

**Network of Community Options, Inc.
Pandemic Exposure Guidelines
Coronavirus Disease 2019 (COVID-19)
Standard Operating Policy & Procedure**

Purpose: To maintain the preparedness and training to all employees and consumers served and to make available a mechanism to support appropriate awareness in the case of a person served or employee exposure to COVID-19. The following procedures have been developed to address the possibility of increased infections within the communities we serve. As always, the safety of our consumers, and our staff is paramount to the continuing successful functioning of NCO, Inc.

Policy: Refer to NCO, Inc. Emergency Preparedness for Coronavirus

Personnel Affected: All Network of Community Options, Inc. employees involved in the delivery of services or have contact with person(s) served, administrative, and management staff.

Procedures:

In order to reduce community, spread continue to do the following:

- A. Maintain recommended physical distancing when possible at work and in your personal life.
- B. Clean residences routinely and effectively including homes of consumers supported.
- C. Clean frequently touched surfaces, such as doorknobs, door handles, handrails and telephones, as well as non-porous surfaces in bathrooms, sleeping areas, dining areas and office spaces using a disinfectant that is registered with the Environmental Protection Agency (EPA) as active against viral pathogens.
- D. Place waste baskets in visible locations and empty regularly.
- E. Linens, eating utensils and dishes belonging to those who are sick do not need to be cleaned separately but should be thoroughly washed before sharing.

- F. Staff should avoid “hugging” laundry before washing it to avoid self-contamination.
- G. Staff should wash their hands with soap and water or an alcohol-based hand sanitizer immediately after handling laundry.

IN RESPONSE TO CONSUMER HAVING BEEN TESTED FOR COVID-19 AND PENDING TEST RESULTS:

- A. Consumer should be isolated to their room and bathroom to the greatest extent possible, ensuring recommended physical distancing between housemates.
- B. Consumer will be provided a mask to wear as much as they will tolerate.
- C. All outside activities for that consumer and his/her housemates are canceled.
- D. The Direct Support Professionals, and any other employees who had contact with that Person Supported will be notified.
- E. Notify all guardians.
- F. Ensure staff have necessary PPE including gloves, masks, and goggles reminding staff to use.
- G. All persons supported should be screened every 8 hours (or each shift) for symptoms and their temperature check,
- H. Ensure staff have an adequate supply of disinfecting supplies and increase the disinfecting and cleaning protocols of common surface areas.
- I. Follow reporting notification for suspected diagnosis. Pandemic Exposure Guidelines (COVID-19) 3.20
- J. Seek prompt medical attention if the illness is worsening (e.g., difficulty breathing, confusion, Blush lips or face). Before seeking care, call your healthcare provider and tell them that the individual may have, or are being evaluated for, COVID-19. Put a facemask on the individual before they enter the facility. These steps will help the healthcare provider’s office to keep other people in the office or waiting room from getting infected or exposed.
- K. If they have a medical emergency and need to call 911, notify the dispatch personnel that the individual may have, or are being evaluated for COVID-19. If possible, put a facemask on the individual before emergency medical services arrive.
- L. If the test results come back negative for COVID-19, the consumer and household return to usual measures being taken to reduce risk of exposure.

IN RESPONSE TO A POSITIVE TEST RESULT OF A CONSUMER:

- A. The occupant will be quarantined for 14 days from the last exposure or if not known, from the date of the positive COVID-19 test result.
- B. If the consumer is community based, they will be quarantined to their home/apartment, if the consumer is a resident of a waiver home or waiver apartment the entire home and its residents will be asked to quarantine.
- C. Unless symptomatic, the staff may continue to work their shifts in the home, using all PPE for safeguards, practicing universal precautions always. Upon returning to their home after shift, they are to self-quarantine at home.
- D. Individuals are isolated to their rooms and bathrooms to the greatest extent possible, ensuring physical distancing between housemates.

- E. Individuals will eat meals and snacks in their rooms as communal meals will not be allowed during the quarantine period.
- F. Notify all guardians and direct supervisor.
- G. No visitors to the house other than essential staff. Place notification sign and contact caution signs up for each room where a positive person is isolated.
- H. Ensure staff have necessary PPE including gloves, masks, and goggles, reminding staff of proper use.
- I. Maintain Standard, Contact and Droplet Precautions (including eye protection, if available).
- J. Ensure staff have an adequate supply of disinfecting supplies and increase the disinfecting and cleaning protocols of common surface areas.
- K. Follow reporting notification for suspected diagnosis.
- L. If any consumer or staff develop symptoms of COVID-19 during the 14 day quarantine period, they are considered to have the disease and must remain isolated to three (3) full days after their fever is gone (without the use of fever reducing medication) and no other symptoms of disease before they can come out of isolation.
- M. If individuals have been screened and their testing is POSITIVE for COVID-19 OR if individuals have signs/symptoms of a respiratory viral infection the following vitals should be documented every 4 hours: Blood pressures, temps
- N. Before seeking care, call your healthcare provider and tell them that the individual may have, or are being evaluated for, COVID-19. Put a facemask on the individual before they enter the facility. These steps will help the healthcare provider's office to keep other people in the office or waiting room from getting infected or exposed.
- O. Seek prompt emergency medical attention if the illness is worsening (e.g., difficulty breathing, confusion, Bluish lips or face). If they have a medical emergency and need to call 911, notify the dispatch personnel that the individual may have, or are being evaluated for COVID-19. If possible, put a facemask on the individual before emergency medical services arrive.
- P. Recovered individuals can return to their normal routine since they can NO LONGER SPREAD the virus.

IN RESPONSE TO EMPLOYEE HAVING FIRSTHAND CONTACT WITH ANY PERSON WITH A KNOWN CASE OF COVID-19:

- A. The following steps will be taken for anywhere the staff has worked in the last two weeks:
 - Individuals will self-isolated at their home for 14 days from date of last known exposure.
 - Emphasis placed on cleaning and disinfecting protocols and PPE use in the home.
 - Direct supervisors of all impacted individuals will be notified.
- B. The employee should actively monitor for symptoms consistent with COVID-19 infection.
- C. Supervisors will review staff schedule and alert the staff persons whom that person(s) have worked over the last two weeks. These homes will follow this

isolation protocol as outlined in RESPONSE TO PERSON SUPPORTED HAVING BEEN TESTED FOR COVID-19 AND PENDING TEST RESULTS.

- D. The employee(s) will be instructed to notify their healthcare provider to request testing or go to a local testing house, as directed.
- E. If the test results come back negative, the employee can return to work under the following conditions:
- Symptoms have resolved or they are symptom free.
 - It has been at least 24 hours since the fever has gone without the use of fever-reducing medications (for persons who develop fever).
 - If new symptoms arise during the 14-day monitoring period, retesting is indicated.
- F. If the test results come back positive, see the following protocol

IN RESPONSE TO EMPLOYEE RECEIVING A POSITIVE COVID-19 DIAGNOSIS:

- A. The following steps will be taken for any community base home, waiver apartment, or waiver home where the staff has worked in the last two weeks:
- Individuals will be isolated in the home for 14 days from date of last known exposure. All community activities will be cancelled during this time. Staff will continue to monitor individuals for symptoms.
 - Supervisor will verify the house has sufficient supplies of PPE and cleaning supplies, within existing supplies.
 - Emphasis placed on cleaning and disinfecting protocols and PPE use in the home.
 - Guardians of all impacted Individuals will be notified.
- B. The employee is to self-quarantine at his/her home and is not allowed to work until the following conditions are met:
- At least three days (72 hours) have passed since recovery, which is defined as resolution of fever without the use of fever-reducing medications; AND
 - Improvement in respiratory symptoms (e.g., cough, shortness of breath); AND
 - At least fourteen (14) days have passed since symptoms first appeared.
- C. The employee may return to work provided the above health conditions are met and the following precautionary measures are taken:
- Employee must adhere to respiratory hygiene, hand hygiene, and cough etiquette; and
 - Always wear a facemask while working, if there is a sufficient supply of facemasks, until all symptoms are completely resolved or until 14 days after illness onset, whichever is longer.
 - Recovered staff can return to full duties since they can NO LONGER SPREAD the virus. Consider that recovered staff care for positive or symptomatic patients since they should now be immune from COVID-19.

Personal Protective Equipment

Network of Community Options, Inc. have limited amounts of personal protective equipment (PPE). Our organization like many other providers in the state, do not stock sufficient PPEs for a pandemic level event.

With some medical products in short supply requests have emerged that all healthcare professionals, including Direct Support Professionals, conserve personal protective equipment (PPE) until supplies become more readily available. Efforts to increase our PPE supplies is actively ongoing by Network of Community Options, Inc. The use of PPE's before symptoms surface has actually been shown to increase risk because of a false sense of security and is a waste of these precious supplies. Wearing masks and gloves unnecessarily can contribute to a false sense of security, causing lapses in other measures, such as hand washing, which has shown time and time again to be the most effective method of decreasing infectious disease risk and spread.

Facemasks will be available to the sites and are designated to be used only when someone is sick at your location. Those who are sick should be immediately isolated from those who are not sick and given a clean disposable facemask to wear.

In the event that PPE's are not available, or supplies become critically low Network of Community Options, Inc. will follow the available CDC guidance on reuse, extended use, and/or reprocessing off PPE's.

This should only be done as a last resort.

Implement limited re-use of facemasks: Limited re-use of facemasks is the practice of using the same facemask by one staff member for multiple encounters with different individuals but removing it after each encounter. As it is unknown what the potential contribution of contact transmission is for Covid-19, care should be taken to ensure that staff do not touch outer surfaces of the mask during care, and that mask removal and replacement be done in a careful and deliberate manner.

- The facemask should be removed and discarded if soiled, damaged, or hard to breathe through.
- Not all facemasks can be re-used.
- Facemasks with elastic ear hooks may be more suitable for re-use.
- Staff should leave the consumer's area if they need to remove the facemask. Facemasks should be carefully folded so that the outer surface is held inward and against itself to reduce contact with the outer surface during storage. The folded mask can be stored between uses in a clean sealable paper bag or breathable container.

Selected Options for Reprocessing Eye Protection: When manufacturer instructions for cleaning and disinfection are unavailable, such as for single use disposable face shields, consider:

- **While wearing gloves, carefully wipe the inside, followed by the outside of the face shield or goggles using a clean cloth saturated with neutral detergent solution or cleaner wipe.**

- **Carefully wipe the outside of the face shield or goggles using a wipe or clean cloth saturated with EPA-registered hospital disinfectant solution.**
- **Wipe the outside of face shield or goggles with clean water or alcohol to remove residue.**
- **Fully dry (air dry or use clean absorbent towels).**
- **Remove gloves and perform hand hygiene.**

Extended use of isolation gowns: Consideration can be made to extend the use of isolation gowns (disposable or cloth) such that the same gown is worn by the same staff when interacting with more than one patient known to be infected with the same infectious disease when these individuals are housed in the same location (i.e., COVID-19 individuals residing in an isolation cohort). This can be considered only if there are no additional co-infectious diagnoses transmitted by contact (such as *Clostridioides difficile*) among individuals. If the gown becomes visibly soiled, it must be removed and discarded as per standard practice.

Prioritize facemasks and eye protection for selected activities such as:

- During care activities where splashes and sprays are anticipated.
- During activities where prolonged face-to-face or close contact with a potentially infectious patient is unavoidable.

Prioritize gowns for selected activities such as high-contact care activities that provide opportunities for transfer of pathogens to the hands and clothing of healthcare providers, such as:

- Dressing, bathing/showering, transferring, providing hygiene, changing linens, changing briefs or assisting with toileting, device care or use, and wound care.

When No Facemasks or other PPE's Are Available, Options Include:

- Exclude staff at a higher risk for severe illness from COVID-19 from contact with or support of known or suspected COVID-19 individuals. During severe resource limitations, consider excluding staff who may be at higher risk for severe illness from COVID-19, such as those of older age, those with chronic medical conditions, or those who may be pregnant, from caring for individuals with confirmed or suspected COVID-19 infection.
- Using untested/unapproved products such as bandanas, homemade facemasks, garbage bags (instead of gowns), goggles, etc. that may reduce transmission would be the **last resort**.

Date Adopted: April 2, 2020

Date Modified:

My signature below indicates that I have read the Pandemic Exposure Guidelines

Coronavirus Disease 2019 (COVID-19) and agree to adhere to the policy as outlined above. Furthermore, my signature acknowledges my knowledge and understanding of the policy.

Employee (print)

Signature

Date Reviewed

Human Resource Manager

Date