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## RETURN TO WORK GUIDELINES

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*Naanan'i'vaqw piw sumitumàltawisa*



OCTOBER 6, 2020  
OCTOBER 1, 2021 (AMENDED)  
APRIL 4, 2022 (AMENDED)



## *A Message from Hopi Tribal Leadership*

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The Hopi Tribe, through its Executive Leadership and in partnership with Hopi Tribal Department Directors, has had an opportunity to review federal guidelines and recommendations from the Centers for Disease Control and Prevention to development guidelines for the purpose of achieving Return to Work preparedness.

Although the process of returning to work is likely to come with much fear and trepidation considering the dangers presented by the presence of COVID-19 within the Hopi community, the safety of our constituents, visitors, and staff has and will continue to be at the forefront of all our efforts, decisions, and actions as we resume the general business and operations of the Hopi Tribal Government.

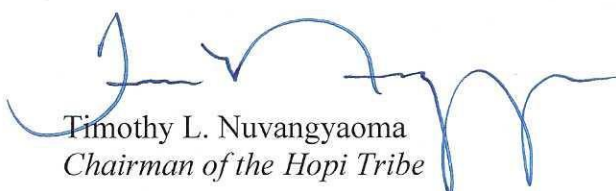
As circumstances surrounding the COVID-19 pandemic continue to change, a flexible phased Reopening Plan for a new operational norm is necessary. To that end, the following was compiled as a guiding document to aid in understanding the impact of COVID-19 in our workplaces, standardizing hygiene practices and reinforcing the shared responsibility that each of us have for the collective health and safety of the Hopi Nation.

When the Hopi Tribal Government releases its official statement, announcing the Return to Work Guidelines, this process will unfold in three (3) phases. Throughout this transition there will continue to be dialogue and pragmatic adjustments to address the health and safety concerns of employees, and the public.

Hopi Tribal departments, employers, employees, businesses, and schools are encouraged to review the links, resources and materials appended to the end of this document to use as guidance in the preparation of workspaces and frequently visited places under the restrictions of the COVID-19 Pandemic.

We thank you for your patience, your continued adherence to guidance from Hopi Tribal Government and the extra care each of you take to minimize the risk of exposure and transmission of this virus.


*Kwakwhá*



Timothy L. Nuvangyaoma  
Chairman of the Hopi Tribe



*Vice Chairman Andrews (left) &  
Chairman Nuvangyaoma (right)*



Craig Andrews  
Vice-Chairman of the Hopi Tribe

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### Objective

The safe return of Hopi Tribal Government employees to the workplace using a phased approach aligned with the *Hopi Tribe Reopening Plan*.<sup>1</sup>

### Scope and Applicability

The Hopi Tribe's *Return to work Guidelines* applies to all employees of the Hopi Tribal Government. These Guidelines serve as the governing strategy for the development of supportive policies and procedures. Furthermore, this document provides a platform for coordination between the Hopi Tribe and the various community partners and is adaptable based on changing COVID-19 conditions within the Hopi community.

Additionally, the *Hopi Tribe Reopening plan* details a framework for the coordination and full mobilization of Hopi Governmental assets through a three-phased reopening approach. Specific core areas are derivative of instituting practices of:

#### A Healthy Work Environment

- Emphasis on strategies to slow the transmission of disease, emphasize individual responsibility, and tailored strategies to the Hopi community including those at higher-risk for COVID-19.
- A Health & Safety Plan detailing specific health and safety practices including the use of face coverings and social distancing.
- A Cleaning & Disinfecting Plan thoroughly detailing processes for cleaning, sanitizing, and disinfecting all Hopi Tribal government facilities according to CDC recommendations.
- A detailed plan for work operations, and tribal activities, such as eating, returning to work, and other essential functions that abide by CDC recommendations and Hopi Tribal policies.
- Specific strategies to integrate healthy practices in all facets of the workplace including a detailed communication plan, visuals, for reinforcing mitigation efforts throughout all facilities, and mandatory training and orientation for faculty and staff.

#### A Healthy Community Environment

- Vendors, visitors, and others will receive communication on necessary health and safety policies and their requirements to follow such practices.
- The Hopi Tribal Government will continue to work closely with federal, state, local, private, and nonprofit groups to support the external community.

### COVID-19 Virus Testing

- The Hopi Tribal Government has established testing protocols and procedures for employees.

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<sup>1</sup> See the **Hopi Re-opening Plan** within the **Hopi toolkit** for full plan details and exposition regarding the specific areas of surveillance and monitoring.

- The Hopi Tribal Government has also instituted requirements for self-screening including the establishment of an entry screening process.

### **COVID-19 Vaccination**

- The Hopi Tribal Government has established COVID-19 vaccination protocols and procedure for employees.
- Presently, the Pfizer-BioNTech, Johnson & Johnson, and Moderna COVID-19 vaccinations have been given full authorization by the U.S. Food and Drug Administration (FDA). The Pfizer-BioNTech and Moderna vaccines consist of a two-dose series, while the Johnson & Johnson vaccine is administered as a single dose.
- As of October 2021, the Centers for Disease Control and Prevention has approved booster shots for the Pfizer-BioNTech, Johnson & Johnson, and Moderna COVID-19 vaccinations, giving people the freedom to mix and match any of the three vaccines (Pfizer, Moderna, and Johnson & Johnson) approved for use throughout the United States, with the agency's Advisory Committee on Immunization Practices recommending the boosters for elderly and at-risk adults five months after having completed their Pfizer or Moderna primary series or two months after having completed their Johnson & Johnson primary series.
- These FDA-approved COVID-19 vaccines have proven to help mitigate the spread of COVID-19 and lessen the severity of COVID-19 symptoms for breakthrough cases.

### **Contact Tracing**

- The Hopi Tribal Government and the Department of Health and Human Services is collaborating with the Hopi Health Care Center to establish a supportive contact tracing program internal to the Hopi Tribal Government for faculty and staff.
- The Hopi Tribal Government has developed a quarantine and isolation plan in the event an employee presents with symptoms or is determined to have a significant risk of exposure.

## *Introduction: We are Hopi, We are Strong*

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With a unique community structure, the Hopi culture and local environment play vital roles in the evaluation and development of proper mitigation strategies and procedures to reduce the severity of the pandemic. In line with local capacity and resources to implement and support any policy or directive of The Hopi Tribe's *Return to Work Guidelines*, these aspects were taken into full consideration.

### **Important Social & Cultural Factors**

The Hopi Tribe has a socio-cultural structure that reinforces year-round ceremonial gatherings with extended family, clan relatives and neighboring communities. The general greetings and ceremonial interactions extend beyond simple handshakes to include hugging, extended visiting in small spaces and hosting multiple visitors in family homes. In addition, with large groups in close proximity, it should be noted that in several communities there is limited access to water, which is critical to maintaining extensive hygiene practices and the multiple shared spaces raise the risk of exposure to high touch surfaces for extended periods of time.

### **Feedback & Appreciation**

We encourage every employee to maintain open communication with your colleagues and supervisors to offer feedback as we transition with additional standards and expectations to maintain the safety and health of all. The Hopi Tribe wishes to extend its greatest appreciation for your patience and understanding as we continue to adjust and improve our practices within this time of transition.

Please submit any questions or concerns using the form found in [Appendix A](#) to your department director so that it can be forwarded to the appropriate contact for follow up as needed.

## *Establishment of the Hopi Government Re-Opening Task Group (RTG)*

The process of returning to work is anticipated to come with much fear and uncertainty considering the dangers presented by the presence of COVID-19 within the Hopi Community. Consequently, during its Government Shutdown, the Hopi Tribal Government established a Hopi Government Re-Opening Task Group (RTG) to assess the various facilities of the Tribal Government and with technical assistance from the Centers for Disease Control and Prevention (CDC), to implement key mitigation measures necessary to safely continue the essential operations of the Tribal Government. The Hopi Tribal Government Re-Opening Task Group is comprised of Subject Matter Experts (SMEs) in the seven (7) key areas listed below:

<b>SME Representative Area</b>	<b>Description of Representative Role</b>	<b>Name(s)</b>
<b>1. Facilities/Custodial Representative</b>	<i>One who is familiar with the Housekeeping, grounds, and infrastructure of the facility.</i>	<b>Denise Bekay</b> <i>Custodial Supervisor</i> <b>Nathaniel Tootsie</b> <i>HVAC Technician</i> <b>Aaron Nasingoetewa</b> <i>Electrician</i>
<b>2. Facilities Administrator</b>	<i>One familiar with the layout of the facility and scheduling of personnel within the facility</i>	<b>Edgar Shupla</b> <i>Director of OFRMS</i> <b>Randy Poleahla</b> <i>Insurance Administrator</i>
<b>3. Employee Administrator</b>	<i>One who can define special considerations, and enforcement of implemented precautions and changes.</i>	<b>Dorma Sahneyah</b> <i>Executive Director</i> <b>Philline Talayumtewa</b> <i>Executive Secretary</i> <b>Lisa Pawwinnee,</b> <i>Director of HR</i> <b>Cheryl Tootsie</b> <i>Procurement Supervisor</i>
<b>4. IPC Representative</b>	<i>One who can provide guidance and practical solutions to prevent harm caused by infectious disease to clients and workers.</i>	<b>Royce Jenkins</b> <i>Director of DHHS, PHA</i> <b>Madeline Sahneyah,</b> <i>Public Health Compliance Officer</i>
<b>5. Communications Representative</b>	<i>One who can communicate changes and or implemented precautions within the organization and without. (to personnel, to administrators, to clients etc.)</i>	<b>Robert Collateta Jr.</b> <i>Acting Director of OIT</i> <b>Lisa Pawwinnee</b> <i>Director of HR</i> <b>Philline Talayumtewa</b> <i>Executive Secretary</i> <b>Dorma Sahneyah</b> <i>Executive Director</i>
<b>6. Office of Environmental Health Representative</b>	<i>One who can provide guidance and ensure that facilities are functional and well maintained.</i>	<b>George Chung</b> <i>Environmental Health Officer</i> <b>Sherry Chase</b> <i>Environmental Health Specialist</i>
<b>7. Village/Community Leadership</b>	<i>One who can help with community buy-in and assurance of the changes made for the safety of those on the premises and who can define essential services etc.</i>	<b>Andrea Joshevama</b> <i>Child and Family Therapist</i>



As the Hopi Tribal Government moves from detailed planning and implementation to monitoring and response, the membership of this Hopi Tribal Government Re-Opening Task Group may be modified to include individuals with different areas of expertise, although the functional areas listed above shall remain the same. See [Appendix N](#) for a full listing of all [Phase One Walkthrough Site Risk Assessment Reports](#).

To date, the Hopi Government Re-Opening Task Group has worked to develop, refine, and implement health and safety protocols in the four (4) principal areas below:

- **Case management and support for staff**—efforts have been made to refine and implement protocols for supporting staff diagnosed with COVID-19, including medical, and mental health support.
- **Situation monitoring**— Awareness of the incidence of COVID-19 cases within the Tribal Complex and in the local community is essential. Furthermore, the ability to monitor the capacity of the local Hopi Healthcare Center (HHCC), will help inform decision-making processes regarding the movement between Re-Opening Phases as well as the transition to and from Telework.
- **Health Promotion and Compliance**—The RTG endeavored to develop policies, procedures, training, communications, and awareness protocols designed to promote compliance with the Hopi Tribal Government’s COVID-19 health and safety measures and to enforce compliance when necessary.
- **Procurement** – While conducting the On-site Walkthrough Risk assessments of the Tribal Facilities, the Hopi Tribal Government RTG endeavored to support the Hopi Tribal Government’s COVID-19 response by sourcing and procuring supplies and equipment recommended in the On-site walkthrough risk assessments. In the future, the Hopi Tribal Government RTG will make recommendations of this nature to the Hopi Incident Management Authority (HIMA) regarding the implementation of COVID-19 mitigation recommendations and changes.

### **Hopi Incident Management Authority (HIMA)**

The Hopi Tribal Government has instituted a Hopi Incident Management Authority (HIMA) to serve as a decision-making authority for the COVID-19 mitigation efforts and recommendations. This body continues to work in close collaboration with the Hopi Government RTG and other Re-Opening Task Groups and Safety Teams Reservation wide<sup>2</sup>. Additionally, HIMA will remain in close contact with the Hopi Department of Health and Human Services, The Public Health Authority (PHA) and the Hopi Healthcare Center (HHCC) to monitor internal and external conditions related to COVID-19 and their potential to impact Tribal operations.

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<sup>2</sup> This includes safety teams organized by the various school and village administrations.

The Framework of the *Hopi Return to Work Guidelines* assumes the following for planning purposes:

- The Hopi Tribal Government will implement a three-phased approach to reopening.
- A phased approach to reopening the Hopi Tribal Complex and essential services will balance the benefits and potential harms of adjusting these measures, so as not to trigger a resurgence of COVID-19 cases and jeopardize the health and safety of the Tribal Community.
- The risk of transmission depends on both the type and duration of exposure, as well as protective measures.
- Social distance is the most effective way to prevent the exposure to COVID-19, followed by engineering and then administrative controls.
- Use of face coverings, coupled with social distancing may reduce the risk of COVID-19 transmission although the use of face coverings requires consistent access to supplies and continuous, proper use by individuals.
- Relaxing restrictions too quickly may lead to a spike in COVID-19 cases.

### Operational Guidelines

In response to the ongoing COVID-19 pandemic, the Hopi Tribe instituted widespread community mitigation and prevention efforts that included closing much of the tribal government. These efforts, combined with ongoing containment activities, served as an effective intervention for limiting the spread of COVID-19, but at the same time, have become a stressor to the economic well-being of Hopi communities. However, as the Hopi Tribal Government prepares to implement the *Hopi Reopening Plan*, which details a three-phase approach to inform decision-making and the implementation of mitigation measures for the health and safety of the Hopi people, Phase One of this Plan involves the controlled reopening of *essential governmental services*.

Essential Services of the Hopi Tribal Government should be defined as those programs and services, which were determined to be of the highest priority for maintaining, during the COVID-19 emergency. Comprehensive planning and analysis of the various tribal programs included assessing the impact factors of each program in four major areas:

- Client impact
- Organizational impact
- Staff Impact
- Suspension of Services impact

The identification and analysis of essential services was a critical step in the overall planning process and development of the *Hopi Reopening Plan* and the *Return to Work Guidelines*. While there is no singular way to identify essential services, both a qualitative and quantitative approach were taken in identifying these services to produce the most promising and comprehensive results.

While this process produced a numeric “impact rating” that could be used to determine goals and priorities for continuity of services, a qualitative approach was also taken in the form of a “*return to work survey*” in which Department Directors were asked to provide critical information regarding their program functions and operations. Through their knowledge, understanding and experience with the Hopi population and its needs, the numerical impact ratings were adjusted accordingly.

### Hopi Tribal Government Departments, Programs and Services by Phase

In line with the gating criteria set forth by the *Hopi Reopening Plan* the tables below detail the initial phase of return for each Hopi Tribal Government Department, Program and Service based on their overall impact rating and additional considerations garnered from the program’s “*Return to Work Survey*”.

Department/Program Name	Impact Rating	# of Essential Employees currently onsite	# of Employees returning by Phase			Initial Phase of Return
			Phase One	Phase Two	Phase Three	
Office of Human Resources	14					PHASE ONE
Department of Public Safety and Emergency Services	14					
Payroll	14					
Accounts Payable	14					
Custodial Staff	14					
Engineering and Electrical	14					
Production/Maintenance	14					
Domestic Violence Program	14					
Hopi Social Services Program	13					
Hopi Tribal Security	13					
Hopi Office of the Chairman	13					
Hopi Office of the Vice-Chairman	13					
Hopi Office of the Executive Director	13					
Public Defenders Office	13					
Hopi Office of the Prosecutor	13					
Suicide Prevention Program	12					
Procurement Office	12					
Hopi Law Enforcement Services	11.5					
Hopi Substance Abuse	11					
Hopi Solid waste Program	11					
Mental Health Program	10					
Behavior Health Services Transportation	10					
Accounting	10					
Tribal Courts	10					
Treasurer's Office	10					
General Counsel	10					
Aging and Adult Services	10					
Medical Transport	10					
Community Health Representatives Program	10					
Women Infants and Children Program	10					

Office of Information Technology	10					
Office of Range Management <sup>3</sup>	9		-			PHASE TWO
Small Projects Office	9		-			
Revenue Commission	9		-			
Vocational Rehabilitation Program <sup>4</sup>	9		-			
Hopi Head Start Program	9		-			
Hopi Department of Transportation	9		-			
Tribal Secretary's Office	9		-			
Hopi Realty Office	9		-			
Water Resources Program	9		-			
Workforce Innovation Opportunities Act Program	8		-			
Risk Management Office <sup>5</sup>	7		-			
Hopi Tribal Grants and Scholarships Program	7		-			
Hopi Childcare Program <sup>6</sup>	7		-			
Veteran Affairs Program <sup>7</sup>	7		-			
Elections Office	7		-			
Contracts and Grants	6		-			
Tribal Employment Rights Office	5		-			
Transportation and Planning Program	5		-			
Road and Bridge Construction Program	5		-			
Road Maintenance Program	5		-			
Cancer Support Program	5		-			
Hopi Sinom Transit	5		-			
Adult Vocational Training Program	4					PHASE ONE
Hopi Tutuveni <sup>8</sup>	4					

<sup>3</sup> Tribal Leadership may consider the Surveillance and Patrol function of this program with regards to the Hopi Range lands a critical Phase One function.

<sup>4</sup> Due to contractual obligations this program may require special accommodations to allow it to provide services to its customer base even during Phase One.

<sup>5</sup> As the Hopi Tribal Government continues to conduct site risk assessments and implement corrective measures for the safety of Tribal Employees and Customers alike, this program may be considered an essential Phase One Program.

<sup>6</sup> In anticipation of Hopi Tribal Employees Returning to work for Phase One, the Childcare Services of this program may be considered an Essential Phase One Service.

<sup>7</sup> Leadership may consider the Transportation function of this program for Hopi Veterans a Critical function as it address a particular population.

<sup>8</sup> During the current COVID-19 pandemic this program should be considered critical to the dissemination of public information and the role of media as indicated with in the Hopi COVID-19 Communications Plan.



Hopi Office of Enrollment	4			
Office of Community Planning and Economic Development	4			
Hopi Cultural Preservation Office	4			
Wildlands and Ecosystems Management Program	4			
Motor Pool	3			
TANF	3			
Tribal Operations	3			
Abandoned Mine Lands Program	3			
Veterinary Services Program	3			
Small Animal Control	2			
Hopi Credit Association	2			
Tutuqaysikisve	2			
Wuwanamtapsikisve	2			
Hopi Tribal Housing Authority	0			
Hopi Education Endowment Fund	0			
Hopi Telecommunications Incorporated	0			
Hopi Three Canyon Ranch	0			
Hopi Utility Corporation	0			
Hopi Lands Programs	0			
Renewable Energy Program	0			
Hopi Tribal Economic Development Corporation	0			
Hopi Wellness Program	0			
Office of Mining and Mineral Resources	0			

Pursuant to the Hopi Tribe's Reopening Plan, the Public Health Authority (PHA) in partnership with the Hopi Healthcare Center (HHCC) is charged with making recommendations to the Hopi Incident Management Authority (HIMA) and the Hopi Tribal Executive Leadership regarding the indicators that the Department of Health and Human Services will track to inform their decisions regarding moving from one phase of the Reopening Plan to the next or moving back to a more restrictive phase if necessary. Recommendations regarding transitions between the phases of the Reopening Plan will be made in a holistic and not a formulaic manner. The metrics listed below will be considered as a whole and no single metric will be dispositive.

### **External Data Points:**

- Trajectory of the percentage of positive tests over a 14-day average – reduction over 14 days may permit move to less restrictive phase, while increase over 14 days may indicate a move to a more restrictive phase.
- Trajectory of the percentage of positive tests at the local level (Hopi Health Care Center), using the 14-day average – reduction over 14 days may permit move to a less restrictive phase, while an increase over 14-days may indicate a move to a more restrictive phase.
- Capacity of local hospitals and Health Care Centers – a consistent level or a material increase availability of ICU and other hospital capacities may permit a move to a less restrictive phase, while a material reduction in capacity may indicate a move to a more restrictive phase.
- Local access to PPE - adequate PPE supply may permit a move to a less restrictive phase, while material shortages of PPE may indicate a move to a more restrictive phase.<sup>9</sup>

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<sup>9</sup> See **Hopi Re-opening Plan** for the full listing of gating criteria

## PHASE ONE REOPENING

Hopi villages and regions that satisfy baseline criteria (CDC gating criteria) can begin Phase One

INDIVIDUALS	EMPLOYEES	SPECIFIC TYPE OF EMPLOYEE
<p><b>ALL VULNERABLE INDIVIDUALS*</b> should continue to Stay-at-home. Members of households with vulnerable residents should be aware that by returning to work or other environments where social distancing is not practical, they could carry the virus back home. Precautions should be taken to isolate from vulnerable residents.</p> <p>All individuals, <b>WHEN IN PUBLIC</b> (e.g., outdoor recreation areas, shopping), should maximize social distance from others and wear cloth face masks. Social settings of more than 10 people, where appropriate distancing may not be practical, should be avoided unless precautionary measures are observed.</p> <p><b>AVOID SOCIALIZING</b> in groups of more than 10 people in circumstances that do not readily allow for appropriate social distancing (e.g., receptions, gatherings)</p> <p><b>ONLY ESSENTIAL TRAVEL IS PERMITTED</b> and adhere to CDC guidelines regarding symptom monitoring and isolation following travel.</p>	<p>Continue to <b>ENCOURAGE TELEWORK</b>, whenever possible and feasible with business operations.</p> <p>If possible, <b>RETURN TO WORK IN PHASES</b> prioritizing government offices, and childcare (formal and informal).</p> <p>Close <b>COMMON AREAS</b> (include, but are not limited to breakrooms, group work, food dining, and open floor plan work areas) where personnel are likely to congregate and interact or enforce strict social distancing protocols.</p> <p>Minimize <b>NON-ESSENTIAL TRAVEL</b> and adhere to CDC guidelines regarding isolation following travel.</p> <p>Strongly consider <b>SPECIAL ACCOMMODATIONS</b> (telework, flexible leave utilization, removal of incentives for unmissed attendance) for personnel who are members of a <b>VULNERABLE POPULATION*</b> and those that are directly caring for them.</p>	<p><b>SCHOOLS AND ORGANIZED YOUTH ACTIVITIES</b> (e.g., daycare, after school type activities) that are currently closed should remain closed. Childcare programs can be opened to children of essential workers if social distancing and infection control practices can be maintained.</p> <p><b>VISITS TO SENIOR LIVING FACILITIES AND HOSPITALS</b> Visitations should be restricted except for certain compassionate care reasons, such as end-of-life situations. Protocols should be in place to include careful screening of visitors for fever or <a href="#">symptoms consistent with COVID-19</a> (Appendix 6B and C).</p> <p><b>LARGE GATHERINGS</b> (e.g. eating out, sports, celebrations and performances) may operate under strict social distancing and sanitation protocols. If possible, perform outside, and if inside, ensure adequate ventilation. Keep elders and high-risk individuals away from the crowds and have them join in when safer. Ensure masks are worn by everyone. For ceremonies and dances, villages should follow the same guidance and also refer to village orders and directives.</p> <p><b>WELLNESS CENTER GYM</b> that are currently closed should remain closed</p>

\*Vulnerable Individuals:

1. Elderly individuals.
2. Individuals with serious underlying health conditions, including high blood pressure, chronic lung disease, diabetes, obesity, asthma, or those whose immune system is compromised such as by chemotherapy for cancer, HIV, or other immunosuppressive conditions.

## PHASE TWO REOPENING

Hopi villages and regions that satisfy baseline criteria (CDC gating criteria) can begin Phase Two

INDIVIDUALS	EMPLOYEES	SPECIFIC TYPE OF EMPLOYEE.
<p><b>ALL VULNERABLE INDIVIDUALS*</b> should continue to shelter in place. Members of households with vulnerable residents should be aware that by returning to work or other environments where social distancing is not practical, they could carry the virus back home. Precautions should be taken to isolate from vulnerable residents.</p> <p>All individuals, <b>WHEN IN PUBLIC</b> (e.g., parks, outdoor recreation areas, shopping), should maximize social distance from others and wear cloth face masks. Social settings of more than 50 people, where appropriate distancing may not be practical, should be avoided unless precautionary measures are observed.</p> <p><b>ALL TRAVEL</b> can resume; must adhere to CDC guidelines regarding symptom monitoring and infection identification following travel.</p>	<p>Continue to <b>ENCOURAGE TELEWORK</b>, whenever possible and feasible with business operations.</p> <p>Close <b>COMMON AREAS</b> (including but not limited to plazas, gymnasiums, and outdoor activity fields) where personnel are likely to congregate and interact or enforce moderate social distancing protocols.</p> <p><b>ALL TRAVEL</b> can resume; must adhere to CDC guidelines regarding symptom monitoring and infection identification following travel.</p> <p>Strongly consider <b>SPECIAL ACCOMMODATIONS</b> (telework, flexible leave utilization, removal of incentives for unmissed attendance) for personnel who are members of a <b>VULNERABLE POPULATION</b>.</p>	<p><b>SCHOOLS AND ORGANIZED YOUTH ACTIVITIES</b> (e.g., Daycare, after school type activities) can reopen for all children if social distancing and infection control practices can be maintained.</p> <p><b>VISITS TO SENIOR CARE FACILITIES AND HOSPITALS</b> should be prohibited. Those who do interact with residents and patients must adhere to strict protocols regarding hygiene.</p> <p><b>LARGE GATHERINGS</b> (e.g., Eating out, sports, ceremonies) may operate under moderate social distancing and sanitation protocols. Ensure system are in place to monitor crowd sizes to ensure they don't exceed safe numbers. For ceremonies and dances, villages should follow the same guidance and refer to village orders and directives.</p> <p><b>ELECTIVE SURGERIES and other NON-ESSENTIAL MEDICAL SERVICES</b> (e.g. dental, optical, and audiological) can continue as clinically appropriate, on an outpatient and in-patient basis at facilities that adhere to CMS guidelines. (Appendix D.)</p> <p><b>WELLNESS CENTER GYM</b> can remain open if they follow strict social distancing and Sanitation protocols.</p>

\*Vulnerable Individuals:

1. Elderly individuals.
2. Individuals with serious underlying health conditions, including high blood pressure, chronic lung disease, diabetes, obesity, asthma, or those whose immune system is compromised such as by chemotherapy for cancer, HIV, or other immunosuppressive conditions.

## PHASE THREE REOPENING

Hopi villages and regions that satisfy baseline criteria (CDC gating criteria) can begin Phase Three

INDIVIDUALS	EMPLOYEES	SPECIFIC TYPE OF EMPLOYEE.
<p><b>VULNERABLE INDIVIDUALS*</b> can resume public interactions, but should practice social distancing, wear cloth face masks, and minimizing exposure to social settings where distancing may not be practical, unless precautionary measures are observed</p> <p><b>LOW RISK POPULATIONS**</b> should consider minimizing time spent in crowded environments.</p>	<p>Resume <b>UNRESTRICTED STAFFING</b> of worksites. Businesses must be able to demonstrate engineered workplace settings that build in social distancing and protections for staff.</p>	<p><b>VISITS TO SENIOR CARE FACILITIES AND HOSPITALS</b> can resume. Those who interact with residents and patients must be diligent regarding hygiene.</p> <p><b>LARGE GATHERINGS</b> (e.g., eating out, sporting, ceremonies) may operate under limited social distancing protocols and sanitation protocols.</p> <p><b>WELLNESS CENTER GYM</b> can remain open if they follow standard sanitation protocols and make <b>SPECIAL ACCOMODATIONS</b> (i.e. hours or programs specifically for high-risk individuals)</p>

\*Vulnerable Individuals

1. Elderly individuals.
2. Individuals with serious underlying health conditions, including high blood pressure, chronic lung disease, diabetes, obesity, asthma, or those whose immune system is compromised such as by chemotherapy for cancer, HIV, or other immunosuppressive conditions.

\*\*Low Risk Populations

1. Low Risk Populations are those under 50 without underlying health conditions and have no contact with a → COVID-19 confirmed or probable case.



The Hopi Tribal Executive Leadership will notify Hopi Tribal Personnel of transitions from one Reopening plan phase to another by sending out an Official Government-wide memorandum. The current status will also be reflected on the Hopi Tribal Government website landing page and on its COVID-19 webpage.

As the Hopi Tribal Government Re-Opening Task Group has conducted walk-throughs of all **Phase One** essential service facilities, the detailed Reopening Plan coupled with the Site Risk Assessment Reports identify the interventions that will be put into place in each phase, including but not limited to the following:

- **Signage and visual cues** – The Hopi Tribe will deploy signs and visual cues across the Hopi Tribal Complex and facilities to reinforce the proper wearing of face coverings, maintaining at least 6 feet of distance, handwashing, and disinfection.
- **Deployment of hand sanitizer and wipes** – The Hopi Tribe has procured hand sanitizer and disinfecting wipes that will be deployed across the Hopi Tribal Complex and Facilities, with particular emphasis on building entrances, high traffic and high touch areas.
- **Entry and Exit doors and stairwells**– The Hopi Tribal Management will designate certain building doors as entry or exit only and certain stairwells as up or down only to manage traffic flow and promote social distancing.
- **Plexiglass barriers** – Plexiglass barriers will be installed in certain customer-facing locations, where it is not possible to maintain 6 feet of distance.<sup>10</sup>

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<sup>10</sup> See On-site Walkthrough Risk-Assessments of the Hopi Tribal Facilities for a detailed report of all Health and Safety recommendations.

The health and safety of the Hopi Tribal community is a shared responsibility among, employees, visitors, and community members. As such, the Hopi Tribal Government continues to implement enhanced cleaning protocols and transmission mitigation strategies. In broad terms these practices closely align with state, and federal guidelines for reopening. In addition to the phased return of employees, the Hopi Tribal Complex as well as other Tribal Government Facilities have adjusted their capacity and services to adhere to the following health and safety protocols.

### **Social Distancing**

The Hopi Tribal Government Re-Opening Task Group has surveyed all facilities to determine their maximum capacity based on the social distancing requirements of at least 6 feet. The Hopi Government RTG continues to coordinate with Tribal Leadership and the Office of Facilities and Risk Management Services to develop facility-wide social distancing guidelines, with tailored plans for higher risk areas. Plans include the following:

- Removing/rearranging seating to reduce capacity in used office/ lounge<sup>11</sup>/ reception and conference rooms to promote social and social distancing.
- Adding partitions to separate adjacent workspaces.
- Installing plexiglass barriers where needed.
- Removing or limiting shared workspaces.
- Designating small rooms as single occupancy only.
- Using floor decals and signage to direct traffic and maintain 6 feet of social distance.
- Encouraging the use of videoconferencing and technology.
- Implementing elevator ridership limits: no more than 2 individuals in an elevator.
- Prohibiting large gatherings of more than 10 people. Meetings of 2-10 individuals must be held in a location that will allow for a minimum of 6 feet distance between participants.

### **Controlled Access to Facilities**

Foot traffic and gatherings within Tribal facilities and common spaces will be limited through reduced facility entrances and visitor restrictions. Non-business visitors are prohibited, and work-related visitation will be limited in all workspaces. Business visitors will be required to wear face coverings while on the premises of a Tribal Government Facility. Business visitors will be provided with a disposable face covering or they may wear a personal comparable face covering.

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<sup>11</sup> Masks are taken off while eating, which increases the risk of disease spread therefore, it is recommended that staff eat at their own workstations with the doors closed. Alternatively, consider utilizing outdoor seating. Staff should be reminded to wash their hands and to clean and disinfect the area before and after eating.

## Requirement for Face Coverings

One key aspect of the Health and Safety Protocols implemented by the Hopi Tribal Government is the requirement to wear face coverings in *all* Tribal Government Facilities. Under these health and safety protocols, face coverings will be required in all three phases of the Hopi Tribe's Re-Opening Plan. Currently the Hopi Tribal Government has adopted an interim policy requiring the use of face coverings inside of Tribal Government buildings, classrooms<sup>12</sup>, or in common areas of Tribal facilities, and in outdoor locations where social distancing is not possible. The Tribe has procured and will provide face coverings to every staff member if necessary.

## Cleaning and Disinfection

As noted above, the Office of Facilities and Risk Management Services' custodial staff will follow all applicable public health guidelines for the cleaning and disinfection of tribal facilities. The Tribe's cleaning and Disinfecting Protocols include the following:

- Procurement and utilization of only EPA registered disinfectants identified for use against COVID-19.
- Training employees with prior cleaning and custodial responsibilities to prioritize cleaning and disinfection of high touch surfaces.
- Installing disinfecting wipe stations across all Tribal Government Facilities with signage encouraging individuals to wipe down high-touch surfaces with which they might come into contact; and
- Significantly increasing the number of hand sanitizer stations across the Tribal Complex<sup>13</sup>.

See [Appendix B: Cleaning and Disinfecting Buildings and Vehicles Guidance](#) for more detailed guidance regarding the cleaning and disinfecting of buildings and vehicles, as well as the recommended cleaning procedure following a known COVID-19 exposure within a facility.

## Buildings and Engineering Controls

Engineering controls within Tribal Government and community buildings are an effective way to mitigate the spread of the COVID-19 virus. In conducting the On-site Walkthrough Risk-Assessments the Hopi Tribal Government RTG developed a set of recommendations for improved engineering controls throughout Hopi Tribal facilities. Based on the recommendations of the Hopi Government RTG, the Hopi Administration is in the process of implementing the following engineering controls in its Administrative, Legislative and Judicial buildings:

- Modifying air ventilation systems to the greatest extent feasible to increase outside air input into buildings through existing systems.
- Installing foot pulls on bathroom doors.
- Installing floor markings in high traffic locations or where people are likely to queue.

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<sup>12</sup> This is in reference to the Hopi Childcare Program and Head Start Program

<sup>13</sup> See Hopi toolkit "*Cleaning and Disinfecting Buildings and Vehicles Guidance*" for more detailed guidance regarding cleaning and disinfecting of buildings and vehicles

- Modifying water fountains so that they can only be used to fill bottles; and
- Installing at least one no-touch faucet in public restrooms that currently have none.

## **Objective**

The Hopi Tribal Government is working to protect the health and safety of employees in the workplace by following recommendations from agencies such as the Hopi Department of Health and Human Services (DHHS) and the Centers for Disease Control and Prevention (CDC). Therefore, it is unlikely an employee will be directed to report for work when it is unsafe to do so.

During a pandemic health crisis, the Hopi Tribe will strive to protect the health of its employees while ensuring the tribal government's work is accomplished. The Hopi Tribe may use a number of alternative work arrangements to promote the 'social distancing' of employees, including but not limited to telework.

For any business reason, at any time, the Hopi Tribal Government may elect to change the work assignment of any employee based on the business needs of the Hopi Tribal Government.

## **Employee Responsibilities**

Employees will be expected to report for work and perform the normal duties of their position when it has been determined safe for them to return. When an employee reports for work, he or she is expected to carry out work responsibilities as authorized by the supervisor. If an employee refuses to carry out a particular work assignment, at the time the assignment is given, the employee will be considered Insubordinate. The Hopi Tribal Government will take disciplinary action for Insubordination, up to and including termination of employment.

If an employee is concerned about contracting Coronavirus (COVID-19) from a co-worker or the public while performing his or her duties, the employee should first raise the concern with his or her supervisor to discuss appropriate action, such as moving to a different work area, taking annual leave, or teleworking.

An employee should understand that all requests may not be accommodated, based on individual circumstances and the business needs of the Hopi Tribal Government.

An employee may request annual leave for a period of absence. Depending on the circumstances, an employee may request other paid time off such as earned compensatory time, or request for leave without pay. An employee should understand that leave requests may be denied, based on the business needs of the Hopi Tribal Government.

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This document is not designed as a substitute for reasonable accommodation under any applicable federal or state laws, or other applicable laws. To meet tribal government needs under changing conditions, the Hopi Tribe reserves the right to revoke, change, or supplement guidelines at any time with written notice.

The policies and procedures are not intended to be contractual commitments and they shall not be construed as such by employees. This policy is not intended as a guarantee of continuity of benefits or rights. No permanent employment for any term is intended or can be implied by this policy.<sup>14</sup>



If an employee refuses to report to work based on his or her personal belief that it is unsafe for the employee, the employee can file a dispute resolution, in accordance with the *Dispute Resolution Policy*. To initiate this process, please utilize the [Dispute Resolution Form](#) found in [Appendix O](#).

If an employee refuses to report after a decision has been made regarding a dispute resolution and the employee is not on approved leave, the employee will be considered absent without leave (AWOL). The Hopi Tribal Government will take disciplinary action for AWOL, up to and including termination of employment.

### **Employees able to Return to Work with Limitations**

If an employee's physical or medical condition limits him or her in the performance of his or her normal duties, the employee will notify the supervisor immediately and work with the Office of Human Resources for assignment of a light duty/modified work accommodation.

If the attending physician releases the employee to return to work, medical documentation must be provided to the Office of Human Resources within 24 hours for assignment of light duty/modified work. The employee must report for work at the designated time.

The employee cannot return to work without a release from the attending physician. If the employee returns to a transitional/temporary job, the employee must make sure that he or she does not go beyond either the duties of the job or the physician's restrictions. If the employee's restrictions change at any time, he or she must notify his or her supervisor at once and provide a copy of the new medical release specifications.

If the employee is unable to report for work due to a physician's order, the employee must call in weekly to report his or her medical status to the supervisor and the Office of Human Resources. While off work, it is the responsibility of the employee to provide the Office of Human Resources with a current telephone number and an address where the employee can be reached. The employee will notify the Office of Human Resources within 24 hours of all changes in medical condition.

### **Employer Responsibilities**

If an employee refuses to carry out a particular work assignment, at the time the assignment is given, the employee will be considered Insubordinate. The Hopi Tribal Government will take disciplinary action for Insubordination, up to and including termination of employment.

If an employee refuses to report for work based on his or her personal belief that it is unsafe to do so, and the employee is not on approved leave, the employee will be considered absent without leave (AWOL). The Hopi Tribal Government will take disciplinary action for AWOL, up to and including termination of employment.

If an employee is concerned about contracting Coronavirus (COVID-19) from a co-worker or the public while performing his or her duties, the employee should first raise the concern with his or her supervisor to discuss appropriate action, such as moving to a different work area, taking annual leave, or teleworking.

The supervisor is responsible for ensuring employees complete the appropriate forms, follow existing protocols, and maintain communication with the employee and the Office of Human Resources.

### Initial Screening and Testing for Hopi Tribal Personnel

All current **Phase One Employees** of the Hopi Tribal Government may be required to undergo PCR<sup>15</sup> viral testing upon return to the Hopi Tribal Complex and prior to resuming work responsibilities. **Phase One Staff** who have had a negative COVID-19 test within 72 hours of arrival will be exempt from this requirement. Staff Testing will be staggered to facilitate testing for both the employee and Hopi Healthcare Center (HHCC). Once tested, staff will not be permitted to enter the premises until results are disclosed to the Office of Human Resources. All staff are required to wear cloth face coverings and to maintain strict social distancing. Staff with symptoms will be required to return home, pending test results.<sup>16</sup>

**Phase Two** and **Phase Three employees** may be required to undergo COVID-19 testing only if they present with symptoms of COVID-19.

Once test results have been received employees are required to complete the [Employee Disclosure Form](#) found in [Appendix C](#) and submit it via fax or email to the Director of the Office of Human Resources at [LPawwinnee@hopi.nsn.us](mailto:LPawwinnee@hopi.nsn.us)

### Testing for Hopi Tribal Staff with COVID-19 Symptoms & Close Contacts Identified Through Contract Tracing

Any staff member who has symptoms of COVID-19 or is a close contact of a COVID-19 positive individual will have the option to seek a clinical evaluation and testing through their own health care provider. Testing for individuals identified as close contacts of an infected person shall be conducted in accordance with HHCC guidelines for contract tracing and surveillance.

### Hopi Tribal Government Mandatory Vaccination Policy

Vaccination is a vital tool to reduce the presence and severity of COVID-19 cases in the workplace, and in the Hopi community as a whole. Consequently, the Hopi Tribal Government has instituted a mandatory vaccination policy to safeguard the health of its employees from the hazard of COVID-19.

#### Scope

This Mandatory COVID-19 Vaccination Policy applies to all employees of the Hopi Tribal Government. All employees covered by this policy are required to be fully vaccinated as a term and condition of employment with the Hopi Tribal Government. Employees are considered fully vaccinated two weeks after completing the primary vaccination series of any COVID-19 vaccine, with the minimum recommended interval between doses. This includes two weeks after a second dose in a two-dose series, such as with the Pfizer or Moderna vaccines, or two weeks after a single-dose vaccine, such as the Johnson & Johnson vaccine, or two weeks after the second dose of any combination of two doses of different

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<sup>15</sup> Polymerase Chain Reaction Testing

<sup>16</sup> See Hopi Toolkit—"CDC Recommendations for the testing Hopi Government Employees" for more details.

COVID-19 vaccines. Employees are considered up to date on their vaccination if they have received all recommended doses in their primary series of COVID-19 vaccine, and one booster dose when eligible. Getting a second booster dose is not necessary to be considered up to date at this time.

## **Procedure**

All Hopi Tribal Government employees must be fully vaccinated no later than **December 22, 2021**.

To be fully vaccinated by **December 22, 2021**, an employee must:

- Obtain the first dose of the Moderna two-dose vaccine no later than **November 10, 2021** or the first dose of the Pfizer two-dose vaccine no later than **November 17, 2021**; and the second dose of either Moderna or Pfizer no later than **December 8, 2021**; or
- Obtain one dose of a Johnson & Johnson single vaccine no later than **December 8, 2021**.

To be up to date with their first booster dose (if eligible to receive a booster dose) by **February 22, 2022** (if they received Johnson & Johnson primary series) or **May 22, 2022** (if they received either the Moderna two-dose vaccine series or the Pfizer two-dose vaccine series), an employee must:

- Obtain a vaccine booster five (5) months after having completed a two-dose vaccine series (Moderna or Pfizer) or two (2) months after having completed a single-dose vaccine (Johnson & Johnson).

All employees are required to report their vaccination status by completing the COVID-19 [Employee Vaccination Disclosure Form](#) found in [Appendix Q](#) and submit it via fax or email to the Director of the Office of Human Resources at [LPawwinnee@hopi.nsn.us](mailto:LPawwinnee@hopi.nsn.us).

Employees are expected to provide truthful and accurate information about their COVID-19 vaccination status, failure to comply with this mandate may result in disciplinary action consistent with the *Hopi Tribe Personnel Policies & Procedures Manual*.

Any employee who fails to provide proof of vaccination by the specified dates, will be considered unvaccinated and subject to the requirements below.

## **Unvaccinated Employees**

Employees who are unvaccinated, for any reason, shall be required to undergo COVID-19 testing weekly with the date tested being the day prior to returning to work for the week. Once test results have been received employees are required to complete the [Employee Disclosure Form](#) found in [Appendix C](#) and submit it via fax or email to the Director of the Office of Human Resources at [LPawwinnee@hopi.nsn.us](mailto:LPawwinnee@hopi.nsn.us).

Employees who fail to disclose their COVID-19 test results as required, may be subject to disciplinary action consistent with the *Hopi Tribe Personnel Policies & Procedures Manual*.

Any employee whose place of work is within a federal building must comply with the existent Federal policies, mitigation plans, testing and vaccination protocols and any other requirements.

The Office of Human Resources is authorized to issue further guidance to implement the vaccine requirements described herein.

### **Exemption from the COVID-19 Vaccination Mandate**

Employees may request an exemption from this mandatory vaccination policy if the vaccine is medically contraindicated for them or medical necessity requires a delay in vaccination. Employees also may be entitled to a reasonable accommodation if they cannot be vaccinated and/or wear a face covering (as otherwise required by these Guidelines) because of a disability, or if the provisions in this policy for vaccination conflict with a sincerely held religious belief, practice, or observance.

Requests for exemptions and reasonable accommodations must be initiated by the submission of the [COVID-19 Vaccine Exemption Request Form](#) found in [Appendix R](#) to the Director of the Office of Human Resources at [LPawwinnee@hopi.nsn.us](mailto:LPawwinnee@hopi.nsn.us).

### **Seasonal Influenza Vaccination**

Hopi Tribal Government Staff are strongly encouraged to get the seasonal flu vaccination, which is offered free of charge by HHCC<sup>17</sup>. Employees who refuse the seasonal flu vaccination for religious, personal, or medical purposes shall fill out and submit the [Influenza Vaccine Exemption Request Form](#) found in [Appendix P](#) to the Office of Human Resources.

### **New Hires:**

All new employees are required to comply with the vaccination requirements outlined in this policy as soon as practicable and as a condition of employment. Potential candidates for employment will be notified of the requirements of this policy prior to the start of employment.

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<sup>17</sup> The Hopi Tribe has a legitimate need to limit the impact of the flu on the Tribe's limited health care resources, so that they remain available for COVID-19 patients. The Tribe also has a large high-risk population, dense housing situations and other factors that can make a flu outbreak dangerous.

## *Daily Health and Temperature Screening*

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All Hopi Tribal Government personnel shall conduct daily health and temperature screenings.

### **Pre-Arrival Screening for Hopi Government Staff**

All Hopi Tribal Government personnel shall monitor symptoms and temperature prior to the beginning of **Phase One** using the [Self-Check and Daily Monitoring and Recommendations Form](#) found in [Appendix D](#).

Staff who have symptoms will not be permitted to return to work until they meet the following criteria:

- No fever, defined as less than 100 degrees F, for at least 24 hours (that is 24 hours of no fever without the use of fever reducing medication, such as Tylenol, Motrin, ibuprofen, etc.)
- Other symptoms have improved (for example, cough or shortness of breath); and
- At least 5 days have passed since the symptoms first appeared or two negative COVID-19 PCR viral tests have been done at least 24 hours apart.
- Agree to continue wearing a mask around others for 5 additional days from the last day of isolation

The checklist found in [Appendix E](#) should be used to ensure that each of the listed criteria have been met.

### **Daily Screening for Hopi Government Personnel**

All personnel shall conduct a daily health and temperature screening at the beginning of their shifts. Staff shall not to come to work (or shall return home) and will be instructed to call their health care provider if they experience symptoms of COVID-19. The Hopi Tribe will develop a protocol for auditing the daily health and temperature screenings to ensure compliance with this requirement.

Employees who appear to have symptoms upon arrival at work or who become sick during the day will immediately be separated from other employees, customers, and visitors, and sent home.

### **COVID-19 Reporting & Response Internal Procedures**

In order to maintain a safe working environment for all employees and the general public, an internal reporting procedure in the event of a COVID-19 exposure within a tribal facility is crucial and will elicit the proper accountability and response from the Hopi Tribal Leadership.

It is encouraged and expected that every Hopi Tribal employee will take proper precautions to minimize the risk of transmission, while understanding that there are some variables are beyond individual control.

The following internal procedures have been developed for the Hopi Tribal Government with accompanying levels of response.

Reporting	Internal Procedure	Actions & Communication
Self-Reporting	<p><b>Report to Supervisor</b> Supervisor will fill out the COVID-19 Risk Management Survey to determine next steps.</p> <p><b>Report to DHHS</b> DHHS will conduct contact tracing and submit contact tracing form to HR for verification of testing disclosure form submission.</p> <p><b>Continuing Operations Plan:</b></p> <ul style="list-style-type: none"> <li>• <u>Designee Assigned</u>, if necessary.</li> <li>• <u>Identify &amp; Assign</u> list of immediate action items; meetings, deadlines, reports, tasks pending, etc.</li> <li>• <u>Telework assignment</u>; include issuing necessary equipment and access.</li> </ul>	<p><b>Depending on the level of concern;</b></p> <p><b><u>Level 1:</u></b> return to duty, <u>General Awareness Announcement</u>. Reinforcement of ALL safety precautions continue.</p> <p><b><u>Level 2:</u></b> Employee sent home, self-quarantine with required testing and results for a return to work date.</p> <p><b><u>Level 3:</u></b> Employee (&amp; exposed employees) sent home, self-quarantine with required testing and results for a return to work date.</p> <p>Deep cleaning scheduled, dates of office environment closure and return to work.</p> <ul style="list-style-type: none"> <li>• DHHS and HHCC contact tracing</li> </ul>
<p><b>Reporting on an employee</b> *internal or external</p>	<p><b>Report to Supervisor</b> Supervisor will make note, serve the general memorandum to risk management for record.</p> <p><b>Report to DHHS</b> DHHS will conduct contact tracing and submit contact tracing form to HR for verification of testing disclosure form submission.</p>	<p><b>Level 1 Announcement:</b> General awareness announcement. Reinforcement of ALL safety precautions continue.</p>

### General Awareness Announcement

The following message, prompted by the level of response required, will be delivered either through email or by a program supervisor:

*All employees are instructed to take extra precautions, to wear face coverings that completely cover your mouth and nose, wash your hands with soap and water for 20 seconds, sanitize or disinfect your work areas, including high touch surfaces, and maintain social distancing of keeping 6 feet of space between you and other persons.*

**Level 2 & 3** will require supervisor directives to employees and may include the General Awareness Announcement.

## Contact Tracing

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Consistent with the Hopi Tribal protocols for *Contact Tracing, Case Management, and Community Outreach for COVID 19*, which can be found in [Appendix F](#), the Hopi Tribal Government is supportive of contact tracing among staff, community members and faculty.

Since the beginning of the COVID-19 pandemic the Hopi Tribe has worked in collaboration with the Hopi Healthcare Center (HHCC) to develop a framework for contact tracing which includes the elements listed below:

- **Reporting of test results** – As noted above, the Tribe will ensure that COVID-19 test results are reported in accordance with Contact Tracing and Case Management and Community Outreach protocols.
- **Logging of close contacts** – All staff will be required to log their close contacts on a daily basis and to maintain such logs in the event there is a need to support contact tracing.
- **Outreach assistance** – The PHA from the Department of Health and Human Services will assist the Hopi Healthcare Center with contacting staff identified during contact tracing.<sup>18</sup>

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<sup>18</sup> See Hopi Toolkit “**HOPi Tribe Contact Tracing, Case Management, and Community Outreach for COVID 19**” for more details regarding the protocols for contact tracing and case management.



## *Travel Restrictions*

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**Phase One:** Only *Essential Travel* will be permitted, and Hopi Tribal employees will be expected to adhere to the CDC guidelines regarding symptom monitoring and isolation following travel.

**Phase Two and Phase Three:** *All Travel* can resume however Hopi Tribal employees will be expected to adhere to CDC guidelines regarding symptom monitoring and infection identification following travel.

### **Post-Travel Guidance**

Tribal employees may be exposed to COVID-19 during their travels and although an individual might feel well and not experience or exhibit any symptoms, he or she can still be contagious and able to spread the virus to others. Consequently, this individual, as well as his or her travel companions (including children) pose a risk to family, friends, and the community for 14 days after being exposed to the virus. Regardless of where an individual employee may have traveled or what activities he or she engaged in during the trip, tribal employees are required to take the following actions to protect others from getting sick upon their return:

- When around others, stay at least 6 feet (about 2 arms' length) from other people who are not from your household. It is important to do this everywhere, both indoors and outdoors.
- Wear a mask to keep your nose and mouth covered when you are outside of your home.
- Wash your hands often or use hand sanitizer (with at least 60% alcohol).
- Watch your health and look for symptoms of COVID-19. Take your temperature if you feel sick.

### **Travel Restrictions for Unvaccinated Employees**

Tribal employees who are not fully vaccinated are restricted from any travel off-reservation to maximize protection from the COVID-19/Delta/Omicron variant and prevent possible spreading it to others.

Additionally, Hopi Tribal employees may be expected to follow certain recommendations or requirements after travel. See <https://www.cdc.gov/coronavirus/2019-ncov/travelers/travel-during-covid19.html> for more detailed guidance.

## Quarantine and Isolation:

Quarantine and isolation are building blocks in the detect and response framework to stem unchecked viral transmission. Individuals who have been diagnosed with COVID-19 will be subject to isolation in their current residence. Individuals who are symptomatic or have significant exposure to COVID-19 (identified through self-screening, daily on-site screening, or contact tracing) are required to quarantine for 5 calendar days and monitor their symptoms. Quarantine is strongly recommended for individuals traveling to/from geographic areas with significant community transmission. Any cases of confirmed COVID-19 or Persons Under Investigation for COVID-19 will be reported to the Public Health Authority.

<p><b>CALCULATING ISOLATION</b></p> <p><i>Day 0 is your first day of symptoms or a positive viral test. Day 1 is the first full day after your symptoms developed or your test specimen was collected. If you have COVID-19 or have symptoms, isolate for at least 5 days.</i></p>			
<p><b>IF YOU tested positive for COVID-19 or have symptoms, regardless of vaccination status</b></p>	<p><b>Stay home for at least 5 days</b> Stay home for 5 days and <a href="#">isolate</a> from others in your home.</p> <p>Wear a well-fitted mask if you must be around others in your home.</p> <p><a href="#">Do not travel.</a></p>	<p><b>Ending isolation if you had symptoms</b> <a href="#">End isolation after 5 full days</a> if you are fever-free for 24 hours (without the use of fever-reducing medication) and your symptoms are improving.</p> <p><b>Ending isolation if you did NOT have symptoms</b> <a href="#">End isolation after at least 5 full days</a> after your positive test.</p> <p><b>If you were severely ill with COVID-19 or are immunocompromised</b> You should isolate for at least 10 days. <a href="#">Consult your doctor before ending isolation.</a></p>	<p><b>Take precautions until day 10</b></p> <p><b>Wear a mask</b> Wear a well-fitted mask for 10 full days any time you are around others inside your home or in public. Do not go to places where you are unable to wear a mask.</p> <p><a href="#">Do not travel</a> Do not travel until a full 10 days after your symptoms started or the date your positive test was taken if you had no symptoms.</p> <p><b>Avoid being around people who are at high risk</b></p>

## CALCULATING QUARANTINE

*The date of your exposure is considered day 0. Day 1 is the first full day after your last contact with a person who has had COVID-19. Stay home and away from other people for at least 5 days.*

<p><b>IF YOU were exposed to COVID-19 and are NOT up-to-date on COVID-19 vaccinations</b></p>	<p>Stay home and <a href="#">quarantine</a> for at least 5 full days. Wear a well-fitted mask if you must be around others in your home. <a href="#">Do not travel</a>.  Get tested at least 5 days after you last had close contact with someone with COVID-19, even if you don't develop symptoms.</p>	<p>If you develop symptoms isolate immediately and get tested. Continue to stay home until you know the results. Wear a well-fitted mask around others.  Watch for symptoms until 10 days after you last had close contact with someone with COVID-19.</p>	<p>It is best to avoid travel until a full 10 days after you last had close contact with someone with COVID-19. <b>If you must travel during days 6-10, <a href="#">take precautions</a>.</b>  Wear a well-fitted mask for 10 full days any time you are around others inside your home or in public. Do not go to places where you are unable to wear a mask.  <b>Avoid being around people who are at high risk.</b></p>
<p><b>IF YOU were exposed to COVID-19 and are <a href="#">up-to-date</a> on COVID-19 vaccinations</b></p>	<p><b>No quarantine</b> You do not need to stay home <b>unless</b> you develop symptoms.  Get tested at least 5 days after you last had close contact with someone with COVID-19, even if you don't develop symptoms.</p>	<p>If you develop symptoms <a href="#">isolate</a> immediately and get tested. Continue to stay home until you know the results. Wear a well-fitted mask around others.  Watch for symptoms until 10 days after you last had close contact with someone with COVID-19.</p>	<p>Wear a well-fitted mask for 10 full days any time you are around others inside your home or in public. Do not go to places where you are unable to wear a mask.  <a href="#">Take precautions if traveling</a>.  <b>Avoid being around people who are at high risk</b></p>
<p><b>IF YOU were exposed to COVID-19 and had confirmed COVID-19 within the past 90 days (you tested positive using a viral test)</b></p>	<p><b>No quarantine</b> You do not need to stay home <b>unless</b> you develop symptoms.</p>	<p>Watch for symptoms until 10 days after you last had close contact with someone with COVID-19.  <b>If you develop symptoms</b> <a href="#">isolate</a> immediately and get tested. Continue to stay home until you know the results. Wear a well-fitted mask around others.</p>	<p><b>Wear a mask</b> Wear a well-fitted mask for 10 full days any time you are around others inside your home or in public. Do not go to places where you are unable to wear a mask.  <a href="#">Take precautions if traveling</a>  <b>Avoid being around people who are at high risk</b></p>

## Leaving Quarantine & Isolation

Retesting is *not* required; however, the following criteria must be met before an employee can be cleared to return to work:

- At least 5 days have passed since he or she first had symptoms or if the individual is not experiencing symptoms then at least 5 days since he or she went to get tested.
- At least 24 hours has passed since he or she last had a fever without using fever-reducing medicine.
- The individual's symptoms have improved.
- The individual will comply with wearing a mask for 5 additional days when around other people.

Once each of these criteria have been met, an individual is considered to no longer be a threat to infect others. The Department of Health and Human Resources (DHHS) has developed the form found in [Appendix G](#) for clearance as a condition of return for employees. The Public Health Authority (PHA) will review all clearances for staff who are to subsequently return to work and provide a copy of this clearance to the Office of the Executive Director and the Office of Human Resources.

Additionally, the checklist found in [Appendix E](#) should be used by employees to ensure that each of the listed criteria above have been met prior to returning to work.

## *Vulnerable Staff at High Risk*

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The Hopi Tribe recognizes that members of staff may be at high risk for COVID-19 or may reside in the same household with someone who is at high risk or have extenuating circumstances that may require a reasonable degree of accommodation. Consequently, the Hopi Tribal administration, where possible, will offer reasonable accommodations to staff who are high risk for COVID-19. Staff who are high risk for COVID-19 may request an accommodation by completing the Hopi Tribe's [Reasonable Accommodations Request Form](#)<sup>19</sup> found in [Appendix H](#).

Requests for accommodations will be reviewed by the Executive Director and the Director of the Office of Human Resources who will work in an iterative manner with the individual to identify an appropriate accommodation. Accommodations may include teleworking.

The Hopi Tribal Government encourages staff who are high risk for COVID-19 or who live in the same household with someone who is at high risk for COVID-19 to seek such an accommodation by completing a Request for [Reasonable Accommodations](#).

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<sup>19</sup> This same form can be used to make a Reasonable Accommodation for employees who have School aged children (as distinct from Childcare Aged children) or other extenuating circumstances that require them to have a modified work schedule.

The Hopi Tribe provides comprehensive health insurance coverage for its employees including additional virtual care options and an online resource center. The Hopi Tribe remains committed to robust employee benefits and has not altered or reduced its employee leave or benefits to date.

All full-time employees are eligible to receive up to 80 hours of additional paid leave to be used for COVID-19 related situations, including illness, quarantine, isolation, or family care needs. Part-time employees are eligible for up to the number of hours that such employees work, on average, over a two (2) week period. This one-time allowance of additional paid leave is meant to reduce the need for employees to use other paid leave, such as vacation or personal leave, in order to care for themselves or a family member impacted by COVID-19. However, should subsequent COVID-19 related situations arise, employees will be required to utilize their own Sick and Annual leave and Leave without Pay as indicated within the *Hopi Tribe Personnel Policies & Procedures*. See [Appendix J: Coronavirus Emergency Leave Policy](#) for full details regarding this policy.

### **Counseling and Psychological Services**

The Hopi Tribe provides comprehensive health insurance coverage for its employees including additional virtual care options and an online resource center. The Hopi Tribe remains committed to robust employee benefits and has not altered or reduced its employee leave or benefits to date.

Counseling and Psychological Services are offered under the Hopi Tribe's insurance<sup>20</sup> and covers a wide range of mental health services. Following the onset of the COVID-19 Pandemic many services have shifted to tele-counseling and supplemented traditional offerings with programming and services responsive to the mental health needs of individuals navigating the pandemic. This shift included the development of a robust resource page with information for all employees coping with anxiety, stress, and other challenges.

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<sup>20</sup> See *Annual Leave*, page 44 Section 4 benefits: Sick leave and annual leave policy of Hopi Tribe Personnel Policies & Procedure Manual for more guidance  
Also see 2021 Employee benefits guide and the Directory of Service Providers guide.

The intent of this policy is to provide for up to two weeks of emergency paid sick leave and modified emergency family medical leave to address the Coronavirus pandemic, which was declared to be a national health emergency on March 13, 2020. This policy applies to all Regular, Appointed and Temporary employees of the Hopi Tribe. The (80) hours of emergency paid sick leave under this policy applies only one time per employee.

### **Two-Week Emergency Paid Sick Leave**

- A. Emergency Paid Sick Leave is available to each eligible Employee to use in the event the Employee is unable to work (or telework) because:
1. The employee is subject to a Federal, State, local or Tribal quarantine or isolation order related to COVID-19.
  2. The employee has been advised by a health care provider to self-quarantine due to concerns related to COVID-19.
  3. The employee is experiencing symptoms of COVID-19 and seeking a medical diagnosis.
  4. The employee is caring for an individual who fits within the parameters of subsection (1), (2) or (3) above, regardless of whether such individual is an employee of the tribe.

Symptoms will be recognized per current CDC guidelines. Self-quarantine under subsection (2) may include precautionary measures directed by the Employee's treating physician or the Hopi Tribe's Department of Health and Human Services Director for individuals who have not yet experienced symptoms but are at high risk for serious health conditions.

- B. The amount of paid sick leave to which an employee is entitled under this policy shall be as follows:
1. Full-time employees shall be eligible for up to eighty (80) hours of emergency paid sick leave under this policy.
  2. Part-time employees shall be eligible for emergency paid sick leave up to the number of hours that such employees work, on average, over a two (2) week period.
  3. Unused emergency paid sick leave shall expire on December 31, 2020, unless this Policy is extended.
  4. Emergency paid sick leave provided to an Employee under this policy shall cease beginning with the employee's next scheduled work shift immediately following the termination of the need for emergency paid sick leave under Section A.

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<sup>21</sup> **Effective Date:** This Policy shall take effect on the date of adoption. **Sunset:** This Policy shall expire on December 31, 2021 unless extended or terminated early for lack of CARES Act funding.

## **Emergency Family Leave for Childcare**

- A. Emergency Family Leave for Childcare is available to each eligible employee to use in the event the Employee is unable to work (or telework) because the employee's minor child is at home and in need of care while the child's school or childcare provider is closed due to the COVID-19 public health emergency.
- B. An eligible employee shall be entitled to up to twelve (12) work weeks of Emergency Family Leave for Childcare because of a qualifying childcare need as defined in Section A. above.

## **Paid Leave**

- 1. The first two (2) weeks (80 hours) for which an employee takes emergency family leave for childcare under this policy shall consist of paid leave. See limitations below:
- 2. After the initial two weeks is used as either type of leave, an employee that takes emergency family leave for childcare under this policy will be:
  - a. Paid an amount that is not less than two-thirds of an employee's regular rate of pay.
  - b. Paid based on the average number of hours the employee would otherwise be normally scheduled to work.
- 3. An Employee may elect to substitute any paid time off, if available, for any part of the twelve (12) week period of leave under this policy.

## **Procedure for all Coronavirus Emergency Leave**

- 1. To request Emergency Sick Leave or Emergency Family Leave, employees must notify their Supervisor immediately, upon knowing emergency sick or family leave is required. The employee is responsible for the following:
  - a. Submitting the emergency leave request to the Office of Human Resources. See [Appendix J: Coronavirus Emergency Leave Form](#)
  - b. Completing and submitting the employee's timesheet / emergency leave request to Payroll

Employee will maintain weekly communication with their supervisor, unless he or she has provided a health care provider certification covering a specified period of leave.

Employee will maintain weekly communication with the supervisor to provide an update on the progress of their health status prior to returning to work.

- 2. The supervisor is responsible for the following:
  - a. Ensuring that the employee's timesheet / emergency leave request is submitted to Payroll.

Supervisor will maintain weekly communication with Human Resources to update on the progress of the employee and return to work status.



**Limitations**

If the employee utilizes two weeks of emergency paid sick leave under this policy, that leave counts as the first two (2) weeks of the emergency paid family leave for childcare. The maximum benefit of the two weeks (80-hours for full time employees) emergency paid sick leave is applied one time per employee.

**Funding**

Paid leave made available to eligible employees pursuant to this Policy is an eligible expenditure of the Hopi Tribe's Coronavirus Relief Fund allocation received in accordance with Section 5001 of the Coronavirus Aid, Relief and Economic Security Act (the "CARES Act"). Paid leave offered in accordance with this Policy is a necessary and unbudgeted disaster relief and mitigation expenditure that does not constitute compensation for services.

The Hopi Tribe may need to fill certain employment positions in which the employees will come in contact with individuals who are known to be COVID-19 positive and may be symptomatic. As the Tribe moves forward with reopening, there also may be a need to fill employment positions where the risk of exposure to COVID-19 is increased.

During the COVID-19 emergency, and in compliance with the Transfers and Promotions Policy, the Hopi Tribe is exercising its authority to assign employees to other duties as needed to accomplish Tribal/Department/Program goals and objectives. The Tribe may reassign an employee or require an employee to transfer to a position that the Tribe needs to fill and for which the employee meets the Tribe's qualifications. The Tribe will take all reasonable steps to make sure the reassignment can be carried out in accordance with the Health and Safety Policy and recommended federal guidelines for safe work conditions.

Due to the demands on the Hopi Tribe for services during the public health emergency, reassignment will generally take precedence over recruitment, transfers and promotions except in circumstances where special skills are required.

### **Reassignment of an Employee**

Decisions to reassign an employee within a department/program will be made by the Department Director and the Director of the Office of Human Resources. Once a reassignment decision has been made, Human Resources will communicate with the employee being reassigned.

A reassignment shall be treated as a transfer to the new position. Compensation and benefits shall be based on the classification of the new position, but no employee shall have their salary reduced as a result of a reassignment. In certain situations, Hazard Pay may be available.

### **Identifying and Filling Vacancies by Reassignment**

Where a department/program is facing increasing demands for its services and experiences resource pressures, it must first seek to meet the demands from the reassignment of employees internally.

If the department/program determines its internal staffing resources are insufficient to meet its work demands, the department/program must provide justification to the Office of Human Resources to secure additional staffing resources. The Office of Human Resources will work with the Department Director to determine the number of staff to be reassigned (if any) and if additional resources are needed after employees are reassigned.

### **Duration of Reassignment**

Reassignments are intended to be limited in duration and the employee generally will be returned to their home department/program following the conclusion of the reassignment. However, reassignments may end prior to their conclusion when:

- The department/program requiring the reassignment chooses to end the reassignment because additional staffing is no longer needed to meet the goals and objectives of the department/program.

When reassignments are ended early, as much notice should be given as possible, but not less than a week, and reassigned employees will return to their home department/program on a date agreed to by both the department requiring the reassignment and the home department.

During a period of reassignment, an employee remains subject to the Hopi Tribe's Personnel Policies and Procedures, including the Corrective Counseling & Disciplinary Action Policy and the Termination Policy.

## **Appeal**

In the event an employee is selected for reassignment and wishes to appeal the decision, the employee is required to file an appeal with the Office of Human Resources within 48 hours of the reassignment being communicated to the employee. Please utilize the [Reassignment Appeal Form](#) found in [Appendix I](#). The Director of the Office of the Human Resources will consider the appeal and the decision made on the employee's appeal will be binding and final. The decision on the appeal shall be communicated to the employee in writing no more than 24 hours after the appeal is received by the Office of Human Resources.

Monitoring health-related absenteeism among workers is especially useful for assessing the occurrence of some illnesses, such as COVID-19. Health-related workplace absenteeism data adds to the traditional COVID-19 surveillance conducted by the Hopi Department of Health and Human Services (DHHS) and the Hopi Healthcare Center (HHCC), which is mainly based on disease reporting from doctors and laboratory testing.

During the COVID-19 Pandemic however there is an increased probability that people will become ill, but not seek medical attention. Furthermore, as people who are sick are less likely to go to work, absenteeism data can be a useful resource for monitoring outbreaks. It is known that the amount of health-related absenteeism is likely to be strongly correlated to the amount of influenza-like illness occurring. Consequently, absenteeism provides additional information to measure the overall impact of outbreaks and pandemics.

To this end, Department Directors and Program Managers are encouraged to monitor trends in health-related workplace absenteeism among their own employees within the Hopi Tribal Government using the [Employee Absence Monitoring Sheet](#) found in [Appendix M](#).

Monitoring these trends can be beneficial as it can help doctors, other healthcare personnel, employers and workers be more informed about disease occurrence and severity during a pandemic and during seasonal epidemics. It can also help Public Health Authorities (PHAs) better target prevention messages and evaluate how well pandemic control measures work.

The Hopi Tribe recognizes that some employees must perform hazardous duties or work in hazardous locations, in order to provide essential services for and on behalf of the Hopi Tribe. The Hopi Tribe recognizes that employees must be compensated for their willingness to take on hazardous duties.

### **Definition of Hazard Pay**

Hazard pay by definition means additional pay for performing hazardous duties or work involving risk and physical hardship. Work duties that cause extreme physical discomfort and distress which cannot be adequately alleviated and determined to impose a physical hardship can be deemed hazardous.

### **Eligibility for Hazard Pay**

Hazard pay compensates an employee for duties that could result in serious illness, injury or death. Hazard pay is pay in addition to regular hourly wages or a salary. There is no law requiring employers to pay hazard pay; both the amount of the pay and the conditions under which it is paid are determined by the Hopi Tribe in its sole and sovereign discretion.

### **Scope**

All employees who are assigned by the Hopi Tribe to Essential positions during the COVID-19 pandemic whose job duties (1) require direct contact with individuals who are known to be diagnosed with COVID-19, (2) require contact with individual(s) who are known to be exposed to COVID-19 or (3) have a high risk of individual exposure while working within the Hopi community are eligible to earn hazard pay. A clear agreement between the supervisor and the employee regarding hazardous duties to be performed must be provided to the Office of Human Resources prior to earning hazard pay.

Hazard pay is not available to employees who are assigned to administrative duties or who serve as elected or appointed officials. Hazard pay also is not available to employees who may be exposed to another employee of the Hopi Tribe who contracts or tests positive for COVID-19.

Employees eligible for hazard pay will receive \$35 (thirty-five) dollars per an 8-hour workday, per an 8-12-hour work shift or per request to work for on-call employees. For example, if an on-call social worker is asked to visit two Tribal members who reside in different homes and who have been diagnosed positive with COVID-19, the social worker will receive \$35 in hazard pay, in addition to regular compensation for the time spent completing the two requested visits. Employees may not receive more than \$35 per day or shift. Hazard pay is not in lieu of overtime or compensation time but rather an extra payment for employees working under dangerous conditions. Hazard pay will not be paid when the employee is on an unpaid leave of absence.

### **Taxes**

According to the Internal Revenue Service (IRS), hazard pay is considered taxable income. These amounts will be included on the employee's W-2.

## Procedures

Supervisors will develop a shift schedule. Supervisors will be responsible for providing payroll a signed shift schedule and submit the [Hazard Pay Bi-Weekly Timesheet](#) found in [Appendix L](#) for all employees that documents the hazard pay earned by all employees, including the dates/shifts worked, for the pay period. Payroll will enter and process for the payroll period. Any discrepancies are the responsibility of the supervisor. Any issues or late submissions will be corrected at the next payroll processed.

The Hopi Tribal Government will work closely with the Hopi Healthcare Center and the Hopi Emergency Response Team (HERT) to respond to and manage any outbreak of COVID-19 within the Hopi Tribal Complex. The specific interventions that will be taken to contain an outbreak will be determined by the Hopi Healthcare Center (HHCC), in collaboration with the Hopi Tribal Government Executive leadership. Interventions will be targeted to the specific size and nature of the outbreak and may include isolation and quarantine of potentially affected individuals, COVID-19 testing for potentially affected individuals, closure of all or part of a complex or building, or transitioning the entire complex or facility to tele-work.

### **Joint Emergency Response Plan**

The Joint Emergency Response Plan (JERP), which is currently being drafted includes an Infectious Disease Outbreak plan that, along with direction from the Hopi Healthcare Center, will guide the Tribe's response to a future COVID-19 outbreak. The JERP will enable the Tribal Government to manage its response to an outbreak by coordinating the actions, protocols, and procedures of the HERT, Hopi Healthcare Center and the Respective Emergency Operations Centers (EOCs). The JERP identifies the management process and flow of communication as well as roles and responsibilities so that all necessary actions are taken to recognize, verify and identify the characteristics of an outbreak which will enable the Tribe to take effective measures to control the incident or outbreak, limit its spread and prevent its recurrence.

The objectives of the Joint Emergency Response Plan include:

- Developing the response and coordination for an outbreak that incorporates Tribal response entities and other reservation-wide resources.
- Developing a communication strategy with a list of communication devices for both internal and external sources, to provide information to tribal entities, public health partners, other jurisdictions and the general public. This many include updates to websites as well as social media.
- Identifying the trigger points that may be used to close the Tribal Government facilities and/or limit activities and functions.
- Identifying the potential impact of absenteeism on Tribal Government operations.
- Identifying strategies to mitigate the potential impact and sustain Government operations.
- Reporting the rates of absenteeism and operational impacts being experienced to Tribal administration and leadership.

The Joint Emergency Response Plan provides for the following steps to be taken in response to an outbreak:

### **Mobilization Phase**

- Review the evidence and establish whether a significant outbreak / incident exists.
- Monitor the epidemiological progress of the incident/outbreak.

- Agree and coordinate policy decisions on the investigation and control of the outbreak and ensure the decisions made are implemented, allocating responsibility to specific individuals who will then be accountable for taking action.

### **Emergency Phase**

- Determine the resource implications of the outbreak/incident and how they will be met.
- Ensure that adequate communication arrangements are in place.
- Arrange for the necessary contact tracing, interviews, inspections and other investigations, such as samples to identify the nature, extent and source of the outbreak / incident.
- Prevent further cases of infection / illness by taking all necessary steps to ensure that the source of the outbreak is controlled and the risk of secondary person to person transmission is eliminated or minimized.
- Ensure that arrangements are in place for the appropriate treatment for those infected or affected by the outbreak.
- Establish liaison with local healthcare centers and hospitals which may experience an increased demand for services.



The Hopi Tribal Government will transition to telework if it determines that on-site operations and continuing to have staff within the Tribal Complex or facilities cannot be accomplished in a manner that protects the health and safety of the personnel. Such a decision would be made in close collaboration with the Hopi Healthcare Center.

A recommendation to transition to telework may come from either the Public Health Authority (PHA) or from the Hopi Emergency Response Team (HERT) who are charged with monitoring trends in conditions within the local community, including conditions that might warrant a transition to telework. Among the data points that these entities will monitor in connection with a potential transition to telework are the following:

### **External Data Points**

- Tribal or local government orders and directives (e.g., Government Shutdown Directives, Stay-at-home Executive Orders.)
- The trajectory of the percentage of positive tests at the state level, using the 14 day average – a material increase in the percent of positive tests indicating strong resurgence of COVID-19 may indicate a need to transition to telework.
- The trajectory of the percentage of positive tests at the local level (Hopi Health Care Center, Tuba City Regional Health Care Corporation), using the 14 day average – a material increase in the percent of positive tests indicating strong resurgence of COVID-19 may indicate a need to transition to telework.
- The bed and ICU capacity of local hospitals and Healthcare Centers – a material increase in occupancy of hospital beds and ICU beds that is likely to exceed surge capacity may indicate a need to transition to telework.
- Local Hospital access to PPE - material shortages of PPE for local hospitals may indicate a need to transition to telework.

### **Internal Data Points**

- The trajectory of the number of confirmed COVID-19 cases with a tribal facility, using 14 day average – a material increase in cases the trajectory of which is likely to outstrip testing, contact tracing, isolation and quarantine capacity on campus may indicate a need to transition to telework.
- The trajectory of the percentage of positive tests among staff, using the 14 day average – a material increase in percent positivity the trajectory of which is likely to outstrip testing, contact tracing, isolation and quarantine capacity of the tribe and may indicate a need to transition to telework. The weight attributed to this metric will take into account the overall number of tests conducted on the Hopi Reservation.
- Staffing levels for health, safety, and support functions – absentee rates due to illness that threaten ability to perform essential functions may indicate a need to transition to telework.

- Number of staff unable to work in-person or remotely due to illness – absentee rates due to illness threaten the ability to conduct business even in remote format may indicate a need to transition to telework.
- PPE supply issues for the Hopi Tribal Government – Material shortages in PPE supplies needed for continued care of staff may indicate a need to transition to telework.
- Access to COVID-19 testing – Material shortages in COVID-19 tests or testing supplies may indicate a need to transition to telework.

If the Hopi Tribal Government decides to implement its plans for telework. The decision to transition will be communicated to staff, stakeholders and the constituency using multiple communication platforms including email messages, Public Announcements and frequently asked questions on the Hopi Tribal Government's COVID-19 webpage.

Upon Implementation of the Hopi Tribal Government's plan for Telework, Employees will be required to fill out the [Telework Agreement Form](#) found in [Appendix K](#)

Recommendations from the Hopi Tribal Government Re-Opening Team include the development of policies, procedures, training, communications and awareness campaigns designed to promote compliance with the Hopi Tribe's COVID-19 health and safety measures and to enforce compliance when necessary.

The Hopi/CDC Communications Plan, (see *Hopi toolkit*) includes the deployment of the full scope of the Hopi Tribe's communication channels (print, digital, and physical) to deliver a wide range of content including, but not limited to general information, messaging, instructions/ expectations, and PSA video content.

The goals are to inform and inspire all members of the Hopi community to do their part to protect the health and safety of the public and to have fair and robust policies to enforce the Hopi Tribe's health and safety protocols. Ensuring the successful implementation of these health and safety protocols, and the associated changes in routines and behavior they warrant, will require consistent, continuous communication to the staff, and the public. In order to aid in this effort, the following tools and procedures are in place or are being developed:

- **COVID-19 Webpage**- Since March 2020, the Hopi Tribe has used its COVID-19 webpage as the primary vehicle for communicating updates about contingency planning and decision-making to internal and external stakeholders. This website will be refined further and repopulated with relevant policies and FAQs to provide consistent information to staff, and other stakeholders.
- **Communication platforms** - A comprehensive and inspirational communications campaign called “*We are Hopi, We are Strong*” was launched during the height of the COVID-19 Pandemic and included social media, video, radio, and web based messages urging adherence to safety protocols as a shared responsibility to which everyone in the Hopi community must contribute.
- **Visual cues** - Visual cues and communications that educate and reinforce new behaviors that align with social distancing guidelines have been developed and will be placed through the Hopi Tribal Complex and Facilities. This includes signage, banners, posters, and decals for tables and floors. These cues include information about how to wash and wear a face covering, symptoms, social distancing requirements, how to properly wash hands, items to disinfect in classrooms and meetings spaces, occupancy limits for spaces, pedestrian traffic patterns, and information specific to each of the social distance framework phases.
- **Training** - All staff, will be required to complete training to provide them the skills needed to live and work while maintaining their individual health, as well as the health of the community. Training will be delivered electronically, prior to individuals returning to work. Those who cannot access training prior to their return, will complete the training immediately upon reporting to work on their first day. The training covers basic information about COVID-19 to include symptoms and how the virus spreads, how to properly wear and clean a face covering, good hygiene practices, how to engage in

proper social distancing, and information about the Hopi Tribal Government's COVID-19 policies. The training is designed to counter any stigma associated with COVID-19<sup>22</sup>.

- **Compliance<sup>23</sup>** - While the Hopi Tribal Government will seek to educate, encourage, and inspire the members of the community to engage in behaviors that promote health and safety, the administration also recognizes the need to hold individuals accountable for conduct that violates the Tribe's health and safety protocols. The Tribal Government is developing fair and equitable interim conduct policies and policies applicable to employees that require compliance with important health and safety measures and provide for appropriate consequences for those who choose not to comply.

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<sup>22</sup> Respectful Workplace Policy within the Hopi Tribe Personnel Policies & Procedures Manual section 5 can be enacted in this instance.

<sup>23</sup> Health and Safety Policy can be enacted in the event of noncompliance. Furthermore, the Corrective Counseling Policy. Section 5 Performance and Professionalism of Hopi Tribe Personnel Policies & Procedures Manual can also be enacted in the event of non-compliance.

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## **Appendix A:**

### **Comments and Recommendations Form**



## **Appendix B:**

### **Cleaning and Disinfecting Buildings and Vehicles Guidance**





## Cleaning and Disinfecting Buildings and Vehicles Guidance

### Background:

As the tribe begins to reopen facilities and increase available services, proper cleaning and/or disinfecting of these areas is a key component to reduce the risk of COVID-19 spread. Ensuring these activities are done correctly, that the proper disinfectant is chosen, that the correct PPE is used, and that the schedule and focus of what and when facilities are cleaned is fundamental to ensure the risk of transmission of COVID-19 is minimized. CDC is working with tribal leadership to put into place guidance and recommendations that facilities management, staff, supervisors, housekeeping, drivers, and those at home can use to properly guide how to clean and/or disinfect their facilities or vehicles.

### CDC/Tribal Guidance:

The Tribe recognizes that different facilities (schools, businesses, homes, hotels, childcare) and vehicles will need to be evaluated for proper cleaning and disinfection and that routine housekeeping activities will differ from those when COVID-19 is present in a facility. The following guidance is provided as a framework for facility and vehicle cleaning and/or decontamination.

#### A. Cleaning vs. disinfecting

- a. While cleaning and disinfecting both reduce exposure to COVID-19, their functions are fundamentally. Cleaning refers to using soap and water to reduce the amount of COVID-19 on an object while disinfecting refers to using a chemical to kill COVID-19 on an object. Both are valid ways to reduce risk of COVID-19 exposure and should not be thought of as one better than the other. Rather, they each have their place depending on availability of water or disinfectant and the object or area being treated to reduce COVID-19 presence.

#### B. Facilities without known COVID-19 present

require the continuation of existing cleaning and disinfection practices that exist to maintain a healthy environment with the following recommendations:

- a. High touch surfaces or objects (including but not limited to doorknobs, light switches, phones, keyboards, desks, toilets, sinks, time clocks) will require disinfection more often.
- b. If items are in a childcare facility, use soap and water to clean rather than a disinfectant, they can be toxic if items are put in mouths.
- c. Make sure disinfectants chosen have been shown to kill COVID-19. A list of these can be found on the [EPA's N list Website](#).
- d. Soft, porous materials like cloth chairs, carpets, or rugs are more challenging to disinfect. If possible, remove from the facility.
- e. When vacuuming in the facility, perform when there are minimal people present (early in the morning or in the evening after people have left).
- f. Outside grounds or items do not require disinfection; only routine cleaning is required.
- g. PPE for cleaning includes gloves, gowns or work uniforms, and face coverings. Eye protection can be used if there is a risk of cleaning/disinfecting solutions splashing in the eyes.

#### C. Facilities with known COVID-19 exposure

require modified cleaning and disinfection practices to be made safe for access and usage.

- a. If the areas where the COVID-19 infected individual can be closed off, the rest of the facility may remain open and used.

## **Appendix C:**

### **Employee Disclosure Form**



Timothy L. Nuvangyaoma  
CHAIRMAN

Craig Andrews  
VICE-CHAIRMAN

### EMPLOYEE DISCLOSURE COVID-19 Diagnosis

I understand that the Tribe is working diligently to control and slow the spread of the coronavirus (COVID-19) on the Hopi reservation and in the Tribe's workplaces. Because the current coronavirus outbreak has created a national and tribal emergency, COVID-19 testing results must be disclosed to protect the public health and are not subject to the privacy protections that may apply to certain medical information. The Tribe will use its best efforts to limit information regarding COVID-19 test results to those individuals with a reasonable reason to know such information.

In the interest of the health and safety of my co-workers and others with whom I may have had contact on my worksite, I am disclosing the results of my COVID-19 Test as follows:

COVID-19 Test conducted at \_\_\_\_\_ on \_\_\_\_\_  
Facility / Home Test Kit Date

☐ Negative Results

☐ Positive Results

Date experiencing symptoms: \_\_\_\_\_ (indicate N/A if not applicable)

☐ I have tested positive for COVID-19 within the past ninety (90) days and do not need to get tested unless I develop new symptoms.

Date of previous positive test: \_\_\_\_\_

In accordance with the Hopi Tribe Personnel Policies & Procedures, if I am found reporting false information, I will be subject to disciplinary action up to and including termination from employment with the Hopi Tribe.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Employee Printed Name: \_\_\_\_\_

File: HR Confidential File

The Employee Disclosure form must be completed and submitted to the Human Resources Director via email at [LPawwinnee@hopi.nsn.us](mailto:LPawwinnee@hopi.nsn.us) or fax to 928-734-6611.

## **Appendix D:**

### **Self-Check and Daily Monitoring and Recommendations Form**

## Self-Check, Daily Monitoring & Recommendations

Areas to Monitor	STAY HOME	COMMUNICATE	STAY HEALTHY
<b>Temperature</b> (100-100.4 F signals a fever)	<b>Stay Home</b> <i>Report absence to Supervisor</i>	Keep your supervisor informed of ANY anticipated or unexpected travel OR signs of illness.	Stay hydrated and wear appropriate clothing for the weather conditions.
<b>Self-Monitor for Flu Like Symptoms</b>	<b>Stay Home if you exhibit;</b> <input type="checkbox"/> Dry Cough <input type="checkbox"/> Sore throat <input type="checkbox"/> Shortness of Breath or <input type="checkbox"/> Difficulty Breathing	Stay aware and monitor your daily health, paying attention to any signs of fatigue, headaches, or onset of flu-like symptoms.	Keep your immunity up by choosing healthy food options, exercising, and getting enough rest.
<b>Exposure COVID-19</b>	<b>Stay Home if you have been exposed to anyone who has tested positive for COVID-19.</b>	Call the Hopi Health Care Center Hotline at 928-737-6188 to get health care professional recommendations to COVID-19 related concerns.	If directly exposed to COVID-19, seek the advice of health care professionals and stay home to limit potential transmission for the appropriate number of days recommended by the CDC or physician.
<b>Exposure Flu-like symptoms</b>	<b>Stay Home if you have been exposed to anyone with flu-like systems.</b>	Call your primary care doctor AND if you exhibit any COVID-19 symptoms, schedule COVID-19 testing while taking every precaution to limit exposure.	If experiencing flu-like symptoms, stay home. *cough into a tissue or other material that can be easily discarded or sanitized.

## General Daily Practices & Standards of Care

- Wear a face covering that completely covers mouth and nose.
- Wash your hands with soap for 20 seconds.
- Practice social distancing (maintain 6 feet apart).
- Regularly sanitize workspace and high touch surfaces.

## **Appendix E:**

### **Checklist for Leaving Isolation & Quarantine**

## **Checklist for Leaving QUARANTINE**

For individuals who are vaccinated:

- ☐ I am fully vaccinated and do not need to quarantine. However, I agree to get tested from the 5<sup>th</sup> day of the last contact with the COVID-19 positive person.
- ☐ I will wear a mask for 10-days from the last time I was in contact with a positive individual.

**If you checked *both* boxes, you are no longer considered at risk of infecting others. You can go back to work!**

For individuals who are unvaccinated or are not overdue to receive their booster dose:

- ☐ I am either unvaccinated or not up-to-date on my COVID-19 vaccination and will need to quarantine for 5 days from the last time I was in contact with a positive individual. (Please note date of exposure: \_\_\_\_\_)
- ☐ If I remained asymptomatic during quarantine, I got tested at least 5 days from the last time I was in contact with a positive individual and remained home until I received my results. If I developed symptoms (fever, chills, cough, trouble breathing, fatigue, body aches, headache, sore throat, congestion or runny nose, nausea or vomiting, diarrhea, or a new loss of taste and smell) during quarantine, I got tested immediately and remain home until I received my results.
- ☐ In addition to the 5 day at home quarantine, I will continue to wear a mask for 5 additional days when around other people.
- ☐ I have not been exposed to any new people that have COVID-19 during my quarantine

**If you checked *all 4* boxes, you are no longer considered at risk of infecting others. You can go back to work!**

For individuals that tested positive within the past 90-days (regardless of vaccination status):

- ☐ I tested positive within the past 90-days and completed my isolation. (Date of Last Day of Isolation: \_\_\_\_\_)
- ☐ I have not developed any new symptoms.
- ☐ I will wear a mask for 10-days from the last time I was in contact with a positive individual.

If you checked **all 3 boxes**, you are no longer considered at risk of infecting others. **You can go back to work!**

Please remember to:

- Continue social distancing. Keep at least 6 feet between you and other people and don't go to or host parties or other group events
- Cover your mouth and nose with a face covering when you are around others or when you go out in public

Wash your hands often with soap and water for at least 20 seconds or use hand sanitizer with at least 60% alcohol if you can't use soap and water

- Cover your cough or sneeze with a tissue, then throw the tissue away and wash your hands

### **Checklist for Leaving ISOLATION**

- ☐ Regardless of vaccination status, it has been at least 5 days since I experienced my first symptom or, if I am not experiencing symptoms, it has been at least 5 days since I tested positive.
  - If experiencing symptoms, what date they started: \_\_\_\_\_
  - If **not** experiencing symptoms, what date did you get tested (**if results were received on a different day put the day you actually went to get tested, not the day you received your results**): \_\_\_\_\_
- ☐ Overall my symptoms have improved and I am feeling better.
- ☐ It's been at least 24 hours since I last had a fever without using fever-reducing medicine.
- ☐ In addition to the 5 day at home isolation, I will continue to wear a mask for 5 additional days when around other people.

If you checked **all 4 boxes**, you are no longer considered at risk of infecting others. **You can go back to work!**

Please remember to:

- Continue social distancing. Keep at least 6 feet between you and other people and don't go to or host parties or other group events.
- Cover your mouth and nose with a face covering when you are around others or when you go out in public
- Wash your hands often with soap and water for at least 20 seconds or use hand sanitizer with at least 60% alcohol if you can't use soap and water
- Cover your cough or sneeze with a tissue, then throw the tissue away and wash your hands



## **Appendix F:**

### **Hopi Tribe Contact Tracing, Case Management, and Community Outreach**

## Hopi Tribe Contact Tracing Case Management & Community Outreach for COVID-19

Coronavirus disease 2019 COVID-19 is a highly contagious respiratory illness that spreads from person to person. When infected, a person may not exhibit symptoms and consequently may not know they have the virus and can pass the virus unknowingly to others. The first case of COVID-19 in the United States was reported on January 21, 2020. The first reported case occurred on March 30, 2020 in the Village of Bacavi. There is currently no treatment or vaccine to protect against COVID-19 and the best known way to prevent contracting COVID-19 or transmitting it to others is to, among other things, practice social distancing, hand hygiene, and wearing masks. The rapid spread of COVID-19 had infected cities, towns and tribal reservations, with the first case of COVID-19 in the State of Arizona being reported on January 26, 2020 and reaching the boundaries of the Hopi Reservation in March 2020.

The Hopi Tribe consists of 12 independent villages that is comprised of traditional village structures as well as modern living structures that are large and spread out over several neighborhoods, as such, in addition to distance hygiene, and facial covering the early identification and isolation of COVID-19 infected individuals are key measures to prevent further spread of their respiratory infection within the Hopi community. (Source: 2020, Hopi Response Plan)

Since the first positive COVID-19 case on the reservation the Hopi Tribe has taken a proactive approach in engaging all levels of the community in order to control and eventually prevent further spread of COVID-19.

It is important to provide meaningful evidence-based recommendations and tools that are fully reflective of the needs and priorities of members of the community. In order to develop recommendations, guidance, and protocols that will be used by the Hopi Tribe to prevent further spread of COVID-19, it is important to engage key leadership within the Hopi health and social service areas to every extent possible.

This draft document was prepared by Centers for Disease Control and Prevention (CDC) Hopi-1 Deployment Contact Tracer with input from key representatives and staff from the Hopi Tribe, Hopi Tribal Health Department, and the Hopi Health Care Center, and drawing from a range of other related and existing resources from the Indian Health Service Center in order to provide information specific to the Hopi Tribe and its areas of operations.

This draft document outlines steps, strategies and procedures for disease prevention and intervention based on tried and true approaches to infectious disease control and chronic disease management. The information contained herein should not be taken official United States Government guidance or mandate.

### **Hopi Priority Objectives:**

1. Enhance the capacity of case management and contact tracing through support for case management and contact tracing with coordination of the Hopi Health Clinic Public Health Nursing Unit (PHN) and the Hopi Tribe Community Health Representatives (CHR);
2. Support training and cross training of Hopi Tribe to scale-up-

## **Appendix G:**

### **Return to Work Clearance Form**



**Office of the Chairman**

Timothy L. Nuvangyaoma

**Office of the Vice Chairman**

Craig Andrews

**Important Notice to Tribal Employers from Hopi Department of Health & Human Services**

**Subject:** Retesting of COVID - 19 Positive Employees – March 2022

Per guidance from and in alignment with the Hopi Healthcare Center (HHCC), the Centers for Disease Control and Prevention (CDC), state and local health departments, and the Occupational Safety and Health Administration (OSHA) workplace guidance for COVID-19, re-testing of positive or suspected COVID-19 employees before they return to work, as well as providing letters of clearance for returning to work is not recommended.

The reason for not re-testing is that an individual may continue to test positive on a viral test long after they have recovered from COVID-19. These dead viral particles will result in a positive viral test even though they cannot actively infect others. The HHCC strongly encourages employers to use the CDC criteria listed below even if they continue to test positive. Once they meet these three criteria, they are no longer considered infectious to others. However, if the employee was severely ill (hospitalized) or is immunocompromised, please advise them to visit their primary care provider before returning to work.

The “checklist” below will be used by employers to determine when an employee who is confirmed or suspected to have COVID-19 is eligible to return to work safely.

For additional questions, please call the Hopi Health Care Center COVID-19 hotline (928) 737-6187.

**EMPLOYEE NAME PRINT:** \_\_\_\_\_

\_\_\_\_ It has been at least ten days since I first had symptoms or received my positive diagnosis if “I’ve not had symptoms” (please note date of first symptoms: \_\_\_\_\_)

\_\_\_\_ Overall, my symptoms have improved, and I am feeling better.

\_\_\_\_ It has been at least 72 hours since I’ve had a fever without using fever-reducing medication.

“If all three boxes have been checked, you are no longer considered at risk to infect others.”

“You can go back to work!”

**Please remember to:**

- Continue physical distancing. Keep at least six feet between you and other people. Do not go to, host or attend other group events or parties.
- Cover your mouth and nose with a cloth face covering when you are around others or when out in public.
- Wash your hands often with soap and water for at least 20 seconds or use hand sanitizer with at least 60% alcohol if soap and water are not available.
- Cover you cough or sneeze with a tissue, then throw the tissue in the trash and wash your hands.

**EMPLOYEE SIGNATURE:**

**DATE:**

**Reviewed by Public Health Authority (initials):**

## **Appendix H:**

### **Reasonable Accommodations Request Form**



## REASONABLE ACCOMMODATION/WORKPLACE ADJUSTMENT REQUEST

If your COVID-19 related request is based on an underlying medical condition, you may be asked to submit documentation from a health care provider. Email medical documents to [HumanResources@hopi.nsn.us](mailto:HumanResources@hopi.nsn.us) or fax to (928) 734-6611.

Employee Information:

First Name:	Last Name:
Program:	Title:

Contact Information:

Email:	Work Phone:	Personal Phone:
Preferred Method of Contact: <input type="checkbox"/> Email <input type="checkbox"/> Work Phone <input type="checkbox"/> Personal Phone		

Supervisor Contact Information:

First Name:	Last Name:
Email:	Work Phone:

Please provide details about your job: (Responsibilities and job duties)

The U.S. Centers for Disease Control and Prevention (CDC) advises that although everyone is at risk for getting COVID-19 if exposed, some people are more likely than others to become severely ill. People at increased risk for severe illness include older adults and people with certain underlying medical conditions. Please check the CDC website for the latest information on individuals who are at increased risk of severe illness from COVID-19.

Are you requesting a workplace adjustment because you are an older adult and are therefore at increased risk as described by the CDC?

☐ Yes ☐ No

Are you requesting a reasonable accommodation based on your underlying medical condition and/or disability?

☐ Yes ☐ No

Is the condition and/or disability temporary or permanent?

☐ Temporary ☐ Permanent

If the condition and/or disability is temporary, what is the anticipated date you will no longer need the accommodation (s)?

Month  Day  Year

Are you requesting a workplace adjustment and/or leave of absence for any of the following circumstances which are unrelated to you being at increased risk?

- You are a caregiver for an individual with a disability;
- There is someone in your household who has a medical condition or disability;
- Childcare concerns

☐ Yes ☐ No

If yes because your request is not based on your age, medical condition and/or disability or being in the CDC's increased risk category; you do not qualify for the disability accommodation or workplace adjustment process for employees in that category. You may request workplace adjustments by contacting your Program Director and Human Resources for assistance.

Are you requesting to work remotely?

☐ Yes ☐ No

If "no", please describe your request for accommodation or workplace adjustment.

Medical Information received for requests due to an underlying medical condition and/or disability is confidential. It will only be shared as needed with the appropriate personnel who are involved in responding to the request for reasonable accommodation.

This is to acknowledge that I am requesting a workplace adjustment on my age category and/or I am requesting a reasonable accommodation based on my disability and/or underlying medical condition. I agree to cooperate in good faith with the Hopi Tribe in responding to my request, including providing medical documentation, if needed. I understand that I may not be provided with my specific request and the Hopi Tribe may consider my request in addition to those alternatives identified by the Hopi Tribe.

Sign and date below, this is a legal representation of your signature.

Employee Signature:

## **Appendix I:**

### **Reassignment Appeal Form**





*Submission of this Reassignment Appeal Form will formally initiate the process. The employee shall prepare this form and attach all documentation supporting their position.*

Supervisor / Program: \_\_\_\_\_

**Provide written statement and proposed remedies** (Use additional paper if needed and attach applicable supporting documents):

This image shows a full page of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page, providing a template for writing. There are no margins, text, or other markings on the page.

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*Submission of this Reassignment Appeal Form will formally initiate the process. The employee shall prepare this form and attach all documentation supporting their position.*

Supervisor / Program: \_\_\_\_\_

This image shows a single sheet of white paper with horizontal blue ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

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## **Appendix J:**

### **Coronavirus Emergency Leave Request Form**



Timothy L. Nuvangyaoma  
CHAIRMAN

Craig Andrews  
VICE-CHAIRMAN

### CORONAVIRUS EMERGENCY LEAVE REQUEST

The Families First Coronavirus Response Act (the “FFCRA”), effective April 1, 2020, provides Hopi Tribe employees with additional emergency paid sick leave and expanded family and medical leave for specified reasons related to COVID-19. These provisions apply to leave taken between April 1, 2020 and December 31, 2021. This benefits applies to Regular, Appointed and Temporary employees of the Hopi Tribe.

The intent is to provide for up to two (2) weeks of emergency paid sick time and modified emergency family and medical leave to address the Coronavirus pandemic, as declared to be a national health emergency on March 13, 2020.

**Please type and print clearly.**

**Complete the form and indicate Not Applicable where it applies. Do not leave a section blank.**

Employee Name	Title
Department	Date of Hire

Leave Dates requested from: \_\_\_\_\_ to \_\_\_\_\_

Are you requesting an intermittent leave? ☐ Yes ☐ No

If yes, please explain:

If approved for telework, please provide the reason you are unable to telework due to a need for leave because of COVID-19 related reasons:

## CORONAVIRUS EMERGENCY LEAVE REQUEST

### Qualifying COVID-19 reasons for Leave

Please check the reason you are requesting leave and provide the REQUIRED documentation:

- ☐ 1. I am subject to a Federal, State or Local quarantine or isolation order related to COVID-19  
Required documentation: Copy of the Quarantine or Isolation Order.
- ☐ 2. I have been advised by a health care provider to self-quarantine due to concerns related to COVID-19  
Required documentation: Written documentation from the health care provider who advised you to self-quarantine for COVID-19 related reasons.
- ☐ 3. I am experiencing symptoms of COVID-19 and am seeking a medical diagnosis  
Required documentation: Written documentation from the health care provider that you are experiencing symptoms of COVID-19 and are seeking a medical diagnosis.
- ☐ 4. I am caring for an individual who (a) a copy of the quarantine or isolation order; or (b) written documentation from the health care provider who advised the individual being cared for to self-quarantine due to COVID-19 reasons.  
a) Name of individual being care for:  
b) Relationship to individual being care for:
- ☐ 5. I am caring for my son or daughter because the school or place of care has been closed or the childcare provider is unavailable, due to COVID-19 precautions.  
Required documentation:  
a) Notice of closure or unavailability from the child(ren)'s school, place of care, or child care provider, including a notice that may have been posted on a government, school or day care website, published in a newspaper, or emailed to you from an employee or official of the school, place of care, or childcare provider.  
b) Name(s) of child(ren) being cared for:  
c) Statement representing that no other suitable person is available to care for the child(ren) during the period of requested leave.
- ☐ 6. I elect to use accrued paid leave to supplement pay under emergency paid sick leave, pursuant to reason 4 or 5, so that I receive the full amount of my bi-weekly wages.  
Type of leave to be used: \_\_\_\_\_

\_\_\_\_\_  
Signature of Employee Requesting Leave

\_\_\_\_\_  
Date

Email Address

Telephone Number

Supervisor's Name

## **Appendix K:**

### **Telework Agreement Form**



## TELEWORK AGREEMENT

Name:

Job Title:

Hire Date:

FLSA Status: ☐ Exempt ☐ Non-Exempt

Department/Program:

Director:

Manager:

This temporary telecommuting agreement will begin and end on the following dates:

Start Date:

End Date:

Temporary Work Location:

Employee Schedule:

	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
WORK HOURS							

The Employee agrees to the following conditions:

1. The employee will remain accessible and productive during scheduled work hours.
2. Non-exempt employees will record all hours worked and meal periods taken in accordance with regular timekeeping practices.
3. Non-exempt employees will obtain supervisor approval prior to working unscheduled overtime hours.
4. The employee shall request leave for personal or sick time in compliance with the Annual Leave and Sick Leave Policies.
5. The employee will report to the employer's work location when directed by his or her supervisor.
6. The employee will communicate daily with his or her supervisor and co-workers, which includes a weekly written report of activities.
7. The employee will comply with all rules, policies, practices and instructions that will apply if the employee were working at the employer's work location.
8. The employee will maintain satisfactory performance standards.
9. The employee will make arrangements for regular dependent care and understands that telecommuting is not a substitute for dependent care. In pandemic circumstances, exceptions may be made for employees with caregiving responsibilities.
10. The employee will maintain a safe and secure work environment at all times.
11. The employee will allow the employer to have access to the telecommuting location for purposes of assessing safety and security, upon reasonable notice by the Tribe.
12. The employee will report work-related injuries to his or her supervisor/manager as soon as practicable.



## TELEWORK AGREEMENT

The Tribe will provide the following equipment:

The employee will list equipment to be used should reimbursement be required:

The employee agrees the Hopi Tribe's equipment shall only be used by the employee for business-related work. The employee shall not make any changes to security or administrative settings on the Tribe's equipment. The employee understands that all tools and resources provided by the Tribe is the property of the Hopi Tribe and is subject to damage, loss or misuse expense.

The employee agrees to protect the Tribe's tools and resources from theft or damage and shall report theft to the proper authorities or damage to his or her supervisor/manager immediately. The employee agrees to comply with the Tribe's policies and expectations regarding information security. The employee is expected to ensure protection of proprietary information at all times while working from their home offices.

The Tribe will reimburse employee for the following expenses:

Employee will submit expense reports with attached original receipts on a monthly basis.

- The employee understands all terms and conditions of employment with the Tribe remain unchanged, except those specifically addressed in this agreement.
- The employee understands Management retains the right to modify this agreement on a temporary or permanent basis for any reason at any time.
- The employee agrees to return the Hopi Tribe's equipment and documents immediately upon termination of employment.

I have read and understand the Telework Agreement. I agree to abide by all Hopi Tribe Policies & Procedures during the telework assignment, any other policies or guidelines the Hopi Tribe may establish, either through written or verbal communication.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Manager Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## **Appendix L:**

### **Bi-weekly Hazard Pay timesheet**



## Hazard Pay Biweekly Time Sheet

Pay period start date: 6/21/2020

Pay period end date: 7/4/2020

Employee: \_\_\_\_\_

Employee phone: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Employee e-mail: \_\_\_\_\_

Day	Date	Worked Shift (Enter 1)
Sunday	6/21/2020	
Monday	6/22/2020	
Tuesday	6/23/2020	
Wednesday	6/24/2020	
Thursday	6/25/2020	
Friday	6/26/2020	
Saturday	6/27/2020	
Sunday	6/28/2020	
Monday	6/29/2020	
Tuesday	6/30/2020	
Wednesday	7/1/2020	
Thursday	7/2/2020	
Friday	7/3/2020	
Saturday	7/4/2020	
Total Shifts Worked		
\$35 per shift		\$35.00
Total pay		

Employee signature

Date

Supervisor signature

Date

## **Appendix M:**

### **Employee Absence Monitoring Sheet**

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## **Appendix N:**

### **Phase One: Walkthrough Site Risk Assessment Reports**



## **Hopi Tribe – Domestic Violence Program On-site Risk Assessment Written Report**

### **1.0 Scope**

- 1.1 **Risk Assessment Report For:** The reopening of governmental services housed in the Domestic Violence Program Building, Keams Canyon, AZ
- 1.2 **Date Performed:** 7/17/2020
- 1.3 **Assessors (Name/Association):** Cheryl Tootsie; Nathaniel Tootsie; Thornton Day; Daryn Melvin; Darien Honahnie; Denise Bekay; the Hopi Tribe; and Sherry Chase Office of Environmental Health and Engineering, Indian Health Service (IHS)

**2.0 Overview of the Procedure:** In response to the ongoing COVID-19 pandemic, the Hopi Tribe has instituted widespread community mitigation and prevention efforts that have included closing much of the tribal government. These efforts, combined with ongoing containment activities, have served as both an effective intervention for limiting the spread of COVID-19 and stressor to the economic well-being of Hopi communities. The Hopi Reopening Plan follows a three-phase approach to inform decision-making for mitigation measures while balancing protection measures for the Hopi people. Phase One of the Hopi Plan involves the controlled reopening of essential governmental services. To ensure that these operations could be conducted safely both for governmental staff as well as the tribal customers and clients they serve, a risk assessment was performed by tribal representatives to evaluate the physical space of the Domestic Violence Program building for physical risk, COVID-19 response policies, and to address staffing concerns of how to operate safely. This assessment serves as a guide for the program to address any issues as they arise.

**3.0 Study Methods:** This assessment identified hazards associated with the physical reopening of the Domestic Violence Program Building in both a general assessment of physical space as well as individual assessments of each office areas. Coordination with Executive staff and Core Service staff, as well as subject matter experts (SME) to understand current practices occurred to determine the baseline of operational mitigation strategies. Additional assessments of new mitigation strategies ranging from workspace reorganization to staggering staffing attendance to adjusting service implementation or scope occurred to determine their effects on further reducing COVID-19 infection risk.

To perform this assessment, Hopi staff conducted an in-person walkthrough of all workspaces in consideration for reopening within this building. Office layout, staffing numbers, air ventilation and flow, cleaning procedures, bathroom/drinking water availability, common work areas, and staff activities were all assessed for implementation under the three-pillars of reducing the spread of COVID-19; 1) maximizing distance, 2) minimizing time, and 3) reducing exposure. These pillars focus on increasing the distance between infected and non-infected, decreasing the time they are together, and reducing the amount of virus present.

### **4.0 Assessment Findings with Mitigation Strategies:**

- 4.1 **Domestic Violence Program Building** —total estimated capacity ~8 individuals. One story, double wide modular building, broken up into several sub offices, conference area and waiting area for the function of the Domestic Violence Program -Judicial Services.



## **Hopi Tribe – Domestic Violence Program On-site Risk Assessment Written Report**

### **a. Main Entrance**

- i. The Entrance is a large open area where seating is abundant and may be used as a talking circle. It was noted that there is little to no Entry Screening Checkpoint of guests and staff. Protocols require strengthening. No sign in criteria was visible nor were any COVID-19 related questionnaires observed. No temperature screening occurs, and no policy exists for what to do if there is a fever. This creates an issue for Screeners to stop high ranking or official staff or guests based on screening results. Written policy and procedure on how screening will be conducted is recommended for training of staff. From this entrance there is a seating area for guests/clients. There is an area where coffee, water and snacks are available as one enters the building.

- 4.1.a.i..1** Implement a robust screening policy that includes full symptoms, temperature checks, and a clear chain of command for reporting abnormal or established results. The policy should also include the following: 1.) Information on what PPE to use. 2.) Proper PPE donning and doffing procedures. 3.) the type of thermometer to be used. 4.) how the thermometer's calibration will be checked and how often. 5.) how the thermometer should be cleaned and disinfected and how often.
- 4.1.a.i..2** Eliminate, store or tape off excess chairs. Maximum of 4 chairs in this area. Develop a designated space for waiting. Limit the number of people that are permitted to wait and develop a direct flow of traffic into the facility.
- 4.1.a.i..3** Empower screening staff to be able to stop anyone and educate all facility staff on the importance of respecting the screening process. Signs are needed for sanitizing, and social distancing protocols. Use bright color tape to draw attention to the place marks on the floor where chairs should be placed.
- 4.1.a.i..4** Establish an appointment only systems for client visits as well as robust policies for screening clients and guests prior to entering the building.
- 4.1.a.i..5** Mail station is a high touch area that will require consistent cleaning.
- 4.1.a.i..6** This area should have a Fire Escape Plan posted for viewing.
- 4.1.a.i..7** Provide signage for cleaning, social distancing and mask wearing protocols.
- 4.1.a.i..8** High Touch areas: Water cooler, coffee station and printer/copier, paper shredder and typewriter. These areas need constant and consistent cleaning. Provide sanitizing wipes and a hand sanitizing station nearby.

- ii. Secretary Desk Area. This desk does not have a protective barrier. There are file cabinets that are considered high touch areas. Personal items on desk should be limited.

- 4.1.a.ii..1** Install protective barrier for desk area. Or rearrange furniture so hutch serves as a barrier.



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- 4.1.a.ii.2 The file cabinets located in this area are considered a high touch area. Place sanitizing wipes for constant/consistent cleaning upon each use as well as signage indicating the cleaning protocol.
  - 4.1.a.ii.3 Staff are encouraged to follow paper handling protocols. See **Section b.ii.** below. Encourage digitizing case files.
  - 4.1.a.ii.4 Provide cleaning protocol signs and sanitizing wipes for consistent cleaning after use.
  - 4.1.a.ii.5 Recommend moving the Secretary's desk closer to the main entrance to create a funnel for traffic and a list for staff/client screening.
- iii. Staffing Considerations allows for most office staff to return to work while keeping with physical distancing recommendations. To further enhance protection of the staff, and the services they provide, consider the following:
  - 4.1.a.iii.1 Limit the number of staff for any individual function that return to work on any given day. This both reduces the number of person to person contact that can occur as well as reduces the number of staff lost to infection and quarantine if COVID-19 is found within the facility. This reduces the interruption to providing essential services.
  - 4.1.a.iii.2 Stagger work start times to both reduce crowding of people being screened and bottlenecking at the office entry.
  - 4.1.a.iii.3
- iv. In many common areas (lobbies, sign in or time clock areas, open floor plan office spaces), no hand hygiene options were available (hand washing stations or hand sanitizer with at least 60% alcohol).
  - 4.1.a.iv.1 It should be remembered that the easier you make it for people to perform a function, the more likely they are to do it. Provide bottles or wall mounted dispensers of hand sanitizer throughout these common areas, and signage encouraging their usage.
  - 4.1.a.iv.2 High Touch Area include the copying/printing and shredding areas. Encourage scanning documents and the use of email. Add a hand sanitizing station at this area. Area must also be cleaned daily. Add signage indicating the cleaning protocols to be followed. The small desk in this area must be cleaned after each use.
  - 4.1.a.iv.3 File cabinets are considered high touch areas. Provide signs and sanitizing wipes for cleaning upon use.
  - 4.1.a.iv.4 Water cooler and coffee station are considered shared amenities and require constant cleaning. Add cleaning wipes for this area and signs for cleaning protocols.





## Hopi Tribe – Domestic Violence Program On-site Risk Assessment Written Report

- 4.1.a.iv..5 Shared closet for office supplies, cleaning agents and paper products used by staff and janitorial staff. Needs to be organized into separate items for functional use.

v. HVAC system provides adequate air flow and ventilation. Currently, the HVAC unit services the entire building.

- 4.1.a.v..1 Work with Hopi Tribal facilities department to ensure HVAC is in good working order, identify workspaces not receiving adequate airflow, and ensure that air recirculation is minimized (single direction airflow from inside to out is best) and that the number of air exchanges for the building is maximized without taxing the HVAC system.

vi. Drinking water is currently supplied to the staff via cooler unit and supplied water bottles.

- 4.1.a.vi..1 Water stations were observed outside a lounge area, but did not have hand sanitizing stations nearby, recommend the unit be relocated to the lounge area or have cleaning supplies readily available. Post signage indicating proper cleaning protocols.

vii. Bathrooms are unisex, and are of adequate size, however they do not allow for proper social distancing. Paper towel dispensers are not hands-free, and doors swing inwards.

- 4.1.a.vii..1 Limit bathroom usage to one person at a time.
- 4.1.a.vii..2 Change out paper towel dispensers for hands-free units, and install instructions on proper hand washing, turning off the sink, and opening the door.
- 4.1.a.vii..3 Provide signage for hand washing and a hand sanitizing station outside both lavatories.
- 4.1.a.vii..4 Restroom near the offices can be used by staff or clients. The shower is being used and had personal use items within that need to be removed. Ensure that a policy and procedure are in place that addresses infection control, as well as ensures regular and consistent cleaning. Items such as wash cloths and loofahs etc. should be prohibited to avoid the unsanitary sharing these items and promoting the possible spread of communicable diseases.

### b. Staff Offices

i. These offices were observed to have high touch areas; each needing signage indicating the proper cleaning protocols as well as strategically placed hand sanitizing stations outside each office where hands can be sanitized after closing doors. Cleaning up offices and limiting personal items on desks is recommended.

- 4.1.b.i..1 SiMana's Office: Maximum occupancy is 2 people. This allows for distancing between staff and one guest: eliminate excess chairs, keeping



## **Hopi Tribe – Domestic Violence Program On-site Risk Assessment Written Report**

one with a 6' distance between staff and client. Personal fan was observed. Recommend use only when staff is in the office and door is closed. Cabinets require cleaning and sanitizing daily. Has some personal items on desk. Provide cleaning and hand sanitizing signs and install hand sanitizing station outside this office.

- 4.1.b.i..2** Men's Counselor's Office: This office is an Office and conference room space. The conference table appears to accommodate up to 8 people: remove or tape off excess chairs to allow for proper social distancing. Maximum occupancy for table is 3 people with staff. This office is also used as an eating and high traffic area. There is a shared microwave and refrigerator in this room. These are considered shared amenities requiring consistent/constant cleaning. Provide signage for cleaning and hand sanitizing, sanitizing wipes are also needed. Remove or tape off excess chairs. Maximum occupancy for the entire room is 5. Recommend the relocating the refrigerator to another location to create a suitable common area for staff. Provide signage for cleaning after each use. Posting of the emergency exit plan is recommended.
- 4.1.b.i..3** Director/Supervisor's Office: Eliminate 3 chairs to allow for proper distancing of guests/clients. Files cabinets are high touch areas, provide signage for cleaning, mask wearing and social distancing. Office needs sanitizing wipes for cleaning.
- 4.1.b.i..4** One office is currently vacant. Provide signage indicating cleaning protocols and sanitizing wipes.
- 4.1.b.i..5** Closet in the restroom closest to the rear exit is shared with office and janitorial supplies. Recommend this closet serve as the Janitor Closet for all equipment. Move and organize office supplies among closets in occupied offices.

- ii. Virus on paperwork poses a low risk of infecting an individual. However, if physical documentation is going to be handled, the following handling options can further reduce risk:
  - 4.1.b.ii..1** Perform hand hygiene. Handle paperwork without gloves and by touching as few additional items (phones, keyboard, mouse) as possible while processing. File paperwork. Wipe down all touched surfaces. Perform hand hygiene.
  - 4.1.b.ii..2** Let paperwork rest 24-48hrs, then process as indicated in **4.1.b.ii..1**.
  - 4.1.b.ii..3** Place the paperwork in a plastic sleeve. Disinfect the outside of the sleeve, perform hand hygiene, and then process as indicated in **4.1.b.ii..1**.
- iii. The HVAC system is functional. HVAC requires optimization for adequate air flow and ventilation to all areas of the building.



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- 4.1.b.iii.1** Personal fans in communal areas should not be used. Their use in an office is permissible if only one occupant is present and the door to the office can be closed. If a fan is used, it should not be pointed in the direction of the door.
- 4.1.b.iii.2** Windows can be opened only as needed to increase ventilation.

### **c. Overall Office Building**

- i. The overall cleanliness of the facility is important to ensure the safe functioning of the office and a safe interaction with the public. It was noted that one OFMR staff is dedicated to tribal properties of the Judicial Complex to cover janitorial and some maintenance duties daily. Upon observation it was noted that the building and amenities are dated but in good condition, however, to improve with cleaning the following points are recommended:

- 4.1.c.i.1** Replace carpeting with laminate flooring.
- 4.1.c.i.2** Increase cleaning of the First Aid Cabinet.
- 4.1.c.i.3** Place fire escape plans of the building throughout and one relevant to each room.
- 4.1.c.i.4** Strengthen screening protocols for the entry of guests and inmates by creating a screening station on the exterior of the main entrance and signage.
- 4.1.c.i.5** A proper landing is required to ensure safe exiting from the building. Recommend a request to OFMR to engineer such a landing, perhaps relocate water valves and the AC condenser unit.

## **5.0 Interpretation of Results**

- 5.1 Evaluation of Site Specific Assessments:** The goal of these assessments were two fold; first to perform a risk assessment and identify mitigation strategies for staff to return to work in the Domestic Violence Program Office Building, and second, to provide the staff with a framework for administering these site specific risk assessments for COVID-19 mitigation suitability at future facilities. The overall mitigation strategies and the protection of government services fell into two main categories:
  - a. Increase adherence to maximizing the three pillars of disease infection reduction: maximize distance (in the form of rearranging furniture and limiting office and conference room sharing), decrease time (in the form of staggering start times to avoid groups of people congregating), and minimizing exposure (in the form of mask wearing, sneeze guard utilization, full walls or offices for staff, and reducing staff in shared spaces).
  - b. Limiting the effect on essential services if COVID-19 infects staff. By not having all the staff in a particular service come to work on the same day (even if there is adequate room), it helps ensure that not all the staff that perform a function will be exposed or infected. This means no full service will be entirely infected/quarantined by a single exposure.



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- 5.2 **Limitations:** This assessment is a snapshot of the governmental facilities without having staff on site. Reevaluation of these mitigation strategies will need to occur often and thoroughly to help identify deficiencies in their efficacy and encourage new strategies to be implemented.

### 6.0 Statement of Suitability

- 6.1 Protecting staff and customers is of critical importance for the reopening of the governmental offices. Identifying both the strengths of current mitigation strategies, as well as where changes need to be made is necessary to identify before staff return to work. Vigilant checking of the efficacy of these strategies is needed to ensure as staff return, their wellbeing and those they serve continues to be protected.
- 6.2 The recommendation of this work is that once these mitigation strategies are implemented and policies are finalized, the governmental offices are ready to be reopened in line with the Hopi Tribe Reopening Plan.
- 6.3 The Domestic Violence Program Building on-site risk assessments have been performed and completed as outlined in Section 4 of this report and is ready to be used as a component in the continuing evaluation of the safety practices for the reopening of this building.

### 7.0 Summary Report Approval

Performed By: Hopi Reopening Task Group Date: 7/12/20

Printed name: Darlyn Melvin  
Primary Assessor

### 8.0 Appendices

- 8.1 Summary of changes needed from Domestic Violence Program Building Risk Assessment



## **Hopi Tribe – Domestic Violence Program On-site Risk Assessment Written Report**

### **Summary of changes needed from Domestic Violence Program Building Risk Assessment**

1. Create and implement a structured screening policy for screening incoming staff, empowering screeners to stop those that have fevers or flagged answers to screening questions and educate staff on the importance of the screening procedure to keep them safe.
2. For each service offered, limit the number of staff that perform a particular function from working at the same time. This will ensure that if a COVID-19 outbreak occurs, not all the staff that perform a particular function have to be isolated or quarantined and be unable to work at the same time.
3. Encourage teleworking when appropriate, and stagger scheduling to limit bottlenecks at screening points and crowding of work areas.
4. Install sneeze guards or physical barriers in locations that have staff interacting with clients and in the Tribal Council Chambers.
5. Ensure hand sanitizer with at least 60% alcohol is available in all high traffic areas.
6. Rearrange furniture in open work areas to maximize at least 6 feet distances between staff/guests.
7. Ensure HVAC is functional. Identify locations in the building not being serviced by the system and repair. Eliminate use of personal fans in shared areas.
8. Close off water fountains. Bottle fillers are ok if hand sanitizer and disinfecting wipes are available near the bottle fillers.
9. Bathrooms should be made single occupancy and signage on the doors needs to state this. Install hands-free paper towel dispensers.
10. Reduce physical paperwork when possible; electronic forms and email are preferred. When paperwork is required, have it deposited at a central area for pickup rather than individually handed in to staff.
11. Reduce occupancy of confined spaces like conference rooms. Ensure adequate ventilation is available and remove tables and chairs to reflect the desired maximum occupancy number.
12. Office spaces should be considered single occupancy; stagger working times or find alternative places to work to ensure proper distancing and ventilation can occur.
13. Require the use of face coverings within the buildings and in shared areas. Within private offices, face coverings can be removed, but should be put back on if anyone comes to have a discussion.
14. Ensure the areas that do not have cubicles or walls fully separate one person from another. If this isn't possible, limit the staff that share an area to ensure proper distancing and working in shared space.
15. Staff are the best eyes and ears for IPC. Ensure they have a way to report concerns, and that management is receptive to their thoughts and questions.







## Hopi Tribe – Tribal Prosecutors Office On-site Risk Assessment Written Report

### 1.0 Scope

- 1.1 **Risk Assessment Report For:** The reopening of governmental services housed in the Tribal Prosecutors Office Building, Keams Canyon, AZ
- 1.2 **Date Performed:** 7/17/2020
- 1.3 **Assessors (Name/Association):** Cheryl Tootsie; Nathaniel Tootsie; Thornton Day; Daryn Melvin; Darien Honahnie; Denise Bekay; the Hopi Tribe; and Sherry Chase Office of Environmental Health and Engineering, Indian Health Service (IHS)

1.4

**2.0 Overview of the Procedure:** In response to the ongoing COVID-19 pandemic, the Hopi Tribe has instituted widespread community mitigation and prevention efforts that have included closing much of the tribal government. These efforts, combined with ongoing containment activities, have served as both an effective intervention for limiting the spread of COVID-19 and stressor to the economic well-being of Hopi communities. The Hopi Reopening Plan follows a three-phase approach to inform decision-making for mitigation measures while balancing protection measures for the Hopi people. Phase One of the Hopi Plan involves the controlled reopening of essential governmental services. To ensure that these operations could be conducted safely both for governmental staff as well as the tribal customers and clients they serve, a risk assessment was performed by tribal representatives to evaluate the physical space of the Tribal Prosecutor's Office building for physical risk, COVID-19 response policies, and to address staffing concerns of how to operate safely. This assessment serves as a guide for the program to address any issues as they arise.

**3.0 Study Methods:** This assessment identified hazards associated with the physical reopening of the Tribal Prosecutors Office Building in both a broad assessment of physical space as well as individual assessments of each office areas. Additional assessments of new mitigation strategies ranging from workspace reorganization to staggering staffing attendance to adjusting service implementation or scope occurred to determine their effects on further reducing COVID-19 infection risk.

To perform this assessment, Hopi staff conducted an in-person walkthrough of all workspaces in consideration for reopening within this building. Office layout, staffing numbers, air ventilation and flow, cleaning procedures, bathroom/drinking water availability, common work areas, and staff activities were all assessed for implementation under the three-pillars of reducing the spread of COVID-19; 1) maximizing distance, 2) minimizing time, and 3) reducing exposure. These pillars focus on increasing the distance between infected and non-infected, decreasing the time they are together, and reducing the amount of virus present.

### 4.0 Assessment Findings with Mitigation Strategies:

- 4.1 **Tribal Prosecutors Office Building** —total estimated capacity ~6 individuals. One story, double wide modular building, broken up into several sub offices, conference area and file room for the Hopi Tribal Prosecutors Office-Judicial Services.

- a. **Main Entrance**



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- i. Entrance area has a service window with protective barriers and a locked door with a keypad for entry. It appears there is little to no Entry Screening Checkpoint of guests/staff. Consequently, it is recommended that screening protocols be implemented or strengthened. Sign in criteria for both staff as well the public were observed however, no covid-19 related questionnaires were noted. No temperature screening occurs, and no policy exists for what to do if there is a fever. This could potentially create an issue for Screeners to stop high ranking or official staff or guests based on screening results. From this entrance there is a service window with seating for guests/clients. The door is locked to the office areas which has a code for keypad entry for staff use.
  - 4.1.a.i..1 Implement a robust screening policy that includes full symptoms, temperature checks, and a clear chain of command for reporting abnormal or established results.
  - 4.1.a.i..2 Eliminate, store or tape off excess chairs. Maximum of 3 chairs in this area.
  - 4.1.a.i..3 Empower screening staff to be able to stop anyone and educate all facility staff on the importance of respecting the screening process. Signs are needed for sanitizing and social distancing protocols. Use brightly colored tape to draw attention to the place marks on dark carpet indicating where chairs should be placed.
  - 4.1.a.i..4 Establish an appointment only system for client visits as well as robust policies for screening clients and guests prior to entry into the building.
  - 4.1.a.i..5 Recommend changing the service window to plexiglass or one-piece material with an opening for document distribution at the bottom. Paper strategically placed hand sanitizing option as well.
  - 4.1.a.i..6 This area needs to have a Fire Evacuation Plan posted for viewing. If Fire evacuation plan does not exist, develop a fire evacuation plan with local fire department and post throughout facility as required by OSHA.
  - 4.1.a.i..7 Provide signage for cleaning, social distancing and mask protocols.
  - 4.1.a.i..8 High Touch areas include: Keypad and doorknob, Time clock (observed on the inside of the reception desk), and the mobile filing units which are lined up in front of the desk facing the main entrance. This area needs constant and consistent cleaning, with sanitizing wipes and a hand sanitizing stationed near the doorway.
  - 4.1.a.i..9 Time clock (observed on the inside of the reception desk): convert, if budget allows, to electronic time tracking system or email-based time clock to reduce high traffic area.
- ii. Office Area: Two Desk Areas were observed on each side of the emergency exit. These desks are not arranged to create adequate distance between each unit.



## Hopi Tribe – Tribal Prosecutors Office On-site Risk Assessment Written Report

- 4.1.a.ii..1** Install a wall or protective barriers between each desk. Or rearrange furniture so hutch serves as a barrier.
      - 4.1.a.ii..2** Otherwise, stagger the staff schedule to allow for one person to be in that area at a time. However, best option may be to relocate one employee to a vacant office to eliminate the risk of exposure.
      - 4.1.a.ii..3** The copy machine and file cabinets located in this area is considered a high touch area. Place sanitizing wipes for constant/consistent cleaning upon each use and signage.
      - 4.1.a.ii..4** Recommend that staff follow paper handling protocols, see **Section iii.** below. Encourage digitizing of case files to the extent possible.
      - 4.1.a.ii..5** Other high touch areas are: Mail distribution unit on the wall adjacent the printer, the printer itself and paper shredders observed within the office area. Provide cleaning protocol signs and sanitizing wipes to ensure consistent cleaning after use.
    - iii.Virus on paperwork poses a low risk of infecting an individual. However, if physical documentation is going to be handled, the following handling options can further reduce risk:**
      - 4.1.a.iii..1** Perform hand hygiene. Handle paperwork without gloves and by touching as few additional items (phones, keyboard, mouse) as possible while processing. File paperwork. Wipe down all touched surfaces. Perform hand hygiene.
      - 4.1.a.iii..2** Let paperwork rest 24-48hrs, then process as **4.1.a.ii..1.**
      - 4.1.a.iii..3** Place the paperwork in a plastic sleeve. Disinfect the outside of the sleeve, perform hand hygiene, and then process as **4.1.a.ii..1.**
    - iv.Staffing Considerations: Office configuration allows for most office staff to return to work while keeping with physical distancing recommendations. To further enhance protection of the staff, and the services they provide, consider the following:**
      - 4.1.a.iv..1** Limit the number of staff for any individual function that return to work on any given day. This both reduces the number of people to people interactions that can occur as well as reduces the number of staff lost to infection and quarantine if COVID-19 is found within the facility. This reduces the interruption to providing essential services.
      - 4.1.a.iv..2** Stagger work-start-times to both reduce crowding of people being screened and possibility of bottlenecking at the office entry.
  - v. In many common areas (lobbies, sign in or time clock areas, open floor plan office spaces), no hand hygiene options were available nor were (hand washing stations or hand sanitizer with at least 60% alcohol) observed.**
    - 4.1.a.v..1** It should be remembered that the easier you make it for people to perform a function, the more likely they are to do it. Provide bottles or wall



## **Hopi Tribe – Tribal Prosecutors Office On-site Risk Assessment Written Report**

mounted dispensers of hand sanitizer throughout these common areas, and signage encouraging their usage.

- 4.1.a.v..2** High Touch Areas included the copy machine and printer as well as shredders. Encourage scanning documents and emailing to the greatest extent possible. A hand sanitizing station should be added in this area. Area must also be cleaned daily. Add signage indicating and encouraging compliance with established cleaning protocols. Recommend a cleaning protocol and log be maintained. Cleaning protocol should include the following 1.) a complete list of all high touch surfaces in the room. 2.) Identify what cleaning products should be used on these surfaces and ensure that they are effective against COVID-19 (i.e. that they are on the EPA N-list) 3.) Identify who will be responsible for conducting this work and how often it should be done. 4.) Keep a record of all required OSHA trainings for those tasked with cleaning and disinfecting (i.e. security and janitorial staff)
- 4.1.a.v..3** File Room – file cabinets are considered high touch areas. Provide signs and sanitizing wipes for cleaning upon use. Maximum occupancy for this room is 2 people.
- 4.1.a.v..4** Conference Room contains a conference table, chairs and additional file cabinets. Recommend file cabinets be wiped down daily, and all closed-case files be digitized. This area is also used as an eating area by staff. Recommend a maximum capacity of 2 people at the table. Signage for Shared amenities as well as cleaning protocols should be posted to ensure cleaning after each use. Masks are taken off while eating, which increases the risk of disease spread therefore, it is recommended that staff eat at their own workstations with the doors closed. Alternatively, consider providing outdoor seating. Staff should be reminded to wash their hands and to clean and disinfect the area before and after eating.
- 4.1.a.v..5** A small kitchenette is available for staff. Provide signage for cleaning and hand washing protocols as well as sanitizing wipes and a hand sanitizing station.
- 4.1.a.v..6** Water cooler and coffee station are considered shared amenities and require constant cleaning. Add cleaning wipes for this area and signs for cleaning protocols.
- 4.1.a.v..7** Shared closet for office supplies, cleaning agents and paper products used by staff was observed. Janitorial staff should organize and separate items within by functional use.
- 4.1.a.v..8** A closet was observed with IT electrical equipment and a sink installed. Cleaning chemicals and a mop were also observed, which presents an



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electrocution hazard. Recommend separating the functions of this closet. Outlet within the closet should be ground-fault circuit interrupter (GFCI) capable. Any electrical outlet within 6 feet of a water source should be GFCI) capable. The closet was determined to be lacking in an exhaust fan to vent the chemicals that were observed within the room. Ensure that the chemicals stored in this area are not volatile or combustible to prevent fire hazards. Also ensure that there is adequate ventilation within the janitorial closet.

vi. HVAC system provides adequate air flow and ventilation. Currently, the HVAC unit services the entire building.

- 4.1.a.vi..1** Work with facilities to ensure HVAC is in good working order, identify workspaces not receiving adequate services, that air recirculation is minimized (single direction airflow from inside to out is best) and that the number of air exchanges for the building is maximized without taxing the HVAC system.

vii. Drinking water is currently supplied to the staff via cooler unit and supplied water bottles.

- 4.1.a.vii..1** Water stations were observed outside a lounge area to not have hand sanitizing stations nearby, recommend the unit be relocated to the lounge area or have cleaning supplies are readily available. Post signs for cleaning protocols.

viii. Bathrooms are small and do not allow for physical distancing. Toilets do not have lids. Paper towel dispensers are not hands-free, and doors swing inwards.

- 4.1.a.viii..1** Limit bathroom usage to one person at a time.
- 4.1.a.viii..2** Recommend that a toilet lid be installed, with signage posted advising staff to "close the lid before flushing"
- 4.1.a.viii..3** Change out paper towel dispensers for hands-free units, and install instructions on proper hand washing, turning off the sink, and opening the door.
- 4.1.a.viii..4** Provide signage for hand washing and hand sanitizing station outside both lavatories.
- 4.1.a.viii..5** Men's Staff Restroom needs an auto flush mechanism for the urinal.

### b. Staff Offices

- i. These offices were observed to have high touch areas; each needing signs for cleaning protocols and a hand sanitizing station on the outside of the office or strategically placed hand sanitizing stations outside each office where hands can be sanitized after closing doors. Cleaning up offices and limiting personal items on desks limits the virus/germs from settling and those surfaces.



## Hopi Tribe – Tribal Prosecutors Office On-site Risk Assessment Written Report

- 4.1.b.i..1 Etta Masawytewa: Maximum occupancy is 2 people to allow for distancing between staff and one guest: eliminate chairs, keeping one with a 6' distance between staff and client. Cabinets require cleaning and sanitizing daily. Has many personal items on desk. Provide cleaning and hand sanitizing signs and install hand sanitizing station outside this office.
- 4.1.b.i..2 Travis Hyer's Office: Provide signage of cleaning and hand sanitizing and sanitizing wipes. Remove or tape off excess chairs. Maximum occupancy is 1.
- 4.1.b.i..3 Office Manager's Office: Provide signage of cleaning and hand sanitizing and sanitizing wipes. Maximum occupancy is 1. High touch areas are the mail station and telephone. Limit personal items on desk.
- 4.1.b.i..4 Tanya's Office: Provide signage for cleaning and sanitizing wipes. Place a hand sanitizing station outside this office. Remove one chair. A fan was noted; we recommend door be closed when in use and when she is the only one in her office.
- 4.1.b.i..5 Two Offices: currently vacant. One is turned into a storage area. The other is a File Room which can be used by one of the two people in the central area. Files cabinets are considered high touch areas need require constant cleaning after each use. Provide signage of cleaning protocols and sanitizing wipes.

ii. The HVAC system functional. Use of personal fans blow air from one person to another. Use indicates HVAC requires optimization for adequate air flow and ventilation to all areas of the building.

- 4.1.b.ii..1 Personal fans in communal areas should not be used. Personal fan use in an office is permissible if only one occupant is present and the door to the office can be closed. If a fan is used, it should not be pointed in the direction of the door.
- 4.1.b.ii..2 Windows can be opened only as needed to increase ventilation.

### c. Overall Office Building

i. The importance of overall cleanliness is needed to the function and interaction with the public. We noted one OFMR staff dedicated to tribal properties of the Judicial Complex that covers janitorial and some maintenance duties daily. Upon observation we noted the building and amenities to be dated but in good condition, however, to improve with cleaning the following are recommended:

- 4.1.d.i.1 Replace carpeting with laminate flooring.
- 4.1.d.i.2 Place fire escape plans of the building throughout



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- 4.1.d.1.3** Increase heightened protocols for entry of guests and inmates by creating a screening station on the exterior of the main entrance and signage.

### 5.0 Interpretation of Results

- 5.1 Evaluation of Site Specific Assessments:** The goal of these assessments were two fold; first to perform a risk assessment and identify mitigation strategies for staff to return to work in the Tribal Prosecutors Office Building, and second, to provide the staff with a framework for administering these site specific risk assessments for COVID-19 mitigation suitability at future facilities. The overall mitigation strategies and the protection of government services fell into two main categories:
- a. Increase adherence to maximizing the three pillars of disease infection reduction: maximize distance (in the form of rearranging furniture and limiting office and conference room sharing), decrease time (in the form of staggering start times to avoid groups of people congregating), and minimizing exposure (in the form of mask wearing, sneeze guard utilization, full walls or offices for staff, and reducing staff in shared spaces).
  - b. Limiting the effect on essential services if COVID-19 infects staff. By not having all the staff in a particular service come to work on the same day (even if there is adequate room), it helps ensure that not all the staff that perform a function will be exposed or infected. This means no full service will be entirely infected/quarantined by a single exposure.
- 5.2 Limitations:** This assessment is a snapshot of the governmental facilities without having staff on site. Reevaluation of these mitigation strategies will need to occur often and thoroughly to help quickly catch deficiencies in their efficacy and encourage new strategies to be implemented.

### 6.0 Statement of Suitability

- 6.1** Protecting staff and customers is of critical importance for the reopening of the governmental offices. Identifying both the strengths of current mitigation strategies, as well as where changes need to be made is necessary to identify before staff return to work. Vigilant checking of the efficacy of these strategies is needed to ensure as staff return, their wellbeing and those they serve continues to be protected.
- 6.2** The recommendation of this work is that once these mitigation strategies are implemented and policies are finalized, the governmental offices are ready to be reopened in line with the Hopi Tribe Reopening Plan.
- 6.3** The Tribal Prosecutors Office Building on-site risk assessments have been performed and completed as outlined in Section 2 of this report and is ready to be used as a component in the continuing evaluation of the safety practices of for the reopening of this building.

### 7.0 Summary Report Approval

Performed By: Hopi Reopening Task Group Date: 7/17/2020



*Hopi Tribe Government Building Reopening Task Group*

## **Hopi Tribe – Tribal Prosecutors Office On-site Risk Assessment Written Report**

Printed name: *Dawn Melvin*  
Primary Assessor

### **8.0 Appendices**

#### **8.1 Summary of changes needed from Legislative Building Risk Assessment**

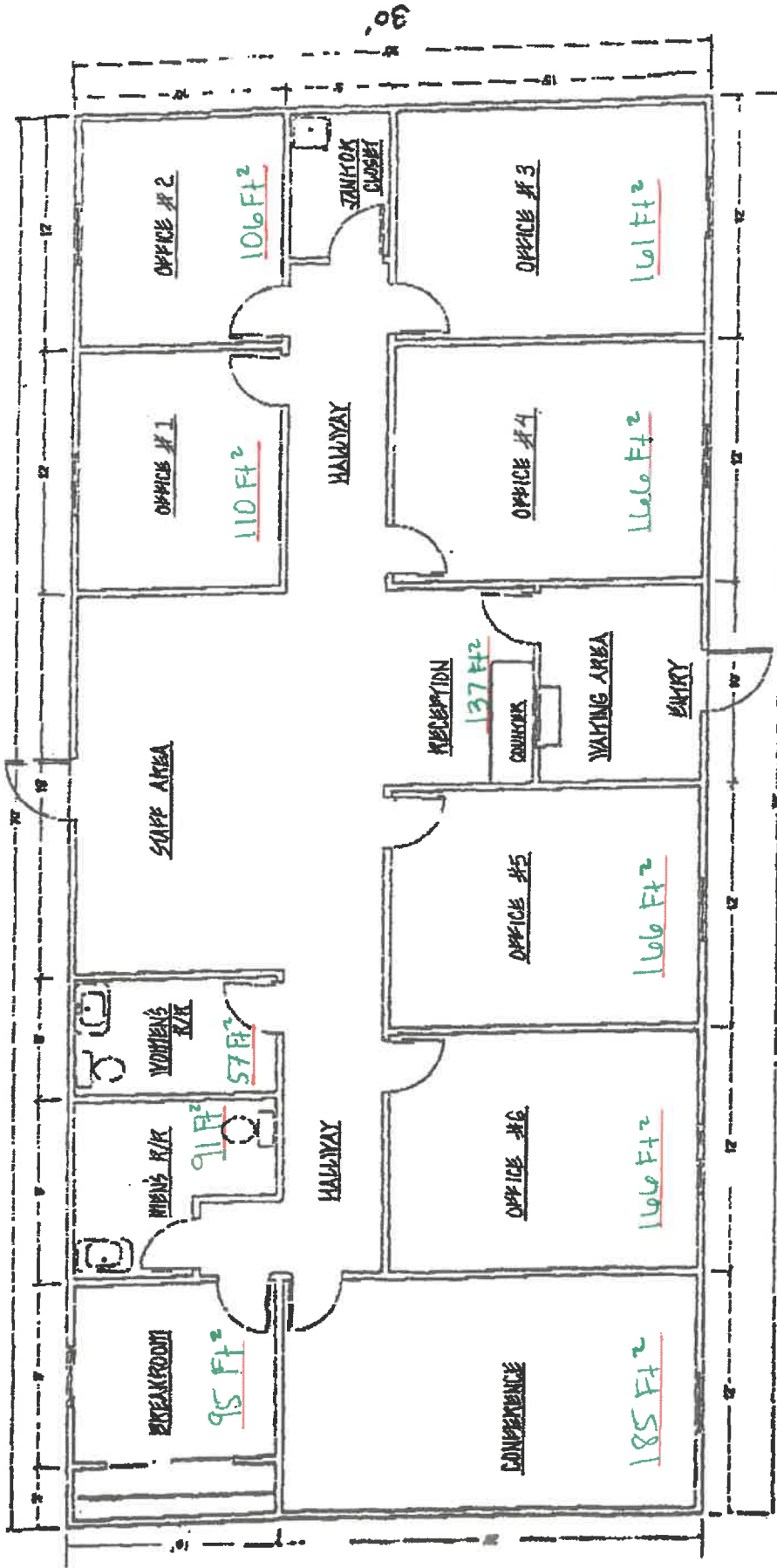




## **Hopi Tribe – Tribal Prosecutors Office On-site Risk Assessment Written Report**

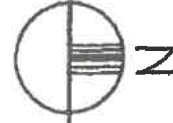
### **Summary of changes needed from Tribal Prosecutors Office Building Risk Assessment**

1. Create and implement a structured screening policy for screening incoming staff, empowering screeners to stop those that have fevers or flagged answers to screening questions and educate staff on the importance of the screening procedure to keep them safe.
2. For each service offered, limit the number of staff that perform a particular function from working at the same time. This will ensure that if a COVID-19 outbreak occurs, not all the staff that perform a particular function have to be isolated or quarantined and be unable to work at the same time.
3. Encourage teleworking when appropriate, and stagger scheduling to limit bottlenecks at screening points and crowding of work areas.
4. Install sneeze guards or physical barriers in locations that have staff interacting with clients and in the Tribal Council Chambers.
5. Ensure hand sanitizer with at least 60% alcohol is available in all high traffic areas.
6. Rearrange furniture in open work areas to maximize at least 6 feet distances between staff/guests.
7. Ensure HVAC is functional. Identify locations in the building not being serviced by the system and repair. Eliminate use of personal fans in shared areas.
8. Close off water fountains. Bottle fillers are ok if hand sanitizer and disinfecting wipes are available near the bottle fillers.
9. Bathrooms should be made single occupancy and signage on the doors needs to state this. Install hands-free paper towel dispensers.
10. Reduce physical paperwork when possible; electronic forms and email are preferred. When paperwork is required, have it deposited at a central area for pickup rather than individually handed in to staff.
11. Reduce occupancy of confined spaces like conference rooms. Ensure adequate ventilation is available and remove tables and chairs to reflect the desired maximum occupancy number.
12. Office spaces should be considered single occupancy; stagger working times or find alternative places to work to ensure proper distancing and ventilation can occur.
13. Require the use of face coverings within the buildings and in shared areas. Within private offices, face coverings can be removed, but should be put back on if anyone comes to have a discussion.
14. Ensure the areas that do not have cubicles or walls fully separate one person from another. If this is not possible, limit the staff that share an area to ensure proper distancing and working in shared space.
15. Staff are the best eyes and ears for IPC. Ensure they have a way to report concerns, and that management is receptive to their thoughts and questions.



FLOOR LAYOUT

SCALE: N.T.S.



PROSECUTOR'S OFFICE BUILDING		
BUILDING #102	DRAWING #:	UM-2307-01
PROJECT #:	KY-3239-2001	SEAL #:





## **Hopi Tribe – Tribal Court Building On-site Risk Assessment Written Report**

### **1.0 Scope**

- 1.1 **Risk Assessment Report For:** The reopening of governmental services housed in the Tribal Court Modular Building, Keams Canyon, AZ
- 1.2 **Date Performed:** 7/20/2020
- 1.3 **Assessors (Name/Association):** Cheryl Tootsie; Nathaniel Tootsie; Thornton Day; Daryn Melvin; Darien Honahnie; Denise Bekay; the Hopi Tribe; and Sherry Chase Office of Environmental Health and Engineering, Indian Health Service (IHS)

**2.0 Overview of the Procedure:** In response to the ongoing COVID-19 pandemic, the Hopi Tribe has instituted widespread community mitigation and prevention efforts that have included closing much of the tribal government. These efforts, combined with ongoing containment activities, have served as both an effective intervention for limiting the spread of COVID-19 and stressor to the economic well-being of Hopi communities. The Hopi Reopening Plan follows a three-phase approach to inform decision-making for mitigation measures while balancing protection measures for the Hopi people. Phase One of the Hopi Plan involves the controlled reopening of essential governmental services. To ensure that these operations could be conducted safely both for governmental staff as well as the tribal customers and clients they serve, a risk assessment was performed by tribal representatives to evaluate the physical space of the Court Room Annex building for physical risk, COVID-19 response policies, and to address staffing concerns of how to operate safely. This assessment serves as a guide for the program to address any issues as they arise.

**3.0 Study Methods:** This assessment identified hazards associated with the physical reopening of the Tribal Court Buildings in both a general assessment of physical space as well as individual assessments of each of the subservice office areas. Coordination with Tribal Court staff and facilities staff Subject Matter Experts (SME) to understand current practices occurred to determine the baseline of operational mitigation strategies. Additional assessments of new mitigation strategies ranging from workspace reorganization to staggering staffing attendance to adjusting service implementation or scope occurred to determine their effects on further reducing COVID-19 infection risk.

To perform this assessment, Hopi staff conducted an in-person walkthrough of all workspaces in consideration for reopening within this building. Office layout, staffing numbers, air ventilation and flow, cleaning procedures, bathroom/drinking water availability, common work areas, and staff activities were all assessed for implementation under the three-pillars of reducing the spread of COVID-19; 1) maximizing distance, 2) minimizing time, and 3) reducing exposure. These pillars focus on increasing the distance between infected and non-infected, decreasing the time they are together, and reducing the amount of virus present.

### **4.0 Assessment Findings with Mitigation Strategies:**

- 4.1 **Annex – Court Room #2 & Administration Building** —total estimated capacity ~15 individuals, although currently only 6-7 people are allowed in during a shift. This facility is a one story building



## Hopi Tribe – Tribal Court Building On-site Risk Assessment Written Report

broken up into several sub offices, a conference area and court room for the Hopi Tribal Courts/Judicial Services. The Courts facility is to reopen during **Phase I** as an essential service. All staff are required to wear properly fitting face coverings at all times. Masks will be provided to those that do not have a mask.

### a. Main Entrance

- i. The Entry Screening Checkpoint and the protocols observed require strengthening. A sign-in protocol as well as signage indicating the required precautions for everyone to follow was observed. Staff are surveyed via questionnaire with COVID-19 related questions for screening, however, no temperature screening occurs. Additionally, no policy exists for what to do if a person presents with a fever. This creates an issue for Screeners to stop high ranking officials, staff or guests based on screening results. The entrance has a metal detector, which may or may not be in working order as the Screener also utilizes a wand to screen individuals upon signing in. The Entrance serves as a waiting room for Court Room 2, which has two unisex restroom facilities. From this entrance there is a service window which has a protective barrier between the customer and receptionist. The door is locked to the office areas and secured by a keypad lock. A code must be entered for entry and use by the staff.

- 4.1.a.i..1 Implement a robust screening policy that includes full symptoms, temperature checks, and a clear chain of command for reporting abnormal or established results. Written policy and procedure on how screening will be conducted is recommended for training of staff. The policy should include the following: 1.) Information on what PPE to use. 2.) Proper PPE donning and doffing procedures. 3.) the type of thermometer to be used. 4.) how the thermometer's calibration will be checked and how often. 5.) how the thermometer should be cleaned and disinfected and how often. 6.) how to handle someone who has an elevated or abnormal temperature.
- 4.1.a.i..2 Train all staff on how to clean and care for masks. See CDC website for more information: <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/how-to-wash-cloth-face-coverings.html>
- 4.1.a.i..3 Eliminate, store or tape off chairs. Maximum of 5 chairs in this area.
- 4.1.a.i..4 Empower screening staff to be able to stop anyone exhibiting established or abnormal results and educate all facility staff on the importance of respecting the screening process. Signs are needed for sanitizing, and social distancing protocols. Although blue tape is on the floor of this area, a brighter color would draw attention to the particular marks against a dark carpet.
- 4.1.a.i..5 Sign in desk area should be moved closer to the door or outside of the facility to properly screen employees, clients, inmates coming in for arraignment and guests before they enter the building. This desk should be



## Hopi Tribe – Tribal Court Building On-site Risk Assessment Written Report

equipped with protective shields and sanitizing wipes as well as hand sanitizer for all to use.

- 4.1.a.i..6** Restroom One, located in this area is a unisex lavatory. Signage is required for hand washing. Install a hand sanitizing station between the two lavatories. f Restroom door swings inward, doorknob is a high touch area and must be sanitized after each use. Ensure a cleaning schedule and log are maintained.
- 4.1.a.i..7** Restroom Two, located in this area is a unisex lavatory. This lavatory is used for those clients being drug tested. Signage is required for hand washing. Install a hand sanitizing station between the two lavatories. Toilet lid should be installed and post signage to have people close them before flushing. This will reduce the amount of virus that could be aerosolized as per AIHA guidelines. Door swings inward, doorknob is a high touch area and must be sanitized after each use. Ensure a cleaning schedule and log are maintained.
- 4.1.a.i..8** Central HVAC unit provides the necessary ventilation, but there were reported issues of an odor emanating from the vents into the building when the ground mounted motor has brush/weeds near it. An older unit; OFRM is able to repair and upgrade as needed.
- 4.1.a.i..9** This area lacks a Fire Escape Plan, which should be posted for viewing.

ii. At the front entrance, there is an out swinging door which leads to Court Room 2. This area holds court proceedings for arraignments as well as child or civil court matters. The maximum capacity posted for this area is 30. To calculate maximum capacity, calculate the square footage of the court room and divide it by 36ft<sup>2</sup>. Seat spacing has markers on the floors in each bench section, however the spacing between the benches is less than 6ft. There are 5 doorways into this area: one from the exterior of the building (a Fire Exit, which is also used to bring in inmates), two doors lead to the administration area, one to a single occupancy office (Judge Wallace) and one to a small room where inmates are placed. Pews are used for seating of guests. One desk is used for the Prosecutor and defendant and the other for the inmate and counsel. The stand consists of desk space for the Court Clerk, presiding Judge and a witness stand. This room has the capability to do televised court proceedings, in which the large television can be mounted on the wall to free up additional space.

- 4.1.a.ii..1** Install a clear protective barrier between each person (2) at the Judges Bench
- 4.1.a.ii..2** Install protective barriers at the two tables where the Prosecutor and opposing counsel sit. This barrier should span the length of the tables, between the counsels and judge's bench. Protective barriers between the attorney and defendant, as well as at the Plaintiffs table are suggested.



## Hopi Tribe – Tribal Court Building On-site Risk Assessment Written Report

- This will help when distancing is not possible and the high possibility of personal interaction between two people at each table occurs.
- 4.1.a.ii.3** A podium sits as a place holder to slow the flow of traffic. It is recommended this be removed as it hinders access to the emergency exit. It was also recommended that Door E8 be used as the main entrance to this court room, if so, screening protocols should take place outside this entrance.
- 4.1.a.ii.4** Install protective barriers along the first row of pews where guests sit; there are two rows directly behind the Plaintiffs and Defendants tables. (7' tables, 2 each) This will mitigate the spread of germs from the guests in this area. Furthermore, it is recommended that every other bench row be closed off. Each pew should have tape marks indicating which seats should not be used in order to preserve the recommend social distancing requirements.
- 4.1.a.ii.5** Virtual hearings should be conducted until the pandemic is over. The ventilation in this room is adequate and is served by an HVAC sealed unit with filters rated as MERV 7, return air vents are inoperable. OFRMS notes that the system has never been replaced but is able to be repaired and upgraded. An upgraded system or total replacement for better service throughout the area is recommended.
- 4.1.a.ii.6** Install Hand Sanitizer stations at the doorways of C1, C2, C3, and outside of C5.
- 4.1.a.ii.7** Cleaning and Sanitizing Signs are needed for this room.
- 4.1.a.ii.8** Eliminate excess chairs to reduce congregation. If storage is unavailable, use caution tape to prevent use.
- 4.1.a.ii.9** Post new maximum occupancy sign, one that accounts for the recommend social distancing requirements (6ft).
- 4.1.a.ii.10** The television can be mounted to the wall to avoid being a High Touch item. Requires coordination with OIT for connectivity to the system used in the Courtroom.
- 4.1.a.ii.11** The room where inmates are placed prior to entering the courtroom must be limited to 3 people max. Tape off chairs or eliminate excess chairs in this area.
- 4.1.a.ii.12** Courtroom has a door which leads to office occupied by Judge Ed (Room B). This office has a single AC. Personal appliances were found throughout the room. These are high touch areas that should be cleaned consistently and regularly. This office is used by other judges as an entrance to the courtroom. This should be limited as much as possible to limit to possibility of cross-contamination.



## Hopi Tribe – Tribal Court Building On-site Risk Assessment Written Report

- 4.1.a.ii.13** Courtroom has multiple high touch areas. Recommend a cleaning protocol and log be maintained. The protocol should include the following 1.) a complete list of all high touch surfaces in the room. 2.) Identify what cleaning products should be used on these surfaces and ensure that they are effective against COVID-19 (i.e. that they are on the EPA N-list) 3.) Identify who will be responsible for conducting this work and how often it should be done. 4.) Keep a record of all required OSHA trainings for those tasked with cleaning and disinfecting (i.e. security and Janitorial staff).

iii. Staffing Considerations allows for most office staff to return to work while complying with physical distancing recommendations. To further enhance protection of the staff, and the services provided, consider the following:

- 4.1.a.iii.1** Limit the number of staff for any individual function that return to work on any given day. This both reduces the number of person to person contact that can occur as well as reduces the number of staff lost to infection and quarantine if COVID-19 is found within the facility. This in turn reduces the interruption to providing essential services.
- 4.1.a.iii.2** Stagger work-start-times to both reduce crowding of people being screened and bottlenecking at the office entry way.
- 4.1.a.iii.3** **Room 7** is a shared office with 2 Bailiffs. Recommend these two have alternating work schedules. The telephone becomes a high touch area.
- 4.1.a.iii.4** **Room 3** has time clocks which are high touch areas. Needs sanitizing wipes for cleaning after each use. The AC unit is reportedly loud, and sound emanates from vent on the wall directly behind the employee's desk. OFRM states the vent accommodates two filters to help with the noise factor.
- 4.1.a.iii.5** **Room 4** contains a Refrigerator and other shared amenities considered high touch areas. Signage is needed to inform the personnel of the needed cleaning protocols. Add sanitizing wipes and install hand sanitizing station.
- 4.1.a.iii.6** **Room 8** is a single occupancy office. Add sanitizing wipes for high touch areas and install hand sanitizing station.
- 4.1.a.iii.7**

iv. In many common areas (lobbies, sign in or time clock areas, open floor plan office spaces), no hand hygiene options were available (hand washing stations or hand sanitizer with at least 60% alcohol).

- 4.1.a.iv.1** Personnel were informed that the easier you make it for people to perform a function, the more likely they are to do it. Therefore, bottles or wall mounted dispensers of hand sanitizer should be provided throughout these common areas, along with appropriate signage encouraging their usage.





## Hopi Tribe – Tribal Court Building On-site Risk Assessment Written Report

- 4.1.a.iv..2** Copying/printing and shredding areas were noted as High Touch Areas. Personnel were encouraged to scan documents and utilize email to the extent practicable. Add a hand sanitizing station in this area. Area must also be cleaned daily. Add signage for cleaning protocols. The small desk in this area must also be cleaned after each use.
        - 4.1.a.iv..3** Room 1A – Conference Room, also serves as an eating area. Maximum occupancy for this room is 3 people. Post signage denoting the proper cleaning protocols for this room. Tables and chairs in this area need to be cleaned with sanitizing wipes after each use. Masks are taken off while eating, which increases the risk of disease spread therefore, it is recommended that staff eat at their own workstations with the doors closed. Alternatively, consider providing outdoor seating. Staff should be reminded to wash their hands and to clean and disinfect the area before and after eating.
        - 4.1.a.iv..4** Add hand sanitizer station between office doorways as near all doors that swing inwards.
        - 4.1.a.iv..5** Water cooler and coffee stations are considered shared amenities and require constant cleaning. Add cleaning wipes for this area and signage indicating proper cleaning protocols.
  - v. HVAC system needs optimization. Currently, the HVAC unit services the entire building. All offices in this building have vents that produce excessive noise and use additional filters to help reduce the noise. There is a smell that comes from the outside during windy or rainy days, which occurs when vegetation near the motor becomes wet or heated and goes into the system. A new unit for the overall building would help to resolve these issues.
    - 4.1.a.v..1** Work with facilities to ensure HVAC is in good working order, identify workspaces not receiving HVAC airflow, and ensure that air recirculation is minimized (single direction airflow from inside to out is best) and that the number of air exchanges for the building are maximized without taxing the HVAC system. If weather is permitting, keep windows open to increase ventilation. More information regarding HVAC system recommendations can be found at: <https://www.ashrae.org/technical-resources/resources>
  - vi. Drinking water is currently supplied to the staff via cooler unit and supplied water bottles.
    - 4.1.a.vi..1** Shut down the drinking fountain component of the water supply unit. The bottle filler may still be used provided both a hand disinfectant dispenser is installed, and cleaning wipes are provided next to the unit.
    - 4.1.a.vi..2** Water stations were observed outside the lounge area that did not have hand sanitizing stations nearby, recommend the unit be relocated to the lounge area or to have cleaning supplies readily available. Post signage for cleaning protocols.



## Hopi Tribe – Tribal Court Building On-site Risk Assessment Written Report

- 4.1.a.vi.3** Emergency Exit was observed to be obstructed by several clear 5-gallon water containers. Clear water containers from the hallway area leading to the Emergency exit. Store in a place where there is little to no traffic. Per OSHA “exit routes must be free and unobstructed. No materials or equipment may be placed permanently or temporarily within the exit route. (See 29 CFR 1910.37(a)(3).

vii. Bathrooms are small and do not allow for physical distancing. Toilets do not have lids. Paper towel dispensers are not hands-free, and doors swing inwards.

- 4.1.a.vi.4** Limit bathroom usage to one person at a time.

- 4.1.a.vi.5** Change out paper towel dispensers for hands-free units, and install instructions on proper hand washing, turning off the sink, and opening the door.

- 4.1.a.vi.6** Staff Women’s Restroom needs an upgraded light/fan unit as described in the heading of this section. Acoustical ceiling tiles need replacing.

- 4.1.a.vi.7** Staff Men’s Restroom needs an upgraded light/fan unit as described in the heading of this section. Acoustical ceiling tiles need replacing.

### b. Staff Offices

- i. The Offices observed all had high touch areas; each needing signs for cleaning protocols and a hand sanitizing station strategically placed on the outside of the door where hands can be sanitized after closing the door. Air ventilating system is loud when fan is operating. Cleaning up offices and limiting personal items on desks particularly for those offices with single occupancy is recommended, as this limits the possibility of the virus settling on those surfaces.

- 4.1.b.i.1** Room 1 – Chief Judge Office: This office is the largest and has an emergency exit. Maximum occupancy is 3 people to allow for distancing between occupants while congregating. A large desk was observed, along with a conference table and chairs, a full-sized sofa, and a portable toilet. It is strongly recommended that the portable toilet be removed from the office space and that personnel make use the staff lavatory which provides a hand washing station. Alternatively, this item should be moved to the lavatory. The portable toilet and sofa are set in the pathway of the emergency exit and therefore must be removed. A personal fan was noted, and education of staff for the use of the fan was done. Staff were instructed that the door must be closed, and there must be the only one person in the room. The presence of the fan suggests that the ventilation system is not adequately distributing air throughout. All cabinets require cleaning and sanitizing daily. Cleaning and hand sanitizing signage as well as the installation of a hand sanitizing station outside this office is recommended.



## Hopi Tribe – Tribal Court Building On-site Risk Assessment Written Report

- 4.1.b.i..2** Room 5 – Administrators Office: Provide signage for cleaning and hand sanitizing in addition to sanitizing wipes. Cabinets were noted as high touch areas and it was recommended that items be cleared away from fire extinguisher. Maximum occupancy for this room is 1.
- 4.1.b.i..3** Room 11 – Judge’s Office. Provide signage for cleaning, hand sanitizer and sanitizing wipes. Maximum occupancy for this room is 1.
- 4.1.b.i..4** Room 12 – Closet: Serves as a Janitor closet and is a shared amenity as well as a high touch area. Provide signage for cleaning and sanitizing wipes. Place a hand sanitizing station inside of this office.
- 4.1.b.i..5** Rooms 6, 9 and 10 – Offices: currently vacant. Clean room and clear items away from Return Air Vent. Recommend that the doors to these offices remain open.
- 4.1.b.i..6** Windows can be opened only as needed to increase ventilation.

ii. Virus on paperwork poses a low risk of infecting an individual. However, if physical documentation is going to be handled, the following handling options can further reduce risk:

- 4.1.b.ii..1** Perform hand hygiene. Handle paperwork without gloves and by touching as few additional items (phones, keyboard, mouse) as possible while processing. File paperwork. Wipe down all touched surfaces. Perform hand hygiene again.
- 4.1.b.ii..2** Let paperwork rest 24-48hrs, then process as indicated in 4.1.b.ii..1.
- 4.1.b.ii..3** Place the paperwork in a plastic sleeve. Disinfect the outside of the sleeve, perform hand hygiene, and then process as in 4.1.b.ii..1.

### c. Reception Desk

i. This office space is limited; staff rotate to cover this area and the phone. Working area is a confined station. It is equipped with a protective barrier with a door that is locked continuously and operated by a pin keypad which is a high touch area. Need signage for mask wearing protocols as well as cleaning protocols. Recommend a cubicle system to create a barrier that will not impede the flow of traffic nor access to the area.

- 4.1.c.i..1** Enforcement of mask wearing needs to occur when in shared space or when physical distancing is not possible.
- 4.1.c.i..2** Limit the number of staff that can be in any confined space to one. Find alternative space for them to work or stagger the attendance schedule to ensure overcrowding doesn’t occur.
- 4.1.c.i..3** High touch areas such as Computers, telephone, clip boards, file cabinets etc., require constant and consistent sanitization after each use and use of the process detailed in 4.1.b.ii..1.
- 4.1.c.i..4** Remove mail center or relocate to the lounge or printing area.





## Hopi Tribe – Tribal Court Building On-site Risk Assessment Written Report

### d. Overall Office Building

- i. The importance of overall cleanliness is needed for the safe functioning of the facility as well as to facilitate safe interaction with the public. It was noted that one OFMR staff is dedicated to the tribal properties of the Judicial Complex and performs janitorial and some maintenance duties daily. Upon observation it was also noted that the age of the building and amenities are dated but in good condition, however, to improve with cleaning, the following points are recommended:

- |                   |  |
|-------------------|--|
| <b>4.1.d.i..1</b> | Replace carpeting with laminate flooring.  |
| <b>4.1.d.i..2</b> | Increase cleaning of the First Aid Cabinet.  |
| <b>4.1.d.i..3</b> | Place fire escape plans of the building throughout and one relevant to each room.  |
| <b>4.1.d.i..4</b> | Strengthen screening protocols for the entry of guests and inmates by creating a screening station on the exterior of the main entrance and signage. |

## 5.0 Interpretation of Results

- 5.1 **Evaluation of Site Specific Assessments:** The goal of these assessments were two fold; first to perform a risk assessment and identify mitigation strategies for staff to return to work in the Tribal Court Annex Building, and second, to provide the staff with a framework for administering these site specific risk assessments for COVID-19 mitigation suitability at future facilities. The overall mitigation strategies and the protection of government services fell into two main categories:

- a. Increase adherence to maximizing the three pillars of disease infection reduction: maximize distance (in the form of rearranging furniture and limiting office and conference room sharing), decrease time (in the form of staggering start times to avoid groups of people congregating), and minimizing exposure (in the form of mask wearing, sneeze guard utilization, full walls or offices for staff, and reducing staff in shared spaces).
- b. Limiting the effect on essential services if COVID-19 infects staff. This can be accomplished by not having all the staff in a particular service come to work on the same day (even if there is adequate room), it helps ensure that not all the staff that perform a function will be exposed or infected. This means no full service will be entirely infected/quarantined by a single exposure.

- 5.2 **Limitations:** This assessment is a snapshot of the governmental facilities without yet having staff on site. Reevaluation of these mitigation strategies will need to occur often and thoroughly to help quickly catch deficiencies in their efficacy and encourage new strategies to be implemented.

## 6.0 Statement of Suitability

- 6.1 Protecting staff and customers is of critical importance for the reopening of the governmental offices. Identifying both the strengths of current mitigation strategies, as well as where changes need to be made is necessary to identify before staff return to work. Vigilant checking of the efficacy



## Hopi Tribe – Tribal Court Building On-site Risk Assessment Written Report

of these strategies is needed to ensure as staff return, their wellbeing and those they serve continues to be protected.

- 6.2 The recommendation of this work is that once these mitigation strategies are implemented and policies are finalized, the governmental offices are ready to be reopened in line with the Hopi Tribe Reopening Plan.
- 6.3 The Tribal Judicial Complex on-site risk assessments have been performed and completed as outlined in Section 4 of this report and is ready to be used as a component in the continuing evaluation of the safety practices of for the reopening of these buildings.

### 7.0 Summary Report Approval

Performed By: Hopi Reopening Task Group Date: 7/20/2020

Printed name: Sahmie Lomahquahn / Dayn Melvin  
Primary Assessor

### 8.0 Appendices

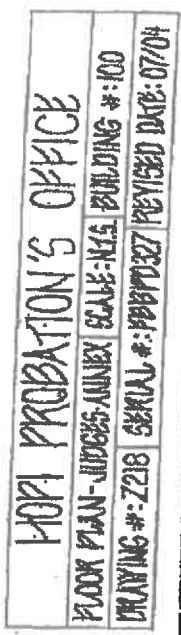
- 8.1 Summary of changes needed from the Hopi Court Annex Risk Assessment



## **Hopi Tribe – Tribal Court Building On-site Risk Assessment Written Report**

### **Summary of changes needed from Court Annex Building Risk Assessment**

1. Create and implement a structured screening policy for screening incoming staff, empowering screeners to stop those that have fevers or flagged answers to screening questions and educate staff on the importance of the screening procedure to keep them safe.
2. For each service offered, limit the number of staff that perform a particular function from working at the same time. This will ensure that if a COVID-19 outbreak occurs, not all the staff that perform a particular function have to be isolated or quarantined and be unable to work at the same time.
3. Encourage teleworking when appropriate, and stagger scheduling to limit bottlenecks at screening points and crowding of work areas.
4. Install sneeze guards or physical barriers in locations that have staff interacting with clients and in the Tribal Courtroom Chambers.
5. Ensure hand sanitizer with at least 60% alcohol is available in all high traffic areas.
6. Ensure that cleaning checklists and logs are maintained for all high touch areas. See CDC's Cleaning and Disinfecting Decision Tool for guidance.
7. Rearrange furniture in open work areas to maximize at least 6 feet distances between staff/guests.
8. Ensure HVAC is functional. Identify locations in the building not being serviced by the system and repair. Eliminate use of personal fans in shared areas.
9. Close off water fountains. Bottle fillers are acceptable if hand sanitizer and disinfecting wipes are available near the bottle fillers.
10. Bathrooms should be made single occupancy and signage on the doors needs to state this. Install hands-free paper towel dispensers.
11. Reduce physical paperwork when possible; electronic forms and email are preferred. When paperwork is required, have it deposited at a central area for pickup rather than individually handed in to staff.
12. Reduce occupancy of confined spaces like conference rooms. Ensure adequate ventilation is available and remove tables and chairs to reflect the desired maximum occupancy number.
13. Office spaces should be considered single occupancy; stagger working times or find alternative places to work to ensure proper distancing and ventilation can occur.
14. Require the use of face coverings within the buildings and in shared areas. Within private offices, face coverings can be removed, but should be put back on if anyone comes to have a discussion.
15. Ensure the areas that do not have cubicles or walls fully separate one person from another. If this is not possible, limit the staff that share an area to ensure proper distancing and working in shared space.
16. Staff are the best eyes and ears for IPC. Ensure they have a way to report concerns, and that management is receptive to their thoughts and questions.



**RECEIVED DISTRICT OF COLUMBIA**

- (J) Submaster - Willker  
(Y12) All employees  
(H13) Ethen & Jack  
(H14) Belling Only
- Note: Employees do not look individual offices after hours. Keys for offices will be upon request of employees.



## **Hopi Tribal Headquarters Administrative and Honani Building On-site Risk Assessment Written Report**

### **1.0 Scope**

- 1.1 **Risk Assessment Report For:** The reopening of governmental services housed in the Tribal HQ Administrative and Honani Buildings
- 1.2 **Date Performed:** 6/24/2020
- 1.3 **Assessors (Name/Association):** Oren Mayer/CDC Lead and Training Assessor; Lisa Pawwinnee; Cheryl Tootsie; Aaron Nasingoetewa; Nathaniel Tootsie; Randy Poleahla; Steve Bahnimptewa; Thornton Day; Daryn Melvin; Robert Collateta Jr.

**2.0 Overview of the Procedure:** In response to the ongoing COVID-19 pandemic, the Hopi Tribe has instituted widespread community mitigation and prevention efforts that have included closing much of the tribal government. These efforts, combined with ongoing containment activities, have served as both an effective intervention for limiting the spread of COVID-19 and stressor to the economic well-being of Hopi communities. The Hopi Reopening Plan follows a three-phase approach to inform decision-making for mitigation measures while balancing protection measures for the Hopi people. Phase One of the Hopi Plan involves the controlled reopening of essential governmental services. To ensure that these operations could be conducted safely both for governmental staff as well as the tribal customers they serve, a risk assessment was performed by both CDC and tribal representatives to evaluate the physical space of the Administrative and Honani Hopi HQ buildings for physical risk, COVID-19 response policies, and to address staffing concerns of how to operate safely. This assessment served a second purpose, for CDC staff to train Hopi representatives on how to perform these COVID-19 specific risk assessments to increase tribal capacity and reduce/eliminate dependence on outside assistance for assessing future reopening services/facilities.

**3.0 Study Methods:** This assessment identified hazards associated with the physical reopening of the Administrative and Honani Buildings in both a broad assessment of physical space as well as individual assessments of each of the subservice office areas. Coordination with Hopi tribal staff and facilities/supervisor subject matter experts (SME) to understand current practices occurred to determine the baseline of operational mitigation strategies. Additional assessments of new mitigation strategies ranging from workspace reorganization to staggering staffing attendance to adjusting service implementation or scope occurred to determine their effects on further reducing COVID-19 infection risk.

To perform this assessment, Hopi and CDC staff conducted an in-person walkthrough of all workspaces in consideration for reopening within these two buildings. Office layout, staffing numbers, air ventilation and flow, cleaning procedures, bathroom/drinking water availability, common work areas, and staff activities were all assessed for implementation under the three-pillars of reducing the spread of COVID-19; 1) maximizing distance, 2) minimizing time, and 3) reducing exposure. These pillars focus on increasing the distance between infected and non-infected, decreasing the time they are together, and reducing the amount of virus present.

### **4.0 Assessment Findings with Mitigation Strategies:**





## Hopi Tribal Headquarters Administrative and Honani Building On-site Risk Assessment Written Report

- 4.1 **Administrative Building**—total estimated capacity ~60 individuals. Large building broken up into several sub offices depending on service offered.
- a. **Shared services/spaces building-wide**
- i. Administration Building Entry Screening Checkpoint requires strengthening. It is far from building entry, so it is possible for staff to bypass it. No temperature screening occurs, and no policy exists for what to do if there is a fever. Screeners are not empowered to stop high ranking or official staff or guests based on screening results.
- 4.1.a.i..1 Implement a robust screening policy that includes full symptoms, temperature checks, and a clear chain of command for reporting abnormal or established results.
- 4.1.a.i..2 Move the screening guard closer to the entrance to ensure staff can't bypass screening.
- 4.1.a.i..3 Empower screening staff to be able to stop anyone and educate all facility staff on the importance of respecting the screening process.
- ii. Facility and service entrances involve face to face interactions between customers and staff. There is no physical barrier to control access from entry to office spaces. Lobby spaces has several chairs and tables that can encourage group congregation.
- 4.1.a.ii..1 Install a clear plastic sneeze guard or other physical barrier between any areas where customers will need to interact with staff at entry or screening points. When installation is not possible, mark on the ground 6ft from desk space to encourage physical distancing.
- 4.1.a.ii..2 Install gates or physical blocks between lobbies and office spaces to ensure controlled access.
- 4.1.a.ii..3 Remove tables and chairs from lobby areas to reduce congregation. If some customers require seating (elderly, disabled), space out chairs to ensure physical distancing.
- iii. Staffing Considerations allows for most office staff to return to work while keeping with physical distancing recommendations. To further enhance protection of the staff, and the services they provide, consider the following:
- 4.1.a.iii..1 Limit the number of staff for any individual function that return to work on any given day. This both reduces the number of people to people interactions that can occur as well as reduces the number of staff lost to infection and quarantine if COVID-19 is found within the facility. This reduces the interruption to providing essential services.
- 4.1.a.iii..2 Stagger work start times to both reduce crowding of people being screened and the bottleneck of office entry.
- iv. In many common areas (lobbies, sign in or time clock areas, open floor plan office spaces), no hand hygiene options were available (hand washing stations or hand sanitizer with at least 60% alcohol).



**4.1.b.ii.1** Perform hand hygiene. Handle paperwork without gloves and by touching as few additional items (phones, keyboard, mouse) as possible while



## Hopi Tribal Headquarters Administrative and Honani Building On-site Risk Assessment Written Report

- processing. File paperwork. Wipe down all touched surfaces. Perform hand hygiene.
- 4.1.b.ii.2 Let paperwork rest 24-48hrs, then process as 4.1.b.ii.1.
  - 4.1.b.ii.3 Place the paperwork in a plastic sleeve. Disinfect the outside of the sleeve, perform hand hygiene, and then process as 4.1.b.ii.1.
- iii. The HVAC system in many of the offices is non-functional reducing air circulation and encouraging the use of personal fans that blow air from one person to another.
- 4.1.b.iii.1 Personal fans in communal areas should not be used. Their use in an office is permissible if only one occupant is present and the door to the office can be closed. If a fan is used, it should not be pointed in the direction of the door.
- iv. The current Finance Office layout is both high-walled cubes and individual and shared offices.
- 4.1.b.iv.1 Cubes: Individual cubes offer adequate protection from those in other cubes. However, cubes with incomplete division from others, or those that are shared should either extend the dividing wall to ensure full separation or limit staff occupancy to a single staff person.
  - 4.1.b.iv.2 Offices: Shared office spaces are confined, and not set up to support physical distancing. Rearrange desks to maximize distance between staff working in the shared area. Consider limiting staff attendance to ensure no overcrowding of the common work area occurs.
- c. **IT and Procurement Office**
- i. Procurement office space is tight; staff are crowded, working in confined offices, and not wearing masks.
    - 4.1.c.i.1 Enforcement of mask wearing needs to occur when in shared space or when physical distancing can't be guaranteed.
    - 4.1.c.i.2 Limit the number of staff that can be in any confined space to one. Find alternative space for them to work or stagger the attendance schedule to ensure overcrowding doesn't occur.
  - ii. IT cube space is open and adequately spaced out. However, shared food/drink equipment (refrigerator, coffee machine, microwave) are in their space increasing the number of people they interact with.
    - 4.1.c.ii.1 Consider moving shared items to an area of the office that doesn't normally house staff. Provide disinfecting wipes and hand sanitizer for usage both before and after handling all shared items. Put signage up to emphasize the need to follow these practices.
- d. **Revenue Commission and Legal**
- i. Currently all offices in this area are single occupancy. However, the tribe is looking to hire additional staff for legal and are planning to have them share office space.





To ensure adequate distancing, maximum occupancy of this conference room should be limited to 3-4 people. All other chairs should be removed, and allowable furniture should be arranged to maximize space.



## Hopi Tribal Headquarters Administrative and Honani Building On-site Risk Assessment Written Report

### h. Receiving

- i. Single employee in a single room. HVAC does not work.

**4.1.h.i..1** To enhance ventilation, identify why HVAC does not function, and work with facilities and building management to repair.

### i. Department of Health and Human Services

- i. Offices are single occupancy, but central area is a large, open floor plan office area with 3-4 desks.

**4.1.i.i..1** Rearrange desks to maximize distance between staff working in the shared area.

**4.1.i.i..2** Consider limiting staff attendance to ensure no overcrowding of the common work area occurs.

### j. Department of Education Administration

- i. Offices are single occupancy, and do not need additional mitigation.
- ii. Conference room is small and confined in space.

**4.1.j.ii..1** To ensure adequate distancing, maximum occupancy of this conference room should be limited to 2-3 people. All other chairs and tables should be removed, and allowable furniture should be arranged to maximize space. If possible, keep doors open to increase ventilation.

### k. Human Resources

- i. Offices are single occupancy, and do not need additional mitigation.
- ii. Conference room is small and confined in space.

**4.1.k.ii..1** To ensure adequate distancing, maximum occupancy of this conference room should be limited to 2-3 people. All other chairs and tables should be removed, and allowable furniture should be arranged to maximize space. If possible, keep doors open to increase ventilation.

### l. Treasury

- i. Desks are arranged in an open floor plan design, but in close quarters (within 6 feet) due to the layout of the room. No additional desk configurations are possible.

**4.1.l.i..1** Limit the number of staff that can be in any confined space to one. Find alternative space for them to work or stagger the attendance schedule to ensure overcrowding doesn't occur.

## 4.2 Honani Building—total estimated capacity ~50 individuals. Large building; majority of staff are cubical based with shared offices around the periphery.

- i. Cubes: Individual cubes are high-walled and offer adequate protection from those in other cubes.



- [illegible]



**4.2.a.vi..3** Remove tables and chairs from lobby areas to reduce congregation. If some customers require seating (elderly, disabled), space out chairs to ensure physical distancing.

- 4.2.a.vii..1** The easier you make it for people to perform a function, the more likely they are to do it. Provide bottles or wall mounted dispensers of hand sanitizer throughout these common areas, and signage encouraging their usage.

**5.1 Evaluation of Site Specific Assessments:** The goal of these assessments were two fold; first to perform a risk assessment and identify mitigation strategies for staff to return to work in the Administration and Honani Buildings, and second to provide the Hopi staff a framework for administering these site specific risk assessments for COVID-19 mitigation suitability at future facilities. The overall mitigation strategies and the protection of government services fell into two main categories:

- 5.2 Limitations:** This assessment is a snapshot of the governmental facilities without yet having staff on site. Reevaluation of these mitigation strategies will need to occur often and thoroughly to help quickly catch deficiencies in their efficacy and encourage new strategies to be implemented.

6.1 Protecting staff and customers is of critical importance for the reopening of the governmental offices. Identifying both the strengths of current mitigation strategies, as well as where changes need to be made is necessary to identify before staff return to work. Vigilant checking of the efficacy of these strategies is needed to ensure as staff return, their wellbeing and those they serve continues to be protected.

- 6.2 The recommendation of this work is that once these mitigation strategies are implemented and policies are finalized, the governmental offices are ready to be reopened in line with the Hopi Tribe Reopening Plan.



## Hopi Tribal Headquarters Administrative and Honani Building On-site Risk Assessment Written Report

- 6.3 The Administrative and Honani Building on-site risk assessments have been performed and completed as outlined in Section 2 of this report and is ready to be used as a component in the continuing evaluation of the safety practices of for the reopening of these buildings.

### 7.0 Summary Report Approval

Performed By: Oren Mayer CDC Hopi RTG Date: 6/24/2020

Printed name: Oren Mayer  
Primary Assessor

### 8.0 Appendices

- 8.1 Summary of changes needed from Administration and Honani Risk Assessment



## **Hopi Tribal Headquarters Administrative and Honani Building On-site Risk Assessment Written Report**

### **Summary of changes needed from Administration and Honani Risk Assessment**

1. Create and implement a structured screening policy for screening incoming staff, empowering screeners to stop those that have fevers or flagged answers to screening questions and educate staff on the importance of the screening procedure to keep them safe.
2. For each service offered, limit the number of staff that perform a particular function from working at the same time. This will ensure that if a COVID-19 outbreak occurs, not all the staff that perform a particular function have to be isolated or quarantined and be unable to work at the same time.
3. Encourage teleworking when appropriate, and stagger scheduling to limit bottlenecks at screening points and crowding of work areas.
4. Install sneeze guards or physical barriers in locations that have staff interacting with clients.
5. Ensure hand sanitizer with at least 60% alcohol is available in all high traffic areas.
6. Rearrange furniture in open work areas to maximize at least 6 feet distances between staff.
7. Ensure HVAC is functional. Identify locations in the building not being serviced by the system and repair. Eliminate use of personal fans in shared areas.
8. Close off water fountains. Bottle fillers are ok if hand sanitizer and disinfecting wipes are available near the bottle fillers.
9. Bathrooms should be made single occupancy and signage on the doors needs to state this. Install hands-free paper towel dispensers.
10. Reduce physical paperwork when possible; electronic forms and email are preferred. When paperwork is required, have it deposited at a central area for pickup rather than individually handed in to staff.
11. Reduce occupancy of confined spaces like conference rooms. Ensure adequate ventilation is available and remove tables and chairs to reflect the desired maximum occupancy number.
12. Office spaces should be considered single occupancy; stagger working times or find alternative places to work to ensure proper distancing and ventilation can occur.
13. Require the use of face coverings within the buildings and in shared areas. Within private offices, face coverings can be removed, but should be put back on if anyone comes to have a discussion.
14. Ensure the cubicles have walls that fully separate one person from another. If this isn't possible, limit the staff that share an area to ensure proper distancing and working in shared space.
15. Staff are the best eyes and ears for IPC. Ensure they have a way to report concerns, and that management is receptive to their thoughts and questions.





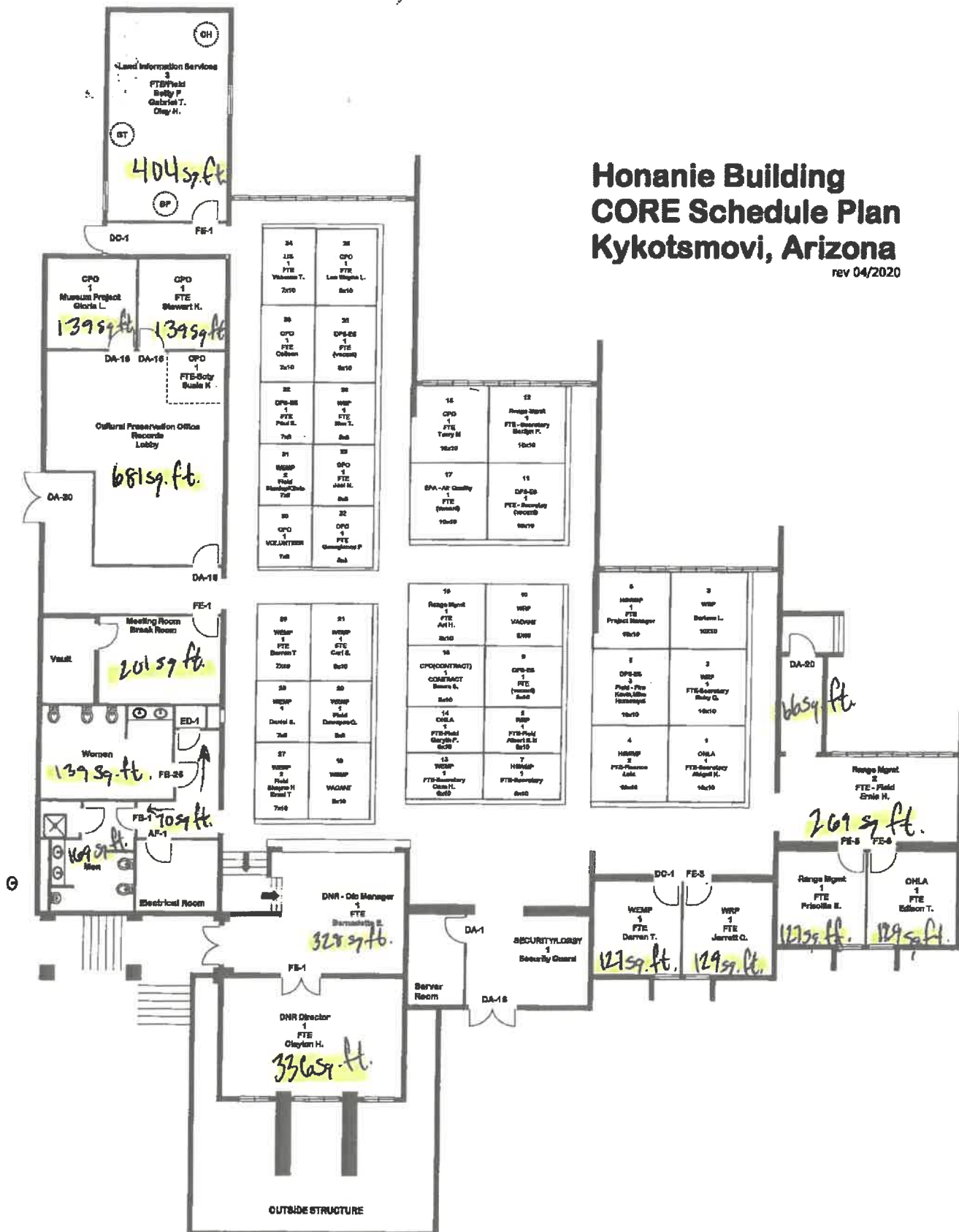




09-JUN-20

# Honanie Building CORE Schedule Plan Kykotsmovi, Arizona

rev 04/2020





## **Hopi Tribe – Tribal Employment Rights Office On-site Risk Assessment Written Report**

### **1.0 Scope**

- 1.1 **Risk Assessment Report For:** The reopening of governmental services housed in the Tribal Employment Rights (TERO) Office Building, Kykotsmovi, AZ.
- 1.2 **Date Performed:** 7/31/2020
- 1.3 **Assessors (Name/Association):** Cheryl Tootsie; Daryn Melvin; Denise Bekay, Aaron Nasingoetewa, Hopi Tribe; Mack McCraw, CDC

**2.0 Overview of the Procedure:** In response to the ongoing COVID-19 pandemic, the Hopi Tribe has instituted widespread community mitigation and prevention efforts that have included closing much of the tribal government. These efforts, combined with ongoing containment activities, have served as both an effective intervention for limiting the spread of COVID-19 and stressor to the economic well-being of Hopi communities. The Hopi Reopening Plan follows a three-phase approach to inform decision-making for mitigation measures while balancing protection measures for the Hopi people. Phase One of the Hopi Plan involves the controlled reopening of essential governmental services. To ensure that these operations could be conducted safely both for governmental staff as well as the tribal customers and clients they serve, a risk assessment was performed by tribal representatives to evaluate the physical space of the Tribal Employment Rights Office building for physical risk, COVID-19 response policies, and to address staffing concerns of how to operate safely. This assessment serves as a guide for the program to address any issues as they arise.

**3.0 Study Methods:** This assessment identified hazards associated with the physical reopening of the TERO Building in both a broad assessment of physical space as well as individual assessments of each office area. Coordination with Executive staff and Core Service staff, and subject matter experts (SME) to understand current practices occurred, and the baseline of operational mitigation strategies was determined. Additional assessments of new mitigation strategies ranging from workspace reorganization to staggering staffing attendance to adjusting service implementation or scope occurred to determine their effects on further reducing COVID-19 infection risk.

To perform this assessment, Hopi staff conducted an in-person walkthrough of all workspaces in consideration for reopening within this building. Office layout, staffing numbers, air ventilation and flow, cleaning procedures, bathroom/drinking water availability, common work areas, and staff activities were all assessed for implementation under the three-pillars of reducing the spread of COVID-19; 1) maximizing distance, 2) minimizing time, and 3) reducing exposure. These pillars focus on increasing the distance between infected and non-infected, decreasing the time they are together, and reducing the amount of virus present.

### **4.0 Assessment Findings with Mitigation Strategies:**

- 4.1 **Tribal Employment Rights Office Building** —total estimated capacity ~5 individuals. One story, single wide modular building, broken up into several sub offices, a conference area and restroom.



## Hopi Tribe – Tribal Employment Rights Office On-site Risk Assessment Written Report

### a. Main Entrance

- i. Entrance to this building is a metal ramp that is handicap accessible. The receptionist desk does not have a service window with protective barriers. It appears there is little to no Entry Screening Checkpoint for guests/staff. Consequently, screening protocols require strengthening. Sign in criteria of everyone except TERO staff was noted, although no COVID-19 related questionnaires were observed to be in place. No temperature screening occurs, and no policy exists for what to do if there is a fever. This creates an issue for Screeners to stop high ranking or official staff or guests based on screening results. From this entrance a cabinet stands to the left where the sign in process occurs. An area for file storage, incased dry erase board, and a copy machine, was observed as well as seating for guests/clients.

- 4.1.a.i..1 Implement a robust screening policy that includes full symptoms, temperature checks, and a clear chain of command for reporting abnormal or established results. Written policy and procedure on how screening will be conducted is recommended for training of staff. The policy should include the following: 1.) Information on what PPE to use. 2.) Proper PPE donning and doffing procedures. 3.) The type of thermometer to be used. 4.) How the thermometer's calibration will be checked and how often. 5.) How the thermometer should be cleaned and disinfected and how often. 6.) How to handle someone who has an elevated or abnormal temperature.
- 4.1.a.i..2 Eliminate, store or tape off excess chairs. Maximum of 1 chairs in this area.
- 4.1.a.i..3 Re-arrange the Office layout so that the flow of traffic through the office (assuming customers will be accommodated) can be managed and allow minimal access to other parts of the office beyond the reception area.
- 4.1.a.i..4 Empower screening staff to be able to stop anyone and educate all facility staff on the importance of respecting the screening process. Signs are needed for mask wearing, sanitizing, and social distancing protocols. Use bright color tape to draw attention to where people are to queue up.
- 4.1.a.i..5 Establish an appointment only systems for client visits as well as robust policies for screening clients and guests prior to entry into the building.
- 4.1.a.i..6 Recommend rearranging the desk/furniture to create an area to sign in that is closer to the entrance. Move Reception Desk to where table currently sits, desk hutch can be used as barrier between staff and public. Lateral file cabinet(s) can also be used as a barrier. Avoid obstruction of access to the copy machine, other offices and doorways. Remove tables and excess chairs.
- 4.1.a.i..7 Sanitizing after prolonged handling of documents is recommended. See **section b.ii.** for more detailed guidance. Encourage the scanning and digitization of documents and the use of email.



## **Hopi Tribe – Tribal Employment Rights Office On-site Risk Assessment Written Report**

- 4.1.a.i..8 Recommend a protective barrier be installed on the receptionist's desk to reduce the risk of exposure between the client and staff.
  - 4.1.a.i..9 Provide signage for cleaning, distancing and mask wearing protocols as well as Fire Escape Plan and max occupancy sign posted for viewing. If Fire evacuation plan does not exist, develop a fire evacuation plan with local fire department and post throughout facility as required by OSHA.
  - 4.1.a.i..10 High Touch areas include: Copier, telephone, coffee maker, file cabinets, tables, chairs, time clock, and desk-top unit. These areas need constant and consistent cleaning. Provide sanitizing wipes and a hand sanitizing station near doorway.
- ii. From the reception we observed two single office spaces with windows that open/close. Before reaching the director's office, a unisex restroom with storage unit inside was observed.
  - 4.1.a.ii..1 Unisex restroom: remove the office supply cabinet and dishes. Personal items need to be take home. Refer to section 4 for lavatory assessment.
  - 4.1.a.ii..2 The director's office: remove or tape off excess chairs; one client max, post Maximum Occupancy sign (2), needs Fire Escape plan, arrange desk to allow for distancing between staff and client/staff.
  - 4.1.a.ii..3 The shelves and file cabinets located in both offices are considered a high touch areas. Place sanitizing wipes for constant/consistent cleaning upon each use and signage.
  - 4.1.a.ii..4 Provide paper handling protocols for both office and we encourage digitizing case files.
  - 4.1.a.ii..5 Both have other high touch areas which are: Mail distribution units, the desktop unit and paper shredders. Provide cleaning protocol signs and sanitizing wipes for consistent cleaning after use.
  - 4.1.a.ii..6 The staff assistants office: remove or tape off excess chairs; one client max, post Maximum Occupancy sign (2), needs Fire Escape plan, arrange desk to allow for distancing between staff and client/staff.
- iii. Staffing Considerations allows for most office staff to return to work while keeping with physical distancing recommendations. To further enhance protection of the staff, and the services they provide, consider the following:
  - 4.1.a.iii..1 Limit the number of staff for any individual function that return to work on any given day. This both reduces the number of people to people interactions that can occur as well as reduces the number of staff lost to infection and quarantine if COVID-19 is found within the facility. This reduces the interruption to providing essential services.
  - 4.1.a.iii..2 Stagger work start times to both reduce crowding of people being screened and the bottleneck of office entry.



## Hopi Tribe – Tribal Employment Rights Office On-site Risk Assessment Written Report

- 4.1.a.iii..3** Cross train employees.
- iv. In many common areas (lobbies, sign in or time clock areas, open floor plan office spaces), no hand hygiene options were available (hand washing stations or hand sanitizer with at least 60% alcohol) were not observed.
- 4.1.a.iv..1** It should be remembered that the easier you make it for people to perform a function, the more likely they are to do it. Provide bottles or wall mounted dispensers of hand sanitizer throughout these common areas, and signage encouraging their usage.
- 4.1.a.iv..2** Copy machine, printer and shredder were noted as high touch areas. Encourage scanning documents and emailing. Add a hand sanitizing station at this area. Area must also be cleaned daily. Add signage for cleaning protocols. The protocol should include the following 1.) A complete list of all high touch surfaces in the room. 2.) Identify what cleaning products should be used on these surfaces and ensure that they are effective against COVID-19 (i.e. that they are on the EPA N-list) 3.) Identify who will be responsible for conducting this work and how often it should be done. 4.) Keep a record of all required OSHA trainings for those tasked with cleaning and disinfecting (i.e. security and Janitorial staff). Sign in desk area must be cleaned after each use.
- 4.1.a.iv..3** Coffee station and refrigerators are considered shared amenities and require constant cleaning. Add cleaning wipes for this area and signs for cleaning protocols.
- 4.1.a.iv..4** Shared closet for office supplies, cleaning agents and paper products used by staff was observed. Janitorial staff needs to organize and separate items by functional use.
- v. HVAC system provides adequate air flow and ventilation. Currently, the HVAC unit services the entire building.
- 4.1.a.v..1** Work with facilities to ensure HVAC is in working order, identify workspaces not receiving adequate air services, that air recirculation is minimized (single direction airflow from inside to out is best) and that the number of air exchanges for the building is maximized without taxing the HVAC system. (System has a MERV 7 Rating)
- vi. Lavatory is of adequate size but does not allow for physical distancing. Toilets do not have lids. Paper towel dispensers are not hands-free, and doors swing inwards.
- 4.1.a.vi..1** Limit bathroom usage to one person at a time.
- 4.1.a.vi..2** Change out paper towel dispensers for hands-free units, install hands free soap dispenser.





## Hopi Tribe – Tribal Employment Rights Office On-site Risk Assessment Written Report

- 4.1.a.vi.3** Provide signage for proper hand washing, sink use, door opening and cleaning. Install hand sanitizing station outside the lavatory.
- 4.1.a.vi.4** Toilet lid should be installed and post signage to have people close them before flushing. This will reduce the amount of virus that could be aerosolized as per AIHA guidelines.
- 4.1.a.vi.5** Remove cabinets within lavatory to minimize the possibility of accumulation of floating bacterial aerosols from the toilet.

### **b. Staff Offices**

- i. These offices were observed to have high touch areas; each needing signs for cleaning protocols and a hand sanitizing station on the outside of the office or strategically placed outside each office door where hands can be sanitized after touching the doorknob. Recommend Cleaning up offices and limiting the presence of personal items, which in turn reduces the risk of virus/germs settling and those surfaces.

- 4.1.b.i.1** Directors Office: See Section 4.1.a.ii.2.
- 4.1.b.i.2** Staff Assistant's office: See section 4.1.a.ii.6.
- 4.1.b.i.3** Receptionist area: See section 4.1.a.i.
- 4.1.b.i.4**

- ii. Virus on paperwork poses a low risk of infecting an individual. However, if physical documentation is going to be handled, the following handling options can further reduce risk:

- 4.1.b.ii.1** Perform hand hygiene. Handle paperwork without gloves and by touching as few additional items (phones, keyboard, and mouse) as possible while processing. File paperwork. Wipe down all touched surfaces. Perform hand hygiene.
- 4.1.b.ii.2** Let paperwork rest 24-48hrs, then process as 4.1.b.ii.1.
- 4.1.b.ii.3** Place the paperwork in a plastic sleeve. Disinfect the outside of the sleeve, perform hand hygiene, and then process as 4.1.b.ii.1.
- 4.1.b.ii.4** Create a links on each HTC member computer or mobile device to print centrally to a specific copier.

- iii. The HVAC system within the office areas is functional however, use of personal fans which blow air from one person to another indicates that the HVAC system requires optimization for adequate air flow and ventilation to all areas of the building.

- 4.1.b.iii.1** Personal fans in communal areas should not be used. Their use in an office is permissible if only one occupant is present and the door to the office can be closed. If a fan is used, it should not be pointed in the direction of the door.
- 4.1.b.iii.2** Windows can be opened only as needed for increased ventilation.

### **c. Overall Office Building**



## Hopi Tribe – Tribal Employment Rights Office On-site Risk Assessment Written Report

- i. The importance of overall cleanliness is needed to the function and interaction with the public. Upon observation we noted the building and amenities to be dated but in good condition, however, to improve with cleaning the following are recommended:
  - 4.1.c.i.1 Replace carpeting with laminate flooring.
  - 4.1.c.i.2 Place fire escape plans of the building throughout
  - 4.1.c.i.3 Increase heightened protocols for entry of guests and visitors by creating a screening station near the main entrance along with signage.
  - 4.1.c.i.4 It is recommend that the Eastern door be utilized as the main entrance. However, for this entrance to be accessible to all, an ADA ramp will have to be installed, or an alternative entrance for such individuals will have to be put in place.

### 5.0 Interpretation of Results

- 5.1 **Evaluation of Site Specific Assessments:** The goal of these assessments were two fold; first to perform a risk assessment and identify mitigation strategies for staff to return to work in the TERO Building, and second, to provide the staff with a framework for administering these site specific risk assessments for COVID-19 mitigation suitability at future facilities. The overall mitigation strategies and the protection of government services fell into two main categories:
  - a. Increase adherence to maximizing the three pillars of disease infection reduction: maximize distance (in the form of rearranging furniture and limiting office and conference room sharing), decrease time (in the form of staggering start times to avoid groups of people congregating), and minimizing exposure (in the form of mask wearing, sneeze guard utilization, full walls or offices for staff, and reducing staff in shared spaces).
  - b. Limiting the effect on essential services if COVID-19 infects staff. By not having all the staff in a particular service come to work on the same day (even if there is adequate room), it helps ensure that not all the staff that perform a function will be exposed or infected. This means no full service will be entirely infected/quarantined by a single exposure.
- 5.2 **Limitations:** This assessment is a snapshot of the governmental facilities without having staff on site. Reevaluation of these mitigation strategies will need to occur often and thoroughly to help quickly catch deficiencies in their efficacy and encourage new strategies to be implemented.

### 6.0 Statement of Suitability

- 6.1 Protecting staff and customers is of critical importance for the reopening of the governmental offices. Identifying both the strengths of current mitigation strategies, as well as where changes need to be made is necessary to identify before staff return to work. Vigilant checking of the efficacy of these strategies is needed to ensure as staff return, their wellbeing and those they serve continues to be protected.
- 6.2 The recommendation of this work is that once these mitigation strategies are implemented and policies are finalized, the governmental offices are ready to be reopened in line with the Hopi Tribe Reopening Plan.



**Hopi Tribe – Tribal Employment Rights Office  
On-site Risk Assessment Written Report**

- 6.3 The TERO Building on-site risk assessments have been performed and completed as outlined in Section 4 of this report and is ready to be used as a component in the continuing evaluation of the safety practices of for the reopening of this building.

**7.0 Summary Report Approval**

Performed By: Hopi Reopening Task Group Date: 7/31/2020

Printed name: Daryn Melvin, Chief of Staff, Hopi Tribe Office of the Vice Chairman  
*Primary Assessor*

**8.0 Appendices**

- 8.1 None.

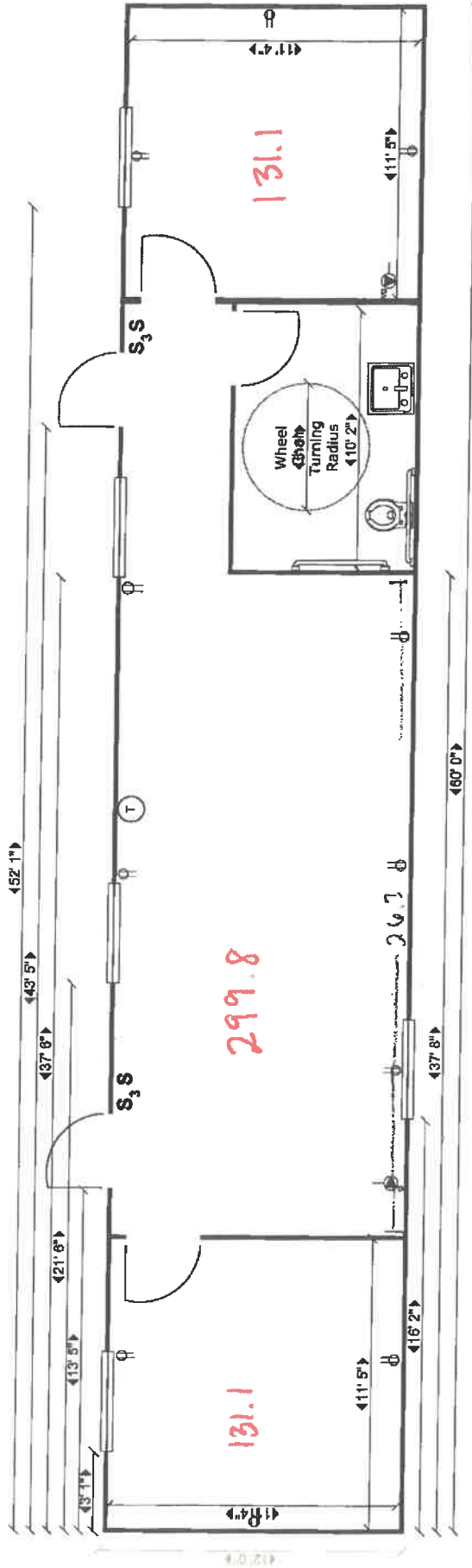




**Hopi Tribe – Tribal Employment Rights Office  
On-site Risk Assessment Written Report**

**Summary of changes needed from TERO Building Risk Assessment**

1. Create and implement a structured screening policy for screening incoming staff, empowering screeners to stop those that have fevers or flagged answers to screening questions and educate staff on the importance of the screening procedure to keep them safe.
2. For each service offered, limit the number of staff that perform a particular function from working at the same time. This will ensure that if a COVID-19 outbreak occurs, not all the staff that perform a particular function have to be isolated or quarantined and be unable to work at the same time.
3. Encourage teleworking when appropriate, and stagger scheduling to limit bottlenecks at screening points and crowding of work areas.
4. Install sneeze guards or physical barriers in locations that have staff interacting with clients and in the reception area.
5. Ensure hand sanitizer with at least 60% alcohol is available in all high traffic areas.
6. Rearrange furniture in open work areas to maximize at least 6 feet distances between staff/guests.
7. Ensure HVAC is functional. Identify locations in the building not being serviced by the system and repair. Eliminate use of personal fans in shared areas.
8. Close off water fountains. Bottle fillers are ok if hand sanitizer and disinfecting wipes are available near the bottle fillers.
9. Bathrooms should be made single occupancy and signage on the doors needs to state this. Install hands-free paper towel and soap dispensers.
10. Reduce physical paperwork when possible; electronic forms and email are preferred. When paperwork is required, have it deposited at a central area for pickup rather than individually handed in to staff.
11. Reduce occupancy of confined spaces like offices. Ensure adequate ventilation is available and remove tables and chairs to reflect the desired maximum occupancy number.
12. Office spaces should be considered single occupancy; stagger working times or find alternative places to work to ensure proper distancing and ventilation can occur.
13. Require the use of face coverings within the buildings and in shared areas. Within private offices, face coverings can be removed, but should be put back on if anyone comes to have a discussion.
14. Ensure the areas that do not have cubicles or walls fully separate one person from another. If this isn't possible, limit the staff that share an area to ensure proper distancing and working in shared space.
15. Staff are the best eyes and ears for IPC. Ensure they have a way to report concerns, and that management is receptive to their thoughts and questions.



# **T.E.R.O. Modular Office # 311** Kykotsmavi, Arizona revised 2/2016SPM.

- ⊖ Thermostat
- ⊖ Duplex
- ⊖ Dedicated circuit
- S<sub>3</sub> 3 way switch
- S single pole switch



## Hopi Childcare and Head Start Facilities in Kykotsmovi Village On-site Risk Assessment Written Report

### 1.0 Scope

- 1.1 **Risk Assessment Report For:** The reopening of childcare facilities and services in Kykotsmovi Village for utilization by governmental employees returning during Phase 1 of the Hopi Reopening Plan
- 1.2 **Date Performed:** 6/24/2020
- 1.3 **Assessors (Name/Association):** Oren Mayer/CDC Lead and Training Assessor; Lisa Pawwinnee; Cheryl Tootsie; Aaron Nasingoetewa; Nathaniel Tootsie; Randy Poleahla; Steve Bahnimptewa; Thornton Day; Daryn Melvin; Robert Collateta Jr.

**2.0 Overview of the Procedure:** In response to the ongoing COVID-19 pandemic, the Hopi Tribe has instituted widespread community mitigation and prevention efforts that have included closing much of the tribal government. These efforts, combined with ongoing containment activities, have served as both an effective intervention for limiting the spread of COVID-19 and stressor to the economic well-being of Hopi communities. The Hopi Reopening Plan follows a three-phase approach to inform decision-making for mitigation measures while balancing protection measures for the Hopi people. Phase One of the Hopi Plan involves the controlled reopening of essential childcare services to provide service to employees returning to work during Phase 1. To ensure that these operations could be conducted safely both for childcare staff as well as the tribal families they serve, a risk assessment was performed by both CDC and tribal representatives to evaluate the physical space of the Kykotsmovi Childcare and Head Start buildings for physical risk, COVID-19 response policies, and to address staffing and family concerns of how to operate safely. This assessment served a second purpose, for CDC staff to train Hopi representatives on how to perform these COVID-19 specific risk assessments to increase tribal capacity and reduce/eliminate dependence on outside assistance for assessing future reopening services/facilities.

**3.0 Study Methods:** This assessment identified hazards associated with the physical reopening of the Kykotsmovi Head Start and Childcare Buildings in both a broad assessment of physical space as well as individual assessments of each of the staff and childcare areas. Coordination with Hopi tribal staff and facilities/supervisor subject matter experts (SME) to understand current practices occurred to determine the baseline of operational mitigation strategies. Additional assessments of new mitigation strategies ranging from workspace reorganization to staggering staffing or child attendance to adjusting service implementation or scope occurred to determine their effects on further reducing COVID-19 infection risk.

To perform this assessment, Hopi and CDC staff conducted an in-person walkthrough of all workspaces in consideration for reopening within these two buildings. Facility layout, staffing numbers, child numbers, air ventilation and flow, cleaning procedures, bathroom/drinking water availability, common work and care areas, and staff activities were all assessed for implementation under the three-pillars of reducing the spread of COVID-19; 1) maximizing distance, 2) minimizing time, and 3) reducing exposure. These pillars focus on increasing the distance between infected and non-infected, decreasing the time they are together, and reducing the amount of virus present.



## Hopi Childcare and Head Start Facilities in Kykotsmovi Village On-site Risk Assessment Written Report

### 4.0 Assessment Findings with Mitigation Strategies:

#### 4.1 Kykotsmovi Childcare Building— total estimated capacity 25 students with current census of 23 (8 1-year old and 15 2-5-year-old) with operational hours of 0730-1730.

- i. Controlled access and entry screening policy requires strengthening. Unclear as to temperature screening, and no formal policy exists for what to do if there is a fever symptom.
  - 4.1.a.i.1 Implement a robust screening policy that includes full symptoms, temperature checks, location where those activities occur, and a clear chain of command for reporting abnormal results.
  - 4.1.a.i.2 Create a policy for outbreak responses to COVID-19; staffing, shutdown, notifications, cleaning/disinfecting facility.
  - 4.1.a.i.3 Mark the floor and lobby areas in 6ft increments so that arriving staff or parents know where to stand and leave distance to others.
- ii. Staffing considerations are not yet formalized (who is coming on what days and times).
  - 4.1.a.ii.1 Formalize which and when staff are needed, and if possible, stagger days of attendance; by not having all staff present on all days, it increases the workforce and service robustness if COVID-19 does enter the facility and staff must quarantine or isolate.
  - 4.1.a.ii.2 Stagger work start times to both reduce crowding of people being screened and the bottleneck of office entry.
- iii. Staff bathrooms are single room, single person occupancy for both men and women. Toilets do not have lids. Doors are not hands-free, and proper hand-washing signage is not up. Bathrooms have personal item storage lockers in them.
  - 4.1.a.iii.1 Install instructions on proper hand washing, turning off the sink, and opening the door.
  - 4.1.a.iii.2 If possible, install toilet lids and instruct them to be closed before flushing.
  - 4.1.a.iii.3 Instruct staff to not store personal items in the bathroom. Consider removing or locking lockers to ensure they are not used.
- iv. Drinking water is currently supplied to staff via drinking fountain. Drinking fountains are possible areas of COVID-19 transmission due to being both high touch and being easily contaminated with breath and saliva.
  - 4.1.a.iv.1 Shut down the drinking fountain.
  - 4.1.a.iv.2 Supply bottled water or encourage them to bring from home.
- v. In many common areas (lobby, conference area, outside the staff bathrooms), no hand hygiene options were available (hand washing stations or hand sanitizer with at least 60% alcohol).
  - 4.1.a.v.1 The easier you make it for people to perform a function, the more likely they are to do it. Provide bottles or wall mounted dispensers of hand sanitizer throughout these common areas, and signage encouraging their usage.

#### b. Classroom



## **Hopi Childcare and Head Start Facilities in Kykotsmovi Village On-site Risk Assessment Written Report**

- i. Classroom setup is a large, open space subdivided into areas for activities including eating, playing, art, and gathering. Toys and other items are disinfected daily (this policy has been in place since before COVID-19). There is no formal facility cleaning and disinfection policy in place.
  - 4.1.b.i..1** Ensure that the disinfectant used is included on the EPA's N-list (<https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2-covid-19>) for disinfecting toys and other items that are high touch or commonly shared.
  - 4.1.b.i..2** Formalize cleaning and sanitation policies (how often the room is cleaned, how often high touch objects or surfaces are disinfected, and with what chemical).
- ii. Face coverings for children 2 years old and older will be required. However, working out usage by children, (including disabled or refusing children) has not yet been finalized.
  - 4.1.b.ii..1** Continue to encourage mask wearing by those that will tolerate it. Educate and play are both positive ways of getting children to follow directions and accept new behaviors. Facility must decide if not wearing a mask disqualifies a child from attending (this is a facility level decision based on what they feel is needed).
- iii. The bathrooms for use in the classroom are single room, multistalled. For younger children, doors are not used. Toilets do not have lids. Hand washing signage was not visible.
  - 4.1.b.iii..1** Proper handwashing should signage should be hung in all bathrooms.
  - 4.1.b.iii..2** Limit child bathroom usage to single occupancy
  - 4.1.b.iii..3** Hang a clear shower curtain as a divider between the bathroom and the outside hallway.
  - 4.1.b.iii..4** If possible, install toilet lids and instruct them to be closed before flushing.
- iv. Every child has their own water container for drinking, however they are filled and stored together. Filling and storage areas are possible areas of COVID-19 transmission due to being both high touch and being easily contaminated with breath and saliva.
  - 4.1.b.iv..1** Store filled water bottles in personal cubbies to provide extra separation.
  - 4.1.b.iv..2** Supply bottled water or encourage them to fill at home before coming to childcare.
- v. Playground area is made of non-porous plastic material that is exposed to direct, intense sunlight. There are several toys and other items that are stored, shared, and used in the playground area. There is no place to perform hand hygiene before coming back inside.
  - 4.1.b.v..1** Heat, dryness, and intense sunlight all work together to reduce risk of COVID-19 transmission from the playground equipment. To increase safety, spray or wipe down outdoor equipment daily.
  - 4.1.b.v..2** Toys and other high touch items should be stored or removed from the outdoor area unless they can be disinfected between uses.





## Hopi Childcare and Head Start Facilities in Kykotsmovi Village On-site Risk Assessment Written Report

- 4.1.b.v.3** Install a hand washing station (soap and water or alcohol-based disinfectant that can be used prior to reentering the classroom.

**c. Kitchen/meals**

- i. All meals are prepared, plated, and served in-house by kitchen staff ensuring control of what is brought into the facility. Children eat communally at tables/desks.

- 4.1.c.i.1** Eating is an activity that occurs without the use of face coverings. Additionally, children often make messes, share/take food, and easily get distracted. Stagger seating around the classroom or install dividers to help children stay in a single area, contain messes, and reduce incidence of sharing/taking food.

- ii. Food temperature checks occur daily but haven't in months due to COVID-19 closing the facility. Temperatures are read off an analog thermometer in freezers and fridges.

- 4.1.c.ii.1** Consider digital thermometers that have memory for high and low temps. This will ensure that there is a power failure or other temporary loss of cooling, it will be recorded and noted by staff so all vulnerable food can be disposed of (please reach out to the OEHE for guidance on this thermometer).

**4.2 Kykotsmovi Head start building**—total estimated capacity 10 staff with 20 students (10 in the morning, 10 in the afternoon); serve 3-5 years old children

**a. Entry and Staff Space**

- i. To control access, the front door is locked and clients can only enter by ringing the doorbell and being allowed in by staff. A sneeze guard has been installed on the client facing secretary's desk. However, entry screening policy requires strengthening. Unclear as to temperature screening, and no formal policy exists for what to do if there is a fever symptom. There is an outbreak specific policy for standard childcare diseases, there is not one that is COVID-19 specific.

- 4.2.a.i.1** Implement a robust screening policy that includes full symptoms, temperature checks, location where those activities occur, and a clear chain of command for reporting abnormal results.

- 4.2.a.i.2** Create a policy for outbreak responses to COVID-19; staffing, shutdown, notifications, cleaning/disinfecting facility.

- 4.2.a.i.3** Mark the floor and lobby areas in 6ft increments so that arriving staff or parents know where to stand and leave distance to others.

- 4.2.a.i.4** Screening procedures for child transport need to be established, and a flow of information from driver to facility needs to be clarified.

- ii. Staffing Considerations allows for most office staff to return to work while keeping with physical distancing recommendations. Staff stagger attendance days; Monday/Wednesday or Tuesday/Thursday with Friday being divided. Offices are single occupancy but surround a large central area with a single desk and conference table.



**4.2.b.iii.1** Continue to encourage mask wearing by those that will tolerate it. Educate and play are both positive ways of getting children to follow directions and accept new behaviors. Facility must decide if not wearing a mask

## Hopi Childcare and Head Start Facilities in Kykotsmovi Village On-site Risk Assessment Written Report

disqualifies a child from attending (this is a facility level decision based on what they feel is needed).

- iv. There are 3 bathrooms for use in the classroom; two children's (pictured) and one adult with a changing table. Children's toilets are shared with no dividers and doors are not used. Toilets do not have lids. Door on adult bathroom is not hands-free.



**4.2.b.iv..1** Proper handwashing signage should be hung in all bathrooms.

**4.2.b.iv..2** Limit child bathroom usage to single child usage.

**4.2.b.iv..3** Hang a clear shower curtain as a divider between the bathroom and the outside hallway.

**4.2.b.iv..4** If possible, install toilet lids and instruct them to be closed before flushing.

- v. Drinking water is currently supplied to the classroom via drinking fountain. Drinking fountains are possible areas of COVID-19 transmission due to being both high touch and being easily contaminated with breath and saliva.

**4.2.b.v..1** Shut down the drinking fountain.

**4.2.b.v..2** Supply bottled water or encourage them to bring from home.

### c. Kitchen/meals

- i. All meals are prepared, plated, and served in-house by kitchen staff ensuring control of what is brought into the facility. Children eat communally at tables/desks.

**4.2.c.i..1** Eating is an activity that occurs without the use of face coverings.

Additionally, children often make messes, share/take food, and easily get distracted. Stagger seating or install plexiglass dividers to help children stay in a single area, contain messes, and reduce incidence of sharing/taking food.

- ii. Food temperature checks occur daily but haven't in months due to COVID-19 closing the facility. Temperatures are read off an analog thermometer in freezers and fridges.





## Hopi Childcare and Head Start Facilities in Kykotsmovi Village On-site Risk Assessment Written Report

### 4.2.c.ii.1

Consider digital thermometers that have memory for high and low temps. This will ensure that there is a power failure or other temporary loss of cooling, it will be recorded and noted by staff so all vulnerable food can be disposed of (please reach out to the OEHE for guidance on this thermometer).

iii. no hand hygiene options were available (hand washing stations or hand sanitizer with at least 60% alcohol).

### 4.2.c.iii.1

The easier you make it for people to perform a function, the more likely they are to do it. Provide bottles or wall mounted dispensers of hand sanitizer throughout these common areas, and signage encouraging their usage.

iv. No hand sanitizer with at least 60% alcohol was available.

### 4.2.c.iv.1

The easier you make it for people to perform a function, the more likely they are to do it. Provide bottles or wall mounted dispensers of hand sanitizer by the kitchen door, and signage encouraging its usage.

## 5.0 Interpretation of Results

5.1 **Evaluation of Site Specific Assessments:** The goal of these assessments were two fold; first to perform a risk assessment and identify mitigation strategies for staff and students to return to work and childcare in the Kykotsmovi Childcare and Head Start Buildings, and second to provide the Hopi staff a framework for administering these site specific risk assessments for COVID-19 mitigation suitability at future facilities. The overall mitigation strategies and the protection of government services fell into two main categories:

- a. Increase adherence to maximizing the three pillars of disease infection reduction: maximize distance (in the form of rearranging eating space and marking on the ground where to stand during entry screening), decrease time (in the form of staggering staff start times to avoid groups of people congregating), and minimizing exposure (in the form of mask wearing, sneeze guard utilization, and bathroom divisions).
- b. Limiting the effect on essential services if COVID-19 infects staff. By not having all the staff in a particular service come to work on the same day (even if there is adequate room), it helps ensure that not all the staff that perform a function will be exposed or infected. This means no full service will be entirely infected/quarantined by a single exposure.

5.2 **Limitations:** This assessment is a snapshot of the childcare facilities without yet having staff and children on site. Reevaluation of these mitigation strategies will need to occur often and thoroughly to help quickly catch deficiencies in their efficacy and encourage new strategies to be implemented.

## 6.0 Statement of Suitability

6.1 Protecting staff and students is of critical importance for the reopening of the childcare centers. Identifying both the strengths of current mitigation strategies, as well as where changes need to be



## Hopi Childcare and Head Start Facilities in Kykotsmovi Village On-site Risk Assessment Written Report

made is necessary to identify before staff return to work. Vigilant checking of the efficacy of these strategies is needed to ensure as staff return, their wellbeing and those they serve continues to be protected.

- 6.2 The recommendation of this work is that once these mitigation strategies are implemented and policies are finalized, the Kykotsmovi Childcare and Head Start centers are ready to be reopened in line with the Hopi Tribe Reopening Plan.
- 6.3 The Kykotsmovi Childcare and Head Start facilities on-site risk assessments have been performed and completed as outlined in Section 2 of this report and is ready to be used as a component in the continuing evaluation of the safety practices of for the reopening of these buildings.

### 7.0 Summary Report Approval

Performed By: Hopi Reopening Task Group Date: 6/24/2020  
Printed name: Dawn Melvin / Oren Mayer  
Primary Assessor

### 8.0 Appendices

- 8.1 Summary of changes needed from Kykotsmovi Head Start and Childcare building Risk Assessment



## **Hopi Childcare and Head Start Facilities in Kykotsmovi Village On-site Risk Assessment Written Report**

### **Summary of changes needed from Kykotsmovi Head Start and Childcare building Risk Assessment**

1. Create and implement a structured screening policy for screening incoming staff and students, empowering screeners to stop those that have fevers or flagged answers to screening questions and educate staff and parents on the importance of the screening procedure to keep them safe.
2. For each service offered, limit the number of staff that perform a particular function from working at the same time. This will ensure that if a COVID-19 outbreak occurs, not all the staff that perform a particular function have to be isolated or quarantined and be unable to work at the same time.
3. Stagger scheduling start times to limit bottlenecks at screening points and crowding of work areas.
4. Install sneeze guards or physical barriers in locations that have staff interacting with clients.
5. Ensure hand sanitizer with at least 60% alcohol is available in all high traffic areas.
6. Close off water fountains. Encourage students to bring their own water.
7. Bathrooms should be made single occupancy and clear dividers should be hung to separate them from the classroom.
8. Finalize policy on the requirement of face coverings. Work on plans to encourage their use with young children.
9. Finalize a COVID-19 response plan for each facility, consider sanitizing the facility, who will be notified, and when if it occurs.
10. Determine an eating policy for the children to reduce interactions without masks and to discourage food sharing.
11. To sanitize toys, high touch objects and surfaces, and the overall facility, ensure that the chemicals chosen are on the EPA N-list shown to be effective against COVID-19.
12. Playground may be reopened in hard to disinfect toys are removed and hand sanitization stations are installed.
13. Staff are the best eyes and ears for infection prevention and control. Ensure they have a way to report concerns, and that management is receptive to their thoughts and questions.

09 JUN 20

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Hopi Child Care Proposed Modular



## **Hopi Tribe – Cancer Support Program Building On-site Risk Assessment Written Report**

### **1.0 Scope**

- 1.1 **Risk Assessment Report For:** The reopening of governmental services housed in the Cancer Support Program Building, Kykotsmovi, AZ
- 1.2 **Date Performed:** 7/31/2020
- 1.3 **Assessors (Name/Association):** Cheryl Tootsie; Daryn Melvin; Aaron Nasingoetewa and Denise Bekay of the Hopi Tribe. Mack McCraw of CDC

**2.0 Overview of the Procedure:** In response to the ongoing COVID-19 pandemic, the Hopi Tribe has instituted widespread community mitigation and prevention efforts that have included closing much of the tribal government. These efforts, combined with ongoing containment activities, have served as both an effective intervention for limiting the spread of COVID-19 and stressor to the economic well-being of Hopi communities. The Hopi Reopening Plan follows a three-phase approach to inform decision-making for mitigation measures while balancing protection measures for the Hopi people. Phase One of the Hopi Plan involves the controlled reopening of essential governmental services. To ensure that these operations could be conducted safely both for governmental staff as well as the tribal customers and clients they serve, a risk assessment was performed by tribal representatives to evaluate the physical space of Cancer Support Program building for physical risk, COVID-19 response policies, and to address staffing concerns of how to operate safely. This assessment serves as a guide for the program to address any issues as they arise.

**3.0 Study Methods:** This assessment identified hazards associated with the physical reopening of the Cancer Support Program Building in both a broad assessment of physical space as well as individual assessments of each office areas. Coordination with Executive staff and Core Service staff, and subject matter experts (SME), to understand current practices occurred to determine the baseline of operational mitigation strategies. Additional assessments of new mitigation strategies ranging from workspace reorganization to staggering staffing attendance to adjusting service implementation or scope occurred to determine their effects on further reducing COVID-19 infection risk.

To perform this assessment, Hopi staff conducted an in-person walkthrough of all workspaces in consideration for reopening within this building. Office layout, staffing numbers, air ventilation and flow, cleaning procedures, bathroom/drinking water availability, common work areas, and staff activities were all assessed for implementation under the three-pillars of reducing the spread of COVID-19; 1) maximizing distance, 2) minimizing time, and 3) reducing exposure. These pillars focus on increasing the distance between infected and non-infected, decreasing the time they are together, and reducing the amount of virus present.

### **4.0 Assessment Findings with Mitigation Strategies:**

- 4.1 **Cancer Support Program Building** —total estimated capacity ~15 individuals. One story, double wide modular building, broken up into several sub offices, conference area, kitchen, exam room,



## Hopi Tribe – Cancer Support Program Building On-site Risk Assessment Written Report

printing room, storage and file room for the Hopi Tribe’s Cancer Support Program under the Department of Health and Human Services.

### a. Main Entrance

- i. Entrance are has a service window with protective barriers. It appears there is little to no Entry Screening Checkpoint of guests/staff and their protocols requires strengthening. Sign in criteria for everyone was observed, however no COVID-19 related questionnaires were observed to be in place. No temperature screening occurs, and no policy exists for what to do if there is a fever. This creates an issue for Screeners to stop high ranking or official staff or guests based on screening results. From this entrance there is a service window. A unisex restroom stands across from the sign in station. Directly across the main entrance is the kitchen/conference room. This building is home to two separate public service programs occupying each end of the building. The other program is the Hopi Tribe’s Social Services Program. Each program will receive its own written report.

- 4.1.a.i..1 Recommend Implementation of a robust screening policy that includes full symptoms, temperature checks, and a clear chain of command for reporting abnormal or established results. Written policy and procedure on how screening will be conducted is recommended for training of staff. The policy should include the following: 1.) Information on what PPE to use. 2.) Proper PPE donning and doffing procedures. 3.) The type of thermometer to be used. 4.) How the thermometer’s calibration will be checked and how often. 5.) How the thermometer should be cleaned and disinfected and how often. 6.) How to handle someone who has an elevated or abnormal temperature.
- 4.1.a.i..2 Empower screening staff to be able to stop anyone and educate all facility staff on the importance of respecting the screening process. Signs are needed for sanitizing, and social distancing protocols.
- 4.1.a.i..3 Establish an appointment only systems for client visits as well as robust policies for screening clients and guests prior to entry into the building.
- 4.1.a.i..4 This area needs to have a Fire Escape Plan and Max Occupancy signs posted for viewing. If Fire evacuation plan does not exist, develop a fire evacuation plan with local fire department and post throughout facility as required by OSHA.
- 4.1.a.i..5 Provide signage for cleaning, social distancing and masking protocols.
- 4.1.a.i..6 Change the sliding window to a one piece Plexiglas with a short opening for passing documents.
- 4.1.a.i..7 High Touch areas include: pens, desk bells, clip boards, time clocks at the reception desk and mobile filing units lined along the front desk facing the main entrance. This areas need constant and consistent cleaning, provide sanitizing wipes and a hand sanitizing station near doorway. Recommend a





## Hopi Tribe – Cancer Support Program Building On-site Risk Assessment Written Report

cleaning protocol and log be maintained. The protocol should include the following 1.) A complete list of all high touch surfaces in the room. 2.) Identify what cleaning products should be used on these surfaces and ensure that they are effective against COVID-19 (i.e. that they are on the EPA N-list) 3.) Identify who will be responsible for conducting this work and how often it should be done. 4.) Keep a record of all required OSHA trainings for those tasked with cleaning and disinfecting (i.e. security and Janitorial staff).

ii. A unisex restroom in this area was observed.

- 4.1.a.ii.1 Toilet lid should be installed and signage posted to have people close them before flushing. This will reduce the amount of virus that could be aerosolized as per AIHA guidelines.
- 4.1.a.ii.2 Provide signage to allow for one person to be in this area at a time, proper hand washing, mask and door opening signs.
- 4.1.a.ii.3 Install touch free soap and paper towel dispensers.
- 4.1.a.ii.4 Install hand sanitizing station outside of the lavatory.

iii. Staffing Considerations allows for most office staff to return to work while keeping with physical distancing recommendations. To further enhance protection of the staff, and the services they provide, consider the following:

- 4.1.a.iii.1 Limit the number of staff for any individual function that return to work on any given day. This both reduces the number of people to people interactions that can occur as well as reduces the number of staff lost to infection and quarantine if COVID-19 is found within the facility. This reduces the interruption to providing essential services.
- 4.1.a.iii.2 Stagger work start times to both reduce crowding of people being screened and the bottleneck of office entry.
- 4.1.a.iii.3 Cross training off staff responsibility is effecting with minimal staff.

iv. In many common areas (lobbies, kitchen areas, conference and open floor plan office spaces), the kitchen sink was available for hand hygiene, although no hand sanitizing station (hand washing stations or hand sanitizer with at least 60% alcohol) was observed. The kitchen conference room serves as an office, file storage and print station.

- 4.1.a.iv.1 It should be remembered that the easier you make it for people to perform a function, the more likely they are to do it, therefore provide bottles or wall mounted dispensers of hand sanitizer throughout these common areas, and signage encouraging their usage.
- 4.1.a.iv.2 One High Touch Area is the copying/printing and shredding areas; encourage scanning documents and emailing to the greatest extent





## **Hopi Tribe – Cancer Support Program Building On-site Risk Assessment Written Report**

possible. Recommend hand sanitizing station near large printer units; add sanitizing wipes in this area. Area must also be cleaned daily. Add signage for cleaning protocols. Recommend the Mylar printer be moved so it does not obstruct access/use for the exit door. Per OSHA “exit routes must be free and unobstructed. No materials or equipment may be placed permanently or temporarily within the exit route. (See 29 CFR 1910.37(a)(3).

- 4.1.a.iv..3** Lateral File Area – file cabinets are considered high touch areas. Provide signs and sanitizing wipes for cleaning upon use.
- 4.1.a.iv..4** Conference Room area has conference tables, chairs and a literature station. Recommend tables, chairs and literature center be wiped down daily, and digitize case files being stored. This area is also used as an eating area by staff. Masks are taken off while eating, which increases the risk of disease spread therefore, it is recommended that staff eat at their own workstations with the doors closed. Alternatively, consider providing outdoor seating. Staff should be reminded to wash their hands and to clean and disinfect the area before and after eating.
- 4.1.a.iv..5** Recommend a maximum capacity of 4 people at each table row, facing one direction. Cleaning is required after each use.
- 4.1.a.iv..6** A small kitchenette is available for staff. Provide signage for cleaning and hand washing protocols as well as sanitizing wipes and a hand sanitizing station.
- 4.1.a.iv..7** Refrigerator, microwave and Coffee station are considered shared amenities and require constant cleaning. Add sanitizing/cleaning wipes for this area and signs for cleaning protocols.
- 4.1.a.iv..8** Workstation for administrative staff was observed. This small station requires a protective barrier at the desk and a rearrangement furniture so staff is not directly facing others entering the common area. Desktop unit and telephone are high touch areas; requires consistent cleaning, have sanitizing wipes on desk. Mask is required when two or more people are in this area.
- 4.1.a.iv..9** Items the occupy this room are mobile dry erase boards, easels, projection screens and stands; arrange so items do not obstruct the doorways or flow of traffic through this space.

v. HVAC system provides adequate air flow and ventilation. Currently, the HVAC unit services the entire building.

- 4.1.a.v..1** Work with facilities to ensure HVAC is in good working order, identify workspaces not receiving adequate services, that air recirculation is



## Hopi Tribe – Cancer Support Program Building On-site Risk Assessment Written Report

minimized (single direction airflow from inside to out is best) and that the number of air exchanges for the building is maximized without taxing the HVAC system.

vi. Drinking water is currently supplied to the staff via a kitchen sink and/or supplied water bottles.

**4.1.a.vi..1** Water station was observed in the reception area that is not in operation. This needs to be replaced with a bottle filler type station or permanently removed. Post signs of inoperability.

vii. One Lavatory serves the entire office, and is small and does not allow for physical distancing. Toilets do not have lids. Paper towel and soap dispensers are not hands-free, and door swings outward.

**4.1.a.vii..1** Limit bathroom use to one person at a time. Post Max Occupancy Sign (1)

**4.1.a.vii..2** Change out paper towel dispensers for hands-free units, and install hands free soap dispensers as well as signs on proper hand washing, turning off the sink, and opening the door.

**4.1.a.vii..3** Provide hand sanitizing station outside lavatory.

### b. Staff Offices

i. These offices were observed to have high touch areas; each needing signs for cleaning protocols and a hand sanitizing station on the outside of the office or strategically placed hand sanitizing stations outside each office where hands can be sanitized after closing doors. Cleaning up offices and limiting personal items on desks limits the virus/germs from settling and those surfaces. A couple office house two people, their desks have a hutch to serve as a barrier. All office desks have hand sanitizing wipes and windows do open for increased air circulation.

**4.1.b.i..1** Reception Area Office: Provide signage of cleaning and hand sanitizing and sanitizing wipes. Maximum occupancy for this area is 2. High touch areas are the desktop units, telephone, key box, time clocks, and file cabinet. Limit personal items on desks. Post Max Occupancy (1) sign and fire escape plan.

**4.1.b.i..2** Dana Russell's office: Maximum occupancy is 1 person as current arrangement of furniture does not allow for distancing between staff and one guest: eliminate chairs, keeping one with a 6' distance between staff and client. Cabinets require cleaning and sanitizing daily. Provide cleaning and hand sanitizing signs and install hand sanitizing station between offices.

**4.1.b.i..3** Delores Ami's Office: Provide signage of cleaning and hand sanitizing and sanitizing wipes. Remove or tape off excess chairs. Maximum occupancy is 1. High touch areas are the desktop unit, telephone, shelf and file cabinet. Post Max Occupancy (1) sign and fire escape plan.



## **Hopi Tribe – Cancer Support Program Building On-site Risk Assessment Written Report**

- 4.1.b.i..4** Vacant Office: Provide signage of cleaning and hand sanitizing and sanitizing wipes. Maximum occupancy is 1. High touch areas: desktop unit, file cabinet and telephone. Limit personal items on desk. Post Max Occupancy (1) sign and fire escape plan.
- 4.1.b.i..5** Genell and Emma's office: Each desk in this office has a hutch to provide a barrier between each individual. A heater fan was observed at Emma's station; this needs to be stored or may use only if one person is in the office and door is closed. Provide signage for cleaning and sanitizing wipes. Place a hand sanitizing station outside between offices. Post Max Occupancy (2) sign and fire escape plan.
- 4.1.b.i..6** Vacant Office: currently vacant. Provide signage of cleaning and hand sanitizing and sanitizing wipes. Maximum occupancy is 1. High touch areas include desktop unit, file cabinet and telephone. Limit personal items on desk. Post Max Occupancy (1) sign and fire escape plan.
- 4.1.b.i..7** Printer Room and Supply Closet. Place sanitizing wipes where printer sits for cleaning on a daily/consistent basis. Closet requires cleaning and organizing. Remove items placed at exit doors.
- 4.1.b.i..8** Exam Room: is a single occupancy space, with medical exam table, scale and other medical items. This space is being used as a storage area of office items, bottled water, printed material and decorations.
- 4.1.b.i..9** Unisex Lavatory: Is used by Cancer Support staff. It is single occupancy lavatory and needs hands free paper towel and soap dispensers. Install a toilet seat cover, and post signs for handwashing, mask wearing, and cleaning protocols. Post max occupancy sign (1) and fire escape plan.

ii. Virus on paperwork poses a low risk of infecting an individual. However, if physical documentation is going to be handled, the following handling options can further reduce risk:

- 4.1.b.ii..1** Perform hand hygiene. Handle paperwork without gloves and by touching as few additional items (phones, keyboard, mouse) as possible while processing. File paperwork. Wipe down all touched surfaces. Perform hand hygiene.
- 4.1.b.ii..2** Let paperwork rest 24-48hrs, then process as indicated in 4.1.b.ii..1.
- 4.1.b.ii..3** Place the paperwork in a plastic sleeve. Disinfect the outside of the sleeve, perform hand hygiene, and then process as indicated in 4.1.b.ii..1.

iii. The HVAC system in this area appears functional. However, use of personal fans which blow air from one person to another indicates that HVAC may require optimization for adequate air flow and ventilation to all areas of the building.



## Hopi Tribe – Cancer Support Program Building On-site Risk Assessment Written Report

- 4.1.b.iii.1 Personal fans in communal areas should not be used. Their use in an office is permissible if only one occupant is present and the door to the office can be closed. If a fan is used, it should not be pointed in the direction of the door.
- 4.1.b.iii.2 Windows can be opened only as needed.
- 4.1.b.iii.3 Ceiling vents are used. Filters used are rated as MERV 7.
- 4.1.b.iii.4 Program coordinates with OFRM for maintenance.

### c. Overall Office Building

- i. The importance of overall cleanliness is needed to the function and interaction with the public. It was noted OFMR staff provide janitorial and maintenance to tribal properties of this building daily. Upon observation it was further noted that the building and amenities are dated but in good condition, however, to improve with cleaning the following items are recommended:

- 4.1.c.i.1 Replace carpeting with laminate flooring. Keep flooring consistent for easy cleaning of surface.
- 4.1.c.i.2 Place fire escape plans for the building throughout
- 4.1.c.i.3 Eliminate, store or tape off chairs and couches where noted.
- 4.1.c.i.4 Increase heightened protocols for entry of staff and guests by creating a screening station on the exterior of the main entrance with appropriate signage.
- 4.1.c.i.5 It was noted that this program utilizes a third party to conduct health screenings on a quarterly basis.

## 5.0 Interpretation of Results

5.1 **Evaluation of Site Specific Assessments:** The goal of these assessments were two fold; first to perform a risk assessment and identify mitigation strategies for staff to return to work in the Cancer Support Program Building, and second, to provide the staff with a framework for administering these site specific risk assessments for COVID-19 mitigation suitability at future facilities. The overall mitigation strategies and the protection of government services fell into two main categories:

- a. Increase adherence to maximizing the three pillars of disease infection reduction: maximize distance (in the form of rearranging furniture and limiting office and conference room sharing), decrease time (in the form of staggering start times to avoid groups of people congregating), and minimizing exposure (in the form of mask wearing, sneeze guard utilization, full walls or offices for staff, and reducing staff in shared spaces).
- b. Limiting the effect on essential services if COVID-19 infects staff. This is achieved by not having all the staff in a particular service come to work on the same day (even if there is adequate room), it helps ensure that not all the staff that perform a function will be exposed or infected. This means no full service will be entirely infected/quarantined by a single exposure.



## Hopi Tribe – Cancer Support Program Building On-site Risk Assessment Written Report

- 5.2 **Limitations:** This assessment is a snapshot of the governmental facilities without having staff on site. Reevaluation of these mitigation strategies will need to occur often and thoroughly to help quickly catch deficiencies in their efficacy and encourage new strategies to be implemented.

### 6.0 Statement of Suitability

- 6.1 Protecting staff and customers is of critical importance for the reopening of the governmental offices. Identifying both the strengths of current mitigation strategies, as well as where changes need to be made is necessary to identify before staff return to work. Vigilant checking of the efficacy of these strategies is needed to ensure as staff return, their wellbeing and those they serve continues to be protected.
- 6.2 The recommendation of this work is that once these mitigation strategies are implemented and policies are finalized, the governmental offices are ready to be reopened in line with the Hopi Tribe Reopening Plan.
- 6.3 The Cancer Support Program Building on-site risk assessments have been performed and completed as outlined in Section 4 of this report and is ready to be used as a component in the continuing evaluation of the safety practices of for the reopening of this building.

### 7.0 Summary Report Approval

Performed By: Hopi Reopening Task Group Date: 7/31/2020

Printed name: Daryn Melvin, Chief of Staff, Hopi Tribe – Office of the Vice Chairman  
*Primary Assessor*

### 8.0 Appendices

- 8.1 None.

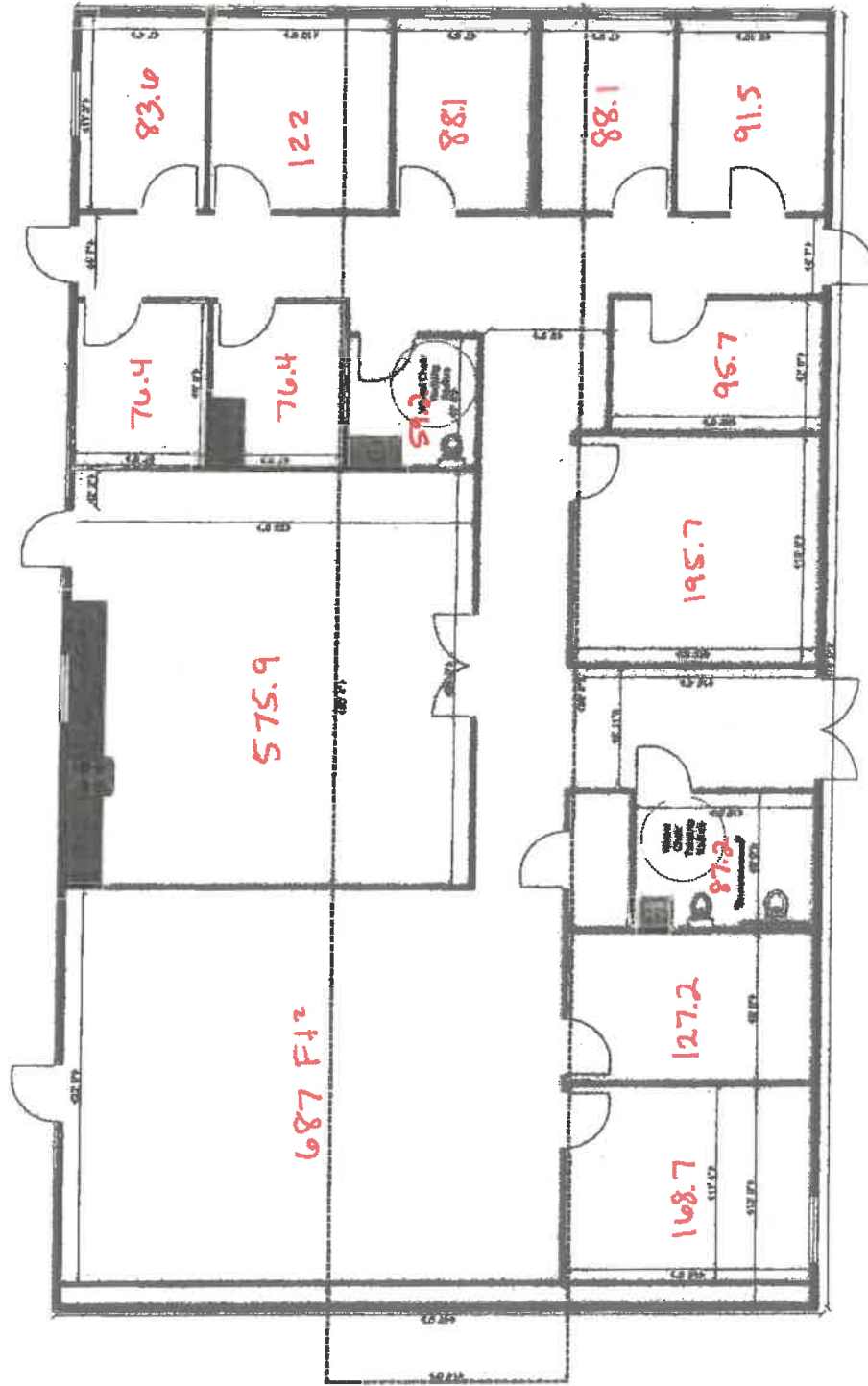


## **Hopi Tribe – Cancer Support Program Building On-site Risk Assessment Written Report**

### **Summary of changes needed from Cancer Support Program Building Risk Assessment**

1. Create and implement a structured screening policy for screening incoming staff, empowering screeners to stop those that have fevers or flagged answers to screening questions and educate staff on the importance of the screening procedure to keep them safe.
2. For each service offered, limit the number of staff that perform a particular function from working at the same time. This will ensure that if a COVID-19 outbreak occurs, not all the staff that perform a particular function have to be isolated or quarantined and be unable to work at the same time.
3. Encourage teleworking when appropriate, and stagger scheduling to limit bottlenecks at screening points and crowding of work areas.
4. Install sneeze guards or physical barriers in locations that have staff interacting with clients.
5. Ensure hand sanitizer with at least 60% alcohol is available in all high traffic areas.
6. Rearrange furniture in open work areas to maximize at least 6 feet distances between staff/guests.
7. Ensure HVAC is functional. Identify locations in the building not being serviced by the system and repair. Eliminate use of personal fans in shared areas. Coordinate with OFRMS for maintenance.
8. Close off water fountains. Bottle fillers are ok if hand sanitizer and disinfecting wipes are available near the bottle fillers.
9. Bathrooms should be made single occupancy and signage on the doors needs to state this. Install hands-free paper towel dispensers.
10. Reduce physical paperwork when possible; electronic forms and email are preferred. When paperwork is required, have it deposited at a central area for pickup rather than individually handed in to staff.
11. Reduce occupancy of confined spaces like conference rooms. Ensure adequate ventilation is available and remove tables and chairs to reflect the desired maximum occupancy number.
12. Office spaces should be considered single occupancy; stagger working times or find alternative places to work to ensure proper distancing and ventilation can occur.
13. Require the use of face coverings within the buildings and in shared areas. Within private offices, face coverings can be removed, but should be put back on if anyone comes to have a discussion.
14. Ensure the areas that do not have cubicles or walls fully separate one person from another. If this isn't possible, limit the staff that share an area to ensure proper distancing and working in shared space.
15. Staff are the best eyes and ears for IPC. Ensure they have a way to report concerns, and that management is receptive to their thoughts and questions.





**CANCER SUPPORT FLOOR PLAN  
KYKOTSMOVI, ARIZONA**

REV 3/2014





## Hopi Tribal Headquarters Nutrition Center Building On-site Risk Assessment Written Report

### 1.0 Scope

- 1.1 Risk Assessment Report For:** The reopening of governmental services housed in the Nutrition Center Modular 303, Program(s): Nutrition Center
- 1.2 Date Performed:** 7/31/2020
- 1.3 Assessors (Name/Association):** Nathaniel Tootsie, Randy Poleahla, Sahmie Lomahquahu, Madeline Sahneyah and CDC Representative, H. Mac McCraw.

**2.0 Overview of the Procedure:** In response to the ongoing COVID-19 pandemic, the Hopi Tribe has instituted widespread community mitigation and prevention efforts that have included closing much of the tribal government. These efforts, combined with ongoing containment activities, have served as both an effective intervention for limiting the spread of COVID-19 and stressor to the economic well-being of Hopi communities. The Hopi Reopening Plan follows a three-phase approach to inform decision-making for mitigation measures while balancing protection measures for the Hopi people. Phase One of the Hopi Reopening Plan involves the controlled reopening of essential governmental services. To ensure that these operations could be conducted safely both for governmental staff as well as the tribal customers they serve, a risk assessment was performed by tribal representatives with a CDC representative to evaluate the physical space of the Nutrition Center building with office and congregate meal space, restrooms and kitchen for physical risk, COVID-19 response policies, and to address staffing concerns of how to operate safely. This assessment served a second purpose, for Hopi-3 CDC staff to observe Hopi representatives as they performed a COVID-19 specific risk assessment to observe the steps taken for assessing tribal buildings for reopening services/facilities.

**3.0 Study Methods:** This assessment identifies hazards associated with the physical reopening of the Nutrition Center Building in both a general assessment of physical space as well as individual assessments of any subservice office areas. This is a coordinated effort of Hopi tribal staff and facilities/supervisor subject matter experts (SME) to understand current practices to determine the baseline of operational mitigation strategies. This report includes additional recommendations of mitigation strategies ranging from reorganizing workspace, consideration for alternate or staggered schedules up to adjusting service implementation or scope of work to determine their effects on further reducing COVID-19 infection risk.

To perform this assessment, Hopi tribal staff and CDC representative(s) conducted an in-person walkthrough of all workspaces in consideration for reopening within this report. Office layout, staffing numbers, air ventilation and flow, cleaning procedures, bathroom/drinking water availability, common work areas, and staff activities were all assessed for implementation under the three-pillars of reducing the spread of COVID-19; 1) maximizing distance, 2) minimizing time, and 3) reducing exposure. These pillars focus on increasing the distance between infected and non-infected, decreasing the time they are together, and reducing the amount of virus present.



## Hopi Tribal Headquarters Nutrition Center Building On-site Risk Assessment Written Report

### 4.0 Assessment Findings with Mitigation Strategies:

- 4.1 Nutrition Center Building**—total estimated capacity [not readily available] to safely support staff in the Nutrition Center Building office, congregate meal space and kitchen; 2 person max within office space, [seats 64] in the congregate meal space. Estimated for 2 Kitchen program staff of Nutrition Center. Recommend an accurate measurement of square footage in modular space to reflect an official maximum capacity allowing for social distancing of 6 feet and office space for 1 person at 10X10. (Rough estimate: 24 X 44 for congregate meal space)

NOTE: Program provides direct service to vulnerable adult population in a space that would require no masks to have their meals in a confined space.


#### a. Shared services/spaces building-wide

- i. Nutrition Center Building Entry Screening Checkpoint requires strengthening. A sneeze guard is recommended as daily traffic is upwards of 60 persons and at minimum, fewer than 25 a day. Currently, COVID-19 Screening is conducted for first return and intermittent access employees in the Legislative building by security. Screening includes temperature check and COVID-19 survey questionnaire. It is possible that persons accessing the Nutrition Center building may not be screened daily.

- 4.1.a.i..1** Implement a robust screening policy that includes full range of symptoms, temperature checks, and a clear chain of command for reporting abnormal or established results. Written policy and procedure on how screening will be conducted is recommended for training of staff. The policy should include the following: 1.) Information on what PPE to use. 2.) Proper PPE donning and doffing procedures. 3.) the type of thermometer to be used. 4.) how the thermometer's calibration will be checked and how often. 5.) how the thermometer should be cleaned and disinfected and how often. 6.) how to handle someone who has an elevated or abnormal temperature.
- 4.1.a.i..2** Post and communicate screening process & requirements to ensure staff can't bypass screening before reporting to Nutrition Center building.
- 4.1.a.i..3** Empower screening staff to be able to refuse entry and safely redirect individuals who may have been exposed to COVID-19.
- 4.1.a.i..4** Establish an emergency plan for high risk population and high numbers of exposure to respond to persons who report symptoms or are visibly ill and need immediate attention.
- 4.1.a.i..5** Contact program manager to determine alternative to meal distribution that does not require congregate meals; i.e. home delivery or food boxes.
- 4.1.a.i..6** Remove shared amenities that cannot be in a controlled space or easily monitored with high numbers of participants.

## Hopi Tribal Headquarters Nutrition Center Building On-site Risk Assessment Written Report

- ii. Daily operations involve face to face interactions between tribal staff and the public. Remove any extra seating to reinforce social distancing requirements and discourage congregating or visiting in close proximity for extended periods of time.
  - 4.1.a.ii.1 Transportation is provided. Evaluation of the seating capacity needs to be evaluated and protocols should be shared with participants.
  - 4.1.a.ii.2 Adhere to cleaning/disinfecting procedures for tribal vehicles. Stock cleaning supplies to disinfect before and after transports. See: ***Cleaning and Disinfecting Buildings and Vehicles Guidance***.
 



Cleaning and Disinfecting Buildings
  - 4.1.a.ii.3
  - 4.1.a.ii.4 Install a clear plastic sneeze guard or other physical barrier between any areas where staff interacts with the public at entry or screening points. When installation is not possible, mark on the ground 6ft from desk space to encourage physical distancing and require mask wearing.
  - 4.1.a.ii.5 Remove extra tables and chairs from lobby areas to reduce exposure and high touch surface transmission. If some customers require seating (elderly, disabled), space out chairs to ensure physical distancing of 6 feet and require masks.
  - 4.1.a.ii.6 Consider using rear exit to reduce the traffic at the front doors. May include drop-off at front doors and pick-up at the rear doors.
- iii. Staffing Considerations allow for minimal office staff to return to work while maintaining social distancing recommendations (6 feet). To further enhance protection of the staff, and the services they provide, consider the following:
  - 4.1.a.iii.1 Re-evaluate the allocation of office space to programs for most efficient use of staff, space available, time and resources.
  - 4.1.a.iii.2 Limit the number of staff for official duty functions that require a return to work on any given day, reducing the number of people to people interactions, minimizing the number of staff exposed to COVID-19 or required to quarantine as a result. Preventative measures greatly reduce the interruption to provide essential services.
  - 4.1.a.iii.3 Place floor markings to support social distancing, stagger or alternate work days & times to reduce crowding of staff at office entry.
- iv. In common areas (lobbies, sign in or time clock areas, open floor plan office spaces), increase no touch hand sanitizer stations (hand washing stations or hand sanitizer with at least 60% alcohol).
  - 4.1.a.iv.1 The greater access you provide for people to perform a function, you increase the opportunity to create healthy habits. Provide signage, bottles



## Hopi Tribal Headquarters Nutrition Center Building On-site Risk Assessment Written Report

or wall mounted dispensers of hand sanitizer throughout these common areas to reinforce use and daily practice.

- v. HVAC system is in good working condition, needs follow up on the type and quality of air filters. Open double doors and windows to increase outdoor air.

- 4.1.a.v..1 Work with facilities to ensure HVAC is regularly maintenance and in good working order, that outside air flow is maximized (single direction airflow from inside to out is best) and that the duct system is efficient without taxing the HVAC unit.

- 4.1.a.v..2 Opening windows for outside air is encouraged, removing fans to reduce the risk of transmission of COVID-19.

- vi. Drinking fountains are deemed high risk for COVID-19 transmission being a high touch surface and potential for contaminating the surfaces with saliva.

- 4.1.a.vi..1 Cover drinking fountain component and shut off water supply unit. If a stand-alone bottle filler is available out of public areas, this may still be used when both an alcohol hand disinfectant dispenser is installed or hand washing station available, and cleaning wipes are provided next to the unit. Signage should be posted to reinforce the cleaning procedures.

- vii. Restrooms are generally smaller spaces and don't allow for physical distancing. Toilets do not have lids. Paper towel dispensers are hands-free, and doors swing inwards.

- 4.1.a.vii..1 If possible, limit bathroom usage to one person at a time. Reasonable accommodations due to high number of participants is to require masks and hand washing.

- 4.1.a.vii..2 Change out paper towel dispensers for hands-free units.

- 4.1.a.vii..3 Post signage to support proper hand washing and mask wearing.

### b. Congregate Meal Space

- i. The main open meeting room is generally used for the Nutrition Center's congregate meal service and other times scheduled for training space which can bring large groups of the public, tribal employees and guests.

- 4.1.b.i..1 Measure space for accuracy and to develop a max capacity under the social distancing requirements.

- 4.1.b.i..2 Consider reducing time for meals in sit-down style to limit the transmission or exposure of COVID-19.

- 4.1.b.i..3 Post signage to reinforce social distancing, mask wearing, and provide cleaning/sanitizing products to wipe down high touch surfaces before and after use.

- 4.1.b.i..4 Floor markings for lining up for meal pick-up.



## Hopi Tribal Headquarters Nutrition Center Building On-site Risk Assessment Written Report

- 4.1.b.i..5 Schedule requests to ensure protocols are delivered, recommendations are followed to ensure the health and safety of participants.
    - 4.1.b.i..6 Designate table placement and seating with floor markings set 6 feet apart. Provide adequate signage.
    - 4.1.b.i..7 Increase the number of hand sanitizing stations installed at each door way and at the conference tables. If necessary, install protective shields or sneeze guards according to room configuration and specific needs.
    - 4.1.b.i..8 Provide a desk and require protective shields for the person facilitating without a mask, including social distancing recommendations. Provide longer HDMI and power cords for this person to connect to presentation equipment and/or screen-television unit.
    - 4.1.b.i..9 Provide information to participants of what to bring for the training, reducing personal items.
  - ii. Establish electronic and telephonic submissions of required information. Virus on paperwork poses a low risk of infecting an individual. IF physical documentation is required, follow the recommendations to reduce risk of COVID-19 transmission:
    - 4.1.b.ii..1 Consider an electronic format for sign-in's for accountability OR one person designated to account for participants in lieu of sign-in's. \*Check with grant or project manager to request flexibility.
    - 4.1.b.ii..2 Reinforce hand hygiene, washing hands for 20 seconds with soap and water or using a hand sanitizer. Handle paperwork without gloves and by touching as few additional items (phones, keyboard, mouse etc.) as possible while processing. File paperwork. Wipe down all touched surfaces or objects. Perform hand hygiene.
    - 4.1.b.ii..3 Let paperwork rest 24-48hrs, then process as 4.1.b.ii..1.
    - 4.1.b.ii..4 Place the paperwork in a plastic sleeve. Disinfect the outside of the sleeve, perform hand hygiene, and then process as 4.1.b.ii..1.
    - 4.1.b.ii..5 Create a print station/area and designate one person responsible for sorting and distributing.
  - iii. Personal fans blow air from one person to another, increasing the risk of COVID-19 transmission.
    - 4.1.b.iii..1 Personal fans in communal areas should not be used. Use in an office is permissible only if one occupant is present and the door to the office can be closed. When fan is in use, it should not be pointed in the direction of the door.
    - 4.1.b.iii..2 Windows can be opened as needed to allow for outdoor air circulation.
- c. Office Space





## Hopi Tribal Headquarters Nutrition Center Building On-site Risk Assessment Written Report

- i. The office space is adequate for 2 staff with social distancing requirements. Signage to support recommendations; sneeze guards, social distancing and mask wearing.

- 4.1.c.i..1 Consider alternate work schedules and telework as most effective mitigation strategy when resources are available to be successful.
- 4.1.c.i..2 Reinforce mask wearing when in shared space or when physical distancing can't be guaranteed.
- 4.1.c.i..3 Appointment only scheduling for meetings. Hold meeting in alternative space that allows for social distancing, wear masks and wash hands frequently.
- 4.1.c.i..4 High touch areas: Dry erase boards, clip boards, file cabinets, and shared amenities (microwave, mini-fridge, printers) requires constant and consistent cleaning/sanitizing before and after each use. Practice the same process as 4.1.b.ii..1.
- 4.1.c.i..5 Consider electronic transmissions for shared correspondence or mail center with one designee to distribute.
- 4.1.c.i..6 Extra chairs should be removed to reinforce social distancing restrictions. (Tape chairs or place signage to indicate "NOT IN USE," if storage space is limited).

### d. Kitchen Space

- i. Adequate space to support 2-3 staff with proper precautions for social distancing, mask wearing, and cleaning/sanitizing personal & shared space, including materials and food prep items.

- 4.1.d.i..1 Consider creating zones within kitchen and when possible, staggered schedule to reduce the risks of exposure or transmission of COVID-19.
- 4.1.d.i..2 Remove additional furniture from the room, maximizing the space.
- 4.1.d.i..3 Assign regular cleaning/sanitizing schedule and post schedule in area accessible for review.
- 4.1.d.i..4 Consider centralizing shared resources in one main area, reducing the traffic between office spaces to use printers, fax machines, etc. Assign one person responsible for distributing communicate.
- 4.1.d.i..5 Add a hand sanitizing station to each room with disinfectant spray or sanitizing wipes in each file room. Increase signage for cleaning protocols for all high touch areas: copier, file cabinet handles, and camera on desk by main entrance (remove personal items from desk).

## 5.0 Interpretation of Results

- 5.1 **Evaluation of Site Specific Assessments:** The goal of these assessments are two fold; **first** to perform a risk assessment and identify mitigation strategies for staff to return to work within the tribal government, and **second** to provide the Hopi tribal staff a framework for administering these site



## Hopi Tribal Headquarters Nutrition Center Building On-site Risk Assessment Written Report

specific risk assessments for COVID-19 mitigation suitability at future facilities. The overall mitigation strategies and the protection of government services fell into two main categories:

- a. Increase adherence to maximizing the three pillars of disease infection reduction: maximize distance (in the form of rearranging furniture and limiting office and conference room sharing), decrease time (in the form of staggering start times to avoid groups of people congregating), and minimizing exposure (in the form of mask wearing, sneeze guard utilization, full walls or offices for staff, and reducing staff in shared spaces).
- b. Limiting the effect on essential services if COVID-19 infects staff. By not having all the staff in a particular service come to work on the same day (even if there is adequate room), it helps ensure that not all the staff that perform a function will be exposed or infected. This means no full service will be entirely infected/quarantined by a single exposure.

**5.2 Limitations:** This assessment is a snapshot of the tribal government facilities, in some areas, without staff on site. Reevaluation of these mitigation strategies will need to occur often and thoroughly to help quickly catch deficiencies in the physical environment and encourage new strategies to be implemented.

### 6.0 Statement of Suitability

- 6.1** Protecting staff and customers is of critical importance for the reopening of the tribal government offices. Identifying both the strengths of current mitigation strategies, as well as where changes need to be made is necessary to identify before additional staff return to work. Vigilance in checking of the efficacy of these strategies requires support to ensure the health & safety of staff and the general public in the return to work phases.
- 6.2** The recommendation of this work is that once these mitigation strategies are implemented and policies are finalized, the tribal government offices are ready to be reopened in line with the Hopi Tribe Reopening Plan.
- 6.3** The Nutrition Center Building on-site risk assessment has been performed and completed as outlined in Section 2 of this report and is ready to be used as a component in the continuing evaluation of the safety practices of for the reopening of these buildings.

### 7.0 Summary Report Approval

Performed By: Schmie Lomahquahu Date: 7/31/2020

Printed name: Hopi Reopening Task Group  
Primary Assessor





*Hopi Tribe Government Building Reopening Task Group*

## **Hopi Tribal Headquarters Nutrition Center Building On-site Risk Assessment Written Report**

### **8.0 Appendices**

#### **8.1 Summary of changes needed from Nutrition Center Building Risk Assessment**



## **Hopi Tribal Headquarters Nutrition Center Building On-site Risk Assessment Written Report**

### **Summary of changes needed from Nutrition Center Building Risk Assessment**

1. Create and implement a structured screening policy for screening incoming staff, empowering screeners to stop those that have fevers or flagged answers to screening questions and educate staff on the importance of the screening procedure to keep them safe.
2. For each service offered, limit the number of staff that perform a particular function from working at the same time. This will ensure that if a COVID-19 outbreak occurs, not all the staff that perform a particular function have to be isolated or quarantined and be unable to work at the same time.
3. Encourage teleworking when appropriate, and stagger scheduling to limit bottlenecks at screening points and crowding of work areas.
4. Install sneeze guards or physical barriers in locations that have staff interacting with clients.
5. Ensure hand sanitizer with at least 60% alcohol is available in all high traffic areas.
6. Rearrange furniture in open work areas to maximize at least 6 feet distances between staff/guests.
7. Ensure HVAC is functional. Monitor and ensure regular service with maintenance schedule to avoid system failure and/or repair. Eliminate use of personal fans in shared areas.
8. Close off water fountains. Bottle fillers are ok if hand sanitizer and disinfecting wipes are available near the bottle fillers.
9. Bathrooms should reduce occupancy and signage on the doors needs to state this. Install hands-free paper towel dispensers. Reasonable accommodations for higher number of participants should support mask wearing and regular hand washing.
10. Reduce physical paperwork when possible; electronic forms and email are preferred. When paperwork is required, have it deposited at a central area for pickup rather than individually handed in to staff.
11. Reduce occupancy for training spaces where participants will be likely to sit for extended times. Ensure adequate ventilation is available and remove tables and chairs to reflect the desired maximum occupancy number that allows for social distancing and adequate space for facilitator.
12. Office spaces should be considered for recommended occupancy; stagger working times or find alternative places to work to ensure proper distancing and ventilation can occur.
13. Require the use of face coverings within the buildings and in shared areas. Within single occupancy offices, face coverings can be removed, but should be put back on if anyone comes to have a discussion.
14. Ensure the confined work spaces have walls or partitions that fully separate one person from another. Limit the staff that share an area to ensure proper distancing and working in shared space.
15. Staff are the best eyes and ears for IPC. Ensure they have a way to report concerns, and that management is receptive to their thoughts and questions.

[illegible]

## FLOOR PLAN

SCALE: N.T.S. DRAWING REVISION: AS-NOTED

DATE: 10/03	DRAWN BY: L. TORIYO
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NOY:

- WATER HEATER & GAS STUBS RELOCATED TO PRESENT AREA
- KITCHEN RANGE AREA KEYISE TO PRESENT
- ROOM REVISION - COMMUNICATION ROOM- KEYISE 2000



## Hopi Tribal Headquarters Risk Management Building On-site Risk Assessment Written Report

### 1.0 Scope

- 1.1 **Risk Assessment Report For:** The reopening of governmental services housed in the Risk Management Modular 303, Program(s): Risk Management, Hopi Sinom Transit, Motor Pool, Hopi Tutuveni, and Solid Waste.
- 1.2 **Date Performed:** 7/31/2020
- 1.3 **Assessors (Name/Association):** Nathaniel Tootsie, Randy Poleahla, Sahmie Lomahquahu, and Madeline Sahneyah.

**2.0 Overview of the Procedure:** In response to the ongoing COVID-19 pandemic, the Hopi Tribe has instituted widespread community mitigation and prevention efforts that have included closing much of the tribal government. These efforts, combined with ongoing containment activities, have served as both an effective intervention for limiting the spread of COVID-19 and stressor to the economic well-being of Hopi communities. The Hopi Reopening Plan follows a three-phase approach to inform decision-making for mitigation measures while balancing protection measures for the Hopi people. Phase One of the Hopi Reopening Plan involves the controlled reopening of essential governmental services. To ensure that these operations could be conducted safely both for governmental staff as well as the tribal customers they serve, a risk assessment was performed by tribal representatives with a CDC representative to evaluate the physical space of the Risk Management Building with office, conference, or storage space and the restrooms within the Risk Management Building for physical risk, COVID-19 response policies, and to address staffing concerns of how to operate safely. This assessment served a second purpose, for Hopi-3 CDC staff to observe Hopi representatives as they performed a COVID-19 specific risk assessment to observe the steps taken for assessing tribal buildings for reopening services/facilities.

**3.0 Study Methods:** This assessment identifies hazards associated with the physical reopening of the Risk Management Building in both a general assessment of physical space as well as individual assessments of each of the subservice office areas. This is a coordinated effort of Hopi tribal staff and facilities/supervisor subject matter experts (SME) to understand current practices to determine the baseline of operational mitigation strategies. This report includes additional recommendations of mitigation strategies ranging from reorganizing workspace, consideration for alternate or staggered schedules up to adjusting service implementation or scope of work to determine their effects on further reducing COVID-19 infection risk.

To perform this assessment, Hopi tribal staff and CDC representative(s) conducted an in-person walkthrough of all workspaces in consideration for reopening within this report. Office layout, staffing numbers, air ventilation and flow, cleaning procedures, bathroom/drinking water availability, common work areas, and staff activities were all assessed for implementation under the three-pillars of reducing the spread of COVID-19; 1) maximizing distance, 2) minimizing time, and 3) reducing exposure. These pillars focus on increasing the distance between infected and non-infected, decreasing the time they are together, and reducing the amount of virus present.





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### 4.0 Assessment Findings with Mitigation Strategies:

- 4.1 Risk Management Building**—total estimated capacity of 11 to safely support staff in the office and conference space available; 1 in reception, 6 within offices, 4 in the conference room. One story modular with 1 reception area, 1 conference room, and 6 sub offices currently hosting the program staff of Risk Management, Motor Pool, Hopi Sinom Transport, Hopi Tutuveni, and Solid Waste. Recommend an accurate measurement of square footage in office space to reflect an official maximum capacity allowing for social distancing of 6 feet and office space for 1 person at 10X10.

**a. Shared services/spaces building-wide**

- i. Risk Management Building Entry Screening Checkpoint requires strengthening. A sneeze guard is recommended as daily traffic is upwards of 30 persons and at minimum, fewer than 10 a day. Screening is conducted for first return and intermittent access employees in the Legislative building by security. Screening includes temperature check and COVID-19 survey questionnaire. It is possible that persons accessing the Risk Management building may not be screened daily.

- 4.1.a.i..1** Implement a robust screening policy that includes full range of symptoms, temperature checks, and a clear chain of command for reporting abnormal or established results.
- 4.1.a.i..2** Post and communicate screening process & requirements to ensure staff cannot bypass screening before reporting to Risk management building.
- 4.1.a.i..3** Empower screening staff to be able to refuse entry and safely redirect individuals who may have been exposed to COVID-19.

- ii. Facility and service entrances involve face to face interactions between tribal staff and the public. Remove any extra seating to reinforce social distancing requirements and discourage congregating or visiting for extended periods of time.

- 4.1.a.ii..1** Install a clear plastic sneeze guard or other physical barrier between any areas where staff interacts with the public at entry or screening points. When installation is not possible, mark on the ground 6ft from desk space to encourage physical distancing.
- 4.1.a.ii..2** Remove tables and chairs from lobby areas to reduce congregation. If some customers require seating (elderly, disabled), space out chairs to ensure physical distancing of 6 feet and require masks.
- 4.1.a.ii..3** Consider using rear exit to reduce the traffic at the front desk.

- iii. Staffing Considerations allows for minimal office staff to return to work while maintaining social distancing recommendations (6 feet). To further enhance protection of the staff, and the services they provide, consider the following:

- 4.1.a.iii..1** Re-evaluate the allocation of office space to programs for most efficient use of staff, space available, time and resources.

# Hopi Tribal Headquarters Risk Management Building On-site Risk Assessment Written Report

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## **Hopi Tribal Headquarters Risk Management Building On-site Risk Assessment Written Report**

### **b. Conference Space**

- i. The main meeting room is generally used for CDL training of Risk management and other times scheduled for use which can bring large groups of the public, tribal employees and guests. CURRENTLY houses 2 Solid Waste Staff and 2 Hopi Lands staff.

- 4.1.b.i..1** Post signage to reinforce social distancing, mask wearing, and provide cleaning/sanitizing products to wipe down high touch surfaces before and after use.
- 4.1.b.i..2** Area is sometimes used as a lunch/break room area. Masks are taken off while eating, which increases the risk of disease spread therefore, it is recommended that staff eat at their own workstations with the doors closed. Alternatively, consider providing outdoor seating. Staff should be reminded to wash their hands and to clean and disinfect the area before and after eating.
- 4.1.b.i..3** Schedule use to ensure protocols are delivered, recommendations are followed to ensure the health and safety of participants.
- 4.1.b.i..4** Designate seating with floor markings set 6 feet apart. Provide adequate signage.
- 4.1.b.i..5** Increase the number of hand sanitizing stations installed at each doorway and at the conference tables. If necessary, install protective shields or sneeze guards according to room configuration and specific needs.
- 4.1.b.i..6** Provide a desk and protective shields for the person facilitating without a mask. Provide longer HDMI and power cords for this person to connect to the television units.
- 4.1.b.i..7** Provide information to participants of what to bring for the training, reducing personal items.

- ii. Establish electronic and telephonic submissions of required information. Virus on paperwork poses a low risk of infecting an individual. IF physical documentation is required, follow the recommendations to reduce risk of COVID-19 transmission:

- 4.1.b.ii..1** Reinforce hand hygiene, washing hands for 20 seconds with soap and water or using a hand sanitizer. Handle paperwork without gloves and by touching as few additional items (phones, keyboard, mouse etc.) as possible while processing. File paperwork. Wipe down all touched surfaces or objects. Perform hand hygiene.
- 4.1.b.ii..2** Let paperwork rest 24-48hrs, then process as 4.1.b.ii..1.
- 4.1.b.ii..3** Place the paperwork in a plastic sleeve. Disinfect the outside of the sleeve, perform hand hygiene, and then process as 4.1.b.ii..1.
- 4.1.b.ii..4** Create a print station/area and designate one person responsible for sorting and distributing.





## Hopi Tribal Headquarters Risk Management Building On-site Risk Assessment Written Report

iii. Personal fans blow air from one person to another, increasing the risk of COVID-19 transmission.

**4.1.b.iii..1** Personal fans in communal areas should not be used. Use in an office is permissible only if one occupant is present and the door to the office can be closed. When fan is in use, it should not be pointed in the direction of the door.

**4.1.b.iii..2** Windows can be opened as needed to allow for outdoor air circulation.

### c. General Office Space

i. The office spaces are small, insufficient for the 2 staff with social distancing requirements. Only EXCEPTION is the Hopi Tutuveni staff reporter office which is sufficient for 2 persons as is and 3 persons with appropriate recommendations: sneeze guards, social distancing and mask wearing.

**4.1.c.i..1** Consider alternate work schedules and telework as most effective mitigation strategy when resources are available to be successful.

**4.1.c.i..2** Reinforce mask wearing when in shared space or when physical distancing cannot be guaranteed.

**4.1.c.i..3** Appointment only scheduling for meetings. Hold meeting in alternative space that allows for social distancing, wear masks and wash hands frequently.

**4.1.c.i..4** High touch areas: Dry erase boards, clip boards, file cabinets, and shared amenities (microwave, mini-fridge, printers) requires constant and consistent cleaning/sanitizing before and after each use. Practice the same process as **4.1.b.ii..1**. Recommend a cleaning protocol and log be maintained. The protocol should include the following 1.) a complete list of all high touch surfaces in the room. 2.) Identify what cleaning products should be used on these surfaces and ensure that they are effective against COVID-19 (i.e. that they are on the EPA N-list) 3.) Identify who will be responsible for conducting this work and how often it should be done. 4.) Keep a record of all required OSHA trainings for those tasked with cleaning and disinfecting (i.e. security and Janitorial staff).

**4.1.c.i..5** Consider electronic transmissions for shared correspondence or mail center with one designee to distribute.

**4.1.c.i..6** Extra chairs should be removed to reinforce social distancing restrictions. (Tape chairs or place signage to indicate "NOT IN USE," if storage space is limited).

### d. Hopi Tutuveni, secondary office

i. Adequate space to offer to 1-2 additional staff with proper precautions for social distancing, mask wearing, and cleaning/sanitizing personal & shared space. Currently occupied by 1 staff of the Tutuveni.



## Hopi Tribal Headquarters Risk Management Building On-site Risk Assessment Written Report

- 4.1.d.i.1 Consider for alternative workspace with staggered schedule to reduce the risks of exposure or transmission of COVID-19.
- 4.1.d.i.2 Remove additional furniture from the room, maximizing the space.
- 4.1.d.i.3 Consider reassignment of the space or using as a central space for printer and shared resources in one main room, reducing the traffic between office spaces to use printers, fax machines, etc. May require a request to OIT to configure all users to the copier.
- 4.1.d.i.4 Add a hand sanitizing station to each room with disinfectant spray or sanitizing wipes in each file room. Increase signage for cleaning protocols for all high touch areas: copier, file cabinet handles, and camera on desk by main entrance (remove personal items from desk).

### 5.0 Interpretation of Results

- 5.1 **Evaluation of Site Specific Assessments:** The goal of these assessments are two fold; **first** to perform a risk assessment and identify mitigation strategies for staff to return to work within the tribal government, and **second** to provide the Hopi tribal staff a framework for administering these site specific risk assessments for COVID-19 mitigation suitability at future facilities. The overall mitigation strategies and the protection of government services fell into two main categories:
  - a. Increase adherence to maximizing the three pillars of disease infection reduction: maximize distance (in the form of rearranging furniture and limiting office and conference room sharing), decrease time (in the form of staggering start times to avoid groups of people congregating), and minimizing exposure (in the form of mask wearing, sneeze guard utilization, full walls or offices for staff, and reducing staff in shared spaces).
  - b. Limiting the effect on essential services if COVID-19 infects staff. By not having all the staff in a particular service come to work on the same day (even if there is adequate room), it helps ensure that not all the staff that perform a function will be exposed or infected. This means no full service will be entirely infected/quarantined by a single exposure.
- 5.2 **Limitations:** This assessment is a snapshot of the tribal government facilities, in some areas, without staff on site. Reevaluation of these mitigation strategies will need to occur often and thoroughly to help identify deficiencies in the physical environment and encourage new strategies to be implemented.

### 6.0 Statement of Suitability

- 6.1 Protecting staff and customers is of critical importance for the reopening of the tribal government offices. Identifying both the strengths of current mitigation strategies, as well as where changes need to be made is necessary to identify before additional staff return to work. Vigilance in checking of the efficacy of these strategies requires support to ensure the health & safety of staff and the general public in the return to work phases.



## Hopi Tribal Headquarters Risk Management Building On-site Risk Assessment Written Report

- 6.2** The recommendation of this work is that once these mitigation strategies are implemented and policies are finalized, the tribal government offices are ready to be reopened in line with the Hopi Tribe Reopening Plan.
- 6.3** The Risk Management Building on-site risk assessment has been performed and completed as outlined in Section 2 of this report and is ready to be used as a component in the continuing evaluation of the safety practices of for the reopening of these buildings.

### 7.0 Summary Report Approval

Performed By: Hopi Reopening Task Group Date: 7/31/2026

Printed name: Sahmie Lomahquahn  
Primary Assessor

### 8.0 Appendices

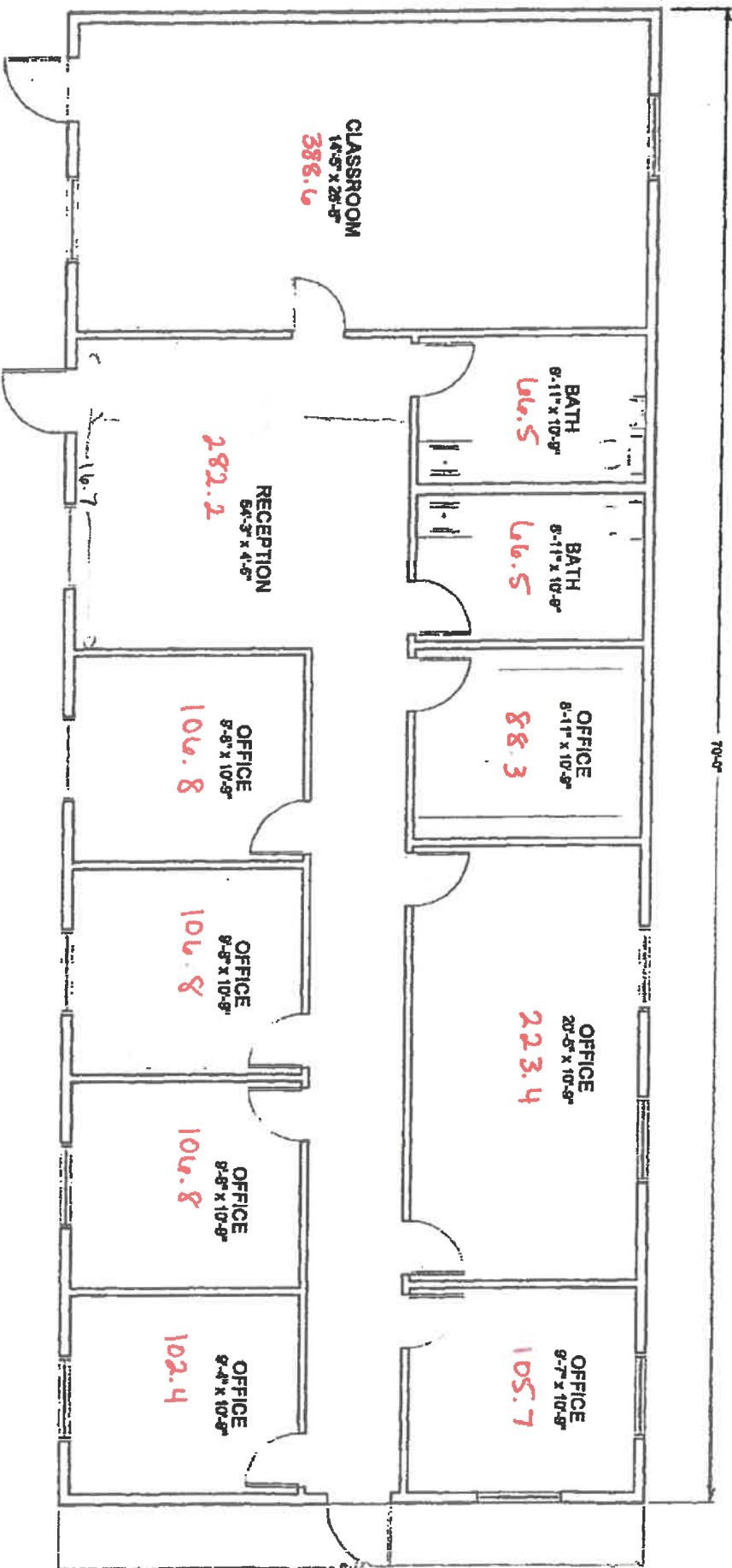
- 8.1** Summary of changes needed from Risk Management Building Risk Assessment



## **Hopi Tribal Headquarters Risk Management Building On-site Risk Assessment Written Report**

### **Summary of changes needed from Risk Management Building Risk Assessment**

1. Create and implement a structured screening policy for screening incoming staff, empowering screeners to stop those that have fevers or flagged answers to screening questions and educate staff on the importance of the screening procedure to keep them safe.
2. For each service offered, limit the number of staff that perform a particular function from working at the same time. This will ensure that if a COVID-19 outbreak occurs, not all the staff that perform a particular function have to be isolated or quarantined and be unable to work at the same time.
3. Encourage teleworking when appropriate, and stagger scheduling to limit bottlenecks at screening points and crowding of work areas.
4. Install sneeze guards or physical barriers in locations that have staff interacting with clients.
5. Ensure hand sanitizer with at least 60% alcohol is available in all high traffic areas.
6. Rearrange furniture in open work areas to maximize at least 6 feet distances between staff/guests.
7. Ensure HVAC is functional. Identify locations in the building not being serviced by the system and repair. Eliminate use of personal fans in shared areas.
8. Close off water fountains. Bottle fillers are ok if hand sanitizer and disinfecting wipes are available near the bottle fillers.
9. Bathrooms should be made single occupancy and signage on the doors needs to state this. Install hands-free paper towel dispensers.
10. Reduce physical paperwork when possible; electronic forms and email are preferred. When paperwork is required, have it deposited at a central area for pickup rather than individually handed in to staff.
11. Reduce occupancy for training spaces where participants will be likely to sit for extended times. Ensure adequate ventilation is available and remove tables and chairs to reflect the desired maximum occupancy number that allows for social distancing and adequate space for facilitator.
12. Office spaces should be considered single occupancy except in larger spaces; stagger working times or find alternative places to work to ensure proper distancing and ventilation can occur.
13. Require the use of face coverings within the buildings and in shared areas. Within private offices, face coverings can be removed, but should be put back on if anyone comes to have a discussion.
14. Ensure the confined work spaces have walls or partitions that fully separate one person from another. Limit the staff that share an area to ensure proper distancing and working in shared space.
15. Staff are the best eyes and ears for IPC. Ensure they have a way to report concerns, and that management is receptive to their thoughts and questions.



RISK MANAGEMENT/ TUTUVENI



## **Hopi Tribal Headquarters Legislative Building On-site Risk Assessment Written Report**

### **1.0 Scope**

- 1.1 Risk Assessment Report For:** The reopening of governmental services housed in the Tribal HQ Legislative Building, Room(s): Council Chambers, Office of Tribal Secretary, Office of Enrollment, Restrooms within the Legislative Building.
- 1.2 Date Performed:** 7/2/2020
- 1.3 Assessors (Name/Association):** Lisa Pawwinnee; Cheryl Tootsie; Aaron Nasingoetewa; Nathaniel Tootsie; Randy Poleahla; Steve Bahnimptewa; Thornton Day; Daryn Melvin; Robert Collateta Jr., Sahmie Lomahquahu, Dorma Sahneyah, Denise Bekay, and Madeline Sahneyah; Oren Mayer/CDC Assistant and Training Assessor.

**2.0 Overview of the Procedure:** In response to the ongoing COVID-19 pandemic, the Hopi Tribe has instituted widespread community mitigation and prevention efforts that have included closing much of the tribal government. These efforts, combined with ongoing containment activities, have served as both an effective intervention for limiting the spread of COVID-19 and stressor to the economic well-being of Hopi communities. The Hopi Reopening Plan follows a three-phase approach to inform decision-making for mitigation measures while balancing protection measures for the Hopi people. Phase One of the Hopi Plan involves the controlled reopening of essential governmental services. To ensure that these operations could be conducted safely both for governmental staff as well as the tribal customers they serve, a risk assessment was performed by both CDC and tribal representatives to evaluate the physical space of the Legislative building particularly the Hopi Tribal Council Chambers, the Office of the Tribal Secretary, Office of Enrollment, and the restrooms within the Legislative Building for physical risk, COVID-19 response policies, and to address staffing concerns of how to operate safely. This assessment served a second purpose, for CDC staff to observe Hopi representatives as they performed a COVID-19 specific risk assessment to increase tribal capacity and reduce/eliminate dependence on outside assistance for assessing future reopening services/facilities.

**3.0 Study Methods:** This assessment identified hazards associated with the physical reopening of the Legislative Building in both a broad assessment of physical space as well as individual assessments of each of the subservice office areas. Coordination with Hopi tribal staff and facilities/supervisor subject matter experts (SME) to understand current practices occurred to determine the baseline of operational mitigation strategies. Additional assessments of new mitigation strategies ranging from workspace reorganization to staggering staffing attendance to adjusting service implementation or scope occurred to determine their effects on further reducing COVID-19 infection risk.

To perform this assessment, Hopi and CDC staff conducted an in-person walkthrough of all workspaces in consideration for reopening within these this building. Office layout, staffing numbers, air ventilation and flow, cleaning procedures, bathroom/drinking water availability, common work areas, and staff activities were all assessed for implementation under the three-pillars of reducing the spread of COVID-19; 1) maximizing distance, 2) minimizing time, and 3) reducing exposure. These pillars focus on increasing the





## Hopi Tribal Headquarters Legislative Building On-site Risk Assessment Written Report

distance between infected and non-infected, decreasing the time they are together, and reducing the amount of virus present.

### 4.0 Assessment Findings with Mitigation Strategies:

**4.1 Legislative Building**—total estimated capacity ~40 individuals (including members of the Hopi Tribal Council). One story building broken up into several sub offices for the Legislative Officials and Tribal Council Chambers.

#### a. Shared services/spaces building-wide

i. Legislative Building Entry Screening Checkpoint requires strengthening. It is possible for staff to bypass it if tribal security is not present. Temperature screening occurs; however, no formal/official policy exists for what to do if there is a fever (100°F or above), aside from asking the individual to vacate the premises. Screeners are not empowered to stop high ranking or official staff based on screening results.

**4.1.a.i..1** Implement a robust screening policy that includes full symptoms, temperature checks, and a clear chain of command for reporting abnormal or established results.

**4.1.a.i..2** Move the screening guard closer to the entrance to ensure staff can't bypass screening.

**4.1.a.i..3** Empower screening staff to be able to stop anyone and educate all facility staff on the importance of respecting the screening process.

ii. Facility and service entrances involve face to face interactions between customers, officials and staff. There is no physical barrier to control access from entry to office spaces. Lobby space has one chair near the Security Officers desk that does not comply with the social distancing requirements and can encourage group congregation.

**4.1.a.ii..1** Install a clear plastic sneeze guard or other physical barrier between any areas where customers will need to interact with staff at entry or screening points. When installation is not possible, mark on the ground 6ft from desk space to encourage physical distancing.

**4.1.a.ii..2** Remove tables and chairs from lobby areas to reduce congregation. If some customers require seating (elderly, disabled), space out chairs to ensure physical distancing. However, given the confined lobby space of the legislative building this may not be possible.

iii. Staffing Considerations allows for most office staff to return to work while keeping with physical distancing recommendations. To further enhance protection of the staff, and the services they provide, consider the following:

**4.1.a.iii..1** Limit the number of staff for any individual function that return to work on any given day. This both reduces the number of people to people interactions that can occur as well as reduces the number of staff lost to





## Hopi Tribal Headquarters Legislative Building On-site Risk Assessment Written Report

infection and quarantine if COVID-19 is found within the facility. This reduces the interruption to providing essential services.

- 4.1.a.iii.2** Stagger work start times to both reduce crowding of people being screened and the bottleneck of office entry.

iv. In many common areas (lobbies, sign in or time clock areas, open floor plan office spaces), no hand hygiene options were available (hand washing stations or hand sanitizer with at least 60% alcohol).

- 4.1.a.iv.1** The easier you make it for people to perform a function, the more likely they are to do it. Provide bottles or wall mounted dispensers of hand sanitizer throughout these common areas, and signage encouraging their usage.

v. HVAC system needs optimization. Currently, the HVAC unit only services the Tribal Council Chambers. All offices in this building have independent units that service each respective office or area. A new unit for the overall building would help the overall building.

- 4.1.a.v.1** Work with facilities to ensure HVAC is in working order, identify workspaces not receiving HVAC services, that air recirculation is minimized (single direction airflow from inside to out is best) and that the number of air exchanges for the building is maximized without taxing the HVAC system. The Tribal Council Chambers poses the greatest challenge.

- 4.1.a.v.2** In offices, wall mounted AC units pose a risk to staff as it can blow air from one person to the next. Consider limiting office usage to single occupancy to AC may be used, but not pose risks to others.

vi. Drinking water is currently supplied to the staff via a combined unit of drinking fountain/bottle filler. Drinking fountains are possible areas of COVID-19 transmission due to being both high touch and being easily contaminated with breath and saliva.

- 4.1.a.vi.1** Shut down the drinking fountain component of the water supply unit. The bottle filler may still be used if both an alcohol hand disinfectant dispenser is installed, and cleaning wipes are provided next to the unit.

- 4.1.a.vi.2** Water stations were observed outside a lounge area in the OTS to not have hand sanitizing stations nearby, recommend the unit be relocated to the lounge area or removed entirely. If relocated, ensure decontaminating wipes are by the water cooler.

vii. Bathrooms are small and don't allow for physical distancing. Toilets do not have lids. Paper towel dispensers are not hands-free, and doors swing inwards.

- 4.1.a.vii.1** Limit bathroom usage to one person at a time.

- 4.1.a.vii.2** Change out paper towel dispensers for hands-free units, and install instructions on proper hand washing, turning off the sink, and opening the door.

### b. Tribal Council Chambers



## **Hopi Tribal Headquarters Legislative Building On-site Risk Assessment Written Report**

- i. The main meeting room for tribal council members and officials which can bring a large group from the public, tribal employees and guests.
  - 4.1.b.i..1** Consider a smaller desk for the Sargent at Arms (SAA), moving desk closer to the doorway, install protective shield at this desk. Consider a different approach to accounting for members, guests, and staff that enter the chambers. Provide training to the SAA of new mitigating strategies while policing activities in this room.
  - 4.1.b.i..2** To reduce person-to-person interactions and possible spread of the virus on an object, utilize a paperless system when applicable (electronic forms, scanned and emailed documents) for items like time sheets or payment forms.
  - 4.1.b.i..3** Designate a flow of traffic from the main entrance to the Chambers and place floor markings 6 feet apart. Provide adequate signage. Members should be encouraged to enter the Chambers during a meeting from certain doors, rather than going through offices.
  - 4.1.b.i..4** Increase the number of hand sanitizing stations installed at each door way (4) and at each end of the seating area (4), between the upper-inside row (1), install protective shields (front/sides) at each seating area at the Council Member area (16 total shields). Upper row will allow space for 8 members and the bottom row will allow for 6. Recommend the space for the Vice Chairman be moved to the next right space to accommodate distancing.
  - 4.1.b.i..5** Provide a desk and protective shields for the person administrating the conferencing mechanism. Provide longer HDMI and power cords for this person to connect to the television units.
  - 4.1.b.i..6** Limit number of items on desk area. Remove personal items.
  - 4.1.b.i..7** Ensure audience seating is marked and placed at 6 feet apart. Post signage to reminding the public not to move the chairs from their designated areas.
- ii. Virus on paperwork poses a low risk of infecting an individual. However, if physical documentation is going to be handled, the following handling options can further reduce risk:
  - 4.1.b.ii..1** Perform hand hygiene. Handle paperwork without gloves and by touching as few additional items (phones, keyboard, mouse etc.) as possible while processing. File paperwork. Wipe down all touched surfaces. Perform hand hygiene.
  - 4.1.b.ii..2** Let paperwork rest 24-48hrs, then process as 4.1.b.ii..1.
  - 4.1.b.ii..3** Place the paperwork in a plastic sleeve. Disinfect the outside of the sleeve, perform hand hygiene, and then process as 4.1.b.ii..1.
  - 4.1.b.ii..4** Create a link on each HTC member tablet to print to a specific copier in the OTS.



## **Hopi Tribal Headquarters Legislative Building On-site Risk Assessment Written Report**

iii. The HVAC system in some areas is non-functional reducing air circulation and encouraging the use of personal fans that blow air from one person to another.

**4.1.b.iii..1** Personal fans in communal areas should not be used. Their use in an office is permissible only if one occupant is present and the door to the office can be closed. If a fan is used, it should not be pointed in the direction of the door.

**4.1.b.iii..2** Remove fan from wall where the Chairman/Vice Chairman sit.

**4.1.b.iii..3** Windows can be opened as needed. Train the SAA so that he or she is familiar with this protocol.

### **c. Office of Tribal Secretary**

i. This office space is tight; staff are crowded, working in confined offices, and not wearing masks. Install gates or physical blocks between lobbies and office spaces to ensure controlled access.

**4.1.c.i..1** Enforcement of mask wearing needs to occur when in shared space or when physical distancing can't be guaranteed.

**4.1.c.i..2** Limit the number of staff that can be in any confined space to one. Find alternative space for them to work or stagger the attendance schedule to ensure overcrowding doesn't occur.

**4.1.c.i..3** Build a counter with protective shields and a half door when the receptionist sits. This will control traffic and limits use of office to enter and exit the Chambers. Increase signage for traffic flow.

**4.1.c.i..4** High touch areas: Time clock, clip boards, file cabinets, water cooler, requires constant and consistent sanitization after each use. Practice the same process as 4.1.b.ii..1.

**4.1.c.i..5** Remove mail center or relocate to the lounge area. Chairs should also be removed to comply with spacing and social distancing restrictions. (Tape chairs up so no one will use, if storage space is limited).

**4.1.c.i..6** Foyer office is confined, it is recommended the computer station which is customarily used by the Hopi Tribal Council be removed. Request that OIT create OTS printer links/access on tablets assigned to HTC members

**4.1.c.i..7** In the personal office of the Tribal Secretary the door be marked as a fire exit and be used by the staff. Conference chairs around table need to be taped for non-use and limited to two.

**4.1.c.i..8** In area four where the Transcribers sits, remove/relocate water cooler to the lounge area. Find space to store unused furniture or tape them up to discourage use.

**4.1.c.i..9** In area five, Lounge area, it is recommended that the coffee station, water cooler, copier machine be cleaned and sanitized after each use with proper cleaning agents. Signage must be provided to encourage proper sanitizing. If that cannot be done, removal is recommended. Refer to 4.1.B.ii.1-4.



## **Hopi Tribal Headquarters Legislative Building On-site Risk Assessment Written Report**

- ii. The HVAC does not supply air to the five areas in the OTS. Each is provided with independent HVAC unit and increases the use of fans. Each area is limited to 1-2 people. It is recommended that staff be scheduled in such a way that there is only one person in the room at a time.
  - 4.1.c.ii.1** Remove Fan or do not use if 2 people are in the area where the transcriber sits. Remove office items on the floor to Door #132 which is a Fire Exit.
  - 4.1.c.ii.2** Recommend these areas have adequate air flow. This area is shared with HTC members when they are in session.
  - 4.1.c.ii.3** In offices, wall mounted AC units pose a risk to staff as it can blow air from one person to the next. Consider limiting office usage to single occupancy to AC may be used, but not pose risks to others.
  - 4.1.c.ii.4**
- d. **Office of Enrollment**
  - i. Currently all offices in this area are single occupancy. However, the office is set up to have two people in the front area and the second office is converted to a file room.
    - 4.1.d.i.1** Limit the number of staff that can be in any confined space to one. Find alternative space for them to work or stagger the attendance schedule to ensure overcrowding doesn't occur.
    - 4.1.d.i.2** Remove public seating from the room and eliminate extra printer from main room. Request OIT configure all users to the copier and/or upgrade unit for adequacy.
    - 4.1.d.i.3** Add a hand sanitizing station to each room and sanitizing wipes in each file room. Increase signage for cleaning protocols for all high touch areas: copier, file cabinet handles, and camera on desk by main entrance (remove personal items from desk).
    - 4.1.d.i.4** Install protective shield at the front desk and second desk
    - 4.1.d.i.5** Directors Office has a personal coffee maker and refrigerator that needs to be removed. Guest chairs need to be removed. Place a locking file cabinet inside and eliminate the use of plastic totes to transport documents.
  - ii. The HVAC does not supply air to all areas in this Office. Three rooms are provided with independent HVAC units. Each area is limited to 1-2 people.
    - 4.1.d.ii.1** Fan in the Directors office is to be used with the door closed.
    - 4.1.d.ii.2** In offices, wall mounted AC units pose a risk to staff as it can blow air from one person to the next. Consider limiting office usage to single occupancy to AC may be used, but not pose risks to others.
    - 4.1.d.ii.3**
- e. **Bathrooms – Security station**
  - i. Bathrooms are small and don't allow for physical distancing. Toilets do not have lids. Paper towel dispensers are not hands-free, and doors swing inwards.



## Hopi Tribal Headquarters Legislative Building On-site Risk Assessment Written Report

- 4.1.e.i..1 Limit bathroom usage to one person at a time.
- 4.1.e.i..2 Change out paper towel dispensers for hands-free units, and install instructions on proper hand washing, turning off the sink, and opening the door.
- 4.1.e.i..3 Add hand sanitizing station to the outside of each bathroom
- ii. In many common areas (lobbies, open floor plan office spaces), no hand hygiene options were available (hand washing stations or hand sanitizer with at least 60% alcohol).
  - 4.1.e.ii..1 The easier you make it for people to perform a function, the more likely they are to do it. Provide bottles or wall mounted dispensers of hand sanitizer throughout these common areas, and signage encouraging their usage.

### 5.0 Interpretation of Results

- 5.1 Evaluation of Site Specific Assessments:** The goal of these assessments were two fold; first to perform a risk assessment and identify mitigation strategies for staff to return to work within the Legislative Building, and second to provide the Hopi staff a framework for administering these site specific risk assessments for COVID-19 mitigation suitability at future facilities. The overall mitigation strategies and the protection of government services fell into two main categories:
- a. Increase adherence to maximizing the three pillars of disease infection reduction: maximize distance (in the form of rearranging furniture and limiting office and conference room sharing), decrease time (in the form of staggering start times to avoid groups of people congregating), and minimizing exposure (in the form of mask wearing, sneeze guard utilization, full walls or offices for staff, and reducing staff in shared spaces).
  - b. Limiting the effect on essential services if COVID-19 infects staff. By not having all the staff in a particular service come to work on the same day (even if there is adequate room), it helps ensure that not all the staff that perform a function will be exposed or infected. This means no full service will be entirely infected/quarantined by a single exposure.
- 5.2 Limitations:** This assessment is a snapshot of the governmental facilities without yet having staff on site. Reevaluation of these mitigation strategies will need to occur often and thoroughly to help quickly catch deficiencies in their efficacy and encourage new strategies to be implemented.

### 6.0 Statement of Suitability

- 6.1** Protecting staff and customers is of critical importance for the reopening of the governmental offices. Identifying both the strengths of current mitigation strategies, as well as where changes need to be made is necessary to identify before staff return to work. Vigilant checking of the efficacy of these strategies is needed to ensure as staff return, their wellbeing and those they serve continues to be protected.



## Hopi Tribal Headquarters Legislative Building On-site Risk Assessment Written Report

- 6.2 The recommendation of this work is that once these mitigation strategies are implemented and policies are finalized, the governmental offices are ready to be reopened in line with the Hopi Tribe Reopening Plan.
- 6.3 The Legislative Building on-site risk assessments have been performed and completed as outlined in Section 2 of this report and is ready to be used as a component in the continuing evaluation of the safety practices of for the reopening of these buildings.

### 7.0 Summary Report Approval

Performed By: Hopi Reopening Task Group Date: 7/2/2020

Printed name: Oren Mayer  
Primary Assessor

### 8.0 Appendices

- 8.1 Summary of changes needed from Legislative Building Risk Assessment





## **Hopi Tribal Headquarters Legislative Building On-site Risk Assessment Written Report**

### **Summary of changes needed from Legislative Building Risk Assessment**

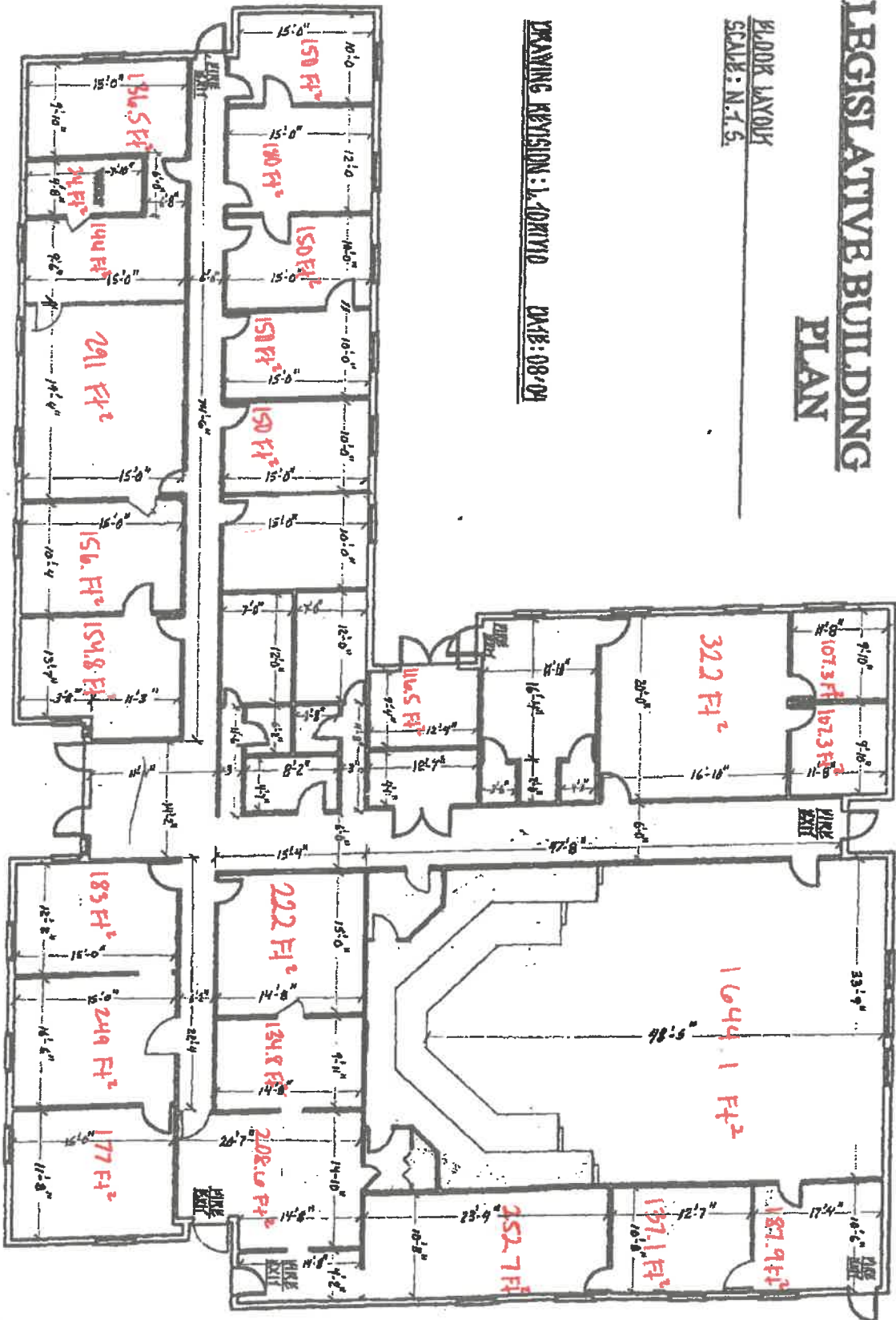
1. Create and implement a structured screening policy for screening incoming staff, empowering screeners to stop those that have fevers or flagged answers to screening questions and educate staff on the importance of the screening procedure to keep them safe.
2. For each service offered, limit the number of staff that perform a particular function from working at the same time. This will ensure that if a COVID-19 outbreak occurs, not all the staff that perform a particular function have to be isolated or quarantined and be unable to work at the same time.
3. Encourage teleworking when appropriate, and stagger scheduling to limit bottlenecks at screening points and crowding of work areas.
4. Install sneeze guards or physical barriers in locations that have staff interacting with clients and in the Tribal Council Chambers.
5. Ensure hand sanitizer with at least 60% alcohol is available in all high traffic areas.
6. Rearrange furniture in open work areas to maximize at least 6 feet distances between staff/guests.
7. Ensure HVAC is functional. Identify locations in the building not being serviced by the system and repair. Eliminate use of personal fans in shared areas.
8. Close off water fountains. Bottle fillers are ok if hand sanitizer and disinfecting wipes are available near the bottle fillers.
9. Bathrooms should be made single occupancy and signage on the doors needs to state this. Install hands-free paper towel dispensers.
10. Reduce physical paperwork when possible; electronic forms and email are preferred. When paperwork is required, have it deposited at a central area for pickup rather than individually handed in to staff.
11. Reduce occupancy of confined spaces like conference rooms. Ensure adequate ventilation is available and remove tables and chairs to reflect the desired maximum occupancy number.
12. Office spaces should be considered single occupancy; stagger working times or find alternative places to work to ensure proper distancing and ventilation can occur.
13. Require the use of face coverings within the buildings and in shared areas. Within private offices, face coverings can be removed, but should be put back on if anyone comes to have a discussion.
14. Ensure the cubicles have walls that fully separate one person from another. If this isn't possible, limit the staff that share an area to ensure proper distancing and working in shared space.
15. Staff are the best eyes and ears for IPC. Ensure they have a way to report concerns, and that management is receptive to their thoughts and questions.



# PLAN

SCALE: N.T.S.

DRAWING REVISION: 1.000000 DATE: 08/09





## **Hopi Tribe – Social Services Program Building On-site Risk Assessment Written Report**

### **1.0 Scope**

- 1.1 **Risk Assessment Report For:** The reopening of governmental services of Social Services Program housed in the Cancer Support Program Building, Kykotsmovi, AZ
- 1.2 **Date Performed:** 7/31/2020
- 1.3 **Assessors (Name/Association):** Cheryl Tootsie; Daryn Melvin; Aaron Nasingoetewa and Denise Bekay of the Hopi Tribe. Mack McCraw of CDC

**2.0 Overview of the Procedure:** In response to the ongoing COVID-19 pandemic, the Hopi Tribe has instituted widespread community mitigation and prevention efforts that have included closing much of the tribal government. These efforts, combined with ongoing containment activities, have served as both an effective intervention for limiting the spread of COVID-19 and stressor to the economic well-being of Hopi communities. The Hopi Reopening Plan follows a three-phase approach to inform decision-making for mitigation measures while balancing protection measures for the Hopi people. Phase One of the Hopi Re-Opening Plan involves the controlled reopening of essential governmental services. To ensure that these operations could be conducted safely both for governmental staff as well as the tribal customers and clients they serve, a risk assessment was performed by tribal representatives to evaluate the physical space of the Social Services Program area of the Cancer Support building for physical risk, COVID-19 response policies, and to address staffing concerns of how to operate safely. This assessment serves as a guide for the program to address any issues as they arise.

**3.0 Study Methods:** This assessment identified hazards associated with the physical reopening of the Cancer Support Program Building in both a broad assessment of physical space as well as individual assessments of each office areas. Coordination with Executive staff and Core Service staff, and subject matter experts (SME), to understand current practices occurred, and the baseline of operational mitigation strategies was determined. Additional assessments of new mitigation strategies ranging from workspace reorganization to staggering staffing attendance to adjusting service implementation or scope occurred to determine their effects on further reducing COVID-19 infection risk.

To perform this assessment, Hopi staff conducted an in-person walkthrough of all workspaces in consideration for reopening within this building. Office layout, staffing numbers, air ventilation and flow, cleaning procedures, bathroom/drinking water availability, common work areas, and staff activities were all assessed for implementation under the three-pillars of reducing the spread of COVID-19; 1) maximizing distance, 2) minimizing time, and 3) reducing exposure. These pillars focus on increasing the distance between infected and non-infected individuals, decreasing the time they are together, and reducing the amount of virus present.

### **4.0 Assessment Findings with Mitigation Strategies:**

- 4.1 **Social Services Program Building** —total estimated capacity ~15 individuals. One story, double wide modular building, broken up into several sub offices, a reception desk, cubicles for staff, storage and



## **Hopi Tribe – Social Services Program Building On-site Risk Assessment Written Report**

file room for the Hopi Tribe’s Social Services Program was observed. The Social Services Program is under the directive of the Office of the Executive Director. The Social Services Program had been displaced from another office setting. Administrative staff, the director, and service delivery staff occupy this space on a staggered schedule to allow for distancing between staff but need protective barriers provided to a financially strapped program.

### **a. Main Entrance**

- i. Entrance has a reception desk with no protective barriers. Seating for clients was observed. There is little to no Entry Screening of guests/staff at the main entrance. Consequently, their protocols require strengthening. There is a sign in criteria of everyone, however, no COVID-19 related questionnaires were observed to be in place. No temperature screening occurs, and no policy exists for what to do if there is a fever. This creates an issue for Screeners to stop high ranking or official staff or guests based on screening results. From this entrance access to the director’s office, copy/storage room and staff cubes. A unisex restroom exists at the main entrance foyer that serves this section of staff. This building is home to two separate public service programs occupying each end of the building. The other program is the Hopi Tribe’s Cancer Support Services Program. Each program will receive its own written report.

- 4.1.a.i..1 Implement a robust screening policy that includes full symptoms, temperature checks, and a clear chain of command for reporting abnormal or established results. Written policy and procedure on how screening will be conducted is recommended for training of staff. The policy should include the following: 1.) Information on what PPE to use. 2.) Proper PPE donning and doffing procedures. 3.) The type of thermometer to be used. 4.) How the thermometer’s calibration will be checked and how often. 5.) How the thermometer should be cleaned and disinfected and how often. 6.) How to handle someone who has an elevated or abnormal temperature.
- 4.1.a.i..2 Empower screening staff to be able to stop anyone and educate all facility staff on the importance of respecting the screening process. Signs are needed for sanitizing and social distancing protocols.
- 4.1.a.i..3 Establish an appointment only systems for client visits as well as robust policies for screening clients and guests prior to entry into the building.
- 4.1.a.i..4 This area needs to have a Fire Escape Plan and Max Occupancy signs posted for viewing. If Fire evacuation plan does not exist, develop a fire evacuation plan with local fire department and post throughout facility as required by OSHA.
- 4.1.a.i..5 Provide signage for cleaning, distancing and mask protocols.
- 4.1.a.i..6 Use a one piece Plexiglas/protective barrier with a small window for passing documents at the receptionist area. The desk is at least 5’ long.



## **Hopi Tribe – Social Services Program Building On-site Risk Assessment Written Report**

- 4.1.a.i..7** High Touch areas include: pens, the desk bell, clip boards, time clock, desktop unit, and telephone. This area needs constant and consistent cleaning, provide sanitizing wipes and a hand sanitizing station nearby. Recommend a cleaning protocol and log be maintained. The protocol should include the following 1.) A complete list of all high touch surfaces in the room. 2.) Identify what cleaning products should be used on these surfaces and ensure that they are effective against COVID-19 (i.e. that they are on the EPA N-list) 3.) Identify who will be responsible for conducting this work and how often it should be done. 4.) Keep a record of all required OSHA trainings for those tasked with cleaning and disinfecting (i.e. security and Janitorial staff).
- ii. A unisex restroom in this area was observed. (This information is provided on the Cancer Support Program written report and for Social Service Program's awareness).
- 4.1.a.ii..1** Toilet lid should be installed and signage posted to have people close them before flushing. This will reduce the amount of virus that could be aerosolized as per AIHA guidelines.
- 4.1.a.ii..2** Provide signage to allow for one person to be in this area at a time. Recommend proper hand washing, mask and door opening signs.
- 4.1.a.ii..3** Install touch free soap and paper towel dispensers.
- 4.1.a.ii..4** Install hand sanitizing station outside of the lavatory.
- iii. Staffing Considerations allows for most office staff to return to work while keeping with physical distancing recommendations. To further enhance protection of the staff, and the services they provide, consider the following:
- 4.1.a.iii..1** Limit the number of staff for any individual function that return to work on any given day. This both reduces the number of people to people interactions that can occur as well as reduces the number of staff lost to infection and quarantine if COVID-19 is found within the facility. This reduces the interruption to providing essential services.
- 4.1.a.iii..2** Stagger work start times to both reduce crowding of people being screened and the bottleneck of office entry.
- 4.1.a.iii..3** Cross training of certain office staff responsibility to be effective with minimal staff.
- iv. In many common areas (lobbies, kitchen areas, conference and open floor plan office spaces), the kitchen sink is available for hand hygiene although no hand sanitizing station (hand washing stations or hand sanitizer with at least 60% alcohol) was observed. The kitchen conference room serves as an office, file storage and print station. The Social Service Program may use this



## **Hopi Tribe – Social Services Program Building On-site Risk Assessment Written Report**

common area as well. This report will cover elements of the findings applicable for this area and its occupants will be made aware.

- 4.1.a.iv..1** It should be remembered that the easier you make it for people to perform a function, the more likely they are to do it. Provide bottles or wall mounted dispensers of hand sanitizer throughout these common areas, along with signage encouraging their usage.
- 4.1.a.iv..2** The copy machine, printer and shredder were all noted as high touch areas. Encourage scanning documents and utilizing emailing to the greatest extent practicable. Recommend a hand sanitizing station near the large printer units; add sanitizing wipes in this area. Area must also be cleaned daily. Add signage for cleaning protocols. Recommend the Mylar printer be moved so it does not obstruct access/use for the exit door. Per OSHA "exit routes must be free and unobstructed. No materials or equipment may be placed permanently or temporarily within the exit route. (See 29 CFR 1910.37(a)(3)).
- 4.1.a.iv..3** Lateral File Area – file cabinets are considered high touch areas. Provide signs and sanitizing wipes for cleaning upon use.
- 4.1.a.iv..4** Conference Room area has conference tables, chairs and a literature station. Recommend tables, chairs and literature station be wiped down daily, and digitize the case files being stored. This area is also used as an eating area by staff. Recommend a maximum capacity of 4 people at each table row, facing one direction, and cleaning is required after each use. Masks are taken off while eating, which increases the risk of disease spread therefore, it is recommended that staff eat at their own workstations with the doors closed. Alternatively, consider providing outdoor seating. Staff should be reminded to wash their hands and to clean and disinfect the area before and after eating.
- 4.1.a.iv..5** A small kitchenette is available for staff. Provide signage for cleaning and hand washing protocols as well as sanitizing wipes and a hand sanitizing station.
- 4.1.a.iv..6** Refrigerator, microwave and Coffee station are considered shared amenities and requires constant cleaning. Add sanitizing/cleaning wipes for this area and signs for cleaning protocols.
- 4.1.a.iv..7** Workstation for administrative staff was observed. This small station requires a protective barrier at the desk and a rearrangement of furniture so staff is not directly facing others entering the common area. Desktop unit and telephone are high touch areas; requires consistent cleaning. Sanitizing wipes were observed on the desk. Mask usage is required when two or more people are in this area.





## Hopi Tribe – Social Services Program Building On-site Risk Assessment Written Report

- 4.1.a.iv..8** Items that occupy this room are mobile dry erase boards, easels, projection screens and a stand; arrange so items do not obstruct the doorways or flow of traffic through this space.

v. HVAC system provides adequate air flow and ventilation. Currently, the HVAC unit services the entire building.

- 4.1.a.v..1** Work with facilities to ensure HVAC is in working order, identify workspaces not receiving adequate services, that air recirculation is minimized (single direction airflow from inside to out is best) and that the number of air exchanges for the building is maximized without taxing the HVAC system.

vi. Drinking water is currently supplied to the staff via the kitchen sink and/or supplied water bottles.

- 4.1.a.vi..1** A water station was observed in the reception area that is not in operation. This needs to be replaced with a bottle filler type station or to be permanently removed. Post signs of inoperability.

### b. Staff Offices

i. These offices were observed to have high touch areas; each needing signs for cleaning protocols and a hand sanitizing station on the outside of the office or strategically outside each office where hands can be sanitized after closing doors. Cleaning up offices and limiting personal items on desks limits the virus/germs from settling and those surfaces. The area for the Social Services program is comprised mostly of cubicles with the administrative staff near the reception area. A total of 6 cubicle areas are in use. Each has a desktop unit and some have access to the telephone.

- 4.1.b.i..1** Reception Area: Provide signage for cleaning and hand sanitizing and the use of sanitizing wipes. Maximum occupancy is 2. High touch areas include the desktop units, telephone, key box, time clocks, and file cabinet. Limit personal items on desks. Post Max Occupancy (1) sign and fire escape plan.

- 4.1.b.i..2** Directors Office: Maximum occupancy is 1 person; furniture arrangement allows for distancing between staff and one guest: keeping within 6' of distance. File cabinet requires cleaning and sanitizing daily. Provide cleaning and hand sanitizing signage and install hand sanitizing station outside office door.

- 4.1.b.i..3** Elvera Selestewa's Area: Provide signage for cleaning and hand sanitizing as well as the use of sanitizing wipes. Remove or tape off excess chairs. Maximum occupancy is 1. High touch areas are the desktop unit, telephone, shelf and file cabinet.



## **Hopi Tribe – Social Services Program Building On-site Risk Assessment Written Report**

- 4.1.b.i..4** Vacant Cubicle area: exists cross from where Elvera Selestewa sits. Maximum occupancy for this area is 1. High touch areas include: desktop unit, and telephone
- 4.1.b.i..5** 2 Person Cubicle Unit behind Elvera Selestewa: Provide signage for cleaning and the use of sanitizing wipes. Place a hand sanitizing station outside the area between offices. Maximum occupancy sign (1) is needed as well as a sign for cleaning protocols and sanitizing wipes.
- 4.1.b.i..6** 3 Person Cubicle unit: Provide signage for mask wearing requirement, cleaning and hand sanitizing. High touch areas include: desktop unit, file cabinet and telephone; provide sanitizing wipes. Recommend staff in this area not face one another. This space allows for 2 people max. Recommend schedules be staggered to allow for required social distancing.
- 4.1.b.i..7** Printer Room and Supply Closet. Place sanitizing wipes where printer sits for cleaning on a daily/consistent basis. Closet requires cleaning and organizing. Separate and store items per function. Post maximum occupancy sign (1), fire escape plan and cleaning protocols.
- 4.1.b.i..8** Exam Room: used when needed for conferencing, storage of incentive items and holding area of clients. Office needs cleaning. Max occupancy sign (1).
- 4.1.b.i..9** Janitor's Closet: A shared area with the program and tribes janitorial staff where cleaning supplies and equipment are stored. Max occupancy sign (1).

ii. Virus on paperwork poses a low risk of infecting an individual. However, if physical documentation is going to be handled, the following handling options can further reduce risk:

- 4.1.b.ii..1** Perform hand hygiene. Handle paperwork without gloves and by touching as few additional items (phones, keyboard, and mouse) as possible while processing. File paperwork. Wipe down all touched surfaces. Perform hand hygiene.
- 4.1.b.ii..2** Let paperwork rest 24-48hrs, then process as 4.1.b.ii..1.
- 4.1.b.ii..3** Place the paperwork in a plastic sleeve. Disinfect the outside of the sleeve, perform hand hygiene, and then process as 4.1.b.ii..1.

iii. The HVAC system is functional however, use of personal fans which blow air from one person to another indicates HVAC requires optimization for adequate air flow and ventilation to all areas of the building.

- 4.1.b.iii..1** Personal fans in communal areas should not be used. Their use in a cubicle setting is not permissible, only in offices with a door.
- 4.1.b.iii..2** Windows can be opened only as needed to increase ventilation.





## Hopi Tribe – Social Services Program Building On-site Risk Assessment Written Report

- 4.1.b.iii.3 Ceiling vents are used. Filters used are rated as MERV 7.
- 4.1.b.iii.4 Program coordinates with OFRM for maintenance.

### c. Overall Office Building

- i. The importance of overall cleanliness is needed to function and interact with the public. It was noted that OFMR staff provide janitorial and maintenance to tribal properties/buildings daily. Upon observation it was also noted the building and amenities are somewhat dated but in good condition, however, to improve with cleaning the following are recommended:

- 4.1.c.i.1 Replace carpeting with laminate flooring. Keep flooring consistent for easy cleaning of surface.
- 4.1.c.i.2 Place fire escape plans of the building throughout
- 4.1.c.i.3 Eliminate, store or tape off excess chairs and couches where noted.
- 4.1.c.i.4 Increase heightened protocols for entry of staff and guests by creating a screening station on the exterior of the main entrance along with signage.

## 5.0 Interpretation of Results

- 5.1 **Evaluation of Site Specific Assessments:** The goal of these assessments were two fold; first to perform a risk assessment and identify mitigation strategies for staff to return to work in the Social Services Program Building, and second, to provide the staff with a framework for administering these site specific risk assessments for COVID-19 mitigation suitability at future facilities. The overall mitigation strategies and the protection of government services fell into two main categories:
  - a. Increase adherence to maximizing the three pillars of disease infection reduction: maximize distance (in the form of rearranging furniture and limiting office and conference room sharing), decrease time (in the form of staggering start times to avoid groups of people congregating), and minimizing exposure (in the form of mask wearing, sneeze guard utilization, full walls or offices for staff, and reducing staff in shared spaces).
  - b. Limiting the effect on essential services if COVID-19 infects staff. By not having all the staff in a particular service come to work on the same day (even if there is adequate room), it helps ensure that not all the staff that perform a function will be exposed or infected. This means no full service will be entirely infected/quarantined by a single exposure.
- 5.2 **Limitations:** This assessment is a snapshot of the governmental facilities with staff on site. Reevaluation of these mitigation strategies will need to occur often and thoroughly to help quickly catch deficiencies in their efficacy and encourage new strategies to be implemented.

## 6.0 Statement of Suitability

- 6.1 Protecting staff and customers is of critical importance for the reopening of the governmental offices. Identifying both the strengths of current mitigation strategies, as well as where changes need to be made is necessary to identify before staff return to work. Vigilant checking of the efficacy



## **Hopi Tribe – Social Services Program Building On-site Risk Assessment Written Report**

of these strategies is needed to ensure as staff return, their wellbeing and those they serve continues to be protected.

- 6.2 The recommendation of this work is that once these mitigation strategies are implemented and policies are finalized, the governmental offices are ready to be reopened in line with the Hopi Tribe Reopening Plan.
- 6.3 The Social Service Program Building on-site risk assessments have been performed and completed as outlined in Section 4 of this report and is ready to be used as a component in the continuing evaluation of the safety practices of for the reopening of this building.

### **7.0 Summary Report Approval**

Performed By: Hopi Reopening Task Group Date: 7/31/2020

Printed name: Daryn Melvin, Chief of Staff, Hopi Tribe – Office of the Vice Chairman  
*Primary Assessor*

### **8.0 Appendices**

- 8.1 None.



## **Hopi Tribe – Social Services Program Building On-site Risk Assessment Written Report**

### **Summary of changes needed from Social Services Program Building Risk Assessment**

1. Create and implement a structured screening policy for screening incoming staff, empowering screeners to stop those that have fevers or flagged answers to screening questions and educate staff on the importance of the screening procedure to keep them safe.
2. For each service offered, limit the number of staff that perform a particular function from working at the same time. This will ensure that if a COVID-19 outbreak occurs, not all the staff that perform a particular function have to be isolated or quarantined and be unable to work at the same time.
3. Encourage teleworking when appropriate, and stagger scheduling to limit bottlenecks at screening points and crowding of work areas.
4. Install sneeze guards or physical barriers in locations that have staff interacting with clients.
5. Ensure hand sanitizer with at least 60% alcohol is available in all high traffic areas.
6. Rearrange furniture in open work areas to maximize at least 6 feet distances between staff/guests.
7. Ensure HVAC is functional. Identify locations in the building not being serviced by the system and repair. Eliminate use of personal fans in shared areas. Coordinate with OFRMS for maintenance.
8. Close off water fountains. Bottle fillers are ok if hand sanitizer and disinfecting wipes are available near the bottle fillers.
9. Bathrooms should be made single occupancy and signage on the doors needs to state this. Install hands-free paper towel dispensers.
10. Reduce physical paperwork when possible; electronic forms and email are preferred. When paperwork is required, have it deposited at a central area for pickup rather than individually handed in to staff.
11. Reduce occupancy of confined spaces like conference rooms. Ensure adequate ventilation is available and remove tables and chairs to reflect the desired maximum occupancy number.
12. Office spaces should be considered single occupancy; stagger working times or find alternative places to work to ensure proper distancing and ventilation can occur.
13. Require the use of face coverings within the buildings and in shared areas. Within private offices, face coverings can be removed, but should be put back on if anyone comes to have a discussion.
14. Ensure the areas that do not have cubicles or walls fully separate one person from another. If this isn't possible, limit the staff that share an area to ensure proper distancing and working in shared space.
15. Staff are the best eyes and ears for IPC. Ensure they have a way to report concerns, and that management is receptive to their thoughts and questions.



## Hopi Health Care Center On-site Risk Assessment Written Report

### 1.0 Scope

- 1.1 **Risk Assessment Report For:** The reopening of the Hopi Tribal Governmental Programs housed within the Hopi Health Care Center.
- 1.2 **Date Performed:** 7/29/2020
- 1.3 **Assessors (Name/Association):** Daryn Melvin, Lead Assessor, Hopi Tribe; Randy Poleahla; Sahmie Lomahquahu; Denise Bekay; George Chung, IHS Office of Environmental Health and Engineering.

**2.0 Overview of the Procedure:** In response to the ongoing COVID-19 pandemic, the Hopi Tribe has instituted widespread community mitigation and prevention efforts that have included closing much of the tribal government. These efforts, combined with ongoing containment activities, have served as both an effective intervention for limiting the spread of COVID-19 and stressor to the economic well-being of Hopi communities. The Hopi Reopening Plan follows a three-phase approach to inform decision-making for mitigation measures while balancing protection measures for the Hopi people. Phase One of the Hopi Plan involves the controlled reopening of essential governmental services. To ensure that these operations could be conducted safely both for governmental staff as well as the tribal customers they serve, a risk assessment was performed by both CDC and tribal representatives to evaluate the physical space of the Hopi Government Programs housed within the Hopi Health Care Center building for physical risk, COVID-19 response policies, and to address staffing concerns of how to operate safely.

**3.0 Study Methods:** This assessment identified hazards associated with the physical reopening of the Hopi Tribal Government Programs housed within the Hopi Health Care Center Building in both a general assessment of physical space as well as individual assessments of each of the subservice office areas which include the Behavioral Health Services Program (BHS), the Community Health Representatives Program (CHR), Medical Transport, Emergency Medical Services (EMS) and the Women, Infants and Children Program (WIC). Coordination with Hopi tribal staff and facilities/supervisor subject matter experts (SME) to understand current practices occurred to determine the baseline of operational mitigation strategies. Additional assessments of new mitigation strategies ranging from workspace reorganization to staggering staffing attendance to adjusting service implementation or scope occurred to determine their effects on further reducing COVID-19 infection risk.

To perform this assessment, Hopi and OEHE staff conducted an in-person walkthrough of all workspaces in consideration for reopening within the building. Office layout, staffing numbers, air ventilation and flow, cleaning procedures, bathroom/drinking water availability, common work areas, and staff activities were all assessed for implementation under the three-pillars of reducing the spread of COVID-19; 1) maximizing distance, 2) minimizing time, and 3) reducing exposure. These pillars focus on increasing the distance between infected and non-infected individuals, decreasing the time they are together, and reducing the amount of virus present.

### 4.0 Assessment Findings with Mitigation Strategies:

## Hopi Health Care Center On-site Risk Assessment Written Report

4.1 **Behavioral Health Services (BHS)**—total estimated capacity ~60 individuals. Large office area broken up into several sub offices depending on services offered.

a. **Shared services/spaces building-wide**

- i. Screening for employees as well as the public occurs at the main entrance to the Hopi Healthcare Center. Temperature screening was also observed. A sign in sheet at the entrance to the Behavioral Health Services office area was observed, and hand sanitizer was noted.
- ii. Facility and service entrances involve face to face interactions between customers and staff. A clear Plexiglas barrier was noted at the main reception desk. Waiting room spaces had several chairs and tables that can encourage group congregation.

4.1.a.ii.1

**Reception area:** As a rule, install a clear plastic sneeze guard or other physical barrier between any areas where customers will need to interact with staff at entry or screening points. When installation is not possible, place a mark on the floor 6ft. from the desk area to indicate and encourage proper physical distancing.

4.1.a.ii.2

**Waiting room area:** Install gates or physical blocks between waiting room areas and office spaces to ensure controlled access. Alternatively, post signage or visual cues to direct the flow of traffic from the reception desk to the waiting room area and to the screening and intake room.



Figure 1 BHS Waiting Room Area

4.1.a.ii.3

Brochures in the waiting area were noted as a high touch area and may encourage clients to touch and read multiple brochures repeatedly. Recommend installing either a hand sanitizer near the brochure stand and putting up a signage to remind clients to use sanitizer before and after handling the brochures. Alternatively, Brochures can be removed all-together.

4.1.a.ii.4

Waiting areas may not have sufficient space for clients to be 6ft apart. Current observed configure only allow for 2 individuals. Recommend

## Hopi Health Care Center On-site Risk Assessment Written Report

- reorientation of chairs to promote safe social distancing or have clients wait in the outside in the larger lobby area of the Hopi Health Care Center.
- 4.1.a.ii.5** HHCC housekeeping does not clean/disinfect waiting area chairs after each client. Recommend BHS establish policies and procedures to clean/disinfect their department area the chairs after use.
- 4.1.a.ii.6** **Intake rooms:** Two adjacent intake rooms separated by a large double pane glass window located near the waiting room area will be used as the main area to service and meet with clients. The left intake room will be utilized by department personnel, while the right intake room will be utilized by BHS clients. This Intake room is large enough to accommodate approximately 2 individuals. Recommend that markings be placed on the floor to indicate proper social distancing and placement of chairs. BHS personnel will communicate with patients and clients in the adjacent room via a telephone. Telephone, light switch, TV and table were noted as high touch areas. Recommend a cleaning protocol and log be maintained. The protocol should include the following 1.) A complete list of all high touch surfaces in the room. 2.) Identify what cleaning products should be used on these surfaces and ensure that they are effective against COVID-19 (i.e. that they are on the EPA N-list) 3.) Identify who will be responsible for conducting this work and how often it should be done. 4.) Keep a record of all required OSHA trainings for those tasked with cleaning and disinfecting (i.e. security and Janitorial staff).



Figure 2 Patient/Client Intake Room



## Hopi Health Care Center On-site Risk Assessment Written Report

iii. Staffing Considerations allows for most office staff to return to work while keeping with physical distancing recommendations. To further enhance protection of the staff, and the services they provide, consider the following:

**4.1.a.iii..1** Limit the number of staff for any individual function that return to work on any given day. This both reduces the number of people to people interactions that can occur as well as reduces the number of staff lost to infection and quarantine if COVID-19 is found within the facility. This reduces the interruption to providing essential services.

iv. In many common areas (lobbies, sign in or time clock areas, open floor plan office spaces), no hand hygiene options were available (i.e. hand washing stations or hand sanitizer with at least 60% alcohol).

**4.1.a.iv..1** It should be remembered that the easier you make it for people to perform a function, the more likely they are to do it. Provide bottles or wall mounted dispensers of hand sanitizer throughout these common areas, and signage encouraging their usage.

**4.1.a.iv..2** **The kitchen/group therapy room** is high occupancy and high traffic area. Recommend limiting the occupancy to 3 people; max occupancy signage for COVID-19 should be posted. In addition, seating area should be taped/marked off to indicate where people may sit while maintaining 6ft of social distancing. Tables and chairs in this area need to be cleaned with sanitizing wipes after each use. Masks are taken off while eating, which increases the risk of disease spread therefore, it is recommended that staff eat at their own workstations with the doors closed. Alternatively, consider providing outdoor seating. Staff should be reminded to wash their hands and to clean and disinfect the area before and after eating.



Figure 3 Kitchen/Group Therapy area





## Hopi Health Care Center On-site Risk Assessment Written Report

- 4.1.a.iv..3** There are multiple high contact areas within the kitchen/group therapy room (e.g. microwave, fridge, whiteboard, etc.). Recommend having wipes nearby for people to use to wipe down surfaces. In addition, signage listing all the common use equipment that need cleaning/sanitizing after each room use. See **section 4.1.a.ii..6** for more detailed guidance.

### b. Staff Offices

- i. The Offices observed all had high touch areas; each needing signs for cleaning protocols and a hand sanitizing station strategically placed on the outside of the door where hands can be sanitized after closing the door. Cleaning up offices and limiting personal items on desks particularly for those offices with more than one-person occupancy is recommended, as this limits the possibility of the virus settling on those surfaces.

- 4.1.b.i..1** Toys were observed in some offices and are high contact points. It is unknown whether there is a policy for cleaning/disinfecting of the toys after use. Recommend avoiding toys if possible. Otherwise staff should develop a cleaning/disinfecting policy (i.e. washing in the sink or wiping down). Ensure that chemicals used to disinfect are safe for use around children. Ensure that the disinfectant used is included on the EPA's N-list (<https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2-covid-19>).
- 4.1.b.i..2** **Central BHS Office area:** Concerns about the central office space of having an overwhelming amount of foot traffic. Recommend taping off the floor to indicate where staff cannot pass through. Procedures should be established to assist staff who need to obtain items from the central office space.
- 4.1.b.i..3** Multiple high-touch areas noted within this Office space (e.g. water cooler, printers, and shredders, mailboxes). Recommend providing wipes at each of these areas and posting signage to remind staff to disinfect surfaces. See **section 4.1.a.ii..6** for more detailed guidance.
- 4.1.b.i..4** Recommend staggered work schedules for cubicles that are shared between employees. Recommend providing wipes as well as posting signage to remind the staff to wipe down all touch surfaces before they leave to ensure the next staff member will not be potentially infected.
- 4.1.b.i..5** Several unnamed bottles of cleaning and disinfecting chemicals were observed on a table in the central office area. Recommend that these chemicals be properly labeled and stored.
- 4.1.b.i..6** Recommend that the central office area be reconfigured to limit the amount of traffic in the area due to the numerous shared amenities present such as the copy machine, staff mailboxes, file cabinets etc.



## Hopi Health Care Center On-site Risk Assessment Written Report

- ii. Drinking water is currently supplied to the staff via a combined unit of drinking fountain/bottle filler. Drinking fountains are possible areas of COVID-19 transmission due to being both high touch and being easily contaminated with breath and saliva.
  - 4.1.b.ii..1** Shut down the drinking fountain component of the water supply unit. The bottle filler may still be used if both an alcohol hand disinfectant dispenser is installed, and cleaning wipes are provided next to the unit.
  - 4.1.b.ii..2** Alternately, supply bottled water to the staff, or encourage them to bring from home.
- iii. HVAC system appears to be in good working order. An evaluation of the HVAC system with IHS Facilities personnel indicated a current MERV filter rating of 9. Filters are racked in sections and undergo quarterly inspection. Plans to change out the filters to higher rating are scheduled to take place within a year.
  - 4.1.b.iii..1** Work with facilities to ensure HVAC is in good working order, identify workspaces not receiving HVAC services if any, and that air recirculation is minimized (single direction airflow from inside to out is best).

### 4.2 Community Health Representative (CHR)

#### a. Shared services/spaces building-wide

- i. Screening for employees as well as the public occurs at the main entrance to the Hopi Healthcare Center. Temperature screening was also observed. A sign in sheet at the entrance to the Community Health Representatives office area was observed, and hand sanitizer was noted. This office/service area houses two additional Tribal Government Programs: **The Medical Transport Program** and the **Healthy Smiles Program**. Given that the area houses 3 separate programs each with a decent number of staff, the area does not allow for optimal social distancing should full staff for each program return.
- ii. The primary Office area is occupied predominantly by the CHR Program with a series of cubicles facing either wall extending out left of the entrance. The Cubical Partition closet to the entrance serves as the reception area. A sign-in log was noted in this area, as well as hand sanitizer. Due to the confined nature of the office, 6'ft of social distancing is not practical. Recommend having a Plexiglas type barrier be installed in this area.
- iii. Staffing Considerations. Office space does not allow for most office staff to return to work while keeping with physical distancing recommendations. To further enhance protection of the staff, and the services they provide, consider the following:
  - 4.2.a.iii..1** Limit the number of staff for any individual function that return to work on any given day. This both reduces the number of people to people interactions that can occur as well as reduces the number of staff lost to infection and quarantine if COVID-19 is found within the facility. This reduces the interruption to providing essential services.

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- 4.2.a.iii..2** Program staff were encouraged to provide hand sanitizing and disinfecting options in any common or high touch areas. Multiple high-touch areas were noted in the office space (e.g. printers, computers and shredders etc.). Recommend providing wipes at each of these areas and posting signage to remind staff to disinfect surfaces. Recommend a cleaning protocol and log be maintained. The protocol should include the following 1.) A complete list of all high touch surfaces in the room. 2.) Identify what cleaning products should be used on these surfaces and ensure that they are effective against COVID-19 (i.e. that they are on the EPA N-list) 3.) Identify who will be responsible for conducting this work and how often it should be done. 4.) Keep a record of all required OSHA trainings for those tasked with cleaning and disinfecting (i.e. security and Janitorial staff).
- 4.2.a.iii..3** Observed cubicles for staff had a number of personal items. Items that can be shared or randomly touched by another person. Recommend staff minimize items on the desk so that these items are less likely to be shared or touched.
- 4.2.a.iii..4** Partitions were not high enough to block a person's view into the next cubicle. As such, there is a potential to spread respiratory droplets in to the adjacent cubicles. General recommendation regarding partitions is that they are at least above nose-level. Recommend installing new partitions to increase the height or improvising barriers to increase the height. In addition, staff should mark on floors of where people should stand if they wish to speak with another staff member who is sitting at his/her cubicle.



Figure 4 CHR Cubicle Partitions

## Hopi Health Care Center On-site Risk Assessment Written Report

### 4.2.a.iii..5

Due to the limited office space where 3 separate programs are housed, a scheduling solution must be developed. Having all 3 programs in the area while fully staffed will be problematic if the 6'ft distancing rule and maximum occupancy restriction is to be followed. Recommend the programs develop a staggered scheduling system between them.



Figure 5 CHR/Health Smiles Office area

iv. HVAC system appears to be in good working order. An evaluation of the HVAC system with IHS Facilities personnel indicated a current MERV filter rating of 9. Filters are racked in sections and undergo quarterly inspection. Plans to change out the filters to higher rating are scheduled to take place within a year.

### 4.2.a.iv..1

Work with facilities to ensure HVAC is in good working order, identify workspaces not receiving HVAC services if any, and that air recirculation is minimized (single direction airflow from inside to out is best).

## 4.3 Medical Transport

### a. Shared service space

i. Medical Transport shares the Office space with the **CHR program** and the **Healthy Smiles Program**. The Medical Transport Program occupies primarily two adjacent offices to the right of the main office area entrance which is occupied by the CHR Program. See **section 4.2.a** for more details regarding Reception and sign-in area for these programs.

## Hopi Health Care Center On-site Risk Assessment Written Report



Figure 6 Medical Transport Office space

### b. Staff Offices

- i. The two Medical Transport Offices observed all had high touch areas; each needing signs for cleaning protocols and a hand sanitizing station strategically placed on the outside of the door where hands can be sanitized after closing the door. Cleaning up offices and limiting personal items on desks particularly for those offices with more than one-person occupancy is recommended, as this limits the possibility of the virus settling on those surfaces.

**4.3.b.i..1 Office nearest the Emergency exit** is utilized by several Medical Transport staff. Recommend a 2-person maximum capacity for this office area. Ensure that each workstation. Recommend a partition be placed between both workstations if possible. Alternatively, have each staff member facing away from the other.

**4.3.b.i..2** Concerns about this office space of having an overwhelming amount of foot traffic. Recommend taping off the floor to indicate where staff cannot pass through. Procedures should be established to assist staff who need to obtain items from this particular office space.

**4.3.b.i..3** A number of shared amenities exist in this office, such as a vehicle keys, transportation schedule, sign-in sheet, staff mailboxes etc. Recommend that access to this office area be limited as much as practicable to reduce the risk of exposure and cross contamination. Perhaps consider moving these share amenities out into a more open/common area.

- ii. Staffing Considerations. Office space does not allow for most office staff to return to work while keeping with physical distancing recommendations. To further enhance protection of the staff, and the services they provide, consider the following:





- 4.3.b.ii..1** Limit the number of staff for any individual function that return to work on any given day. This both reduces the number of people to people interactions that can occur as well as reduces the number of staff lost to infection and quarantine if COVID-19 is found within the facility. This reduces the interruption to providing essential services.
- iii. In many common areas (lobbies, sign in or time clock areas, open floor plan office spaces), no hand hygiene options were available (i.e. hand washing stations or hand sanitizer with at least 60% alcohol).
- 4.3.b.iii..1** It should be remembered that the easier you make it for people to perform a function, the more likely they are to do it. Provide bottles or wall mounted dispensers of hand sanitizer throughout these common areas, and signage encouraging their usage.
- 4.3.b.iii..2** Multiple high-touch areas in the office spaces were noted (e.g. computers, printers, and mailboxes etc.). Recommend providing wipes at each of these areas and posting signage to remind staff to disinfect surfaces. Recommend a cleaning protocol and log be maintained. The protocol should include the following 1.) A complete list of all high touch surfaces in the room. 2.) Identify what cleaning products should be used on these surfaces and ensure that they are effective against COVID-19 (i.e. that they are on the EPA N-list) 3.) Identify who will be responsible for conducting this work and how often it should be done. 4.) Keep a record of all required OSHA trainings for those tasked with cleaning and disinfecting (i.e. security and Janitorial staff).
- 4.3.b.iii..3** Supply rooms needs to have signage to reinforce regular cleaning (before and after use). Recommend 1-2 people only to restock and pull supplies. Having 1 person designated to pick up deliveries from Hopi Tribe
- 4.3.b.iii..4** Recommend HMTF continue to request quotes and supplies need to retrofit vehicles so to ensure/ promote driver and client safety and wellbeing.
- 4.3.b.iii..5** Vehicle cleaning/disinfecting policy and procedure for before and after use.
- 4.3.b.iii..6** Work with procurement to secure continuous supply of PPE, cleaning/disinfecting products.
- 4.3.b.iii..7** Upon full return to avoid overcrowding of staff, seek modular or alternative space, including increasing capacity to telework.
- i. HVAC system appears to be in good working order. An evaluation of the HVAC system with IHS Facilities personnel indicated a current MERV filter rating of 9. Filters are racked in sections and undergo quarterly inspection. Plans to change out the filters to higher rating are scheduled to take place within a year.



## Hopi Health Care Center On-site Risk Assessment Written Report

- 4.3.b.iii..8** Work with facilities to ensure HVAC is in good working order, identify workspaces not receiving HVAC services if any, and that air recirculation is minimized (single direction airflow from inside to out is best).

### 1.2 Emergency Medical Services (EMS)

#### a. Shared services/spaces building-wide

- i. Screening for employees as well as the public occurs at the main entrance to the Hopi Healthcare Center. Temperature screening was also observed. No sign-in sheet or descendible reception area at the entrance to the EMS office area was observed. The EMS Program occupies primarily two adjacent offices equipped with its own bathroom and shower.



Figure 7 EMS office area

- ii. Staffing Considerations may allow for some staff to return to work while keeping with physical distancing recommendations. To further enhance protection of the staff, and the services they provide, consider the following:

- 4.3.b.iii..9** Limit the number of staff for any individual function that return to work on any given day. This both reduces the number of people to people interactions that can occur as well as reduces the number of staff lost to infection and quarantine if COVID-19 is found within the facility. This reduces the interruption to providing essential services.

- iii. In the open floor plan office space, no hand hygiene options were available (i.e. hand washing stations or hand sanitizer with at least 60% alcohol).





## Hopi Health Care Center On-site Risk Assessment Written Report

- 4.3.b.iii..10** It should be remembered that the easier you make it for people to perform a function, the more likely they are to do it. Provide bottles or wall mounted dispensers of hand sanitizer throughout these common areas, and signage encouraging their usage.
- 4.3.b.iii..11** Limit the number of individuals who can sit at the table to one. Remove excess chairs if possible, otherwise take off excess chairs to prevent/discourage use. Maximum occupancy for this area is approximately 3 individuals depending on configuration.
- 4.3.b.iii..12** Multiple high-touch areas in the office space (e.g. lockers, file cabinets, computer, whiteboard etc.) were noted. Recommend providing wipes at each of these areas and posting signage to remind staff to disinfect surfaces. Recommend a cleaning protocol and log be maintained. The protocol should include the following 1.) a complete list of all high touch surfaces in the room. 2.) Identify what cleaning products should be used on these surfaces and ensure that they are effective against COVID-19 (i.e. that they are on the EPA N-list) 3.) Identify who will be responsible for conducting this work and how often it should be done. 4.) Keep a record of all required OSHA trainings for those tasked with cleaning and disinfecting (i.e. security and Janitorial staff).
- 4.3.b.iii..13** **Inner room/sleeping Quarters:** A refrigerator was observed in this area and was noted as a shared amenity and high touch area. See section above for more detailed guidance regarding high touch areas. Given the small area of the EMS office, it is recommended the number of occupants be limited at any one time. Signage of the max occupancy should be conspicuously posted.
- 4.3.b.iii..14** **Staff Restroom:** Observed hand dryer in the bathroom. Recommend taping off or unplugging. Staff should be notified to not use. Shower is used by staff. Personal use items were observed within that need to be removed. Ensure that a policy and procedure are in place that addresses infection control, as well as ensures regular and consistent cleaning. Items such as wash cloths and loofahs etc. should be prohibited to avoid the unsanitary sharing these items and promoting the possible spread of communicable diseases.
- 4.3.b.iii..15** Toilet lid should be installed and post signage to have people close them before flushing. This will reduce the amount of virus that could be aerosolized as per AIHA guidelines.

## Hopi Health Care Center On-site Risk Assessment Written Report



Figure 8 EMS Restroom/Shower area

- i. HVAC system appears to be in good working order. An evaluation of the HVAC system with IHS Facilities personnel indicated a current MERV filter rating of 9. Filters are racked in sections and undergo quarterly inspection. Plans to change out the filters to higher rating are scheduled to take place within a year.

**4.3.b.iii..16** Work with facilities to ensure HVAC is in good working order, identify workspaces not receiving HVAC services if any, and that air recirculation is minimized (single direction airflow from inside to out is best).

### 1.2 Women, Infants, and Children (WIC)

#### a. Shared services/spaces building-wide

- i. Screening for employees as well as the public occurs at the main entrance to the Hopi Healthcare Center. Temperature screening was also observed. A sign in sheet at the entrance to the Women, Infants and Children office area not observed. The WIC office area is comprised of a primary office space that is divided into three smaller cubicle spaces each serving as a workstation for a single WIC staff member, and one single occupancy office situated to the right of the entrance.
- ii. Service involves face to face interactions between customers and staff. Due to space constraints a reception or waiting room area is not possible although the area may be able to safely accommodate one client or individual.

**4.3.b.iii..17** Recommend having clients wait in one of the outside waiting room areas of the Hopi Healthcare center if necessary.



## Hopi Health Care Center On-site Risk Assessment Written Report

- 4.3.b.iii..18** If an in-person meeting with a client is necessary, recommend that staff reserve a conference room within the Hopi Healthcare Facility where proper social distancing can occur.

iii. Staffing Considerations allows for most office staff to return to work while keeping with physical distancing recommendations. To further enhance protection of the staff, and the services they provide, consider the following:

- 4.3.b.iii..19** Limit the number of staff for any individual function that return to work on any given day. This both reduces the number of people to people interactions that can occur as well as reduces the number of staff lost to infection and quarantine if COVID-19 is found within the facility. This reduces the interruption to providing essential services.

### b. Staff Offices

i. The Offices observed all had high touch areas, each needing signs for cleaning protocols. Cleaning up offices and limiting personal items on desks particularly for those offices with more than one-person occupancy is recommended, as this limits the possibility of the virus settling on those surfaces.

- 4.3.b.iii..20** Multiple high-touch areas in the office space (e.g. electronic signature pads, printers, and computers, keyboards etc.) were observed. Recommend providing wipes at each of these areas and posting signage to remind staff to disinfect surfaces. Recommend a cleaning protocol and log be maintained. The protocol should include the following 1.) a complete list of all high touch surfaces in the room. 2.) Identify what cleaning products should be used on these surfaces and ensure that they are effective against COVID-19 (i.e. that they are on the EPA N-list) 3.) Identify who will be responsible for conducting this work and how often it should be done. 4.) Keep a record of all required OSHA trainings for those tasked with cleaning and disinfecting (i.e. security and Janitorial staff)

- 4.3.b.iii..21** Toys under a cubicle desk were observed and are high contact points. It is unknown whether there is a policy for cleaning/disinfecting of the toys after use. Recommend avoiding toys if possible. Otherwise staff should develop a cleaning/disinfecting policy (i.e. washing in the sink or wiping down). Ensure that chemicals used to disinfect are safe for use around children. Ensure that the disinfectant used is included on the EPA's N-list (<https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2-covid-19>)

ii. HVAC system appears to be in good working order. An evaluation of the HVAC system with IHS Facilities personnel indicated a current MERV filter rating of 9. Filters are racked in sections and



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undergo quarterly inspection. Plans to change out the filters to higher rating are scheduled to take place within a year.

- 4.3.b.ii.22** Work with facilities to ensure HVAC is in good working order, identify workspaces not receiving HVAC services if any, and that air recirculation is minimized (single direction airflow from inside to out is best).

### 5.0 Interpretation of Results

- a. **Evaluation of Site Specific Assessments:** The goal of these assessments were two fold; first to perform a risk assessment and identify mitigation strategies for staff to return to work in their various work areas within the Hopi Healthcare Center, and second to provide the Hopi staff a framework for administering these site specific risk assessments for COVID-19 mitigation suitability at future facilities. The overall mitigation strategies and the protection of government services fell into two main categories:
- b. Increase adherence to maximizing the three pillars of disease infection reduction: maximize distance (in the form of rearranging furniture and limiting office and conference room sharing), decrease time (in the form of staggering start times to avoid groups of people congregating), and minimizing exposure (in the form of mask wearing, sneeze guard utilization, full walls or offices for staff, and reducing staff in shared spaces).
- c. Limiting the effect on essential services if COVID-19 infects staff. By not having all the staff in a particular service come to work on the same day (even if there is adequate room), it helps ensure that not all the staff that perform a function will be exposed or infected. This means no full service will be entirely infected/quarantined by a single exposure.
- d. **Limitations:** This assessment is a snapshot of the Tribal Programs housed within the Hopi Healthcare facility without yet having staff on site. Reevaluation of these mitigation strategies will need to occur often and thoroughly to help quickly catch deficiencies in their efficacy and encourage new strategies to be implemented.

### 6.0 Statement of Suitability

- a. Protecting staff and customers is of critical importance for the reopening of the governmental offices. Identifying both the strengths of current mitigation strategies, as well as where changes need to be made is necessary to identify before staff return to work. Vigilant checking of the efficacy of these strategies is needed to ensure as staff return, their wellbeing and those they serve continues to be protected.
- b. The recommendation of this work is that once these mitigation strategies are implemented and policies are finalized, the governmental offices are ready to be reopened in line with the Hopi Tribe Reopening Plan.
- c. The on-site risk assessments for the Hopi Government Programs within the HHCC have been performed and completed as outlined in Section 4 of this report and is ready to be used as a



## Hopi Health Care Center On-site Risk Assessment Written Report

component in the continuing evaluation of the safety practices of for the reopening of these buildings.

### 7.0 Summary Report Approval

Performed By: Hopi Reopening Task Group Date: 7/29/2024  
Printed name: Danyn Akei Melvin  
Primary Assessor

### 8.0 Appendices

- a. Summary of changes needed from Administration and Honani Risk Assessment



## **Hopi Health Care Center On-site Risk Assessment Written Report**

### **Summary of changes needed from the Risk Assessment of Hopi Tribal Programs within the Hopi Health Care Center.**

1. Create and implement a structured screening policy for screening incoming staff, empowering screeners to stop those that have fevers or flagged answers to screening questions and educate staff on the importance of the screening procedure to keep them safe.
2. For each service offered, limit the number of staff that perform a particular function from working at the same time. This will ensure that if a COVID-19 outbreak occurs, not all the staff that perform a particular function have to be isolated or quarantined and be unable to work at the same time.
3. Encourage teleworking when appropriate, and stagger scheduling to limit bottlenecks at screening points and crowding of work areas.
4. Install sneeze guards or physical barriers in locations that have staff interacting with clients.
5. Ensure hand sanitizer with at least 60% alcohol is available in all high traffic areas.
6. Rearrange furniture in open work areas to maximize at least 6 feet distances between staff.
7. Ensure HVAC is functional. Identify locations in the building not being serviced by the system and repair. Eliminate use of personal fans in shared areas.
8. Close off water fountains. Bottle fillers are ok if hand sanitizer and disinfecting wipes are available near the bottle fillers.
9. Bathrooms should be made single occupancy and signage on the doors needs to state this. Install hands-free paper towel dispensers.
10. Reduce physical paperwork when possible; electronic forms and email are preferred. When paperwork is required, have it deposited at a central area for pickup rather than individually handed in to staff.
11. Reduce occupancy of confined spaces like conference rooms. Ensure adequate ventilation is available and remove tables and chairs to reflect the desired maximum occupancy number.
12. Office spaces should be considered single occupancy; stagger working times or find alternative places to work to ensure proper distancing and ventilation can occur.
13. Require the use of face coverings within the buildings and in shared areas. Within private offices, face coverings can be removed, but should be put back on if anyone comes to have a discussion.
14. Ensure the cubicles have walls that fully separate one person from another. If this isn't possible, limit the staff that share an area to ensure proper distancing and working in shared space.
15. Staff are the best eyes and ears for IPC. Ensure they have a way to report concerns, and that management is receptive to their thoughts and questions.





## Hopi Tribe – Law Enforcement Services Building On-site Risk Assessment Written Report

### 1.0 Scope

- 1.1 **Risk Assessment Report For:** The reopening of governmental services of the Hopi Law Enforcement Service (HLES) Building, Kykotsmovi, AZ
- 1.2 **Date Performed:** 7/31/2020
- 1.3 **Assessors (Name/Association):** Cheryl Tootsie; Daryn Melvin; Madeline Sahneyah, Sahmie Lomahquahu and Denise Bekay of the Hopi Tribe. Mack McCraw of CDC

**2.0 Overview of the Procedure:** In response to the ongoing COVID-19 pandemic, the Hopi Tribe has instituted widespread community mitigation and prevention efforts that have included closing much of the tribal government. These efforts, combined with ongoing containment activities, have served as both an effective intervention for limiting the spread of COVID-19 and stressor to the economic well-being of Hopi communities. The Hopi Reopening Plan follows a three-phase approach to inform decision-making for mitigation measures while balancing protection measures for the Hopi people. Phase One of the Hopi Plan involves the controlled reopening of essential governmental services. To ensure that these operations could be conducted safely both for governmental staff as well as the tribal customers and clients they serve, a risk assessment was performed by tribal representatives to evaluate the physical space of the Hopi Law Enforcement Services building for physical risk, COVID-19 response policies, and to address staffing concerns of how to operate safely. This assessment serves as a guide for the program to address any issues as they arise.

**3.0 Study Methods:** This assessment identified hazards associated with the physical reopening of the HLES Building in both a broad assessment of physical space as well as individual assessments of each office areas. Coordination with Executive staff, Core Service staff, and subject matter experts (SME) occurred to understand current practices and to determine the baseline of operational mitigation strategies. Additional assessments of new mitigation strategies ranging from workspace reorganization to staggering staffing attendance to adjusting service implementation or scope occurred to determine their effects on further reducing COVID-19 infection risk.

To perform this assessment, Hopi staff conducted an in-person walkthrough of all workspaces in consideration for reopening within this building. Office layout, staffing numbers, air ventilation and flow, cleaning procedures, bathroom/drinking water availability, common work areas, and staff activities were all assessed for implementation under the three-pillars of reducing the spread of COVID-19; 1) maximizing distance, 2) minimizing time, and 3) reducing exposure. These pillars focus on increasing the distance between infected and non-infected, decreasing the time they are together, and reducing the amount of virus present.

### 4.0 Assessment Findings with Mitigation Strategies:

- 4.1 **Hopi Law Enforcement Services Building** —total estimated capacity ~15 individuals. One story, double wide modular building, broken up into several sub offices, a foyer, a dispatch center, kitchen,





## Hopi Tribe – Law Enforcement Services Building On-site Risk Assessment Written Report

men's and women's lavatories, conference room, (which has an evidence processing station and single desktops for officers use), and storage and janitorial closet for the HLES under the Department of Public Safety and Emergency Services. HLES leases land from the Village of Kykotsmovi and the Tribe assists with maintenance. Administrative staff, director, officers, and service delivery staff occupy this building.

### a. Main Entrance

- i. Entrance are has reception desk with a sliding glass protective barrier and a sign in area for both the public and the staff. There is Entry Screening Checkpoint of guests/staff at the main entrance, however protocols require strengthening. No COVID-19 related questionnaires were observed to be in place. Temperatures screening occurs after people enter building, and no policy exists for what to do if there is a fever. This creates an issue for Screeners to stop high ranking or official staff or guests based on screening results. From this entrance one can access the offices, kitchen, rest rooms and janitorial closets. This building is home to two separate public service programs. The other program is the Hopi SORNA program with one staff person operating that program as an affiliate, based on the type of function in association with HLES.

**4.1.a.i..1** There were a number of staff who were observed to not be wearing face-coverings. Recommend program leadership mandate the wearing of masks or face coverings throughout the facility, and post signage encouraging their use. Train all staff on how to clean and care for masks. See CDC website for more information: <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/how-to-wash-cloth-face-coverings.html>

**4.1.a.i..2** Implement a robust screening policy that includes full symptoms, temperature checks, and a clear chain of command for reporting abnormal or established results. Written policy and procedure on how screening will be conducted is recommended for training of staff. The policy should include the following: 1.) Information on what PPE to use. 2.) Proper PPE donning and doffing procedures. 3.) The type of thermometer to be used. 4.) How the thermometer's calibration will be checked and how often. 5.) How the thermometer should be cleaned and disinfected and how often. 6.) How to handle someone who has an elevated or abnormal temperature. Dispatch currently perform screening but may require additional staff to handle this important function during business hours.

**4.1.a.i..3** Empower screening staff to be able to stop anyone and educate all facility staff on the importance of respecting the screening process. Signs are needed for sanitizing, distance protocols. Use bright color tape to draw attention to the place marks on floor for distancing.

**4.1.a.i..4** Establish an appointment only systems for client visits as well as robust policies for screening clients and guests prior to entry into the building.



## **Hopi Tribe – Law Enforcement Services Building On-site Risk Assessment Written Report**

- 4.1.a.i.5** This area requires a Fire Escape Plan and Max Occupancy signs posted for viewing. . If Fire evacuation plan does not exist, develop a fire evacuation plan with local fire department and post throughout facility as required by OSHA.
- 4.1.a.i.6** Provide signage for cleaning, distancing and mask protocols.
- 4.1.a.i.7** Recommend the use a one piece Plexiglas/protective barrier with a short window for passing documents at the receptionist area.
- 4.1.a.i.8** High Touch areas include: pens, clip boards etc.: this area needs constant and consistent cleaning, provide sanitizing wipes and a hand sanitizing station at doorway. Recommend a cleaning protocol and log be maintained. Cleaning protocol should include the following 1.) a complete list of all high touch surfaces in the room. 2.) Identify what cleaning products should be used on these surfaces and ensure that they are effective against COVID-19 (i.e. that they are on the EPA N-list) 3.) Identify who will be responsible for conducting this work and how often it should be done. 4.) Keep a record of all required OSHA trainings for those tasked with cleaning and disinfecting (i.e. security and janitorial staff)

ii. The door to enter the office area is locked and opened by the dispatch staff. The flow of traffic can be high with officers using the conference room area. It appears officers come into the office to complete reports and or to bring in evidence that must be processed.

- 4.1.a.ii.1** The size of this building limits public access.
- 4.1.a.ii.2** Provide signage for proper mask and door opening signs in this area.
- 4.1.a.ii.3** Post fire escape plan and maximum occupancy sign for viewing.
- 4.1.a.ii.4** Install hand sanitizing station in the hallway.

iii. Staffing Considerations. Space allows for most office staff to return to work while keeping with physical distancing recommendations. To further enhance protection of the staff, and the services they provide, consider the following:

- 4.1.a.iii.1** Limit the number of staff for any individual function that return to work on any given day. This both reduces the number of people to people interactions that can occur as well as reduces the number of staff lost to infection and quarantine if COVID-19 is found within the facility. This reduces the interruption to providing essential services.
- 4.1.a.iii.2** Stagger work start times to both reduce crowding of people being screened and the bottleneck of office entry.
- 4.1.a.iii.3** Cross train office staff as required to be effective with minimal staff.



## Hopi Tribe – Law Enforcement Services Building On-site Risk Assessment Written Report

iv. **The conference room** serves as an office, evidence processing room, computer/print station, and eating area for staff. In many common areas (lobbies, kitchen areas, and conference or open floor plan office spaces) where shared amenities were observed, no hand sanitizing station (i.e. hand sanitizer with at least 60% alcohol) or sanitizing wipes were observed.

- 4.1.a.iv..1** Masks are taken off while eating, which increases the risk of disease spread therefore, it is recommended that staff eat at their own workstations with the doors closed. Alternatively, consider providing outdoor seating. Staff should be reminded to wash their hands and to clean and disinfect the area before and after eating.
- 4.1.a.iv..2** It should be remembered that the easier you make it for people to perform a function, the more likely they are to do it. Provide bottles or wall mounted dispensers of hand sanitizer throughout these common areas, and signage encouraging their usage.
- 4.1.a.iv..3** Copying/printing and shredding areas were noted as high touch. Encourage scanning documents and emailing to the extent practicable. A hand sanitizing station near the large printer units is recommended, as well as sanitizing wipes in this area. Area must also be cleaned daily. Add signage for cleaning protocols. See section 4.1.a.i..8 for more detailed guidance.
- 4.1.a.iv..4** Desktop Computers: Desktop units are considered high touch areas. Provide signs and sanitizing wipes for cleaning upon use.
- 4.1.a.iv..5** Conference Room area has conference tables, chairs and shelving that holds evidence processing materials. Recommend tables, chairs not in use be stored or marked off for non-use. Digitize case files to the extent practicable. Recommend a maximum capacity of 5 people at this table. Cleaning should be required after each use.
- 4.1.a.iv..6** Place sanitizing wipes and a hand sanitizing station at the Evidence processors area, as well as signs for proper cleaning and hand sanitizing.
- 4.1.a.iv..7** No protective barriers are in place between stations. Desktop unit, copier and telephone are high touch areas which requires consistent cleaning. Masks are required when two or more people are in this area. Have all work stations linked to the copy machine.
- 4.1.a.iv..8** Recommend all unused equipment and items not operable be stored away or discarded/recycled to avoid touching.
- 4.1.a.iv..9** Recommend that windows in the conference room be opened for increased air circulation.
- 4.1.a.iv..10** **Kitchen:** Refrigerator, sink, microwave and Coffee station are considered shared amenities and requires constant cleaning. Add sanitizing/cleaning wipes for this area and signs for cleaning protocols. Max occupancy sign (1), proper cleaning, mask and hand washing protocols should be posted.



## Hopi Tribe – Law Enforcement Services Building On-site Risk Assessment Written Report

- v. HVAC system provides adequate air flow and ventilation. Currently, the HVAC unit services the entire building.

**4.1.a.v..1** Work with facilities to ensure HVAC is in good working order, identify workspaces not receiving adequate services, that air recirculation is minimized (single direction airflow from inside to out is best) and that the number of air exchanges for the building is maximized without taxing the HVAC system.

- vi. Drinking water is currently supplied to the staff via kitchen sink and/or supplied water bottles.

**4.1.a.vi..1** Water stations was observed in the hallway is in operation. This need to be replaced with a bottle filler type station or be permanently removed. Install hand sanitizing station near this fountain.

### b. Staff Offices

- i. These offices were observed to have high touch areas; each needing signs for cleaning protocols and a hand sanitizing station on the outside of the office or strategically placed hand sanitizing stations outside each office where hands can be sanitized after closing doors. Cleaning up offices and limiting personal items on desks limits the virus/germs from settling on those surfaces. The area for HLES staff are offices, with hutch type workstations, the administrative staff share an office and the dispatch area is limited to two people. Each work area has a desktop unit, telephone, printing is linked to another copier machine and some have mobile radios.

**4.1.b.i..1** **Dispatch area:** Provide signage of cleaning, hand sanitizing, and mask requirements. Have hand sanitizer and sanitizing wipes available. Maximum occupancy is 2. High touch areas are the desktop/dispatch units, telephone, key box, and file cabinet. Eliminate, store or tape off excess chairs. Post Max Occupancy (2) sign and fire escape plan.

**4.1.b.i..2** **Chief's Office:** Maximum occupancy sign (1); furniture arrangement does not allow for distancing: keeping within 6' of distance. File cabinet requires cleaning and sanitizing daily. Clean office and provide cleaning and hand sanitizing signs and install hand sanitizing station outside of the office. Post fire escape plan.

**4.1.b.i..3** **Administrative Area:** Provide signage of cleaning and hand sanitizing and sanitizing wipes. Maximum occupancy sign (2) and a fire escape plan is needed for viewing. High touch areas are the two desktop units, telephones, shelf and file cabinet. Clean office and remove/store items not in use by staff. Provide and post cleaning, hand sanitizing and mask protocols. Post fire escape plan.



## Hopi Tribe – Law Enforcement Services Building On-site Risk Assessment Written Report

- 4.1.b.i..4      2 Person Office:** Provide signage for cleaning and sanitizing wipes. Place a hand sanitizing station outside between offices. Maximum occupancy sign (2) is needed and sign for cleaning protocols and sanitizing wipes. High touch areas: desktop units, radio with charging units and telephones; provide sanitizing wipes. We recommend staff in this area not face one another. This space allows for 2 people with furniture arranged so hutch provides a barrier between staff. Recommend schedules be staggered to allow for distancing.
- 4.1.b.i..5      3 Person Office:** Provide signage for mask requirement, cleaning and hand sanitizing. High touch areas: desktop units, radio with charging units and telephones; provide sanitizing wipes. We recommend staff in this area not face one another. This space allows for 2 people max and recommend schedules be staggered to allow for distancing as all three cannot be in the office at the same time.
- 4.1.b.i..6      Supply Closet:** Closet requires cleaning and organizing. Separate and store items by function. Post maximum occupancy sign (1), fire escape plan and cleaning protocols. Properly label all cleaning products used and stored.
- 4.1.b.i..7      2 Person office:** Office needs cleaning. Max occupancy sign (2), fire escape plan and sign for mask requirement. High touch areas: dry erase board, desktop units, radio with charging units and telephones; provide sanitizing wipes. Arrange furniture so staff have a barrier between one another.

ii. Virus on paperwork poses a low risk of infecting an individual. However, if physical documentation is going to be handled, the following handling options can further reduce risk:

- 4.1.b.ii..1      Perform hand hygiene.** Handle paperwork without gloves and by touching as few additional items (phones, keyboard, mouse) as possible while processing. File paperwork. Wipe down all touched surfaces. Perform hand hygiene.
- 4.1.b.ii..2      Let paperwork rest 24-48hrs,** then process as 4.1.b.ii..1.
- 4.1.b.ii..3      Place the paperwork in a plastic sleeve.** Disinfect the outside of the sleeve, perform hand hygiene, and then process as 4.1.b.ii..1.

iii. The HVAC system is functional. Use of personal fans blow air from one person to another. Use indicates HVAC requires optimization for adequate air flow and ventilation to all areas of the building.

- 4.1.b.iii..1      Personal fans in communal areas** should not be used. If a fan is used, it should not be pointed in the direction of the door.
- 4.1.b.iii..2      Windows can be opened** only as needed.
- 4.1.b.iii..3      Filters used are rated as MERV 7.**



## Hopi Tribe – Law Enforcement Services Building On-site Risk Assessment Written Report

4.1.b.iii.4 Program coordinates with OFRM for maintenance.

### c. Overall Office Building

- i. The importance of overall cleanliness is needed to the function and interaction with the public. We noted OFMR staff provide janitorial and maintenance to tribal properties/building daily. Upon observation we noted the building and amenities to be dated but in good condition, however, to improve with cleaning the following are recommended:

- 4.1.c.i.1 Replace carpeting with laminate flooring. Keep flooring consistent for easy cleaning of surface.
- 4.1.c.i.2 Place fire escape plans of the building throughout
- 4.1.c.i.3 Eliminate, store or tape off chairs and couches where noted.
- 4.1.c.i.4 Increase heightened protocols for entry of staff and guests by creating a screening station on the exterior of the main entrance and signage.
- 4.1.c.i.5 Ensure all cleaning products are properly labeled.
- 4.1.c.i.6 Remove from building all unused equipment and items to eliminate clutter.

## 5.0 Interpretation of Results

- 5.1 **Evaluation of Site Specific Assessments:** The goal of these assessments were two fold; first to perform a risk assessment and identify mitigation strategies for staff to return to work in the HLES Building, and second, to provide the staff with a framework for administering these site specific risk assessments for COVID-19 mitigation suitability at future facilities. The overall mitigation strategies and the protection of government services fell into two main categories:
  - a. Increase adherence to maximizing the three pillars of disease infection reduction: maximize distance (in the form of rearranging furniture and limiting office and conference room sharing), decrease time (in the form of staggering start times to avoid groups of people congregating), and minimizing exposure (in the form of mask wearing, sneeze guard utilization, full walls or offices for staff, and reducing staff in shared spaces).
  - b. Limiting the effect on essential services if COVID-19 infects staff. By not having all the staff in a particular service come to work on the same day (even if there is adequate room), it helps ensure that not all the staff that perform a function will be exposed or infected. This means no full service will be entirely infected/quarantined by a single exposure.
- 5.2 **Limitations:** This assessment is a snapshot of the governmental facilities with staff on site. Reevaluation of these mitigation strategies will need to occur often and thoroughly to help quickly catch deficiencies in their efficacy and encourage new strategies to be implemented.

## 6.0 Statement of Suitability

- 6.1 Protecting staff and public/customers is of critical importance for the reopening of the governmental offices. Identifying both the strengths of current mitigation strategies, as well as





## Hopi Tribe – Law Enforcement Services Building On-site Risk Assessment Written Report

where changes need to be made is necessary to identify before staff return to work. Vigilant checking of the efficacy of these strategies is needed to ensure as staff return, their wellbeing and those they serve continues to be protected.

- 6.2 The recommendation of this work is that once these mitigation strategies are implemented and policies are finalized, the governmental offices are ready to be reopened in line with the Hopi Tribe Reopening Plan.
- 6.3 The HLES Building on-site risk assessments has been performed and completed as outlined in Section 2 of this report and is ready to be used as a component in the continuing evaluation of the safety practices of for the reopening of this building.

### 7.0 Summary Report Approval

Performed By: Hopi ReOpening Task Group Date: 7/31/2020

Printed name: Daryn Melvin, Chief of Staff, Hopi Tribe – Office of the Vice Chairman  
Primary Assessor





***Hopi Tribe Government Building Reopening Task Group***

**Hopi Tribe – Law Enforcement Services Building  
On-site Risk Assessment Written Report**

**8.0 Appendices**

8.1 None.



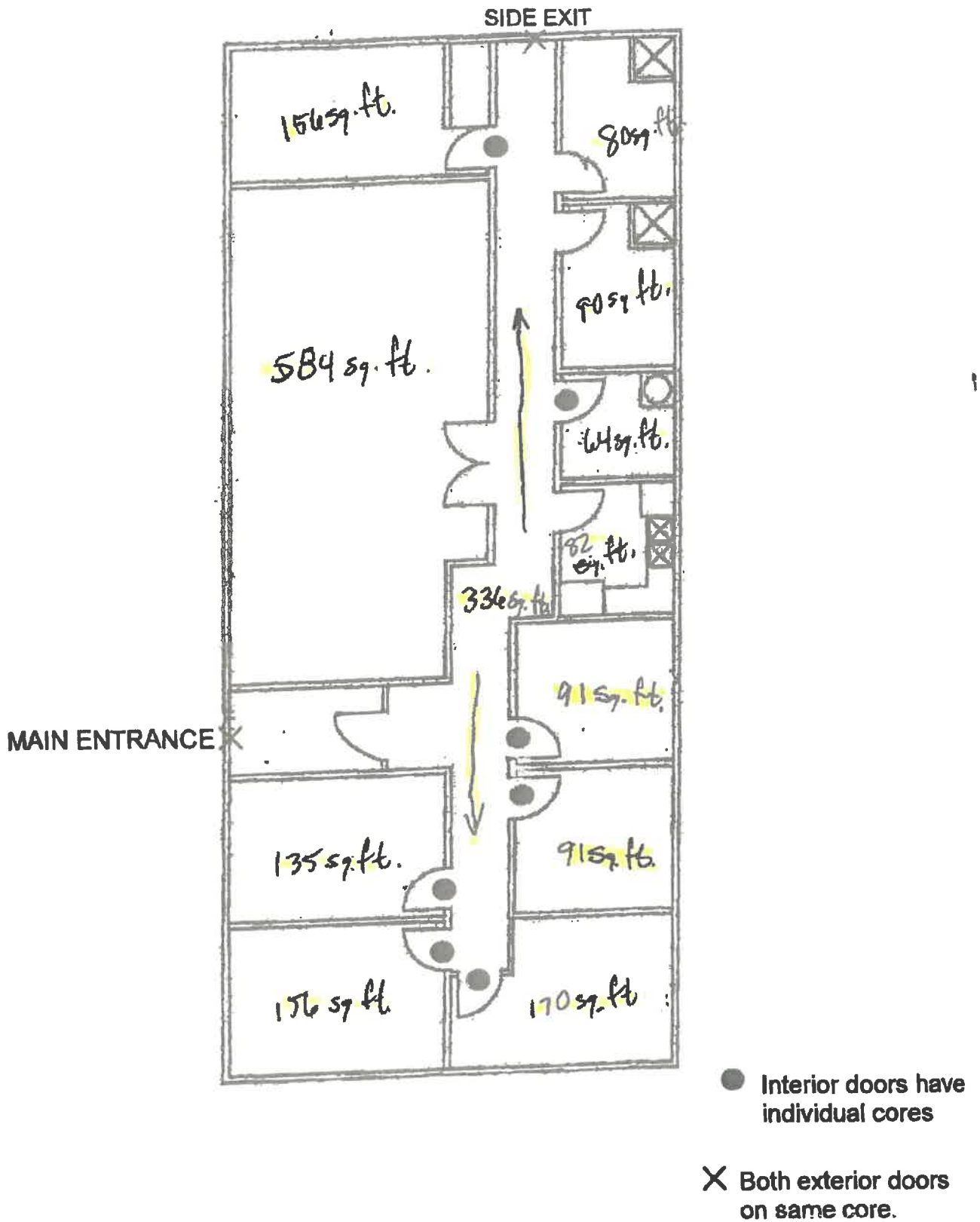
**Hopi Tribe – Law Enforcement Services Building  
On-site Risk Assessment Written Report**

**Summary of changes needed from HLES Building Risk Assessment**

1. Create and implement a structured screening policy for screening incoming staff, empowering screeners to stop those that have fevers or flagged answers to screening questions and educate staff on the importance of the screening procedure to keep them safe.
2. For each service offered, limit the number of staff that perform a particular function from working at the same time. This will ensure that if a COVID-19 outbreak occurs, not all the staff that perform a particular function have to be isolated or quarantined and be unable to work at the same time.
3. Encourage teleworking when appropriate, and stagger scheduling to limit bottlenecks at screening points and crowding of work areas.
4. Install sneeze guards or physical barriers in locations that have staff interacting with clients.
5. Ensure hand sanitizer with at least 60% alcohol is available in all high traffic areas.
6. Rearrange furniture in open work areas to maximize at least 6 feet distances between staff/guests.
7. Ensure HVAC is functional. Identify locations in the building not being serviced by the system and repair. Eliminate use of personal fans in shared areas. Coordinate with OFRMS for maintenance.
8. Close off water fountains. Bottle fillers are ok if hand sanitizer and disinfecting wipes are available near the bottle fillers.
9. Bathrooms should be made single occupancy and signage on the doors needs to state this. Install hands-free paper towel dispensers.
10. Reduce physical paperwork when possible; electronic forms and email are preferred. When paperwork is required, have it deposited at a central area for pickup rather than individually handed in to staff.
11. Reduce occupancy of confined spaces like conference rooms. Ensure adequate ventilation is available and remove tables and chairs to reflect the desired maximum occupancy number.
12. Office spaces should be considered single occupancy; stagger working times or find alternative places to work to ensure proper distancing and ventilation can occur.
13. Require the use of face coverings within the buildings and in shared areas. Within private offices, face coverings can be removed, but should be put back on if anyone comes to have a discussion.
14. Ensure the areas that do not have cubicles or walls fully separate one person from another. If this isn't possible, limit the staff that share an area to ensure proper distancing and working in shared space.
15. Staff are the best eyes and ears for IPC. Ensure they have a way to report concerns, and that management is receptive to their thoughts and questions.

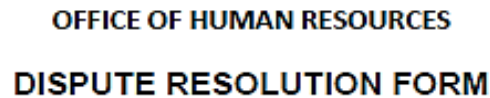
HLES

09 JUN 20



## **Appendix O:**

### **Dispute Resolution Form**



### STEP 1

*Provide written statement and proposed remedies (Use additional paper if needed and attach applicable supporting documents):*

**STEP II**

Written Response from Supervisor (Supervisor shall within five (5) working days from the date the Form is received to provide a written response with resolution to the Employee):

Supervisor Signature: \_\_\_\_\_ Date Received: \_\_\_\_\_

If resolution is acceptable to Employee and Supervisor, both parties sign below. Attach documented resolution.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**STEP III**

If the Supervisor's response does not resolve the dispute, the Employee shall within three (3) working days of Supervisor's written response, submit the Form to the Personnel Director, Office of Personnel Management.

Employee Signature: \_\_\_\_\_ Date Submitted: \_\_\_\_\_

**STEP IV**

The Personnel Director or designee (within five (5) working days of receipt of the Form) will mediate the dispute between the Employee and Supervisor.

Personnel Director Signature: \_\_\_\_\_ Date Received: \_\_\_\_\_

Date of Mediation: \_\_\_\_\_

If resolution is acceptable to Employee and Supervisor, both parties sign below. Attach documented resolution.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If resolution is unacceptable, the Personnel Director shall within five (5) working days of the mediation date, provide a written response (attached) and provide a copy to both parties.

Personnel Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**STEP V**

If the Personnel Director's response does not resolve the dispute, the employee shall within five (5) working days of receipt of the Personnel Director's written response, submit the Form to the attention of the Appeals Review Panel, Office of Personnel Management.

Employee Signature: \_\_\_\_\_ Date Submitted: \_\_\_\_\_

**STEP VI**

The Appeals Review Panel shall within fifteen (15) working days from the date of receipt of the employee's dispute, provide a written decision to all parties. The attached decision of the Appeals Review Panel shall be binding and final upon all parties. The authority of the Appeals Review Panel to grant remedies to disputes, shall be limited to the remedies available within the limits of the Hopi Tribe Personnel Policies & Procedures Manual.

Panel Member Signature: \_\_\_\_\_ Date Finalized: \_\_\_\_\_

## **Appendix P:**

### **Influenza Vaccine Exemption Request Form**





## INFLUENZA VACCINE EXEMPTION REQUEST

The Hopi Tribe requires that employees receive influenza (seasonal flu) vaccines to protect the Tribe's workforce and community from the spread of illness. I, \_\_\_\_\_, an employee of the Hopi Tribe, request an exemption from the mandatory influenza vaccine requirement for the following reason(s):

**1. Medical Exemption Request:**

☐ I have severe allergies to eggs, vaccine components, or prior influenza vaccines. Describe your reaction: \_\_\_\_\_

☐ I have a history of Guillain-Barre Syndrome.

☐ I have a medical condition that is not compatible with the influenza vaccine.

☐ I have had a reaction to flu shots.

For any Medical Exemption requested above, please attach a letter from your medical care provider confirming that you should not receive an influenza vaccine.

**2. Philosophical or Religious Exemption Request:**

☐ My philosophical or religious beliefs prohibit vaccination.

For any philosophical or religious exemption requested above, you will be required to have a confidential conversation with a representative from the Office of Human Resources to discuss the basis for your request.

**I have read and fully understand the information on this Exemption Request Form. I understand that my Exemption Request must be reviewed and approved/denied by the Human Resources Director.**

Employee Signature \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Program / Supervisor: \_\_\_\_\_

### OFFICE OF HUMAN RESOURCES USE ONLY

EXEMPTION REQUEST APPROVED: \_\_\_\_\_ DENIED: \_\_\_\_\_ Date: \_\_\_\_\_

Human Resources Director: \_\_\_\_\_

Copies provided to Employee and Employee's Supervisor on (date) \_\_\_\_\_

## **Appendix Q:**

### **COVID-19 Vaccination Disclosure Form**



Timothy L. Nuvangyaoma  
CHAIRMAN

Craig Andrews  
VICE-CHAIRMAN

## EMPLOYEE DISCLOSURE

### COVID-19 Vaccination

I understand that the Tribe is working diligently to control and slow the spread of the coronavirus (COVID-19) on the Hopi reservation and in the Tribe's workplaces.

Because the current coronavirus outbreak has created a national and tribal emergency, to protect the public health, the Tribe mandates employees to receive the Coronavirus Vaccination (Return-To-Work Guidelines November 22, 2021).

To monitor workplace safety and reopen the Tribal workplaces in a safe manner, the Tribe requests employees to disclose whether they have received the COVID-19 vaccines and the dates of any vaccines received.

☐ I received the COVID-19 Vaccination on:

1<sup>st</sup> dose      Date \_\_\_\_\_

2<sup>nd</sup> dose      Date \_\_\_\_\_

Vaccine manufacturer (if known) \_\_\_\_\_

☐ I received the following Booster on:

☐ PFIZER      Date \_\_\_\_\_

☐ MODERNA      Date \_\_\_\_\_

☐ JOHNSON      Date \_\_\_\_\_

☐ I do not wish to receive the COVID-19 Vaccine.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Employee Printed Name: \_\_\_\_\_

File: HR Confidential File

The Employee Disclosure form must be completed and submitted to the Human Resources Director via email at [LPawwinnee@hopi.nsn.us](mailto:LPawwinnee@hopi.nsn.us) or fax to 928-734-6611.

PO BOX 123

KYKOTSMOVI, AZ 86039

(928) 734-3212

## **Appendix R:**

### **COVID-19 Vaccine Exemption Form**



## COVID-19 VACCINE EXEMPTION REQUEST

The Hopi Tribe requires that employees receive COVID-19 vaccines to protect the Tribe's workforce and community from the spread of illness. I, \_\_\_\_\_, an employee of the Hopi Tribe, request an exemption from the mandatory COVID-19 vaccine requirement for the following reason(s):

**1. Medical Exemption Request:**

☐ For any Medical Exemption requested above, please attach a letter from your medical care provider confirming that you should not receive a COVID-19 vaccine.

**2. Philosophical or Religious Exemption Request:**

☐ My philosophical or religious beliefs prohibit vaccination.

For any philosophical or religious exemption requested above, you will be required to provide a written statement indicating the basis for your request and may be required to have a confidential conversation with a representative from the Office of Human Resources.

I have read and fully understand the information on this Exemption Request Form. I understand that my Exemption Request must be reviewed and approved/denied by the Human Resources Director.

Employee Signature \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

Program: \_\_\_\_\_

### OFFICE OF HUMAN RESOURCES USE ONLY

EXEMPTION REQUEST APPROVED: \_\_\_\_\_ DENIED: \_\_\_\_\_ Date: \_\_\_\_\_

Human Resources Director: \_\_\_\_\_

Copies provided to Employee and Employee's Supervisor on (date) \_\_\_\_\_