



Background: Throughout the response, there was significant confusion across health systems and communities with regard to C-19 community guidance and C-19 health care guidance. This document only includes examples for community public buildings, institutions, and tribal or independent enterprises. This IS NOT applicable in health care settings.

This tool assumes that Tribes initiating the reopening process meet the gating criteria established by the Tribe or other desired authority. These generally include:

- 1) downward trajectory of number of new cases for at least 14 days;
- 2) rapid diagnostic testing capacity is sufficient to test, at minimum, all people with COVID-19 symptoms, including mild cases, as well as close contacts and those in essential roles;
- 3) the health care system is able to safely care for all patients, including providing appropriate personal protective equipment for healthcare workers; and
- 4) there is sufficient public health capacity to conduct contact tracing for all new cases and their close contacts.

INSTRUCTIONS FOR USING RISK ANALYSIS TOOL:

Review Guidance Document before using the tool.

Evaluate potential for risk among the following categories using the hazard specific scale. Assume the worst case scenario. Expect the risk level to adjust as mitigation measures are identified and implemented and/or local conditions change.

Hazard Scale: 3 = High, 2 = Moderate, 1 = Low, 0 = N/A

Issues to consider for **exposure potential** include, but are not limited to:

- * Length of **time** in facility and around other people: 0 = < 10 min; 1 = 10 min - 1 hr.; 2 = 1 hr. - 8 hrs.; 3 = congregate living
- * Ability to maintain > 6 feet **distance** between people: 0 = no contact; 1 = > 6'; 2 = within 6' contact limited circumstance; 3 = within 6' constant or most of the time in facility
- * Number of contacts or **size of population**: 0 = no other people; 1 = < 20 persons; 2 = 20-50 persons; 3 = > 50 persons
- * **Public Health Factor**: Use local health jurisdiction metrics to determine level of overall risk or disease prevalence by area (infection rate, rate of new cases, hospitalization rate): 0= no risk; 1- low risk; 2- moderate risk; 3 high risk
This will be highly variable by area and will need to be routinely adjusted to reflect changes in local conditions

Issues to consider for adverse outcomes or **consequences** include, but are not limited to:

The potential **health impact** is the risk that staff or customers could contract illness and precipitate community spread. The larger the gathering the higher the potential for health impact is: 0=no risk; 1=low risk; 2=medium risk; 3=high risk

The potential **service impact** is the effect that disease spread while in the facility may have on the business: 0=no risk; 1=low risk; 2=medium risk; 3=high risk

- Consider:
- (1) Financial impact to establishment or tribe, including loss of revenue and/or imposition of fines and legal costs
 - (2) Loss of business customers or community support
 - (3) Discredit to reputation or public image
 - (4) Loss of workforce due to unwillingness to return to work or loss of workers due to illness

- * **Susceptibility of Population at Risk** is the percentage of those using services or patronizing the business who represent an at-risk group as defined by the CDC (age, health status/immuno-suppression, etc.): 0=none; 1=< 10%; 2= 10-25%; 3= > 25%

Things to consider for when evaluating and monitoring:

Follow the recommended monitoring or evaluation scheduled as feasible or create your own. The key is to be consistent and routine with evaluation and monitoring

A facility's risk score is not fixed, it can fluctuate depending on a number of factors such a change in the local infection rate or the implementation of effective mitigation or protective measures

This tool accounts for the implementation of mitigation measures as a method of risk reduction, so you can track your progress and effectiveness

The factors with * next to them are those most likely to adjust regularly as local conditions change and mitigation measures are identified and implemented. Change values in the tool as necessary

Some things to consider when using Risk Analysis Tool to evaluate and adjust risk levels:

- Are mitigation or modification measures implemented effectively and enforceable?
- Have new concerns, risks, or challenges emerged or been observed?
- Are mitigation measures evaluated and adjusted as needed on a day-to-day basis?
- Has the local infection level or threat changed?
- Have any cases or potentially infected persons entered the facility?
- Have there been any changes to the federal or tribal requirements or regulations?

See facility-specific guidance documents for mitigation and modification measures to consider. Adapt recommendations as necessary and feasible

BUSINESS	RISK FACTORS						RISK RATING Relative Threat 0 - 100%	RISK CATEGORY I - III
	LIKELIHOOD			CONSEQUENCE				
Type	Time	Distance	Size of Population	Public Health Factor*	Health Impact	Service Impact	Susceptibility of Population at Risk	
Restaurant, embedded within a Casino, with exterior and interior entry/egress	2	2	3	1	3	3	3	66.67% II
Casinos	2	3	3	1	3	3	3	75.00% III
Restaurants (stand alone)	1	2	2	1	2	2	3	38.89% II
Salon, spas, saunas and other personal care	2	3	1	1	3	2	2	45.37% II
Gym/Fitness centers	1	1	2	1	2	1	1	18.52% I
Museums	2	1	1	1	2	1	2	23.15% I
Hotels	3	1	2	1	2	3	3	51.85% II
Camp grounds	3	1	2	1	2	2	1	32.41% I
Outdoor venues (concerts, sports, Pow Wow grounds)	2	2	3	1	3	1	3	51.85% II
Indoor large venues (concerts, sports)	2	3	3	2	3	2	2	64.81% II

RISK =	LIKELIHOOD × CONSEQUENCE
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MONITORING & EVALUATION FREQUENCY		
LOW	III: 0 - 33%	Once a month
MODERATE	II: 34 - 66%	Bi-weekly
HIGH	I: 67 - 100%	Once a week

* factor determined by prevalence of disease within the local area (use information from local health jurisdiction)



NORTHWEST PORTLAND AREA
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