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INTRODUCTION

Heritage Christian Services responded to the COVID-19 global pandemic to ensure safety of the people we support and Heritage Christian Services employees.

- A team of Agency senior leadership was convened to serve on the Coronavirus task force beginning March 10, 2020.
- Heritage Christian Services drafted policy and procedures related to COVID-19 in accordance with guidance from OPWDD, NYS Department of Health and the Center for Disease Control.
- Established a Coronavirus Hotline (585) 340-2050 which is utilized as a resource to employees and a mechanism for reporting and monitoring symptoms and diagnosis of COVID-19. Employees use this hotline to communicate symptoms, travel, and exposure to an infected person.
- HCS suspended providing some services, based on guidance from OPWDD. For people who receive residential services they began to shelter in place, effective 3/13/2020. As the region started to reopen and OPWDD guidance was issued HCS has implemented the following changes: starting on 7/17/2020 people who receive residential services were supported in being able to go on home visits and do activities outside of their homes; day habs were able to reopen once a safety plan/attestation was in place as of 7/30/2020. Free Standing Respites (FSR) reopened 10/5/2020. Due to spike in infection rate as of 1/4/2020 all individuals living in our IRA's will receive day hab services or community hab R while at home.
- Resources and updates are shared with the community on our website <u>Heritage Updates</u>
- Developed a section of our website with information for employees Information for Staff

INFECTION CONTROL

- Adjusted schedules in the residential homes to limit the number of employees working, which reduces the potential for exposure to COVID-19; At day hab no more than 15 people receiving services at program on any given day (not including staff). FSR reopening to 50% capacity.
- Employees will not work at more than two programs within a two-week period at designated sites (see manager for clarification) (exceptions can be made with Associate Director approval).
- Homes under quarantine will only have staff assigned to that program (exceptions can be made with Associate Director approval).
- Developed <u>Tips for Staying Healthy Residential</u> which includes education to all employees on the importance of monitoring for symptoms of COVID-19.
- Employees are expected to monitor symptoms daily, including days off.
- All employees will be screened at the beginning of each shift and complete appropriate screening log.
 Day Hab Attendance/Screening Log
 Screening Reference/symptoms of exposure

- Day Habs will post signage <u>Tips for Staying Healthy Day Hab</u> throughout the day hab sites re critical COVID-19 transmission prevention and containment, with at least 2 placed strategically and more as needed.
- Developed a tool for families to utilize when a person supported is away from their home with family <u>Tips to Stay Healthy on Home Visits</u>.
- Upon arrival to work, employees wash their hands with soap for at least 20 seconds (if unable to wash their hands use of hand sanitizer can be utilized). Continue hand washing throughout shift as outlined in <u>Nursing Service Plan Infection Control.</u>
- Hand sanitizer is available in all bathrooms, bedrooms, and living and dining spaces. May not be present in all locations when contraindicated for person supported.
- It is important that we are supporting people who have symptoms even with a negative test result by ensuring they are away from their peers or family to prevent the potential spread of any virus.
- Employees are encouraged to choose clothing that they will only wear to work. They will start their shift wearing clean "work" clothes, then will be encourage to change into clean non-work clothes before leaving their shift. They will put their "work" clothes in a bag and launder them between each shift.
- Employees will be thoughtful about footwear i.e. designating certain shoes for indoor use and others for public and leave outside shoes at the door when entering a residential home.
- Employees will keep their hands away from their nose, eyes and mouth. They will cover their coughs and sneezes with a tissue and throw the tissue in the trash. If a tissue is unavailable, cover cough with the inside of elbow and wash hands.
- Employees will maintain social distancing (stay six feet away from others). They will also encourage the people that we support to do so as well. Will use physical markings to support social distancing and/or the flow of traffic and identify exit/entrance as needed.
- Heritage Christian established isolation sites that are utilized to support individuals who live in our homes with positive COVID-19 diagnosis. In addition, at each day hab/FSR an area within the program has been identified to separate an individual that is showing s/s of illness until they are able to be picked up to go home (location will be identified on each site-specific safety plan).
- When possible/safe regarding individuals health sites should open windows to support ventilation with outside air.

PRE-ENTRY/PRE-PARTICIPATION SCREENING and MONITORING THROUGH THE DAY (DAY HAB ONLY):

- All employees and people served will be screened prior to entry into the site. There will be a designated staff to complete and document the daily screenings Day Hab Attendance/Screening Log, this person will be identified each day on the site schedule. The staff doing the screening will wear gloves along with their face masks for all screenings. All screening documentation will be kept in a secured/locked area.
- For morning transportation, prescreening will occur prior to boarding van and be completed by van driver. This will be documented on Day Hab Attendance/Screening Log located in each van along with gloves and thermometer.

- Employees and people served that pass pre-screening will be reminded by the screener to self-report (for those that can) any changes they experience throughout the day to the DHM or shift lead.
- If employee and/or a person served does not pass the pre-screening they will be directed to return home/depart immediately (if they are unable to depart immediately will safely manage separation from others that are not showing any s/s of illness). In addition will direct employee/person served (their family) to contact their healthcare provider (employees will also be directed to contact HCS hotline). Person completing screening will then initiate emergency calling for additional follow up for both individuals/employees. Screener will provide employee/individual (their family) with written info on healthcare and testing resources. <u>COVID instructions for DH</u>
- A site safety monitor will be identified each day to monitor continuous compliance with all aspects of the site safety plan (this person will also be identified on the daily schedule <u>DH Daily Schedule</u>).

During ALL MEAL/SNACK TIMES the following must be followed (*will post

Potential Exposure Poster in visible location):

- Proper Hand Hygiene is required at all times before and during meal/snacks.
- During meal/snack times everyone actively eating, including staff and person supported, must maintain six feet of distance at all times, regardless of vaccination status. To accomplish distancing, staggering times and eating at separate locations may be required.
- Unvaccinated individuals with known exposure or any individuals showing active symptoms of COVID-19 will be encouraged to eat in a separate area from housemates and staff.
- Individuals are able to prepare their own meal/snack. Staff will provide support, as needed, with safety and sanitation.
- Individuals can participate in meal preparation and serving of meals for others if they are able to remain masked, wear gloves and can remain socially distant when preparing and serving meals.
 - \ast This can only occur when the home is not under isolation or quarantine.
- NO Family Style dining at this time (no serving dishes on table with everyone helping themselves); in the residence's meals are served buffet style/from the kitchen with one person preparing each plate; at day hab everyone must bring their own food.
- Gloves must be worn by everyone that is preparing and serving food for others or getting food shared by others.
- Anyone unmasked must maintain 6 feet distance from others that are unmasked (people supported and staff).
- If employees take off their surgical mask to eat, they must NOT set the mask down on a surface, but instead put the mask in a paper bag marked with their name and store it away from any clean masks in the home. Staff to ensure they are at least six feet apart while eating.
- When supporting individuals with meal/snack (serving and assisting in eating) staff must wear gloves, face shield and remain masked at all times (If assisting someone to eat it will require that staff eat their meal at a separate time.
- Minimize the number of dishes used (no serving dishes on table).
- Everyone should be clearing/cleaning their own dishes to the extent possible or use one time-use paper products.
- All surfaces/items used during meal/snack must be sanitized/disposed of as soon as possible after meal/snack.

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CLEANING

Employees understand that maintaining a clean environment is essential. Enhanced cleaning procedures, as outlined below, were implemented in addition to the standard cleaning/laundering practices that are already in place. Cleaning products used per manufacturer's instructions with a product that is specific to killing coronavirus, i.e. Multi-purpose peroxide or QUAT).

Physical Plant:

- Bathrooms and personal care areas are cleaned and **sanitized after all uses** (including toilet handle, light switches, faucet, sink, counter, etc.).
- Frequently touched/high contact surfaces such as tables and chairs, landline/cordless phone(s), counters should be sanitized after each use and refrigerator, stove surfaces, faucets, handles, light switches, handrails doorknobs, desk surfaces, are cleaned and sanitized **at least every shift.**

Cleaning Computers and Electronic Devices:

Instructions for cleaning desktop monitors, laptop screens, smartphone, smartwatch and tablet screens (to be completed after each use):

- 1. Shut down the computer; phones can remain on.
- 2. For laptops, disconnect power to the laptop or monitor.
- 3. Apply the cleaning solution (rubbing alcohol and water) to the microfiber cloth. (Do not pour the cleaning solution directly on the screen).
- 4. Gently wipe the screen with the cloth containing the applied solution.
 - For laptops, hold the center of the back of the laptop screen with your opposite hand so as not to bend and damage the screen while cleaning.
- 5. Gently wipe the screen with a dry cloth.
- 6. If any marks remain, moisten the cloth with your cleaning solution, and then gently wipe the cloth across the display in one direction, moving from the top of the display to the bottom.
- 7. Be sure the LCD screen is completely dry before closing the laptop lid or powering the laptop or desktop monitor on.

Instructions for cleaning keyboard and mouse:

- 1. Shut down the computer.
- 2. Apply the cleaning solution to the microfiber cloth (<u>Do not</u> pour the cleaning solution directly on the keyboard or mouse).
- 3. Gently wipe the keyboard and mouse with the cloth containing the applied solution.
- 4. If any marks remain, moisten the cloth with your cleaning solution and wipe again.
- 5. Be sure the keyboard and mouse are completely dry before closing the laptop lid or powering the laptop or desktop on.

Cleaning at Day Hab/FSR when someone has s/s of illness, the following will be implemented:

- Close the area used if possible (or limit access to a particular area if unable to close, if possible)
- Open the windows if possible
- Wait 24 hours to clean/disinfect, however if unable to wait 24 hours clean/disinfect as needed sooner
- If area was closed will reopen once cleaned

PERSONAL PROTECTIVE EQUIPMENT (PPE)

Universal Masking: Heritage Christian implemented universal masking procedures on April 7, 2020.

- Employees should wear a surgical mask at all times while working <u>regardless of vaccination status</u> with the exception of eating or brief breaks as outlined below. Each staff is provided a surgical mask at the beginning of their shift, or every 12 hours.
- If employees take off their surgical mask to eat, they must NOT set the mask down on a surface, but instead put the mask in a paper bag marked with their name and store it away from any clean masks in the home. Staff to ensure they are at least six feet apart while eating.
- Remember, always take the mask off using the ear loops, do not touch the outside of the mask, and wash your hands as per protocol: wash your hands, put your mask on or take your mask off, and wash your hands again.
- Employees may take a brief mask break throughout their shift. Mask breaks should be away from others and staff should follow protocol for removing and storing mask. (Mask breaks should be done outside or in a room by yourself. This may include the restroom, office or basement.)
- IT IS CRITICAL THAT SURGICAL MASK IS WORN CORRECTLY ALL THE TIME INCLUDING WHEN YOU ARE ALSO WEARING A FACE SHEILD.

Note: If a surgical mask is not available, employees may wear a cloth mask until surgical masks become available. If this occurs, notify a supervisor as soon as practical to obtain additional surgical masks.

Masks for people supported:

- Wear mask when going to any type of medical appointment, regardless of vaccination status. If at all
 possible, the person should also wait outside or in the car until the physician is ready to see them.
- Wear mask during all personal care or any other activity (except during bathing) when unable to maintain 6 feet distance from staff/others, regardless of vaccination status (refer above re guidance during meals/when eating).
- Going out in public- stores or supportive services of any kind including work/day hab person supported will wear a mask, regardless of vaccination status. A mask should be carried with you at all times outside of the home even if just going for a walk.
- Label each mask with person's initials (on inward facing, not outward facing part of mask).
- Label a paper bag with person's initials.
- Masks must be worn during day hab, regardless of vaccination status (however, if there is an individual that won't tolerate a mask refer to site specific safety plan).
- Masks should be replaced as frequently as needed if soiled/wet; if surgical mask used this should be replaced if going into another HCS location and/or at minimum every 12 hours if used continuously (surgical mask should not be worn more than one day).

When not in use, masks will be stored in clean paper bag labeled with initials. Do not set down on surfaces; store in individual paper bag.

Acceptable masks for those we support include surgical masks and cloth mask. Beyond these types of masks, the team can work with the person to find masks with tie strings verses ear loops, head bands with buttons to

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stretch the ear loops of the mask around to possibly create additional comfort (masks with one-way valve vents are NOT acceptable).

Mask Desensitization Tool

Instructions for putting on and taking off mask:

- 1. Wash your hand for 20 seconds with soap and water or if unavailable use hand sanitizer to clean hands.
- 2. Put mask on by the ear loops placing ear loops around each ear. Be sure to cover nose and extend under chin.
- 3. Once mask is in place on face, tighten nasal bridge wire, if applicable.
- 4. Wash your hands again.
- 5. To take mask off do so by removing mask using ear loops. Do not touch the front of the mask when removing it.
- 6. Place the mask in a labeled paper bag if you are going to wear the mask again i.e. the mask was taken off to eat.
- 7. Always wash your hands again after removing your mask.

Laundering Cloth Masks: Launder masks separate from other laundry in hot water using laundry detergent whenever soiled or minimally daily on overnight shift/at the end of the day for day hab using washing machine; or hand wash with hot water and detergent, scrubbing for a minimum of 20 seconds. Tumble dry on high heat.

Face Shields: Heritage Christian implemented the use of Face Shields on November 6, 2020. The available data suggests that face shields offer health care workers an extra layer of protection against the transmission of Covid -19 and influenza. Face shields covering the face can prevent respiratory droplets from spreading when worn over a mask and provide additional coverage to the eyes, nose and mouth. Face shields are an extra layer of protection and therefore a surgical mask must always also be worn under the face shield.

Face shields are to be worn when employees are providing personal care to include personal hygiene, medical administration, bathing and dressing, close support at mealtimes. Also, when planned activities are within 6 feet for more than 10 minutes. Face Shields may be worn outside of these times at the employee's discretion. Face Shields are not worn while driving.

Each staff member will be provided with a face shield for their personal use. There is no sharing of face shields. Each face shield will be clearly marked with the employee's full name. Each employee will also be provided a brown paper bag to store their clean Face Shield when not in use. The brown paper bag will also be marked with the staff's name for easy identification.

Putting on a Face Shield: Wash or sanitize your hands, identify the brown paper bag with your name on it, and remove your clean face shield from the paper bag it is stored in.

Before putting on your face shield inspect your face shield to be sure it is not warped, damaged or cracked. If your face shield becomes damaged do not try to fix it. Discard it and get a new one.

How to wear your face shield: Face shields are easy to wear. They are made up of a plexiglass or plastic panel that curves around the face and an elastic band or an adjustable strap that holds the panel in place. To ensure you are properly protected while wearing one the panel of your face shield should extend well past the chin and

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curve around the sides of your face. There should also not be any gaps between your forehead and the shields headpiece.

Taking off face shields:

Taking of Face Shield- tip your head forward slightly, grab the strap at the temples and pull it forward over your head, which will let the face shield fall from your face. Avoid touching eyes, nose of mouth when removing it.

Cleaning Face Shield- While wearing gloves carefully wipe the inside followed by the outside of your face shield using warm soapy water or disinfectant solution then wipe the inside and outside of the face shield with water and a paper towel to remove any residue before thoroughly drying with a paper towel before placing your clean face shield back into your brown paper bag already marked with your name.

PPE Instruction Video

Donning and Doffing PPE

Employees who support people who test positive for COVID-19 will be provided with additional PPE, which will include N-95 masks, face shields or goggles, and gowns. Enhanced training will be provided on the use of these PPE. <u>NSP- COVID-19 Isolation Precautions.</u>

Personal Protective Equipment (PPE) Inventory and Central Inventory Locations

- Heritage Christian Services implemented two Central Inventory Locations in Rochester and the WNY region
- Established menus and routine food delivery to residential homes, which reduces the need for employees to shop
- All programs will utilize McKesson to obtain supplies. On rare occasions, supplies may be provided by the CIL.

CORONAVIRUS TOOLKIT

TRAINING

Heritage Christian Services' employees are trained in infection control and basic standard precautions in the course of their regular training. Employees received additional training during the COVID-19 pandemic. Topics include (some are service specific):

- COVID-19: What You Need To Know (delivered through Relias)
- CDC PPE Training
- <u>Tips For Staying Healthy</u>
- <u>Tips to Stay Healthy on Home Visits</u>
- NSP Fever and or signs and symptoms without known exposure
- <u>NSP Nebulizer CPAP BiPAP Guidelines During Pandemic</u>
- <u>NSP Possible Exposure COVID-19</u>
- <u>Staff Support Cloth Mask</u>
- <u>Staff Support Surgical Mask</u>
- <u>COVID-19 Preparedness and Prevention Approaches</u>

- <u>COVID-19 Heightened Cleaning Protocols</u>
- <u>CDC How to Protect Yourself and Others</u>
- OPWDD General Management of Coronavirus (COVID-19)

Employees provide ongoing education to the people they support regarding hygiene, masks, and cleaning. <u>Resources for people supported.</u>

ADDITIONAL EDUCATIONAL RESOURCES

• COVID-19 Elements of Learning-Agency wide meetings hosted on Zoom by Marisa Geitner

OPWDD GUIDANCE DOCUMENTS

• OPWDD issued a variety of guidance documents during the COVID-19 pandemic. The Agency utilizes them as a resource. They can be located <u>here.</u>

POLICY AND PROCEDURE

COVID-19 Preparedness and Prevention Approaches

NURSING SUPPORT PLANS/ STAFF SUPPORTS

- NSP Fever and or signs and symptoms without known exposure
- NSP Nebulizer CPAP BiPAP Guidelines During Pandemic
- NSP Possible Exposure to COVID-19
- <u>Staff Support Cloth Mask</u>
- <u>Staff Support Surgical Mask</u>

MEDICATION CERTIFICATION PROTOCOL

Protocol for Med Cert and Recert

ASSIGNMENT/ DUTY SHEETS

• Assignment sheets were updated to include additional cleaning requirements and instructions for laundering cloth masks for people supported (someone assigned to do the laundering). Sheets will identify responsible person for cleaning per shift.

SUPPORTING PEOPLE OUTSIDE OF THEIR HOMES

Employees will assist the people they support to wear a mask (bring back up masks), maintain social distancing, and practice good personal hygiene when leaving and returning to their home.

HOSPITAL- The RN will call the Director of Health Management & Research/NSS or designee in absence of DOHMR to determine the mode of transport based on the medical needs, COVID-19 status, and the ability of the person to wear a mask and follow directives related to COVID-19 etc. Each situation will be evaluated at time of transfer and based on symptoms of person being transferred (COVID symptoms vs non COVID

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symptoms), hospital protocol at the time, whether the person will wear a mask etc. After discussion with the DOHMR/NSS or designee, the RN will call the staff to inform of decisions regarding mode of transport, whether to accompany the person, etc.

Refer to medical p/p #9 for more info 9 COVID-19 Preparedness and Prevention Approaches

WORK/Day Hab – Direct support staff are supporting people with following their employer's/Day hab provider safety guidelines. In addition, people are encouraged to take off their shoes, change their clothes and wash their hands upon return to their home.

OTHER EMPLOYEES AT the PROGRAM (i.e. Nurse, Clinical, Facilities)

- When other employees go into the program they will complete the following: sanitize/wash hands, take temperature, complete self-monitoring form, obtain and put on and surgical mask.
- Staff will minimize going into homes under quarantine for essential work only.

VISTITATION ON SITE (DAY HABS): NO NON-ESSENTIAL VISTITORS ALLOWED

- Each day hab site will post signage at each entrance stating no non-essential visitors allowed
- If families are providing transportation for their family member to program, when individuals arrive prescreening will occur prior to the person coming into program, refer above for more information.
- Essential visitors will be prescreened by designee prior to entering and recorded on Day hab Attendance/Screening Log

VISITATION ON SITE (RESIDENTIAL/RESPITE):

All visitors must be screened upon arrival and log completed Visitor Log

Each home has a no unannounced visitor sign posted at all entrances

- Each home will set the hours of visitation based on the homes size, the individual's needs, the staff that's available and their ability to thoroughly clean and disinfect between visits.
- All visits must be scheduled ahead of time and approved by management team. Visits shall be staggered so as not to have multiple families visiting in a shared space at one time and to ensure adequate time to clean any common areas or high touch surfaces between visits. A typical timeframe is 30 to 90 minutes once or twice a week.
- All people supported within the home should be notified ahead of time that visitors will be present and advised how to remain socially distant from them.
- When scheduling, management will thoroughly discuss the potential risks and benefits of the visitor's presence with the visitor and the resident ahead of each scheduled visit. Discussion related to the importance of staying at least six feet apart will also occur.
- Visitors should be limited to 2 or 3 visitors at one time.

- All visitors should be 18 years of age or older, except in rare exceptions. If there are rare occasions of a person under 18 visiting, Residence Manager will discuss if appropriate with Associate Director prior to scheduling the visit.
- Upon arrival, visitors must undergo symptom and temperature checks by staff (utilizing the visitor log/non-Heritage employee screening). Should symptoms/fever be present, visitation will be denied. The visit may be rescheduled when they have been fever free for 72 hours and symptom free for 24 hours.
- Staff assigned to support individual with visitors will manage the visit to ensure all guidelines are followed including prescreening of visitors.
- Visitors will be provided a face mask if they do not arrive with one and the mask must be properly worn throughout the entirety of the visit (covering nose, mouth and chin).
- Visitors who refuse to wear a face mask must be asked to leave the facility.
- Visitors must sanitize their hands upon arrival and perform meticulous hand hygiene throughout the visit. Hand sanitizer will be provided to use throughout the visit.
- Visitation is encouraged to occur outdoors if weather permits, with masks worn by all parties when social distancing cannot be maintained.
- Visitation exercised inside the home shall occur in designated areas (i.e. common room, garage, sunporch, single bedrooms) where disinfection, social distancing, and separation from other individuals can be safely implemented.
- Visitors must remain in the designated throughout the visit except when directed by staff. Bathrooms will be identified should a visitor require use of such.
- Visitation must not occur with any individuals who are currently in mandatory quarantine or isolation.
- Individuals who have been fully vaccinated should not be prohibited from visiting offsite as a result of exposure to COVID-19, so long as they remain asymptomatic.
- Providers must notify visitors, at the time they are scheduling a visit, whether there are any positive or suspected cases of COVID-19 in the home.
- Any areas of the home utilized by the visitor(s) shall be disinfected immediately following the visit.

On 7/10/2020- OPWDD issued their updated guidelines on the following; Home Visit Guidance, Return to Residence Following an Extended Stay Guidance, and Community Outings Guidance. This guidance can be found <u>here.</u>

HOME VISIT GUIDANCE -

These guidelines outline how family members can spend time with their family away from their home. All actions require continued vigilance to keep COVID-19 at bay.

We have asked that family members continue to practice social distancing, wear face coverings, limit time spent in public places and wash hands frequently. The family members will be provided with education to keep their loved one safe while on home visits. <u>Tips for Offsite Visits</u>

- All home visits must be prearranged and announced.
- If a member of the household has symptoms, is awaiting test results, or under ordered quarantine, it is the expectation that the household remain under this quarantine as not to spread symptoms or viruses. (This includes visit to family's home)

- If family is insistent to take their loved one out of the home, despite quarantine, staff will use Emergency Calling Procedures to gain additional support.
- They must pass a health screening and wash their hands as they come and go. Staff complete the prescreening with the family member.
- Prior to home visit. Staff must complete a pre-screening with the person supported and their family member. Staff review <u>On Leave Monitoring Screening Pre & Post visit</u> and provide the family with the Tips for Offsite visits. (see above).
- While on the home visit the family must complete the home screening documentation as required by OPWDD.
- The visit destination cannot be a place where there's been any suspected or confirmed exposure to COVID-19 for 14 days before the visit.
- During any off-site visit, exposure to different households and public places should be minimized and done carefully.

When person supported returns to Heritage Christian Services:

- Their residential home must have no known or suspected cases of COVID-19.
- Person supported must not have been in close contact with anyone who has tested positive for or had symptoms of COVID-19. In addition, you will be asked to confirm in writing that they have not had any COVID-19 symptoms in the 14 days before they return to their home.
- The staff will review the on-leave monitoring tool with family member upon return.
- Should concerns with exposure be identified possible precautionary quarantine measures, may be implemented in keeping with local Department of Health guidelines. The RN will be notified for further instructions.

COMMUNITY OUTING GUIDANCE (INCLUDES GOING TO WORK/DAY HAB GUIDANCE):

In order to prevent further community spread or increased risk of infection, residential providers shall ensure that the following conditions are met:

- Unvaccinated individuals shall not participate in community outings or day hab if any individual or staff member working in the home is suspected/quarantined or confirmed positive for COVID-19.
- People supported who are employed will follow employer's guidelines for returning to work.
- Any unvaccinated person who had close or proximate contact to a confirmed positive individual within the last 14 days, or any person experiencing symptom(s) will remain at residence.

- If someone has a preexisting chronic condition, they will seek the input of their physician and RN prior to returning to day program. Individual with chronic conditions will have Nursing Service Plan in place. <u>Chronic Conditions</u> to be completed by physician.
- The number of individuals permitted in a community outing shall be within the discretion of the facility, based on the ability to maintain safety, but should be as small as possible and to ensure compliance with any requirements regarding gathering sizes put forth by local and state regulations.
- Low risk, outdoor activities are encouraged whenever possible regardless of vaccination status; if unsure about a particular activity consult with site manager and/or RN.
- Approved volunteering is allowed when practices are in place and followed. <u>Day Hab Volunteering</u> <u>Guidance</u>
- Community outings to stores, outdoor restaurants, salons, etc., should be extremely limited in frequency and duration and must abide by the capacity limitations of such locations.
- Planned recreational community outings should be limited to one location per day for any individual participating.
- When planning outings, staff should be aware of various capacity restrictions for businesses and should consider calling ahead, where possible, to ensure group size can be accommodated, regardless of vaccination status.
- Hands should be washed/sanitized immediately prior to leaving the home and immediately upon return to the home, regardless of vaccination status.
- Staff must bring hand sanitizer and ensure all individuals are washing and/or sanitizing hands throughout the community outing, whenever surfaces such as door handles, counters, public benches, and store shelves are touched regardless of vaccination status.
- Social distancing principles must be adhered to, to the greatest extent possible.
- Face coverings shall be brought on public outings and individuals must be encouraged to wear the covering at all times. Everyone who is medically able to tolerate a mask must wear one when unable to maintain social distancing. Please remember to bring extra masks.
- There should be no unnecessary interaction with other members of the public while on a community.
- Only individuals and staff from the same facility should be transported together.
- After each trip is completed, the interior of the vehicle should be thoroughly sanitized and disinfected before additional individuals are transported.
- Where appropriate and safe, windows should be rolled down to permit air flow (even rolled down a little will increase air flow which can prevent the spread.)

- Capacity on buses, vans, and other vehicles should be reduced to 50% of the total capacity if transportation is being provided to members of different households. Individuals and staff who residework at any given time including staff (Minivans no more than three, 12 passengers no more than 6, lift vans will be no more than 6 people, but 50% of wheelchair spaces may be used and one person per row of seats).
- To the greatest extent possible, individuals and staff should restrict close contact by not sitting near each other or the driver. The use of directional tape and signage can assist in accomplishing this. Additionally, if there are multiple doors in a bus or van, one-way entering and exiting should be utilized. Individuals should be directed to not exit the vehicle at once, instead following driver or staff instruction on exiting one person at a time.
- Time in vehicles to limit exposure should be limited to the least amount of time and place traveling to must be within closest proximity to house/day hab.
- Mask must be worn at all times during transportation.
- A tip sheet was created to provide reminders for safe transportation. Tips for Safe Transportation

For any individual that goes out into the community on their own (unsupported by staff) they MUST have a <u>COVID Assessment</u> completed indicating they are safe to do this (this is for Residential Only).

All activities and appointments staff will complete the following for residential <u>Community Activity Log</u> and for day hab staff will complete this documentation on the daily schedule.

OPWDD Community Outing Guidance

ATTACHMENTS/ MISCELLANEOUS RESOURCES

Acute Respiratory Distress Flyer

OPWDD COVD-19 Procedures and Practices

OPWDD Guidelines for Implementation of Quarantine and Isolation Measures