

## COVID-19 Safety Plan for Certified Day Program Reopening

<b>Agency Legal Name</b>	Schoharie County NYSARC, Inc.		
<b>Agency Address</b>	PO Box 307, Schoharie, NY 12157		
<b>Day Program Type</b>	<input checked="" type="checkbox"/> <b>Certified Site</b> <input type="checkbox"/> <b>Community, without Walls</b>	<input checked="" type="checkbox"/> <b>Day Habilitation</b> <input type="checkbox"/> <b>Day Treatment</b> <input type="checkbox"/> <b>Sheltered Workshop</b>	<input type="checkbox"/> <b>Prevocational</b> <input type="checkbox"/> <b>Respite</b>
<b>Anticipated Reopening Date</b>	7/27/20		
<b>Operating Certificate Number</b>	62000513		
<b>Site Address</b> (certified sites only)	215 S. Grand St. Cobeskill NY 12043		
<b>Certified Capacity</b> (certified sites only)	17		
<b>Primary Contact Name</b>	Lauren Milavec		
<b>Primary Contact Email and phone #</b>	<a href="mailto:lmilavec@schohariearc.org">lmilavec@schohariearc.org</a> 518-295-8810 ext 261		

The program's Safety Plan must describe procedures to operate the certified day program site or deliver day program service in accordance with the guidance document, Interim Guidance Regarding the Reopening of Day Services Certified by the Office for People with Developmental Disabilities. This document provides the outline to utilize for development of the Safety Plan (or future revision).

Some requirements may not be applicable to community-based services.

Please submit the written safety plan for each program to OPWDD prior to the reopening at [quality@opwdd.ny.gov](mailto:quality@opwdd.ny.gov). In addition, for each safety plan, a completed Day Program Site

Attestation must also be submitted. OPWDD will maintain copies of the plans for our records. OPWDD will not be providing approvals of agency plans.

Certified Sites must also maintain a copy of the program's Safety Plan on premises available to facility staff, OPWDD and local health authorities upon request. Community day program services

(non-site based, without walls) must also make a copy of the Safety Plan available upon request.

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### **SAFETY PLAN COMPONENTS**

**NOTE:** Guidance bullets below are not a substitute for provider review and adherence to content of *Interim Guidance Regarding the Reopening of Day Services Certified by the Office for People with Developmental Disabilities*

#### **Signage – applies to certified sites and other locations controlled by the provider**

- Ensure program building entrances have signs that alert that non-essential visitors are not allowed.
- Ensure signs are posted throughout the program building to provide instruction on the critical COVID-19 transmission prevention and containment activities identified in the companion document *Interim Guidance Regarding the Reopening of Day Services Certified by the Office for People with Developmental Disabilities*.

Identify how you will ensure the above and any related strategies:

Screening occurs on-site. There is a agency-wide form that is used at all sites to screen any person entering a Schoharie building. At the main buildings designated personnel completes the screening; at the residences the shift supervisor or person designated as the greeter is responsible. Elsewhere staff have been assigned and supplied with a thermometer, disinfectant wipes, gloves, and masks. Any person entering the premises has their temperature taken and answers a series of questions (which are updated regularly) as noted above. This has been in place since April 1, 2020 and is updated as guidance changes. RN's/LPN's have been instructed by the Medical Department and other responsible staff have received periodic training via Zoom meetings. Staff are also directed to call out when ill or symptomatic. Personnel have been trained to direct symptomatic staff to call United Concierge Medicine for guidance. Any suspected exposure or positive COVID case for an individual we report that is obtained through either screening process or observed symptoms, is reported immediately to our agency Medical Director and the situation is assessed for the need for testing, isolation and /or quaranting per CDC guidelines.

## A. Entrance to Site Based Programs

### **Pre-Entry/Pre-Participation Screening:**

- Screen all individuals, staff, and essential visitors prior to entry into the day program site and/or participation in services/service delivery: ○ per infection control standards for protection of screener and screened person, ○ to include temperature check and required questions on exposure and COVID-19 Symptoms, per NYS DOH and OPWDD guidance documents.
- Maintain daily documentation of all screening of individuals, staff and visitors in compliance with OPWDD and NYS guidance and policy.

### **Response to Signs and Symptoms and Departure:**

- Safe management of any individual, staff or visitor who fails initial/pre-program screening or is exhibiting signs or symptoms during service delivery, to include: ○ Facilitating departure as soon as possible, and ○ Safely manage separation from people not exhibiting symptoms, until they depart.
- Ensure instruction is provided to any individual or staff sent home due to symptoms to contact their health care provider and written information on healthcare and testing resources.
- Ensure the day program immediately notifies the local health department and OPWDD about the suspected case.

### **Participation and Return to Program/Service:**

Ensure staff members know to report and how to report positive COVID-19 test results, exposure/possible exposure, and signs and symptoms to their supervisor.

- Ensure individuals do not participate in day services while they or a member of their household or certified residence is being quarantined or isolated.
- Maintain medical documentation allowing an individual or staff member who was COVID-19 positive to return to program site/services.
- Ensure a any return of an individual or staff to programs/services occurs only in adherence to OPWDD and NYS DOH guidance regarding quarantine periods and fever free durations.

Screening occurs on-site. There is an agency-wide form that is used at all sites to screen any person entering a Schoharie building. At the main buildings, designated personnel complete the screening; at the residences the shift supervisor or person designated as the greeter is responsible. Elsewhere staff have been assigned and supplied with a thermometer, disinfectant wipes, gloves, and masks. Any person entering the premises has their temperature taken and answers a series of questions (which are updated regularly) as noted above. This has been in place since April 1, 2020 and is updated as guidance changes. RN's/LPN's have been instructed by the Medical Department and other responsible staff have received periodic training via Zoom meetings. Staff are also directed to call out when ill or symptomatic. Personnel have been trained to direct symptomatic staff to call Primary Care Provider/United Concierge Medicine for guidance. Any suspected exposure or positive COVID case for an individual we report that is obtained through either screening process or observed symptoms, is reported immediately to our agency Medical Director and the situation is assessed for the need for testing, isolation and/or quarantine per CDC guidelines. This information is tracked and updated regularly by our Medical Director, Kathy Kane.

- Identify how you will ensure the above and any related strategies:

## **B. Social Distancing Requirements:**

### **Ensure effective practices to facilitate social distancing when distancing is not possible, including the following:**

- Reduction of total number of individuals served at one time, in order to reduce congestion and facilitate easier social distancing;
- Plans to maintain no more than 50% occupancy in small/confined spaces within a program, such as a staff break room;
- Potential use of physical barriers within site-based spaces;
- Planned use, capacity and arrangement of furniture and/or work equipment in program rooms, workspaces and meal and seating areas to allow for social distancing of at least six feet apart in all directions (i.e. 36 square feet) and limit density. (Note an individual's needs may require individual to staff distance to be less than six feet);
- Use of signage and floor markers/distance markers denoting spaces of six feet throughout program area spaces, common spaces, waiting areas, entry, exits and other areas of travel;
- Facilitate one directional foot traffic where necessary in narrow spaces, using tape or signs with arrows;
- Install physical barriers, as appropriate, especially when physical distancing is not feasible between program/workspaces;

- Support and education of individuals to learn physical distancing/use of markers, patterns of movement, and other program strategies;
- Maintain a staffing plan to prevent employees who should need to “float” between different rooms or different groups of individuals, unless such rotation is necessary to safely support individuals due to unforeseen circumstances (e.g. staff absence). Provide adequate space and operational practices (e.g. staggered break times) for staff to adhere to social distancing while completing independent tasks (i.e. paperwork) and when taking breaks (i.e. eating or smoking).

Identify how you will ensure the above and any related strategies:

Day Hab facilities will arrange furniture and groupings so that social distancing can be maintained at six feet distances. Group sizes will not exceed 15. Staff sharing an office may have staggered office hours and will disinfect commonly touched objects. Multi-stall bathrooms will have limited occupancy. Maximum occupancy signs will be posted in common areas where social distancing is difficult. When possible lunch breaks will be staggered, taken in individual offices, or off the premises. In sites with cafeterias, the cafeteria is open for pick-up only; dining in cafeterias is prohibited until further notice. Clear dividers will be installed at serving windows and where customer services are needed. When it is not possible to maintain 6ft. of distance between individuals, masks are required. In all common areas, the floor has been marked to denote 6 ft. intervals. Furniture will be relocated or removed as needed to provide 6 ft. distance. Regular meetings are occurring via tele-conferencing. When multiple people need to be in the same room (training, pre-screening), seating is spaced, masks are required, and surfaces are cleaned daily. Interviewing is occurring via teleconference. All paycheck pick-ups have been eliminated and checks are now mailed to each employee. We will reduce the size of group activities and spread out over multiple locations as needed and continue to utilize virtual meetings. We are reducing employee footprint throughout the agency with more efficient scheduling. In all direct support settings, staff assignments are reviewed at shift change to include social distancing plans when possible as well as PPE use when not possible.

### C. Gatherings in Enclosed Spaces

- Modifications to day program/service hours as needed, to allow blocks of service provision while maintaining reduced capacity and group size.
- Planned group size, which will be limited to no more than fifteen (15) individuals who receive services. The restriction on group size does not include employees/staff. • Ensure the group ( $\leq 15$ ) of individuals receiving services and staff working with them are as static as possible.
- Ensure that different stable groups individuals and staff, have no or minimal contact with one another and do not utilize common spaces at the same time, to the greatest extent possible.
- Stagger staff and/or individual meal and break times to maintain social distancing.

- Adhere to social/physical distancing practices identified in the safety plan.
- Prohibit shared food and beverages and buffet style dining.
- Require that food brought from home must require limited preparation (i.e. heating in microwave) during day services and be packed appropriately.
- Ensure reusable food utensils and storage containers are washed in the dishwasher on the hottest wash and dry setting.

Identify how you will ensure the above and any related strategies:

Day Hab facilities will arrange furniture and groupings so that social distancing can be maintained at six feet distances. Group sizes will not exceed 15. Staff sharing an office may have staggered office hours and will disinfect commonly touched objects. Multi-stall bathrooms will have limited occupancy. Maximum occupancy signs will be posted in common areas where social distancing is difficult. When possible lunch breaks will be staggered, taken in individual offices, or off the premises. In sites with cafeterias, the cafeteria is open for pick-up only; dining in cafeterias is prohibited until further notice. Food will be brought in from home and buffet style dining will be prohibited. Any reusable food utensils and storage containers will be washed in a dishwasher on the hottest wash and dry setting. Clear dividers will be installed at serving windows and where customer services are needed. When it is not possible to maintain 6ft. of distance between individuals, masks are required. In all common areas, the floor has been marked to denote 6 ft. intervals. Furniture will be relocated or removed as needed to provide 6 ft. distance. Regular meetings are occurring via teleconferencing. When multiple people need to be in the same room (training, pre-screening), seating is spaced, masks are required, and surfaces are cleaned daily. Interviewing is occurring via teleconference. All paycheck pick-ups have been eliminated and checks are now mailed to each employee. We will reduce the size of group activities and spread out over multiple locations as needed and continue to utilize virtual meetings. We are reducing employee footprint throughout the agency with more efficient scheduling. In all direct support settings, staff assignments are reviewed at shift change to include social distancing plans when possible as well as PPE use when not possible.

#### D. Day Program Schedules and Activities

- Modifications to day program/service hours as needed, to allow blocks of service provision while maintaining reduced capacity and group size. Focus on activities with little or no physical contact and which do not rely on shared equipment, to the extent possible.
- Schedule individual's activities to reduce density and allow for social distancing.

Identify how you will ensure the above and any related strategies:

Modified day hab hours will be used to ensure that space is maximized to allow for social distancing and minimizing overlaps and reducing capacity. Schedules will range anywhere from 8am to 5pm. Activities will focus on things with little physical contact such as zoom or virtual activities, reading activities, outdoor walks when weather permits, music or individual craft activities.

### E. Personal Protective Equipment:

- Ensure all staff wear an appropriate cloth or disposable face mask/covering that covers both the mouth and nose, at all times while providing services, consistent with all current Executive Orders and OPWDD guidelines (unless medically contraindicated / not tolerated).
- Ensure all essential visitors wear a face mask or covering, providing a facemask onsite at no cost, if visitors do not have their own which meets requirements.
- Support individuals receiving services to wear face coverings, as tolerated, whenever social distancing cannot be achieved.
- Maintain an adequate supply of required PPE on site (and available to staff for when needed for community-based services) to minimally include masks and gloves, and with gowns and face shields as needed.
- Train all staff on proper use of PPE including when necessary to use, donning, doffing, disposing and/or reusing and sanitizing when appropriate.
- Retain documentation of trainings in the employees' personnel files and per agency procedures.

Identify how you will ensure the above and any related strategies:

The agency has currently has a several month supply of surgical masks, gloves, gowns, N95 masks, and disinfectants. Employees are issued 2-surgical masks per week. Additional masks are made available as needed to employees and other persons on the premises. Support and response teams who travel from/to sites will have a sanitation and PPE kit. Schoharie's medical and purchasing department has suppliers which will replenish our stock as needed. Stock is monitored, maintained, and distributed from a common commodities warehouse. Supplies are monitored weekly. Commodities maintains a 30-day inventory supply, and are working to establish a 90-day supply. A PPE burn rate is calculated and as needed this is used to request PPE from our local emergency management as needed. Residents have established PPE stations supplied by our commodities department as needed. Cloth masks have been supplied to people we support. All employees are provided with at minimum of two masks per week. New masks are distributed weekly when employees arrive and sign the log. Masks are replaced when lost, damaged, soiled etc. Employees are issued surgical masks in a paper bag. When not in use, employees store masks in the bag. Masks are disposed of in the paper bag. PPE is disposed of in accordance with CDC/DOH/OPWDD guidelines. Training videos have been reviewed with staff and is available for education on cleaning and discarding PPE in compliance with Schoharie's "Infection Control Policy- Standard Precautions and Staff Training Procedures.

### F. Hygiene and Cleaning

#### Personal Hygiene to Reduce Transmission:

Ensure strict adherence to hygiene requirements to reduce transmission as advised by NYS DOH and the CDC.

- Provide and maintain hand hygiene stations at each location to include:
  - Handwashing: soap, running warm water, and disposable paper towels.
  - Hand sanitizing: alcohol-based hand sanitizer containing at least 60% alcohol for areas where handwashing facilities may not be available or practical, and where the need for frequent hand sanitizing is expected;
- Train staff to wash their hands frequently with soap and water for at least 20 seconds using techniques per NYS DOH and CDC guidance, including the conditions that require handwashing.
- Support individuals to wash their hands frequently/when needed, with soap and water, for at least 20 seconds using appropriate techniques as tolerated.
- Encourage and facilitate use of hand sanitizers by staff and individuals upon arrival to and departure from program and through the day, providing supervision/support of use by individuals as needed.
- Address any individualized needs affecting the unsupervised availability of hand sanitizer. **Cleaning and Disinfection of Environment, Equipment and Supplies:**
- Strictly adhere to sanitation requirements as advised by NYS DOH guidance documents.
- Implement the following minimum standards regarding cleaning and sanitizing:
  - Frequent cleaning and rigorous disinfection of high-risk areas/high touch surfaces;
  - Use of only EPA registered products for disinfecting non-porous surfaces;
  - Adhere to proper dwell times for all cleaners, sanitizers and disinfectants per manufacturer recommendations as indicated on the product label; and
    - Ensure adequate ventilation to prevent inhaling toxic fumes.
    - Maintain site cleaning logs indicating the date, time, and scope of cleaning.
    - Keep cleaning products, sanitizers and disinfectants secure and out of reach of individuals who may misuse;
    - Safely and immediately discard used gloves, paper towels or other disposable items after sanitizing or disinfecting, tied in a trash bag and removed from the environment.
    - Clean and disinfect all areas and equipment used by a person exhibiting symptoms upon their departure from the area and prior to use of the area or equipment by other individuals or staff.
    - PPE use and hand hygiene when cleaning and disinfecting causes safety hazards. ○ Provide ventilation with outside air safely and when possible.
- Limit use of shared objects/equipment. Ensure shared items are cleaned and/or sanitized after each use. Require hand hygiene before/after contact and glove use when feasible.
- Prohibit use of items/objects that cannot be cleaned and sanitized (i.e. soft object, cloth placemats, etc.) unless clinically required.
- Prohibit bringing personal items from home, except when clinically necessary, then have a plan for regular cleaning and disinfection including immediately prior to departure.



Identify how you will ensure the above and any related strategies:

The Maintenance department will be coordinating the cleaning of each site. Office staff disinfect their personal frequently touched office surfaces. The Manager for each residence/Program ensures disinfection is completed at their sites in accordance with CDC/DOH/OPWDD guidelines. Program Managers and Supervisors coordinate the cleaning of vehicles and activity rooms. Logs are maintained at each site. The Custodial Department and/or building staff maintains a cleaning log for bathrooms, common areas, multi-use areas, equipment, doors, and frequently touched surfaces in the office sites. Custodial logs are maintained at the program location. OT/PT staff maintain a cleaning log of all equipment used for clinical services appointments.

. Writing instruments at main reception areas have separate containers (clean/used). Used pens are disinfected throughout the day. In our main sites, common surfaces (e.g., door knobs, door plates) and bathrooms are cleaned twice daily by custodial and other staff. Day Hab staff will be responsible to disinfect classroom spaces, inclusive of bathrooms, according to a disinfection frequency protocol that follows OPWDD and Department of Health guidelines. Hand sanitizing stations (e.g. Purell) are available where "commonly touched" items are located (e.g. time clocks). Employees disinfect copiers, printers, and other shared office equipment at least daily. Medical equipment such as stethoscopes, blood pressure cuffs, pulse oximeters, etc. are disinfected in between use, and gloves are worn when handling. Clinical areas where treatments are provided are cleaned and disinfected in accordance with CDC/DOH/OPWDD guidelines. Vehicles are cleaned in between each use. Tools shared by Maintenance staff are wiped down with disinfectant and stored in a locked cage after use. Employee and visitor body temp screening is completed with a no-touch thermometer. Frequently touched surfaces in a residential setting including bathrooms and kitchens, etc. are disinfected by staff as indicated on disinfection placards.

Hand hygiene and PPE stations are set up at the entrance to each location with sinks being readily available within the building. Staff are instructed to wash or sanitize hands before and after assisting a person we support; before and after using equipment, upon arrival at work, after using the restroom, prior to eating, and before leaving work. Hand sanitizing stations (Purell) are located at all entrances, time clock areas, clinic rooms. Employees are instructed to wash or sanitize their hands. Employees are issued a 1oz. bottle of Purell weekly for use while at work. Hand washing protocols are posted. People who receive services are supported to sanitize/wash their hands as noted above, and before and after treatments. Supervisors promote hand washing and signs are posted. Bathrooms are supplied with paper towels (air dryers are not used). Hand hygiene is reviewed annually at update training.

## G. Transportation

Ensure that the following measures are implemented for the transport of individuals to/from day services to reduce COVID-19 transmission risk, when providing or contracting for transportation:

- **Ensure only individuals and staff traveling to and from the same day program** be transported together; **individuals or staff from other day programs should not be intermingled for purposes of transportation at this time; individuals transported together are encouraged to cohort for purposes for day programming also, in order to reduce further intermingling;**
- Reduce capacity on buses, vans, and other vehicles **transporting individuals from multiple residences** to 50% of total capacity;
- **Individuals and staff who reside/work together in the same home may be transported together to day program(s) in the same vehicle without a vehicle capacity reduction;**
- As possible, stagger arrival and departure times to reduce entry and exit density.
- To the extent possible, **restrict** close contact of individuals and staff **from different households** by not sitting near each other or the driver.
- If there are multiple doors in a bus or van, utilize one-way entering and exiting. Provide instruction for individuals to exit the vehicle one at a time and wait for driver or staff instruction before doing so.;
- Ensure staff and the driver always wear face coverings in the vehicle. **Social distancing must be maintained for individuals who cannot tolerate wearing a mask and, when possible, such individuals should be transported alone or with members of the same household.** Ensure staff who cannot medically tolerate the use of a face covering are not assigned to transport individuals.
- After each trip is completed, clean and disinfect the interior of the vehicle before additional individuals are transported; and
- Where appropriate and safe, roll windows down to permit air flow.

Identify how you will ensure the above and any related strategies:

For individuals that reside in the community initially we will request that individuals be transported by families to minimize exposure. Where this cannot be accomplished individuals will be spaced six feet apart at no more than 50% vehicle capacity and masks will be encouraged. Seats on buses will be taped off every other seat to assist in accomplishing this.

For those that would come in from our homes we would transport as a family unit, again keeping vehicles at a 50% capacity. After each trip is completed the interior of the vehicle will be disinfected before additional individuals are transported. Where appropriate windows will be rolled down to permit air flow.

## H. Tracing and Tracking

- Notify the local health department and OPWDD immediately upon being informed of any positive COVID-19 test result by an individual or staff at their site.
- If a staff or visitor test positive, procedures for day service cooperation with the local health department to trace all contacts in the workplace and notify the health department of all staff, individuals and visitors who entered the facility dating back to 48 hours before the positive person began experiencing COVID-19 symptoms or tested positive, maintaining confidentiality as required by federal and state law and regulations.

Identify how you will ensure the above and any related strategies:

Based on the sign in log and Kronos time-keeping system, we will confirm all people at that site that may have had contact with the person. Daily logs will be used to trace any potential person and notify him/her of on exposure. The administrative team will notify any affected person directly using the contact information provided on the sign-in sheet. The Medical Department will cooperate with and work in conjunction with Public Health. Kathy Kane, the Director of Medical Services and/or Josephine Bailey, Corporate Compliance Officer notifies the the state and local health department if a worker tests positive. All suspected cases are also monitored by Ms. Kane and Dr. Luz.

## ADDITIONAL SAFETY PLAN MEASURES:

Please use this space to provide additional details about your program's Safety Plan, if appropriate.

COVID-19 information, educational materials, policies and procedures are available and maintained on a shared drive where all members of management can access them.

The agency provides regular updates to employees and management via a Newsletter, weekly email update to management, and periodic manager's meetings (via Zoom). Schoharie's Nursing and Safety personnel develop training materials and protocols. Training is provided by Nursing, Program Managers, Safety, and Supervisors regarding use of PPE, infection control, cleaning, and disinfection protocols.

Documents have been developed as follows, and are stored electronically and available for review.

1. Staff Behavior and Guidance
  - a. Guidance for Routine When First Arriving to Work
  - b. Guidelines – Symptoms While in the Home 03.30.20
2. Staff and Individual Screening

- a. Visitor and Symptom Check Log
- 3. Staff Return to Work
  - a. Staff Return to Work due to Exposure or Positive Test
- 5. Visitor Screening
  - a. Instructions for Visitors – IRA Programs 04.14.20
  - b. No Visitors Allowed Poster
  - c. Visitor Directions 04.14.20
- 6. Guidance Individual Activities
  - a. Social Distancing BBQ Tips
- 7. Cleaning Practices
  - a. Living Room and Items Throughout the House (Disinfection Guidelines ) 04.16.20
  - b. Medication Room Placard (Disinfection Guidelines) 04.02.20
  - c. Bathroom Placard (Residential) 04.15.20
  - d. Disinfection of Bedroom with Someone Using CPAP or BIPAP
  - e. Kitchen Placard 04.15.20
  - f. Laundry Room Placard 04.02.20
- 8. PPE Tracking and Requests
- 9. Staff Training
  - a. COVID-19 Positive Droplet Precautions
  - b. CPR Revised Placard
  - c. Dining (email guidelines)
  - d. Don and Doff Placards
  - e. How to Wear a Surgical Mask
  - f. Mental Health Care During a Social Healthcare Crisis
  - g. N-95 Respirator Fit Testing Procedure
  - h. Residential Precautionary Framework
- 10. Response Team Procedure