Approved by/Date Approved: Carolynn Anklam, CQO / 7.28.2021

#### **COVID-19 Infection Control Policies and Procedures**

This policy is designed to minimize the risk for the transmission of COVID-19 from infected to non-infected persons. A safe environment is created and maintained with the tools the Agency has at hand: accessing the community responsibly; vigorous handwashing; meticulous attention to environmental hygiene; and proper use of Personal Protective Equipment (PPE).

Residential Supervised IRAs & <u>Site Based Day Habilitation Nurses offices</u> are assessed by the Safety Coordinator in collaboration with program staff to ensure that the OSHA Emergency Temporary Standard (ETS) is met. This assessment is reviewed by the program's Director and the Quality Services Director.

## This policy applies to the following programs:

All Coarc programs and services.

#### **Procedures**

# When working with Persons who are NOT diagnosed with or presumed to be infected with COVID-19:

Prior to reporting to shift all staff and contracted consultants are required to self-monitor for symptoms of COVID-19 and report those symptoms to the Supervisor prior to coming to work or immediately if they are on shift/in the building. If symptoms arise *before* the scheduled shift the staff or contracted consultant should NOT report and should consult their medical provider. Should a staff or contracted consultant become symptomatic *while at work* they must immediately notify a Supervisor and leave as soon as possible.

All staff are required to complete a COVID-19 vaccination attestation and submit it to the Human Resources Department. Staff who do not submit the attestation are required to adhere to this policy as an unvaccinated staff.

All <u>unvaccinated</u> staff and contracted consultants are required to wear a mask at all times while at work. This is intended to reduce COVID-19 transmission from potentially infected staff, that may be asymptomatic. All handwashing and environmental hygiene standards must be met by all staff per program protocols.

All staff must wear a mask while transporting people who receive Coarc services regardless of anyone's vaccination status. The people who receive services should also wear a mask, (if they can tolerate one), during transportation to and from service locations. If a vehicle is only transporting a cohort from a single IRA, people supported do not need to wear a mask.

#### **Environmental Hygiene**

<u>Each day</u>, staff clean all "high-touch" surfaces, such as counters, tabletops, doorknobs, chairs, bathroom fixtures, toilets, phones, keyboards, tablets and bedside tables using approved disinfectant. A household cleaning spray should be used according to the label instructions, which describe instructions for safe and effective use of the cleaning product, including precautions when applying the product, such as wearing gloves, and making sure there is good ventilation during use of the product. Bathrooms are cleaned daily or more frequently if needed.

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# **Environmental Hygiene (cont.)**

After someone uses houseware items; the items must be thoroughly washed. Laundered items, including bedding is routinely washed; however, clothes or bedding that have blood, stool or body fluids on them must be washed immediately. Staff wear disposable gloves while handling soiled items and keep soiled items away from the body. Staff clean their hands with soap and water or an alcohol-based hand sanitizer immediately after removing gloves. Directions on labels of clothing or laundry items and on the laundry cleaning products are followed. In general, a normal laundry detergent is used, according to the washing machine instructions and laundry items are dried thoroughly using the warmest temperatures recommended on the clothing label. Soap and water are used if anyone's hands are visibly dirty. Staff can discuss any additional questions with their supervisor or with the assigned nursing staff.

# **Hand Washing**

Handwashing is the most effective strategy for reducing the spread of COVID-19. Proper handwashing saves lives at work and at home. Everyone can stay healthy by washing their hands often, especially during key times when they are likely to get and spread germs. Direct Support Professionals (DSPs) and other facility staff perform hand hygiene upon arrival to work, before and after direct contact with a person supported, contact with potentially infectious material and before donning (putting on) and after doffing (removing) Personal Protective Equipment (PPE), including gloves. Hand hygiene after doffing PPE is particularly important, to get rid of any germs that might have been transferred to bare hands during the removal process.

How to Wash Hands / Follow Six Steps to Wash Hands the Right Way: Washing hands is one of the most effective ways to prevent the spread of germs, even more effective than hand sanitizer. Follow these six steps every time:

- 1. Wet hands with clean, running water (warm or cold), and apply soap.
- 2. Lather hands by rubbing them together with the soap. Lather the backs of hands, between the fingers, and under the nails.
- 3. Scrub hands with soap for at least 20 seconds.
- 4. Rinse hands well under clean, running water.
- 5. Dry hands using a clean paper towel or air dry them.
- 6. Use a paper towel to turn off the faucet.

Staff at all facilities are to ensure that hand hygiene supplies are readily available to all personnel in every care location.

#### **Use of Hand Sanitizer**

If soap and water are not readily available, everyone should use an alcohol-based hand sanitizer that contains at least 60% alcohol. The sanitizer label should note the alcohol content. Everyone performs hand hygiene by using hand sanitizer containing at least 60% alcohol or washing hands with soap and water for at least 20 seconds. If hands are visibly soiled, always use soap and water to clean hands. Sanitizers can quickly reduce the number of germs on hands in many situations; however, sanitizers do not get rid of all types of germs.

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Carolynn Anklam, CQO / 7.28.2021

#### **Use of Hand Sanitizer** (cont.)

How to use hand sanitizer

- 1. Apply the gel product to the palm of one hand (read the label to learn the correct amount).
- 2. Rub hands together.
- 3. Rub the gel over all the surfaces of your hands and fingers until your hands are dry. This should take around 20 seconds.

Supplies of hand sanitizer are readily available throughout all Agency locations.

# **Use of Personal Protective Equipment (PPE)**

PPE is used by staff and contracted consultants, to protect themselves, people supported and others when providing care. PPE helps protect everyone from potentially infectious persons and materials, toxic medications and other potentially dangerous substances used in service delivery. However, PPE is only effective as one component of a comprehensive program aimed at preventing the transmission of COVID-19. Supervisors are to inform the human resources if a staff presents reasons why the they cannot wear or tolerate a face covering so that an alternate item can be provided.

## When There is a Suspected or Confirmed Case of COVID-19

Notification is made to all impacted staff and others providing service and to the applicable program state agencies in accordance with regulatory requirements. The Local Department of Health conducts all contact tracing. Additionally, the person's guardian is notified of any quarantine/isolation status within 24 hours. All precautionary measures issued by the Local Department of Health are followed by all those who are working with people who are under quarantine/isolation status. Coarc does not float staff between sites, unless absolutely necessary for minimum staffing requirements. Roommates stay in another bedroom and all housemates are separated from the sick person, as much as possible. The sick person uses a separate bathroom, if available. The manager attempts to maintain similar daily staff assignments into or out of sites that serve persons with a confirmed or suspected diagnosis of COVID-19.

#### • Health Checks

Health checks are completed for all direct support professionals and other facility staff at the beginning of each shift for the duration of the quarantine period. This includes all personnel entering the facility, regardless of whether they are providing direct care to persons supported. This monitoring includes a COVID-related symptom screen and temperature check. The Agency maintains written logs of these screenings during the quarantine period. Anyone screened who presents with relevant symptoms or with a temperature equal to or greater than 100° F is immediately sent home and directed to contact their medical care provider for further instruction, which may include quarantine and/or testing.

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# When There is a Suspected or Confirmed Case of COVID-19 (cont.)

Environmental Hygiene

Each shift, staff clean all "high-touch" surfaces, such as counters, tabletops, doorknobs, chairs, bathroom fixtures, toilets, phones, keyboards, tablets and bedside tables using approved disinfectant. They clean any surfaces that may have blood, stool or body fluids on them. Staff use a household cleaning spray according to the label instructions, which describe instructions for safe and effective use of the cleaning product, including precautions when applying the product, such as wearing gloves and making sure there is good ventilation during use of the product. If the residence requires the use of a shared bathroom, bathroom surfaces are cleaned after every use. Staff avoid sharing household items with people living in the residence. Housemates do not share dishes, drinking glasses, cups, eating utensils, towels, bedding or other items. After someone uses houseware items, the items are thoroughly washed. Laundered items, including bedding is routinely washed; however, clothes or bedding that have blood, stool or body fluids on them are washed immediately. Staff wear disposable gloves while handling soiled items and keep soiled items away from the body. Staff clean their hands with soap and water or an alcohol-based hand sanitizer immediately after removing gloves. Directions on labels of clothing or laundry items and on the laundry cleaning products are followed. In general, a normal laundry detergent is used, according to the washing machine instructions and laundry items are dried thoroughly using the warmest temperatures recommended on the clothing label. All used disposable gloves, masks and other contaminated items are placed in a lined container before disposing of them with other household waste. Staff clean their hands with soap and water or an alcoholbased hand sanitizer immediately after handling these items. Soap and water are used if anyone's hands are visibly dirty. Staff can discuss any additional questions with their supervisor or with the assigned nursing staff.

At a minimum, there should be a hand sanitizer station near the front door, in the kitchen/dining room and in the living room/common room, as applicable. Hand sanitizer is present at each person's bedroom door. If staff is not wearing gloves, staff must use hand sanitizer whenever they enter or exit a person's bedroom. To the extent that people living in the home are at risk of ingesting the hand sanitizer, or engaging in other unsafe behaviors with it, the location of hand sanitizer throughout the residence may need to be modified, or staff may need to carry refillable pocket size hand sanitizers on their person.

• Health Checks for the People who Receive Services
Health checks are be completed for all people receiving services in the quarantine location for the duration of the quarantine period. Each person supported is checked at least once daily and as needed, for fever of 100.0° or higher (as measured with a thermometer), fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, diarrhea. For persons in OPWDD programs, the findings are documented in the electronic health record in the "Medical Event Tracking" section for the duration of the quarantine period.

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# When There is a Suspected or Confirmed Case of COVID-19 (cont.)

Specific PPE use when there is a suspected or confirmed case of COVID-19: All staff dons a mask upon entry into the residence and wears it at all times while in the work setting. As needed and based on available supply, extended use of masks may be necessary. Staff can wear the same mask while working with multiple persons with confirmed COVID-19 without removing the mask between persons. Staff change masks only when soiled, wet or damaged. Staff do not touch the mask. If necessary, staff may need to use "expired" masks, should the supply be temporarily compromised. Masks are prioritized for staff use rather than as source control for people supported. People supported minimally use tissues or similar barriers to cover their mouth and nose, with assistance from staff as needed. The exterior surface of the mask is not touched. After removal, the mask is folded so that the outer surface of the mask is inward and then it is stored in a breathable container, such as a paper bag (labeled with the staff's name) between uses.

Masks are assigned to a single staff member. Hand hygiene is performed immediately after touching the mask. When splashes or sprays are anticipated, a shield covering the entire front and sides of the face is used. Goggles can be used if shields are not available. The use of homemade masks (e.g., bandanas, scarves), for clinical and direct support staff providing direct care is not permitted. N95 respirators offer a higher level of protection and are worn, if available, for any aerosol-generating procedures or similar procedures where there is the potential for uncontrolled respiratory secretions. In the rare circumstance that requires the use of N95 respirators, the staff assigned this PPE will undergo medical clearance and fit testing prior to use. Eye protection (i.e., goggles or a disposable shield that covers the front and sides of the face) is put on before entering a person's room or care area. Personal eyeglasses and contact lenses are NOT considered adequate eye protection. Eye protection is removed before leaving the person's room or care area. Reusable eye protection (e.g., goggles) is cleaned and disinfected according to the manufacturer's reprocessing instructions, prior to re-use. Disposable eye protection should be discarded after use. Clean, non-sterile gloves are put on upon entry into a person's room or care area. Gloves are changed if they become torn or heavily contaminated. Gloves are removed and discarded when leaving the person's room or care area and staff then immediately perform hand hygiene. A clean isolation gown is donned upon entry into an isolated person's room or care area. The gown is changed if it becomes soiled. Gowns are removed and discarded in a dedicated container for waste or linen when leaving the person's room or care area. Disposable gowns are discarded after each use. Cloth gowns are laundered after each use.

# Approved by/Date Approved:

Carolynn Anklam, CQO / 7.28.2021

## Return to Work Following Suspected or Confirmed case of COVID-19

To be eligible to return to work, staff or contracted consultants with confirmed or suspected COVID-19 must have maintained isolation for at least 10 days after illness onset, must have been fever-free for at least 72 hours without the use of fever reducing medications, and must have other symptoms improving.

If a staff or contracted consultant is asymptomatic but tested and found to be positive, they must maintain isolation for at least 10 days after the date of the positive test and, if they develop symptoms during that time, they must maintain isolation for at least 10 days after illness onset and must have been at least 72 hours fever-free without fever reducing medications and with other symptoms improving.

Staff and contracted consultants must provide the DOH quarantine release letter OR written clearance from their medical provider OR evidence of a negative COVID-19 test, if one was taken prior to returning to work, to their supervisor and/or to the Human Resources staff.

## **Staff Training**

All staff are required to review this version of the policy in our Electronic Training Program due to the significant changes. The policy and attachments are also available in the online folder: *Projects>Policy Procedure Manual>Approved>COVID 19.* 

## **Coarc Infection Control Policy Attachments**

Attachment A: Temperature and Symptom Check Log (used when needed)
Attachment B: Coarc COVID-19 Essential Visitor Log (used when needed)

Attachment C: Symptoms of COVID-19

Attachment D: Return to Work Following Exposure to COVID-19

Attachment E: COVID-19 Vaccination Attestation for Employees and Volunteers

#### **Temperature and Symptom Check Log**

NON-VACCINATED EMPLOYEES and VISITORS: Have you had symptoms of COVID-19 in the last 14 days? Have you had contact with anyone who has confirmed or suspected COVID-19 in the last 14 days? Have you traveled inconsistently with NYS's current travel advisory in the last 14 days?

<u>VACCINATED EMPLOYEES and VISITORS</u>: Do you have any symptoms of COVID-19? Have you traveled inconsistently with NYS's current travel advisory in the last 14 days?

Please indicate yes or no below and take your temperature. If you answered yes to any of the questions please obtain clearance from your supervisor and/or HR prior to coming to work today. If you have a temperature greater than or equal to 100.0 please do not enter the building. Instead please contact your Supervisor if you are an employee or the Department of Health if you are a member of the community.

Month/Year

Site

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Date	Name (Please print)	Response to the COVID-19 Questionnaire above Yes/No	If you answered yes, has your supervisor and/or HR cleared you to work? Yes/No	Initials of Staff Taking Temperature	Daily review
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#### **Coarc - Essential Visitor Log**

# FACE COVERINGS ARE REQUIRED IN ALL COMMON AREAS OF THIS BUILDING

NON-VACCINATED VISITORS: Have you had symptoms of COVID-19 in the last 14 days? Have you had contact with anyone who has confirmed or suspected COVID-19 in the last 14 days?

VACCINATED VISITORS: Do you have any symptoms of COVID-19?

Please indicate yes or no below and take your temperature. If you answered yes to any of the questions please do not visit today.

Date	Name (First & Last) Please Print clearly	Reason for Visit	Time In	Time Out	Response to the COVID-19 screening questions at the top of the sheet. (Y/N)	This column is for office use only. (Daily review of visitor log)

Version 2020.11.10

People with COVID-19 have had a wide range of symptoms reported – ranging from mild symptoms to severe illness.

These symptoms may appear **2-14 days after exposure to the virus:** 

- Fever or chills
- Cough
- · Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

## COVID-19 Infection Control Policy & Procedures-Attachment D

# Approved by / Date Approved:

Carolynn Anklam / 6.7.2021

#### **Vaccination Status**

Consistent with recent CDC guidance, anyone who is fully vaccinated against COVID-19 is exempt from quarantine requirements post exposure to COVID-19, as of the 15<sup>th</sup> day following the second vaccination dose. The Human Resources department tracks each employee's vaccination status. Vaccinated persons must adhere to the current NYSDOH Travel Advisory.

# Return to work following exposure to COVID-19

Coarc may allow employees who are not fully vaccinated, who have been exposed to a confirmed case of COVID-19 <u>outside their immediate household</u>, to return to work <u>before</u> ten (10) days of quarantine if the employee reports they have had no symptoms during the quarantine period AND if <u>all the following</u> conditions have been met:

- 1. Furloughing the employee would result in staff shortages that would adversely affect the health and safety of individuals served by the facility;
- 2. The employee remains asymptomatic;
- 3. The employee continues symptom monitoring through day 14 post exposure twice daily;
- 4. The employee is directed to continue strict adherence to all recommended nonpharmaceutical interventions, including hand hygiene and use of face coverings;
- 5. When possible, the employee is assigned to individuals at lower risk for severe complications; and
- 6. The employee is directed to maintain self-quarantine when not at work until the 14<sup>th</sup> day post exposure.

Coarc may allow employees who are not fully vaccinated, who have been exposed to a confirmed case of COVID-19 to return to work <u>after</u> ten (10) days of quarantine if no symptoms have been reported during the quarantine period AND if <u>all the following</u> conditions have been met:

- 1. The employee remains asymptomatic;
- 2. The employee continues symptom monitoring through day 14 twice daily post exposure;
- 3. The employee is directed to continue strict adherence to all recommended nonpharmaceutical interventions, including hand hygiene and use of face coverings;
- 4. When possible, the employee is assigned to individuals at lower risk for severe complications; and
- 5. The employee is directed to maintain self-quarantine when not at work until the 14<sup>th</sup> day post exposure.

# **COVID Vaccine Attestation for Employees & Volunteers**

Coarc is required to capture information regarding Covid-19 vaccination status per regulation. Please attest to one of the following below.

Please check one of the boxes:																
I am not vaccinated against Covid-19 and have no interest in becoming vaccinated in the futureI am not vaccinated because my healthcare provider has determined that I am medically contraindicated therefore I cannot receive the Covid-19 vaccineI am not currently vaccinated against Covid-19 however I am interested in getting the																
								Vaccine. More information on obtaining an appt can be found using the following link <a href="https://covid19vaccine.health.ny.gov/">https://covid19vaccine.health.ny.gov/</a>								
								I am partially vaccinated against Covid-19. Since you have checked this line, you must provide additional information below regarding the manufacturer of the vaccine you received, the date you received the vaccine and the date the next vaccine is scheduled. For example: I received 1 dose of Pfizer. The first dose was administered by CVS in Hudson on 7/26/2021. The second dose is scheduled at CVS in Hudson on 8/15/2021. If you select this option, you must update this information with Human Resources after you receive your second dose.								
information to record your vaccinated status as our vaccine status will dictate any additional PPE or safety below regarding the manufacturer of the vaccine your 2 doses of Moderna. Both doses were administered	<b>l-19.</b> Since you have checked this line, Coarc requires additional regulatory agencies require this information. Additionally, your requirements during work hours. <b>Note:</b> Please provide information received and how many doses you received. For example: I received by the Department of Health at the Columbia Greene Community research dose was on 2/6/2021 or I received one dose of Johnson &															
unvaccinated or partially vaccinated employees will be	consider vaccination, vaccination is not mandatory. However, expected to adhere to stricter health and safety protocols as dictate.															
By signing below, you are attesting that the informat the future you must contact the Human Resources I complete this form regardless of whether or not you p	TTESTATION ion listed above is true and correct. Should your status change in Department to complete a new form. Please note that you must previously notified Coarc of your Covid-19 vaccination status. If you, Coarc will assume you are unvaccinated or that you are not fully															
Your Name (please print)	Date															
Your Telephone Number	Your Program/Worksite															

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