March 17th, 2020

**Community Integrated Services Covid 19 Operational Policy**

Please note that all items contained herein is subject to change at any time without notice as the situation is fluid. Administrative staff may modify the policy depending on the needs of the client, staff and the safety of all involved.

**Clients**

**New Admissions**

- No new admission will be permitted at this time. The new admissions policy will be reviewed weekly.

**New Potential Client Exposure**

- In the event a client is exposed to COVID either through direct contact with an infected individual or suspected exposure the following policies apply.

  **Staff immediately contact program manager or on-call.**
  - Program Manager or On-Call is to contact the State Director via email and/or text. In the event they cannot be contacted immediately you should contact your Area Director.

  **Program effected must be immediately locked down.**
  - No visitors shall be allowed to enter the program.
  - No new staff will be allowed to enter the home.
  - Clients should be isolated if possible.
  - Emergency Services and CIS nurses may enter the home.
  - Staff CANNOT work in another program until tests have been performed and have returned negative.
  - Staff are strongly encouraged to shelter in place until further guidance is received.
  - Staff in an exposed program are NOT allowed to work in any other location until they have been cleared by tests and have been confirmed as negative.

- Guardian, Case Worker and Crises shall be contacted and notified of potential exposer.

- A sign shall be placed on the entry doors notifying visitors of the possible exposure.

**Client with Symptoms**

In the event a client is expressing the three most common symptoms associated with COVID-19; dry cough, fever and difficulty breathing, the following policies apply.

**Staff immediately contact program manager or on-call.**
- Program Manager or On-Call is to contact the State Director via email and/or text. In the event they cannot be contacted immediately you should contact your Area Director.

- Contact healthcare provider.
  - Follow instructions provided by the healthcare provider.
- **Program effected must be immediately locked down.**
  - No visitors shall be allowed to enter the program.
  - No new staff will be allowed to enter the home.
  - Clients should be isolated if possible.
  - Emergency Services and CIS nurses may enter the home.
  - Staff CANNOT work in another program until tests have been performed and have returned negative.
  - Staff are strongly encouraged to shelter in place until further guidance is received.
  - Staff in an exposed program are NOT allowed to work in any other location until they have been cleared by tests and have been confirmed as negative.
- Guardian, Case Worker and Crises shall be contacted and notified of the symptoms.
- A sign shall be placed on the entry doors notifying visitors of the possible symptoms.

**Clients with Confirmed Diagnoses**
In the event a client have received confirmation of an infection the following applies.

- **Staff immediately contact program manager or on-call to share the test results.**
  - Program Manager or On-Call is to contact the State Director via email and/or text. In the event they cannot be contacted immediately you should contact your Area Director.
  - Program Managers immediately contact Area Director.
  - Program Managers/Area Directors research all employees that have worked within the program for last 48 hours from the time of the confirmation.
  - Program Managers shall contact all staff and notify of potential exposure. These staff will be prevented from working with any other client until tests come back negative.
- **Program effected must be immediately locked down.**
  - No visitors shall be allowed to enter the program.
  - No new staff will be allowed to enter the home.
  - Clients should be isolated if possible.
  - Emergency Services and CIS nurses may enter the home.
  - Staff CANNOT work in another program until tests have been performed and have returned negative.
  - Staff are strongly encouraged to shelter in place until further guidance is received.
  - Staff in an exposed program are NOT allowed to work in any other location until they have been cleared by tests and have been confirmed as negative.
- Guardian, Case Worker and Crises shall be contacted and notified of potential exposer.
- A sign shall be placed on the entry doors notifying visitors of the confirmed diagnoses.

**Multiple Clients with Exposure / Staff Exposure**
In the event of multiple confirmed cases, the following will apply.
Client will be monitored very closely for changes in their symptoms.

Healthcare providers will be notified immediately if symptoms deteriorate.
  o Staff will follow all recommended actions of the healthcare providers.
  o Staff will notify operations team immediately after contacting healthcare provider.

Staff that are confirmed may work with clients that are confirmed if well enough to work.

Staff will be encouraged to stay within the program for the duration of the quarantine if possible.

Staff will be not be permitted to go into public with the effected client.

**Staff (Direct Care)**

Staff who are experiencing, or have been in contact with an individual with, any or all of the following symptoms should contact their PM/on call to discuss:
  o Fever, dry cough, difficulty breathing, fatigue, etc.
  o Program Managers and/or On Call will ask if employee will get tested.
  o Program Managers / Area Director will research who the employee has had contact with for the last 48 hours.
  o Staff will be asked to remain home if symptoms occur prior to entering a program.
  o Staff will be asked to go home, if safe for the client, if symptoms appear in the program.
    ▪ Follow protocol for clients with symptoms if this occurs.

Staff returning from international travel will be subject to a 14 day symptom free quarantine and will not be allowed to be scheduled in any program.
  o Staff who left for international travel prior to 03/16/2020 must use any PTO they have available and/or may be subsidized (TBA)
  o Staff who leave for international travel on 03/16/2020 must use any PTO they have available and will not be subsidized
  o Staff may contact the unemployment office to determine if they are eligible to receive compensation due to the mandatory time limit.

Staff returning from domestic flights are subject to a 7 day symptom free quarantine.
  o Staff must be symptom free prior to entering the program.
  o If staff begins to develop any symptoms after returning to work, they need to immediately contact their program manager for further instruction.

At this time we are unable to determine the actions the federal government and/or state governments will be enacting to help pay for sick leave or unemployment benefits. CIS will continue to update policies as we await answers from these agencies.
Here at Community Integrated Services we are taking the following precautions to minimize risk for our Staff and Clients.

**How we protect our employees from exposure in the workplace:**

- **Report to Supervisor and Stay home** if they have respiratory symptoms (coughing, sneezing, and shortness of breath) and/or a temperature above 100.4 F. Supervisor will report illness appropriately to ensure exposure is contained.

- Masks, sanitizer, and gloves have been provided at office.

- Daily Screening tool filled out daily on Staff and Client and filed with Area Directors.

- All Staff are **REQUIRED** to wear face masks while providing services.

- For in office services Temperature will be taken at the door as well as a required screening tool.

- Leave work if they develop these symptoms while at the workplace.

- Shield coughs and sneezes with a tissue, elbow, or shoulder (not the bare hands).

- Wash hands often with soap and water for at least 20 seconds or use an alcohol-based hand sanitizer.

- We would add that it’s essential to **physical contact** entirely to reduce the risk of spreading infection.

- **Zoom Classes are being run 3 days a week to ensure safety and educational interaction with the clients. We are looking to expand this as well.**

**How we protect our employees and clients from exposure in the home (HCP):**

- Daily Screening tool filled out daily on Home Care Provider and Client and filed with Area Director.
- Masks, sanitizer, and gloves have been provided to homes.

**Staff and Client Covid-19 Screening Tool Review Process**

A daily Covid-19 screen is required of all Direct Support Staff and clients during this time.

If staff or clients report that they have a temperature greater than 100.4 this will be reviewed with the RN to assess need for Covid-19 test versus to observe.

If staff or clients report that they have signs of a respiratory illness, a recent loss of taste or smell or any signs of gastrointestinal upset this will be reviewed with the RN to assess need for Covid-19 test versus to observe.

If staff or clients report that they have had a known exposure with someone who has a confirmed Covid-19 test this will be reviewed with a RN and the person will be tested or will self-quarantine for 14 days.

**The discontinuation of Covid-19 precautions in order to return to work:**

1). Symptom-based strategy

Persons with COVID-19 who **have symptoms** and were directed to care for themselves at home may discontinue isolation under the following conditions:

- At least 3 days (72 hours) have passed *since recovery* defined as resolution of fever without the use of fever-reducing medications and improvement in respiratory symptoms (e.g., cough, shortness of breath); and,
- At least 10 days have passed *since symptoms first appeared*.

2). Test-based strategy previous recommendations for a test-based strategy remain applicable; however, a test-based strategy is contingent on the availability of ample testing supplies and laboratory capacity as well as convenient access to testing.

Persons who have COVID-19 who have symptoms and were directed to care for themselves at home may discontinue isolation under the following conditions:

- Resolution of fever without the use of fever-reducing medications and
- Improvement in respiratory symptoms (e.g., cough, shortness of breath), and
- Negative results of an FDA Emergency Use Authorized COVID-19 molecular assay

Persons who have COVID-19 who are **asymptomatic**:

1). Time-based strategy
Persons with laboratory-confirmed COVID-19 who have not had any symptoms and were directed to care for themselves at home may discontinue isolation under the following conditions:

- At least 10 days have passed since the date of their first positive COVID-19 diagnostic test assuming they have not subsequently developed symptoms since their positive test. If they develop symptoms, then the symptom-based or test-based strategy should be used. Note, because symptoms cannot be used to gauge where these individuals are in the course of their illness, it is possible that the duration of viral shedding could be longer or shorter than 10 days after their first positive test.

2). Test-based strategy

A test-based strategy is contingent on the availability of ample testing supplies and laboratory capacity as well as convenient access to testing.

**PTO Policy around Corona Diagnosis:**

Community Integrated Services provides paid time off in the form of PTO (vacation/personal time/sick time) for all full-time employees. Supervisors must approve and authorize paid-time off absences and employees. (See PTO Policy for Eligibility around Accrual, Caps, and Use)

In the event of Contraction of Covid-19 PTO may be used for time out (despite short notice of use), after documentation has been electronically obtained by the HR department. Should PTO not be available to you CIS will pay you up to your average hours to supplement your pay for up to 14 days from diagnosis to ensure proper recovery.

Also as stated in the Employee handbook “CIS may require a doctor’s note from employees who are absent from work for more than two days, or who appear to be abusing the sick time benefit. Employees who abuse, or excessively use, the paid time off benefit, are subject to disciplinary action.”