



# Operational Service Plans

Department:	OMB – Employee Relations	Date:	Updated: 6/7/2021
<b>Proposed Service Delivery Model (includes PPE / Sanitizing Supplies)</b>			
All ER functions and activities shall be conducted in accordance with CDC, MDH and County guidelines and policy related to health and safety.			

**NOTE: Employee Relations is officed on the second floor of the MRTS throughout the construction period at the GCE location. Please contact us to arrange in-person visits to our office space.**

**For all ER Programming:**

- Staff are encouraged to work primarily remote or in a hybrid fashion with some onsite and some remote work occurring to enable a rotation schedule that maintains social distancing. We'll continually assess the needs of service and adjust hybrid scheduling to meet those needs.
- Documents will be delivered via email, US mail, inter-office mail, or can be put in the drop box outside the County entrance. The drop box is checked daily. Document should be sealed and clearly marked for Employee Relations.
- Staff will be provided hand sanitizer, wipes, and cleaning materials as determined appropriate for safe handling of paper documents. Hand washing is highly recommended to be practiced throughout the workday.
- Staff will use social distancing, as well as personal /facility care recommendations from MDH, CDC when in-person work and/or meetings are necessary. Recommended safe distancing between people will be observed.

- **Function A: Labor Relations and Performance Management**

Protocols

- ER will continue to provide labor relations and ER policy/process administration & consultation as the needs of the service dictate.
- Guidance will continue on people management, performance issues, grievances, and investigations as needed and warranted.
- ER will continue to process eval/PAFs in support of payroll – Paper & MS Access. We'll work toward online forms as possible.
- Labor committees will be held in-person or virtually as determined by labor and management representatives. When held in-person, health and safety guidelines will be followed.
- Board documentation prep will continue.

- **Function B: Talent Management**

Protocols

- ER will continue to provide Talent Management administration & consultation as the needs of service dictates.
- Hiring will follow normal posting process. Interviews shall be done

- Regular classification reviews are suspended until further notice. Out of class determinations related to staff redeployment and/or critical function activity and service will happen as needed and in consultation with Labor Relations.
- Neogov will continue to be the document management system.
- During the Emergency Declaration, New employees have continued to receive required/essential onboarding information from Employee Relations and their Supervisors.
- New Employee Welcome sessions (NEWS) were suspended through June 2020. Starting in July 2020, NEWS sessions were offered via virtual platform. Virtual NEWS sessions Part 1 will continue until the emergency declaration has ended.

NEWS Part 2 will be reinstated when fitting following reopening and MDH/CDC/County protocols.**Function C:**

## **Training & Development**

- Central and decentralized training and development programming will continue as the needs of training and participants dictate
- Required NIMs and OSHA training will continue using online resources when possible. In-person training will be reintroduced as determined by training topic and need
- NIMs training, , is encouraged, via the online links provided in the County SCOOP Training Resource Section.

## **General Training Protocol**

### **In-Person Classroom Training Session**

- In-person training will be held using safety and health guidelines and recommendations of the CDC and MDH, including cleaning, social distancing, health screening and masking as established by the *COVID Health and Safety Guidelines*.
- When appropriate, the academic portion of these training should be conducted remotely, via on-line resource or workbooks, to limit the exposure participants have during long in-person trainings.
- When the in-person portions of the training are conducted class size will be limited to a number which ensures:
  - All participants can maintain required social distancing
  - Individual materials can be issued and used by only one participant (i.e. CPR prop)

### **Participant Screening**

- Employees participating in on-site training are required to follow [Scott County Organizational Covid Health and Safety Guidelines](#), including self-screening, prior to attending.
- If the employee has a positive response (yes) to any of the health questions, the employee should not attend the training and contact their supervisor.
- If, during the training, an employee present any of these symptoms, the participant will immediately report their condition to the training instructor.
- If the employee is deemed *Sick*, they will be asked to leave the training or be isolated until they can arrange their departure and contact their supervisor.
- The sick employees work area must be isolated and sanitized following the class.

### **Instructor Screening**

- Prior to attending the training session, the instructor is required to perform a self-assessment using the current Visitor/Employee Health Screening Tool provided in the County Covid-19 Site.
- If the instructor responds positively (yes) to any of the screening questions the training will be cancelled through Employee Relations or hosting agency/entity.

- If the instructor becomes ill or has Covid-like symptoms during the training session, the class will be ended.
- In accordance with CDC guidance, the workstation and equipment used by the instructor with COVID-like symptoms will be taken out of service and facilities will be contacted.
- The area will not be used for at least 24 hours. At the end of that period, the area and equipment may be sanitized using routine cleaning procedures.

### **Training Session Protocol**

- All participants are required to follow current Scott County face mask protocols located in the [Scott County Organizational Covid Health and Safety Guidelines](#).
- Upon arriving the participants will be asked to review the Covid 19 Health screening question.
  - If the participant responds positively to any of the screening questions, they will be asked to leave, and the instructor will contact them later for alternative testing or class options.
- Cleaning products will be made available in the training room.
- While attending training, participants will be assigned to one worktable (station) and will not alternate areas.
- If props are shared (i.e. splints) they must be sanitized with an approved disinfectant between participants.
- At the end of the training, the instructor will ensure all learning surfaces and training aides are sanitized with the appropriate disinfectant (bleach/water mixture for learning stations).

- **Function D: Occupational Health and Safety Protocols**

- ER will continue to provide Occupational Health and Safety administration & consultation as the needs of service dictates.
- Medical and leaves case management and consultation will continue using phone, skype, and email. Documents exchange will be encouraged through scan/email. Documents can also be delivered via US mail or can be put in the drop box outside the County entrance. The drop box is checked daily. Medical and leaves documents shall be sealed and clearly marked for Employee Relations.
- Some in-office work is required for this program area.
- OSHA required Health and Safety Programs continue. ER continues to provide guidance and consultation in all areas as required and with increased a consultation, counsel, and guidance related to COVID-19.
- Health and Safety Team meetings will be reintroduced as it fits the needs of the County and function.
- Safety training and testing will resume under previous schedules and as authorized under Federal and State guidance.
- Site inspections will resume when required and on a regular schedule as practical and authorized.
- Drug and alcohol testing, Workers Compensation, and Accident/Incident review will continue.
- Covid Facing Health and Safety requirements:
  - Maintains and responds to covid questions and concerns submitted in the covid email account.
  - Maintain and update SCOOP Covid H&S site
  - Safety Specialist participates as a member of the Strategy Team
  - Safety Specialist responds to departments covid related safety needs and operational guidance through direct consultation and site inspection/evaluation
  - Employee contact tracing, investigation, and case management

## Occupational Health and Safety Employee Covid Case Investigation and Contact Tracing

To prevent transmission of COVID-19 between employees within Scott County facilities, the ER Health and Safety Team has developed a process for infection/exposure reporting, investigation, employee guidance and notifications. These processes and guidance are based on MDH/CDC directive and recommendations.

The case investigating and contact tracing process includes:

- **Identifying ill employees, or those who have had exposure to positive covid cases -**
  - ER receives information about ill or exposed employees through various resources including:
    - The employee self-reporting by phone or emails to ER or the Covid mailbox.
    - Department supervisor also contact the ERH&S team for guidance.
    - Once the employee has reported their condition, their assignment information, i.e. department, supervisors, and location are identified.
- **Interview Employee reporting illness or exposure –**
  - The ER H&S Team investigator interviews the employee for the following information:
    - Symptoms, condition and/or medical intervention, or testing
    - Timelines for active symptoms or testing results
    - Exposure factors in their own circle of friends, family or other contacts
    - Physical behaviors 48 hours prior to noticeable symptoms including:
      - Whether the employee reported to a county facility
      - Those with whom the employee had contact at the facility.
      - Duration and proximity of contact with others
      - Protections used, including distance and PPE's, during the contact
- **Post symptomatic/exposure guidance and work plan**
  - Based on the information gained during the interview, the investigator gives the employee specific guidance concerning:
    - Eligibility and restrictions required to return to the facilities
    - Timelines for quarantine or Isolation
    - Plan coordinated with the supervisor for work options/opportunities and eventual return to the workplace
    - Required work limitations or restrictions post quarantine/Isolation
    - Information regarding testing and other health resources, i.e. CDC, MDH, EAP
    - Information regarding special leave resources they may utilize if they cannot work remotely or become too ill to work.
  - Once the interview and guidance are given, the investigator verifies information with the supervisor, updates the supervisor on service limitations, and discusses additional assignment options for the employee.
  - The supervisor is also informed of any other employees who may be affected by the illness or exposure, the contact severity and pending quarantine of those employees
- **Contact Trace Tracking –**

When notifying individuals of occupational exposures, investigators adhere to data privacy practices.

  - Individual employees, identified through the interviewing process, who meet the MDH/CDC criteria for Close Contact are individually notified of their exposure.
  - As part of the notification employees are given information relating to:
    - The nature and level of exposure they may have experienced
    - Required work limitations or restrictions post exposure

- Requirement and timelines for quarantining, and
- Plan coordinated with the supervisor for their return to the workplace
- Any restrictions or guidance required for return - post quarantine
- Information regarding testing and other health resources, i.e. CDC, MDH, EAP
- Information regarding special leave resources they may utilize if they cannot work remotely or become too ill to work.

### **Supervisor and Department Follow-up**

- If during the investigation, it is discovered that the employee served clients or had close contact with members of the public as a part of their service, the department managers and supervisors are updated on the timeline of the possible contact and the severity of contact based on the employees report.  
Although Public Health has primary responsibility for trace tracking and contacts for the general public, contact for select clients may be more timely if the Department Directors and Mangers decide to contact the client as soon as they are identified by the employee.

### **Occupational Health - Wellness and Care Initiatives:**

#### **Employee Vaccination Clinic**

Vaccination clinics will adhere to MDH and CDC recommended safety protocols:

- Vaccinations will be by appointment and/or by event only
- Vaccinations will be given to Active employees only
- Masks will be worn by participants at all times (within the facility)

#### **Appointment Process**

- Appointments for the clinic are made using the Genie system.
- To accommodate for procedure and sanitation, immunization appointments will be conducted every 15 minutes (3 clinicians = 12 appt per hour)
- Information relating to the CDC health screening and the expectation the client will not attempt to make an appointment if they have had any signs or symptoms within 10 days of the appointment date.
- The employee is expected to cancel their appointment if they experience any covid-like symptoms on the day of the appointment.
- Location of clinic and entry door they will use when entering the facility.
- Only Employees with an appointment are allowed in the clinic area during clinic operations.

#### **Greeter**

- A greeter will be assigned to the LEC 1<sup>st</sup> floor to coordinate greeting, movement and sanitation of areas
- Employees will be greeted at the greeting station in the LEC 1<sup>st</sup> floor hallway.
- The greeter will:
  - Conduct a review of the [Visitor/Employee Health Screening Tool](#)
  - Take the participants temperature using an infrared instrument
- If the employee provides a positive response (yes) to any of the health questions, has a fever of 100.4F or greater, or is presenting obvious signs of illness, the employee will not be allowed into the clinic before an evaluation by a nurse.

- If the employee has no identifiable symptoms, they will be guided to the clinic, or allowed to wait in a waiting area.
- Once the appointment is complete, the employee will be asked to wait in a prearrange waiting area in which chairs are 6'+ feet away from one another.
- the greeter will be available to contact the nurse immediately if there are vaccine reactions.

***Safety, Sanitation and Hygiene***

- Clinic Doors will be clearly marked for entry and exit
- The patient flow will work in a way that moves individuals from the south side of the room to the North Exit and ensuring social distancing (6').
- During the visit, clinicians will wear appropriate PPE. Face masks, face shields, and gloves will be available. (gowns will also be provided for clinicians on request)
- Interior clinic areas will be sanitized with approved sanitization products by the clinic staff between each customer.
- When required, hallways and entryways will be sanitized by the clinic greeters/assistance.
- Assistance/Greeters will be supplied with gloves and approved chemicals and cleaning materials for this purpose.

***Communications***

- Signage will be posted advising clinic activity is by appointment only.
- The Employee Relations website may be updated to include clinic offerings and expectations.
- If clinic services are discontinued, employees will be updated via email

● **Function E: Benefits Management**

Protocols

- ER will continue to provide Benefits Management administration & consultation as the needs of service dictate.
- Insurance Committee and steering committee meetings will be held as needed and via WebEx and Teams.
- Required reporting (GASB, MCIT, vendor required, etc.) will continue via phone, email, and WebEx or Teams.

● **Function F: ER Administration**

Protocols

- ER administration will continue regarding policy & process administration & consultation as the needs of service dictate.
- ER initiatives and projects, , once delayed and placed on-hold, will be considered and moved forward based on ER and County priorities. Examples include employee pre work on the class study project, HRMS system enhancement (except operational items related to COVID-19), WF Analytics, and compensation reviews.

**Adherence to Governor's Executive Orders**

## Ensuring Sick Employees Stay Home/Identifying Sick Employees

Prior to leaving for work, employees are required to perform a self-assessment using the current [Visitor/Employee Health Screening Tool](#) provided in the Health and Safety section of the COVID-19 Site. If the employee provides a positive response (yes) to any of the health questions, the employee should remain at home and contact their supervisor, who will consult with the Occupational Health Nurse for recommendations and guidance.

Employees who present any of these symptoms while at work will immediately report their condition to the supervisor. If the employee is deemed *sick*, they will be removed from their worksite and sent home or isolated until they can leave work.

Employees who present these symptoms following a work shift (prior to reporting for another shift) will contact their supervisor. They will be directed to remain at home and the Occupational Health Nurse will provide guidance.

In accordance with CDC guidance, the workstation and equipment used by an employee with these COVID-19 like symptoms will be taken out of service and not used for at least 24 hours. At the end of that period, the area and equipment may be sanitized using routine cleaning procedures.

In any case, when the employees' worksite/station and equipment used cannot be taken out of service for the required 24 hours, the area and equipment must undergo a deep cleaning procedure, following CDC guidelines, prior to being used by other employees.

### Training/Communications:

This Operational Service Plan has been communicated to all departmental employees and necessary training is provided to all staff conducting services, including back-up functions. Additionally, all employees will receive ongoing safety and procedural updates as needed.

Managers and supervisors are responsible to monitor the implementation and effectiveness of this plan, and to make recommendations for improvement based on their observations, or the input and observations of department staff.

This plan has been posted on the County SCOOP site and is available to all employees.

### Enforcement:

Managers and employees are responsible to monitor and enforce safety processes. Coaching and corrections will take place when violations occur.

### Discontinuation of Services / Shut down:

If illness, contamination or other conditions reduce the minimum resources or employees required to provide services in a manner consistent with this Operational Service Plan, the service will be discontinued, and notices given to customers and staff

### Level of Staff Changes and Resource Needs

Describe staff changes based on your department's functioning under the "new normal" (i.e. plan for coverage; plan for rotation of staff; monitoring staffing models; resources needed – technology, supplies).

- **All Department Staff:**
  - ER staff have County laptops.

- ER will have minimal staff in the office each day due to the nature of the work. Staff is set-up on schedules.
  - ER staff is largely single-incumbent based in the functions. There is cross-training and knowledge throughout the office, but nobody fully knows another person's role. There are resources that can help guide others if/as needed: Galanter, Madden & Hansen (Labor), Neogov (Talent Mgmt), MN Occupational Health and MCIT (Occupational Health & Safety), Gallagher Benefit Services (Benefits), and AMC/David Drown & Associates, NACo, MICA (ER Administration).
  - The Deputy County Administrator or County Administrator will need to help direct the area in the event several staff are unable to perform their functions
  - Two of the five ER managers are part of the ICS and one staff member may be redeployed to an essential/critical service area.
- Technology Utilized: SCOOP, Infor, Neogov, MS Office Programs, including Access. We also have various connections and file transfers with several vendors largely related to benefits and payroll.

### Division Director Comments

*Payroll is another function that is intertwined with Employee Relations and reports through Accounting. Our two department collaborate on the delivery of this function. The Payroll Operations Plan was submitted previously by Accounting. Payroll staff follow ER Department protocols and scheduling as indicated herein.*

*The ER department is working diligently to balance:*

1. *Regular operations (all employees continue to be working so our ongoing ER obligations and responsibilities as an employer continue)*
2. *Reinventing business on the fly and managing our office functions remotely*
3. *Supporting the needs of employees amid this pandemic and amid changing terms and conditions of operations*
4. *Learning and implementing Federal and state mandates related to COVID-19*

### Strategic Branch Comments

*April 2020: Considerations for next steps:*

- *Understanding that there is tremendous demand on the ER staff right now, cross training for those single-incumbent positions may not be timely. If requested, the Strategy Team will put forward a request for volunteers based on the direction of the ER director.*
- *Also understanding that both EM staff are in the EOC full-time, are there options for developing recorded or on-line training for NIMS 100 and 700?*

### County Administrator Comments



County Administrator Signature \_\_\_\_\_ Lezlie Vermillion \_\_\_\_\_

**Operational Service Plan Updates**

Please include date the change goes into effect and reason for change.

Proposed changes 7/20/20

Minnesota statues (DOC) require First Aid, CPR and AED training and certification for all *New* Juvenile and adult correctional employees as well as annually for all current juvenile and adult correctional staff. Department of health mandates the way in which first aid, CPR and AED are trained, and require hands on skill testing.

POST board licensing systems require these same trainings for *New* and current deputies.

We are currently experiencing a back log in our training requirements for these personnel.

August 4, 2020

The annual employee Influenza vaccination clinic is an Employee Relations Occupational Health initiative that partners with Scott County Public Health to increase the health of our workforce. There are several reasons that offering the Flu vaccinations to our employees is important, but first and foremost, we believe the flu vaccination this year is crucial to building immunity, and ensuring our employees aren't hit with both Covid and the seasonal flu. Another important factor includes the financial loss that could be incurred if the vaccines, which are purchased earlier in the year, are not used before they expire at the end of the year.

December 9, 2020

Employee Contact tracing and case management has been added to this operational service plan at the request of the Strategy Team in an effort to allow others to better understand the process used by the Health and Safety team when investigating and managing employee Covid illness/Exposure cases.

January 2021

ER determined it was important to take the lead on vaccinating employees so our Public Health staff could launch vaccines with first responders and vaccinators.

June 2021

Updates to the ER OSP have been made to align with reopening expectations and changing mask, sanitation, hygiene and occupancy requirements of State and Federal oversight agencies.