TRIBAL RESPONSE PLAN COVID-19 STATE OF NORTH DAKOTA



APRIL 24, 2020

Prepared by North Dakota Indian Affairs and American Indian Public Health Resource Center Adopted from *Tribal Response Plan COVID-19 State of New Mexico* prepared by the New Mexico Indian Affairs Department



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This document was adapted and compiled by the North Dakota Indian Affairs Commission and the American Indian Public Health Resource Center to provide support and guidance to tribal governments for responding to COVID-19. Information within this document is not intended to be legal advice and will not impact services provided by the State of North Dakota. All recommendations within the response plan should be discussed with your professionals.

1. INTRODUCTION

Coronavirus disease 2019 (COVID-19) is a respiratory illness that can spread from person to person. The virus is very contagious and spreads from person to person. The first case of COVID-19 in the United States was reported on January 21, 2020. The first case of COVID-19 in North Dakota was reported on March 11, 2020. In addition to physical distancing, early identification and isolation of COVID 19 individuals are key measures to prevent further spread of the respiratory infection within the tribal community.

Never before has an illness traveled so quickly, so swiftly and sickened so many in such a short amount of time. It has created widespread fear, panic, and driven a stake into the heart and economics of countries, states and tribal communities. By all accounts, no group of people or community will go untouched by the Coronavirus, rapid preparation and prevention measures will help decrease the burden of COVID-19. The rapid spread of COVID-19 has infected cities and towns across our state and now has reached the boundaries of tribal lands. In some cases, it has already made its way into reservation households and devastated families.

The virus is thought to spread mainly between people who are in close contact with one another (within about 6 feet) through respiratory droplets produced when an infected person coughs or sneezes. It also may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or eyes. Symptoms of COVID-19 include fever, cough, shortness of breath, loss of smell or taste.

There is currently no medication or vaccine to protect against COVID-19. The best way to protect yourself from getting COVID-19 or transmitting it to others is to practice social distancing and stay at home. The virus that causes COVID-19 is very contagious. A person may not have symptoms or may not know they have the virus (a carrier) and can pass the virus unknowingly to anyone. Assume that everyone has the coronavirus; what is known to decrease the rapid spread is to practice good hygiene, stay at home and social distancing

This comprehensive document was prepared by the North Dakota Indian Affairs Commission and the American Indian Public Health Resource Center, and adapted from the New Mexico Indian Affairs Department's *Tribal Response Plan COVID-19 State of New Mexico*, with input from professionals and subject matter experts. It was designed to assist tribal governments by providing detailed information on such matters as testing, screening, accessing healthcare, restricting access to tribal lands in addition to working with state departments and agencies. It outlines steps, strategies and procedures to prevent the further spread of the virus or stem the potential surge of positive cases.

These are unprecedented times, urgent circumstances that require quick responses to each unique situation that may occur or develop. This document will hopefully offer guidance and clarity in understanding what steps and measures can be instituted to address and minimize the spread of COVID- 19 with available state, local, tribal and non-governmental organization (NGO) resources.

The information contained here is not legal or medical advice.

STAY HOME AND ENCOURAGE OTHERS TO DO THE SAME.

For COVID-19 questions, call ND Department of Health at: 1-866-207-2880 Daily 7AM-8PM.

2. IMMEDIATE STEPS TO TAKE

A. Activate Incident Command Center

- Confirm if the Tribe has an incident command center activated.
- If the Tribe does not have an incident command center established, the Tribe can make a request to the North Dakota Department of Health- Emergency Preparedness and Response Section at 701.328.2388, and, if requested, take on the incident command for the Tribe.
- Federal Emergency Management Agency (FEMA)¹ can also assist tribes with establishing incident command centers and creating plans
- This activation will provide the Tribe with personnel and assistance with identifying alternative care location sites within the community and prepare for outfitting a site.
- Tribes should develop an Incident or Emergency Management Plan.
- Identify the names and contact information for key individuals who will be primary points of contact for the crisis response.
- Ensure key individuals participate regularly in scheduled calls with state and federal agencies and disseminate information to internal tribal leads through the incident command structure.
- Identify first responders for the Tribe (e.g. CHRs, law enforcement, and paramedic/EMT), and establish protocol and guidance.
- Coordinate with North Dakota Department of Health and Indian Health Services to set up mobile/emergent test sites at the Tribe, and offer test processing free of charge
- Inventory PPE and other equipment. Order PPE in order to meet the needs of the Tribe and provide burn rate² reports to ensure the Tribe receives PPE³. PPE can be ordered from the North Dakota Department of Health Emergency Preparedness and Response Section at <u>http://hanassets.nd.gov/</u>
- Emergency law and order plans should be discussed with State/Federal/Tribal leaders in the event of social breakdown.
- Educate State and FEMA of unique structure of Tribes.

B. Coordinate with IHS and DOH

- Determine what role IHS, DOH and other federal and state agencies will play in addressing response to COVID-19 in the Tribe.
- Identify where tribal or community members in need of medical treatment would be transported for hospital care.
- Establish clinic as an essential place for drive thru testing or other triage needs;
- Clinic doors locked; signage with number to call for phone triage
- Appointment based testing to batch individuals arriving for drive up testing

¹ FEMA Tribal Relations Specialists, Office of External Affairs, Region VIII, Carol Garcia, (303) 202-8959

² Burn rate - the rate at which PPEs are being used.

³ PPE - stands for personal protective equipment such as masks, gloves, gowns, etc.

- Test kits and PPE available
- Establish protocols for screening / triage procedures.
- Identify alternate modes of primary care needs such as telemedicine or doctor/nurse calls to regular patients who remain at home in self-isolation.
- IHS/PHN to staff
- Commissioned Corp Officers
- Follow CDC guidelines for Health Care Worker's exposed to COVID cases⁴
- Provide patient advocacy to ensure tribal members are provided best possible care regardless of health insurance and are not left with medical bills.
- Call North Dakota Department of Health- Emergency Preparedness and Response Section at 701.328.2388 to assist with transportation needs

C. <u>Develop Isolation Plans and Alternate Care Sites⁵</u>:

Once COVID-19 has been introduced into a congregated setting or densely populated area, it has the potential to spread rapidly and widely. It is critical that proactive steps are taken to identify and implement appropriate infection prevention and control measure. One way to do this is to identify alternate care sites and isolate individuals who do not require the level of care available at an acute care hospital.

1. Identify isolation sites

a. Inside tribal community

- Temporary housing with own room and bathroom; no medical attention required.
- Consider working with the tribe's housing authority to conduct an inventory of available tribal housing or other available structures. There's significant funding for Indian housing in the 3rd funding package.
- Tribal facility such as a wellness or community center, school gym, casino showroom that can be retrofitted to serve as an isolation site for COVID 19 individuals who have only mild symptoms

b Identify isolation sites outside of tribal community

- Identify hotels or other alternate care sites that are offering space for PUI's (persons under investigation) and positive COVID-19 tribal members with mild illness.
- 2. Isolation Sites plan Considerations (see CDC guidance for further details)
 - Layout
 - Air
 - Medication
 - Food
 - Housekeeping
 - Staffing
 - Supplies
 - Funding

4 https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html

5 <u>https://www.cdc.gov/coronavirus/2019-ncov/hcp/alternative-care-sites.html</u>

3. Identify need for isolation for each COVID + individual and/or PUI

- a. COVID 19 case identified
 - Who still needs Transmission-Based Precautions,
 - Cannot remain in or return to their place of residence for social reasons (e.g., high risk family members or elderly relatives in the home, unable to self-isolate given multiple family members in single dwelling)
- b. Person Under Investigation (PUI)
 - Who may have high risk individuals at home without the space to self-isolate within household pending test results

4. Determine level of care

a. Isolation site (dedicated hotel or dormitory)

Temporary housing for a cohort of patients with COVID-19 who do not need medical attention but who cannot stay at home (e.g., they have high-risk family members).

- Temporary housing for PUI's
- Limited monitoring and could care for themselves (e.g., do not need assistance with medications or activities of daily living (ADLs)).
- Limited medical staff on hand.
- Own rooms with their own bathroom
- Example: Hotels designated for temporary housing
- b. Low acuity alternate care site (e.g., school gymnasium)
 - Individuals unable to self-isolate at home because of space constraints (multiple families living in one dwelling, one bathroom)
 - House residents with COVID-19 who need to be moved from tribal communities that are experiencing COVID-19 outbreaks
 - Would often require some level of assistance (e.g., help with ADLs or medications)
 - Higher level of monitoring than required for patients in isolation sites
 - Open layout to allow limited numbers of healthcare personnel to more easily monitor their status

5. Call North Dakota Department of Health- Emergency Preparedness and Response Section at 701.328.2388, to help locate facility and to arrange for transportation

D. STRATEGIES FOR PREVENTING THE SPREAD OF COVID-19 IN TRIBAL COMMUNITIES

A. Community Mitigation Efforts

These actions should be taken in order to mitigate the spread of the COVID-19 in your community:

- Tribal government can issue a Public Health Emergency Declaration that provides guidance to community members on community mitigation efforts
- Tribal government can enact and mandate a stay-at-home order for community residents
- Limit entry/exit points onto the reservation and set up main checkpoints to monitor and control access into the community and restrict unnecessary travel in and out of tribal community boundaries
- With evidence of community spread of COVID 19, consider complete containment
- North Dakota Department of Health- Emergency Preparedness and Response Section at

701.328.2388 is available to assist with logistical support (e.g., deliveries of food, water) for tribal communities

- If Tribal members must leave their home, encourage them to wear a face mask (surgical or homemade) or scarf to mitigate spread of those who are asymptomatic but may unknowingly have COVID-19
- Tribal government can invoke a curfew for tribal community members living within the boundaries of the reservation
- Tribal government can suspend all public mass gatherings of five (5) or more, all other gatherings be at the discretion of Tribal leadership and may include consequences for violation.
- Provide messages, notices and information to the community on the Tribe's website(s), social media platforms, by mail and even by phone, if needed and available.
- Encourage tribal members to make a household plan and put it into action
 - Know signs and symptoms of the virus and what to do if symptomatic: initiate tribal protocol, call clinic or state number, stay home, no visitors.
 - Have at least a one-month supply of prescription medications.

1. Vulnerable Populations

According to the CDC, individuals with certain underlying health concerns are at higher risk of contracting and/or developing a severe illness from the COVID-19. The following individuals are at a higher risk:

- People aged 65 years or older (elders)
- People who live in a nursing home or long term care facility
- People with chronic lung disease with complications
- People who have heart disease with complications
- People who are immunocompromised including those who have undergone cancer treatment
- People of any age with certain underlying medical conditions, particularly if not well controlled, such as those with diabetes, renal failure, liver disease, auto-immune conditions, and obesity might also be at risk

Tribes should work with their health and housing staff to develop plans to protect vulnerable populations, including exploring alternative housing solutions and isolation facilities.

2. Healthcare Providers, First Responders, and Other Essential Staff

Tribes should provide guidance on procedures for protecting employees. Tribes should complete daily PPE burn reports in order to track supply and for ordering PPE shipments. Information should be as detailed as possible so that tribes receive supplies that match the need.

Tribes should keep track of any healthcare personnel, first responders, or other essential staff that contract COVID-19. Tribes should report these numbers to the county, state, and Indian Health Service.

3. Public Education Component

Tribes should develop a public health education component with a communication / dissemination plan for communities. Utilizing local radio stations to provide updates and information. Fliers educating on COVID-19 symptoms (i.e. dry cough, fatigue, high temperatures, chills, difficulty breathing) should be circulated throughout the community by mail or social media. The flyers should also provide information on how to stay healthy (washing hands; not touching face, nose, mouth; wiping down public surfaces, door knobs/handles; practicing social distancing; create an easily remembered tag line: Stay Home - Stay Safe - Save Lives.)

B. Cleaning and Sanitation

HOW TO CLEAN AND DISINFECT⁶

Wear disposable gloves to clean and disinfect. Do not reuse gloves.

1. Clean

• **Clean surfaces using soap and water.** Practice routine cleaning of frequently touched surfaces, including: tables, doorknobs, light switches, countertops, handles, desks, phones,

laptops/computers/tablets, keyboards, remote controls, game controllers and consoles, toilets, faucets, sinks, etc.

2. Disinfect

• Clean the area or item with soap and water or another detergent if it is dirty. Then, use a household disinfectant.

Recommend use of an EPA-registered household disinfectant.

Follow the instructions on the label to ensure safe and effective use of the product. Many products recommend:

- Keeping surface wet for a period of time (see product label)
- Precautions such as wearing gloves and making sure you have good ventilation during use of the product.
- Do not reuse gloves.

• **Diluted household bleach solutions may also be used** if appropriate for the surface. Check to ensure the product is not past its expiration date. Unexpired household bleach will be effective against coronaviruses when properly diluted.

• Follow manufacturer's instructions for application and proper ventilation. Never mix household bleach with ammonia or any other cleanser. Leave solution on the surface for at least 1 minute To make a bleach solution, mix: 5 tablespoons (1/3rd cup) bleach per gallon of water OR 4 teaspoons bleach per quart of water

• Alcohol solutions with at least 70% alcohol.

3. Soft surfaces

For soft surfaces such as carpeted floor, rugs, and drapes

- Clean the surface using soap and water or with cleaners appropriate for use on these surfaces.
- Launder items (if possible) according to the manufacturer's instructions. Use the warmest appropriate water setting and dry items completely.
- OR
- Disinfect with an EPA-registered household disinfectant.

4. Electronics

For electronics, such as tablets, touch screens, keyboards, and remote controls.

- Consider putting a wipeable cover on electronics
- Follow manufacturer's instruction for cleaning and disinfecting
 - If no guidance, use alcohol-based wipes or sprays containing at least 70% alcohol. Dry surface thoroughly.

6 https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html

5. Laundry

For clothing, towels, linens and other items

- Launder items according to the manufacturer's instructions.
 - Use the warmest appropriate water setting and dry items completely.
- Wear disposable gloves when handling dirty laundry from a person who is sick. **Do not reuse gloves**.
- Dirty laundry from a person who is sick can be washed with other people's items.
- Do not shake dirty laundry.
- Clean and disinfect clothes hampers according to guidance above for surfaces.
- Remove gloves, and wash hands right away.

6. Clean hands often

• Wash your hands often with soap and water for 20 seconds.

- Always wash immediately after removing gloves and after contact with a person who is sick. • Hand sanitizer: If soap and water are not readily available and hands are not visibly dirty, use a hand sanitizer that contains at least 60% alcohol. However, if hands are visibly dirty, always wash hands with soap and water.

• Additional key times to clean hands include:

- After blowing one's nose, coughing, or sneezing
- After using the restroom
- Before eating or preparing food
- After contact with animals or pets
- Before and after providing routine care for another person who needs assistance (e.g. a child)
- 7. Avoid touching your eyes, nose, and mouth with unwashed hands.



3. TESTING

A. Early Identification of COVID-19 to Contain Spread

- Tribal Leadership may request testing from the North Dakota Department of Health.
- Provide clear guidance on where community members can access testing specific to your community: IHS, tribal health clinic
- North Dakota Department of Health may assist with setting up test sites. Contact Emergency Preparedness and Response Section at 701.328.2388.
- State may be able to provide additional COVID 19 testing; Contact Emergency Preparedness and Response Section at 701.328.2388 to request test kits.
 - Who should receive COVID-19 testing?
 - Individuals who are symptomatic with cough, fever and shortness of breath
 - Asymptomatic contacts of confirmed COVID-19 cases
 - Prioritize testing for Health Care Workers and Tribal Officials
 - Ensure that tribal leadership will be timely notified of positive COVID-19 cases.
 - Provide authorization to appropriate agency to conduct a contact tracing investigation into positive COVID-19 cases in order to contain the spread and trace other people that may have been exposed.)

B. How the State Notifies Tribes of a Positive Test

Tribes are Public Health Authorities under. As Public Health Authorities, tribes can get daily testing results from the North Dakota Department of Health. North Dakota Department of Health receives all positive laboratory results from everywhere in the state. If there is a positive COVID-19 case living on

tribal lands (regardless of whether the individual is a tribal member or not) their Tribal leadership will be notified by the healthcare provider.

Unless the person was tested at an IHS facility, North Dakota Department of Health usually has no indication on the laboratory test result that the person is, or is not, affiliated with a tribe or is American Indian. For this reason, it is important for IHS to contact the tribe once the health care provider receives the positive test result.

1. Government to Government Information sharing

When a positive case is identified North Dakota Department of Health notifies the healthcare provider, including IHS/638 clinics and NEC, who will notify the patient of the positive result.

2. Patient is Quarantined

Patient is quarantined in home or in designated isolation space on tribal land. Identify food/hygiene/medical supply delivery to patient.

3. G2G Support

North Dakota Department of Health contacts the tribal leader to ask how they would like to proceed with the investigation. North Dakota Department of Health explains how they can support the tribe with case investigation:

- Contact tracing
- Coordination with Indian Health Service (IHS)
- Site testing
- Public health preventive practices for the community (social distancing, etc.).

Based on information provided, the tribal leader is asked if North Dakota Department of Health is authorized to proceed with case investigation and/or other activities. North Dakota Department of Health and the North Dakota Indian Affairs Commission will continue to provide updated information assets (for social media, email addresses, public flyers, etc.) to be shared widely.



PBS.org

4. ISOLATION OF INDIVIDUALS WITH CONFIRMED CASES

ISOLATE PEOPLE WITH CONFIRMED COVID-19 POSITIVE TEST

A. Isolation Site - Person with Confirmed Positive COVID-19 Test Results

- Work with the Tribe to identify isolation sites on Tribal Nation.
 - Facilities may need to be retrofitted and equipped
 - Tribe will need additional staff, supplies and operational protocols.
- Work with Tribe to identify isolation sites off Tribal land.
 - Any hotels that are housing people that have tested positive COVID-19 test
- Contact Emergency Preparedness and Response Section at 701.328.2388.
 for assistance with locating hotel inventory to quarantine/isolate tribal members in coordination with the Tribe.

- May quarantine at home if determined to have adequate accommodations (single use bedroom and bathroom)
- Tribes should have licensure agreements in place with BIE schools for use of the school facilities to serve as viable alternative location for isolation purposes.
- Tribes should retrofit existing medical facility buildings to care for patients who test positive for COVID-19 for isolation.

B. Taking Care of Someone Who is Sick

1. Monitoring of Positive-Tested Person

- Work with tribal staff to do health checks over the phone, FaceTime or internet if available.
- Establish daily check-ins and monitoring.
- Provide people with instructions on how to monitor symptoms, keep others from getting sick, and what to do if they get worse.
- Provide essential supplies to households with confirmed case: food, masks, cleaning supplies, hygiene supplies, thermometer, alcohol swabs, and activities for kids.
- Reinforce messages of the importance to self-isolate / stay-at-home; not allow anyone into the household; no visiting; encourage people to contact the tribe for needs.
- Provide guidance on when to discontinue home isolation and sanitation practices.

2. At-Home Care of Positive-Tested Person

Bedroom and Bathroom

- Keep a separate bedroom and bathroom for a person who is sick (if possible)
- The person who is sick should stay separated from other people in the home (as much as possible).
- If you have a separate bedroom and bathroom:
 - Only clean the area around the person who is sick when needed, such as when the area is soiled. This will help limit your contact with the person who is sick
 - Caregivers can provide personal cleaning supplies to the person who is sick (if appropriate).
 - Supplies should include tissues, paper towels, cleaners, and disinfectants. If they feel up to it, the person who is sick can clean their own space.

• If shared bathroom: The person who is sick should clean and disinfect after each use. If this is not possible, the caregiver should wait as long as possible before cleaning and disinfecting.

Food

- Stay separated: The person who is sick should eat (or be fed) in their room if possible.
- Wash dishes and utensils using gloves and hot water:
 - Handle any used dishes, cups/glasses, or silverware with gloves.
 - Wash them with soap and hot water or in a dishwasher.
 - Clean hands after taking off gloves or handling used items. Do not reuse gloves.

Trash

- Dedicated, lined trash can:
 - If possible, dedicate a lined trash can for the person who is sick.
 - Use gloves when removing garbage bags, and handling and disposing of trash.
 - Wash hands afterwards.



DailyKos

5. PRECAUTIONS FOR HANDLING A DECEASED POSITIVE-TESTED COVID-19 PERSON

During this pandemic, the cultural sensitivity of death is acknowledged. It is very important to understand at this time; changes are going to have to be made in caring for the bodies of the deceased because the virus can be transmitted through the deceased body. Proper PPE should be worn at all times in handling and transporting the body. Treat all deceased bodies during this time as if they are a positive-tested person.

A. Notification Procedure

If someone passes at home, ensure the official who removes the body also has on hand a body bag to minimize contamination and the potential spread of the virus. The home should be properly disinfected.

If there is a passing in your community, immediately call the North Dakota Department of Health at (71)328-2372.

B. Tribal Guidance on Funeral Gatherings

The North Dakota Indian Affairs Commission recognizes that every Tribe in North Dakota has its own tribal customs and cultural rituals and ceremonies when someone from the community has died. Some customs include frequent home visits and large community feeds. They can be unsafe for the deceased's family, mourners, and tribal members. It is recommended that Tribes follow their Tribal Chairperson's Order on community gatherings.

The North Dakota Indian Affairs Commission respects tribal sovereignty and supports the authority of every Tribe to issue its own Stay-At-Home Order, restrictions on community gatherings – including funerals – and additional policies and procedures to help prevent the transmission of COVID-19. In particular, Tribes have the authority to place certain restrictions and limitations concerning funeral gatherings while honoring cultural ways and customs.

Bringing community members together to pay their last respects – whether the person died from COVID-19 or some other cause – creates real possibilities for the virus to spread by those who may be asymptomatic or who may be recovering from COVID-19. To avoid illness and possible transmission of the virus especially among the youth, elders and family members, it's recommended that Tribes emphasize the importance of physical distancing and urge tribal members to remain at home during a time of a loss and community mourning.

The Centers for Disease Control and Prevention (CDC) states there is no known risk being in the same room at a funeral or at a wake for someone who has died from COVID-19. Although there is no known risk of contracting the virus directly from those who have passed, family members who are caring for deceased loved ones should wear disposable gloves, masks and (if available) eye shields, while in direct contact with the deceased. It also is very important to frequently wash one's hands after being in physical contact with the deceased and to clean any surfaces or objects used during the preparation or ceremonies.

For Tribal members who contract and die from COVID-19, North Dakota Indian Affairs Commission recommends that Tribes follow the CDC guidance on transportation, handling and burial of the deceased, including the use of appropriate PPE and products to disinfect contaminated surfaces. Resources:

- American Indian Public Health Resource Center- *Mourning in the Midst of the COVID-*19/coronavirus Pandemic (Resources Section)
- National Funeral Directors Association <u>https://www.nfda.org/covid-19</u>
- President's Coronavirus Guidelines for America <u>https://www.whitehouse.gov/wp-</u> content/uploads/2020/03/03.16.20 coronavirus-guidance 8.5x11 315PM.pdf
- CDC Guidance on Social Distancing <u>https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/social-distancing.html</u>



6. POST-COVID CLEAN UP AND SANITATION

Timing and location of cleaning and disinfection of surfaces

- At a school, daycare center, office, or other facility that *does not house people overnight*:
 - Close off areas visited by the ill persons.
 - Open outside doors and windows and use ventilating fans to increase air circulation in the area.
 - Wait 24 hours or as long as practical before beginning cleaning and disinfecting.
 - Clean and disinfect all areas such as offices, bathrooms, common areas, shared electronic equipment like tablets, touch screens, keyboards, remote controls, and ATM machines used by the ill persons, focusing especially on frequently touched surfaces.
- At a facility that *does house people overnight:*
 - Follow Interim Guidance for US Institutions of Higher Education on working with state and local health officials to isolate ill persons and provide temporary housing as needed.
 - Close off areas visited by the ill persons.
 - Open outside doors and windows and use ventilating fans to increase air circulation in the area.
 - Wait 24 hours or as long as practical before beginning cleaning and disinfection.

- In areas where ill persons are being housed in isolation, follow Interim Guidance for Environmental Cleaning and Disinfection for U.S. Households with Suspected or Confirmed Coronavirus Disease 2019.
 - This includes focusing on cleaning and disinfecting common areas where staff/others providing services may come into contact with ill persons but reducing cleaning and disinfection of bedrooms/bathrooms used by ill persons to as-needed.
- In areas where ill persons have visited or used, continue routine cleaning and disinfection as in this guidance.
- If it has been more than 7 days since the person with suspected/confirmed COVID-19 visited or used the facility, additional cleaning and disinfecting is not necessary.



7. KEY CONTACTS

State Government Contact Information

ND Indian Affairs Commission	
	600 East Boulevard Avenue
	Bismarck, ND 58505-0100
	Phone: (701) 328-2428
	Email: <u>sjdavis@nd.gov</u>
	Website: https://indianaffairs.nd.gov/
	ND Response: <u>https://ndresponse.gov/</u>
Scott Davis	
ND Indian Affairs Commissioner	
Brad Hawk	600 East Boulevard Avenue
ND Indian Affairs	Bismarck, ND 58505-0100
Indian Health Systems Administrator	Phone: (701) 328-2448
	bhawk@nd.gov

Kyle Iron Lightning ND Indian Affairs Judicial Systems Administrator	600 East Boulevard Avenue Bismarck, ND 58505-0100 Phone: (701) 328-2406 <u>kironlightning@nd.gov</u>
Marietta Kemmet ND Indian Affairs Executive Assistant	600 East Boulevard Avenue Bismarck, ND 58505-0100 Phone: (701) 328-2428 marikemmet@nd.gov
ND Department of Health	
Mylynn Tufte State Health Officer WIC, COVID-19 Testing, Reporting and Response, Emergency Preparedness	600 East Boulevard Avenue Bismarck, ND 58505-0100 Phone: (701)328-2372 <u>mylynntufte@nd.gov</u> Website: <u>https://www.health.nd.gov/diseases- conditions/coronavirus</u> ND Response: <u>https://ndresponse.gov/</u>
Tracy Miller State Epidemiologist	600 East Boulevard Avenue Bismarck, ND 58505-0100
	Phone: 701.328.2392 tkmiller@nd.gov
Kirby Kruger ND Department of Health Medical Services Section Chief	2635 E. Main Avenue, PO Box 5520 Bismarck, N.D. 58506-5520 Phone: (701) 328-2378 <u>kkruger@nd.gov</u> ND Response: <u>https://ndresponse.gov/</u>
Tim Wiedrich ND Department of Health Emergency Preparedness and Response Section	1720 Sykes Drive Bismarck, ND 58504 Phone: (701) 328-2270 <u>twiedric@nd.gov</u> ND Response: https://ndresponse.gov/
Job Service North Dakota	
Michelle Commer	600 East Boulevard Avenue Bismarck, ND 58505-0100 Phone: (701) 328-5300 Email: <u>mkommer@nd.gov</u> Website: <u>https://www.jobsnd.com/</u>
ND Department of Commerace Commissioner	ND Response: <u>https://ndresponse.gov/</u>

Dendomia Franciscus Unomoloumont	
Pandemic Emergency Unemployment	
Compensation and Pandemic Unemployment	
Assistance	
Department of Public Instruction	
	600 East Boulevard Avenue, Dept 201
	Bismarck, ND 58505-0440
	Phone: (701) 328-3264
	Email: <u>kbaesler@nd.gov</u>
34 - 00 - 00	Website:
Kristen Baesler	https://www.nd.gov/dpi/parentscommunity/nddpi-
State Superintendent	updates-and-guidance-covid-19
NDDPI Updates and Guidance on COVID-19: child	ND Response: <u>https://ndresponse.gov/</u>
nutrition, distance learning, CARE Act funding,	
school guidance, special education, school board	
guidance	
North Dakota Department of Human Services	
	600 East Boulevard Avenue
	Bismarck, ND 58505-0100
	Phone:
	Email: cjones@nd.gov
	Website: https://www.nd.gov/dhs/info/covid-
	<u>19/index.html</u>
Chris Jones	ND Response: <u>https://ndresponse.gov/</u>
Executive Director	
Office of the Governor	
	600 East Boulevard Avenue
	Bismarck, ND 58505-0100
	Phone: (701)328-2281
	Email: <u>rhasse@nd.gov</u>
	Website: https://ndresponse.gov/
Reice Haase	
Governor's Office, Senior Policy Advisor	
NDSU American Indian Public Health Resource Center	
	American Indian Public Health Resource Center
	NDSU Dept. 2662
	PO Box 6050
	Fargo, ND 58108-6050
ND Indian Business Alliance	Fargo, ND 58108-6050
ND Indian Business Alliance Al Nygard	North Dakota Indian Business Alliance (NDIBA)

Bismarck, North Dakota 58504-7596
www.ndiba.com

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Representative Don Vigesaa	P.O. Box 763 Cooperstown, ND 58425-0763 Home Telephone: (701)797-2448 Email: <u>dwvigesaa@nd.gov</u>
Representative Bon vigesda	

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957	Belcourt, ND 58316-3877
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	Office Telephone: (701)477-8985
	Cellphone: (701)278-0632
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	Home Telephone: (701)656-3427
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House Majority Leader	
Senate Leadership	
Senator Joan Heckaman Senate Minority Leader	322 Second Avenue North New Rockford, ND 58356-1712 Home Telephone: (701) 947-2106 Cellphone: (701)302-0355 Email: <u>jheckaman@nd.gov</u>
Senator Rich Wardner Senate Majority Leader	1042 12th Avenue West Dickinson, ND 58601-3654 Home Telephone: (701) 483-6918 Office Telephone: (701)483-6918 Cellphone: (701)590-1178 Email: <u>rwardner@nd.gov</u>

North Dakota Congressional Delegation Contact Information

Senator John Hoeven



338 Russell Senate Office Building Washington, DC 20510 Phone: (202) 224-2551 Email: <u>https://www.hoeven.senate.gov/contact/email-the-senator</u>

	400 Russell Senate Office Building Washington, DC 20510 Phone: (202)224-2043 Email: <u>https://www.cramer.senate.gov/contact_kevin</u>
Senator Kevin Cramer	
	1004 Longworth HOB
	Washington, DC 20515
	Phone: (202) 225-2611
	Email: https://armstrong.house.gov/zip-code-
	lookup?form=/contact/email-me
Representative Kelly Armstrong	

Regional and Federal Program Contact Information

Great Plains	
Great Plains Tribal	
Chairman's	
Health Board	
	2611 Elderberry Blvd
00	Rapid City, SD 57703
Jew Contraction	Toll Free: 1.800.745.3466
	Email: <u>https://gptchb.org/contact-us/</u>
	Website: https://gptec.gptchb.org/covid-19/
Jerilyn Church	
Chief Executive	
Officer	COVID-19 materials available for download and printing, COVID-19
Unicer	
Great Plains	
Tribal	
Epidemiology	
Center	
PJ Beaudry	2611 Elderberry Blvd
PJ Beaudry Director	2611 Elderberry Blvd Rapid City, SD 57703
PJ Beaudry Director	Rapid City, SD 57703

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	Up-to-date information and resources for individuals, families, communities,
	healthcare, and businesses preparing for and responding to COVID-19 in the Great
	Plains Area.
Indian Health	
Services- Great	
Plains Regional	
Office	
	115 4th Avenue SE, Room 309
in an	Aberdeen, SD 57401
	Phone: (605) 226-7581
	Email: https://www.ihs.gov/greatplains/contactus/
	Website: https://www.ihs.gov/coronavirus/
James Driving	website. <u>mtps://www.ms.gov/coronavitas/</u>
Hawk	
Acting Great	
Plains Area	
Director	
HUD	
Randy Akers	Phone: 1-800-410-8808
Administrator,	Email: <u>Randall.R.Akers@hud</u> .
Northern Plains	Website:
Office of Native	https://www.hud.gov/program_offices/public_indian_housing/ih/Covid_Recovery
American	
Programs	
1 lograms	
USDA	
	Federal Building, Room 208
	Post Office Box 1737
1250	220 East Rosser
	Bismarck, ND 58502-1737
15 V	Phone: (701) 530-2037
	Email: info@nd.usda.gov
Claire Carlson	Website: https://www.rd.usda.gov/coronavirus
State Director	
USDA Rural	
Development	
Loan assistance	
FEMA	
Carol Garcia	Denver Federal Center, Building 710
Tribal Relations	Box 25267
Specialist	Denver, CO 80225
	Phone: (720) 415-4816
	Email: carol.garcia.fema.dhs.gov
	Website: https://www.fema.gov/news-release/2020/03/23/coronavirus-covid-19-
	pandemic-public-assistance-simplified-application

	FEMA may provide funding to eligible applicants for costs related to emergency protective measures conducted as a result of the COVID-19 pandemic. Emergency protective measures are activities conducted to address immediate threats to life, public health, and safety.
Bureau of	
Indian	
Education	
Tony Dearman	Department of the Interior, Main Building
Director	1849 C Street, NW
	MS-3609-MIB
	Washington, DC 20240
	Phone: (202) 208-6123
	Website: https://www.bia.gov/covid-19

8. RESOURCES

HIPPA Compliance and COVID-19

• Information about HIPAA Privacy and COVID-19 is available at https://www.hhs.gov/sites/default/files/february-2020-hipaa-and-novel-coronavirus.pdf.

• Information about disclosures of PHI to law enforcement officials is available in OCR's HIPAA Guide for Law Enforcement at https://www.hhs.gov/hipaa/for-professionals/faq/disclosures-for-law-enforcement-purposes/index.html

• Information about uses and disclosures of PHI for public health is available at https://www.hhs.gov/hipaa/for-professionals/special-topics/public-health/index.html

NDSU AMERICAN INDIAN PUBLIC HEALTH RESOURCE CENTER

Mourning In the Midst of the COVID-19/coronavirus Pandemic

While each tribal nation has unique traditional and cultural practices regarding death, burial and mourning, they all currently face the challenge of honoring traditional lifeways and protecting each other from the spread of the COVID-19/coronavirus. Large gatherings, such as wakes, visitations and funerals offer the perfect conditions for wide scale spread of the virus.

The following are precautions and suggestions to consider regarding the mourning of deceased loved ones and protecting living family, friends and community members.

Wakes, Visitations and Funerals COVID-19/coronavirus Protocols

- Provide each attendee with a mask and gloves to be worn throughout the event
- Provide hand sanitizer and encourage attendees to use it upon entering and leaving the building and signing guest books
- Assure restrooms have soap and paper towels, washing your hands with soap offers the best
- removal of the COVID-19/coronavirus from hands
- Limit one visitor at a time in the room for viewings
- Limit funeral attendance to 10 or less people
- Hold immediate family funerals and postpone memorial services and gatherings until after the COVID-19/coronavirus Pandemic has ended
- Limit grave site attendance to spiritual leaders, immediate family and pall bearers
- Practice social distancing of 6 feet from person to person in churches, community centers and at grave sites, avoid close personal contact (example hugging or kissing)
- If tribal protocol does not prohibit photography/filming at funerals, live stream funerals to
- family members and friends via FaceTime, Zoom or another streaming service
- Encourage family and friends not to travel from out of town to attend
- Encourage children under the age of 12 and elders over the age of 55, and anyone who is sick or has a compromised immune system from illness, chemotherapy treatment, dialysis, etc. not to attend for their protection
- For the safety of the community, postpone funeral meals and gatherings until AFTER the social
- distancing guidelines have been lifted
- If meals and/or gatherings are required by custom
 - Limit attendance to family and cultural leaders
 - o Assemble guest seating in accordance with social distancing guidelines spaced 6 feet apart
 - Wash hands with soap and water for 20 seconds prior to preparing and serving meals
 - Prepare and serve meals wearing masks and gloves
 - Use disposable plates, cups, silverware and napkins OR wash dishes, silverware and cups in a dishwasher, if available
 - Package and send food to go as an alternative to sit down meals

American Indian Public Health Resource Center NDSU Dept. 2662 PO Box 6050 Fargo, ND 58108T60508701.231.6269 Ndsu.edu/centers/American_indian_health/

3/30/2020