This information was obtained from the following resources: https://www.cdc.gov/, https://www.cdc.gov/, https://www.cdc.gov/, and https://www.cdph.ca.gov/

THIS IS INTENDED SOLELY TO OFFER GUIDANCE AND TECHNICAL SUPPORT BY KERN REGIONAL CENTER IN THE DEVELOPMENT OF A CONTINGENCY PLAN FOR THE COVID -19 PANDEMIC.

The training resources provided are only intended to assist regional centers and vendors with the training of staff during the COVID-19 crisis. Unless specified in a waiver or directive issued by the Director of the Department of Developmental Services and/or the Department of Public Health in response to COVID-19, the use of training resources on this website does not replace applicable law and regulations regarding staff training and competency, and does not otherwise guarantee staff competency.

The inclusion of external website links to training resources does not constitute or imply an endorsement or recommendation of material at the linked sites, their content or the services provided. The Department of Developmental Services accepts no responsibility for the content or accessibility of external websites or external documents linked to on this website.

Providers should refer to their agency infection control policy, follow Center for Disease Control (CDC) guidelines, and adhere to the Kern, Inyo, and/or Mono County of Public Health Department recommendations. Printable online resources are also available on CDC or local PHD websites.

Being prepared will help mitigate the risk of the spread of COVID-19. Providers are highly encouraged to have a contingency plan in place to help protect the health and safety of clients, staff and the community.

Following are guidance/questions to be considered when developing your contingency plan.

1) STAFF TRAINING/EDUCATION (INCLUDING BUT NOT LIMITED TO):

- Signs and Symptoms of COVID-19
- Prevention
- Hand Hygiene
- Proper PPE (applying and removing PPE)
- Facility supply of PPE
- N95 mask fit-testing: <u>Video 1 (3M 1870)</u> and <u>Video 2 (3M 1860/1860S)</u>
- Infection control, Transmission-based Precautions: Droplet, Contact, Airborne http://www.cdc.gov/infectioncontrol/basics/transmission-based-precautions.html

2) PROVIDE CLIENT EDUCATION AT THEIR LEVEL OF UNDERSTANDING.

• How will your facility provide emotional support, reduce anxiety?

3) PREVENTION

- How will your facility be proactive? FOR EXAMPLE:
- Visual alerts /signs posted at entrance of facility, hand sanitizer readily available at entrance and instruct staff to wash their hands upon entrance to facility.
- PROPER HAND HYGIENE: Frequent hand washing with soap and water for 20 seconds. (e.g. after cough or sneeze, after using the bathroom, before meals, after meals, before personal care or procedures, after personal care or procedures, etc.)

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- USE ALCOHOL-BASED HAND SANITIZER often, but if hands are visibly soiled, wash with soap and water.
- DO NOT touch your face: mouth, eyes, nose, unless your hands are clean.
- Practice good cough etiquette -COVER COUGH, cough into inner elbow or use a tissue, throw it away in the wastebasket and wash hands.
- Practice good respiratory etiquette- SNEEZE INTO TISSUE, throw it in the wastebasket and wash hands.
- Adhere to social distancing of 6 feet as much as possible.
- Monitor all clients daily for any signs or symptoms of COVID-19 and report immediately. (What is your facility protocol?)

4) SIGNAGE:

• Where will your facility post signs? Refer to CDC or your local County Health Department printable resources.

5) STAFF AND VISITOR SCREENING:

- Monitor staff for signs/symptoms and check temperature before they enter the facility and document.
- What is your facility protocol?
- What is your monitoring protocol?
- What is the plan if staff displays symptoms at work?

6) VISITORS/CONSULTANTS:

- Limited to only essential visits.
- How will your facility implement screening of visitors?
- What is your facility procedure for screening?
- How will the monitoring be documented?
- How will you facilitate communication with family members?
- Make sure visitors have signed in and document the temperature next to their name.

7) DISINFECTION:

• What is your facility's disinfecting/sanitizing protocols and with what type of disinfectant (refer to CDC recommendations)?

8) STAFFING:

- Does your facility have a backup plan for staff shortages?
- What measures can your facility take to minimize work anxiety? (Example from one of our providers: they provided each staff member with a personal backpack to take wherever they need to go, it included: disinfecting wipes, hand sanitizer, hand soap, spray bottle, pen etc. So that staff will feel safe going to work and going home from work.)
- 9) **ISOLATION/QUARANTINE** [In accordance with DDS, CDC, and/or Local Public Health guidance depending on circumstances].
 - Is the recommendation for quarantine or isolation?
 - For how long? (Example: 14 days)

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- Will there be a private room available with a private bathroom?
- Review your facility layout and designate a specific room or rooms if possible.
- How will meals be provided to consumers? Will clients eat their meals in their room? Consider using paper plates/cups and plastic utensils to minimize cross contamination.
- How will you ensure proper hydration?
- Staffing: best practice is to consider assigning designated staff to care for the client for the duration of the quarantine/isolation.
- If asymptomatic and quarantined, do your best to keep client in the room as much as possible. The client may come out of the room, just remember to adhere to social distancing of 6 ft. from other clients and staff.
- PPE if client is asymptomatic: no need for PPE, but staff can wear a surgical mask for their own protection, what is your facility protocol?
- MONITOR FOR S/S of COVID 19 per CDC guidelines
 - Cough
 - FEVER >100.4, take TEMPERATURE Q 8 HOURS and document. (**if client is on NSAIDS, it might mask the fever, consult PCP).
 - > Shortness of breath
 - ➤ Any other development of respiratory symptoms (list them)
 - > Emergency signs and symptoms (list them)
- Will client have their own equipment (ex: thermometer) during isolation, how will it be disinfected after each use?
- Monitor/observe other clients for development of respiratory symptoms.
- What is your plan if the client begins to display symptoms? If client is SYMPTOMATIC-ISOLATE IMMEDIATELY WITH THE DOOR CLOSED, Will you need a 1:1 for safety? If the client will leave a mask on, it is recommended to have them wear a N95 mask. What PPE will staff wear? At this time, staff should wear proper PPE: N95 mask, gloves, gowns, goggles.
- Who will be notified? Notify MD and Kern County Public Health Dept. for further direction. Notify Kern Regional Center and **submit SIR**.
- Call 911 for emergent symptoms as condition warrants. What is your facility emergency procedure/policy and is staff trained? If consumer is hospitalized, what information will you need from the hospital prior to discharge and who will you need to notify?

10) WHAT IS YOUR FACILITY PLAN (WHERE APPLICABLE):

- If the client leaves the facility for a few hours or days and then returns?
- Would you know who he/she was in contact with or if any COVID-19 exposure occurred?
- If the consumer leaves the facility, notify KRC immediately.
- 11) IN THE EVENT ANY CLIENT OR STAFF MEMBER IS SYMPTOMATIC, HAS BEEN EXPOSED OR TESTS POSITIVE, A SPECIAL INCIDENT REPORT (SIR) MUST BE COMPLETED. THIS INCLUDES ANY OF THE FOLLOWING EVENTS (SUBMIT SIR IN THERAP) EVEN IF THE EVENT DOES NOT OTHERWISE MEET CALIFORNIA CODE OF REGULATIONS. TITLE 17 REPORTING CRITERIA:
 - CLIENT(S) or STAFF who has had direct contact with any person who has tested positive for COVID-19 including provider staff, and other individuals;

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- CLIENT(S) or STAFF who has had direct contact with any person who OBTAINED a test for COVID-19.
- CLIENT(S) or STAFF is exhibiting COVID-19 symptoms and has visited a hospital for any related symptoms or has been tested for COVID-19;
- CLIENT(S) or STAFF was recommend to be tested for COVID-19:
- CLIENT(S) or STAFF tested positive for COVID-19; or
- CLIENT(S) or STAFF is exhibiting COVID-19 symptoms and was instructed to quarantine.

If a CLIENT is symptomatic, exposed or test positive for COVID-19:

- The service provider should notify the client's healthcare professional and keep the individual isolated until instructions are received from the healthcare professional.
- ➤ Notify KRC immediately krcsirs@kernrc.org
- > Submit a SIR in THERAP.
- ➤ If the program is licensed with Community Care Licensing (CCL), file an incident report with CCL.
- ➤ If COVID-19 is confirmed, notify the Department of Public Health.
- > Submit a staffing plan for meeting the client's needs, especially if there was exposure or if someone tested positive for COVID-19, and details of the agency's plan of action.

If a **STAFF MEMBER** is symptomatic, exposed or tests positive for COVID-19:

- Notify families explaining when the exposure happened, if it was exposure or if someone tested positive for COVID-19, and the details of the agency's plan of action.
- ➤ Notify KRC **immediately** <u>krcsirs@kernrc.org</u> and in THERAP, include the following information:
 - Employee's initials
 - Age
 - Date reported to county public health department
 - Worksite
 - Number of Consumers/employees
 - Date symptoms noted
 - Isolation yes or no?
 - Date tested
 - Test results when known