



Karuk Tribe

COVID-19 Pandemic Response Plan

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Purpose

The purpose of this plan is to clearly define the response of the Karuk Tribe to the current COVID-19 pandemic and conditions that warrant changes in day-to-day operations of the organization. This document is intended to **augment** the approved Return to Work Protocol (Appendix E).

Each phase will be clearly defined. The current phase will be updated based on current area data and critical thinking. Phases will be implemented based on data for the county of operations (i.e. Siskiyou or Humboldt) as situations can vary by region. Progress to each phase will be conditional based on trigger conditions (See Section 2 Conditions of Progression).

I. PHASES AND TRIGGERS

Each phase will be using the dimmer switch model in which offices will scale back their operations based on the Remote Work Employee Evaluation Tool (See appendix A). An office location should follow the recommendations for the dimmer switch percent. This percent translates to the percentage of total people normally in an office building—you may count this by the number of available desks/chairs.

- Dimmer switch %: The percent of building capacity. To get this number, one multiplies the decimal of the percent (e.g. 0.25 for 25%, 0.5 for 50%, 0.75 for 75%) by the building capacity.
 - For example, the DNR building in Orleans building capacity is 20 employees. So 25% of 20 is: $0.25 \times 20 = 5$. So a dimmer switch at 25% for the DNR would allow 5 people in the building.

Offices will be moved between phases on a County of Operations (County in which office is located) and regional basis (regional location of recent cases, as reported by the County Public Health Nurse and/or through the Karuk Clinics). The regional basis means if the trigger occurs within the immediate area of the office (the surrounding town or city), that one office location will be moved back a

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phase but other offices may remain in current phase. It will be the duty of the incident commander to report to the Tribal council representative when a trigger has been met (and the duty of the Incident Command Team to identify when a trigger has been met for a particular office location.)

Triggers have been based on the State of California’s Department of Public Health tier framework (from the Blueprint for a Safer Economy, see Appendix B). The tier framework assigns each county a tier ranking between 1 and 4 representing risk of community disease transmission (“Counties are assigned a tier based on two metrics: test positivity and case rate.” -CA DPH), 1 being higher risk and 4 being lower risk: Tier 1-Widespread, Tier 2-Substantial, Tier 3-Moderate, Tier 4-Minimal.

“Small counties are subject to all existing Blueprint rules...with the exception of the case rate thresholds as delineated...” -CA DPH [Blueprint for a Safer Economy](#). For concerns about small counties and tier-to-tier movements, see the ‘Small County Framework’ section of Appendix B.

	Higher Risk \longrightarrow Lower Risk of Community Disease Transmission***			
	Widespread Tier 1	Substantial Tier 2	Moderate Tier 3	Minimal Tier 4
Measure				
Adjusted Case Rate for Tier Assignment** (Rate per 100,000 population* excluding prison cases^, 7 day average with 7 day lag)	>7	4-7	1-3.9	<1
Testing Positivity^ (Excluding prison cases^, 7 day average with 7 day lag)	>8%	5-8%	2-4.9%	<2%

Figure 1. CA DPH Tier Framework.

“^Excludes state and federal inmates, ICE facility residents, State Hospital inmates and US Marshal detainees

*Population denominators from the Department of Finance: State Population Projections - [Total Population by County- Table P-1](#)

**Case rate will be determined using cases confirmed by PCR

*** Counties are assigned a tier based on two metrics: test positivity and case rate. Large counties with populations greater than approximately 106,000 must also meet the health equity metric described on the [Health Equity Metric page](#) in order to advance to a less restrictive tier.”

Phase 1: Pandemic Response - Triggered by the State of California Department of Public Health (CA DPH) placing the County of Operations into **Tier 1** of the Blueprint for a Safer Economy (see Appendix B), highly essential employees only.

- Minimal employees reporting to the office (dimmer switch to 25% of total employees in an office building or less) to maintain essential function.
- Non-essential employees will be asked to work from home. Employees unable to work from home with reasonable technical support will be placed on leave as directed by council.
- No business-related travel allowed. Follow State mandates to the best of one's ability outside of work.

Phase 2: Return to Work - Triggered by the CA DPH placing the County of Operations into **Tier 2 or 3** of the Blueprint for a Safer Economy.

- Essential employees, positions that cannot be done from home (use COVID-19 Employee Remote Work Capability Evaluation Tool, Appendix A):
 - Employees return to work (dimmer switch to 50%).
 - If able to fulfill 100% of job duties from home continue work from home.
 - If unable to work from home return to work with appropriate precautions such as rotating office schedule (i.e. shared offices are not occupied by all users at the same time *if possible*), limiting shared work spaces, frequent disinfection of high touch/shared areas, monitoring symptoms per public health guidelines (see Appendix C), testing for COVID-19 if requested.
 - Non-essential employees continue as in Phase 1

Phase 3: Pandemic Normal - Triggered by the CA DPH moving the County of Operations into **Tier 4**, most community businesses open to the public. High-risk individuals work from home.

- All employees return to work unless deemed high risk based on current COVID-19 high risk definitions. (see Appendix D) Dimmer switch 75%
- Precautions remain in place to allow social distancing, limiting shared work spaces, frequent disinfection of high touch/shared areas, monitoring symptoms per public health guidelines.
 - Meeting of more than 3 people should be held virtually.
 - All offices closed to public interaction whenever possible.

Phase 4: Full Operations - Triggered by lifting of pandemic status by CDC and WHO.

- All employees return to normal job function following the return to work protocol (Appendix E). Offices open to the public and meetings with partnering agencies allowed.

II. CONDITIONS OF PROGRESSION & BACKWARDS TRIGGERS

Each condition must be met in order to move to the next phase as defined in Section 1. Due to the size of Siskiyou and Humboldt counties the IC/Public Health Nurse/or infection control officer will

reach out to county public health officials to determine location of cases. If cases are not in immediate service areas trigger will not be considered met. If location of cases becomes questionable or within immediate area action should be taken.

Phase 1 to phase 2 - **Triggered** by movement of County of Operations into **Tier 2 or 3.**

- Each office must have adequate PPE and sanitation supplies for 3 weeks based on the CDC burn rate calculator (See Appendix D)
- Entry point decontamination station are set up
- Every employee has at least 2 reusable masks to be sanitized frequently
- Clinics have testing capacity to meet needs of symptomatic patients/employees

Phase 2 to Phase 3 - **Triggered** by movement of County of Operations into **Tier 4.**

- Testing made available to all Karuk Employees at no cost to employee and on a volunteer basis. Screening tests, made available to the community with results <7 days.
- Offices have capacity to support PPE needs of employees and social distance work spaces. (See Appendix D)

Phase 3 to Phase 4 - **Triggered** by lifting of pandemic status

- PPE supply returns to normal levels
- Testing capacity and supplies to meet demand (local hospitals, medical centers, and Tribal medical centers' capacities may be combined to meet this condition)

Phase 2 to Phase 1 - **Triggered** by CA DPH moving County of Operations to **Tier 1.**

- Provide technical and material support to employees working from home.
- Maintain and provide adequate PPE supplies and social distancing measures to essential employees working in office/normal work area.

Phase 3 to Phase 2 - **Triggered** by one or more positive COVID-19 cases in the workplace that cannot be traced back to a known case OR CA DPH moves County of Operations to **Tier 2.**

- Maintain adequate PPE supplies. Utilize remote work employee evaluation tool to assist employees transition back to work-from-home as possible/allowable.

Phase 4 to Phase 3 - **Triggered** by CA DPH moving County of Operations to **Tier 3.**

III. TRAVEL

During Phase 1 no business-related travel is permitted by direction of the county officials. Travel should be limited to essential purposes only as described in the return to work protocol (Appendix E). Travel in all other phases are allowed per CDC guidelines. Travel plans are only needed for plans made in times of phase 1. For quarantine recommendation ask the ICT.

We understand that the rural circumstances of our communities complicate the issue of travel during a pandemic. Employees' personal lives are their own business, and we humbly request that employees do their best to follow State mandates on travel (the ICT will keep employees informed of current travel advisories from local Counties and the State).

It is everyone's personal responsibility to prevent the spread of this virus, thus if current State or County mandates require, please complete a self-isolation period per CDC guidelines (work from home if possible) after returning from travel. If it is not possible for you to work from home during this time, discuss with your supervisor measures that can be taken (for example, moving to a private work space in the office, using extra PPE or working on a rotating office schedule so your physical interactions with other employees are minimized.)

Holiday Travel Recommendations

“Travel increases your chance of getting and spreading COVID-19. **Staying home is the best way to protect yourself and others from COVID-19.”**

You can get COVID-19 during your travels. You may feel well and not have any symptoms, but you can still spread COVID-19 to others. You and your travel companions (including children) may spread COVID-19 to other people including your family, friends, and community for 14 days after you were exposed to the virus.

Don't travel if you are sick or if you have been around someone with COVID-19 in the past 14 days.
Don't travel with someone who is sick.”

-CDC [Travel during the COVID-19 Pandemic](#), updated Oct. 21, 2020

- While planning your trip, check in with the CDC's interactive map [COVID-19 Travel Recommendations by Destination](#)
- Wear masks during travel

- “CDC strongly recommends everyone wear a mask on public transportation. This recommendation includes passengers and workers on airplanes, trains, ships, ferries, subways, taxis, and ride shares, and at transportation hubs such as airports and stations.”
- Please see Appendix C for the full CDC article on travel recommendations.

IV. EVALUATING A POSITIVE CASE IN THE WORKPLACE

A temperature of 100.4 or higher will require reporting to the nearest Karuk Tribal Health Clinic or your Primary Care Provider to be evaluated by a provider, and determine if COVID-19 testing, or other action, is needed. If tested, employee will self-quarantine until results are received. If the results are positive, all required reporting and CDC contact tracing guidelines will be completed by the Karuk Tribal Health Program in **conjunction with county public health officials**. This includes employers to notify employees who may have been exposed to COVID-19 and to report workplace outbreaks of COVID-19 to local health department.

If an employee tests positive all known employee contacts (employees working in the work area or having direct contact) with-in the last 14 days of the positive case must self-quarantine per county health officials. **. Contact will be defined as closer than 6 feet for longer than 15 minutes. Entry logs will be used to help identify personnel that may have been exposed (Appendix G.)

During self-quarantine, employees will monitor symptoms per CDC guidelines. Supervisors will sanitize positive employees' work areas and contact work areas. Consult IC if guidance is needed in sanitization. Employees may return to work as per CDC guidelines and county public health recommendation.

**Health employees wearing proper PPE will not need to self-quarantine unless instructed by a County public health officer.

V. VACCINE

When a vaccine is approved and distributed, it does not matter what Response Phase we are in—vaccines will be offered at all Karuk Tribal Clinics to any community members who will take a vaccine.

If an employee is fully vaccinated they can follow most up to date CDC guidelines for vaccinated individuals in regards but not limited to mask wearing, social distancing, office opening, and quarantine guidelines.

VI. DEFINITIONS

- Self-quarantine: “If you have been in close contact with someone who has COVID-19, you may be infected even if you feel well right now... You should self-quarantine (separate yourself from others and stay home) in case you are infected.” -CA DPH.
 - Stay home the required length of time. Check your temperature twice daily report the primary care provider or Karuk Tribal Health if above 100.4`F.
 - Please see CA DPH’s guidance document on Home Quarantine.
- Self-isolate: “stay at home and separate yourself from others” if you have or likely have COVID-19. “You should stay in a separate room away from other people in your household to keep them safe and prevent them from getting ill.” -CA DPH
 - Please see CA DPH’s guidance document on Home Isolation.
- County of Operations: The County in which a particular office building is located.
- Regional Basis: If case spikes are not in the town or city in which a particular office building is located, they may be exempt from moving back a phase.