	Hennepin County Public Health works directly with the CDC and MDH to provide county-level guidance. The county is our primary point of contact when coordinating planning and responding to outbreaks.			
Minneapolis Public Health	The city's public health department implements the city's response to public health emergencies, in partnership with federal, state and other local agencies. City actions will guide those of other city entities, including MPS.			
Occupational Safety & Health Administration	OSHA and the DOL work with CDC to provide pandemic-specific guidance to employers and employees. OSHA is an important source of information when planning workforce response.			
General Media	Trusted news outlets can be used to monitor developments, but all information should be vetted against that available from public health authorities before actioning.			
Social Media	Social media can serve an important tipping and queueing role, particularly in community engagement spaces. Social media information must be corroborated and validated by public health authorities if used in planning or agency communications			

• **Excusal of High-Risk Staff:** Staff who are required to work onsite but who have high risk factors (i.e., young children, caregiving for elderly individuals or intimate relations with compromised immune systems)

may seek temporary excusal from their supervisor and Human Resources. Any excusal would be subject to revalidation and treated as a furlough or an alternative employment status, as determined by Human Resources with input from the Senior Leadership Team. During this time, staff may use their personal time off as available to them.

- Reassignment of Staff: Staff working in suspended roles or departments may volunteer on paid basis to support the delivery of contractually-mandated services for the duration of the public health emergency. Staff will coordinate this with their supervisor and Human Resources, which will partner with the Senior Leadership Team to coordinate scheduling. Supported departments will be responsible for training reassigned staff to perform the roles they'll be assigned.
- Absentee Reporting: Managers or their designees will send a daily update to their Director, Human Resources and the Senior Director of Operations detailing their staffing level for that day and any known absences during the coming days. This information will be used to monitor the health of staffing levels and may be used to help place reassigned staff to sustain operations.
- **Hazard Pay:** Staff who must be onsite to perform contractually-mandated roles, as well as reassigned staff who volunteer to support such roles, will be eligible for "hazard pay" for the duration of the public health emergency in an amount determined by Human Resources with input from the Senior Leadership Team.
- **Dismissal of III Staff**: Staff who report for work ill or showing signs of illness will be dismissed and not allowed to return until they provide a medical note clearing them to do so. This is intended to prevent the unnecessary transmission of avoidable illness. During this time, staff may use their personal time off as available to them.
- Remote Work: Staff who may remotely perform work in support of essential business operations will be required to do so whenever possible, using assigned or checked-out laptops as supplies allow. Staff who lack assigned/checked-out laptops but whose work is deemed essential will be authorized to remove their desktop, monitor and peripherals from the shelter for the duration of the public health emergency so long as it is unlikely the equipment will need to be used for any purpose onsite. This will require additional resources and support from IT, and supervisors should limit this practice when possible. Timekeeping guidance will be provided by Human Resources.
- Reduction of Meetings & Gatherings: In-person meetings and

gatherings (including social events) will be reduced to the greatest extent possible and/or modified to encourage remote participation (e.g., Microsoft Teams). Upon declaration of a public health emergency, "social distancing" instructions from state health authorities or as directed by the Emergency Action Team, the organizers of recurring meetings should partner with participants to evaluate and implement alternative modes and scheduling.

• **Mental Health Supports**: People Serving People will remind staff of the Employee Assistance Program's availability and encourage those struggling with the impact of the pandemic illness to utilize it.

#### Infection Prevention & Control

People Serving People's shelter and Center of Excellence are congregate settings that are susceptible to the transmission of contagious illness due to the high concentration of people. In a public health emergency, it is essential that steps be taken to decrease the risk of transmission. These steps include but may not be limited to the following:

- Hand Washing and Cough Etiquette: People Serving People will provide stakeholders resources to help them avoid transmission by practicing proper handwashing technique and cough/sneeze etiquette. These resources will be shared with the specified stakeholders using the communications methods outlined in Table 3.
- Pre-Exposure Cleaning Precautions: People Serving People's Facilities department and Center of Excellence staff will increase cleaning of frequently touched surfaces within their respective spaces, using standard cleaning solutions, to discourage the spread of infectious disease. This includes but is not limited to door handles, push bars, elevator call buttons, light switches, appliances and manually-operated equipment (e.g., pallet jack, moving bins, flatbeds, overhead garage door, door release buttons). Foodservice equipment must be washed, rinsed and sanitized in accordance with applicable health codes. Departments will be provided additional cleaning resources (e.g., wipes) and encouraged to regularly wipe down work surfaces and computer equipment. These cleaning procedures will continue throughout the public health emergency, but will be augmented by additional cleaning and disinfecting measures in areas visited by infected persons (see below).
- **Upon Learning of Exposure**: If an exposed person is discovered to have visited the shelter or Center of Excellence, it must be reported immediately to Hennepin County Public Health and the Minnesota

Department of Health. Public health authorities will provide guidance on next steps, which will likely include closing down areas the infected person visited and waiting at least 24 hours to clean and disinfect, opening doors and windows where possible to increase air circulation, and decreasing cleaning of areas used by the infected person if they remain in shelter. A case of pandemic illness within the shelter or the Center of Excellence will prompt the Emergency Action Team to modify or sustain services as outlined in Table 2, and to notify stakeholders identified in Table 3 of the presence of the pandemic. Communications regarding the presence of the pandemic illness inside the shelter or Center of Excellence must guarantee privacy for the affected individual and comply fully with the Americans with Disabilities Act and other information privacy guidelines.

• Cleaning & Sanitizing After Exposure: Areas visited by infected persons must be cleaned and sanitized to reduce the risk of transmission. If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection. For disinfection, Oasis 499 HBV solutions, diluted household bleach solutions (1/3 cup bleach per gallon of water), alcohol solutions with at least 70% alcohol, and most EPA-registered household disinfectants should be effective. For soft (porous) surfaces such as carpeted floor, rugs, and drapes, remove visible contamination if present and clean with appropriate cleaners indicated for use on these surfaces. If the items can be laundered, launder items in accordance with the manufacturer's instructions using the warmest appropriate water setting for the items and then dry items completely. If laundering linens, do not shake dirty laundry, wash items using the warmest appropriate setting and allow them to dry completely. Clean and disinfect carts.

Figure 1: Guidance for Housekeeping Staff

Housekeeping staff should wear disposable gloves and gowns for all tasks at all times in the cleaning process, including handling trash.

- Gloves and gowns should be removed in accordance with CDC guidelines to avoid contamination of the wearer and the surrounding area
- Gloves should be removed after cleaning a room or area occupied by ill persons
- Hands should be cleaned immediately after removing gloves
- Staff should report any breaches in personal protective equipment (e.g., tears in gloves) to their supervisor

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• Personal Protective Equipment: People Serving People has established a supply of medical gloves, shoe covers, isolation gowns, surgical masks and respirators (Table 5). Medical gloves, isolation gowns and shoe covers are intended for use when cleaning and disinfecting. People Serving People is not a healthcare facility and does not perform operational tasks requiring respirator use, consequently it does not maintain a respirator program. However, surgical masks and respirators may be made available for staff use if so directed by the CDC and MDH. Guests, residents and students who present signs respiratory illnesses will be directed to the Healthcare for the Homeless Clinic or Hennepin County Medical Center, which maintain independent inventories, to receive medical attention and masks if we lack supplies.

**Table 5: Available Equipment** 

Equipment	Purpose	Supply
N95 Respirator	N95 respirators filter out approximately 95% of airborne particles when fitted properly. Respirators must be worn in accordance with OSHA guidelines. Not appropriate outside a healthcare setting unless so directed by public health authorities.	Limited, likely impossible to resupply in pandemic
Surgical Mask	Surgical masks are effective at reducing airborne transmission of bacteria and viruses when worn by ill persons. Can be worn with N95 respirators to extend respirators' service life.	Low, likely impossible to resupply in pandemic
Medical Gloves	Latex gloves are effective at reducing the transmission of bacteria and viruses particularly when wearers practice good glove hygiene and avoid touching their face.	Moderate, likely difficult to resupply in pandemic
Isolation Gowns	Isolation gowns can be worn to control against the transfer of viruses and bacteria onto personal clothing. They will not	Low, likely difficult to resupply in pandemic

	prevent transfer, and clothes should be laundered.	
Shoe Covers	Shoe covers can be worn to control against the transfer of viruses and bacteria. They will not prevent transfer, and care must be taken to avoid touching shoes after washing hands.	Low, likely difficult to resupply in pandemic

- Screening for Illness: Staff members should actively monitor other People Serving People stakeholders for symptoms consistent with the pandemic illness (e.g., coughing, sneezing, fever). These symptoms will be shared with stakeholders for monitoring purposes. These stakeholders should be engaged immediately—including during shelter intake—and encouraged to seek medical assistance at the shelter's Clinic or at the stakeholder's medical provider. If supplies allow, the stakeholders should be given a surgical mask and when applicable directed to leave the shelter.
- Facilitating Isolation: Guests or Residents exposed to pandemic illness may need to be moved to alternative housing or may remain in their shelter rooms or apartments, as directed by public health authorities. These individuals will be instructed to self-isolate and monitor for worsening symptoms. Close contacts of the individuals exposed to the pandemic may also need temporary housing or to be moved to other shelter rooms or apartments so that they can self-quarantine and monitor for symptoms. Public health authorities will provide guidance on who must be isolated and how to support those who may be required to isolate themselves. Spaces used for isolation will be cleaned and disinfected after isolation is complete. Decisions about whether Guests and Residents with mild symptoms due to suspected or confirmed pandemic illness should remain in the shelter or be directed to alternative housing sites should be made in coordination with the Hennepin County Public Health Department.
- Closed Point of Dispensing: In the event a vaccine or other medication is made available via the federal Strategic National Stockpile, People Serving People will fully implement its Closed Point of Dispensing Procedures, but will prepare to modify those procedures as necessary to accommodate staff with prescribed roles who have been excused for high risk factors under this procedure.

Coordinated with: Hennepin County Human Services & Public Health

Department