

## Residential COVID-19 Health and Safety Protocols

### **TABLE OF CONTENTS**

Masks.....	2
Double Masking:.....	2
Protective Eyewear:.....	3
Screening, Physical Distancing and Hygiene.....	3
Screening Staff.....	3
Post-Vaccine Staff Screening.....	5
Screening Consumers.....	6
Hygiene.....	6
Cleaning.....	6
Definitions.....	6
Woodfords Cleaner/Sanitizer/Disinfectant Product Information.....	6
Consumer Visits & Outings.....	7
Visits at Residences.....	7
Home Visits.....	7
Community Activities.....	7
Consumer Employment.....	7
Transporting Consumers.....	7
Physical Management.....	8
Precautions for Individual in a Hold.....	8
Precautions for Staff.....	8
Response to Exposure or Potential Exposure.....	8
If a Consumer is or Becomes Sick.....	8
If a Consumer tests positive for COVID-19.....	9
Staff Expectations.....	9
Housemate Expectations.....	9
If a Staff Member Becomes Sick.....	9
Additional Information regarding a Confirmed COVID-19 Case in a Staff or Consumer.....	9
Criteria to Return to Work.....	9
Non-COVID Sick Days.....	11
Close Contact Exposure.....	11
Consumers – Close Contact Exposure.....	11
Staff – Close Contact Exposure.....	11
Close Contact Exposure Notification.....	12
If a Member of an Employee’s Household Tests Positive for COVID-19:.....	12
Staff Training.....	13
COVID-19 Emergencies – Incident Reporting Grid.....	14

## Residential COVID-19 Health and Safety Protocols

Updated 03/05/2021

Woodfords Family Services has developed the following COVID-19 protocols to ensure the health and safety of all staff and students using directives and guidance from The Maine Department of Health and Human Services, the United States and Maine Centers for Disease Control & Prevention (CDC), the Occupational Safety and Health Administration (OSHA) and the National Safety Association (NSA). The recommendations regarding COVID-19 continue to evolve as experts learn more about the virus. As such, this document and the guidelines contained within are subject to change. All Woodfords protocols related to COVID-19 are reviewed regularly and updated as needed.

Woodfords Family Services is an essential service organization, and staff providing educational and behavioral health services to individuals with developmental disabilities have been identified as essential workers by the State of Maine. The role of essential service organizations and their workers is to ensure continuity of functions critical to public health and safety. Essential service organizations are expected to continue operations despite non-essential business shutdowns. Given that, essential workers are allowed and expected to continue working in COVID-19 related circumstances that non-essential employees in other fields are not, given appropriate precautions. All Residential Staff are considered essential staff. Woodfords' protocols are written and updated in a manner consistent with the agency's status as an essential service organization.

### **MASKS**

All staff are required to wear a Woodfords-issued medical grade face mask at all times. Cloth face coverings do not offer the same level of protection and can no longer be utilized. Those unable to wear masks due to health conditions may wear a face shield of clear plastic that extends past the chin. Staff who cannot wear a mask must provide documentation of this from their health care provider. Consumers and their guardians will receive a copy of the program protocols so that they are aware that this accommodation may exist for some staff.

Woodfords has implemented an N95 Respirator Protection Program. Use of an N95 will occur on an as-needed basis, including: 1) when staff are supporting a consumer who is confirmed to have COVID-19, or 2) following a close contact exposure with someone confirmed to have COVID-19. All staff designated to wear an N95 under qualifying circumstances must be cleared to do so via a Health Screening, and fit-tested and trained in appropriate use and storage of the N95 by a Woodfords trained, designated fit-tester.

### **Double Masking:**

The CDC has recently provided guidance on mask layering to increase protection. While not required, this practice is now allowed at Woodfords providing staff follow the CDC guidance below:

- Woodfords-issued disposable medical grade mask is applied first, closest to the skin.
- Cloth mask is applied over medical mask.
  - Cloth mask should fit snugly and push the edges of the disposable mask closer to your face.
- Make sure you can see and breathe easily.

- DO NOT combine two disposable masks. They are not designed to fit tightly, and wearing more than one will not improve fit.

### **PROTECTIVE EYEWEAR:**

Protective eyewear is effective in reducing the likelihood of virus transmission, particularly when working with consumers who cannot maintain use of a cloth face covering or mask. Use of a face shield or safety goggles is required when working with consumers. Staff may remove protective eyewear when they are six feet or more from the consumer and household members, as well as when they are driving. Those unable to tolerate a face shield or safety goggles due to a health condition will be given an accommodation upon providing documentation of the need from their health care provider.

Consumers are not required to wear masks in their homes. Per the State of Maine mandate, consumers are encouraged to wear masks in the community, and in agency vehicles. Consumers will be provided information about the risks and benefits of wearing masks. Staff will work with consumers around increasing mask tolerance as a positive support if necessary.

### **SCREENING, PHYSICAL DISTANCING AND HYGIENE**

#### **Screening Staff**

Woodfords will minimize the risk of disease introduction or transmission by directing all staff to self-screen for [signs and symptoms](#) at the beginning of each shift. All staff are encouraged to self-monitor for COVID-like symptoms, and Woodfords requires that individuals exhibiting symptoms stay home.

According to the US CDC, symptoms of COVID-19 infection include:

- Fever (body temperature of 100.0 degrees Fahrenheit and above)
- Chills
- Cough (that cannot be explained by another health condition, i.e., allergies)
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache (that cannot be explained by another health condition, i.e., chronic migraines)
- New loss of taste or smell
- Sore throat (that cannot be explained by another health condition, i.e., allergies)
- \*Congestion/runny nose (that cannot be explained by another health condition, i.e., allergies)
- Nausea or vomiting
- Diarrhea (that cannot be explained by another health condition, i.e., medication side effect, irritable bowel syndrome, etc.)

\* Staff and Consumers who present with no other symptoms beyond congestion/runny nose may attend programming/receive services. Consumers will be monitored for additional symptoms.

Upon arrival, staff will take their temperature and log it in the sign-in sheet. Persons who have a fever of 100.<sup>0</sup> or above or other signs of illness will not be permitted in to complete their shift. They will also answer the following series of screening questions on the sign in sheet:

- Have you traveled outside of Maine, Connecticut, Massachusetts, New Hampshire, Rhode Island, or Vermont in the last 10 days?
- Have you or anyone in your household had contact with anyone with confirmed COVID-19 in the last 10 days?
- Have you or anyone in your home had a fever of greater than 100.0° F (38.0°C), difficulty breathing, or a cough that cannot be associated with another health condition?
- Are you currently experiencing any symptoms of COVID-19 or any other illness?

Staff who do not pass the health screening or present with symptoms when entering the facility will be sent home immediately. Staff who develop symptoms at any time during their shift will be sent home immediately if adequate coverage for consumers is present and as soon as possible if a staff member is caring for a consumer alone. Staff members who are symptomatic should don an N95 while waiting to be relieved of duty.

Staff who have traveled outside of Maine, Connecticut, Massachusetts, New Hampshire, Rhode Island, or Vermont in the last 10 days will be required to submit a Woodfords Certificate of Compliance stating that:

- 1) They have received a negative COVID-19 test result no longer than 72 hours prior to returning to Maine (they can also test upon arrival).  
OR
- 2) They have already or will quarantine for 10 days. Staff choosing to quarantine must use earned vacation time.  
OR
- 3) They are fully vaccinated or have had COVID-19 in the past 90 days and are therefore exempt from quarantine and testing requirements.

Certificates of Compliance will be collected by supervisors and filed in the employee's personnel file. Staff with household members who have travelled out of Maine, New Hampshire, or Vermont in the last 10 days may still report to work, but should self-monitor for symptoms.

**International Travel**: Effective January 12, 2021, all air passengers coming to the United States, including U.S. citizens, are required to have a negative COVID-19 test result or documentation of recovery from COVID-19 before they board a flight to the United States. In addition, all staff returning from international travel must either:

- Get tested 3-5 days after travel and stay home for 7 days after travel
    - Even if you test negative, stay home for the full 7 days before returning to work
  - OR
  - If electing to forego testing, stay home for 10 days before returning to work
- NOTE: For both options, staff must use earned vacation time during quarantine

Testing and quarantine requirements may vary by country. Please check the following CDC website for specific information on risk level and testing/quarantine requirements when travelling to and returning from your destination:

<https://www.cdc.gov/coronavirus/2019-ncov/travelers/map-and-travel-notice.html>

**Post-Vaccine Staff Screening** – Applicable only in the 3 days following vaccination

Staff who have received COVID-19 vaccination in the past 3 days (including day of vaccination, which is considered day 1) and are not known to have had unprotected exposure to COVID-19 in a community or healthcare setting in the previous 14 days:

Signs and symptoms unlikely to be from COVID-19 vaccination:	Protocol
<ul style="list-style-type: none"> <li>• Cough</li> <li>• Shortness of breath</li> <li>• *Congestion/Runny nose</li> <li>• Sore throat</li> <li>• Loss of taste or smell</li> </ul>	<ul style="list-style-type: none"> <li>• Exclude from work pending consult with HCP per programmatic protocol</li> <li>• Follow Return to Work Criteria</li> </ul> <p>*Staff who present with no other symptoms beyond congestion/runny nose may work.</p>

Signs and Symptoms that may be from either COVID-19 vaccination, COVID-19 infection, or another infection:	Protocol
<ul style="list-style-type: none"> <li>• <b>Fever</b></li> <li>• Fatigue</li> <li>• Headache</li> <li>• Chills</li> <li>• Muscle aches</li> <li>• Joint Aches</li> </ul>	<p>Staff who meet the following criteria may be considered to return to work without viral testing for COVID-19:</p> <ul style="list-style-type: none"> <li>✓ Feel well enough and are willing to work AND</li> <li>✓ <b>Have no fever</b> (afebrile) AND</li> <li>✓ Symptoms are limited to only those observed following COVID-19 vaccination (i.e., do not have other signs and symptoms of COVID-19 as listed in Table A, above.</li> </ul> <p>If symptomatic staff choose to return to work, they should monitor symptoms. If symptoms persist beyond day 3 following vaccination, they should be excluded from work and follow Return to Work criteria, which may include testing for COVID-19.</p> <p>Staff who develop a <b>fever</b> following vaccination may continue to work if they meet the following criteria:</p> <ul style="list-style-type: none"> <li>✓ They have a negative test for COVID-19</li> <li>✓ They feel well enough to work</li> </ul> <p>If able, staff may use fever-reducing medication to reduce fever and improve comfort.</p>

## Screening Consumers

Staff will take consumer's temperature two times per day, in the morning and evening, and record the temperature in the direct care note. Staff should monitor consumers on an ongoing basis for the onset of any symptoms related to COVID-19.

## Hygiene

Staff are required to take actions to prevent the spread of respiratory illness. These include:

- Washing hands often, and at least once an hour, with soap and water. When soap and water are not immediately available, an alcohol-based hand sanitizer with at least 60% alcohol may be used.
- Gloves will be utilized when necessary, and are required for contact with any bodily fluids.

## CLEANING

### Definitions:

- **Cleaning:** Cleaning is removing visible dirt and grime from any surface. This can be done using mild soap and water. Personal Protective Equipment (PPE) is not required at this level. Cleaning visible dirt and grime must be completed before sanitizing or disinfecting can be completed for the effectiveness of the disinfectant.
- **Sanitizing:** This process kills the majority of any contagion and in most settings is an appropriate level of the cleaning process for normal operations. This is accomplished according to the manufacturer's recommendations of an EPA-approved disinfectant cleaner according to the CDC recommendations. PPE may be required and is determined by the manufacturer recommendations, based upon application method.
- **Disinfecting:** This process kills all of the contagion. Also accomplished according to the manufacturer's recommendations of an EPA- approved disinfectant cleaner according to the CDC recommendations. PPE may be required and is determined by the manufacturer recommendations, based upon application method.

## Woodfords Cleaner/Sanitizer/Disinfectant Product Information

Woodfords uses an EPA-registered and approved disinfectant. This product is a one-step cleaner, sanitizer and deodorizer. When used according to instructions, it is also an effective disinfectant. Instructions for use of this product are included in this document. Read the manufacturer's instructions for use of any other product.

The following cleaning, sanitizing and disinfecting protocols will be followed in Residential homes:

- Employees have access to hand soap, face masks, gloves, tissues, paper towels, at all times.
- Hand sanitizer (at least 60% alcohol) is located in each home.
- All high touch surfaces will be regularly cleaned and disinfected, including counters, door handles, walls, light switches, outlets, and any other surfaces frequently touched by staff or consumers.
- All restroom surfaces including floors, sinks and toilet bowls will be cleaned and disinfected daily.
- Disinfectant only works on clean surfaces. Clean all surfaces and tools with hot soapy water, or cleaning wipes (if using wipes, be sure to cover surface thoroughly) before disinfecting.

- Observe contact time on product label to allow disinfectant to work properly.

## **CONSUMER VISITS & OUTINGS**

### **Visits at Residences**

Consumer visits may occur on the property with the following guidelines:

- The visit must take place outside and all visitors must remain outside.
- All individuals must maintain physical distance of at least 6 feet apart.
- All individuals must wear masks.

Staff should document guest contact information and visit duration in Credible for purposes of contact tracing.

### **Home Visits**

Consumers may schedule home visits with family with the following guidelines:

- Staff should communicate the agency's expectation that all participants wear masks when appropriate social distancing cannot occur and when in community settings, per State of Maine mandate.
- Staff should communicate to consumer and family the agency's desire that consumers refrain from entering stores and restaurants without first participating in a team meeting to discuss risk. The Office of Aging and Disability Services is not recommending consumers access stores, restaurants and public buildings at this time unless discussion of risks and benefits occurs in a team meetings with the consumer/guardian.

When a home visit occurs, staff should communicate to the program director the dates of the visit, and specify if the visit included a full day in which Woodfords did not provide services.

### **Community Activities**

Consumers may engage in community activities with the following guidelines:

- Daily outings should occur outdoors whenever possible, and consumers and staff should wear masks when appropriate social distancing cannot occur.
- In accordance with guidance from OADS and Disability Rights Maine, consumers may enter stores and other community facilities following team discussions and agreements.
- The agency encourages using curbside pick-up or drive through options over seated restaurant settings.

### **Consumer Employment**

Consumers may engage in regular employment with the following guidelines:

- Consumer's team discusses and agrees to employment plan.
- Consumer agrees to health and safety precautions upon returning to the residence including temperature check, washing hands, and changing out of work clothes.

### **Transporting Consumers**

Staff may transport consumers with the following guidelines:

- Staff are able to transport consumers following the same protocol for taking temperatures before the consumer enters the vehicle and again when arriving back at the residence.
- Only one consumer is permitted in a staff vehicle at any time, unless consumers are able to wear and maintain a face covering.

- High touch surfaces on the interior and exterior of the vehicle (door handles, window controls, seat belt buckles, center consoles, dashboard and steering wheel), should be cleaned and sanitized before and after transporting consumers.
- Consumers should ride in the back seat on the opposite side of the vehicle from the driver whenever possible.

## **PHYSICAL MANAGEMENT**

### **Precautions for Individual in a Hold**

Adherence to proactive and least restrictive approaches to behavior management is vital during this pandemic. Staff should employ Safety-Care prevention and de-escalation tools to avoid any need for physical management. If physical management does become necessary, Quality Behavioral Solutions (QBS) makes the following recommendations:

- Staff should update their certifications as soon as it is safe to do so, as close to the one year mark as possible.
- Safety-Care standards state that nothing should be placed over the face of a person in a hold. Do not place a mask on a person in a hold. If the person is already wearing a mask, remove it as soon as it is practical to do so. Moisture within the mask can reduce airflow, and it is much harder to monitor a masked individual's breathing and medical status.
- If available, you may put a face shield on the consumer. If he/she is highly resistant, wait until agitation has diminished.
- Keep holds as brief as possible.
- Staff and consumers should wash their hands or use hand sanitizer after the incident.

### **Precautions for Staff**

QBS recommends the following to minimize the risk of infection passing between the person in the hold and the staff involved in the hold:

- Store personal protective equipment (PPE) in convenient locations, within easy reach of staff. Equipment should include masks, disposable gloves, disposable fluid-resistant gowns, and face shields.
- Consider having staff wear PPE around consumers during non-escalation situations to familiarize them with it and keep it from becoming a potential escalation trigger if donned only during a crisis.
- If staff have to implement a hold without donning PPE, they should call for assistance so that other staff can don PPE and switch with them as quickly as possible.
- Implementing a hold while wearing a mask or face shield can be more tiring than without. Be prepared to switch out every few minutes (or release if necessary).
- After a hold, clean and sanitize all affected surfaces, remove and dispose of PPE, and wash or sanitize hands.
- Staff should change clothing if their clothes become wet or soiled during a hold.

## **RESPONSE TO EXPOSURE OR POTENTIAL EXPOSURE**

### **If a Consumer is or Becomes Sick**

If a consumer develops COVID-like symptoms, staff should immediately don PPE, including an N95 (if cleared and fit tested), face shield and gloves, and support the consumer to self-isolate, using verbal prompts and encouraging distancing from housemates. Staff will report the development of symptoms

to their supervisor and follow instructions, including contacting the consumer's primary care physician for medical guidance and testing if necessary. Staff should utilize appropriate PPE at all times when caring for a sick consumer.

### **If a Consumer tests positive for COVID-19:**

#### **Staff Expectations:**

Staff will notify the consumer's team via email. The house manager will call the consumer's guardian. The consumer will be encouraged to self-quarantine for 10 days, ideally isolating in his/her bedroom. Staff should wear PPE at all times while caring for the consumer. Staff will bring medications and meals to the consumer's doorway and pick up when done. Staff will disinfect all surfaces after the consumer uses the bathroom. Program staff will consult with the CDC regarding protocols to best contain the risk of transmission in the residence.

#### **Housemate Expectations:**

Staff will minimize contact among housemates, encouraging them to wear masks and maintain physical distancing. Staff will complete a Reportable Event for a potential exposure in accordance with OADS guidelines.

### **If a Staff Member Becomes Sick**

- Staff who present with symptoms should notify their supervisor and leave immediately, if there is adequate coverage for them to do so. If there is no coverage available, they should don an N95 and maintain as much distance as possible from others until relief staff is available and he/she can leave.
- If staff need to wait for transportation they should isolate and wear an N95 (or surgical mask if not cleared for N95 use) in a designated area until transportation arrives.
- Designated staff will respond to the sick staff member and their needs, using Personal Protective Equipment (PPE) to ensure their safety.
- If needed, arrangements will be made to call an emergency contact for a staff member or arrange for ambulance transport to a hospital.
- Sanitization of all surfaces will occur.

### **Additional Information regarding a Confirmed COVID-19 Case in a Staff or Consumer:**

- The Director of Residential, Shared Living & Community Supports or designee will immediately notify local health officials. These officials will help administrators determine a course of action.
- Based on CDC guidance, certain staff may be required to be tested before returning to work, and certain consumers may be encouraged to do the same.
- In cases where a new COVID case is reported, Facilities personnel will coordinate efforts to clean and disinfect affected areas. If more than 7 days have passed since the sick person entered the residential home, disinfection is not necessary. Instead, routine cleaning and sanitization will continue.

### **Criteria to Return to Work**

Current CDC COVID-19 Symptom List:

- Fever (body temperature above 100.0 degrees Fahrenheit)

- Chills
  - Cough (that cannot be explained by another health condition, i.e., allergies)
  - Shortness of breath or difficulty breathing
  - Fatigue
  - Muscle or body aches
  - Headache (that cannot be explained by another health condition, i.e., chronic migraines)
  - New loss of taste or smell
  - Sore throat (that cannot be explained by another health condition, i.e., allergies)
  - \*Congestion or runny nose (that cannot be explained by another health condition, i.e., allergies)
  - Nausea or vomiting
  - Diarrhea (that cannot be explained by another health condition, i.e., medication side effect, irritable bowel syndrome, etc.)
- \* Staff and consumers who present with no other symptoms beyond congestion/runny nose may work/receive services.

If staff calls in or becomes symptomatic with any of the COVID-19 symptoms listed above, and those symptoms cannot be explained by another health condition, then the following [criteria](#) must be met before he/she can return to the school environment:

- Staff with symptoms should be evaluated by their medical provider. Staff must consult with their medical provider or get tested within 24 hours of calling in or leaving work sick.
  - If testing for COVID-19 is not recommended based on medical judgement, they may return to the work/school after they are symptom free for 24 hours with no fever reducing medication. A doctor's note excusing the absence and clearing the individual to return to work is required.
  - If COVID-19 testing is recommended (or elected) and results are negative, staff may return after they are symptom free for 24 hours with no fever reducing medication. A copy of the negative COVID test is required.
  - If COVID-19 testing is recommended (or elected) and positive, staff should follow CDC guidelines for isolation, and not return until isolation is complete and the following criteria has been met:
    1. Twenty-four hours with no fever (without the use of fever-reducing medicine)  
AND
    2. All other symptoms have improved (e.g., cough or shortness of breath)  
AND
    3. 10 days have passed since symptoms first appeared.
    4. A doctor's note clearing the individual to return to work or school, or a copy of a negative COVID-19 test is required.
    5. If staff refuse to be tested, they cannot return to work for a minimum of ten (10) days and must use their own vacation time. Staff may return after 10 days providing they meet the Return to Work protocol criteria above, including providing a doctor's note excusing the absence and clearing them for work.

NOTE: Those who have a positive COVID test but are asymptomatic may return to work/programming 10 days following the positive test result.

Guidelines may change based on the level of community transmission.

### **Non-COVID Sick Days**

Staff who call in sick with an injury or illness that does not include COVID-19 symptoms do not need to consult with their health care provider or secure a doctor's note unless they are out for three or more days, or at the discretion of their supervisor when absences are excessive.

### **Close Contact Exposure**

The CDC defines close contact exposure as:

- Living in the same household as someone with COVID-19
  - Providing care to someone with COVID-19 without proper PPE
- OR
- Being within 6 feet of someone with COVID-19 for 15 minutes or more within a 24-hour period, cumulatively.

### **Consumers – Close Contact Exposure**

Consumers who experience a close contact exposure will be encouraged to quarantine for 10 days and isolate from others. Staff will continue to monitor for symptoms.

### **Staff – Close Contact Exposure**

Essential staff who experience a close contact exposure may continue to work as long as they remain asymptomatic, unless the close contact is a household member (see "If a Member of an Employee's Household Becomes Ill"). All staff experiencing a close contact exposure must undergo COVID-19 testing as soon as possible between days 5-7 following exposure. Staff may be asked to work remotely if possible until test results are in. The CDC recommends that exposed, unvaccinated staff continue to quarantine while at home for 7 days after exposure with a negative test, (do not leave your home, except to go to work). Vaccinated staff are exempt from quarantine as long as they remain asymptomatic. All essential staff should adhere to the [following practices](#) prior to and during their work shift for 14 days following the date of exposure:

- **Pre-Screen:** Employers should measure the employee's temperature and assess symptoms prior to them starting work. Ideally, temperature checks should happen before the individual enters the facility.
- **Regular Monitoring:** As long as the employee does not have a temperature or symptoms, they should self-monitor using the screening questionnaire as a guide, and report the development of any symptoms immediately.
- **Wear an N95:** The employee should wear an N95 respirator at all times while in the workplace for 14 days after date of last exposure. According to the CDC, employees who cannot pass the medical screening or fit test required for N95 use can use a medical grade face mask. Documentation of inability to use an N95 is required. Woodfords will issue N95s and face masks as needed, and supervisors will provide periodic N95 mask breaks when possible.
- **Social Distance:** The employee should maintain 6 feet and practice social distancing as work duties permit in the workplace. Meal breaks should be taken alone for the 14 days following a close contact exposure.
- **Disinfect and Clean workspaces:** Clean and disinfect all areas such as offices, bathrooms, common areas, shared electronic equipment routinely.

If a previously asymptomatic staff becomes sick, they will be sent home immediately, and the protocol for “if a staff member becomes sick” will be followed. Areas touched by staff should be cleaned and disinfected. Information on persons who had contact with the ill employee during the time the employee had symptoms and 2 days prior to symptoms should be compiled. Others at the facility with close contact within 6 feet of the employee during this time are considered exposed.

### **Close Contact Exposure Notification**

As soon as possible, Woodfords will inform any individual that we know to have had a close contact exposure (as defined by the CDC and detailed above) to a person who has tested positive for COVID-19. Due to confidentiality and HIPAA regulations, Woodfords will inform only those who meet CDC guidelines for close contact exposure.

### **If a Member of an Employee’s Household Tests Positive for COVID-19:**

- Staff are encouraged to have the household member evaluated by their healthcare provider.
- Essential staff may still come to work providing they pass the health screening and remain asymptomatic. Staff should follow the protocol for working following a close contact exposure.
- If the healthcare provider does not recommend testing for the household member, staff should follow close contact exposure protocol for 14 days from onset of household member’s symptoms.
- If the healthcare provider recommends testing and the test is negative, staff may resume following everyday protocols.

In accordance with CDC guidelines, if a member of a staff’s household tests positive for COVID-19 and the staff cannot isolate from that individual, the staff will not be permitted to work until **all** of the following conditions are met:

- The ill household member’s quarantine period has ended (10 days from date of diagnosis)
- 10 days have passed since the last close contact exposure (20 days from the household member’s date of diagnosis)
- All household members provide documentation of a negative COVID test (rapid or PCR) administered between days 5-7 following their last date of exposure (15-17 days following the ill family members date of diagnosis)

If staff are able to isolate from the ill household member, they should quarantine for 10 days following their date of last exposure, and be tested no sooner than days 5-7 from their last date of exposure. If the test is negative, staff may return to work following day 10 of their quarantine period. If staff tests positive, they should follow the Return to Work criteria. \*Isolation: According to the CDC, effective isolation requires the sick individual to stay in a specific “sick room” or area of the home at all times during their quarantine period, and use a separate bathroom, if available.

All staff returning to work following close contact with a household member who tests positive for COVID-19 should follow Close Contact Exposure protocol for 14 days following their date of last exposure, including donning an N95 if cleared to do so.

Staff living with someone who has COVID-19, who meet the following criteria, may continue to work and do NOT need to quarantine outside of work:

- Fully vaccinated (14 days past 2<sup>nd</sup> dose of vaccine) **AND**
  - remains asymptomatic **AND**

- should still undergo COVID testing at days 5-7

**OR**

- Had COVID-19 illness within the previous 3 months **AND**
  - has recovered **AND**
  - Asymptomatic

### **STAFF TRAINING**

New and returning staff will undergo training on agency safety protocols and working with consumers. These trainings include but are not limited to hygiene, prevention and response, as well as donning, proper use, doffing, and disposal of personal protective equipment such as gloves, N95 respirators, and face masks.

**COVID-19 EMERGENCIES – INCIDENT REPORTING GRID**

	Service	Service	Service	Service
Type of Report (below)	SPSS, Preschools, Outpatient-adults, School-based	RCS, HCT, Outpatient-children, BHH	TFC	Residential, ACM, ACS, Shared Living, ILO
OCFS Reportable Event		Staff exposes consumer during service provision Staff exposed by consumer during service provision	All exposures & testing	
OADS Reportable Event				COVID-suspected COVID-confirmed COVID-exposure COVID-safety COVID-other
WFS Credible	Positive Test	-Staff exposes consumer during service provision -Staff exposed by consumer during service provision	All Exposures and testing	COVID-suspected COVID-confirmed COVID-exposure COVID-safety COVID-other