

| | |
|---|----------------------------------|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | |
| Policy Title: COVID-19 Interim Policy | Policy Number: 5.51 |
| | Effective Date: |
| | Revision Date: |
| | Approved By: |
| | Page Number: Page 1 of 42 |

CONTENT HYPERLINKS

PURPOSE

INTERIM POLICY

COVID-19 INFECTION

WORKPLAN

RESPONSIBILITIES

Administrator Responsibilities

Staff Responsibilities

ADMINISTRATIVE STRATEGIC PLANNING

Operations

Communications

Staff Shortages

Personal Protective Equipment (PPE) Shortages

Infection Hazard Assessment

Travel & Commuting

Capacity to Meet Client Care Needs

Client Transportation

Closure of Operations

INFECTION PREVENTION & CONTROL

Clean, Disinfect & Ventilate

Disinfectants

Ventilation

IPC Measures for Home Worksites

Routine Practices

Hand Hygiene

Masks & Face Shields

Droplet & Contact Precautions

Aerosol Generating Medical Procedures

Collecting Lab Specimens

Handling Collected Lab Specimens

Client Care Equipment & Supplies

Client Laundry

Waste Management

Mitigating COVID-19 Transmission to Other Homes

| | |
|---|----------------------------------|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | |
| Policy Title: COVID-19 Interim Policy | Policy Number: 5.51 |
| | Effective Date: |
| | Revision Date: |
| | Approved By: |
| | Page Number: Page 2 of 42 |

IPC Measures for Office Worksite

Physical Practices

Cleaning & Disinfecting Office Environment

CLIENT CARE & SERVICE

Telehealth Usage During COVID-19 Emergency

Risk Assessments

Home Safety Risk Assessments

Point-of-Care Risk Assessments

Admittance of Clients to Agency

Admittance of Hospitalized Individuals with COVID-19

Admittance of Non-Hospitalized Individuals with COVID-19

COVID-19 Screening

Staff Screening

Client Screening

Pre-Home Visit Screening

Pre-Home Entry Screening

Interviews/Assessments

Interviewing/Assessing Persons Under Investigation (PUI) for COVID-19

Interviewing/Assessing Asymptomatic Exposures to Suspected or Confirmed COVID-19

Provision of Client Care

Caring for Suspected or Confirmed COVID-19 Clients

Caring for Clients Needing Therapeutic Intervention

WORK RESTRICTIONS & MONITORING

Staff Exposure to COVID-19

Restrictions for Staff Potentially & Actually Exposed to COVID-19

Restrictions for Staff with Prolonged Exposure

Restrictions for Staff Without Prolonged Exposure

Symptomatic Staff & Home Visits

Return To Work After Covid-19 Diagnosis

Symptom Based Guidelines

Test-Based Guidelines

TRAINING & EDUCATION

Staff Training & Education

Coping With COVID-19 Stress & Enhancing Resilience

Client Training & Education

REFERENCES

RESOURCES

| | |
|---|----------------------------------|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | |
| Policy Title: COVID-19 Interim Policy | Policy Number: 5.51 |
| | Effective Date: |
| | Revision Date: |
| | Approved By: |
| | Page Number: Page 3 of 42 |

PURPOSE

To provide interim guidance to home care organizations and Staff to prevent the transmission of COVID-19 infections in home care settings.

INTERIM POLICY

1. In adherence to CDC guidelines Everyday Direct Support, LLC:
 - a. Provide CDC’s interim guidance for preventing the spread of COVID-19 in homes and communities to Staff, client, caregiver, and Household Members.
 - b. Implement interim guidance to coordinate home care and isolation of individuals with Suspected or Confirmed COVID-19 infection including:
 - i. Clients evaluated in an outpatient setting who do not require hospitalization; or,
 - ii. Clients who are discharged following a hospitalization with confirmed COVID-19.
 - c. Adhere to relevant infection prevention & control practices.
 - d. Apprise and train Staff in a timely and appropriate manner on infection control and infection and CDC changes that affect this policy.
 - e. Inform and educate Clients about COVID-19; and, new and/or revised CDC recommendations.
 - f. Maintain regular contact with State and Local Health Department to discuss criteria for discontinuing measures included in this interim policy.

COVID-19 INFECTION

1. COVID-19 is the name given by the World Health Organization (WHO) for the disease caused by the novel coronavirus SARS-CoV-2. It started in Wuhan, China in late 2019 and has since spread worldwide. COVID-19 is an acronym that stands for coronavirus disease of 2019. It is thought to spread primarily from person to person, mainly through respiratory droplets produced when an infected person coughs, sneezes, or talks. These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs. Spread is more likely when people are in close contact within about 6 feet of each other.
 - a. Symptoms may appear 2-14 days after exposure to the virus and can include:

| | |
|--|------------------------------|
| ◆ chills or fever: temperature of 100°F (38°C) or greater; | ◆ headache |
| ◆ cough | ◆ new loss of taste or smell |
| ◆ shortness-of-breath or difficulty breathing | ◆ sore throat |
| ◆ fatigue | ◆ congestion or runny nose |
| ◆ muscle or body aches | ◆ nausea or vomiting |
| | ◆ diarrhea |

| | |
|---|----------------------------------|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | |
| Policy Title: COVID-19 Interim Policy | Policy Number: 5.51 |
| | Effective Date: |
| | Revision Date: |
| | Approved By: |
| | Page Number: Page 4 of 42 |

- b. Fever may be intermittent or may not be present in some people, such as those who are elderly, immunocompromised, or some taking certain fever-reducing medications (e.g., nonsteroidal anti-inflammatory drugs [NSAIDS]).
 2. At Risk Individuals
 - a. As individuals get older, their risk for severe illness from COVID-19 increases. For example, a person in their 50's is more at risk than a person in their 40's. However, the greatest risk for severe illness from COVID-19 is among those aged 85 or older.
 - b. There are also other factors that can increase risk for severe illness, such as underlying medical conditions, including:
 - ◆ Cancer
 - ◆ Chronic kidney disease
 - ◆ COPD (chronic obstructive pulmonary disease)
 - ◆ Heart conditions, such as heart failure, coronary artery disease, or cardiomyopathies
 - ◆ Immunocompromised state (weakened immune system) from solid organ transplant
 - ◆ Obesity (body mass index [BMI] of 30 kg/m² or higher but < 40 kg/m²)
 - ◆ Severe Obesity (BMI ≥ 40 kg/m²)
 - ◆ Pregnancy
 - ◆ Sickle cell disease
 - ◆ Smoking
 - ◆ Type 2 diabetes mellitus
3. Emergency warning signs

Signs and symptoms that require immediate medical care include:

 - ◆ trouble breathing
 - ◆ persistent pain or pressure in the chest
 - ◆ new confusion
 - ◆ inability to wake or stay awake
 - ◆ bluish lips or face
4. Close Contact

Close contact is considered to be:

 - a. within approximately 6-feet of a COVID-19 case for a prolonged period of time;
 - b. close contact can occur while caring for, living with, visiting, or sharing a health care waiting area or room with a COVID-19 case; or,
 - c. in direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on).

| | |
|---|--|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | Policy Number: 5.51 Effective Date: Revision Date: Approved By: Page Number: Page 5 of 42 |
| Policy Title: COVID-19 Interim Policy | |

5. Infection Control Measures (IPC) are instituted to prevent infections, e.g., Routine Practices including hand hygiene, point-of-care risk assessment and implementation of Droplet and Contact Precautions and use of an N-95 respirator.

WORKPLAN

1. The Administrator and members of the Management Team shall produce a COVID-19 Work Plan to ensure:
 - a. strategies and actions are developed, which are compliant to CDC, Local Health Department, State guidelines; and other relevant authorities; and,
 - b. such strategies are implemented, maintained, and modified for compliancy and inclusion of changing guidelines.
2. The Administrator shall designate a Staff member to serve as the Agency’s COVID Coordinator to:
 - a. manage, monitor, and ensure Staff compliancy to the implemented guidelines;
 - b. communicate existing and evolving COVID-19 guidelines;
 - c. respond to COVID-19 concern; and,
 - d. ensure all Staff are trained per their position requirements.
3. Staff members, Clients and relevant outside resources shall be given the name and contact number of the Agency’s Covid-19 Manager.
4. Wherever relevant and feasible, planning actions should include:
 - a. Delineate the [Responsibilities](#) of Administrator and Staff.
 - b. Review and update Agency’s *Emergency Preparedness Plan & Policy* to include preparedness for pandemic infections.
 - c. Conduct an inventory of PPE supplies and plan for [PPE shortages](#).
 - d. Conduct an [infection hazard assessment](#) of the workplace.
 - e. Develop plans to address [staff shortages](#).
 - f. Educate Staff on procedures for donning and doffing PPE, including sequential order. *Refer to Addendum A: Sequential Donning of PPE and to Agency’s PPE Policies)*
 - g. Review [infection control & prevention](#). *Also refer to Agency Policies on Infection Control, Bloodborne Diseases & Universal Precautions.*
 - h. Develop procedures for [Staff exposures to COVID-19](#).
 - i. Establish guidelines for [returning to work after COVID-19 diagnosis](#).
 - j. Consider [telehealth usage during COVID emergency](#).
 - k. Intensify [cleaning, disinfection and ventilation measures](#).
 - l. Incorporate [physical ICP practices](#) in the workplace.
 - m. Limit & Modify [travel and commuting](#) practices
 - n. Recognize and acknowledge [Closure of Operations](#) Indications

| | |
|---|----------------------------------|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | |
| Policy Title: COVID-19 Interim Policy | Policy Number: 5.51 |
| | Effective Date: |
| | Revision Date: |
| | Approved By: |
| | Page Number: Page 6 of 42 |

RESPONSIBILITIES

Administrator Responsibilities

1. Maintain awareness of data about the local and regional spread of COVID-19.
2. Determine operation capability to call and pre-screen Clients prior to scheduled visits.
3. Ensure that all necessary preventive and protective measures are taken to minimize safety and health risks.
4. Provide information, instruction and training on safety and health, including:
 - a. refresher training on infection prevention & control (IPC); and,
 - b. use of, don, doff, and disposal of Personal Protective Equipment (PPE).
5. Provide adequate Infection Prevention Control (IPC) and Personal Protective Equipment (PPE) supplies (masks, gloves, goggles, gowns, hand sanitizer, soap and water, cleaning supplies) in sufficient quantity to Staff caring for Suspected or Confirmed COVID-19 individuals, to assure they do not incur expenses for occupational safety and health requirements.
6. Ensure that PPE is disposed or, if reusable, it is properly cleaned or laundered, repaired and stored after use.
7. Ensure Staff receive ongoing compliance monitoring, in part, through the conduction of routine infections control and prevention practices, as dictated by risk assessments.
8. Familiarize Staff with technical updates on COVID-19 and provide appropriate tools, which enable them to assess, triage, test and treat individuals and to share infection prevention & control information with individuals and the public.
9. Ensure policies and procedures are in place to prevent the introduction and spread of COVID-19 between client homes, which are in accordance with CDC, State, and Local Health Departments recommendations.
10. Provide Staff with appropriate security measures for personal safety, as needed.
11. Ensure a blame-free environment for workers to report incidents, e.g.:
 - a. exposures to blood or bodily fluids from the respiratory system; or,
 - b. cases of violence.
12. Adopt measures for immediate follow-up to incident reports including support to victims.
13. Advise workers on self-assessment, symptom reporting and staying home when ill.
14. Maintain appropriate working hours with breaks.
15. Consult with health workers on occupational safety and health aspects of their work and notify the labor inspectorate of cases of occupational diseases.
16. Ensure Staff do not return to a work situation where there is continuing or serious danger to life or health, until necessary remedial action has been taken.

| | |
|---|----------------------------------|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | |
| Policy Title: COVID-19 Interim Policy | Policy Number: 5.51 |
| | Effective Date: |
| | Revision Date: |
| | Approved By: |
| | Page Number: Page 7 of 42 |

17. Allow workers to exercise the right to remove themselves from a work situation that they have reasonable justification to believe presents an imminent and serious danger to their life or health. When Staff exercise this right, they must be protected from any undue consequences.
18. Honor the right of Staff to seek compensation, rehabilitation, and curative services if infected with COVID-19 following exposure in the workplace, as resulting illness would be considered an Occupational Disease.
19. Provide access to mental health and counselling resources.
20. Enable co-operation between Management, Staff, and/or their Representatives.

Staff Responsibilities

1. Follow established occupational safety and health procedures, avoid exposing others to health and safety risks and participate in Agency's occupational safety and health training.
2. Use provided protocols to assess, triage and treat individuals.
3. Treat individuals with respect, compassion and dignity.
4. Maintain individual confidentiality.
5. Follow established public health reporting procedures of suspected and confirmed COVID-19 cases.
6. Provide or reinforce accurate infection prevention & control measures and public health information, including concerned people who have neither symptoms nor risk.
7. Properly Use, don, doff and dispose of Personal Protective Equipment properly.
8. Self-monitor for signs of illness at least once daily; and, immediately self-isolate and report illness to COVID Coordinator.
9. Advise Management if experiencing signs of undue stress or mental health challenges that require support interventions.
10. Prior to every shift, report to the immediate COVID Coordinator any potential or unprotected exposure to COVID-19.
11. Any situation, believed to present reasonable justification that a serious danger to life or health is present, must be reported to the COVID Coordinator.
12. Ensure they are knowledgeable about and/or have received training on infection control practices and PPE usage. If not, the COVID Coordinator must be informed immediately about any training needed, including:
 - a. How to conduct point of contact risk assessments prior to all interactions to determine what prevention & control measures are needed to protect Clients and themselves from infection.
 - b. How to practice routine infection prevention control and additional precautions.
 - c. How to use and the limitations of the specific PPE available for their usage.

| | |
|---|----------------------------------|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | |
| Policy Title: COVID-19 Interim Policy | Policy Number: 5.51 |
| | Effective Date: |
| | Revision Date: |
| | Approved By: |
| | Page Number: Page 8 of 42 |

- d. Who to report the presence of suspected COVID-19 symptoms they may have and where to go to get tested.
- e. How to obtain an understanding of conserving PPE and how to participate in programs to conserve PPE.

ADMINISTRATIVE STRATEGIC PLANNING

1. The Agency's Management Team shall develop, implement and oversee strategies for handling COVID-19 infections to:
 - a. protect Staff, Clients, Household Members and others; and,
 - b. enable the continuation of Agency operations during infection.
2. Agency COVID-19 policies & procedures must be adjusted quickly to reflect latest CDC, State, and Local Health Department recommendations.
3. Staff shall follow and be compliant with the terms of the policies and procedures.

Operations

1. Encourage Staff, who are at higher risk for severe illness, to self-identify so extra precautions can be taken to reduce their exposure, while ensuring regulatory compliancy is maintained with:
 - a. Americans with Disabilities Act (ADA); and,
 - b. Age Discrimination in Employment Act (ADEA).
2. Review Staff Policies in respect to personal time, sick time, and overtime.
3. Update contact information for Staff and Volunteers.
4. Identify Staff who are willing to work extra and flexible hours.
5. Determine if any Staff Members also work at another agency.
6. Cross-train Staff and Volunteers wherever possible.
7. Assist Staff to develop their own family plans, as required.
8. Monitor and report illness in the workforce and report to Local Health Department, State or CDC as instructed.
9. Implement daily Staff health screenings for temperature increases and signs and symptoms of COVID-19.
10. Require Staff, who conduct in-home visits, to screen themselves at least twice daily.
11. Stipulate that Staff not enter the workplace or a client's home if they:
 - a. are experiencing symptoms of COVID-19;
 - b. were exposed to an individual testing positive for COVID-19 within the last 14-days; or,
 - c. have a temperature of 100°F (38°C) or greater.

| | |
|---|--|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | Policy Number: 5.51 Effective Date: Revision Date: Approved By: Page Number: Page 9 of 42 |

Communications

1. Communicate and collaborate with Occupational Health Services and other Health Care Organizations (HCO), particularly re Infection Prevention & Control (IPC), to improve the safety of Health Care Personnel (HCP) including:
 - a. HCO leaders and managers
 - b. HCP representatives
 - c. Information technology services
 - d. Clinical Services
 - e. Pharmacies
 - f. Procurement and central supply services
 - g. Quality assurance and accreditation committees
 - h. Safety committees
 - i. Volunteer departments
 - j. Workers' compensation
2. Maintain regular contact with local and State authorities to determine current mitigation levels in community:
 - a. Communicate with local emergency preparedness organizations.
 - b. Read daily updates from CDC and World Health Organization.
 - c. Be aware of State updates, resources and communications.
3. Review communication plans, methods and processes:
 - a. Apply safe and suitable methods of sharing information with Staff, contractors, Local Health Department, appropriate State authorities, e.g. email, text messages, phone calls and other means determined by Management.
 - b. Update Staff and contractors in a timely manner about changes to work processes and evolving CDC and World Health Organization guidelines.

Staff Shortages

1. Management Team and COVID Coordinator shall oversee the development and implementation of strategies to prepare for potential Staff shortages.
2. Reassess workforce and the minimum number of Staff needed to provide a safe work environment and safe client care.
3. Monitor absenteeism of employees and create a roster of trained back-up Staff.
4. Communicate with other in-home service providers, Local Health Department, and other health coalitions to:
 - a. identify potential workers, e.g., hire additional Care Providers and Office Staff;
 - b. recruit retired workers; and,
 - c. use Students or Volunteers.

| | |
|---|-----------------------------------|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | |
| Policy Title: COVID-19 Interim Policy | Policy Number: 5.51 |
| | Effective Date: |
| | Revision Date: |
| | Approved By: |
| | Page Number: Page 10 of 42 |

5. Advise Clients and Staff when Agency is operating under crisis standards. Provide details on:
 - a. changes in practice that should be expected;
 - b. actions that will be taken to protect them from exposure to COVID-19;
 - c. whether Staff with Suspected or Confirmed COVID-19 are permitted to work.
6. Adjust Staff schedules, hire additional workers, and rotate positions that support client care activities:
 - a. Cancel all non-essential procedures, care, service and home visits.
 - b. Attempt to address social factors that might prevent Staff from reporting to work. e.g., need for transportation that allows for social distancing.
 - c. Keep abreast of State-specific emergency waivers or changes to licensure requirements or renewals for select categories of care providers.
 - d. When appropriate, ask Staff to postpone elective time off, taking into consideration the mental health benefits of time off and care-taking responsibilities.
 - e. Identify designated healthcare facilities or alternate care sites with adequate Staffing to care for Clients with COVID-19.
 - f. Develop plans to allow asymptomatic Staff Members who have had unprotected exposure to COVID-19, but are not known to be infected, to continue to work.
7. Support coping and resilience among employees by providing information on how to:
 - a. recognize the symptoms of stress;
 - b. identify work factors that can add to stress during a pandemic;
 - c. build resilience and manage job stress; and,
 - d. seek help or obtain more information.
8. When there are no longer enough Staff to provide safe client care:
 - a. Transfer Clients to another Care Provider that does have adequate Staffing.
 - b. Implement plans to³³ allow asymptomatic Staff who have had an unprotected exposure to COVID-19, but are not known to be infected, to continue to work.
 - c. Staff who are tested and found to be infected with COVID-19 will remain off the job until all return to work criteria have been met, unless they are permitted to return to work as described in #9 and #10 below.
9. If Staff shortages continue, despite other mitigation strategies, consideration may be given to allow Staff with Suspected or Confirmed COVID-19, who have not met all the return to work criteria, to work providing:
 - a. They are well enough and willing to work.
 - b. They are restricted from contact with severely immunocompromised Clients, e.g., transplant, hematology, oncology. And,
 - c. Their duties are prioritized and considered in the following order:

| | | | | | | |
|---|--|----------------------------|------------------------|-----------------------|---------------------|-----------------------------------|
| Everyday Direct Support, LLC Policies and Procedures | | | | | | |
| Section 5: Health & Safety | <table border="1"> <tr> <td data-bbox="995 300 1412 331">Policy Number: 5.51</td> </tr> <tr> <td data-bbox="995 331 1412 363">Effective Date:</td> </tr> <tr> <td data-bbox="995 363 1412 394">Revision Date:</td> </tr> <tr> <td data-bbox="995 394 1412 426">Approved By:</td> </tr> <tr> <td data-bbox="995 426 1412 478">Page Number: Page 11 of 42</td> </tr> </table> | Policy Number: 5.51 | Effective Date: | Revision Date: | Approved By: | Page Number: Page 11 of 42 |
| Policy Number: 5.51 | | | | | | |
| Effective Date: | | | | | | |
| Revision Date: | | | | | | |
| Approved By: | | | | | | |
| Page Number: Page 11 of 42 | | | | | | |
| Policy Title: COVID-19 Interim Policy | | | | | | |

- i. Perform job duties where they do not interact with others such as in telephone and telehealth services.
 - ii. Provide direct care only for Clients with confirmed COVID-19.
 - iii. Provide direct care for Clients with suspected COVID-19.
 - iv. As a last resort, provide direct care for Clients without Suspected or Confirmed COVID-19.
10. Staff who are permitted to return to work before meeting all return to work criteria, should adhere to all return to work practices and work restrictions, including:
- a. Wear a facemask, instead of a cloth face covering, at all times.
 - b. Wear a N-95 or higher-level respirator other PPE when indicated, including when caring for Clients with Suspected or Confirmed COVID-19.
 - c. Take precautions to avoid exposing co-workers, e.g.:
 - i. Wear facemasks even if not are in client care area.
 - ii. If facemask must be removed, do so when separate from others.
 - d. Restrict contact with severely immunocompromised Clients (e.g., transplant, hematology-oncology) until the full return to work criteria have been met.
 - e. Self-monitor for symptoms and seek re-evaluation from health provider if respiratory symptoms recur or worsen.

Personal Protective Equipment (PPE) Shortages

- 1. Conduct an inventory of PPE supplies and dates. Label expired PPE as outdated but don't immediately discard.
- 2. Contact provider chains re supplies, equipment and other client service needs.
- 3. Determine PPE utilization rates for Agency operations.
- 4. Have Staff demonstrate competency in donning and doffing PPE used in the performance of their duties.
- 5. Provide Staff with the services, supplies and equipment required by the individualized Plans of Cares including:
 - a. supplies for respiratory hygiene and cough etiquette;
 - b. hand sanitizer that is 60%-95% alcohol-based; and,
 - c. Personal Protective Equipment (PPE).
- 6. Should obtaining PPE supplies become difficult due to reasons outside the Agency's control, the Agency shall, as soon as possible, take actions to mitigate the resource shortage and obtain the necessary supplies.
- 7. Prioritize use of PPE items, according to the activity hazard level:
 - a. Respirators or gowns must be used when exposed to:
 - i. aerosol-generating procedures, including CPR and intubation;

| | |
|---|---|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | Policy Number: 5.51 Effective Date: Revision Date: Approved By: Page Number: Page 12 of 42 |

- ii. human blood, body fluids, and other potentially infectious material; and,
- iii. hazardous chemicals, and contaminated environmental surfaces.
- b. Alcohol-based hand sanitizer:
 - i. Practice effective hand washing with soap and water.
- c. Follow CDC guidelines for PPE supply shortages and re-use of equipment.
- d. Notify the appropriate local authorities of the shortage.
- e. Resume standard practices promptly, as PPE availability returns to normal.
- 8. Should PPE shortages require re-usage of masks, CDC guidelines must be followed with regard to mask use, reuse, and reprocessing.
- 9. If re-use of masks is recommended, Staff must be instructed to:
 - a. Remove mask by the ear loops or elastics taking care not to touch front of mask.
 - b. Avoid contaminating the inner surface of the mask.
 - c. Store the mask in a clean, dry area, in accordance with public health guidelines.
 - d. Perform hand hygiene before and after mask removal, and before putting it on again.

Infection Hazard Assessment

1. Assessment activities will be carried out as required by federal, state, local, accreditation and may include the following entities:
 - a. Occupational Safety & Health Administration (OSHA) requires employers to:
 - i. Maintain logs of work-related injuries, illnesses, which include infectious disease exposures., which can subsequently help identify trends in occupational exposures or acquired infectious diseases that warrant mitigation.
 - ii. conduct workplace evaluations to assess implementation of an Exposure Control plan for all affected employees.
 - iii. evaluate respiratory hazards in the workplace, and to implement a respiratory protection program, if needed
 - b. Centers for Medicare and Medicaid Services (CMS) require some Health Care Organizations (HCO) to report influenza coverage of Health Care Personnel (HCP) to National Healthcare Safety Network (NHSN)Some HCO
 - c. The Joint Commission standards require establishing an influenza vaccination program for staff, setting incremental vaccination goals to increase coverage, and reporting HCP influenza immunization rates to key stakeholders
 - d. OSHA’s Job Hazard Analysis Booklet may be used to:
 - i. assess infection and other workplace risks; and/or,
 - ii. eliminate, mitigate and/or prevent workplace infection and other hazards.

<https://www.osha.gov/Publications/osh3071.pdf>

| | |
|---|---|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | Policy Number: 5.51 Effective Date: Revision Date: Approved By: Page Number: Page 13 of 42 |

2. Exposures to occupational infections shall be controlled in accordance with CDC’s “Hierarchy of Controls”, which ranks controls based on their reliability and effectiveness:
 - a. Elimination: Physically remove the hazard
 - b. Substitution: Replace the hazard
 - c. Engineering Controls: Isolate people from the hazard
 - d. Administrative Controls: Change the way people work
 - e. PPE: Protect workers with Personal Protective Equipment

Travel & Commuting

1. Encourage Staff to postpone or cancel non-essential travel and to follow Federal, State, and local regulations and guidance before resuming travel plans.
2. Provide telework options to Staff who use public transportation if some or all of their job duties can be conducted off-site.
3. Educate Staff, who must commute to the worksite or to multiple worksites during the performance of their work duties, about the importance of prevention and protection measures including:
 - a. practicing hand hygiene and respiratory etiquette;
 - b. practicing 6-foot social distance, e.g., while waiting for bus, selecting seat on train;
 - c. wearing masks;
 - d. staying home when sick or when otherwise appropriate;
 - e. having adequate supplies; and,
 - f. protecting people at risk for COVID-19.
4. If Personal or Agency Vehicles are used to commute to the worksite and/or to perform duties while at work:
 - a. Apply the principles outlined in #3.
 - b. Clean and disinfect frequently touched surfaces, e.g., steering wheel, gear shift, door frame/handles, windows, radio/temperature dials, and seatbelt buckles.
 - c. Use alcohol wipes to disinfect parking meters and pay stations or apply hand sanitizers when finished. Wash hands as soon as possible afterwards.
 - d. Practice social distancing.
 - e. Limit vehicle passengers to necessary individuals only.
 - f. Improve the ventilation in the vehicle, if possible, e.g., open windows or set the air ventilation/air conditioning on non-recirculation mode.
5. If Public Transit is used:
 - a. Keep current with the latest information on transit changes to services and procedures.
 - b. Limit contact with frequently touched surfaces, e.g., kiosks, digital interfaces, e.g.,

| | |
|---|---|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | Policy Number: 5.51 Effective Date: Revision Date: Approved By: Page Number: Page 14 of 42 |

- c. touchscreens and fingerprint scanners, ticket machines, turnstiles, handrails, restroom surfaces, elevator buttons.
 - d. If touching is unavoidable, wash hands or use sanitizer as soon as possible after contact.
 - e. Use touchless payment and no-touch trash cans and doors when available.
 - f. Exchange cash or credit cards by placing them in a receipt tray or on the counter rather than exchanging them by hand.
 - g. Travel during non-peak hours to avoid crowds.
 - h. Avoid gathering in groups and stay out of crowded spaces especially at transit stations and stops.
 - i. Skip a row of seats between self and other riders, where possible.
 - j. Enter and exit buses through rear entry.
 - k. Look for social distancing instructions or physical guides offered by transit authorities.
 - l. After leaving the transit station or stop, use hand sanitizer, and wash hands upon arriving at destination.
6. If Taxi, Rideshare, Driver-for-Hire or similar transportation is used;
- a. Take protection measures, as outlined in #3.
 - b. Practice preventative actions, e.g., avoid touching eyes/nose/mouth and washing hands.
 - c. Avoid pooled rides with multiple passengers.
 - d. Ask driver to open windows for improved ventilation.
 - e. Request partitions be placed between seat rows, if available.

Capacity to Meet Clients Care Needs

1. Determine Agency’s service capacity based on Staffing and Client need classification levels.
2. Classify and regularly assess the level of client care needs for possible triage.
3. Identify Household Members who may be able to take on more care responsibility if necessary.
4. Develop Business Continuity and Succession Plans. Reassess and modify them, as necessary, to ensure continuity in the Agency’s Management and daily operations:
 - a. if applicable, cooperate with the Board of Directors with the plans;
 - b. identify and document the names and responsibilities of:
 - i. position successors;
 - ii. Staff with shared duties; and,
 - iii. interim Staff.

| | |
|---|---|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | Policy Number: 5.51 Effective Date: Revision Date: Approved By: Page Number: Page 15 of 42 |
| Policy Title: COVID-19 Interim Policy | |

- c. obtain governing authority approval, if required.
5. Forecast operations based on significantly reduced Staff.
6. Develop alternate Staffing patterns such as longer days.
7. Assign intake Staff or train Volunteers to call individuals about symptoms prior to visits.
8. Establish two distinct lines of Clients: COVID-19 Clients and non-COVID-19 Clients.
9. Minimize the number of in-home Staff assigned to Clients with Suspected or Confirmed COVID-19.
10. Unless absolutely necessary, avoid scheduling Staff to deliver care to Clients who do not have Suspected or Confirmed COVID-19 if the same Staff Member(s) is already providing care to Clients who do have Suspected or Confirmed COVID-19.
11. Prepare Staff to prioritize and change direction quickly, smoothly & effectively

Client Transportation

1. Restrict transportation of Clients to essential purposes only, e.g., obtain living necessities, attend medical appointments; handle urgent matters.
2. Limit the number of other passengers being transported to essential persons only.
3. Provide Staff with hand sanitizer, disposable wipes, and/or cleaning products to clean and disinfect commonly touched vehicle surfaces prior to contact, e.g., door frames & handles, windows, seatbelt buckles, steering wheel, gearshift, signaling levers.
4. Ask Staff to wear cloth face coverings, instead of surgical masks and encourage Clients to do the same.
5. Instruct Staff to avoid physical contact with Clients, if possible.
6. Ask Clients to sit in the back seat.
7. Provide a portable partition, if possible, to place between front and back seats.
8. Ask Clients to carry their own bags, e.g. purse and shopping bags, if capable.
9. Advise Staff to use car vents to bring in outside air and/or open the windows instead of using recirculated air options.
10. Remind Staff that in addition to CDC general handwashing guidelines, hands should be washed:
 - a. before and after Clients are transported;
 - b. before and after touching Clients and/or their belongings (if contact is essential); and,
 - c. before and after pumping gas.

| | |
|---|---|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | Policy Number: 5.51 Effective Date: Revision Date: Approved By: Page Number: Page 16 of 42 |

Closure of Operations

1. State and Local Health Department notices about COVID-19 transmission in the area shall be checked daily, and operations adjusted accordingly.
2. Consider closing for a few days if there is a case of COVID-19 in the workplace or for longer periods of time if the number of cases in the local area increase
3. Refer to the Agency’s *Emergency Preparedness Plan* when determining how off-site business operations may be conducted.

INFECTION PREVENTION & CONTROL (IPC)

Clean, Disinfect & Ventilate

1. Educate Staff, Clients, and Household Members about routine cleaning and disinfection practices. Give them a copy of *COVID-19 Handout For Client* (See *Addendum B*).
2. Wear reusable or disposable gloves for routine cleaning and disinfection.
3. Reduce the number of germs, dirt and impurities by:
 - a. cleaning surfaces using soap and water; and,
 - b. applying a disinfectant to kill surface germs.
4. Wash hands often with soap and water for 20-seconds or use a hand sanitizer with at least 60% alcohol.
5. Designate a separate bedroom and bathroom for a person who is sick (if possible).
6. Clean frequently touched areas daily, e.g. tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, faucets, sinks.
7. Ensure bathrooms are thoroughly disinfected.
8. Clean and disinfect any surfaces that become contaminated with respiratory secretions or other body fluids as soon as possible.
9. After a sick person has used an area:
 - a. Close area off until it has been cleaned and disinfected.
 - b. Wait 24-hours to clean and disinfect.
 - c. If cleaning cannot be postponed for 24-hours, wait as long as possible before cleaning and disinfecting.

Disinfectants

1. Use effective disinfectants including:
 - a. EPA (Environmental Protection Agency) approved products.
 - b. Alcohol solutions with at least 70% alcohol.
 - c. Diluted household bleach solutions if they:

| | |
|---|---|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | Policy Number: 5.51 Effective Date: Revision Date: Approved By: Page Number: Page 17 of 42 |

- i. are appropriate for the surface;
 - ii. contain 5.25–8.25% sodium hypochlorite;
 - iii. are mixed with room temperature water at a ratio of:
 - 1/3 cup bleach per gallon; or,
 - 4 teaspoons per quart;
 - iv. remain in contact with the surface for at least 1-minute; and,
 - v. have not expired.
2. Practice effective and safe usage of disinfectants:
 - a. Read product directions for precautions, receptive use sites and surface types.
 - b. Don't use any more than the amount recommended on the label.
 - c. Use water at room temperature for dilution unless otherwise recommended.
 - d. Avoid mixing chemicals.
 - e. Label diluted cleaning solutions.
 - f. Pre-clean the surface. Wash the surface with soap and water if the directions mention pre-cleaning or if the surface is visibly dirty.
 - g. Follow the contact time specified in the directions. The surface should remain wet the whole time to ensure the product is effective.
3. Wear gloves and wash hands:
 - a. If gloves are disposable, discard after each cleaning.
 - b. If gloves are reusable, dedicate a pair to disinfecting COVID-19.
 - c. Wash hands after removing the gloves.
4. Ensure adequate ventilation during use of disinfectant.
5. Keep disinfectant lids tightly closed and store out of reach of children.

Ventilation

1. Improve the workplace ventilation system through cleaning, sanitizing, and disinfecting:
 - a. Clean and disinfect frequently touched surfaces at least daily and shared objects between use.
 - b. Avoid using or sharing items that are not easily cleaned, sanitized, or disinfected.
 - c. Ensure safe and correct application of disinfectants.
 - d. Ensure ventilation systems operate properly.
2. Increase circulation of outdoor air as much as possible to improve ventilation, e.g., open windows and doors, providing doing so does not pose a safety risk to individuals and Staff using the workspace-

| | |
|---|-----------------------------------|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | |
| Policy Title: COVID-19 Interim Policy | Policy Number: 5.51 |
| | Effective Date: |
| | Revision Date: |
| | Approved By: |
| | Page Number: Page 18 of 42 |

IPC Measures for Home Worksites

Routine Practices

1. Staff must always apply standard practices when providing in-home care including, but not limited to:
 - a. conducting a Point of Contact Risk Assessment (PCRA);
 - b. minimizing potential exposure;
 - c. utilizing hand hygiene practices;
 - d. applying respiratory hygiene measures, e.g.:
 - i. covering a cough with tissue;
 - ii. coughing into elbow; and,
 - iii. following up by performing hand hygiene.
 - e. using PPE effectively and appropriately;
 - f. reprocessing usable medical equipment:
 - i. before using on another person; and,
 - ii. when it has been soiled.

Hand Hygiene

1. Staff must perform handwashing practices at a minimum:
 - a. when entering and exiting client homes;
 - b. after personal hygiene actions are performed, e.g., blowing nose, using bathroom, using tissues;
 - c. before donning and doffing Personal Protective Equipment;
 - d. before and after contact with the client's environment, e.g., medical equipment, bed, table, door handles whether gloves are worn or not;
 - e. whenever hands are potentially contaminated, e.g., after handling blood, body fluids, bedpans, urinals, or wound dressings;
 - f. before and after contact with a client, regardless of whether gloves are worn;
 - g. after removing gloves;
 - h. before performing aseptic procedures; and,
 - i. before preparing or administering food or medication.
2. Clients must be encouraged to perform hand hygiene and instructed on how and when to do so:
 - a. upon entering or leaving their home;
 - b. prior to eating, oral care, or handling medications;
 - c. after personal hygiene practices or use of toileting facilities;

| | |
|---|---|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | Policy Number: 5.51 Effective Date: Revision Date: Approved By: Page Number: Page 19 of 42 |

- d. any time hands are potentially contaminated, e.g., after handling wound dressings or bodily fluids.
- 3. Hands can be cleaned using alcohol-based hand rub, which contains 60-90% alcohol or using soap and water:
 - a. If possible use soap and water when:
 - i. hands are visibly soiled; and/or,
 - ii. providing care to Clients with *Clostridioides Difficile* infection (bacteria that cause diarrhea and colitis).
- 4. Clients, who are physically or cognitively unable to perform hand hygiene must be assisted.

Masks & Face Shields

- 1. Staff must apply face masks and eye protections during in-home visits.
- 2. Infection prevention & control precautions must be followed:
 - a. Perform hand hygiene:
 - i. before donning mask and face shield;
 - ii. when entering the home;
 - iii. before and after removal; and,
 - iv. prior to donning a new mask or face shield.
 - b. Place mask securely over mouth and nose and adjust the nose piece to fit snugly.
 - c. Avoid touching the front of mask or face shield while wearing or when removing. If either are touched, hand hygiene must be performed immediately.
 - d. Avoid dangling mask under chin, around neck, off ear, under nose or setting it on top of head.
 - e. Remove masks, masks with attached visors, and full-face shields prior to leaving client's home, in an area where client or other Household Members are not present:
 - i. Discard in a waste receptacle.
 - ii. If a waste receptacle is not available, use plastic bag. Carry plastic bags along with other work equipment and supplies.
 - iii. If face shield is to be recycled, place it in separate plastic bag and return it to the Agency for processing.
 - f. Perform hand hygiene during and after PPE removal and between client encounters.
 - g. Dispose of and replace masks when they:
 - i. become damaged, wet, damp, or soiled (from breathing or external splash); or,
 - ii. come into direct contact with a client.
- 3. Staff must be informed on how and where to obtain additional face masks and eye protections when needed.

| | |
|---|-----------------------------------|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | |
| Policy Title: COVID-19 Interim Policy | Policy Number: 5.51 |
| | Effective Date: |
| | Revision Date: |
| | Approved By: |
| | Page Number: Page 20 of 42 |

Droplet & Contact Precautions

1. Droplet and Contact Precautions should be implemented for all Clients diagnosed with or presenting with new signs or symptoms of possible COVID-19.
2. Signs or symptoms may include:
 - a. Fever: temperature of 100°F (38°C) or greater; and/or,
 - b. any new or worsening respiratory symptoms (cough, shortness-of- breath, runny nose or sneezing, nasal congestion, hoarse voice, sore throat, or difficulty swallowing; and/or,
 - c. any new onset of atypical symptoms including but not limited to chills, muscle aches, diarrhea, malaise, or headache.
3. Upon entering the client's home or when within 2-metres of a client on Droplet and Contact Precautions wear:
 - a. gloves, long-sleeved cuffed gown (covering front of body from neck to mid-thigh); and,
 - b. mask and face or eye protection, e.g., should be face or eye protection (in addition to mask) include full face shield, mask with attached visor, non-vented safety glasses or goggles (regular eyeglasses are not sufficient).
4. PPE should be removed in the correct order and discarded into a waste receptacle when exiting the client's home
5. Full face shields should be removed and disposed of or reprocessed in accordance with Agency policy. Masks with attached visors should be removed and discarded.
6. Hand hygiene should occur according to best practices for donning and doffing PPE. (*Addendum A: Sequential Donning of PPE*)

Aerosol-Generating Medical Procedures

1. Staff who are present when aerosol-generating medical procedures are performed in the home should follow the procedures for:
 - a. use of an N-95 Respirator; and,
 - b. droplet and contact precautions.

Collecting Lab Specimens

1. Testing for COVID-19 shall only be conducted by trained Health Care Professionals.
2. Staff must not collect, handle and transport specimen or assist with these procedures unless and until they are trained, and their assistance is required.
3. Healthcare personnel collecting specimens or who are within 6-feet of Clients suspected to be infected with COVID-19 must:
 - a. maintain proper infection control practices; and,

| | |
|---|---|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | Policy Number: 5.51 Effective Date: Revision Date: Approved By: Page Number: Page 21 of 42 |

- b. use recommended PPE, including N-95 or higher-level respirator (or facemask if a respirator is not available), eye protection, gloves, and a gown.
4. Healthcare personnel who are handling specimens, but are not directly involved in specimen collection and are not working within 6-feet of the client shall:
 - a. follow standard precautions; and,
 - b. wear a face mask at all times.
5. Specimen collections shall be conducted in accordance with CDC guidelines.
6. If Clients collect their own specimen, the trained Health Care Professional personnel shall wear a mask and maintain at least 6-feet of separation:
 - a. Wear clean protective gloves while handing swab to Client.
 - b. After client self-swabs, instruct them to place the swab in transport media or sterile transport device and seal.
 - c. If the client needs assistance, help them place the swab into transport media or a transport device and seal it.
7. Specimens should be collected as soon as possible once a decision has been made to pursue testing, regardless of the time of symptom onset.
8. Swabs should be placed immediately into a sterile transport tube containing 2-3mL of either viral transport medium (VTM), Amies transport medium, or sterile saline.

Handling Collected Lab Specimens

1. All specimens collected for laboratory investigations should be regarded as potentially infectious.
2. Prior to assisting with the handling or transportation preparations of suspected COVID-19 specimens, cultures or isolates, Staff must be trained in the proper safety, packing, and shipping regulations.
3. Staff should be trained in a manner that corresponds to their function-specific responsibilities.
4. Specimens must be handled and transported in accordance with CDC guidelines
5. Specimens must be stored at 2-8°C for up to 72-hours after collection. If a delay in testing or shipping is expected, store specimens at -70°C or below.

Client Care Equipment & Supplies

1. Single-use disposable equipment and supplies shall be utilized, whenever possible.
2. Discard used items into a waste receptacle after use.
3. Dedicate reusable equipment and recreational items to one client and store them at client's home, e.g., blood pressure monitor, thermometer, care supplies, electronics, games.
4. Bring only essential equipment into the client's home:

| | |
|---|-----------------------------------|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | |
| Policy Title: COVID-19 Interim Policy | Policy Number: 5.51 |
| | Effective Date: |
| | Revision Date: |
| | Approved By: |
| | Page Number: Page 22 of 42 |

- a. Use a disposable barrier, e.g. a plastic bag to prevent placing equipment directly onto surfaces in the home.
- b. When not in use, place equipment, e.g., BP Monitor, in a plastic bag and hang from a hook.
5. Clean reusable, client care equipment before using, e.g. blood pressure monitor, stethoscope. Disinfect after each use:
 - a. Use a hospital grade disinfectant, e.g., disinfectant wipes.
 - b. Follow manufacturer's instructions.
 - c. Apply protocols for cleaning and disinfection of reusable equipment.
6. Dedicate Clients their own linen, towels, and clothing and avoid sharing these items with others.

Client Laundry

1. Immediately remove and wash clothes, towels, linen, or other items, which have blood, stool, or body fluids on them.
2. Machine-wash laundry according to the manufacturer's instructions. Use warmest, appropriate water setting and dry items completely.
3. Wear disposable gloves when handling dirty laundry from a person who is sick. Keep items away from body.
4. Dirty laundry from a person who is sick can be washed with other people's items.
5. Do not shake dirty laundry.
6. Clean and disinfect clothes hampers.
7. Immediately remove gloves and wash hands after handling dirty laundry.

Waste Management

1. Use gloves when removing garbage bags, and handling and disposing of trash. Wash hands afterwards.
2. Place all used disposable gloves, masks, and other contaminated items in a lined trash can.
3. If possible, dedicate a lined trash can for the person who is sick.

Mitigating COVID-19 Transmission to Other Homes

1. COVID Coordinator shall communicate COVID-19 updates to Staff and Clients.
2. Routine infection prevention & control practices, including hand hygiene, shall be applied while providing care to Clients.
3. COVID Coordinator shall monitor and evaluate infection prevention & control practices and outcomes, e. g. hand hygiene compliance.
4. Staff must self-screen daily for exposures or signs and symptoms of COVID-19:
 - a. once daily, at the beginning of their shift; or,

| | |
|---|---|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | Policy Number: 5.51 Effective Date: Revision Date: Approved By: Page Number: Page 23 of 42 |

- b. twice daily if home visits are scheduled.
- 5. Staff, who conduct in-home visits, shall screen themselves at least twice daily.
- 6. Staff shall conduct telephone screening of client and Household Members for COVID-19 prior to making a home visit.
- 7. Staff must conduct a risk assessment prior to any interactions with a client or household member.
- 8. Before entering an infected client's room, ask client to put on a mask, if possible.
- 9. Implement additional precautions when caring for Clients with Suspected or Confirmed COVID-19, e.g., droplet and contact precautions.
- 10. Staff expected to assist with, or be exposed to, Aerosol Generating Medical Procedures (AGMP) must wear N-95 Respirators and follow CDC's PPE Donning & Doffing Procedures, including:
 - a. being fit-tested for an N-95 respirator;
 - b. performing a seal check each time the mask is applied;
 - c. being monitored for proper wearing; and,
 - d. removing N-95 Respirator safely.
- 11. Equipment brought into the home shall be limited to only what is essential to minimize contamination and to conduct proper cleaning and disinfecting.
- 12. Environmental cleaning, disinfecting, laundry, and waste Management procedures shall be followed.
- 13. PPE shall be stored properly:
 - a. Staff should bring adequate PPE with them to each visit.
 - b. PPE must not be stored in a client's home.
 - c. A plastic-lined waste receptacle should be placed at the door exiting the home for disposal.
 - d. Reusable PPE shall be placed in separate plastic bags and returned to the office for processing.

IPC Measures for Office Worksite

Physical Practices

- 1. Encourage staff and visitors to practice hand hygiene protocols.
- 2. Require staff and visitors to maintain a social distance of 6-feet between them and to wear a facemask when in the Agency Office.
- 3. Install physical barriers, where relevant, e.g. sneeze guards and partitions.
- 4. Alter workspace and reception area layouts to ensure all individuals remain at least 6-feet apart.

| | |
|---|---|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | Policy Number: 5.51 Effective Date: Revision Date: Approved By: Page Number: Page 24 of 42 |

5. Close communal spaces, such as break rooms, if possible or stagger usage. Clean and disinfect between uses.
6. Encourage telework for Staff as possible and as appropriate.
7. Adapt schedules to enable Staff whose duties, or portions of their duties, can be performed at home to do on a full-time, part-time or occasional basis.
8. Rotate or stagger working hours to limit office Staff being present at the same time.
9. Replace in-person meetings with video-or tele-conference calls whenever possible.
10. Cancel all group events, gatherings and meetings or limit the group size to 10 people. Require attendees to maintain a distance of 6-feet each other and ask all to wear facemasks.
11. Restrict or limit nonessential visitors, Volunteers, and activities involving external groups or organizations.
12. Limit sharing of food, tools, equipment, or supplies.

Cleaning & Disinfecting Office Environment

1. Advise Staff not to use other people’s desks, phones computers.
2. Clean office daily including surface areas of desktops, food areas, kitchen, common areas.
3. Regularly clean electronics, e.g. tablets, touch screens, keyboards, and remote controls.
 - a. Follow manufacturer’s instructions for cleaning and disinfecting. If guidance is not provided, use alcohol-based wipes or sprays containing at least 70% alcohol. Dry surface thoroughly.
 - b. Where possible, place a wipeable cover on electronics.
4. Clean bathrooms and lactation areas frequently.
5. Display signage for infection prevention, including handwashing hygiene.

CLIENT CARE & SERVICE

Telehealth Usage During COVID-19 Emergency

1. The Agency, as a covered health care provider, may use audio or video communication technology, in good faith, to provide telehealth services during the COVID-19 emergency in adherence with the Office for Civil Rights (OCR) lifting certain Health Insurance Portability & Accountability Act (HIPPA) non-compliance penalties. This adherence shall include:
 - a. ensuring new protocols are applied;
 - b. remaining vigilant for updates; and,
 - c. implementing changing protocols.

| | |
|---|---|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | Policy Number: 5.51 Effective Date: Revision Date: Approved By: Page Number: Page 25 of 42 |

2. Audio and/or video communication technology may be used for any non-public facing remote communication product that is available to communicate with Clients including:
 - a. Apple FaceTime
 - b. Facebook Messenger Video Chat
 - c. Google Hangouts video
 - d. Zoom,
 - e. Skype
3. Telehealth applications must only be used in good faith to:
 - a. protect the privacy of Clients to the greatest extent possible; and,
 - b. avoid penalties from the OCR (*Office of Civil Rights*) for non-compliance with HIPAA (*Health Insurance Portability and Accountability Act of 1996*) rules.
4. All available encryption and privacy modes must be utilized when using telehealth applications.
5. Clients must be notified that these third-party applications potentially introduce privacy risks.
6. Telehealth technology may be used to deliver certain care or services, e.g.:
 - a. interact with Clients using smartphones, tablets, or computers;
 - b. “store and forward” technology, e.g., client portals, to collect messages, images, or data at one point in time for interpretation and response later; and,
 - c. remote monitoring to transmit Clients’ clinical measurements from a distance to their healthcare provider.
 - d. screen, interview, and conduct assessments wherever possible and appropriate;
 - e. screen individuals who may have symptoms of COVID-19 and refer as appropriate
 - f. provide low-risk urgent care for non-COVID-19 conditions, and refer as appropriate
 - g. access primary care providers and specialists.
 - h. engage in case management for clients who have difficulty accessing
 - i. Provide education and training for staff.

Risk Assessments

Home Safety Risk Assessment

1. A home safety risk assessment must be completed for each client to:
 - a. determine whether the environment is suitable for home care services; and,
 - b. verify that the home environment is suitable for providing the necessary level of care i.e.:
 - i. Determine if the client and Household Members are capable of adhering to the recommended precautions, e.g., hand hygiene, respiratory hygiene, environmental cleaning, and limitations on movement within the home.

| | |
|---|---|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | Policy Number: 5.51 Effective Date: Revision Date: Approved By: Page Number: Page 26 of 42 |

2. Staff shall ensure Household Members maintain a physical distance of 6-feet from them during the visit.
3. Staff shall ensure that their client and Household Members have a means through which to communicate with their primary healthcare provider should their condition worsen.
4. Staff must address safety concerns such as fire hazards and risks of accidental ingestion associated with alcohol-based hand sanitizers.

Point-of-Care Risk Assessment

1. Prior to client interactions, Staff shall:
 - a. use their professional judgment, e.g., knowledge, skills, reasoning and education to assess potential infectious risks regardless of COVID-19 status.
 - b. Evaluate the likelihood of exposing themselves and others to infectious agents:
 - i. for a specific interaction;
 - ii. for a specific task;
 - iii. with a specific client; and,
 - iv. in a specific environment under existing conditions.
2. The appropriate actions and/or PPE must be selected to minimize the risk of exposure to known and unknown infections.

Admittance of Clients to Agency

Admittance of Hospitalized Individuals With COVID-19

1. Individual Assessments must be conducted to determine if home care is suitable for the individual with Suspected or Confirmed COVID-19. Considerations should include:
 - a. Whether the individual is stable enough to receive care at home.
 - b. Availability of appropriate caregivers at home.
 - c. Availability of a separate bedroom where the individual can recover without sharing immediate space with others.
 - d. Availability of resources for access to food and other necessities.
 - e. Whether the Client and other Household Members are capable of adhering to precautions recommended as part of home care or isolation.
 - f. Presence of potential risks of secondary infection to Household Members who are older and/or who have underlying or immunocompromising conditions.
2. Prior to admitting a Suspected or Confirmed COVID-19 positive individual for services, the Agency shall require that:
 - a. The individual's needs for service have been assessed by the Hospital Discharger/Transfer Party.
 - b. The Agency is able to provide the needed care and services.

| | |
|---|---|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | Policy Number: 5.51 Effective Date: Revision Date: Approved By: Page Number: Page 27 of 42 |

- c. All necessary medical information, including communicable diseases is provided.
- d. The healthcare transport Staff have been apprised of the individuals' condition and needs.

Admittance of Non-Hospitalized Individuals With COVID-19

1. These measures shall apply to individuals with Suspected or Confirmed COVID-19 infection and to those under investigation for COVID-19 including:
 - a. individuals evaluated in an outpatient setting who do not require hospitalization; or,
 - b. Clients who are discharged home following a hospitalization with confirmed COVID-19 infection.
2. Clients not requiring hospitalization can be managed at home if they:
 - a. are medically stable;
 - b. can receive care at home;
 - c. isolate themselves until the risk of secondary transmission is thought to be low;
 - d. are able to comply with monitoring requests; and,
 - e. do not present a risk of secondary infection to susceptible individuals.
3. Clients, caregivers, and Household Members shall be provided with *Covid-19 Handout For Clients & Household Members (Addendum "B")*
 - a. when to quarantine;
 - b. caring for someone at home;
 - c. disinfecting home if someone is sick;
 - d. parents of caregivers who are sick;
 - e. when it is safe to be around others; and,
 - f. long-term effects.
4. Should a client develop more severe symptoms and require transfer to a hospital for a higher level of care, the Emergency Medical Services (EMS) and the receiving hospital must be alerted, prior to transfer to:
 - a. the client's diagnosis; and,
 - b. precautions during the transfer, i.e. placing a facemask on the client.
5. Before stopping any precautionary measures, the State or Local Health Departments must be consulted about its discontinuation criteria.

COVID-19 Screening

Staff Screening

1. COVID Coordinator shall liaise with the Local Health Department to:
 - a. determine the most rapid way to have COVID-19 testing of Staff completed and reported; and,

| | |
|---|-----------------------------------|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | |
| Policy Title: COVID-19 Interim Policy | Policy Number: 5.51 |
| | Effective Date: |
| | Revision Date: |
| | Approved By: |
| | Page Number: Page 28 of 42 |

- b. seek guidance on COVID-19 testing of Clients and where the tests should be conducted.
2. Staff must self-screen daily and self-assess for exposure, signs and symptoms of COVID-19 and temperature. Readings of 100°F (38°C) or higher are indicative of fever.
3. If a Staff member develops signs or symptoms of COVID-19 at work they should:
 - a. immediately perform hand hygiene;
 - b. ensure they do not remove their mask;
 - c. avoid further client contact;
 - d. leave as soon as it is safe to do so;
 - e. advise COVID Coordinator.
 - f. COVID Coordinator shall consult with Local Health Department, state, and CDC, as appropriate.
4. Staff who experience any signs or symptoms, including mild respiratory symptoms, must:
 - a. Leave the worksite or not report to work;
 - b. Advise the COVID Coordinator.
 - c. COVID Coordinator shall follow Local Health Department guidance on testing and further Management.
5. COVID Coordinator shall liaise with Local Health Departments, State, and CDC to manage and monitor exposed Staff.

Client Screening

1. Risk assessment practices should be applied by all Staff prior to in-person client contact whether or not the client has Suspected or Confirmed COVID-19 infection.
2. Clients or Household Members with signs or symptoms of COVID-19 should be advised to self-isolate and contact their Primary Care Provider or contact Local Health Department for further guidance
3. Those experiencing more severe symptoms should be referred to urgent care.
4. COVID Coordinator shall ensure that there is a process in place for Staff to screen all Clients and their Household Members by calling prior to every visit and applying established procedures.
5. Initial and general screening may be conducted using measures such as, telephone, text monitoring system, video conference, and telehealth. Confidentiality and privacy rights must be considered and be in accordance with temporary

Pre-Home Visit Screening

1. Be knowledgeable about those individuals who are at greatest risk for severe COVID-19 outcomes, especially older adults and those with underlying chronic medical conditions.
2. Ask specific details and determine course of action accordingly. E.g.:

| | |
|---|---|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | Policy Number: 5.51 Effective Date: Revision Date: Approved By: Page Number: Page 29 of 42 |
| Policy Title: COVID-19 Interim Policy | |

a. *Have you are a household member been tested and confirmed to have COVID-19?*

If answer is “Yes”

- ◆ Mandatory isolation for the infected individual is required.
- ◆ In-home visit should be postponed until the individual or household member is medically cleared.
- ◆ Ensure the Client or Household Member has been in contact with their Health Care Provider and Local Health Department.
- ◆ If in-home service is essential, the Local Health Department should be consulted.

If answer is “No”

- ◆ Proceed to next question.

b. *Within the last 14-days have you been in close contact with someone who has confirmed COVID-19?*

If answer is “Yes”

- ◆ Mandatory or precautionary quarantine is required.
- ◆ Visit should be postponed until after the individual or family member have been medically cleared.
- ◆ Advise individual or household member that:
 - The Agency will contact Local Health Department.
 - Local Health Department will determine the need for quarantine & testing.
- ◆ If in-home, Agency service is essential, the Local Health Department should be consulted.

If answer is “No”

- ◆ Proceed to next question.

| | |
|---|-----------------------------------|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | |
| Policy Title: COVID-19 Interim Policy | Policy Number: 5.51 |
| | Effective Date: |
| | Revision Date: |
| | Approved By: |
| | Page Number: Page 30 of 42 |

c. *Do you or a household member have any symptoms of a respiratory infection, i.e. fever, sore throat, cough or shortness-of- breath?*

If answer is “Yes”

- ◆ Contact Local Health Department to determine if individual/family member should be tested.
- ◆ If in-home service is essential, the Local Health Department should be consulted.

If answer is “No”

- ◆ As risk for exposure to COVID-19 is low, in-home visit can be made.
- ◆ Utilize infection prevention & control measures.

d. *Within the last 14-days, have you traveled internationally?*

If answer is “Yes”

- ◆ **Insert your State, territorial, tribal recommendations/requirements after travel: (See link to State & territorial websites below)**

If answer is “No”

- ◆ As risk for exposure to COVID-19 is low, in-home visit can be made.
- ◆ Utilize infection prevention & control measures.

<https://www.cdc.gov/publichealthgateway/healthdirectories/healthdepartments.html>

Pre-Home Entry Screening

1. Screening must be conducted upon arrival at client’s home, from a minimum distance of 6-feet when:
 - a. phone screening took place, but further confirmation or clarity is needed on screening responses; or,
 - b. phone screening was not possible due to client limitations or other pertinent factors.
2. Determine if client has a mask or face covering available to them to wear (if tolerated). If not, provide a mask to them, if tolerated.
3. Ask whether other person(s) will be in the home during the appointment and where appropriate, screen those persons too.
4. Individuals who were not previously phone-screened should be asked the same questions that are asked those who are phone-screened.
5. If client screens positive and is referred to a hospital or assessment center for testing:
 - a. Coordinate with the hospital, paramedic services, and the client to make safe arrangements for travel to the testing location.
 - b. Advise client to implement isolation measures, e.g., wear a mask and avoid public transportation, if possible.

| | |
|---|---|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | Policy Number: 5.51 Effective Date: Revision Date: Approved By: Page Number: Page 31 of 42 |
| Policy Title: COVID-19 Interim Policy | |

6. If client is very ill and requires acute care:
 - a. Call 9-1-1 and advise Call Attendant the client has symptoms indicative of COVID-19.
 - b. Implement source control measures e.g., place a facemask over the client’s nose and mouth.
 - c. Inform the COVID Coordinator about the presence of a Person Under Investigation (PUI) for COVID-19.
 - d. COVID Coordinator shall report probable and confirmed COVID-19 cases to Local Health Department.

Interviews/Assessments

Interviewing/Assessing Persons Under Investigation (PUI) for COVID-19

1. Every effort shall be made to interview/assess a symptomatic Person Under Investigation (PUI) using a telehealth method before making an in-home visit.
2. If the symptomatic, Person Under Investigation (PUI) must be interviewed in their home:
 - a. Wear Personal Protective Equipment (PPE) including a gown, gloves, eye protection, e.g., goggles or a disposable face shield that covers the front and sides of the face. And,
 - b. Use respiratory protection such as a NIOSH-approved N-95 or higher-level respirator or facemask (if a respirator is not available).
3. Put PPE on outside of the home prior to entry where possible:
 - a. If unable to put on all PPE outside the home, put on a respirator/facemask and eye protection before entering.
 - b. Perform hand hygiene before donning PPE using alcohol-based hand sanitizer that contains 60-95% alcohol.
4. Carry disposable plastic bags and ask that an external trash be available at the home or be placed outside for the disposal of PPE, if possible.
5. Alert Household Members that health Staff will be entering the home:
 - a. Ask them to move to a different room, if possible. Or,
 - b. Keep a 6-foot distance in the same room.
6. Once the entry area is clear, enter the home and put on PPE that was not donned prior to entry, e.g., gown and gloves.
7. Ask symptomatic PUIs to wear a facemask during the visit if able to tolerate. Provide a mask if one is not available.
8. Take precautionary measures when using PPE:
 - a. Don’t transport PPE from the PUI’s home in the Agency or Staff Member’s vehicle.
 - b. If unable to remove all PPE outside the home, wait, if possible, until exiting before removing face protection, e.g., respirator/facemask and eye protection.
 - c. If gown and gloves must be removed in the home:

| | |
|---|---|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | Policy Number: 5.51 Effective Date: Revision Date: Approved By: Page Number: Page 32 of 42 |

- i. Ask Household Members to move to a different room, if possible. Or,
- ii. Maintain a 6-foot distance in the same room.
- d. Once the entry area is clear, remove gown and gloves and exit the home.
- e. If hands get contaminated during glove or gown removal, once outside the home, perform hand hygiene with alcohol-based hand sanitizer that contains 60-95% alcohol.
- f. Remove face protection and discard PPE into a plastic bag and place in external trash can before departing.
- g. Perform hand hygiene again.

Interviewing/Assessing Asymptomatic Exposures to Suspected or Confirmed COVID-19

1. Every effort shall be made to interview a COVID-19 asymptomatic individual without close contact using telephone, text monitoring system, or video conference.
2. If asymptomatic individuals must be interviewed in-person:
 - a. Stay at least 6-feet away from them.
 - b. Ask them if they have had fevers or respiratory symptoms.
 - c. Ask them to wear a facemask during the visit if one is available.
3. If asymptomatic individuals must be interviewed in the home environment, do not enter the home until it is determined they don't have a fever.
4. If the asymptomatic person reports fever or symptoms:
 - a. Consider the individual to be a Person Under Investigation (PUI).
 - b. Document the individual's temperature and a description of symptoms.
 - c. advise COVID Coordinator.
 - d. COVID Coordinator shall refer the individual for further medical evaluation, as appropriate.
5. If the asymptomatic individual does not report fever or symptoms, they should be instructed to take their own temperature and relay the results.
6. If the asymptomatic individual reports having no symptoms and fever is not detected, keep a distance of at least 6-feet during further interactions even if entering the home environment.
7. If asymptomatic individual is not able to take own temperature:
 - a. Perform hand hygiene using alcohol-based hand sanitizer that contains 60-95% alcohol.
 - b. Put on a facemask, eye protection and gloves.
 - c. Take individual's temperature.
8. Take precautionary measures when using PPE:
 - a. Discard PPE outside the home, if possible;
 - b. Place PPE in a plastic bag and put into an external trash can before departing..
 - c. Do not take PPE from the PUI's home in Staff vehicle.

| | | | | | | |
|---|--|----------------------------|------------------------|-----------------------|---------------------|-----------------------------------|
| Everyday Direct Support, LLC Policies and Procedures | | | | | | |
| Section 5: Health & Safety | <table border="1"> <tr> <td data-bbox="995 300 1412 331">Policy Number: 5.51</td> </tr> <tr> <td data-bbox="995 331 1412 363">Effective Date:</td> </tr> <tr> <td data-bbox="995 363 1412 394">Revision Date:</td> </tr> <tr> <td data-bbox="995 394 1412 426">Approved By:</td> </tr> <tr> <td data-bbox="995 426 1412 478">Page Number: Page 33 of 42</td> </tr> </table> | Policy Number: 5.51 | Effective Date: | Revision Date: | Approved By: | Page Number: Page 33 of 42 |
| Policy Number: 5.51 | | | | | | |
| Effective Date: | | | | | | |
| Revision Date: | | | | | | |
| Approved By: | | | | | | |
| Page Number: Page 33 of 42 | | | | | | |
| Policy Title: COVID-19 Interim Policy | | | | | | |

- d. Carry a supply of plastic bags for disposal of PPE.
- e. If unable to remove all PPE outside the home, wait, if possible, until exiting before removing face protection, e.g., respirator/facemask and eye protection.
- f. If gloves must be removed inside the home:
 - i. Ask Household Members to move to a different room, if possible. Or,
 - ii. Keep a 6-foot distance from them if in the same room.
- g. Remove gloves and exit the home once the entrance area is clear.
- h. If hands get contaminated during glove removal:
 - i. Once outside the home, perform hand hygiene with alcohol-based hand sanitizer that contains 60-95% alcohol.
 - ii. Remove face protection and discard PPE. Place in an external trash can before departure.
 - iii. Perform hand hygiene again.

Provision of Client Care

Caring For Suspected or Confirmed COVID-19 Clients

1. If a client is Suspected or Confirmed COVID-19 positive, provision of care should be delayed, if possible.
2. If care must be provided via a home visit to someone who has Suspected or Confirmed COVID-19, service should be limited to essential nursing, therapies and personal support.
3. Limit Staff assigned to a Client with Suspected or Confirmed COVID-19 to:
 - a. the fewest number required to provide the needed care; and,
 - b. Staff who only care for suspected or confirmed COVID-19 clients.
4. During the entire visit, droplet and contact PPE must be used (e.g., surgical/procedure mask, gloves, gown and face shield or goggles) An N-95 respirator is recommended for Aerosol Generating Medical Procedures.
5. Clients should be instructed to wear a surgical/procedure mask (if tolerated) while care is being delivered. If Clients do not have their own surgical/procedural masks, provide one to them.
6. Perform hand hygiene before donning and after removing or otherwise handling PPE.
7. Clean and disinfect any equipment used on the client, e.g., scissors, thermometer, BP cuff.
8. Perform hand hygiene before and after contact with the client and the client's environment.

| | |
|---|----------------------------|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | |
| Policy Title: COVID-19 Interim Policy | Policy Number: 5.51 |
| | Effective Date: |
| | Revision Date: |
| | Approved By: |
| Page Number: Page 34 of 42 | |

Caring for Clients Needing Therapeutic Intervention

1. Individuals with known or suspected COVID-19 should continue to receive the intervention appropriate for the severity of their illness and overall clinical condition. Due to the high risks of transmissions for some procedures, precautions must be taken:
 - a. All recommended PPE shall be worn.
 - b. The number of care providers present shall be limited to essential Staff.
 - c. Any supplies brought into, used, and removed from the home must be cleaned and disinfected in accordance with environmental infection control guidelines.

WORK RESTRICTIONS & MONITORING

1. CDC Guidelines for work restrictions shall be implemented and followed.
2. Staff shall adhere to CDC guidelines and self-monitor their own compliance.
3. COVID Coordinator will conduct scheduled and adhoc monitoring of Staff compliance.
4. Staff displaying procedural shortfalls shall be given compensatory training.

Staff Exposures to COVID-19

Restriction for Staff Potentially & Actually Exposed to COVID-19

1. CDC Guidelines shall be followed to determine work restriction for Staff who have:
 - a. come into contact with confirmed COVID-19;and/or,
 - b. come into contact with Persons Under Investigation (PUI) for COVID-19, who are awaiting testing.
2. Work restrictions may be applied to Staff who have been exposed to COVID-19 if:
 - a. Test results for the PUI are not expected to return within 48 to 72-hours.
 - b. Test results will be delayed more than 72-hours.
 - c. The PUI tests positive for COVID-19.
3. Staff may be allowed to work from home if:
 - a. their position and duties are able to be performed from home; and,
 - b. the Administrator provides approval to work from home.
4. A record shall be maintained of Staff who have been exposed to COVID-19.

Restrictions for Staff with Prolonged Exposure

1. Exposure to COVID-19 infected individuals is considered “prolonged” when:
 - a. 15-minutes or more are spent in close contact with an infected individual.
 - b. Any time duration is spent being exposed during an Aerosol Medical Generating Procedure.
2. Work Restrictions for Staff, who had prolonged exposure in close contact with an individual with confirmed COVID-19, shall adhere to CDC Work Restriction Guidelines:

| | |
|---|---|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | Policy Number: 5.51 Effective Date: Revision Date: Approved By: Page Number: Page 35 of 42 |

PPE Used

- ◆ Not wearing a respirator or facemask.
- ◆ Not wearing eye protection if the person with COVID-19 was not wearing a cloth face covering or facemask.
- ◆ Health Care Professional (HCP) not wearing all recommended PPE, i.e., gown, gloves, eye protection, respirator while assisting or performing an Aerosol Generating Medical Procedure.

Work Restrictions

- ◆ Exclude from work for 14-days after last exposure.
- ◆ Advise Staff to monitor themselves for fever or symptoms consistent with COVID-19.
- ◆ Should fever or symptoms consistent with COVID-19 develop:
 - Notify COVID Coordinator.
 - COVID Coordinator will contact, and follow, Local Health Department recommendations for next steps, e.g., testing, locations for treatment

Restrictions for Staff Without Prolonged Exposure

1. Work restrictions for Staff, without prolonged exposure risk:
 - a. No work restrictions are applicable.
 - b. Follow all recommended infection prevention & control practices including wearing a facemask for source control while at work.
 - c. Self-Monitor for fever or symptoms consistent with COVID-19.
 - d. Do not report to work when ill.
 - e. Undergo active screening for fever or symptoms consistent with COVID-19 at the beginning of each shift.
2. Staff who develop fever or symptoms consistent with COVID-19 should immediately:
 - a. Self-isolate.
 - b. Notify COVID Coordinator.
 - c. COVID Coordinator will contact, and follow, the Local Health Department recommendations for next steps, e.g., testing, locations for treatment.

Symptomatic Staff & Home Visits

1. Home visits shall not be made or must be ceased while in progress:
 - a. Staff who have signs and symptoms of any respiratory infection must not report to work.
 - b. Staff who develop signs and symptoms of a respiratory infection while on-the-job,

| | |
|---|---|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | Policy Number: 5.51 Effective Date: Revision Date: Approved By: Page Number: Page 36 of 42 |

should:

- i. immediately stop work, put on a facemask, and self-isolate at home;
- ii. provide the COVID Coordinator with information on individuals, equipment, and locations they came in contact with; and,
- iii. COVID Coordinator will contact, and follow, the Local Health Department recommendations for next steps, e.g., testing, locations for treatment.

Return To Work After Covid-19 Diagnosis

1. Staff, who are diagnosed with COVID-19 and/or who have been in quarantine or isolation at home will require a doctor's clearance before being permitted to return to work.
2. Generally, clearance is based on:
 - a. Resolution of fever without the use of antipyretic medication.
 - b. Improvement in illness signs and symptoms.
 - c. Negative results for two COVID-19 tests collected 24-hours apart.
3. Staff must be informed and updated on CDC symptom-based and test-based guidelines for returning to work.

Symptom Based Guidelines

1. Staff who are not severely immunocompromised may return to work when:
 - a. At least 10-days have passed since symptoms first appeared. AND
 - b. At least 24-hours have passed since their last fever without the use of fever-reducing medications. AND
 - c. Symptoms (e.g., cough, shortness-of-breath) have improved.
2. Staff who are not severely immunocompromised and were asymptomatic throughout their infection may return to work when at least 10-days have passed since the date of their positive diagnostic test.
3. Staff who are severely immunocompromised with severe to critical illness may return to work when:
 - a. At least 10-days and up to 20-days have passed since symptoms first appeared.
 - b. At least 24-hours have passed since their last fever without the use of fever-reducing medications.
 - c. Symptoms (e.g., cough, shortness-of-breath) have improved; and/or,
 - d. Infection control experts have been consulted.

Test-Based Guidelines

1. Staff who are symptomatic may return to work when:
 - a. They do not register a fever without the use of fever-reducing medications. AND
 - b. There is an improvement in their symptoms (e.g., cough, shortness-of- breath). AND

| | |
|---|---|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | Policy Number: 5.51 Effective Date: Revision Date: Approved By: Page Number: Page 37 of 42 |
| Policy Title: COVID-19 Interim Policy | |

- c. Two consecutive respiratory specimens, taken 24-hours apart, show negative results.
2. Staff who are not symptomatic may return to work when two consecutive respiratory specimens, taken 24-hours apart, show negative results.

TRAINING & EDUCATION

1. The COVID Coordinator shall ensure that training is provided, and protocols are followed to prevent the spread of COVID-19 infection.
2. COVID Coordinator must review this policy with all staff and provide a copy of it to each staff member, as relevant to their position and/or need.

Staff Training & Education

1. Newly-hired home care Staff, who have not already received instruction on infection prevention & control of infectious diseases, shall receive training immediately.
2. Staff members who have had previous training in infection prevention & control of infectious diseases, may need to take a refresher.
3. Staff should be given dedicated time during their normal work hours to complete occupational infection prevention and control education and training.
4. COVID Coordinator should collaborate with appropriate healthcare organization departments or individuals to:
 - a. Define the goals and scope of education and training for healthcare personnel about occupational infection prevention and control.
 - b. Support initial, periodic, and as-needed education and training that is appropriate in content to the educational level, literacy, and language of healthcare personnel.
 - c. Periodically review healthcare personnel exposure data to identify high risk sub-populations for refresher infection prevention and control education and training.
 - d. Determine periodic “refresher” education topics based upon analyses of healthcare personnel exposure incident reports, risk assessments, and other methods that identify infectious hazard vulnerabilities for healthcare personnel.
5. Initial, periodic, and as-needed education and training should include:
 - a. Federal, state, and local education and training requirements.
 - b. Modes of infectious disease transmission and implementation of standard and transmission-based precautions.
 - c. Hand hygiene.
 - d. Sharps injury prevention.
 - e. Immunizations recommended by the Advisory Committee on Immunization Practices (ACIP) for healthcare personnel.

| | |
|---|---|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | Policy Number: 5.51 Effective Date: Revision Date: Approved By: Page Number: Page 38 of 42 |

- f. Healthcare personnel screening for selected infectious diseases before job placement and periodically thereafter.
 - g. How to access occupational health services, when needed, and expectations for reporting exposures.
 - h. Expectations for reporting illnesses or conditions (work-related or acquired outside of work), such as rashes or skin conditions (e.g., non-intact skin on hands); febrile, respiratory, and gastrointestinal illnesses, and hospitalizations resulting from infectious diseases.
 - i. Sick leave and other policies and procedures related to infectious healthcare personnel, including the risks of presenteeism to other healthcare personnel and patients.
6. To increase Staff awareness of COVID-19, training shall include:
- a. signs & symptoms;
 - b. how the virus spreads;
 - c. at-risk individuals;
 - d. infection prevention & control practices;
 - e. disinfection procedures;
 - f. Personal Protective Equipment (*Addendum A: Sequential Donning of PPE*);
 - g. coping with stress and enhancing resilience;
 - h. quarantining; and,
 - i. returning to work.
7. When feasible and appropriate, provide training virtually.
8. Ensure that social distancing is maintained where in-person training is provided.
9. Staff shall be assessed for infection control knowledge and competency; and, if necessary, undergo follow-up training and re-assessment.
10. Training for Personal Protective Equipment usage shall be in accordance with CDC PPE Donning & Doffing Procedures.
11. The World Health Organization (WHO) training modules may be utilized along with the Agency's other COVID-19 training resources:
<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/training/online-training>

Coping With COVID-19 Stress & Enhancing Resilience

Staff shall be provided information on recognizing the signs of stress, what causes it and how they may fortify their ability to manage it, as provided in the following CDC Guidelines:

- 1. Recognize the signs of stress, including:
 - a. feelings of irritation, anger, or in denial;
 - b. feelings uncertain, nervous, or anxious;

| | |
|---|-----------------------------------|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | |
| Policy Title: COVID-19 Interim Policy | Policy Number: 5.51 |
| | Effective Date: |
| | Revision Date: |
| | Approved By: |
| | Page Number: Page 39 of 42 |

- c. lacking motivation;
 - d. feeling tired, overwhelmed, or burned out;
 - e. feeling sad or depressed;
 - f. having trouble sleeping; and.
 - g. having trouble concentrating
2. Know common work-related factors that can add to stress during a pandemic, including:
 - a. concern about the risk of being exposed to the virus at work;
 - b. taking care of personal and family needs while working;
 - c. managing a different workload;
 - d. lack of access to the tools and equipment needed to perform job;
 - e. feelings of not contributing enough to work or guilt about not being on the frontline;
 - f. uncertainty about the future of the workplace and/or employment;
 - g. learning new communication tools and dealing with technical difficulties; and,
 - h. adapting to a different workspace and/or work schedule;
 3. Know how to build resilience and manage job stress:
 - a. Communicate with coworkers, supervisors, and employees about job stress.
 - b. Identify those things which over which you have no control over.
 - c. Developing a consistent daily routine when possible.
 - d. Know the facts about COVID-19.
 - e. Be informed about how to protect yourself and others.
 - f. Understanding the risk and sharing accurate information with others.
 - g. Remind yourself that each of us has a crucial role in fighting this pandemic.
 - h. Take breaks from watching, reading, or listening to news stories, including social media.
 - i. Connect with others.
 - j. Reach out for help if alcohol drugs (including prescription) are being misused.
 - k. Continue with any mental health treatments currently in place. Be ware of any new or worsening symptoms.
 - l. Manage job stress.
 4. Further details on how to cope with COVID-19 and where to find help is available on CDC website:

<https://www.cdc.gov/coronavirus/2019-ncov/community/mental-health-non-healthcare.html>

| | |
|---|-----------------------------------|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | |
| Policy Title: COVID-19 Interim Policy | Policy Number: 5.51 |
| | Effective Date: |
| | Revision Date: |
| | Approved By: |
| | Page Number: Page 40 of 42 |

Client Training & Education

1. Ensure Clients, intimate partners and Household Members are familiar with COVID-19.
2. Distribute an information sheet on COVID-19 (*Covid-19 Handout For Clients & Household Members (Addendum "B"*, which includes, at a minimum:
 - a. Information about COVID-19, including:
 - i. how COVID-19 causes infection;
 - ii. how it spreads; and,
 - iii. how they can protect themselves.
 - b. Provide instruction on:
 - i. how to properly wash hands and how to use alcohol-based hand sanitizers;
 - ii. how to apply good respiratory hygiene, e.g., cover cough with a tissue or cough into elbow followed by performing hand hygiene;
 - iii. how to care for a client safely and effectively with Suspected or Confirmed COVID-19 to prevent the infection from spreading to household contacts;
 - iv. how and where to dispose of used supplies;
 - v. how sharing personal hygiene items can be risky;
 - vi. how to wash laundry thoroughly;
 - vii. how to find resources on:
 - environmental cleaning and disinfection; and,
 - CDC, State, and Local Health Department.
3. If possible, download multi-lingual Client seasonal influenza information and distribute to Clients and Household Members:
<https://www.cdc.gov/flu/resource-center/freeresources/multi-language-factsheets.html>

REFERENCES

1. Centers for Disease Control and Prevention (CDC)
2. Centers for Medicare and Medicaid Services (CMS)
3. World Health Organization (WHO)
4. Occupational Safety & Health Administration (OSHA)
5. Environmental Protection Agency (EPA)
6. Office for Civil Rights (OCR)
7. Health Insurance & Portability Act (HIPPA) Privacy Rule
8. National Association Home Care & Hospice (NAHC)

| | |
|---|-----------------------------------|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | |
| Policy Title: COVID-19 Interim Policy | Policy Number: 5.51 |
| | Effective Date: |
| | Revision Date: |
| | Approved By: |
| | Page Number: Page 41 of 42 |

RESOURCES

CMS Resources:

- Home Health Agency Infection Control and Prevention regulations and guidance: 42 CFR 484.70, Infection Prevention & control, Appendix B of the State Operations Manual, Infection Prevention & control:

https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_b_hha.pdf

CDC Resources for Health Care Facilities and Home and Community Based Settings:

- <https://www.cdc.gov/coronavirus/2019-ncov/index.html> for COVID-19
- CDC Resources for Health Care Facilities:
<https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/index.html>
- CDC FAQ for COVID-19:
<https://www.cdc.gov/coronavirus/2019-ncov/infection-control/infection-prevention-control-faq.html>
- CDC Guidance for Preventing Spread in Home and Community Settings:
<https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-prevent-spread.html>
- CDC Tips on Coping with Stress & Building Resistance:
<https://www.cdc.gov/coronavirus/2019-ncov/community/mental-health-non-healthcare.html>
- Strategies for Optimizing the Supply of N-95 Respirators:
https://www.cdc.gov/coronavirus/2019-ncov/hcp/respirators-strategy/index.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fhcp%2Frespirator-supply-strategies.html
- CDC guidance for Infection Prevention & control Recommendations for individuals with Confirmed Coronavirus Disease 2019:
<https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html>
- (CDC) Resources for Households:
<https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/checklist-household-rady.html>
- https://www.cdc.gov/coronavirus/2019-ncov/downloads/php/CDC-Activities-Initiatives-for-COVID-19-Response.pdf?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fcommunity%2Fhigh-risk-workers.html#page=50
- <https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/strategies-optimize-ppe-shortages.html>

| | |
|---|---|
| Everyday Direct Support, LLC Policies and Procedures | |
| Section 5: Health & Safety | Policy Number: 5.51 Effective Date: Revision Date: Approved By: Page Number: Page 42 of 42 |
| Policy Title: COVID-19 Interim Policy | |

- https://www.cdc.gov/vhf/ebola/hcp/ppetraining/N-5respirator_coveralls/donning_09.html
- [Interim Guidance on Testing Healthcare Personnel for SARS-CoV-2](#)
- [Interim U.S. Guidance for Risk Assessment and Work Restrictions for Healthcare Personnel with Potential Exposure to COVID-19](#)
- [Guidance for Infection Control and Prevention Concerning Coronavirus Disease 2019 \(COVID-19\) in Home Health Agencies \(HHAs\) and Religious Nonmedical Healthcare Institutions \(RNHCIs\)pdf iconexternal icon](#)
- CDC Multi-language seasonal flu factsheets
<https://www.cdc.gov/flu/resource-center/freeresources/multi-language-factsheets.html>
- **CDC Updates:**
 - Weekly emails about the coronavirus disease 2019 (COVID-19):
<https://www.cdc.gov/coronavirus/2019-ncov/whats-new-all.html>
 - [Sign up for the newsletter](#)
https://tools.cdc.gov/campaignproxyservice/subscriptions.aspx?topic_id=USCDC_2067

FDA Resources:

Emergency Use Authorizations:

<https://www.fda.gov/medical-devices/emergency-situations-medical-devices/emergency-use-authorizations>

EPA Resources

EPA's approved disinfectant list:

<https://www.epa.gov/pesticide-registration/list-n-advanced-search-page-disinfectants-coronavirus-covid-19#:~:text=List%20N%20only%20includes%20the%20primary%20product%20registered,number%20to%20find%20a%20product%20on%20this%20list>