Prepared by the ND Department of Health and the Department of Commerce in conjunction with the Governor’s Office

This response aims to protect the lives and livelihoods of the citizens of North Dakota. The data and measures that inform this plan will be monitored daily and the recommendations will be updated as required.

July 7, 2020
VERSION 200707-12.2-12:30
North Dakota leaders are confident that, as we enter a new normal, North Dakota will emerge even stronger. This plan provides confidence and clarity. It gives residents and businesses the guidance they need to remain vigilant while re-engaging and succeeding economically.

This ND Smart Restart report conveys North Dakota’s coordinated, statewide plan to address the COVID-19 health and economic crisis. It features the decisions of the Governor, local government, public health experts, business and community leaders. The plan provides clarity and direction during an unprecedented time with the goal of building confidence in all North Dakotans.

This version of the ND Smart Restart plan recommends actions for North Dakotans to take; reaffirming the conditions for a Smart Restart; and introducing promising new data tools that will help North Dakota transition from the moderate level we are currently in to the new normal.
Fellow North Dakotans,

Since this historic journey began with the first case of COVID-19 being confirmed in North Dakota on March 11, we have learned much about this insidious disease. We have learned that it spreads quickly and without regard for borders. We have learned that it takes loved ones too soon and disrupts livelihoods too often, leaving behind a wake of emotional and economic hardship.

We have also learned much about ourselves.

In the weeks since I challenged all of us to let go of being “North Dakota tough” and embrace being “North Dakota smart,” you have answered the call. Today we have one of the lowest COVID-19 positive test rates in the nation, an exceptionally low number of hospitalized COVID-19 patients, and one of the highest per-capita testing rates in the country.
In every county, every tribal nation and every corner of our state, you have demonstrated the power of individual responsibility in slowing the spread of the coronavirus. You have shown tremendous resolve and resilience in response to our targeted, pragmatic approach to this pandemic, and your actions have literally saved lives.

To our health care workers, for their courage and heroism on the front lines of this war against an invisible enemy, we extend our undying gratitude and respect. To the North Dakota businesses that have innovated and adapted to survive while also supporting their employees—those displaced and those who kept working—you have our deepest thanks for paving the way to the new normal.

And for all of you and the immeasurable and often painful sacrifices you have made thus far—forsaking family gatherings and funerals, closing businesses, missing birthday parties and other milestones, guiding our K-12 and college students through distance learning—you have made a profound difference in the lives of your fellow citizens, and for this we are immensely grateful.

As we brace ourselves for the likelihood that this virus will continue to cause disruption for weeks, months, perhaps even years, we remain steadfast in our resolve to fight for every life and every livelihood.

That’s what North Dakota Smart Restart is all about.

Working together—as North Dakotans do better than anyone during a crisis—we can continue to reduce the risk to the general public and especially our most vulnerable populations. And in doing so, we can thoughtfully restart those limited sectors of our economy that were restricted as we fought to slow the spread of COVID-19 and ensure hospital capacity to handle any surge in cases.

The vast majority of North Dakota’s economy has remained open through this crisis. Our success has hinged on a low-mandate, high-compliance approach, and North Dakotans have done their part. It was up to you, and you came through.

Now, as we move into the next stage with an even lighter touch of government mandates, we’re counting even more on the individual responsibility of citizens and employers to protect their team members and customers.

We encourage North Dakotans to embrace this North Dakota Smart Restart plan as a roadmap to a better, safer and healthier tomorrow for employers, employees and customers alike. This applies not only to those businesses affected by executive orders, but to all businesses as we enter this new normal.

The fight against COVID-19 is far from over. We may very well still be in the first leg of this long, difficult journey. The coronavirus remains as contagious as ever and just as threatening to those most vulnerable—the elderly and those with underlying health conditions.

We are comfortable proceeding at this juncture because we have met the eight conditions I outlined on March 15 as a prerequisite for North Dakota Smart Restart. Our rapid testing and contact tracing grow more robust by the day. We possess the skillsets and capacity to quickly identify and contain future outbreaks. We can move forward with optimism that we likely won’t need broad statewide orders. But we must be prepared to conduct targeted closures of schools, churches, businesses and manufacturing plants if they experience a hot-spot outbreak.

Despite our ongoing challenges, I remain optimistic that North Dakotans will draw upon our state’s deeply engrained values of personal responsibility, common sense and caring for our families, neighbors and communities. We will move forward as one North Dakota—in liberty and union, now and forever, one and inseparable—and emerge stronger than ever.

With gratitude,

Governor Doug Burgum
The ND Smart Restart Plan begins with the premise that every North Dakotan plays a role in North Dakota’s recovery. We lead together. This leadership requires North Dakotans to continue to take three major actions:

1. Help control virus spread
2. Assure worker and consumer safety
3. Inspire consumer confidence

Under the leadership of Governor Doug Burgum, the Department of Health, with input from statewide industry workgroups, developed a color-coded approach for a health and economic recovery plan. It provides North Dakota businesses and residents with clarity and specifics about North Dakota’s plan. This reactivation can only occur if North Dakotans vigilantly follow public health guidance.

The road to recovery will progress gradually as the state “turns up the dial” to reactivate the economy, while protecting public health. Think of it as a “brightener,” not a switch, and plan accordingly. Strict adherence to public health protocols and recommendations are essential so the state doesn’t regress.

Conditions to Start ND Smart

The ND Smart Restart plan recognizes that markets correct, recessions end, and prosperity returns. We expect North Dakota’s economic reactivation to continue.

North Dakota entered into a state of emergency in mid-March, 2020, when it became apparent that the COVID-19 virus had begun to spread throughout our state without obvious points of origin. The state swiftly enacted targeted urgent public health measures such as school closures, high contact business closures, travel limitations, limitations on gatherings and a moratorium on residential evictions for tenants impacted by COVID-19.

The strict social distancing measures and increased testing the ND Smart Restart plan calls for are working.

Gratitude: Every day there are things to be grateful for. North Dakota is well-prepared and has the resources to address the challenges of COVID-19. We will get through this and emerge even stronger.

Confidence: The recovery starts with a restoration of public confidence and trust among consumers, producers, workers and business owners. This can only happen by identifying who has the virus, containing it, and managing health risks as the economy moves to full activation. Therefore assessment, testing, proactive contact tracing, public health guidance, and data driven decision making are important.

Trust: COVID-19 is not only a public health and economic crisis, it’s a crisis of trust. People must believe they and their loved ones are safe as the economy ramps up. Lifting public health measures prematurely will destabilize confidence and hurt the economy if all citizens do not practice strong personal responsibility. North Dakota must act in accordance with the best public health guidance balanced with other key social, economic, and health indicators.

Innovation: North Dakota has a variety of tools that will help on the road to recovery. These include a one-stop website https://ndresponse.gov/covid-19-resources, the Department of Health Data Dashboard, and the Care19 Diary and Care19 Alert apps.

Resilience: The COVID-19 risk will remain until North Dakotans develop population immunity or medical discoveries help contain the spread of the virus and treat those infected. North Dakotans need to keep safe and informed. COVID-19 is not a short-term problem, but rather a new risk North Dakota will have to manage. Resilience is crucial to coming out of this stronger and wiser than before.
### EIGHT CONDITIONS TO NORTH DAKOTA SMART RESTART

| **ROBUST, WIDESPREAD RAPID TESTING CAPABILITY** | North Dakota is among the top ten in testing per capita. In total, over 60,000 North Dakotans have been tested. In order to ensure these efforts are staying ahead of the spread of the virus, a minimum number of tests must be completed per day. The testing goal is 1,000 tests per day in April; 4,000 tests per day by the end of May; and 6,000 tests per day by the end of June. With effective isolation and quarantine measures this will equate to less than one transmission per each positive case by the end of June. As of May 14, 2020, the positivity rate is on a downward trajectory with a current rate of 3.40 percent.  
- Downward trajectory of ILI over the previous 14 days. North Dakota continues to see a downward trajectory in influenza-like illness over the previous 14 days according to NDDOH syndromic surveillance. **As of May 14, 2020, this is nearing 0.66%.**  
- Downward trajectory of COVID-like illness over the previous 14 days. The overall trend for COVID-related illness continues to be negative in emergency department settings (less than 5.35% as of May 14, 2020) and is currently level for all provider settings.  
- Downward trajectory of newly identified cases over the previous 14 days. As of May 14, 2020, 50,311 laboratory tests have been conducted confirming 1,712 cases of COVID-19 in North Dakota residents. 39 out of 53 counties had reported at least one case with Cass, Grand Forks and Burleigh counties having the highest overall count of cases. The outbreak has led to 129 hospitalizations and 40 deaths. Although cases continue to rise, in the last 14 days over 4,000 people have been tested at community wide testing events with an average positivity rate of 2.36%, ranging from 0.0% to 8.7%. |
| **ROBUST CONTACT TRACING AND INFRASTRUCTURE** | A major contact tracing effort to augment this success has been implemented. North Dakota has trained **420 contact tracers with a goal of 500.** |
| **TARGETED EFFECTIVE QUARANTINE AND ISOLATION** | Effective contract tracing methods help reduce transmission rates as positive cases are identified and must self-isolate for at least 14-days. **Individuals who have been in contact with a positive case and/or are returning from out of country travel must self-quarantine for at least 14-days.** |
| **PROTECTIONS FOR THE STATE’S MOST VULNERABLE** | Plans are being developed for at-risk populations that fall within the following categories:  
- Individuals who have high-risk health conditions but want to return to work;  
- Individuals who are served in long-term care facilities such as assisted living centers, nursing homes, etc.;  
- Individuals who work with at-risk populations;  
- Individuals who are at risk (due to age or other factors) and are home bound or who choose to stay home, stay safe; and  
- Individuals that are sheltered due to domestic violence, without a permanent residence and/or experience homelessness. |
| **SUFFICIENT HEALTH CARE CAPACITY, HOSPITAL/ICU BEDS** | Downward trajectory of hospitalized cases over the previous 14 days. The rate of new COVID-19 related hospitalizations in North Dakota remains the same throughout the outbreak and is currently **7.54% (May 14, 2020).** |
| **ADEQUATE PPE AVAILABILITY FOR THE HEALTHCARE SYSTEM AND PUBLIC** | North Dakota will ensure there is adequate availability of PPE for the healthcare system and the public as needed. Currently, healthcare providers and first responders have access to adequate PPE. |
| **NEW STANDARD OPERATING PROCEDURES FOR REOPENING** | General guidelines have been developed for all employers to how best decrease the spread of COVID-19 and lower the impact in their workplace. This includes activities in the following areas: reduce transmission among employees; maintain healthy business operations and maintain a healthy work environment. |
| **PLANS FOR DEALING WITH A RESURGENCE OR ADDITIONAL WAVES OF COVID-19** | Plans for dealing with resurgence or additional waves of COVID-19 will be to continue wide-spread testing, contact tracing and mandated self-isolation and quarantine measures. Future plans will require:  
- Better data to identify areas of spread and the rate of exposure and immunity in the population;  
- Improvements in state and local health care system capabilities and public-health infrastructure;  
- Adequate medical supplies; and  
- Therapeutic, prophylactic, and preventive treatments and better informed medical interventions that give us the tools to protect the most vulnerable people and those requiring acute and critical care services. |
Economic Reactivation

North Dakota faces the likely reality of significant economic disruption until herd immunity occurs or a vaccine and treatment are discovered. These expected economic “stops and starts” could come in waves as the contagious path of the virus picks its course. Without intervention, these interruptions will do tremendous harm to North Dakota businesses, individuals, and families. For this reason, state leaders agree that the COVID-19 crisis is not a short-term problem, but rather a new risk North Dakota must learn to manage.

Managing the public health risk requires the state to identify, contain, and mitigate the spread of the virus, while simultaneously reactivating the economy step-by-step. Assessment, testing, proactive tracing, and field testing instruct this process. Guided by a carefully developed operational dashboard and a color-coded health guidance system, the state can focus public health measures on specific areas and individuals and avoid blunt, statewide economic disruptions.

Color-coded Health Guidance System

The state will provide specific direction to North Dakota residents and businesses through a color-coded health guidance system.

The guidance system includes five levels of risk: red, orange, yellow, green, and blue. Each level of guidance after red becomes progressively less restrictive and more economically engaged. Every level protects public health and outlines necessary mitigation strategies.

Each level is guided by a rigorous measurement system, based on criteria such as number of cases reported, positivity rates, testing capacity, hospital capacity, occurrence of point-source outbreaks, level of community spread, vulnerable populations affected and ability to protect, the availability of PPE, etc. This allows community leaders, business leaders, policymakers and the general public to safely determine when a different color of health guidance applies. North Dakotans should think of the guidance system as a dial that can be turned up or down by area based on the health risk.

Red / Critical Risk is the area with the highest disease burden and level of significant and uncontrolled community transmission, multiple outbreaks resulting in increased deaths, surge capacity of hospitals are threatened, and there is lack of adequate PPE supplies available for healthcare workers. The most significant mitigation strategies are implemented at the Red / Critical Risk level. Thanks to the quick action and personal responsibility of all North Dakotans, we have never reached this critical stage of risk.

Orange / High Risk is the level of significant transmission and high risk for exposure due to widespread community spread of infections. Orange / High Risk is the level of guidance for mitigation strategies that North Dakota functioned under executive orders dating from March 13, 2020, to April 30, 2020. There are significant mitigation strategies emphasizing “Stay Home. Stay Healthy. Stay Connected.” Only essential travel and essential critical infrastructure workforce, adherence to strict social distancing guidance, increased cleaning and disinfecting of bathrooms and high-touch surfaces, and recommended restrictions, such as avoiding groups greater than 10 people, limitations on high-risk individuals, no personal care services, schools are closed but offering distance learning, work from home when possible, avoid sharing work spaces and office supplies, malls and gyms are closed, and restaurants are being asked to limit their services to takeout or delivery. People will initially be asked to wear fabric nonmedical face masks while in the community to reduce their risk of asymptomatic spread.

Yellow / Moderate Risk is the level of heightened exposure risk and transmission is controlled in these areas. Yellow / Moderate is the level of guidance for mitigation strategies that North Dakota functions under right now. Cases are reported but contained by rapid testing and robust contact tracing. Moderate social distancing and precautions are needed (maintain 6-feet distancing, avoid shaking hands, work from home when possible, reconsider unnecessary travel). Increased cleaning on high touch surfaces and cleanings on shared spaces should be routine. Shared surfaces will be more frequently cleaned and disinfected. In addition to case-based interventions that actively identify and isolate people with the disease and their contacts, the public will be asked to limit gatherings. All vulnerable individuals should continue to self-isolate and avoid large groups in public places. Those who are sick will be asked to stay home and seek testing for COVID-19.

Green / Low Risk for exposure or transmission, low case counts are reported, public health and private health care are
able to safely diagnose, treat, and isolate COVID-19 cases and their contacts. During this level, schools and businesses can reopen, and much of normal life can begin to resume. However, some physical distancing measures and limitations on gatherings will still be recommended to prevent transmission from accelerating again. For older adults (those over age 65), those with underlying health conditions, and other populations at heightened risk from COVID-19, continuing to limit time in the community will be important. State and community leaders should prepare health alerts, communicate risk and symptoms, review plans, prepare for public health capacity if needed for spikes in cases.

**Blue / New Normal** is when most normal activity can resume, with standard precautions and awareness of health guidelines such as routine hand washing, stay home when sick, cover your cough, education, stockpiling, planning, routine health alerts, etc. Monitoring for illness and outbreaks will continue. Even under new normal conditions, those found to be ill will be asked to self-isolate and contacts will be asked to remain at home.

This color-coded guidance can be applied during the levels of ND Smart Restart to protect health, bolster confidence, and provide more economic certainty. It is possible for one area of the state to be under the orange guidance and another under the yellow. Figure 5 provides an explanation of the color-coded health guidance.

The color-coded guidance system was put together utilizing the hard work and framework created by the State of Utah and modified to meet the needs of North Dakota under the leadership of the North Dakota Department of Commerce and the North Dakota Department of Health to provide specific direction to North Dakota residents and businesses.

Each level recommends North Dakotans to adhere to **ND Smart Restart Standards Across All Industries** and these universal standards:

1. **Common Sense and Personal Accountability** – Public health guidance cannot anticipate every unique situation. Residents and businesses must take personal accountability to be informed and take actions based on common sense and wise judgment that will protect health and support economic reactivation.

2. **Protective Hygiene and Cleaning** – North Dakotans must continue to practice good hygiene and cleaning regimens to minimize the risk of the virus. These include but are not limited to the following:
   - Stay home when sick
   - Wash hands with soap and water for at least 20 seconds as frequently as feasible
   - Use hand sanitizer after interactions with people or objects
   - Cough or sneeze into the sleeve or elbow, not hands
   - Clean high-touch surfaces (buttons, door handles, counters, etc.) regularly
   - Avoid touching your face
   - Use cloth face coverings in public places where social distancing cannot be maintained
   - Refrain from hand shaking

3. **Follow Guidance** – Public health and economic opportunity are intrinsically linked. North Dakotans must strictly follow the health guidance of each color or risk backtracking and causing greater harm.

4. **High-risk / Vulnerable Populations** – High-risk populations and those around them must follow a specific set of instructions issued by the Governor and the North Dakota Department of Health.

With these universal standards in place, Figure 6 provides the general characteristics of each color of guidance. Refinements to this guidance can, and most likely will, be made by the Governor with input from the North Dakota Department of Commerce and the North Dakota Department of Health.

For greater detail on the protocols created for industries directly impacted by the Executive orders, please visit Be Legendary.link/NDSmartRestart.
North Dakota Health Criteria and Health Indicator Measures

Information will be available on the [ND Smart Restart](#) webpage and will contain the measures at the county and regional levels along with the most recent risk levels.

<table>
<thead>
<tr>
<th>ND Health Criteria</th>
<th>Critical</th>
<th>High Risk</th>
<th>Moderate Risk</th>
<th>Low Risk</th>
<th>New Normal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Decreases in newly identified COVID-19 cases</td>
<td>Highest disease burden</td>
<td>Incidence of less than 100 cases/day documented over a 30-day period</td>
<td>Downward trajectory (or near-zero incidence) of documented cases over a 14-day period</td>
<td>Downward trajectory (or near-zero incidence) of documented cases for at least 14 days after entering Moderate Risk Level.</td>
<td>Downward trajectory (or near-zero incidence) of documented cases for at least 14 days after entering Low Risk Level.</td>
</tr>
<tr>
<td>Decreases in ED and/or outpatient visits for COVID-like illness (CLI)</td>
<td>• Multiple outbreaks • Increased deaths</td>
<td>Downward trajectory of CLI syndromic cases reported over a 14-day period</td>
<td>Downward trajectory (or near-zero incidence) of CLI syndromic cases reported over a 14-day period</td>
<td>Downward trajectory (or near-zero incidence) of CLI syndromic cases reported for at least 14 days after entering Moderate Risk Level</td>
<td>Downward trajectory (or near-zero incidence) of CLI syndromic cases reported for at least an additional 14 days after entering Low Risk Level</td>
</tr>
<tr>
<td>Decreases in ED and/or outpatient visits for influenza-like illness (ILI)</td>
<td>• Multiple outbreaks • Increased deaths</td>
<td>Downward trajectory of ILI reported over a 14-day period</td>
<td>Downward trajectory (or near-zero incidence) of ILI reported over a 14-day period</td>
<td>Downward trajectory (or near-zero incidence) of ILI reported for at least 14 days after entering Moderate Risk Level</td>
<td>Downward trajectory (or near-zero incidence) of ILI reported for at least an additional 14 days after entering Low Risk Level</td>
</tr>
<tr>
<td>Decreases in percentage of SARS-CoV-2 tests positive</td>
<td>Increased level of significant and uncontrolled community transmission</td>
<td>Downward trajectory of positive tests as a percent of total tests over a 14-day period</td>
<td>Downward trajectory (or near-zero percent positive) of positive tests as a percent of total tests over a 14-day period (flat or increasing volume of tests)</td>
<td>Downward trajectory (or near-zero percent positive) of positive tests as a percent of total tests for 14 days after entering Moderate Risk Level (flat or increasing volume of tests)</td>
<td>Downward trajectory (or near-zero percent positive) of positive tests as a percent of total tests for at least 14 days after entering Low Risk Level (flat or increasing volume of tests)</td>
</tr>
<tr>
<td>Treat all patients without crisis care</td>
<td>• Surge capacity of hospitals threatened • Lack of adequate PPE supplies • Healthcare workers shortage</td>
<td>• Jurisdiction inpt &amp; ICU beds &gt;20% Availability • Staff shortage in last week = no • PPE supplies adequate for &lt;5 days</td>
<td>• Jurisdiction inpt &amp; ICU beds &gt;20% Availability • Staff shortage in last week = no • PPE supplies adequate for &lt;10 days</td>
<td>• Jurisdiction inpt &amp; ICU beds &gt;15% Availability • Staff shortage in last week = no • PPE supplies adequate for &lt;15 days</td>
<td>• Jurisdiction inpt &amp; ICU beds &gt;10% Availability • Staff shortage in last week = no • PPE supplies adequate for &lt;20 days</td>
</tr>
<tr>
<td>Robust testing program</td>
<td>• Limited testing supplies and capacity</td>
<td>• Test availability such that % positive tests ≤25% for 14 days • Median time from test order to result &lt;7 days</td>
<td>• Test availability such that % positive tests ≤20% for 14 days • Median time from test order to result &lt;5 days</td>
<td>• Test availability such that % positive tests ≤15% for 14 days • Median time from test order to result &lt;4 days</td>
<td>• Test availability such that % positive tests ≤10% for 14 days • Median time from test order to result &lt;3 days</td>
</tr>
</tbody>
</table>
Figure 5: Risk Levels and Health Guidance

The color-coded health guidance system is designated by the State Health Officer and the Statewide Emergency Operations Center (SEOC) with input from the North Dakota Economic Resiliency Team, North Dakota Department of Commerce and the North Dakota Department of Health. The SEOC has access to a detailed dashboard of monitoring, testing, and hospital utilization data. This data includes health, social, and economic measures. The guidance can be applied anytime and anywhere to address virus flareups or hotspots.

This versatile system will help North Dakota manage the health and economic risk or until a medical solution is discovered. It is possible and even likely that multiple guidance colors will be designated by region, county, city, or community at the same time. It is also possible that areas within the state will move through this spectrum of orange to yellow to green to blue and back again based on the characteristics of the virus and our actions. North Dakota has not reached the red level and through monitoring and mitigation measures, does not plan to hit the critical stage.

The maps below show hypothetical examples of how the public health guidance colors could be applied.

**Figure 5. KEY**

- **Red** means critical risk and severe threat to public health.
- **Orange** means high risk for everyone as well as high-risk individuals.
- **Yellow** means moderate risk for everyone but high-risk individuals.
- **Green** means low risk for everyone, but high-risk individuals.
- **Blue** means a new normal baseline for everyone but high-risk individuals.

In every color of guidance, high-risk individuals operate under specific instructions issued by the Governor and the North Dakota Department of Health.
### Figure 6: Industry Summary of Color-Coded Health Guidance

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</thead>
<tbody>
<tr>
<td><em><em>Essential</em> Workplaces/ Manufacturing</em>*</td>
<td>Employers exercise extreme caution, with employees working remotely when possible, evaluating workforce concerns, managing risk, implementing policies informed by industry best practices, and enacting strategies to minimize economic impact. Businesses that necessitate on-site work should monitor workforce for symptoms and well-being. Encourage employees and customers to use face covering around others when social distancing cannot be maintained. Restrict unnecessary visitors from entering.</td>
<td>Employers exercise extreme caution, with employees working remotely when possible, evaluating workforce concerns, managing risk and enacting strategies to minimize economic impact. Businesses that necessitate on-site work should monitor workforce for symptoms and well-being.</td>
<td>Employers encourage flexible working arrangements (rotating shifts, remote, etc.). Comply with distancing guidelines. Increased cleaning regimen of high-touch areas. Monitor employees for symptoms and well-being.</td>
<td>Employers encourage flexible working arrangements (rotating shifts, remote, etc.). Comply with distancing guidelines. Increased cleaning regimen of high-touch areas. Monitor employees for symptoms and well-being.</td>
<td>Operate under heightened hygiene and cleaning standards. Monitor employees for symptoms.</td>
<td></td>
</tr>
<tr>
<td><strong>General Employer Guidelines</strong></td>
<td>Only Essential Services Open</td>
<td>Shelter in Place</td>
<td>Due to the level of significant and uncontrolled widespread COVID-19 disease with outbreaks across the State resulting in increased deaths, surge capacity of hospitals is threatened, there is a lack of adequate PPE supplies for healthcare workers</td>
<td>Takeout/delivery options preferable. Dine-in service is limited to 50% of normal capacity with extreme precaution. Self-service of food and beverage is restricted. Follow strict guidelines for physical distancing and staff monitoring. Contactless payment encouraged. Create safe environment for staff. No gaming. No use of hand-held entertainment or reservation notification devices. Dance floors are closed.</td>
<td>Dine-in service is limited to 75% of normal capacity with extreme precaution. Follow guidelines for physical distancing and staff monitoring. Create safe environment for staff. Gaming and blackjack can resume with precautions taken for social distancing while minimizing transmissible moments.</td>
<td>Operate under heightened hygiene and cleaning standards. Monitor employees for symptoms.</td>
</tr>
<tr>
<td><strong>Restaurants, Bars, &amp; Food Service</strong></td>
<td>No dine-in service, no self-service and extreme caution taken in food prep. Physical distancing maintained. Curbside pickup, takeout, and delivery only. Contactless payment encouraged. Create safe environment for staff. No gaming. No use of hand-held entertainment or reservation notification devices. Dance floors are closed.</td>
<td>Employers exercise extreme caution, with employees working remotely, evaluating workforce concerns, implementing policies informed by industry best practices, and enacting strategies to minimize economic impact. Businesses that necessitate on-site work should monitor workforce for symptoms and well-being. Encourage employees and customers to use face covering around others when social distancing cannot be maintained. Restrict unnecessary visitors from entering. Retail stores with foodservice must follow guidelines for restaurants and bars (above).</td>
<td>Employers encourage flexible working arrangements (rotating shifts, remote, etc.). Comply with distancing guidelines. Increased cleaning regimen of high-touch areas. Monitor employees for symptoms and well-being.</td>
<td>Employers encourage flexible working arrangements (rotating shifts, remote, etc.). Comply with distancing guidelines. Increased cleaning regimen of high-touch areas. Monitor employees for symptoms and well-being.</td>
<td>Operate under heightened hygiene and cleaning standards. Monitor employees for symptoms.</td>
<td></td>
</tr>
<tr>
<td><em><em>Retail</em> (Including grocery stores, C-stores &amp; pharmacies)</em>*</td>
<td>Only Essential Services Open</td>
<td>Employees exercise extreme caution, with employees working remotely when possible, evaluating workforce concerns, managing risk, implementing policies informed by industry best practices, and enacting strategies to minimize economic impact. Businesses that necessitate on-site work should monitor workforce for symptoms and well-being. Encourage employees and customers to use face covering around others when social distancing cannot be maintained. Restrict unnecessary visitors from entering. Retail stores with foodservice must follow guidelines for restaurants and bars (above).</td>
<td>Create safe environment for customers &amp; staff w/ frequent reminders on distancing and hygiene. Monitor employees for symptoms. Employees strongly encouraged to wear face coverings. Retail stores with foodservice must follow guidelines for restaurants and bars (above).</td>
<td>Create safe environment for customers &amp; staff w/ frequent reminders on distancing and hygiene. Monitor employees for symptoms. Employees strongly encouraged to wear face coverings. Retail stores with foodservice must follow guidelines for restaurants and bars (above).</td>
<td>Operate under heightened hygiene &amp; cleaning standards. Monitor employees for symptoms. Resume to normal capacity of foodservice operations while continuing to follow new protocols.</td>
<td></td>
</tr>
<tr>
<td><strong>Hotel, Tourism, &amp; Accommodations</strong></td>
<td>Limited operations. Take extreme precaution for staff &amp; guests. Self-serve buffets closed. Gatherings of 10 or fewer are allowed when social distancing precautions can be met. Hotels with amenities of foodservice must follow guidelines for restaurants and bars. Amenities such as fitness rooms, and recreational pool facilities are closed.</td>
<td>Hotels with amenities such as foodservice, fitness rooms, and recreational pool facilities must follow guidelines for those specific employer types. Take precautions with shared spaces, w/ increased cleaning regimen. Employees wear face coverings. Gatherings of 50% room capacity but no more than 250 people are allowed provided that gating criteria is met, and Smart Restart protocols are followed. Pools may open following social distancing, CDC recommendations, aquatic health codes, and pool operator protocols. Cancel gatherings of any size where distancing cannot be maintained.</td>
<td>Hotels with amenities such as foodservice, fitness rooms, and recreational pool facilities must follow guidelines for those specific employer types. Take precautions with shared spaces, w/ increased cleaning regimen. Employees wear face coverings. Gatherings of 50% room capacity but no more than 250 people are allowed provided that gating criteria is met, and Smart Restart protocols are followed. Pools may open following social distancing, CDC recommendations, aquatic health codes, and pool operator protocols. Cancel gatherings of any size where distancing cannot be maintained.</td>
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<td>Operate under heightened hygiene &amp; cleaning standards. Monitor employees for symptoms. Conventions and large events are permitted with safety guidance and procedures. Resume to normal capacity of foodservice operations while continuing to follow new protocols.</td>
<td></td>
</tr>
<tr>
<td>Select Industry</td>
<td>Critical</td>
<td>High Risk</td>
<td>Moderate Risk</td>
<td>Low Risk</td>
<td>New Normal</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Events &amp; Gatherings</td>
<td>Limited operations. Take extreme precaution for staff &amp; guests. Gatherings of 10 or fewer are allowed when social distancing precautions can be met.</td>
<td>Limited operations. Take extreme precaution for staff &amp; guests. Gatherings in facilities can be up to 50% certificate of occupancy for that room but no more than 250 people provided that health criteria is met, and Smart Restart protocols are followed. Foodservice must comply with restaurant and universal standard protocols. Cancel gatherings of any size where distancing cannot be maintained.</td>
<td>Expanded operations. Take precaution for staff &amp; guests. Gatherings in facilities can be up to 75% certificate of occupancy for that room but no more than 500 people provided that health criteria is met, and Smart Restart protocols are followed. Foodservice must comply with restaurant and universal standard protocols. Cancel gatherings of any size where distancing cannot be maintained.</td>
<td>Large groups allowed such as festivals and sporting events. Mass gatherings are permitted when following proper safety guidance and procedures.</td>
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<tr>
<td>Personal Care Services (Salons, Barbers, Tanning, Tattoo/Body Art, Message Therapists)</td>
<td>Personal Care Services are closed.</td>
<td>Personal Care Services are closed.</td>
<td>Personal Care Services are closed.</td>
<td>Personal Care Services are closed.</td>
<td>Industry open with strict hygiene regimen and symptom monitoring.</td>
<td></td>
</tr>
<tr>
<td>Fitness Centers / Gyms</td>
<td>Fitness centers &amp; gyms are closed. Pools are closed.</td>
<td>If open, fitness centers &amp; gyms should follow strict physical spacing protocols &amp; cleaning guidance. Discontinue group sports. Hot tubs and saunas may operate following protocols. Pools may open following social distancing, CDC recommendations, aquatic health codes, and pool operator protocols. Close off gathering areas.</td>
<td>Fitness centers &amp; gyms open with physical spacing, social distancing protocols &amp; cleaning guidance. Pools may open following social distancing, CDC recommendations, aquatic health codes, and pool operator protocols. Cancel gatherings of any size where distancing cannot be maintained.</td>
<td>Fitness centers &amp; gyms open with physical spacing, social distancing protocols &amp; cleaning guidance. Pools may open following social distancing, CDC recommendations, aquatic health codes, and pool operator protocols. Cancel gatherings of any size where distancing cannot be maintained.</td>
<td>Fitness centers &amp; gyms open with physical spacing, social distancing protocols &amp; cleaning guidance. Pools may open following social distancing, CDC recommendations, aquatic health codes, and pool operator protocols. Cancel gatherings of any size where distancing cannot be maintained.</td>
<td></td>
</tr>
<tr>
<td>Parks and Recreational facilities</td>
<td>Nonessential services are closed except for walking and biking paths.</td>
<td>Strict hygiene &amp; reduced group interactions. Monitor symptoms of staff.</td>
<td>Nonessential services are closed except for walking and biking paths.</td>
<td>Nonessential services are closed except for walking and biking paths.</td>
<td>Nonessential services are closed except for walking and biking paths.</td>
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</tr>
</tbody>
</table>

Source: North Dakota Department of Health.

Further details on protocols created for individual industries directly impacted by Executive Order available at BeLegendary.link/NDSmartRestart

If your business is not on this list, we thank you for exercising your best judgement and taking responsibility for keeping your customers and employees healthy.

Public schools should follow guidelines provided by Department of Public Instruction, Office of the Governor and the North Dakota Department of Health.
Specific Instructions for High Risk Populations

As North Dakota continues efforts to understand the characteristics of the coronavirus, special emphasis must be placed on behaviors that help protect high-risk individuals. This will enable the public health strategy to transition from guidelines that affect entire populations to targeted interventions that protect high-risk individuals.

“High-risk individuals” include those over 65, those living at senior living facilities, individuals that are sheltered, and those of all ages with underlying medical conditions and/or developmental disabilities, including chronic lung disease, asthma, heart conditions, severe obesity, chronic kidney disease, liver disease, or otherwise immunocompromised (undergoing cancer treatment, smoker, bone marrow or organ transplantation, immune deficiencies, poorly controlled HIV or AIDS, and prolonged use of corticosteroids and other immune-weakening medications).

How we can protect high-risk individuals:

- Wearing face coverings/masks when within a six-foot distance of others.
- Asymptomatic individuals follow proper hygiene standards and social distancing guidelines, especially around high-risk individuals.
- Limited visitation to hospitals, nursing homes and other residential care facilities.
- Retail settings create an established window of time for high-risk groups to come in without pressure from crowds.
- Pharmacies waive prescription delivery fees for high-risk individuals.
- Workplaces minimize face-to-face contact, assign tasks that allow high-risk individuals to maintain a six-foot distance from other workers or customers, or allow them to telework.
- Provide temporary or alternative shelter for individuals of domestic violence, those without a permanent residence and/or experiencing homelessness.

How high-risk individuals can protect themselves:

- Limit travel; if telework is not possible, limit travel to work-related travel only.
- Limit visiting friends or family without urgent need.
- Limit attending gatherings of any number of people outside your household or residence, especially with other high-risk individuals.
- Do not visit hospitals, nursing homes and other residential care facilities.
- Those who are, or work with, vulnerable populations should undergo daily screening/symptom monitoring and should be tested if they develop symptoms. High-risk populations should take extra precaution to avoid close contact with multiple people, including having the same caretakers whenever possible.
- Households with vulnerable individuals should consider providing more intensive precautions and should conduct themselves as if they are a significant risk to the vulnerable individual, including wearing a face covering or mask and washing hands frequently before interacting with the person, such as by feeding or caring for the person. If possible, provide a protected space for vulnerable household members, and ensure all utensils and surfaces are cleaned regularly.

Source: North Dakota Department of Health
The State of North Dakota (ND) will protect its citizens during the 2020 COVID-19 pandemic by minimizing loss of life and economic hardship. The State will ensure hospitals and communities have resources to handle a potential surge of COVID-19 patients. While the State does not believe the COVID-19 pandemic will create a need for additional health care facilities beyond the hospitals’ expansion capacity, in the event of an extreme increase in hospitalizations, the State is well prepared. The State will also ensure there are enhanced processes and protocols to protect the populations that are most vulnerable, specifically including those that live in congregate housing settings such as nursing homes, intermediate care facilities as well as jails and prisons.

The initial genesis of the VP3 portion of the plan is to protect those who experience vulnerability in congregate housing settings. There is recognition that there are other individuals experiencing vulnerability in other settings as well and the plan will continue to be modified based on the needs of the citizens of North Dakota.

The COVID-19 Hospital Coordination and Vulnerable Population Protection Plan provides the framework for the State of North Dakota in collaboration with hospitals, congregate living facilities, the North Dakota National Guard (NDNG), and other state and local agencies to serve the healthcare needs of citizens with COVID-19 that require hospitalization. A six-point plan identifies key actions that will guide the care facilities through a tiered system.

**Six Point Plan Overview**

1. Defines a tiered framework for all hospitals to expand capacity.
2. Sorts hospitals into four **regions** with named hospitals as regional leaders of communication protocols.
3. Provides guidance for **transferring** COVID-19 suspected, negative, and positive patients between congregate living facilities and hospitals.
4. Utilize the North Dakota COVID-19 **Rapid Response Team** to quickly assess, advise, and assist congregate living facilities when they have a positive patient or staff. The Rapid Response Team would also advise the State Regional Coordinator on transfer decisions.
5. Describes how State Regional Coordinators will work **across-regions** if all hospitals within their region have met maximum capacity.
6. Establishes a process to provide care for COVID-19 positive patients in a regional **minimal care facility (MCF)** if all hospitals within the region reach maximum expansion capacity and cross-region transfers have been exhausted or are not recommended for the patient.
Measures and Tools

Iceberg Metaphor

The State team has built several operational tools to help protect public health, while accelerating North Dakota’s economic reactivation. These operational tools can best be understood by considering the iceberg metaphor.

Icebergs can be viewed from two vantage points: above the water line and below the water line. The portion above the water line is visible and explicit. In the case of COVID-19 tools, it applies to those who present with symptoms. It also includes North Dakota’s extensive contact tracing, people who participate in testing, and people who use the Care19 Diary and Care19 Alert apps. All of these functions are critical to protecting public health and reactivating North Dakota’s economy. The tools “above the water line” are essential, but not sufficient. Testing above the water line excludes those whose symptoms are too mild, who may be asymptomatic (but contagious), who choose not to seek care, and who face barriers to seeking care. To view “below the water line,” the state needs a statewide, representative testing program so state leaders understand infection prevalence among all North Dakotans.

This information can then inform targeted public health interventions that allow the North Dakota economy to stay in business. The SEOC has developed a methodology and operational plan to conduct large-scale, representative testing of all North Dakotans. The testing will be integrated with testing done through the health system infrastructure, the mobile apps, and the state data warehouse in order to reinforce the state’s reporting, tracking and tracing program. In this way, North Dakota will see the visible and hidden parts of the iceberg and be able to support the color-coded health guidance system.

The COVID-19 Iceberg

CHALLENGE

Infected that we know about

Infected that we don’t know about

Current estimates project that for every one diagnosed case, there are four infected people who go undiagnosed

SOLUTION

Testing and Contact Tracing

North Dakota Testing & Contact Tracing

Surveillance testing statewide and regionally in conjunction with Health Care Providers & Local Public Health

Targeted for high risk populations

Measures

As we continue the safe transition back to the North Dakota day-to-day quality of life and a vibrant economy, decision makers must address a series of key questions. These questions cannot be answered without the right measures and tools. With that in mind, the state has formed an information and intelligence cell that serves as a central data repository for:

- Survey data
- Local health department information
- Data collected through mobile apps
- Dashboard
- Data collected from large-scale, representative testing and contact tracing efforts.

With this information in place, decision makers can be much more targeted and precise about where to deploy resources in order to ensure the state efforts have a bigger impact on successful outcomes.
Tools

The success in combating the COVID-19 crisis in North Dakota comes not just from a strong health and economic response, but from an intensely focused and strategic operational response. This response is headquartered at the State Emergency Operation Center (SEOC) in partnership with the North Dakota Department of Health (NDDOH) where a professional staff manages the quantity, quality, and flow of assessments, testing, and contact tracing programs.

The following tools support the North Dakota Smart Restart plan:

**Operational Dashboard** – The operational dashboard collects data from multiple sources to provide measures and targets to help guide decision makers in protecting both public health and the economy. Elements of this tool are viewable by the public at [https://www.health.nd.gov/diseases-conditions/coronavirus](https://www.health.nd.gov/diseases-conditions/coronavirus).

**Citizen Assessment** – A health assessment survey is available on a voluntary basis for North Dakotans at [https://www.health.nd.gov/diseases-conditions/coronavirus/feeling-unwell](https://www.health.nd.gov/diseases-conditions/coronavirus/feeling-unwell). North Dakotans are invited to use this survey tool to easily assess their symptoms to determine if they need to see their healthcare provider.

**Mobile Application** – North Dakota is utilizing two free smartphone applications to help individuals efficiently and effectively support our efforts to reduce and slow the spread of COVID-19 in North Dakota. The original Care19 app will now be referred to as Care19 Diary and will serve as a memory aid that uses location data to help users who test positive for COVID-19 recall where they’ve visited in the last 14 days to assist the contact tracing process.

The app provides a random ID number and anonymously caches the individual’s locations throughout the day. The app will allow the user to add, delete and modify locations to ensure that the app has captured an accurate record of their activities. The app will only suggest the location of any place a person visits for 10 minutes or more, and the ID number of each individual contains no personal information other than the location data.

The Care19 Alert app uses the exposure notification technology jointly developed by Apple and Google for public health agencies to supplement their COVID-19 contact tracing efforts. North Dakota was one of three states selected to launch this technology. Exposure notification technology uses Bluetooth to privately collect other users’ random identifiers that you are close to for a specified period of time. When an individual is verified as COVID-19 positive, they can consent to allow close contacts captured by the app to be notified to take appropriate actions.

**Testing and Proactive Contact Tracing** – With the objective of detecting the undetected, the scale of testing capacity is increasing to identify positive cases. As the number of positive cases increases, proactive tracing efforts will focus on finding the maximum number of individuals who have come in contact with a positive case and directing these individuals to quarantine or to receive appropriate medical care.

**Large-scale Surveillance Testing** – Currently, large-scale surveillance testing events are happening in community locations around North Dakota. Surveillance testing has been done for high risk populations, such as long-term care and other congregate settings. Targeted and surveillance testing has been done with businesses that may have additional cases and contacts. NDDoH and other public health officials’ direct individuals to quarantine and/or to receive appropriate medical care.
Data Appendix A

Executive Orders issued by Governor Doug Burgum by date:

- **2020-04** - March 15, 2020 - Burgum Orders Schools to Close for One Week to Slow the Spread of COVID-19
- **2020-04.1** - March 16, 2020 - Burgum Amends School Closure Order for Certain Schools and Programs
- **2020-05** - March 19, 2020 - Burgum Suspends Licensing Requirements for Hospitals and Health Care Facilities
- **2020-06** - March 19, 2020 - Burgum Orders Access Restrictions for State Facilities, On-Site Dining Establishments and Recreational Facilities
- **2020-05.1** - March 20, 2020 - Burgum Expands Licensing Requirements Order to Include Telehealth
- **2020-07** - March 20, 2020 - Burgum Directs State Agencies to Identify Provisions Hindering Delivery of Services During COVID-19 Pandemic
- **2020-08** - March 20, 2020 - Burgum Expands Eligibility for Unemployment Benefits Related to COVID-19
- **2020-09** - March 21, 2020 - Burgum Streamlines Prescription Medication Refills, Grants Pharmacists Authority to Administer COVID-19 Testing
- **2020-10** - March 22, 2020 - Burgum Requests Distance Learning Plans for K-12 Schools
- **2020-11** - March 24, 2020 - Burgum Suspends In-Person NDDOT Administrative Hearings, Removes Load Restrictions on State Highways
- **2020-12** - March 25, 2020 - Burgum Extends Worker's Compensation Coverage to First Responders and Health Care Providers Who Contract COVID-19
- **2020-13** - March 26, 2020 - Burgum Waives Requirement of Physical Polling Location to Provide Counties More Flexibility for Mail Ballot Voting
- **2020-14** - March 26, 2020 - Related to Authority of the State Health Officer
- **2020-06.1** - March 27, 2020 - Burgum Amends COVID-19-Related Business Closure Order to Include Salons, Tattoo, Massage Facilities
- **2020-15** - March 27, 2020 - Burgum Suspends Unemployment Taxes Payments, Interest Charges
- **2020-10.1** - March 30, 2020 - Burgum Amends School Facilities Closure to Accommodate Child Care Needs
- **2020-16** - March 30, 2020 - Burgum Enables Remote Participation for Public Meetings to Promote Physical Distancing
- **2020-17** - March 30, 2020 - Burgum Suspends Deadlines for Livestock Auctions, Pesticide Applicators, Public Libraries
- **2020-06.2** - April 1, 2020 - Burgum Extends Access Restrictions for Businesses and State Facilities to April 20
- **2020-18** - April 1, 2020 - Burgum Waives Waiting Period for Unemployment Benefits
- **2020-19** - April 2, 2020 - Burgum Waives Requirement of Physical Polling Location for School District Elections to Allow Mail Ballot Only
- **2020-20** - April 3, 2020 - Burgum Suspends Licensing Requirements for Qualified Respiratory Therapists
- **2020-21** - April 6, 2020 - Burgum Requires Individuals Who Test Positive for COVID-19, Household Members to Self-Quarantine
- **2020-17.1** - April 7, 2020 - Burgum Suspends Pesticide Applicator Certification for Non-restricted Disinfectants
- **2020-19.1** - April 7, 2020 - Burgum Expands Mail Ballot Flexibility to School Board Special Elections
- **2020-23** - April 7, 2020 - Burgum Extends Cutoff Date for Winter-grade Fuel
- **2020-24** - April 7, 2020 - Burgum Suspends Required Written Performance Reviews for Some Teachers, Principals, Administrators
- **2020-25** - April 8, 2020 - Burgum Allows for Remote PSC Public Hearings and Trust Lands Auctions
- **2020-26** - April 8, 2020 - Burgum Permits Transfer of COVID-19 Medical Supplies From Agencies to ND Department of Health
- **2020-21.1** - April 10, 2020 - Burgum Provides Exemptions to Self-Quarantine Order for Household Members
- **2020-27** - April 10, 2020 - Burgum Outlines Modified Operating Procedures for Child Care Providers
- **2020-28** - April 13, 2020 - Burgum Allows Changes to Maintain Critical Services for Vulnerable Youths
- **2020-06.3** - April 15, 2020 - Burgum Extends Access Restrictions for Businesses and State Facilities to April 30
- **2020-12.1** - April 16, 2020 - Burgum Extends Workers’ Compensation Coverage to Funeral Directors and Funeral Home Workers Who Contract COVID-19
- **2020-29** - April 17, 2020 - Burgum Waives Certain Rules Regarding Medicaid to Enhance Services During COVID-
19 Crisis

- **2020-14.1** - April 21, 2020 - Burgum Amends Order Relating to Authority of Local Health Officers
- **2020-21.2** - April 21, 2020 - Burgum Amends Order Regarding Self-Quarantine for COVID-19 Patients and Households
- **2020-30** - April 24, 2020 - Burgum Declares Statewide Flood Emergency for Spring Flooding
- **2020-06.4** – April 29, 2020 - Burgum Provides North Dakota Smart Restart Protocols for Businesses Resuming or Continuing Operations
- **2020-06.5** – May 6, 2020 - Burgum Allows Graduation Ceremonies in School Facilities With Proper Social Distancing
- **2020-31** - May 8, 2020 - Burgum Allows Department of Environmental Quality to Hold Remote Public Hearings on Proposed Permits
- **2020-04.2** - May 11, 2020 - Burgum Allows Access to School Facilities for Specific Programs, Testing
- **2020-06.6** - May 15, 2020 - Burgum Encourages Recreational and Sports Arenas, Music and Entertainment Venues to Adopt Large Gathering Protocols
- **2020-32** - May 19, 2020 - Burgum Waives Certain Requirements for Academic and CTE Scholarships
- **2020-04.3** - May 19, 2020 - Burgum Allows Superintendents and School Boards to Approve Limited Building Use
Data Appendix B

Population and Business Characteristics

County Population Estimates
Percent 65+, 2018

Statewide Percent: 21%

County Population Estimates
Percent 85+, 2018

Statewide Percent: 4%
**Data Appendix C**

**General Guidelines for Employers**

**Best Practices**

All employers need to consider how best to decrease the spread of COVID-19 and lower the impact in their workplace. This includes activities in the following areas:

- reduce transmission among employees
- maintain healthy business operations
- maintain a healthy work environment

**Reduce transmission among employees:**

- Employees who have **symptoms** (i.e., fever, cough, shortness of breath, body aches, chills, loss of taste/smell, chills, etc.) should be instructed to stay home and should receive training and education on employee health policies.
- Systems should be in place for employees to notify their supervisor if they develop symptoms while at home.
- Sick employees should be asked to stay home, notify their supervisor, and follow [CDC-recommended guidelines for what to do if you are sick](https://www.cdc.gov/coronavirus/2019-ncov/when-to-stay-home.html).
- Sick employees should be told they must consult with healthcare providers and state and local health departments to determine when they can return to work. All applicable license requirements apply when approval from the regulatory authority is required before returning to work in accordance with state statutes and regulations.
- Facility should review the [OSHA COVID-19](https://www.osha.gov/covid-19/) website and [guidance for employers](https://www.osha.gov/covid-19/guidance.html) for information on how to protect workers from potential exposures.
- Facility should consider additional social distancing (at least 6ft) or other OSHA approved methods for employees that may be at higher risk for serious illness.
- Consider screening employees upon arrival at the facility for fever (>100.4°F) and other symptoms of COVID-19. Employees should monitor and immediately report any symptoms they develop while at work to their supervisor. Employees who appear to have symptoms of COVID-19 upon arrival at work or who become sick during the day should be immediately separated from other employees, customers, and visitors and sent home.
- Facility should establish a protocol for informing fellow employees of possible exposure to COVID-19 in the event an employee is confirmed to have COVID-19 infection. Facilities will need to maintain confidentiality as required by the Americans with Disabilities Act (ADA).
- Employees need to be educated about steps they can take to protect themselves at work and at home.
- Employees should be informed that older people and people with serious chronic medical conditions are at higher risk for complications.
- Employees should be instructed to follow the policies and procedures of your employer related to illness, cleaning and disinfecting, and work meetings and travel.
- Employees should be educated about the recommended guidelines for what to do if you are sick, including staying home except to get medical care.
- Employees should be informed of how and when to inform their supervisor if they have a sick family member at home with COVID-19. Employees should be informed of the CDC guidelines for what to do if someone in your house is sick.
- Employees should be educated to wash their hands often (including after coughing or sneezing) with soap and water for at least 20 seconds or else in accordance with all applicable license requirements under state statutes and regulations. Hand sanitizer with at least 60% alcohol may be used if soap and water are not available in some work settings provided applicable state code requirements are being met.
- All employees and environmental services staff should be informed on how to clean AND disinfect frequently touched objects and surfaces such as workstations, keyboards, telephones, electronic handheld devices, handrails, light switches and doorknobs. The list of products that meet EPA’s criteria for use against SARS-CoV-2, the cause of COVID-19, should be available.
• Employees should avoid using other employees’ phones, desks, offices, other work tools and equipment, or dishes and utensils when possible. If necessary, employees should clean and disinfect them before and after use.
• Workplace policies are implemented to allow for teleworking for all employees who are able to conduct their duties from home.
• Employees are educated about how to practice social distancing at work by avoiding large gatherings and maintaining distance (approximately 6 feet or 2 meters) from others when possible.
• Employees should be instructed on alternative methods for site visits/meetings (e.g., video conferencing). If an in-person meeting must take place, you should keep a visitor log and attendance if case contact tracing is necessary later.
• Employees should be trained to restrict visitors and non-essential personnel, except when necessary (i.e., meetings, site visits). Signs are posted at entrances to the facility advising that no visitors may enter the facility. If visitors are necessary, they should be screened prior to entry for fever and respiratory symptoms. All visitors are to be instructed to wear a face covering/mask while in the building and to restrict their access to as few locations as possible.
• Provide trainings for employees that include; when to use PPE, what PPE is necessary, how to properly don (put on), use, and doff (take off) PPE, and how to properly dispose of PPE.
• Employee education about best practices to prevent the spread of COVID-19 in the workplace should be ongoing, with frequent reminders communicated to all employees. Communications should be provided to employees in their preferred language.

Maintain healthy business operations:

• Identify a workplace coordinator who will be responsible for COVID-19 issues and their impact at the workplace, who can also act as point of contact with the local health department.
• Frequently monitor public health communications about COVID-19 recommendations for the workplace and ensure all workers have access to and understand that information.
• Assess your essential functions and the reliance that others and the community have on your services or products including; changing your business practices to maintain critical operations, identify alternate supply chain for critical goods and services and talk with companies that provide your business with contract or temporary employees about the importance of sick employees staying home.
• Have a plan to monitor and respond to absenteeism at the workplace including; how to continue your essential business functions in case you experience higher than usual absenteeism and cross-training employees to perform essential functions so the workplace can operate even if key employees are absent.
• Implement flexible schedules and work hours.
• Increase physical space between employees at the worksite, including break areas and lunchrooms (social distancing should be 6 feet or greater). Include flexible meeting and travel options.
• Increase physical space between employees and customers.
• Discuss options for delivering services remotely, through delivery and curb-side and incoming deliveries to be left at loading docks or other locations that do not require person-to-person exposures.
• Increase the availability of face masks and personal protective equipment to employees. Always instruct employees to wear a face mask/cloth face cover while in the workplace.
Maintain a healthy work environment:

- Provide tissues and no-touch disposal receptacles/trash cans throughout the facility.
- Provide soap and water in the workplace and alcohol-based hand sanitizer. Sanitizer should be placed in multiple locations to encourage hand hygiene. Hang posters throughout the facility that encourage hand hygiene.
- Discourage handshaking and encourage use of other noncontact methods of greeting.
- The workplace should routinely clean and disinfect all frequently touched surfaces in the workplace, such as workstations, keyboards, telephones, handrails, and doorknobs, per CDC guidance.
- Provide disposable wipes so that commonly used surfaces (e.g., doorknobs, keyboards, remote controls, desks, other work tools and equipment) can be wiped down by employees before each use.
- Establish a plan to enhance cleaning and disinfection after persons suspected/confirmed to have COVID-19 have been in the facility.
- Use EPA-registered disinfectants with an emerging viral pathogen claim against SARS-CoV-2 for frequent cleaning of high-touch surfaces and shared equipment, with sufficient contact time. See EPA List N: [https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2](https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2).
- Advise employees to check themselves for symptoms of COVID-19 (i.e., fever, cough, or shortness of breath) before starting travel and after returning from travel and notify their supervisor and stay home if they are sick. Carefully consider whether work-related travel is necessary.
- If videoconferencing or teleconferencing is not possible, hold meetings in open, well-ventilated spaces.
- Facility should implement engineering controls for close contact where it cannot be eliminated and when practical (e.g., using face shields, plastic or plexiglass dividers, increasing ventilation).
- Facility should establish a process to immediately notify the health department about any of the following:
  - COVID-19 is suspected or confirmed in a worker
  - A worker has severe respiratory infection
  - A cluster of respiratory symptoms among workers (e.g., ≥2 cases within 72 hours).
Glossary of Terms

Case investigation - When the NDDoH or other public health partner interviews someone who has COVID-19 to determine where or by whom the individual may have gotten infected, understand symptoms, obtain demographics and underlying health conditions, and to identify close contacts.

Clinically diagnosed - When a person is diagnosed with a disease by their health care provider based on symptoms and risk factors, but they do not have a laboratory test to confirm the diagnosis.

Close contact - Being within 6 feet of a COVID-19 case for a prolonged period of time (greater than 10 minutes). A close contact would also be someone who was directly coughed or sneezed on or a health care worker who was not wearing appropriate personal protective equipment.

Community mitigation - Actions that people and communities can take to help slow the spread of viruses, including seasonal and pandemic influenza.

Contact tracing - People in close contact with someone who is infected with a virus, such as COVID-19, are at higher risk of becoming infected themselves, and of potentially further infecting others. The NDDoH and other public health partners follow-up with close contacts of COVID-19 cases to notify them of their exposure, check for symptoms/signs of infection, and advise them of their quarantine period.

Coronavirus - Coronaviruses are a group of viruses that are common both in people and animals. Severe acute respiratory syndrome coronavirus (SARS-CoV-2) coronavirus disease (COVID-19) is a respiratory illness that can spread from person to person. The virus that causes COVID-19 is a novel coronavirus that was first identified during an investigation into an outbreak in Wuhan, China.

COVID-19 - The name of the new coronavirus.

Droplet transmission/spread - Transmission or spread of an infectious disease through an infected person’s cough or sneeze. It is usually spread between people who are in close contact with one another for a prolonged period (within about 6 feet for greater than 10 minutes).

Flatten the curve - Flattening the curve refers to taking protective actions, often called community mitigation measures, that help slow the spread of a disease, so the health care system does not get overwhelmed by having a lot of very sick people all at once. The protective actions can be things like canceling large gatherings, keeping space between people (called social distancing), and continuing to do things like washing hands, covering coughs, and staying home when sick.

High-risk - Those considered high-risk include older people or those with certain underlying health conditions. These include blood disorders, chronic kidney disease, chronic liver disease, a compromised immune system, late term or recent pregnancy, endocrine disorders, metabolic disorders, heart disease, lung disease, and neurological conditions. Individuals who live in congregate settings are at a higher risk for COVID-19.

Isolation - When a person who is showing symptoms of a disease separates themselves from other people to prevent spreading the disease to others. People who test positive for COVID-19 must be isolated for at least 7 days after symptom onset and be fever free for 72 hours (without the use of medications) and have improvement in symptoms. People who are immunocompromised, hospitalized or health care workers may need to be isolated longer.

Lab-confirmed case - When a person is diagnosed with a disease that is confirmed through having specimens (samples) tested in a laboratory.

Monitoring - When an individual checks his/her temperature twice per day and watches for symptoms of COVID-19. Self-monitoring should be conducted by everyone in North Dakota but is especially important for travelers from high-risk areas and essential workers. Active monitoring is when the NDDoH or other public health partner is calling a case or contact each day to check on his/her temperatures and symptoms.

Pandemic - A global outbreak of disease. Pandemics happen when a new virus emerges to infect people and can spread easily between people.

Personal Protective Equipment (PPE) - Equipment worn to minimize exposure to hazards that cause injuries and illnesses. With respect to COVID-19, for non-healthcare workers this may include a mask or face covering, glasses, and disposable gloves.
**Quarantine** - When a person who was exposed to a disease but does not have symptoms separates themselves from others for a period of time in order to prevent potentially spreading the disease to others. The quarantine period for COVID-19 is 14 days from the last time an individual was exposed to a case while the case was contagious.

**Serology Testing** - Serology testing may be used to detect antibodies against SARS-COV-2 in the blood to provide evidence that an individual has been exposed to the virus. While experts are still learning much about this “novel” coronavirus, there is early hope that exposure to the virus and antibodies in the blood stream may lead to an immune response against the virus.

**Shutdown order** - A requirement from a government agency to close a business.

**Social distancing or physical distancing** - When individuals voluntarily choose to stay home versus going out in public. This means keeping at least six feet between you and other people. Do not gather in small, crowded areas. If it’s not an essential gathering, consider postponing or gathering virtually. Check local guidelines for recommendations.

**State of emergency** - A declaration by a local, state or federal government that allows for that government to take steps to respond to an emergency by using special powers to divert funding from one area to another and to get funding from the federal government.

**Suspected case** - A person who may have a disease because of their symptoms and risk factors based on current guidelines, but this person was not tested.

**Transmission rate** - The rate of how quickly a disease spreads. This is determined by how many people each individual with the virus is likely to infect and the time between one person developing the symptoms of a condition and a second person becoming infected and developing symptoms.
North Dakota Economic Resiliency Team

Governor Doug Burgum
Lt. Governor Brent Sanford
Scott Davis, Executive Director of Indian Affairs
Major General Alan Dohrmann, Adjutant General
Jon Godfread, Insurance Commissioner
Doug Goehring, Agriculture Commissioner
Eric Hardmeyer, Bank of North Dakota President
Al Jaeger, Secretary of State
Bryan Klipfel, Job Service Commissioner
Michelle Kommer, Commerce Commissioner
Lisa Kruse, Dept of Financial Institutions Commissioner
Ryan Rauschenberger, Tax Commissioner
Erica Thunder, Labor Commissioner
Mylynn Tufte, State Health Officer

North Dakota Industry Working Groups

The North Dakota Hospitality Association
State Board of Cosmetology
American Massage Therapy Association
ND Barbers Association
ND Parks and Recreation Association
ND Destination Marketing Association
ND Retail Association
Over 60 ND citizen volunteers from 23 communities

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