



COVID-19 BUSINESS OUTREACH PACKET

December 29, 2020



Public Health
Prevent. Promote. Protect.

Montgomery Township Health Department

also serving the Boroughs of

Hopewell ▪ Pennington ▪ Rocky Hill

(908) 359-8211

www.health.montgomery.nj.us/COVID19





**DEPARTMENT OF HEALTH,
ENVIRONMENT, AND VITAL STATISTICS**

Montgomery Township Municipal Building
2261 Route 206, Belle Mead, New Jersey 08502

Phone: (908) 359-8211 Fax: (908) 359-4308

E-Mail: health@twp.montgomery.nj.us

Website: www.health.montgomery.nj.us

EMPLOYER COVID-19 OUTREACH PACKET

December 29, 2020

Dear Employers,

Thank you for all that you are doing in these challenging times to ensure your employees are well and not at risk of spreading COVID-19 to others in the workplace. We truly appreciate all your efforts to modify your businesses and everyday lives to reduce the risk of spreading COVID-19 and to save lives.

It is our goal to keep you, your employees, and patrons healthy and safe. While we are all doing all that we can to keep this virus out of our workplace, with colder temperatures, more interactions occurring indoors, and cases rising in NJ, **the following actions on your part** will help prevent the spread of COVID-19 and help maintain trust between your business and the community:

Actions to help keep staff safe and healthy to ensure your business remains open longer:

1. Notify your local Health Department of any positive COVID-19 cases in your business.
 - The sooner the health department knows, the quicker we can provide guidance and investigate and isolate staff/patrons to help prevent further spread of the virus.
2. Continue employee COVID-19 screenings at the beginning of each person's shift
 - Relying on temperature screenings alone is not effective. Refer to our employee screening form to help you identify cases and close contacts earlier with less disruption.
 - Seating employees 6 ft. apart, while unmasked, eating and talking is not recommended, and can contribute to further spread of COVID-19, especially in shared common areas such as break/lunch/locker rooms.
 - Do NOT allow sick employees to enter the workplace. Follow requirements of applicable leave laws.
 - i. New Jersey workers have the right to paid sick time. Full-time, part-time, & temporary workers are eligible under the law! Visit: mysickdays.nj.gov/ for more information.
 - If you are designated as a critical infrastructure employer, we strongly recommend you institute active-monitoring of identified close contacts reporting to work (i.e. COVID-19 screenings). Temperature screening alone is not sufficient, see attached screening flyer.
3. Review Montgomery Township Health Department's COVID-19 Business Outreach Packet which includes ready-to-use templates: appropriate signage, notification letter of positive cases, return to work clearance letter, and more.

For more information, please call the Montgomery Township Health Department at (908) 359-8211 or visit www.health.montgomery.nj.us/covid19.

Montgomery Township Health Department also serves the Boroughs of Hopewell, Pennington & Rocky Hill.

WHAT TO DO IF AN EMPLOYEE HAS COVID-19

If an employee has tested positive for COVID-19, you must take steps to protect others in the workplace. Promptly separate any sick employees from others and send them home; determine who may have been exposed to the person who tested positive for COVID-19; and educate employees about workplace health and safety guidelines.



Call the Montgomery Township Health Department at (908) 359-8211

Employers are required to notify the Health Department. We will provide you with guidance on what to do. Montgomery Township Health Dept. also covers the Boroughs of Hopewell, Pennington & Rocky Hill.



Identify close work contacts of the person who tests positive for COVID-19.

This includes people who have had at least 15 minutes of cumulative contact within 6 feet of the person who is positive.



Employees cannot test out of quarantine. All close contacts* (regardless of negative test result must quarantine for 14 days)

*does not apply for asymptomatic critical infrastructure workers



Track the number of days that exposed employees stay home to make sure they do not come back to work too soon.

Employees sent home that develop symptoms should stay home until all three of these things are true:

1. They feel better; **AND**
2. It has been 10 days since they first felt sick; **AND**
3. They have had no fever for the last 24 hours, without using medicine that lowers fever.

This means that they may be out of work for more than 10 days.



Screen returning employees to make sure they do not have symptoms

Screen for all COVID-19 symptoms. **Temperature checks alone are not effective.** No medical examination, testing, or official letter is needed to return to work, unless it is the facility's policy.

POSITIVE CASE NOTIFICATION

Employers must notify their Local Health Dept. of positive COVID-19 cases

COVID-19 Infectious Period is 48 hours before positive case develops symptoms or if no symptoms, then 48 hours prior to being tested

Please provide the following information to your local health department as soon as possible:

1. For each Positive Case:

- First and Last Name: _____
- Address: _____
- Phone number: _____
- Date tested: _____
- Symptoms: _____
- Date symptoms started: _____
- Dates worked during infectious period: _____
- Workplace close contact(s) for dates listed above that were within 6ft. for a cumulative of 15 minutes in 24 hrs

2. For each Close Contact:

- First and Last Name
 - Address
 - Phone number
 - Date of last exposure to positive case
 - Age/Date of Birth (if less than 18, provide guardian's name and phone number below)
-

Business Positive Case Notification Template Letter

[Date]

Dear **[Insert Business Name]** friends, family, and patrons,

We have been notified that an employee has tested positive for COVID-19. This letter is being sent to a very large number of people who are connected to **(Company Name)** out of an abundance of caution. Most people receiving this letter likely are not at risk because of this particular case.

We are currently working with the Montgomery Township Health Department to identify people who have been in close contact with our employee, and these people will be contacted directly by email or telephone for contact tracing purposes. In the meantime, the Montgomery Health Department has asked us to advise you of the following:

- If you or a household member have symptoms of COVID-19, such as fever, fatigue, nausea, headaches, loss of taste or smell, you should schedule at test for COVID-19, and isolate until you have received your test results;
- If you have any symptoms of COVID-19, contact the Montgomery Health Department at 908-359-8211 x 2227 to alert them, and mention your association with (company name);
- As always, follow the [recommendations provided by the CDC](#), including social distancing, mask-wearing, and hygiene.

Under the direction of the Montgomery Health Department, we are in the process of adjusting our operations to protect employees and customers. Those changes include the following (as applicable):

- [Instituting remote workforce]
- [temporarily closing workplace]
- [Sanitizing workplace]
- [Notifying landlord/building management]
- [Other]

The safety of employees and customers is our top priority. If you have any information or concerns you feel would be helpful to us in protecting public health, please do not hesitate to contact us.

Sincerely,

,

[name]

[contact information]

EMPLOYEE COVID-19 SCREENING

1. Date:				
2. First and Last Name:				
3. Department:				
4. Have you had a temperature of 100.4F or higher within the past three days?	<input type="radio"/> YES	<input type="radio"/> NO		
5. Have you had any of the following symptoms within the past three days?*				
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Congestion <input type="checkbox"/> Cough (unrelated to allergies) <input type="checkbox"/> Diarrhea <input type="checkbox"/> Eye Drainage <input type="checkbox"/> Fever/Chills <input type="checkbox"/> Nausea <input type="checkbox"/> New loss of sense of taste or smell </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Runny Nose <input type="checkbox"/> Shortness of Breath <input type="checkbox"/> Sore throat (unrelated to allergies) <input type="checkbox"/> Unusual muscle pain <input type="checkbox"/> Unusual fatigue <input type="checkbox"/> Vomiting <input type="checkbox"/> Worsening/consistent headaches <input type="checkbox"/> None of the Above </td> </tr> </table>			<input type="checkbox"/> Congestion <input type="checkbox"/> Cough (unrelated to allergies) <input type="checkbox"/> Diarrhea <input type="checkbox"/> Eye Drainage <input type="checkbox"/> Fever/Chills <input type="checkbox"/> Nausea <input type="checkbox"/> New loss of sense of taste or smell	<input type="checkbox"/> Runny Nose <input type="checkbox"/> Shortness of Breath <input type="checkbox"/> Sore throat (unrelated to allergies) <input type="checkbox"/> Unusual muscle pain <input type="checkbox"/> Unusual fatigue <input type="checkbox"/> Vomiting <input type="checkbox"/> Worsening/consistent headaches <input type="checkbox"/> None of the Above
<input type="checkbox"/> Congestion <input type="checkbox"/> Cough (unrelated to allergies) <input type="checkbox"/> Diarrhea <input type="checkbox"/> Eye Drainage <input type="checkbox"/> Fever/Chills <input type="checkbox"/> Nausea <input type="checkbox"/> New loss of sense of taste or smell	<input type="checkbox"/> Runny Nose <input type="checkbox"/> Shortness of Breath <input type="checkbox"/> Sore throat (unrelated to allergies) <input type="checkbox"/> Unusual muscle pain <input type="checkbox"/> Unusual fatigue <input type="checkbox"/> Vomiting <input type="checkbox"/> Worsening/consistent headaches <input type="checkbox"/> None of the Above			
6. Have you traveled outside of the state of New Jersey within the past 14 days?*	<input type="radio"/> YES	<input type="radio"/> NO		
7. If yes, what state(s) or country(ies) did you travel to?				
8. Over the past 14 days have you been in close contact with any person (someone either in the same household or someone within 6 feet for more than 15 minutes cumulatively in a 24 hour period) who has tested positive for COVID-19?	<input type="radio"/> YES	<input type="radio"/> NO		
9. Over the past 14 days have you been in close contact with any person (someone either in the same household or someone within 6 feet for more than 15 minutes cumulatively in a 24 hour period) who has had symptoms of COVID-19 though they have not been tested?	<input type="radio"/> YES	<input type="radio"/> NO		
10. If yes to exposure, did this exposure happen at work?	<input type="radio"/> YES	<input type="radio"/> NO		



**DEPARTMENT OF HEALTH, ENVIRONMENT, AND
VITAL STATISTICS**

Montgomery Township Municipal Building
2261 Route 206, Belle Mead, New Jersey 08502

Phone: (908) 359-8211 Fax: (908) 359-4308

E-Mail: health@twp.montgomery.nj.us

Website: www.health.montgomery.nj.us

December 29, 2020

COVID-19 RETURN TO WORK

Dear Montgomery Township Employers:

Thank you for all that you are doing to ensure your employees are well and not at risk of spreading COVID-19 to others at the workplace. We truly appreciate all your efforts to modify your businesses and everyday lives to reduce the risk of spreading COVID-19 and to save lives.

In an effort to support workplace safety and economic recovery we want to remind you that employees who had COVID-19 are considered no longer contagious and may therefore return to work if:

- it has been 10 days since their symptoms started AND**
- their symptoms have improved AND**
- it has been at least 24 hours since they have had a fever without the use of fever-reducing medication**

If the employee never had symptoms and tested positive for the COVID-19 virus, they are considered no longer contagious and can return to work 10 days after their positive test (**exception: critical infrastructure**).

Both the CDC and the Montgomery Township Health Department confirm that:

Employers are not required to request a medical note for clearance to return to work or a negative COVID-19 test results from employees who were diagnosed with COVID-19 before allowing employees to return to work. Requesting employees provide a medical note or proof of negative COVID-19 virus tests after they have been diagnosed creates a backlog on the healthcare and public health system, is unnecessary, delays return to work, delays laboratory reporting, and causes strain on testing availability for others who need to be tested.

Your employees who had COVID-19 may print this letter out to serve the purpose of:

- Showing proof that they can return to work as long as they meet the criteria above

Please refer to the following resources for more details:

- General CDC guidance for employers: www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html

Thank you for all that you do to keep our community healthy,

Stephanie Carey, MPH, REHS, HO

Montgomery Township Health Department Health Officer



**DEPARTMENT OF HEALTH, ENVIRONMENT, AND
VITAL STATISTICS**

Montgomery Township Municipal Building
2261 Route 206, Belle Mead, New Jersey 08502

Phone: (908) 359-8211 Fax: (908) 359-4308

E-Mail: health@twp.montgomery.nj.us

Website: www.health.montgomery.nj.us

Returning to Work for Those Who Have Had COVID-19*

December 29, 2020

Your employee may return to work if they respond "Yes" to the following questions (as applicable):

1. Have you completed your 10-day isolation?
 - Yes, I have completed my 10-day isolation period.
 - No, I am under isolation until: _____.

If your employee NEVER had any symptoms at all from COVID-19:

2. Has it been more than 10 days, since you had a COVID-19 positive test result?
 - Yes, it has been more than 10 days, since I tested positive for the COVID-19 virus.
Date of positive test: _____
 - No, it has not been more than 10 days, since I tested positive for the COVID-19 virus.

If your employee had symptoms from COVID-19:

1. Has it been more than 10 days since your symptoms started?
 - Yes, it has been more than 10 days since my symptoms started.
Date symptoms started: _____
 - No, it has not been more than 10 days since my symptoms started.
2. Have your symptoms improved?
 - Yes, my symptoms have improved.
 - No, my symptoms have not improved.
3. Has it been more than 24 hours since your last fever of 100.4°F or more without the use of fever-reducing medications?
 - Yes, it has been more than 24 hours since I had a fever without fever-reducing medications.
 - No, it has not been more than 24 hours since I had a fever.

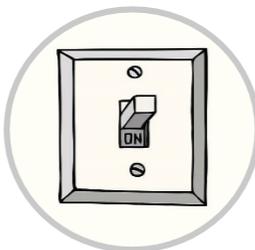
Employee Name: _____

Employee Signature: _____

HIGH TOUCH SURFACES YOU SHOULD REGULARLY BE CLEANING



**Doorknobs
Handles**



**Light
Switches**



**Bathroom
Sinks &
Faucets**



**Kitchen
Sinks &
Faucets**



Toilets



Tables



**Desks
Workstations**



Countertops



**Computers
Keyboards
Mouse**



Phones



**Cash
Registers**



**Payment Pads
Stylus**

CDC Recommended

Bleach Solutions



**5 Tablespoons
Bleach**

**1 Gallon
Water**

OR



**4 Teaspoons
Bleach**

**1 Quart
Water**

**Bleach solutions are
effective for up to**



Disinfecting Electronics



- Remove visible contamination if present.
- Follow the manufacturer's instructions for all cleaning and disinfection products.
- Consider use of wipeable covers for electronics.
- If no manufacturer guidance is available, consider the use of alcohol-based wipes or sprays containing at least 70% alcohol to disinfect touch screens.
- Dry surfaces thoroughly to avoid pooling of liquids.

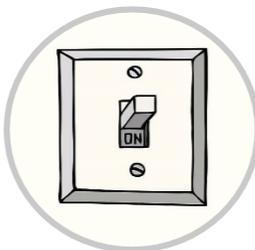
COVID-19

Elimine la contaminación visible si está presente. Siga las instrucciones del fabricante para todos los productos de limpieza y desinfección. Considere el uso de cubiertas limpiables para la electrónica. Si no se dispone de orientación del fabricante, considere el uso de toallitas o aerosoles a base de alcohol que contengan al menos un 70% de alcohol para desinfectar las pantallas táctiles. Seque bien las superficies para evitar la acumulación de líquidos.

ALTAS SUPERFICIES TÁCTILES CUALES SE DEBEN LIMPIAR REGULARMENTE



LLAVEROS



CONDUCTORES DE LUZ



LAVA MANOS DE Baño



FREGADEROS DE COCINA



Toilets



MESAS



ESCRITORES



Encimeras/ MESETAS



Computadoras, Teclados, Y Ratón



CELULAR



CAJA REGISTRADORA



Almohadillas de pago

Recomendaciones del CDC

SOLUCIONES DE CLOROX



5 Cucharadas DE CLOROX



1 GALON DE AGUA

OR



4 Cucharaditas Bleach



1 CUARTO DE AGUA

Las soluciones de Clorox son efectivas hasta



Desinfectar la Electrónicas



- Elimine la contaminación visible si está presente.
- Siga las instrucciones del fabricante para todos los productos de limpieza y desinfección.
- Considere el uso de cubiertas limpiables para la electrónica.
- Si no se dispone de orientación del fabricante, considere el uso de toallitas o aerosoles a base de alcohol que contengan al menos un 70% de alcohol para desinfectar las pantallas táctiles.
- Seque bien las superficies para evitar la acumulación de líquidos.

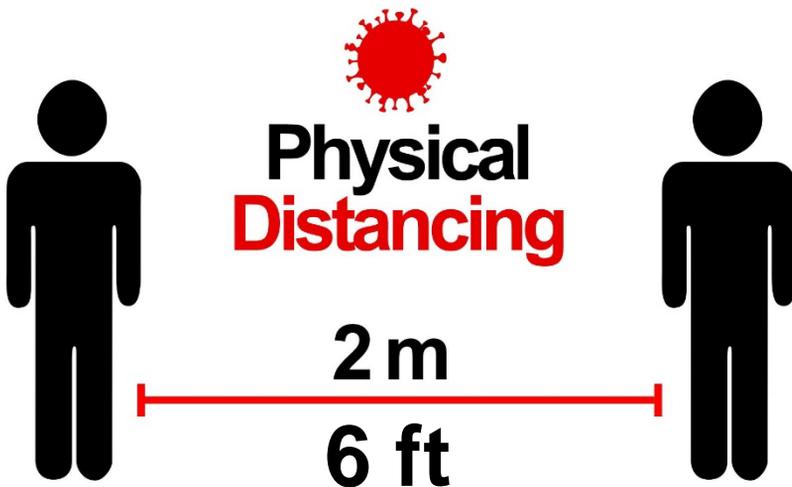
Last Updated: 5.16.20

STOP!

To Help Prevent The Spread Of Covid-19 &
For Your Safety and The Safety of Others

Do not enter if you are sick. Stay Home.

**Face covering
required
to enter**



**Physical
Distancing**

**Maintain
6ft
distance**

Last updated: 5.14.20



Montgomery Township Health Department
(908) 359-8211 • health.montgomery.nj.us/covid19



PARE!

Para ayudar a prevenir la propagación de Covid-19 y para su seguridad y la seguridad de los demás

No entre si está enfermo. Quédese en su casa.

**Se requiere
revestimiento facial
para entrar**



**Mantener la
distancia de 6
pies**

Last updated: 5.14.20



PUBLIC HEALTH
Prevent. Promote. Protect

Montgomery Township Health Department
(908) 359-8211 ▪ health.montgomery.nj.us/covid19



COVID-19

KEEP PRIVATE GATHERINGS SAFE

For Your Safety & The Safety of Others



Host outside, if possible, with chairs and tables spaced apart



Set up hand washing stations (water, soap, & sanitizer)



Use easy to reach disposable paper towels



Safely greet guests with a wave, a nod, or a bow. Avoid close contact such as hugs, elbow bumps.



Wear masks when you're less than 6 feet apart.



Limit who serves & handles food. Avoid self-serve buffet set up.

Considerations for Hosts

BEFORE GATHERING:

- Limit the number of guests you invite.
- Avoid indoor gatherings as much as possible.
- Consider virtual or outdoor event for family gatherings, parties, prayer service, etc.
- Inform guests to mask, 6 ft. distance, & wash hands often.
- Remind guests to stay home if sick.
- Arrange tables & chairs to allow for at least 6 ft. distancing.

DURING GATHERING:

- Keep a list of attendees for future contact tracing.
- Minimize close contact. Safely greet guests with a wave, a nod or a bow. Avoid hugs, elbow bumps.
- Encourage guests to bring their own food and drinks.
- Avoid self-serve buffet style food, or designate key people as servers.
- Avoid sharing items w/ those outside household group
- Encourage guests to come to you with any safety concerns

How do I stay safe when attending a gathering?

DON'T POLICE OTHER PEOPLE'S BEHAVIOR UNLESS YOUR SAFETY IS AT RISK.

DO ASK A PERSON WITH AUTHORITY TO HELP ENFORCE PANDEMIC RULES.

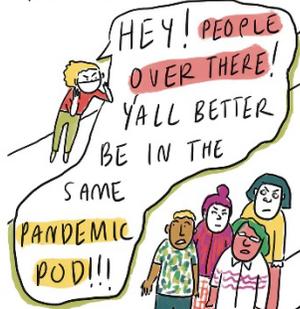
DO WHAT YOU CAN TO PROTECT YOURSELF. REMEMBER: YOU CAN'T FORCE PEOPLE TO CHANGE THEIR BEHAVIOR, BUT YOU CAN CONTROL YOUR OWN.

DO HAVE A CONVERSATION BEFORE GOING TO A SOCIALLY DISTANCED GATHERING TO SET UP SOME GROUND RULES.

A POCKET GUIDE TO COVID-19 ETIQUETTE WITH Elaine Swann



By MALAKA GHARIB



DO USE "WE" AND "US" WHEN MAKING A REQUEST. IT SHOWS MUTUAL CONSIDERATION FOR EVERYONE'S SAFETY.



DON'T LECTURE OTHERS ABOUT PANDEMIC SAFETY. IT MAKES PEOPLE LESS WILLING TO COMPLY WITH YOUR REQUEST.



BONUS ADVICE: DO KEEP YOUR USED MASK OFF THE DINING TABLE.



Malaka Gharib/NPR

Considerations for Guests

BEFORE GATHERING:

- Call host to ask how you and others can stay safe
- Stay home if you are sick
- Do not bring any uninvited guests
- Create a safety plan and discuss it with your household
- Bring your own PPE (ex: masks, sanitizer), and consider bringing your own food & drinks

DURING GATHERING:

- Provide your contact information to the host
- Wash your hands before serving or eating food
- Limit close contact with non-household contacts
- Do not share food or reusable items like silverware, napkins, straws, or tablecloths
- Let host know of any safety concerns

MASK. PHYSICAL DISTANCE. WASH HANDS OFTEN.

August 10, 2020



Montgomery Township Health Department
 also serving the Boroughs of Hopewell • Pennington • Rocky Hill
(908) 359-8211 • health.montgomery.nj.us/COVID-19



Public Health
 Prevent. Promote. Protect.

Montgomery Township Health Department

To Help Prevent the Spread Of COVID-19
& for Your Safety and the Safety of Others

NO MASK?



NO MEETING.

6.25.20

DETENGA LA PROPAGACIÓN DE LOS MICROBIOS

Ayude a prevenir la propagación de enfermedades respiratorias como el COVID-19

Evite el contacto cercano con las personas enfermas.



Cúbrase la nariz y la boca con un pañuelo desechable al toser o estornudar y luego bótelos a la basura.



Limpie y desinfecte los objetos y las superficies que se tocan frecuentemente.



Evite tocarse los ojos, la nariz y la boca.



Quédese en casa si está enfermo, excepto para buscar atención médica.



Lávese las manos frecuentemente con agua y jabón por al menos 20 segundos.



[cdc.gov/COVID19-es](https://www.cdc.gov/COVID19-es)

STOP THE SPREAD OF GERMS

Help prevent the spread of respiratory diseases like COVID-19.

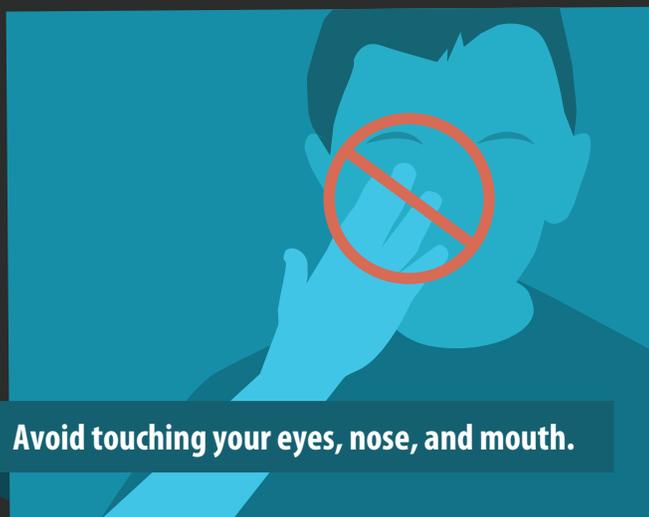
Avoid close contact with people who are sick.



Cover your cough or sneeze with a tissue, then throw the tissue in the trash.



Avoid touching your eyes, nose, and mouth.



Clean and disinfect frequently touched objects and surfaces.



Stay home when you are sick, except to get medical care.



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



cdc.gov/COVID19