

**Department**    **Community Corrections**

**Proposed Service Delivery Model**

**ADULT PROBATION**

- Adult Division Intake
  - Courts have suspended pretrial hearings, Omnibus hearings, etc. indefinitely
  - Conduct all client interaction at window if possible; use electronic signature for documents
  - Reschedule all non-essential client appointments
- Probation Service Center
  - Reschedule client orientations until April 21<sup>st</sup>
  - Send broadcast message thru Offender Link to clients, advising them to call or use FaceTime instead of in person appointments
  - Send probation information out with instructions on how to sign up for automated reporting service (Offender Link)
  - Cancel STS crews for next three weeks – clients that have court deadlines can be put on EHM
- Presentence Investigation Units
  - Conduct interviews by phone or FaceTime
  - Encourage staff to work offsite
- Field Supervision Units
  - No clients coming into offices
  - Reschedule all non-essential client appointments
  - Contact standards, per policy, at agent discretion, per contact type
  - Send broadcast message thru Offender Link to clients, advising them to call or use FaceTime
  - Follow MDH protocols for administering swab and PBTs – only use for clients that appear to be under the influence.
  - Suspend internships for next three weeks.
  - Supervisors will maintain office coverage rotation to respond to phone calls and emergency requests from clients, courts, etc.
  - In the case of an emergency client request, work space will be identified to allow for client interaction that accommodates social distancing and other public health and safety recommendations.
- Re-Entry Services- limited due to community vendor closure

**PROJECT REMAND**

- Pretrial Services
  - Bail evaluations, and risk/need assessments will continue in the ADC, with appropriate social distancing recommendations followed.
  - Majority of staff will work from home.
  - Managers, some program assistants, and a chemical health assessor will remain in the office to assist homeless clients who need assistance but could not be contacted. Social distancing recommendations will be followed.
  - Currently reviewing options to expand GPS monitoring for additional clients to be removed from the LEC/Jail
- Diversion Services
  - Clients have been instructed to check-in via phone or email. Community work service is not required to be completed at this time. Staff available for in custody arraignment courts diversion referrals. All Maplewood courts and the upcoming St Paul diversion administrative calendars have been postponed. Weekly diversion conferences that involve the Ramsey County Attorney's Office, Public Defenders Office and Project Remand have been rescheduled

## Service Delivery Design Review

- All diversion staff will be working from home, maintaining contact with clients by telephone or other technology-based programs

### RAMSEY COUNTY CORRECTIONAL FACILITY (RCCF)

- Visits-looking at using iPads to parent- child visits
- Curtail programming for RCCF residents. Use only RCCF staff providers.
- Limit EHM home visits – Restrict to drive by visual checks and utilize GPS units.
- Open additional housing units to increase social distance.
- Work with the Courts and the LEC to limit admissions. This would increase social distance within the facility and allow new admits to be quarantined prior to housing with general population residents.
- Postponed on self-turn-in until April 15
- Working with the Courts to identify residents with 10 days or less on their sentence to release immediately, if they qualify
- Effective March 17th, administrative court order signed by chief judge allowing additional clients to be release from facility per specific parameters ( see attached order)

### Juvenile Detention Center

- SPPS – Distance learning. Still working out details. Workbooks, iPads, videos are possibilities.
- PO visits – Calls or video visitation are possibilities.
- Atty/PD visits – Request phone calls or video visits in lieu of face-to-face. Use visitor assessment tool.
- Parental and family visits –Implemented phone visits and exploring video visits.
- Volunteers/Programming – Suspend until April 15th

### Juvenile Probation

- Intake
  - Certification Studies and Probation Officer Reports will be completed via phone and Skype interviews
  - Practice social distancing within court proceedings
  - Medium and low priority hearings are canceled and will be re-scheduled at a later date.
- Field Probation including Plato Office
  - No face-to-face contact through April 15th
  - All client contacts will be through phone or other social media outlets
  - Court coverage probation officer will cover high-priority court cases
  - Out of Home Placement staffing will be conducted by Zoom meetings
  - Staff encouraged to work offsite, upon approval
- Community Programming group programming suspended, individual coaching will be available using technology options
- Applications Management Team
  - Team members can provide on call/onsite support as need to maintain facility and probation critical operations
  - Non-technical staff can be deployed for triage

## Immediate Racial Equity Impacts to Community or Workforce

- We are not requiring vulnerable populations to come to our spaces, reducing their risk of exposure and adding in flexibility for service delivery.
- Probation will continue to work with community-partners to ensure clients most affected (particularly homeless clients and those in shelters) have resources during this time.



## Service Delivery Design Review

- RCCF - We have worked with commissary vendor to eliminate temporarily the funding fee to deposit funds into account- until April 15th (at least). We will encourage use of phone system to deposit funds.
- RCCF and Juvenile Detention Center is working with Public Health to look at medically vulnerable population and screening them for immediate release
- Internal administrative functions including contracting, human resource functions, fiscal services etc. will continue to operate using remote work flexibility as described above

### Level of Staff Changes and Resource Needs

Staff will have access to the necessary systems

#### ADULT PROBATION

- Units will track work to ensure accurate information about rescheduled
- appointments court dates and to monitor workload
- Support staff will continue to answer phones and catch up on
- administrative staff
- If support staff request to work remotely, requests will be reviewed on a
- case by case basis
- Supervisors will maintain office coverage rotation to respond to phone
- calls, emergency requests from clients, and court requirements. Office coverage rotation should have each staff in the office several days of the work week. Staff with high-risk health conditions may be exempt from this rotation with authorization from their Assistant Deputy Director.
- Assistant Probation Officer requests will be reviewed on case by case basis. The department will look into temporary re-assignments if available

#### RAMSEY COUNTY CORRECTIONAL FACILITY (RCCF)

- A very limited number of program staff may work remotely
- Support Staff
- Receptionist still taking calls
- Still taking calls
  - Juvenile Detention Center
- Operations, Control Room, Pod and Supervisor staff work adjusted to accommodate phone calls and/or video visitation. Pod staff would need to perform programming and school related duties and oversight

#### JUVENILE PROBATION

- Support staff are needed in the office to ensure continuity of operations related to files, answering phone calls, e-filing documents and staffing the front desk.
- Each unit will need to develop tracking methods to ensure accurate information about rescheduled appointments and court dates.

#### Community Programming:

- Individual cog sessions using technology
- Ongoing individual client support to maintain stability

#### Applications Management Team

- Staff will perform most functions using technology
- Phone or facetime check-ins with staff, video conferencing, database audits, and monitoring dashboards

DCM Comments

Review Team Comments

1. Regarding #8, how will Community Corrections utilize their pool of staff who are temp/provisional, esp at JDC, doing full time work that does not earn benefits? Backfilling for staff who are sick. Who are these staff? If staff are not working remotely now, can they start to work remotely? If no, then why?
2. It's believed that these are the immediate / short term action plans for service delivery and staff changes, if the situation escalates, what will be the long-term plan?

County Manager comments

- Please continue all transitions away from window service and any remaining in person ~~to~~ to phone or delayed mtgs. This is already the clear path but want to reiterate. Align dates across the department to reevaluate programs/openings to April 15. ~~will be completed~~ Do everything possible to support staff schedules in facilities to accommodate childcare / caregiver needs. Run lighter staffing models when practicable and

County Manager Signature



safe for clients and staff to support scheduling challenges.

Approved for implementation effectively immediately.



**Department**   **Veterans Services**

**Proposed Service Delivery Model**

- We are prepared to offer options to people who call to cancel appointments.
- This would include offering to use scheduled time to talk or conduct interviews by phone, offering to respond to questions or provide forms by email or fax, sending information, materials or documents by mail if that option is determined to be a safe one.
- Anticipating that we may need to change how we deliver service based on staff availability attempt to contact all scheduled in-person appointments to offer them the option to be served by phone, email or mail.
- Contingent on direction from Ramsey County leadership if people are still interested in being seen in person we would review recommendations and guidelines for interviews established as best practices in connection with the efforts to limit the spread of the COVID-19 virus.
- We currently have guidance from MDH posted at our office door. Additional information and guidance should be added to all public spaces in the reception area and lobby of our offices.
- Review the logistics of in person space to determine if social distancing guidelines can be maintained in current office space.
- Procedures for seeing walk-ins and in person appointments will need to be reviewed and refined based on experience and guidance day to day.
- Review with staff the best practices and guidance provided by our employer in connection with direct service provision during this time.
- Discuss/brainstorm ideas for how we can best continue to provide service if staffing levels change or the direction from Ramsey County leadership suggests limiting in person contact.
- Adapt/update shared office calendar to clarify and prioritize all duties and responsibilities associated with keeping business processes (main phone line, Ask Veterans email, fax, mail, staff phones etc) covered. Identify models that will accommodate varying levels of staff availability.
- Establish processes for maintaining office coverage calendar as instructions and guidelines evolve.
- Establish daily communications process for staff to ensure that all staff are made aware of changes as they occur.
- We follow all specific guidelines for how confidential information is obtained, handled, submitted as part of claims and application packets for those we serve.

**Immediate Racial Equity Impacts to Community Or Workforce**

- All of the people we serve who have limited access to technology could be impacted negatively if available service options are ultimately limited to remote service delivery using phone, email or fax. Knowing this Veterans Services will make every effort to continue to provide in-person service options for as long as possible.
- Direct assistance and service, support and case management services to residents who are not able to access technology is a primary concern. This would include home-bound elderly and disabled people, people suffering from physical and mental health crisis and whose circumstances are directly impacted by addiction and homelessness.
- Veterans Services will follow guidance about how direct, in person service can continue to be provided to the most vulnerable populations we serve. It seems clear that this will be very difficult based on available guidance.
- Outreach, engagement, advocacy and direct on-going service and case management to homeless people is an immediate concern. Outreach staff currently go to places not meant for human habitation, detox centers, jails, shelters, day programs, congregate dining and other locations such as libraries to find individuals needing assistance. These workers will need very specific guidance and support. A coordinated effort to educate and inform these workers is needed.



## Service Delivery Design Review

- SPOC provides an opportunity to continue serving those that have the greatest need for our assistance. Ramsey County staff serving people at the SPOC with Catholic Charities and our other partners should be convened and educated about the specifics of how Catholic Charities will adapt how the facility is managed, how people are served at SPOC will be educated about the virus and how to best protect themselves, what additional services will be available, what the schedule is for Ramsey County staff at SPOC.

### Level of Staff Changes and Resource Needs

- Direct access to shared Veteran Data System will provide complete information about work being performed by staff. Veterans Services staff are highly trained and familiar with working independent of direct supervision for all routine responsibilities and tasks.
- Volunteer Services are not directly addressed in the answers above. It seems likely that Volunteer Programing will not be prioritized until such time as Ramsey County determines what services will continue to be delivered and how.
- The 1 Volunteer Services Coordinator in the County will be able to do some work from home. This would likely involve communicating with current volunteers, changing or cancelling schedules. All schools that are currently providing interns to the county have discontinued those programs.

### DCM Comments

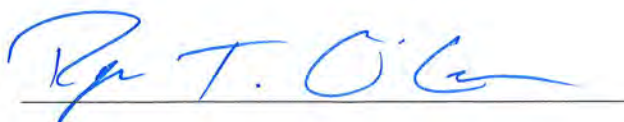
### Review Team Comments

1. Question 2: Need to sit down with PH and MDH guidelines and get clear, written recommendations re: protocols to work in-person. Need to anticipate any issues that may arise. Having a clear protocol will help with this.
2. Question 7: How will this look when clients don't have access to technology during crisis? What is the dept's alternative? What is the county's response to meet basic needs of our residents? How will outreach and engagement look when clients don't have access to technology during crisis? What is the dept's alternative plan of action?
3. Question 9: Are volunteers still coming in or are they told to stay home? It is unclear from this section.
4. It's believed that these are the immediate / short term action plans for service delivery and staff changes, if the situation escalates, what will be the long-term plan?

### County Manager comments

Would like to transition all resident contacts to ~~phone~~ phone.  
For the hardest to reach, staff at the 3 downtown walk-in  
desks should help connect a resident in need into the  
vet services department. Implement immediately.

County Manager Signature





**Department Financial Assistance Services**

**Proposed Service Delivery Model**

- Community Based staff are not set up with mobile laptops. To decrease face to face interactions at these locations, these staff can be set up to work with a desktop at either Bigelow or the East Building. Services would be able to continue without face to face interaction at HIRED and the American Indian Family Center.
- Case management telecommuters can telecommute 100% of the time. With Jabber, FAS Call Center staff can answer the main line from home. EA screening would still take place timely, just via phone versus in person.
- Clients can still call or apply and send their applications and verifications in via fax or email.
- Could increase number of staff on phones (FAS Call Center, METS Contact Center, Cash Call Center) to mitigate minimal face to face contact and flow of traffic in lobby. Would also list FAS fax numbers and email addresses for clients to use. If resident has access to phone and/or computer with internet, advise face to face appointment is not an option.
- All FAS services could be handled with a telephone interview
- Temporarily discontinue screening applicants in the EA lobby, allow clients to drop off applications, screening would be done via phone.
- Provide vulnerable clients with prepaid smart phone that could be reloaded with minutes.
- Put fillable recertification/renewal forms on County website and if they don't already exist, create them.
- Encourage residents to access ApplyMN and mnsure.org websites.

**Immediate Racial Equity Impacts to Community or Workforce**

- Most of the community based locations are also creating their own protocols in response to Covid 19 which may limit foot traffic into these locations anyway. Our work done at these locations can be done without face-to-face interaction so there would be minimal negative race equity impact to those served.
- Non-telecommuters would be required to work in the building and complete the face to face interviews with clients. Unfortunately, non-telecommuters tend to be newer workers and individuals of color. This may cause non-telecommuters to become disengaged and resentful due to having to come in which may effect how they deliver service to clients and have a lasting impact on their perception of the county as a model employer.
- Service delivery may be delayed unless we designate times for applicants to do phone interviews. Also there may be a delayed response to send printouts etc. that clients need to apply for housing.
- It will difficult for homeless clients who don't have cell phone. We may need to purchase pre-paid phones for some clients.
- Is it possible to allow individuals without telework equipment and/or internet access, to work on telephone appointment scheduling projects that may exist across the HWST or county.
- We will ask vulnerable residents to come into the lobby and use a lobby walk in phone to connect with their worker. For those residents without a phone, we would waive their interview and just process their application given the circumstance.

**Level of Staff Changes and Resource Needs**

- For Community Based workers, minimal impact since they will still be able to process case work if they're set up at a different location. However, if staff can't work at a different location or would prefer to work from home, they will not be able to since these staff do not have laptops.
- Non-telecommuting staff will need to be in the building in order to work and they may resent and feel management does not value or care about their wellbeing. Their feelings could start to come out sideways in the following ways: calling in, treating residents poorly, displaying a poor attitude.
- If not enough equipment for staff to telework, add Citrix to personal computers for Maxis, MMIS, MEC2 and Laserfiche. Staff can sign into METS using a personal computer, but still need to access Maxis and Laserfiche.



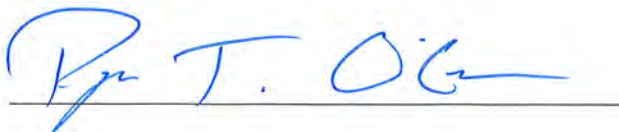
## Service Delivery Design Review

8. What is the plan to purchase pre-paid phone cards with FAS and coordinate with other departments?
  - We do not have a plan regarding this, it was suggested as a way to stay connected with our vulnerable clients. FAS would be willing to work with other departments on this.
9. Who (residents) are prioritized to receive first and who (dept/division) distributes, from which budget, documentation?
  - This has not been thought thru. But, I would say off the top, our highly mobile at risk group. i.e., homeless parents, homeless single adults and teens.
10. What's the protocol for when staff numbers reduced?
  - Are you asking, how will we determine which staff will come in? If so, we are already seeing some staff calling in because of the fear of COVID-19 which has reduced availability of staff. If staff have expressed anxiousness or fear about being here, I have advised my management team to let the person take time off because we do not want the person to be at work with a poor attitude and inadvertently taking it out on clients.
11. It's believed that these are the immediate / short term action plans for service delivery and staff changes, if the situation escalates, what will be the long-term plan?

### County Manager comments

Community-based face to face visits are cancelled for now, with hopes that the unit can develop new, culturally-specific methods of engagement over the phone that can be implemented as soon as possible. Need to ensure appropriate cell center staff availability at the ~~community~~ Incident Mgmt. Team. Need to prioritize FAS for telecommuting to reduce need for staff in the building. Please do supervisor/mgr. checkins with staff over the phone on a regular basis. We will provide phone cards + pre-paid phones at 3 downtown locations for our most vulnerable residents (this will require

County Manager Signature



a countywide response so not something for FAS to address.) Please follow-up on how FAS trainings for workers will occur during this changed service environment? Approved with an ask for follow up on the final question. Implement immediately.



**Department Social Services (Voluntary Services)**

**Proposed Service Delivery Model**

- Voluntary Client services include: Mental Health Targeted Case Management, Community Response Team, Group and Individual Therapy, Mental Health Nursing, Adult Mental Health Rehabilitative Services, Care Coordination, Peer Recovery Services, PSOP, Mental Health Case Management (except those under commitment), Youth Engagement, Truancy and Runaway Assessment, Child Welfare and Child Protection case Management without Court involvement, All Children Excel, Mother's First, Extended Foster Care, STAY, Foster care Licensing, Child Care Licensing, Aging & Disability Services and MnChoice
- Community Voluntary Client Services
  - Staff will call clients in advance to inquire if they or anyone in their household is sick.
  - If no one is ill, they will ask the client if they would like a home visit. If the client does want a home visit the staff member will maintain 6 feet of separation during their visit.
  - If the client does not want a home visit, they will be asked to conduct their visit/service over the phone.
- Telephone Contacts:
  - In order to maintain services and comply with COVID-19 recommendations, the SSD is requesting approval to complete phone/video contacts instead of face-to-face contacts. Some voluntary areas above require face-to-face so phone contacts would be a slight adjustment to the standard. DHS officials requested a waiver from legislators on this standard (face-to-face) and are waiting for an update. In the meantime, revenue would not be affected since staff would continue to complete Random Moments.
  - Some clients are declining face-to-face services and are preferring phone calls instead.
- Mental Health Center Voluntary Client Services
  - Group Therapy programs have been temporarily suspended.
  - Individual Therapy and Psychiatrist's appointments can be conducted via phone or Telehealth if clients are willing. However, at this time, this form of service would not be billable. We are currently getting these providers credentialed with managed care organizations so they can bill for telehealth services.

**Immediate racial equity impacts to community or workforce**

- Our modifications ensure equity continues. We are conscious that some clients pay for their phones by the minute. Our plan may increase the phone time needed to complete services thus creating higher phone cost to the client. We propose purchasing gift cards to offset costs to financially challenged customers who are affected by this modification.
- Phone cards and disposable phones

**Level of Staff Changes and Resource Needs**

- Staff already have measurable work standards to ensure that work is completed.
- Points of connection will include frequent Skype meetings, file reviews, and 1:1 supervision meetings.
- Staff will have clear work tasks with these modifications



DCM Comments

Review Team Comments

1. Need more details for each areas
2. What are the decision making criteria and protocols for face-to-face interactions? We need to document our process so we can follow-up if there are questions.
3. What will distribution look like? How will clients receive phone cards?
4. It's believed that these are the immediate / short term action plans for service delivery and staff changes, if the situation escalates, what will be the long-term plan?

County Manager comments

End face to face interactions wherever possible, and continue only in areas where strictly required. Seek immediate waivers to move required face to face meetings to phone or other virtual means. Can we offer group therapy via phone or video conference? Phone cards and disposable phones will be made available at all 3 downtown service desks; no need for SSD to individually purchase. Implement effective immediately.

County Manager Signature





**Department**    **Social Services (Involuntary Services)**

**Proposed Service Delivery Model**

- Involuntary Client services include: Prepetition Screening, Adult Protection, clients under civil commitment , Child Protection Assessment and Investigation, Child Protection Case Management in Court (custody), Youth Engagement Program where RC has custody (CHIPS). Adult and Child Crisis Response.
- Community Involuntary Client Services
  - If appropriate, staff will call clients in advance to inquire if they or anyone in their household is sick.
  - If it's not appropriate to call in advance and upon arrival, staff will ask if they or anyone in their household is sick before entering the home
  - During this home visit the staff member will maintain 6 feet of separation.
- Child Welfare (both involuntary and voluntary) both case aides and workers will continue to provide resources to families including but not limited to gift cards and supervised parent/child visitation. At times visitation may look different utilizing technology and social distancing.
- All child protection investigations/assessments will receive an in-person response.
- The Youth Engagement Program, with the court shutdown of status offender cases, will no longer be attending court hearings but will continue to keep in contact with clients and families. The YEP's Runaway hotline will continue to be monitored and responded to on a regular basis. Runaway and Truant clients will be contacted weekly and visited on a monthly basis, as required by CW-TCM expectations, if the clients and families are willing to be visited. The Human Services Shelter Warrant phone will continue to be monitored 24/7/365, to ensure Runaway youth who are picked up by law enforcement are returned to family or placed in shelter.

**Immediate Racial Equity Impacts to Community or Workforce**

- Our modifications ensure equity continues.
- Home visits, phone cards, disposable phones

**Level of Staff Changes and Resource Needs**

- Staff will have clear work tasks with these modifications.
- Staff already have measurable work standards to ensure that work is completed.
- Points of connection will include frequent Skype meetings, file reviews, and 1:1 supervision meetings.

**DCM Comments**

**Review Team Comments**

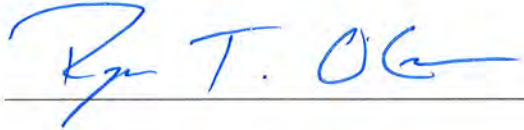
1. How does distribution work? How do clients receive these if no in-person?
2. Make sure that these staff have the full Health and Wellness Telecommuting packet and training.
3. It's believed that these are the immediate / short term action plans for service delivery and staff changes, if the situation escalates, what will be the long-term plan?



County Manager Comments

Implement effective immediately. Please do all we can to limit face to face contacts while recognizing that child protection must be conducted equitably and is an emergency 24/7 service. Please take all appropriate safety measures outlined by the CDC, MDH and Ramsey Co. Pub. Health. Phones and phone cards will be made available at 3 downtown service desks, so no need for SSD to address individually.

County Manager Signature

 Ryan T. Olson



**Department Social Services (24 Hour Services: Detox, LOR, RCC)**

**Proposed Service Delivery Model**

Detoxification Program

- Census: Detox has the capacity to serve 40 people in 10 dorms that sleep 4 people in each. In order to maintain six feet for social distancing in dorms we are proposing to serve a maximum of 20 people during this pandemic.

Monitoring of Residents:

- Staff must check patient temperatures upon admission and during each shift. Report any symptoms to Nurse Supervisor. In the event that a patient was to display symptoms of COVID 19, follow the COVID 19 procedure by placing them in the first or second admission room as they have negative air flow. Then provide a mask for the patient to wear and transport to the hospital.

Visitors/Meetings

- RCDF has suspended meetings within the facility.
- Visitors need to avoid visits until further notice.

Food/Medicine/Supplies

- Our pharmacy, Omnicare, has a plan in place to ensure continued delivery of essential medications.
- Our major food supplier has been contacted about their plan to ensure continued deliveries.
- Hygiene supplies should continue to be available.

Monitoring of Residents

- All houses have oral thermometers with disposable single-use covers.
- Staff may use these to check residents for elevated temperatures as needed.
- Tympanic thermometers are on order. These can be faster and easier for some people. Nurses, when on campus, will check anyone as needed should any respiratory symptoms develop. Report any symptoms to Nursing.
- In the event that a resident were to contract Covid-19, a plan for that
- resident will be put in place as soon as possible. Current guidance from the Department of Health is to isolate the person in his/her room, including for meals, and to do our best to keep the person from congregate areas. If able, the person should wear a face mask. If the person develops severe symptoms, he/she will be transferred to a hospital. Older residents and residents with chronic health conditions are at higher risk of developing severe symptoms.

Personal Protective Equipment

- Continue to use gloves for personal care of residents. Discard them and wash hands after taking them off. Supplies of gloves available to us may become limited, so please use them wisely. Handwashing is your BEST DEFENSE whether at work or anywhere else.
- Masks are not recommended as a GENERAL protective device and they are not available from any suppliers at this time. UPDATE: Current guidance for care in residential setting is to isolate an infected person in his/her room and have them wear a mask. When staff enter an infected person's room they should wear a mask and gloves while caring for the person. Remove the mask and gloves on leaving and wash hands. \*\*We still do not have masks available but have requested help from the county in getting some. At this time there are no Covid-19 cases in the facility, so this is not a current issue. We are working to solve this problem.



## Service Delivery Design Review

### Outside Activities

- Update: Some residents are already home due to school closures. All residents will be staying home by Wednesday, March 18th, for at least a few weeks. Return to normal activities will be evaluated on an ongoing basis as the trajectory of the pandemic becomes more clear.

### Visitors/Meetings

- LOR will suspend meetings within the facility. Annuals and other meetings may still occur via phone conferencing.
- Volunteers should not visit or take residents on outings until further notice.
- Update: Families should avoid visiting residents in the house. Residents may go on outings or home visits with family members but should preferably be picked up at the door.

### Food/Medicine/Supplies

- Our pharmacy, Omnicare, has a plan in place to ensure continued delivery of essential medications.
- Our major food supplier has been contacted about their plan to ensure continued deliveries. Kari can also shop for needed items. She has made a list of non-perishables that she will stock in extra quantities in case of need.
- Our medical supplier is EXTREMELY short on items that we routinely order. Some items may be rationed or become completely unavailable for a time. It is imperative that staff use supplies judiciously.
- Hygiene supplies should continue to be available.

### Signage

- Signs restricting visitors have been posted outside and throughout the main entrance to the facility, throughout the reception area, outside elevators, near sinks, throughout the nursing neighborhoods, employee breakroom and locker rooms
- CDC flyers have been posted throughout the facility
- Handwashing instructions/reminders have been posted throughout the facility

### Screening

- All visitors, vendors, and contractors are being screened
- All referrals for new admissions are being screened
- Front desk coverage is being extended beyond the standard hours
- All employees who travel out of state are required to be seen by a physician and approved to return to work
- Employees with symptoms of acute illness are advised to stay home
- Logs are in place to track employee illness
- Employee Assistance Program contact information is available in the breakroom for individuals who need assistance with access to health care resources

### Restricting Visitors

- Upon negative screen, visitors are limited to immediate family only, with the exception of extended family for hospice residents only on a case by case basis
- All volunteers have been canceled
- Incoming groups, activities and entertainers have been canceled. All activity outings to the community have been canceled.
- In house dental, optometry, audiology and podiatry services have been postponed
- Drivers for the various transportation companies are stopping at the main entrance to pick up and drop off residents as opposed to traveling throughout the facility to the respective nursing neighborhood.
- Staffing agencies have been contacted and pool nursing staff are being restricted to continuity assignments with RCCC only, we will not bring in pool staff that are working in other facilities
- Routine medication deliveries occur on the evening and night shift. The supervisor will meet the driver at the main entrance for deliveries and returns for all neighborhoods.



## Service Delivery Design Review

- Working with other vendors to establish temporary routines that restrict avoidable outside exposure into the care center and allow for continuing of operations
- Education/Communication-
- RCCC is monitoring updates from various lead agencies including: Center for Disease Control, Minnesota Department of Health, Centers for Medicare and Medicaid Services
- Consult the MDH provider hotline at 651-201-5414 for questions or clarification
- Participate with weekly MDH COVID-19 conference calls
- Interdisciplinary team reviews and discusses updates at daily stand up meetings including planning for the possibility of needing extra staff.
- RCCC weekly Emergency Preparedness meeting has been focused on COVID-19.
- Ramsey County Public Health was in attendance this week and practices were reviewed.
- CDC Handouts and Posters have been printed and placed in the employee breakroom
  - a. (ie Share Facts About COVID-19; What You Need to Know; What to do if you are sick; Stop the Spread of Germs; CDC Protect and Prepares Communities; EPA List of Disinfectants to Use Against COVID-19)
- Administrator includes updates and recommendations in the Pay Day update DON educated residents at the neighborhood meetings including best practices to prevent spread of respiratory infections and current measures the facility is taking to protect the residents
- Staff Development is conducting skills labs and competency testing of donning and doffing personal protective equipment (PPE). Staff are also being educated on COVID-19 at this time, and offered the above referenced CDC handouts
- Infection control policies and procedures are being reviewed, revised or developed as indicated for COVID-19

### Supplies/Equipment

- Additional sanitizer stands have been placed inside the main entrance to the facility
- Additional sanitizer dispensers have been mounted next to the biometric time clocks along with signage reminding staff how to use sanitizer effectively.
- Working with vendors to secure standard levels of PPE and other supplies based on routine order history and placing additional orders to increase supply on hand.
- Monitoring both supply on hand and incoming deliveries of PPE
- Alert public health if the event of an anticipated supply shortages and include steps the facility has taken in attempts to obtain supply
- Reviewed Environmental Protection Agency list of disinfectants approved for COVID-19 to ensure that current products in use are effective. Continue to monitor for updates to this list.

### Immediate Racial Equity Impacts to Community or Workforce

- Our modifications ensure equity continues.

### Level of Staff Changes and Resource Needs

- Staff will have clear work tasks with these modifications.
- Staff already have measurable work standards to ensure that work is completed.
- Points of connection will include frequent Skype meetings, file reviews, and 1:1 supervision meetings.

### DCM Comments



## Service Delivery Design Review


### Review Team Comments

1. In event of staff shortage, what the plan to ensure staffing able to provide services?
2. Question #6: What does staffing rotation look like for a 24/7 facility? Who has to come in, is it by seniority or by union agreements?
3. Visitor restrictions—what does this plan look like? When visitation restricted, how do you address social isolation?

### County Manager Comments

Please ensure staff and resident screening alignment across all 3 facilities unless a specific requirement or need for differentiation. Continue to adhere to all federal, state and local facility guidelines to maintain staff and resident safety. Do all possible to adjust schedules to accommodate childcare/caregiver needs of employees and run the minimum safe levels of staff to ensure maximum flexibility & limited exposure. Effective

County Manager Signature



immediately  
to implement  
with  
suggested  
comments.

**Department**    **Health and Wellness Administration**

**Proposed Service Delivery Model**

- Most of the work can be done remotely with the correct equipment. Preferably, employees would need work issued cell phones, laptops and any additional telecommuting equipment (ie: scanner/printer/copier machine) to be set up in their homes for privacy reasons. Most units/teams can conduct daily or weekly team check-ins via phone conferencing or remote video (ie: virtual) meetings.
- Still to be determined is how we work with our contracted providers who deliver client services but may be closing their facilities.
- Assuming we will not have ideal technology to set up at home, we need guidance on a minimal tech setup for remote work.
- Educational materials on how to use remote technology available, as needed.
- The HWAD leadership team suggests pushing out soft phone software to all county laptops and home devices.

**Immediate Racial Equity Impacts to Community or Workforce**

- Smaller vendors still mail invoices and without access to scanner/copier/printer machine at home, this could be disruptive and create inequities. Not all community providers or residents have access to computers or phones for community engagement meetings, focus groups, and/or surveys.
- This also can have an impact on service delivery. Other units do not have these concerns based on the work and internal partners they provide services to.

**Level of Staff Changes and Resource Needs**

- All systems would need to be secured via approved State and County IS Security methods - Ramsey network, Citrix, SSIS, MEC 2, MAXIS security authentication, and Homeless Management Information System (HMIS). Some employees have secure access already. All employees would need access to Help Desk Support, Desktop Support, Infrastructure Support and IS Security Support when working remotely, too. Some staff access Federal Tax Information (FTI).
- Can those staff use personal devices with Citrix, if needed?
- Most work can be done remotely if employees have work issued cell phones and access to video conferencing for both vendor, community engagement, and resident/client meetings.
- New hire orientation/training would be very challenging to do remotely, but with video conferencing, could be done.
- Scan Office would need to remain on-site and implement social distancing and no volunteers.
- Accounts Receivable/Accounts Payable can do some work remotely, but would need EFT Transactions on-site as requires check receipting in office and Cashier Desk gives out gift cards and bus passes on-site
- Most units that could work remotely would require daily or weekly staff check-ins and include weekly progress reports to ensure work is being done and meeting outcomes. Project Managers/Consultants would have to work on-site and meet their outcomes within the time limits of contracts. Scan Center has daily quotas to meet. Employees would be expected to communicate work concerns and progress made to direct Supervisor via email and by phone check-ins and video conferencing.
- Concerns voiced around cross-training employees is lost with telecommuting, as well as employees who cannot continue to work during this time due to being considered at high risk for coronavirus or not having adequate childcare.
- Concerns around equity and continuing community meetings if residents don't have access to video conferencing (computers), especially around client/resident required engagement or focused groups and the Citizens Advisory Council (CACHWAD has 268 contracted service providers).
- We need a consistent communication with those vendors about the services they are/are not offering and impact on Ramsey County residents.



## Service Delivery Design Review

- Sufficient cleaning supplies and hand sanitizer in the East Building and for IIWST staff in the field. Currently (3/17/2020), there are no staff supplies.
- Direction on a county response to employees with suspected or confirmed COVID-19.

### DCM Comments

Implement immediately and continue transitions off site as tech becomes available to H&AD to do so. Please work with staff to accommodate childcare/caregiver needs as best as possible in scheduling.

### Review Team Comments

1. #1: If not in-person, what does monitor look like now? Some contractors may be shut down.  
Scan Center –anticipation when staffing level decreases. What is the plan to deal with this?
2. #3: Staff access Federal Tax Information. If not sure as to whether or not staff have personal device sufficient enough to protect data, staff needs to sit down with Compliance Office. Need some confirmation around what is being use to protect FTI and understanding of what's required. Short term: have proper safeguards on computers. Afterwards, sit down meeting for training on what's required.
3. #4: Accounts Receivable: Address how gift cards/transportation passes, phone cards will be distributed as part of county programs.
4. #6: What are solutions the comments provided for this questions?  
Contractors –who is processing vendor invoices and ensure that invoice is sent and received by vendor?
5. #8: consistent communication with vendor is important. What will communication look like? Concerns around cleaning supplies available for Scan Center. Basic public health needs are met if we are asking staff to come in to work. What is the plan to address staff who cannot work remotely?
6. It's believed that these are the immediate / short term action plans for service delivery and staff changes, if the situation escalates, what will be the long-term plan?

### County Manager comments

See above in DCM comments box.

County Manager Signature





**Department**    **Public Health**

**Proposed Service Delivery Model**

**WIC**

- WIC is working towards over the phone appointments as much as possible which in turn will allow us to issue food benefits for 30-90 days to families participating in the WIC program. We will continue to keep our clinics open, with the exception of New Brighton, in case it is easier for families to come into clinic.
- WIC staff will and are using additional preventative actions including screening upon arrival, sanitizing between appointments/WIC visits and as much social distancing as possible to limit exposure.
- It is anticipated that we will see an increased need for WIC Services, as employees of service centered businesses either temporarily lose their job or have their hours cut.
- MDH has waived the requirement for heights/weights and hemoglobin checks for appointments this has made phone appointments possible.
- WIC staff will proactively contact as many families as possible to complete their appointment over the phone. WIC benefits will be issued at that time.
- WIC staff will be able to use other means, email and fax for any needed verification documents participants would have needed to bring in person.

**Health Protection**

- We can do contact investigations (including patient interviews) telephonically. It is not ideal.
- However, if our partners in TB clinic close down, contacts will not be screened appropriately, and we may see an uptick in tuberculosis disease.
- Contact investigation work can be conducted via telephone; encrypted email, fax, or mail (I suppose). We do not "advertise" these services – we seek these patients out – they do not seek us out.

**Healthy Communities**

- CTC – temporarily suspend community outreach. Outreach will be done via phone and mailing. Mailings are prioritized over the phone calls.
- CTC – CTC staff all have the capability to make phone calls from home. Staff all have laptop and cell phones to be used for communication.

**Family Health**

- Family Home Visiting could be delivered via telehealth/virtual visits by phone, or other approved interactive technologies such as text, work cell phone calls, skype, zoom, and Vidyo. PHN's and Health Educators would continue to be in communications with residents as outlined by program/home visiting model. The home visiting models have recommended and encouraged telehealth/virtual visiting during COVID-19.

**Environmental Health**

- SW Programs: Staff can telework and conduct meetings at a distance as needed. Services to schools will be reduced when they close, and school contacts are not working.
- Outreach and Engagement: Staff can telework and conduct meetings at a distance as needed. Direct contact to carry out community engagement in groups can be reduced or eliminated. Any necessary community engagement can be carried out with appropriate social distancing or by phone/video.
- SW/HW Compliance - Staff have been/will continue to be instructed about proper social distancing during inspections. Should it become necessary to discontinue inspections, the use of routine inspections will be suspended, but complaint-based inspections will continue.
- Lead and Healthy Homes - Staff have been/will continue to be instructed about proper social distancing during inspections, and not entering the home if people are ill. . Should it become necessary to discontinue inspections,



## Service Delivery Design Review

the use of routine inspections will be suspended, but EBL based inspections will continue. Will discontinue any inspections that are not EBLs; will use staff time to finish existing files.

- Community EH - Staff have been/will continue to be instructed about proper social distancing during inspections.
- SW Operations – Collection site services for yard waste and organics collection sites can be held as long as residents using the site are kept separated by at least 6 feet; this can typically be accomplished. HHW site services can be managed by the HHW vendor, with residents staying in their car. We can suspend certain activities, such as checking IDs. Compost bin and rain barrel sales/pick-up on 5/2; we can handle this without people leaving their car.

### Correctional Health

- Correctional health will begin screening all patients at intake for COVID-19 and influenza. This is an essential service, all will be able to access health services within corrections.

### Clinical Services

- We have implemented a no walk-in or same day services policy for the programming that can be scheduled to enable an ill prescreen of individuals coming into the building for services. We will refer people to call primary care if they have any symptoms. TB patients will also be evaluated by a nurse to determine TB symptoms versus other and work with client to be seen by a primary care setting if warranted based on reported symptoms.
- Other programs that serve only walk-ins, i.e. syringe services, are doing initial screens at the door telephonically, if possible, and have created a space for social distancing, masking client and using hand sanitizer. They are also keeping visits to less than 10 minutes. This staff also conducts outreach services – we are evaluating each outreach site to determine whether we can employ environmental controls/social distancing in order to still serve vulnerable and hard to reach clients. We have requested a type of HIV test that allows the person to self-administer via saliva, which will limit the personal contact needed to conduct HIV tests.
- For programs with infrequent walk-ins, i.e. SOS, staff will implement a similar process of conducting a prescreening over the phone (phone number given at the front desk), an option to do the visit over the phone from a safe space outside of the building, and if telephonic is not an option, maintaining 6 feet, masking client and offering hand sanitizer. Their visits will be kept to less than 10 minutes and follow up will be done over the phone. Other work in SOS - trainings will continue virtually and support groups have also been cancelled for the time being. They will also be available telephonically for clients who are seeking SANE exams.
- Other case management services that include home visiting, i.e. Perinatal Hep B, will move to only providing telephonic-based visiting. TB Case Management will conduct as much case management as much as possible by phone, determine essential medical needs and prescreen clients prior to a home visit or scheduled visit in the clinic. If necessary, we may decide to provide some care and draw labs within the home. Staff entering the home will wear proper PPE as dictated by client/household symptoms and prescreening results.
- Directly Observed Therapy – we are evaluating which clients may be eligible for video DOT to shift from in-person visits where possible. DOT staff person will make prescreening calls to determine illness and also request that the client receive the DOT worker at the door and be prepared to take the medication at the door.

### Administration

- Vital Records – encourage mail requests as time allows, promote completing of forms at home to minimize interaction and wait time in the lobby. Could promote doing more expedited shipping/mailing of documents for an additional fee.
- HouseCalls – Limiting the level of walk-in clients, screening clients over the phone. Still able to provide services and referrals. In-office client services have decreased significantly due to Xcel Energy and St. Paul regional water services discontinuing shut-offs. It is expected that some HC clients would need assistance for nuisance property response.
-

### Immediate Racial Equity Impacts to Community or Workforce

#### WIC

- We will continue to reach out in a variety of ways to our participants; phone calls, automated reminders, texts, messaging placed on our WIC web site, visible messaging in each of our WIC clinics, etc. We have key bilingual staff available to provide these messages in English, Spanish, Somali, Karen, & Hmong.
- The population we serve is low income and has a high rate of health disparities. We are temporarily setting aside our critical referrals because we will not be collecting our release of information. This will impact our families by reducing their access to services and information in the community.
- We are suspending all of our community based breastfeeding support which includes "Baby Café" and "Face to face - in Clinic" peer breastfeeding support.

#### Clinical Services

- All of Clinical Services programs see clients who are primarily people of color. We hope to continue to offer high quality services and ensure confidentiality via telephone or video.
- Syringe services/Outreach – we hope to continue services as described above to communities, including communities of color that are disproportionately experiencing HIV outbreaks and are vulnerable to other diseases due to intravenous drug use. We will also attempt to go to as many outreach locations as possible, as long as there is the ability to create social distance, masking and keep to other hygienic practices.

#### Health Protection

- Our TB clients, who are primarily people of color, typically have phones. I think one concern I have is that building patient rapport is a critical component of conducting a contact investigation. Many of these patients are elderly. We will do our best to continue to host successful interviews while not potentially exposing them to COVID-19.

#### Environmental Health

- We do not expect any racial equity or service delivery impacts on any of the services provided.

#### Administration

- All services will continue to be available to all clients.

### Level of Staff Changes and Resource Needs

#### WIC

- We have a WIC supervisor assigned to each of our WIC clinics and to a team of WIC staff. Staff is already accustomed to daily check ins and daily meetings prior to clinic starting to share information, complete updates and adjust business as directed.
- We will continue to work with MDH WIC and USDA to make sure requirements are being met.
- All of our staff will continue to provide WIC services to the community in some form.

#### Health Protection

- My weekly check-ins can occur via phone/Skype. I can come into the office more routinely to check fax/voicemail.

#### Healthy Communities

- CTC – Skype for business and email for communication.
- CTC – There is one admin staff in CTC that can work remotely.



## Service Delivery Design Review

### Family Health

- The supervisor/managers will be able to monitor the work of staff through Outlook calendars that are up to date by staff as things change in workload.
- Supervisor/managers will connect with staff at a minimum daily and as needed.
- Daily activity logs for some staff will be enacted to monitor the daily workload of each staff. Productivity can be monitored through viewing reports or coding work activities in the PH Doc system.
- Our support staff will be supervised by our Office Manager that will check in daily with staff on workloads. If workloads are decreased, I would have our Office Manager connect with the Health Protection unit to offer our assistance during this Pandemic as there may be extra work tasks that will need to be done. If home visits are down, we have other work in the division that could be worked on such as the Orientation Work Group, Practice Standards literature review, HVCollN and CQI efforts could be worked on during this time. Having the ability to have WebEx or conference line would be needed to meet the needs of these various meetings if staff is working off site.

### Environmental Health

- EH carried out a similar implementation of its COOP this past summer, with supervisors meeting weekly with staff, either at a physical location or via conference call. Should it be necessary no face-to-face meetings would be held.

### Correctional Health

- Work is essential and will be completed, modifications may be made if someone in the jail is deemed positive for COVID-19, the offense they are held on as well as symptoms would dictate how any modifications would be made.
- There are two employees Clerk 3 and RN Coordinator that will be able to do a large proportion of their work outside of the jail, out of Plato bldg. or at home

### Clinical Services

- Communication will occur from the Division Head and supervisors. Each staff person is working with their supervisor to determine the change in work, identify areas needing clarification and training and to develop individual productivity plans if applicable.
- Supervisors will check in with staff at least daily about plans and if a shift is needed to meet the needs of our clients while maintaining safety for staff.
- We will be working with staff to telework if their jobs enable this as a possibility. Again, we will work with individuals on expectations and assignments while teleworking, and a plan for support and supervision to occur. We will ensure that we have adequate staff on site to complete the work listed above.

### Administration

- Vital Records – Monitor completion of requests to ensure work is being completed.
- HouseCalls – Will monitor phone calls and referrals for assignments and appropriate follow-up.
- Some staff would be able to work from home, some would need to be on-site for access to documents and records, to receive supplies for clinical services.

### DCM Comments

## Service Delivery Design Review

### Review Team Comments

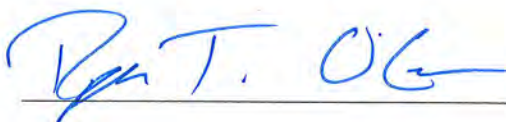
1. #3 -- Short-term: Make sure staff have 2-step authentication and appropriate software. Long-term: staff gets the full Health and Wellness Telecommuting AND email management trainings. Staff in field are properly equipped to safeguard data.
2. In general, ensure that staff have proper support to safeguard against any breaches.
3. It's believed that these are the immediate / short term action plans for service delivery and staff changes, if the situation escalates, what will be the long-term plan?

### County Manager comments

- Continue to move toward all virtual / phone engagement for services and off-site work as tech allows for it. Limit community outreach & engagement to only that which is critical for an effective public health response related to COVID-19. All walk-up services (except for WIC, clinical services or any other public health emergency need) are closed, with the 3 downtown walk-up desks being the point of check in for the most vulnerable residents.

Implement effective immediately.

County Manager Signature





### Department **Housing**

#### Proposed Service Delivery Model

##### Unsheltered

- We could consider a regulated camping site where camping would be allowed in an open area and tent spaces would be designated so that folks can do social distancing. This would allow for better service provision, but could have negative externalities
- Switch unsheltered outreach workers goal from connecting folks to shelter and housing to wellness checks
  - o Bring Water to unsheltered so they can avoid congregate settings
  - o Food/Meals to unsheltered so they can avoid congregate settings
  - o Handwashing stations could be placed near camping locations or across the city
  - o Portable toilets will be needed near camping locations or across the city as public buildings close.
  - o Garbage stations near camping locations. City or County parks or maintenance workers could be redeployed to pick up trash
- Outreach workers could have access to the city encampment app so that they spend less time trudging through the woods and know exact locations.
  - o Would need to coordinate with city's Department of Safety and Inspections.
  - o Workers would need to have mileage and gas reimbursement for traveling to encampments and wellness checks.
  - o Would recommend that they don't transport symptomatic residents and that they can instead call for a different transportation service (medic, sheriff). Outreach workers would need training on how to take off protective gear and get their car.

##### Shelters

- The current [redesigned] process to be added to the wait list is as follows:
  1. Families wishing to access emergency shelter contact United Way 2-1-1.
  2. United Way staff screen these clients to make sure they are actually looking for emergency shelter. If so, they take the clients basic information and send it over to my team via computer interface.
  3. My team receives the information from United Way, verifies the client is a Ramsey County resident and then contacts them to explain when they can come in to meet with a staff member and be added to the waitlist.

The change I'm proposing is when clients are contacted to explain when they can come in to be added to the waitlist, we schedule a time (preferably during normal walk-in hours,) to call them to complete a phone interview.

- During the interview, we'll take all of their information over the phone and add them to the wait list.
- Clients will still have 10 days to provide us with verification of their homelessness.
- They can provide this verification by fax, mail, email, or in person in our lobby.
- If we adopt these temporary changes, we will not turn away anyone that may show up in our office.

##### Housing Support

- Deliver clear communication to both providers and clients as to how they can best continue or get access to benefits. Post information on-line and require applications to be submitting utilizing not just mail and fax, but also email and the on-line benefit application (ApplyMN).
- Increase briefing updates throughout housing services partners. Housing touches every department, so it would be helpful to receive brief updates from each department as to what they are sharing with providers and clients so we can all be on the same page.
- Enable housing office to provide briefings and newsletters like the Social Services update that goes out either monthly or something to ensure other departments know what the Housing Office is working on and how their work might impact them.

## Service Delivery Design Review

### Immediate Racial Equity Impacts to Community or Workforce

#### Unsheltered

- With additional resources for the unsheltered population this may lead to more positive outcomes for persons of color currently experiencing unsheltered homelessness.

#### Shelters

- I don't foresee any increased positive or negative effects on our clients of color, but I don't know the answer to this question.

#### Housing Supports

- Ensure keeping and accessing benefits is priority at this time. Enable funding to minimize additional crisis's and evictions from both community and group settings would help to ensure that we are serving our most vulnerable, including those from racial and ethnic backgrounds.
- Get payments out the door to providers faster, many are smaller providers and are unable to sustain their business without timely payments. This is a racial/equity issue because we do have housing providers who serve a culturally specific population.
- Having a point person in EA/EGA for other prevention providers to send clients to. Publicly sharing (via announcement, not just on Ramsey.us) if hours are modified or if more Ramsey County employees are working remotely.

### Level of Staff Changes and Resource Needs

#### Unsheltered

- Camping site would require additional resources
- Wellness checks would require resources for public toilets and handwashing stations
- Outreach staff feel ill-prepared and ill-trained to handle screening. Coordinate with Public Health to buy protective gear for outreach staff. Provide training and more Coronavirus information for outreach staff. Outreach staff could screen and take temperatures if trained.
- Garbage stations near camping locations. City or County parks or maintenance workers could be redeployed to pick up trash
- Outreach workers could have access to the city encampment app so that they spend less time trudging through the woods and know exact locations. Would need to coordinate with city's Department of Safety and Inspections. Workers would need to have mileage and gas reimbursement for traveling to encampments and wellness checks. Would recommend that they don't transport symptomatic residents and that they can instead call for a different transportation service (medic, sheriff). Outreach workers would need training on how to take off protective gear and get their car.
- Currently Outreach workers make \$18.50 an hour, they may need more compensation to incentivize their work during this virus. If they were hired as temp workers would they have additional benefits? If they were through existing contracts or amended contracts would they have additional benefit?

#### Shelters

- I believe this change will result in an increase of the number of families placed on the waitlist, as it is sometimes easier to complete a phone appointment than it is to travel to a specific location during specific hours to complete the same task.

#### Housing Supports

- Need point-people in Social Services, FAS and Public Health to help pass on messages on to providers/clients and be available for client specific questions.
- Need IT point person to help with problems when working remotely to resolve or support complex computer issues while teams are unable to come into work.
- Planners need ability to chase folks in other areas for work; and would need point people in HWAD.
  - o Ensure access, guidance, and training for remote access tools and employee compliance.
  - o Provide work cell phone for coordinators to return client calls regarding housing, resources, and/or other homeless assistance.



## Service Delivery Design Review

### DCM Comments

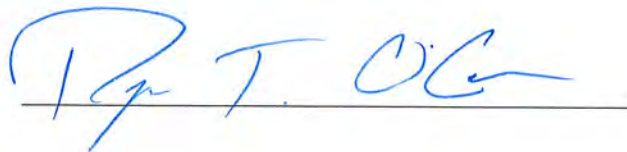
### Review Team Comments

NA

### County Manager comments

Please focus on shelters and supports in the immediate to ensure adequate isolation & quarantine. Go forward on all unsheltered plans except campsites. No campsites ~~until~~ until other regional and state options are explored to serve unsheltered populations. Implement immediately.

County Manager Signature

A handwritten signature in blue ink, appearing to read "T. O'Connell", written over a horizontal line.

## Service Delivery Design Review

### Department County Assessor

#### Proposed Service Delivery Model

- Open Book meeting- set up Plato Conference room to meet social distancing requirement (last years 147 property owners attended).
- Interior Inspections- A desk review can be performed on property. Property owner can submit interior photos or interior video of property.
- The appraisers in my office are out in the field often, our current check-in process will continue to work to keep staff informed and having supervisors continue to track productivity ensuring all property owners calls and questions are being answered in a reasonable time.
- We plan to have a rotating schedule of staff in our office. If 80% to 85% of staff are working from home. This will then meet the social distancing requirements that will keep the remainder of staff in my department safe and healthy. If need be I can send work with support staff that they can do from home as well.

#### Immediate racial equity impacts to community or workforce

- I'm very aware that we may have property owners from area of concentrated poverty or racial and ethnic backgrounds that may not have the technology to supply the Assessor Department with interior photos. We will do a more indebt questionnaire with the property owners who do not have the technology to give us interior photos. The appraiser will make the value judgement based on those questions.

#### Level of Staff Changes and Resource Needs

- I believe the proposed modifications meet MN statue requirements. My concern is staff making arrangements for child care and those staff that are at higher risk coming into office. I want my staff to feel comfortable we are meeting social distancing requirements. Some of my support staff have health conditions which will need them to work from home. My goal is to have staff work from home and set up a rotating "In Persons" schedule where 15% to 20% of staff come into office.

#### DCM Comments

#### Review Team Comments

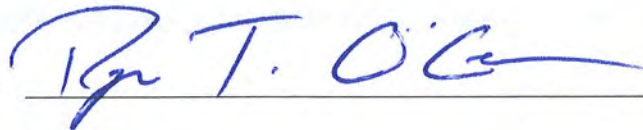
1. Regarding #6, it is unclear what the response is to the need – there is no response on what their steps will be. Can they extend the deadline? - Luis is looking into see if they can verbally accept.
2. It's believed that these are the immediate / short term action plans for service delivery and staff changes, if the situation escalates, what will be the long-term plan?



For #15, delay houses if technology is not able to supply photos. Or design an alternate method.

Effective Immediately

County Manager Signature

A handwritten signature in blue ink, appearing to read "Ryan T. O'Connell", written over a horizontal line.

**Department**    **Property Tax, Records and Election Services**

**Proposed Service Delivery Model**

- Elections - Voter registration, absentee voting requests, and election judge sign-up can be done online, via fax, over the phone and through email. They can also be completed on a laptop/ipad kiosk. We want to encourage the use of MNVotes.org. Voters already have the option to vote by mail. Discussion at the federal level is looking at whether all mail elections will be authorized or required for national elections.
- Remote phone and network access for certain employees to carry out these public facing tasks.
- Examiner of Titles - The majority of submitters are title companies that are already able to record electronically. Individuals can still submit via email and print the examiner's documents for recording or bring the documents to a closing.
- Property Tax Services - Most of our services could be delivered via email or phone. However, some may require staff to be present at least for part of the day. These could benefit by staggering shifts to minimize social contact.
- Daily Balancing, Bank Reconciliations and Adjustments would need to be hands on since most documents and data is not electronic.
- Authority currently exists for the County Treasurer to modify or forgive penalties in the current property tax year. This can be used to delay the effective first half property tax due date if warranted.
- Shift work has been suggested as a way to allow staff to work in the office and to minimize staff density. With children at home instead of school, shift work has also been cited as a need to allow parents to split parenting time so both can continue to work.
- Work will continue on the Enterprise Cashiering and Receipting Management system ("ECRM") to allow for implementation of a central payment portal that will provide greater flexibility and ability to accept e-payments as an alternative to in-person payments. Most payments to the county can currently be paid by mail, but that requires that staff be here to open and process the mail.
- Open Book public meeting- set up Plato Conference room to meet social distancing requirement (last years 147 property owners attended).
- Interior Inspections- A desk review can be performed on property. Property owner can submit interior photos or interior video of property.
- We plan to have a rotating schedule of staff in our office. If 80% to 85% of staff are working from home. This will then meet the social distancing requirements that will keep the remainder of staff in my department safe and healthy. If need be I can send work with support staff that they can do from home as well.

**Immediate Racial Equity Impacts to Community or Workforce**

- I'm very aware that we may have property owners from area of concentrated poverty or racial and ethnic backgrounds that may not have the technology to supply the Assessor Department with interior photos.

**Level of Staff Changes and Resource Needs**

- I believe the proposed modifications meet MN statute requirements. My concern is staff making arrangements for child care and those staff that are at higher risk coming into office. I want my staff to feel comfortable we are meeting social distancing requirements. Some of my support staff have health conditions which will need them to work from home. My goal is to have staff work from home and set up a rotating "In Persons" schedule where 15% to 20% of staff come into office.



DCM Comments

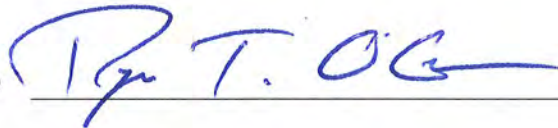
Review Team Comments

1. Regarding #6, how will the translation services be rolled out?
2. What are you committed to doing and what is your action plan to address/modify penalty in #2.
3. It's believed that these are the immediate / short term action plans for service delivery and staff changes, if the situation escalates, what will be the long-term plan?

County Manager Comments

Effective Immediately. Went to follow-up on addressing/modifying payments (section 2) as situation unfolds.

County Manager Signature

T. O'Connell

## Service Delivery Design Review

### Department **Communications and Public Relations**

#### Proposed Service Delivery Model

- CPR will support internal and external clients at the same level we do now. We will be replacing every non-essential in-person meeting with telework.
- By March 16 at noon, all CPR staff, interns and contractors will each be equipped to completely work off-site. This is due to partnership with Information Services and the provision of VPN to CPR staff. We will begin using MS Teams also.
- CPR department leaders will have a daily standing tele-meeting and this will be a standing item. Leaders will draw up info. from their respective teams to report out and capture in leadership meetings.
- We continue to work with outreach staff in public health and other areas as we do today to provide communications to residents or customers unable to be served during this time period.

#### Immediate racial equity impacts to community or workforce

- Should be no impact for internal service. Considerations for external service/communications will not change as a result of this change in service provision.

#### Level of Staff Changes and Resource Needs

- We do not know this yet. Each one of our team members understands that they have a responsibility to capture takeaways related to technical, cultural, customer service and other challenges through the lens of sharing these to with other departments who will be moving to this remote work to ease and improve transitions. Leaders on our team will be connecting regularly with staff to gather and share these lessons with IS and other stakeholders.

#### DCM Comments

#### Review Team Comments

1. Language services to translate information in different languages?
2. Communication to staff: How are we communicating with staff? Could there be regular emails from County Manager like the Sunday email. Ensure that access to message is available when not on Ramsey County network.
3. It's believed that these are the immediate / short term action plans for service delivery and staff changes, if the situation escalates, what will be the long-term plan?

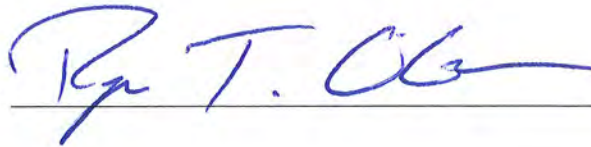
#### County Manager comments



Service Delivery Design Review

Need to be a part of solving the countywide language and translation services.

County Manager Signature

A handwritten signature in blue ink, appearing to read "R. T. Olson", written over a horizontal line.

**Department**    **IPR Administration**

**Proposed Service Delivery Model**

- Assessing Services/Homestead: Business will continue to operate as it normally does minus walk-in services; customer service can be handled via telephone, email, and by appointment if necessary.
- Recording Services: Business will continue to operate as it normally does minus walk-in services; customer service can be provided via telephone, email, and by appointment if necessary.
- Taxpayer Services: All areas except passports - Business will continue to operate as it normally does minus walk-in services; customer service can be handled via telephone, email, and by appointment when necessary.
- Passports - If closed, customer can be directed to the Minneapolis Passport Agency. If to remain open, offer appointment-only services – no walk-ins.
- Assessing Services/Homesteads:
  - a. Homestead Applications: Close the front counter and limit acceptance of homestead applications to submission by U.S. Mail and drop-box.
  - b. General customer service: Close the front counter, do not allow face-to-face. Customer service can continue uninterrupted by telephone.
- Recording Services:
  - a. Recording Counter - Close the Recording Counter and limit acceptance of documents to be recorded to submission by drop-box. Electronic submissions are an option.
  - b. Resource Center - Allow the resource center to remain open but not staffed; assistance can be provided over the phone or by appointment.
  - c. RecordEASE Web - Allow temporary free online access for document searches and views (Hennepin County is allowing this effective immediately). This will help reduce or eliminate the use of the Resource Room.
- Taxpayer Services
  - a. Tax Payments - Close the service area by closing the security gate to prevent entrance and limit acceptance of all tax payments to U.S. Mail, drop-box (located in front of the security gate and in the Plato parking lot), and electronically.
  - b. Licenses - Applications can be submitted by U.S. Mail, drop-box, or electronically via e-mail to AskPropertyTaxandRecords; payments can be submitted by U.S. Mail or drop-box; we do not currently accept license payments electronically.
  - c. Passports - Close the passports counter indefinitely, due to the nature of the work. Face to face is part of the process where applicants are having to show proofs of identification. US Dept of State is asking for notice if we plan to discontinue this service.
  - d. General Customer Service - Do not allow face-to-face, continue providing service via phone.
- Unified Team Supervisors and Manager will continue to provide supervision and support to staff. Other than eliminating or reducing face-to-face interactions with customer, business will continue to operate as it does under normal business conditions.

**Immediate Racial Equity Impacts to Community or Workforce**

- We do not believe they will be impacted.



## Service Delivery Design Review

### Level of Staff Changes and Resource Needs

- If employees have the capability to work from home, we would allow that flexibility. If they do not, they can continue coming to the office to do their work, without any public interaction or interruption.
- By March 16 at noon, all CPR staff, interns and contractors will each be equipped to completely work off-site. This is due to partnership with Information Services and the provision of VPN to CPR staff. We will begin using MS Teams also.

### DCM Comments

### Review Team Comments

1. Have a few document drop off for services that will remain open, under #2 closing recording counter and limiting documents – these documents still need to be reviewed/processed, that means there will be a variety of physical contact (risk of exposure) what is the protocol on disinfecting and sanitizing the equipment, materials being utilized, etc.?
2. The necessity of property tax payments, is it necessary as of now and how will it be addressed in the long run?
3. It's believed that these are the immediate / short term action plans for service delivery and staff changes, if the situation escalates, what will be the long-term plan?

### County Manager comments

We need to modify this plan to state that the front desk will have skeleton crew for those who are unable to otherwise access our services. Ensure appropriate distance. Passports can stay closed. Effective immediately with these changes.

County Manager Signature



## Service Delivery Design Review

### Department Information Services

#### Proposed Service Delivery Model

- By use of collaboration tools, staff will be able to conduct many virtual meetings, sharing of documents and have face-to-face interactions via web.
- IS is using (piloting) Teams and able to conduct meetings, share documents and check in on assignments and accomplishments and will continue to do so.

#### Immediate racial equity impacts to community or workforce

- IS will be able to determine if any staff who are needed to work remotely do not have access to internet. Accommodations can be made for this, if deemed appropriate. Also, Comcast has expanded their low-income model, which can also help support those individuals. One innovation possibility is to provide County owned phone with hot spot to individuals that do not have home internet access.

#### Level of Staff Changes and Resource Needs

- The general phone line can be answered remotely. Most technology work can be conducted remotely. Administrative work can also be done remotely with proper tools.
- IS is well prepared for remote work. We see only minor redesign changes, and no major changes to accomplish and be able to support the needs of staff and their clients.

#### DCM Comments

#### Review Team Comments

1. They will be contacting department heads on what is needed.
2. They are referencing their public phone line, the general calls have increased – how is staff being adjusted to ensure these calls are being addressed appropriately (I.e. increase number of staff to pick up the calls remotely)
3. Need to enforce that if staff are sick, they should follow public health protocol and find ways to do it remotely.
4. It's believed that these are the immediate / short term action plans for service delivery and staff changes, if the situation escalates, what will be the long-term plan?

#### County Manager comments



Service Delivery Design Review

Effective immediately. Bring the call center capacity issue to addressing into the IMT structure for resolution.

County Manager Signature

R. T. O'G

### Department Human Resources

#### Proposed Service Delivery Model

- Our client-facing services are those we provide to the departments' employees and supervisors and managers. Many of our services are already provided from a remote location; however, over the next weeks, we will make use of teleconferencing for meetings, skype for job interviews where possible, and we will lower the number of panel members for some jobs to 3 instead of 5 and still ensure diversity in panels where possible. Training can occur via zoom or webinars where needed. Training content can continue to worked on and training related to managing a remote workforce or other COVID-19 related items will be prioritized where necessary.
- Many of our services are already accessible to employees by phone, email or other systems such as Summit. Consultations with managers or departments are often held already by phone and will continue in that way or via Skype. For documents on which we need signatures, we will have to rely on scanning documents or look into whether we can approve electronic signatures (this is something we need to explore).
- Each manager has been asked to come up with a plan regarding priority of work and what work is able to be accomplished from a remote location and what gaps we may have and we are currently working through those. Staff and managers will continue to check-in, have one-on-ones by phone, and larger staff meetings will be conducted via Zoom. Currently, updates are taking place on a daily basis. Supervisors will communicate with staff to prioritize work and ensure it is moving forward.

#### Immediate Racial Equity Impacts to Community or Workforce

- Some staff who do not yet have access to technology to be able to work remotely are most impacted (especially our reception staff) but there is minimal impact to members of the public or our internal customers.
- Employees are able to contact us via phone and normally do already. It should have minimal impact on our customers.

#### Level of Staff Changes and Resource Needs

- Our services do require access to private employee data. A few of our staff who work in Laserfiche. We are working with IS to see if what is possible; otherwise, we already have secure access to most data and staff are aware that they need to maintain confidentiality and safeguard data.
- Other than in person classes, there should be minimal impact as staff already rely on technology, email, and phones to accomplish their work.

#### DCM Comments



## Service Delivery Design Review

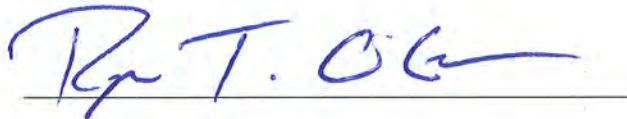
### Review Team Comments

1. In the process of hiring, is there a constraint with getting background checks/paperwork - these are done electronically, will there be an issue with this and what is the process (i.e. bringing in an ID, fingerprints, badges, etc.)?
2. Under racial equity – there should be a heavy focus on people of color who are in delay with recruitment and need to make sure that roles that impact community are prioritized so the recruitment gets the support needed.
3. It's believed that these are the immediate / short term action plans for service delivery and staff changes, if the situation escalates, what will be the long-term plan?

### County Manager comments

End all in person hiring until public health guidelines change. Need additional discussion and plans regarding background checks and other processes that impact hiring timelines. Effective immediately with the inclusion of no in-person panels and future modifications possible to other processes.

County Manager Signature



### Department County Manager's Office

#### Proposed Service Delivery Model

- Policy and Planning
  - Large community meetings can be replaced by virtual webinars or livestreams on accessible platforms like go-to meeting/webinar or youtube. We could also record content and post on the public website for comment. Small community meetings may be supplanted with virtual meetings that are both accessible to county staff, staff from non-county organizations, and community members. County meetings can be held virtually.
  - Weekly team check ins will continue and would take place virtually. Weekly individual check ins with directors would ensure adequate support for team is provided. Thorough use of outlook calendar may also keep team informed of projects and any support needed.
- Administrative Division
  - Board documentation can be managed remotely. May require additional tech resources or in person support to handle any physical supply or documentation needs. Specific support will be needed to connect to agenda.net remotely. Agenda Review meetings currently have a virtual option. Digital signature technology may need to be adopted. Innovative technology to stream virtual board meetings may be needed as well.
  - Payroll, benefits, purchasing/accounts payable can be managed remotely.
  - Administrative Tasks (scheduling/ room reservations, printing, note taking, meetings) can be handled remotely for the most part. Virtual meetings can handle needs. (Printing may be needed onsite.)
  - In- person/ telephone reception can be handled remotely through voip or other resources. Virtual receptionist can support reception desk coverage.
  - Weekly team meetings can take place virtually. A space will need to be created for the team to easily collaborate and support each other virtually. The admin team should touch base with the director daily to ensure expectations are met and adequate support is provided.

#### Immediate Racial Equity Impacts to Community or Workforce

- Virtual meetings may require additional advance planning for language access needs. Strategies to include translators over the phone, or translate subtitles for recorded meetings will need to be developed.
- Additionally, considering our County demographics, low income communities of color would be most likely to have barriers to access internet or securing the necessary technology to access internet.
- Creative solutions around translations may be necessary. We may need to work with interpreter services to translate subtitles for recorded meetings or to support someone's engagement throughout a meeting.
- Persons of all ethnicities are more likely to have access to mobile devices.
- We can ensure all technology is mobile friendly.
- For those who may have difficulty engaging with technology, we will be creating different barriers to access. Nevertheless, we will remain accessible through phone and can be called to an in person engagement if necessary. We can be sure to develop language that walks people through tools and helps with troubleshooting. We also could offer assistance through documentation that further supports access

#### Level of Staff Changes and Resource Needs

- Policy and Planning:
  - New technology may need to be adopted. This would require additional training for staff and time for staff to build proficiency with new tools. Also, new technology will require innovation in service provision. New engagement strategies may need to be used to work with community and staff in virtual spaces.



## Service Delivery Design Review

- Administrative Division:
  - Some staff may not be accustomed to working remotely. Management of staff outside of the office and transitioning into remote work settings will require attention. This team is comfortable working together in the same space. Adjustment to teamwork in virtual spaces may be challenging for some.
- Additionally, different tasks may have in person needs across individual staff, roles may need adjustment to minimize social contact in the office.
- New technology may need to be adopted. This would require additional training for staff and time for staff to build proficiency with new tools.
- Use of the virtual receptionist will have significant office impact. Without someone at the desk those at the office will have to rely on virtual receptionist to notify them if someone plans to meet them. Additionally, protocol within the office regarding how staff should respond if they are absent but guest has arrived will have to be adopted. We may need to collect more information on the guest when they arrive (like a phone number to call back), route all notifications through our remotely located receptionist, or offer an option for staff to call a desk phone that the guest could answer.
- For in-person clerking of county board meetings as they are held. If assistance with printing copies onsite is needed, someone will have to be physically present.
- Compliance Office – has similar technological and logistical issues

### DCM Comments

### Review Team Comments

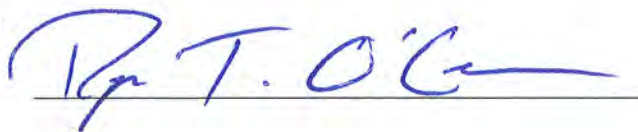
1. When the doors are opened back up, when the receptionist gets a call – who should she be sending them to (i.e. guidance counselor, MFIP, employment, basic services, etc.) especially if it's our most vulnerable communities calling?
2. It's believed that these are the immediate / short term action plans for service delivery and staff changes, if the situation escalates, what will be the long-term plan?

### County Manager comments

Admin staff need to have a model to support the physical proximity to the Incident Management Team 7 days per week. Staffing needs to be addressed at the IMT.

This office should be referenced across the county as the point of last resort for anyone seeking answers or assistance.  
Effective immediately.

County Manager Signature



## Service Delivery Design Review

### Department Finance

#### Proposed Service Delivery Model

- We are currently developing a strategy to equip staff to work offsite. We project to have an implementation plan developed by the end of Tuesday, March 17. The plan will be implemented after approved.
- We will continue to support other departments as we currently do. A modified approach will need to be implemented for bid openings, mail, and live checks for vendors. We currently are developing a list of bids due over the next 4-6 weeks and will develop a plan for the bid openings. Only essential projects will be processed for bids.
- We feel the modified approach will be effective and not impact service delivery. The approaches will be redesigned if there are issues during implementation.
- Supervisors, managers and directors will remain in close contact through Skype and emails, to ensure no interruptions in services occur.

#### Immediate Racial Equity Impacts to Community or Workforce

- No impact for internal services
- N/A

#### Level of Staff Changes and Resource Needs

- Finance Coverage: We are currently working with IS to ensure all staff have access to their necessary roles while offsite. All of the following assume remote work except where noted.
- Vendor payments: All vendors will continue to be paid.
- EFT (ACH), P-Plus, and Positive Pay files to the bank have coverage and will continue uninterrupted.
- Wire transfers will be issued as needed and will remain uninterrupted.
- Checks for vendors will be cut and distributed without interruption. This duty requires onsite activity. We have a rotation of 4 individuals ready to take on this task.
- Payroll will be processed in a timely and accurate manner.
- Solicitations, contracts, and purchase orders will continue to be processed without interruption. Bid openings need to be completed in person, so this duty will have to be continued. The procurement team is working on gathering data for how many bid openings are scheduled over the next 4 – 6 weeks.
- Also, they are developing a plan of action to move forward by limiting the bid openings.
- Support for Applications – Summit, Aspen and Hyperion will proceed without interruption.
- Budget adjustments and questions, journal entries, and year-end information will proceed without interruption. All meetings will be scheduled via conference calls or Skype.

#### DCM Comments



## Service Delivery Design Review

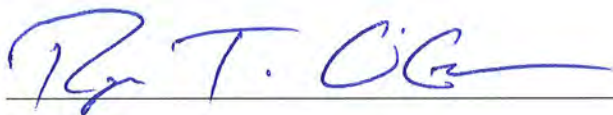
### Review Team Comments

1. What is the racial equity impact for external folks?
2. Are they waiving debt collection, especially for small, minority businesses? Can they prioritize payments going to small businesses first? We understand that this has been an ongoing issue even before COVID-19.
3. Is there a possibility of repurposing staff to assist in this area of ensuring payments? What are the implications to our businesses and vendors?
4. It's believed that these are the immediate / short term action plans for service delivery and staff changes, if the situation escalates, what will be the long-term plan?

### County Manager comments

Strongly agree with review team comments and want a plan that addresses each question. Effective immediately with possible modifications once answers to the above received.

County Manager Signature

A handwritten signature in blue ink, appearing to read "Ryan T. O'Connell", written over a horizontal line.

## Service Delivery Design Review

Department	Library
Proposed Service Delivery Model	
<ul style="list-style-type: none"><li>• Ramsey County Library buildings will remain closed to the public but staff will continue to work in libraries to provide a range of public services.</li><li>• Library materials may be requested online or by phone for lobby pickup seven days a week at libraries in Maplewood, Shoreview, and Roseville.</li><li>• Library due dates will be extended so that no overdue fines will accrue. This will allow patrons who want or need to stay home to do so.</li><li>• A Library account providing instant access to electronic resources may be obtained by phone.</li><li>• Reference, tech help, and reader's advisory services will be available by email and phone seven days a week.</li><li>• Virtual programming will be offered utilizing the Library's website, YouTube channel and social media. These virtual events will support learning and social connections for people of all ages.</li><li>• The Library will increase the purchase and promotion of digital resources.</li><li>• A Library can be considered a site for others to deliver services if needed (meals or child care, for example) by other agencies. The Library staff will be reassigned to another location in that case.</li><li>• The Library will study the feasibility of exterior book lockers for 24/7 holds pickups and will study the feasibility of book delivery for homebound patrons.</li></ul>	
Immediate Racial Equity Impacts to Community or Workforce	
<ul style="list-style-type: none"><li>• We will maintain employment for staff.</li><li>• We will offer continued access by residents to library information, services, and collections.</li><li>• We will offer both virtual and physical access to diverse library resources.</li><li>• We are waiving overdue fines to ensure that vulnerable or ill people do not incur the burden of fines.</li><li>• We are studying the feasibility of delivery to homebound individuals.</li></ul>	
Level of Staff Changes and Resource Needs	
<ul style="list-style-type: none"><li>• These services will engage staff in standard ways with the exception of home delivery. We will redirect circulation staff to collection management tasks. We will shift staff to support the production of streaming content/programs.</li><li>• Most proposed activities are standard delivery practices, but we need to develop new production processes and roles to stream programs or host social media events.</li><li>• We will provide phone access in addition to digital means to librarians.</li><li>• We are waiving overdue fines to ensure that vulnerable or ill people do not incur the burden of fines.</li><li>• We are offering in person access to library materials.</li><li>• We will maintain the Library's Technical Services operation, which processes incoming inventory. Staff will continue buying inventory. Our administrative staff will continue doing accounts payable, payroll, etc.</li></ul>	
DCM Comments	



## Service Delivery Design Review

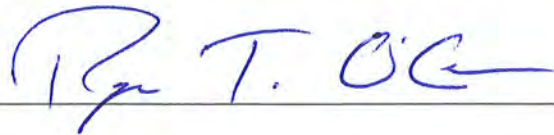
### Review Team Comments

1. Acknowledge that libraries can be a place of refuge - should have a link on their website for resources (shelter, childcare, wifi, etc.)
2. Who is going to manage any protocols around the other groups that are using the facility? What role does the County play to ensure the organizations utilizing the space are meeting liability/precautions necessary around COVID-19?
3. What steps are being made to ensure staff have what they need to address how their physical materials are being circulated.
4. It's believed that these are the immediate / short term action plans for service delivery and staff changes, if the situation escalates, what will be the long-term plan?

### County Manager comments

Please ensure that employee schedules are as accommodating as possible to address childcare/caregiver needs. As we learn more about COVID-19 transmission, please work with Public Health to provide updates to the ~~County Manager~~ County Manager regarding best practices for the safe handling of materials to ensure the safety of staff and patrons. Implement effective immediately with future discussions and planning required around the possibility of basic delivery models for homebound patrons.

County Manager Signature



### Department Parks and Recreation

#### Proposed Service Delivery Model

- Parks & Trails:
  - a. Users can continue to use outdoor facilities through self-directed programming. Parks & Recreation can open gates to park facilities that are typically closed until May allowing the public greater access to outdoor facilities. Bathrooms for these facilities are winterized.
  - b. Parks can order seasonal port-a-potties to provide bathroom facilities.
- Arenas:
  - a. Parks & Recreation is committed to following MDH guidelines. One of the MDH guidelines is for people to maintain a social distance of 6 feet apart. The arena facilities have locker rooms that are not designed for this sort of spacing. Cleaning supply inventory is low and vendors are saying that cleaning supplies will not be available until July. People skating on the ice are also often in close proximity with one another. If the County wants arena facilities to remain open there would be public health risks to customers as the recommended 6 foot spacing would not be enforceable. Parks staff could post information echoing the MDH guidelines to inform people of the public risk. Parks could post restrictions as to the number of people allowed to use locker room facilities at a given time to try to provide adequate spacing for individuals but there would not be staff available to enforce the recommended guidelines. Parks recommendation is to close ice arena facilities until MDH either changes their guidelines that would result in practices that customers could abide by. If MDH lifts restrictions normal operations could resume.
- Tamarack Nature Center Programming
  - a. Outdoor facilities will remain open.
  - b. Port-a-potties can also be ordered for this site. Similar concerns with abiding by the recommended 6 foot social distancing guideline exist for the indoor nature center facility at Tamarack. If the county wants this facility to remain open staff can post MDH information about recommended practices.
- School districts have canceled their programming and other metro Park agencies have closed nature center programming. Golf courses have not begun their operating season for 2020 at this time. Parks will continue to monitor the COVID-19 situation and MDH recommendations and will be preparing recommendations for operations for the beginning of the season.

#### Immediate racial equity impacts to community or workforce

- Major Latino cultural concerts have been canceled by the vendors providing those concerts. Otherwise there have not been identified impacts.
- The increased accessibility to Park facilities will provide vulnerable populations the chance to engage in healthy activities and provide a sanctuary for those needing space and physical and mental health sustainability.

#### Level of Staff Changes and Resource Needs

- Employees who are in need of childcare coverage or who have expressed concern over vulnerability to illness can apply for citrix access and can work from home if the duties of their job allow them to do so.
- Changing from facilitated programming to self directed will have impacts on staff that are employed on an intermittent or temporary basis as the demand for their time will decrease. Several employees are needing to accommodate childcare schedules in light of school cancelations.



DCM Comments

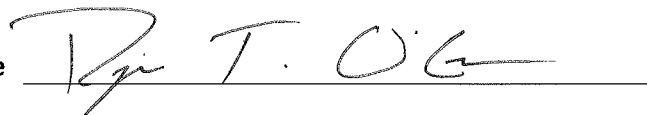
Review Team Comments

1. How is the county addressing the financial aspect for their employees and staff since the closing down of facilities? Are you providing information and resources to employees and seasonal staff regarding employment
2. Based on the recommendations from MDH, we should close the arenas and facilities to prevent large groups gatherings.
3. Consider vulnerable communities (i.e. homeless) and how will they access restrooms and sanitation stations? The Latino community was mentioned in #6, but in #7 they address a bit, but can be contradictory and need to hone in on where porta potties will be located and where access to other restrooms and hand sanitation are.
4. Understand that some of those facilities may not be open because of weather conditions also. Recommendations will be made up until March 23<sup>rd</sup>, but they should be thinking about escalation after March 23<sup>rd</sup> as well.
5. It's believed that these are the immediate / short term action plans for service delivery and staff changes, if the situation escalates, what will be the long-term plan?

County Manager comments

-Align in-person closure programs with libraries, meaning move everything to online. Do as much online programming as possible. Want a head count on staff available to shift to other potential uses. Arenas closed. Agree on additional porta-potties. Implement effective immediately with these changes.

County Manager Signature



### Department Workforce Solutions

#### Proposed Service Delivery Model

- Career Lab:
  - a. Hotline and phone consultation, mailing, leverage website. Staff work hotline to provide support and navigation. Staff put onto special projects to work on preparing additional supports going forward. We can use technology to develop workforce services content online and via social media.
- WIOA Programs:
  - a. Staff work from home to continue to support existing and new clients. Support services will be mailed. Staff would come into the office as needed following a TBD staggered schedule.
- Public Assistance Programs:
  - a. Staff work from home to continue to support existing and new clients. Support services will be mailed. Staff would come into the office as needed following a TBD staggered schedule.
- Employment Guidance Counseling:
  - a. Hotline and phone consultation, mailing of support services and materials. Drop off location for required documents pending potential waiver. Where our services intersect with FAS, we will need a coordinated plan. We'll make employment services applications and employment plans available in hard copy.
  - b. Caller/client email their resume. EGC/A can work on it and send back. Can consult with caller/client on the phone also to give guidance. We can also send out FAQ and Tips and Resources (including community resources) ongoing. Perhaps we create a link on our website or Ramsey will do this to (for community resources). EGC/A will provide assistance and tips to clients on utilizing CareerForce website, as well as information (not advice) in applying for UI when needed. Cash Assistance programs will work in coordination with FAS.

#### Immediate racial equity impacts to community or workforce

- We are ensuring that those who have no access to technology will be able to receive services by phone or paper. Information will be provided for all front facing staff to review and/or learn language line capabilities. We will seek direct input from those receiving services and engage in process improvements as we pivot to new service delivery methods.

#### Level of Staff Changes and Resource Needs

- This is what we anticipate: 52 ECG/EGCAs & 1 Clerk Typist = 1 day in office and 4 days telework per week.
  - a. 4 Supervisors & 1 Manager = 50% Office and 50% telework (will fluctuate based on need),
  - b. Planners and other admin support 100% telework if they choose.
  - c. Director and Managers will work at minimum 50% office and 50% telework.
- Identified staff will work staggered schedules to do necessary work such as copying, scanning, mailing that cannot be done at home. This will primarily impact staff that work directly with clients.
- We do need some waivers from DHS and DEED and hope to get guidance today that would be applied statewide.
- Citrix access may be needed and employee computers may need to be brought home.

#### DCM Comments



## Service Delivery Design Review

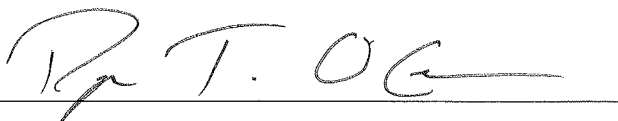
### Review Team Comments

1. How many staff will be working remotely? What does staggered work schedule look like and who does this impact?  
*Ling: This is what we anticipate: 52 ECG/EGCAs & 1 Clerk Typist = 1 day in office and 4 days telework per week. 4 Supervisors & 1 Manager = 50% Office and 50% telework (will fluctuate based on need), Planners and other admin support 100% telework if they choose. Director and Managers will work at minimum 50% office and 50% telework.*
2. Provide a list of WFS services (Career Force, Career Center at East Building, Employment Guidance, etc) that will be modified during this period. How is WFS going to fill in the gaps for wraparound services?  
*Ling: See chart provided.*
3. Is there a way to share WFS protocols for bus passes to share with other county departments?  
*Ling: Yes. I will provide.*
4. Should require that no families will be sanctioned, may need to connect with FAS to ensure their staff are not sanctioning their clients.
5. Regarding mailing – how will they notify those clients? Is the building off-limits to all clients? Are there any signage or resources sharing with clients coming in on where they can go? There are many requirements that clients need (i.e. ID, certification, copies, etc.) how will these services be streamed if there are deadlines they must meet to receive benefits?
6. In the event that this escalates, what is the County's role in providing basic needs (i.e. restaurant workers, mall staff, locations that are closing, etc.)?
7. Recommend that we may need a hotline / navigator so that everyone has someone to call if they show up to a building, especially for our most vulnerable populations.
8. It's believed that these are the immediate / short term action plans for service delivery and staff changes, if the situation escalates, what will be the long-term plan?

### County Manager comments

Agree with review comment #4. County must establish a single point of contact number which that dispatch can "hand off" to workforce. Implement ~~now~~ immediately.

County Manager Signature



### Department Public Works

#### Proposed Service Delivery Model

- Community Engagement Events
  - a. We have canceled all community engagement meetings until after May 1. If the meeting can wait and does not affect project schedule, we will hold the meeting after May 1. For other projects, we will increase our website content to make sure that it is thorough and understandable and have the ability for the public to send comments or an email to the project manager.
  - b. We will also look at more robust mailings to the affected area to give them more detailed information rather than just sending a post card with minimal info about an open house. If it is critical that we need to have an interactive, remote meeting, we will work with communications to get that done. But none of my staff have said that we need to do this yet.

#### Immediate racial equity impacts to community or workforce

- We are ensuring that those who have no access to technology will be able to receive services by phone or paper. Information will be provided for all front facing staff to review and/or learn language line capabilities. We will seek direct input from those receiving services and engage in process improvements as we pivot to new service delivery methods.

#### Level of Staff Changes and Resource Needs

- We have some VPN licenses but not many for the number of staff that we have so we are limited in the number of staff that could work remotely and still have email and network access via VPN, webmail, CITRIX, etc.
- Because our department has a lot of hands on/boots on the ground type of work (i.e. repairing vehicles, cleaning culverts, sweeping streets, construction inspection, etc.), about half of our staff will still need to be present at our building and do not have the capability to work remotely.

#### DCM Comments

#### Review Team Comments

1. What is the impact on contractors, particularly the racial equity on small, minority businesses?
2. What is your department's plan to communicate with non-English speakers via mailings?
3. Community engagement vendors
4. What is your department's protocol for staff who are driving or within close proximity of other staff?
5. What is your department's protocol for when there is reduction in staffing? How will you prioritize your services if staff are reduced?
6. It is unclear what the racial impact would be, it would be nice to have them replicate Ling Becker's form highlighting things that Public Works does (i.e. interaction with public, repairs, etc.).
7. It's believed that these are the immediate / short term action plans for service delivery and staff changes, if the situation escalates, what will be the long-term plan?

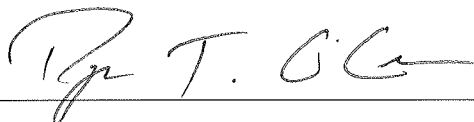


## Service Delivery Design Review

### County Manager comments

I would like specific answers to reviewer comments 2 & 6. Need specific focus on notification / mailing / advertising to communities with high levels of English Language learners. Please begin to prepare for virtual meetings when they are needed. With more complete answers to 2 & 6, this is effective immediately.

County Manager Signature

 Ryan T. O'Connell

### Department **Property Management**

#### Proposed Service Delivery Model

- We have very limited client facing interaction other than that provided by our Information Officers. As long as buildings are open and we need to provide information or screening services, these staff are needed. All other building staff are behind the scenes and have only occasional interaction with clients.
- I have no option to share for screening as long as those buildings are open.
- As for Information Officers, redirection via signage to a telephone help desk could be an option. Building staff needs to be present, to some degree, as long as buildings are open and even if closed.

#### Immediate racial equity impacts to community or workforce

- I see no specific impact on those from different racial and ethnic backgrounds beyond the imbalance in the numbers of residents/customers visiting the facilities in the first place.
- Should Information Officers not be needed we would reduce the labor hours through the contractor. Odds are they would be let go by the vendor unless they could provide coverage for employees at other accounts. Building staff would likely be deployed to other buildings to backfill for employees that are absent, or we could address maintenance/repair projects in their assigned buildings.

#### Level of Staff Changes and Resource Needs

- Our non front-facing staff will be busy whether buildings are open or closed, by attending to building operations or potentially filling in for those that are absent. We don't expect to have any employees out of work as they will attend to projects that have been deferred. Some contractor staff could experience less hours of work.
- We will be mostly business as usual for 90% of our staff. The remainder will tend to deferred projects or fill in for absent staff. This is true whether buildings are open or closed. Remember, many of the major buildings have to remain open: ECC, LEC, RCCF, Medical Examiner, and to some degree the Courts buildings. We have maintenance projects that could occur if other building activities are reduced.
- Building managers will be ensuring the buildings are adequately staffed and monitored whether open or closed. We have already established daily check-ins to monitor staffing levels, re-assign staff, and ensure open and closed buildings are adequately monitored and maintained.

#### DCM Comments

#### Review Team Comments

1. It's believed that these are the immediate / short term action plans for service delivery and staff changes, if the situation escalates, what will be the long-term plan?



## Service Delivery Design Review

### County Manager comments

Effective Immediately. Please raise any capacity issues to Incident Management Teams if more staff are needed to support cleaning. Please keep up to date on changing CDC + MDH building cleaning guidelines as they shift.

County Manager Signature

Rp T. O'Ca

**Department** Community and Economic Development

**Proposed Service Delivery Model**

- ALL CED services/ program delivery can be modified to accommodate social distancing if given the right software (e.g. Microsoft Teams/video conferencing)
- Information can be transmitted electronically. Property information that includes social security information will be transmitted through the traditional channels.

**Immediate racial equity impacts to community or workforce**

- Delays in the vision plan engagement will be impacted, but program/service delivery will not.

**Level of Staff Changes and Resource Needs**

- Staff will need full access to public folders and remote working software to be effective in their roles.

**DCM Comments**

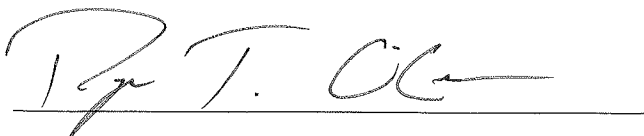
**Review Team Comments**

1. Consider the impact on all businesses
2. What is the workplan to support small, minority businesses and explore resources? - Kari: We are exploring everything that can be done (funding wise) to help keep our small businesses alive. Right now we are acting as Resource Navigator to other agencies such as DEED, etc. We will need to talk internally about what type of assistance/relief we can give small businesses (via tax relief) to ensure there is a business to come back to when this is all said and done.
3. It's believed that these are the immediate / short term action plans for service delivery and staff changes, if the situation escalates, what will be the long-term plan?

**County Manager comments**

*As staff con, need to transition with workforce to planning for the future. Effective Immediately.*

County Manager Signature





## Service Delivery Design Review

### Department Emergency Communications Center

#### Proposed Service Delivery Model

- Public tours of our facility and out-in-the community education and recruitment efforts are the only client-facing services we delivery. All other work with the public is done by phone.
- We have currently postponed all public tours and community events.
- Our work will continue business as usual.

#### Immediate Racial Equity Impacts to Community or Workforce

- No known impact

#### Level of Staff Changes and Resource Needs

- Very limited impact on staff. They are able to continue their work.
- Our Technical (team of 6) and administrative (team of 3) unit could work modified hours from home which would limit exposure to them and our essential 911 Telecommunicators and public safety dispatchers. Our tech team and admin staff would need to rotate someone to complete 911 audio file requests for attorneys and agencies and all phone system analytic stats - which would be prioritized by incoming requests. Our technical team already have the necessary equipment to work remotely, but our administrative team would need 3 ThinkPads.
- The only staff not noted are the Managers (team of 6). It's important that we are present for staff, but also have the capability to work remotely.

#### DCM Comments

#### Review Team Comments

1. What is the plan for operators who work at the 911 Call Center (appropriate distance from each other in workplace)?
2. For the staff who are working from home, what type of work are they working on (access to CJIS data?)?
3. What is your protocol for when staff numbers are reduced?
4. Language/interpreting services?
5. It's believed that these are the immediate / short term action plans for service delivery and staff changes, if the situation escalates, what will be the long-term plan?

#### County Manager comments

*Effective immediately.*

County Manager Signature

*T. T. O'G*

**Department**    **County Attorney's Office**

**Proposed Service Delivery Model**

- Our law office schedules are largely driven by court calendars, which have been significantly reduced in light of the pandemic. We will ensure coverage for all remaining cases. The majority of our child support staff have existing telework capability and have been shifted to teleworking from home full time. Front desk staff at our offices will remain physically present.
- Staff are aware of their obligations to protect sensitive data and we will be sending out another email reminder to them. Via regular check-ins between supervisors and managers, and with staff

**Immediate Racial Equity Impacts to Community or Workforce**

- The steps we are taking will ensure continuance of operations for everyone. We do not anticipate disproportionate impact due to the steps we're taking, but are glad you're asking the question.
- While we are shifting as many services as possible to phone contact, we will be preserving limited in-person services to ensure continuity of service delivery.

**Level of Staff Changes and Resource Needs**

- We are taking all reasonable steps to ensure our staff have adequate tasks to do when working from home. We are emailing out DE&I resources (movies, Ted Talks, books, podcasts) to help keep them busy and further their intercultural skills.
- Through frequent contact with supervisors, they will be assigned work, which will be managed to the best of our ability. We also have the ability to remotely track some staff performance.

**DCM Comments**

**Review Team Comments**

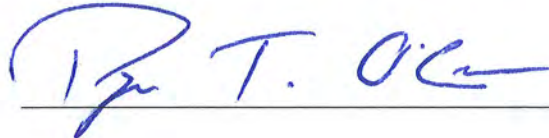
1. Can we extend or waive child support payments during this period? In event that child support payment(s) are extended or waived, who will cover the cost of payments for parents who are receiving government assistance or not?
2. Who (staff) will still be required to come in or not?
3. What is your protocol for when staff numbers are reduced?
4. It's believed that these are the immediate / short term action plans for service delivery and staff changes, if the situation escalates, what will be the long-term plan?



County Manager comments

Effective Immediately. Please ensure adequate relief  
for remaining staff at the front counter.

County Manager Signature

  
\_\_\_\_\_

**Department**    **Medical Examiner**

**Proposed Service Delivery Model**

- We cannot change client-facing services.
- It is all confidential and we cannot change client-facing services.
- There will be no modifications.

**Immediate Racial Equity Impacts to Community or Workforce**

- There will be no impact as we cannot modify client-facing services.

**Level of Staff Changes and Resource Needs**

- It won't impact us as we cannot change client-facing services.
- All staff is necessary in the office. There will be no changes.

**DCM Comments**

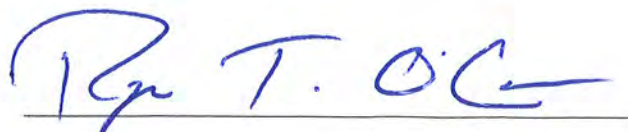
**Review Team Comments**

1. What is the protocol for staffing capacity if there is an increase of their services?
2. It's believed that these are the immediate / short term action plans for service delivery and staff changes, if the situation escalates, what will be the long-term plan?

**County Manager Comments**

Please follow-up with information regarding burials/ceremonies that this office supports for Native American ceremonies.  
Approved - effective immediately.

County Manager Signature





**Department** **Emergency Management and Homeland Security**

**Proposed Service Delivery Model**

- We have few client facing services. The ONLY services that cannot go virtual are those tied to the operation of Command Post during certain public safety incidents with law enforcement, fire, hazmat, and those surrounding disaster response and recovery.
- One staff member is already on call 24-7 for emergency activities, this will limit exposure for all other staff. For all other activities ALL staff have laptops, iPads, MiFi hotspots, county issued iPhones and extended batteries.
- We routinely work remotely at scenes.
- All FT staff have VPN and video conference capability
- We can check work on shared county drives and routine conversations. We also have multiple online systems through the state of MN.

**Immediate Racial Equity Impacts to Community or Workforce**

- All functions will continue. We anticipate no impacts.
- We do not have direct outward facing contact on any regular basis. We also have access to county vehicles and other in case we need to respond to any given scene.

**Level of Staff Changes and Resource Needs**

- We believe that most tasks will happen with minimum impact. We will discontinue in person training and exercising until the CDC guidelines allow. We will postpone community outreach project for the same timeframe.
- Remote work will apply to all staff. We anticipate one or two persons electing to come to the office on an irregular basis at their discretion. We have after hours access to our secure facility.

**DCM Comments**

**Review Team Comments**

1. It's believed that these are the immediate / short term action plans for service delivery and staff changes, if the situation escalates, what will be the long-term plan?

**County Manager comments**

*Effective immediately.*

County Manager Signature

*R. T. O'G*