# All About You Homecare Center for Disability Rights Regional Center for Independent Living

# Policy to Limit the Spread of the Flu, COVID-19 and Other Viruses

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#### **Background**

Coronavirus disease 2019 (COVID-19) is a respiratory illness that can spread from person to person. The virus that causes COVID-19 is a novel coronavirus that was first identified during an investigation into an outbreak in Wuhan, China.

COVID-19 is spreading from person to person in parts of the United States. Risk of infection with COVID-19 is higher for people who are close contacts of someone known to have COVID-19, for example healthcare workers, or household members. Other people at higher risk for infection are those who live in or have recently been in an area with ongoing spread of COVID-19. The first case of COVID-19 in the United States was reported on January 21, 2020.

The virus is thought to spread mainly between people who are in close contact with one another (within about 6 feet) through respiratory droplets produced when an infected person coughs or sneezes. It may also be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the main way the virus spreads. Patients with COVID-19 have had mild to severe respiratory illness with symptoms of fever, cough, and shortness of breath. Although it has similarities to the flu, COVID-19 is a different virus. Although people have developed some immunity to the flu virus, they will not have natural immunity to COVID-19. The consequences can be serious. Some patients have developed pneumonia in both lungs, multi-organ failure, and in some cases death.

The potential impact of this on people with disabilities is significant. We have seen Washington state and the Life Care Center nursing facility emerge as an early center of the infection's spread in the U.S., with all nine of the country's deaths coming from the state, and a majority of those being residents of the Kirkland nursing facility. The following procedures are intended to help us limit the spread of COVID-19 infections among our consumers and staff.

# Local Conditions

At this time there have been no confirmed cases of COVID-19 infection in upstate New York either from travel or "community spread". Community spread means that people have been infected with the virus in an area, including some who are unsure how or where they became infected.

## All Staff

The Center for Disability Rights urges everyone to take the steps necessary to protect themselves. The same steps you take to protect yourself from the flu are used to protect you from the Coronavirus:

- Avoid close contact with people who are sick.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Wash your hands often with soap and water for at least 20 seconds throughout the day and always after using the restroom. In the event that soap and water are unavailable, use an unscented alcohol-based hand sanitizer that contains at least 60% alcohol. Always wash hands with soap and water if hands are visibly dirty. Here is information from the CDC on handwashing: <u>https://www.cdc.gov/handwashing/when-howhandwashing.html</u>

All staff are expected to refresh themselves on universal precautions. Resources are available from your supervisor or online:

https://www.cdc.gov/mmwr/preview/mmwrhtml/00000039.htm

Our state IL association (New York Association on Independent Living) is presenting a webinar on this topic. A version of this with both captions and ASL interpreting will be available on demand shortly.

## Additional Steps Staff Can Take to Limit Exposure to COVID-19

There are changes in our day-to-day behavior that can help limit exposure and reduce spread of infection.

- Do not shake hands or hug people.
- Do not use the keyboard, mouse or phone on other people's desks.
- Carry and use your own pen.
- Open lever handled doors (on push side) with your elbow, instead of your hand.
- Use your elbow, foot or foot pedal to activate the door opener press plates.

• Regularly clean and sanitize your cellphone/smartphone and the steering wheel of your car.

Site-based staff should clean the high touch surfaces at their personal workspace at least twice a week (minimally on Wednesday and Friday). Specifically, staff should clean, sanitize and disinfect the desktop, keyboard, mouse, and handset for the phone. It would be advisable to take similar steps with personal and work cellphones.

To reduce the need for people to touch doorknobs, unless you have a confidential meeting, leave the door to your workspace open. Staff in each office should also clean and sanitize their doorknobs everyday.

# If Staff Become Sick

If a staff person has a fever over 100.4 Fahrenheit or respiratory symptoms, they should not report to work. Because it is likely that multiple people may become sick at the same time, staff should try to provide as much advance notice as possible to their supervisor so we can make plans to cover required responsibilities. As a resource, the CDC has issued guidance on what to do if someone becomes sick with COVID-19):

https://www.cdc.gov/coronavirus/2019-ncov/about/steps-when-sick.html

# Paid Sick Leave

We have a generous accrual policy that allows staff to accrue 975 hours of sick leave so that they have income protection for extended illnesses. We recognize that some staff have used their sick leave accruals to supplement other paid time off, so we remind staff that this leave accrual is intended to provide income protection in situations like this and to use the leave for its intended purpose when needed.

Our policies currently require staff to submit medical verification when on extended sick leave and in order to return to work. At this point, we do not need to change our policies, however we recognize that as the situation changes, we may need to modify our policies so they will not incentivize people coming to work when they are ill or add an unnecessary burden to the healthcare system which may have difficulty keeping up with demand.

# Contacting Healthcare Providers

If people begin experiencing COVID-19 like symptoms (temperature of 100.4 or greater, fatigue, respiratory or breathing difficulties or discomfort), they should contact their healthcare provider to determine what they need to do.

It is imperative that people seek medical attention if they have shortness of breath, unremitting fever, weakness or lethargy as those could be signs of pneumonia. The Centers for Disease Control and Prevention also recommends that people seek medical help if they recently traveled to a coronavirus-infected area or had close contact with a known infected person and have a fever, a cough or trouble breathing.

Older people and those with underlying medical conditions, such as diabetes, heart disease or chronic obstructive pulmonary disease, are more at risk for severe illness. Individuals that fall into one of those categories and feel seriously unwell should act quickly to seek medical attention.

## If Family Members Become Sick

If a family member or a member of the household of a staff person has COVID-19 symptoms, staff should immediately contact their supervisor and not come to work unless instructed to do so. We will work with staff on an individual basis to avoid spreading COVID-19 to others. This may include having staff stay home from work or work from home (in certain circumstances).

If staff need to take care of a family member who has become sick, staff may be eligible to take NYS Paid Family Leave. <u>https://paidfamilyleave.ny.gov/</u> Eligible family members include:

- spouse
- domestic partner (including same and different gender couples; legal registration not required)
- child/stepchild and anyone for whom you have legal custody
- parent/stepparent
- parent-in-law
- grandparent
- grandchild

As a resource for people who have a sick family member, the CDC has issued interim guidance to help prevent this virus from spreading among people in their homes and in other residential communities. This guidance provides clarification regarding evaluation for home isolation and a new section with information regarding preventative steps for household members, intimate partners, and caregivers in a non-healthcare setting of a person with symptomatic, laboratoryconfirmed COVID-19:

https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-prevent-spread.html

The CDC has also issued guidance that provides recommendations on the cleaning and disinfection of households where persons under investigation or those with confirmed COVID-19 reside or may be in self-isolation:

https://www.cdc.gov/coronavirus/2019-ncov/community/home/cleaningdisinfection.html

# Screening Staff and Visitors When They Arrive

When visitors arrive, the receptionist will ask them if they are having symptoms or if a family member or a member of the household of a staff person is sick. Visitors with respiratory symptoms and visitors who have a household member who is sick, will be asked to wear a surgical mask during their visit.

Although it is not necessary now, in the event of community spread, we have purchased no-touch thermometers for use at major offices and service sites. Under certain conditions the receptionist (or another staff) will be instructed check the temperature of each staff person or visitor as they arrive at the office. Although temperature alone is not an exceptionally accurate way to assess risk, because some with the coronavirus will be contagious but have no fever and others will have higher temperatures not related to this virus, this is a specific measure we can take to limit the potential spread of the virus among our consumers and staff.

In the event of community spread, visitors who have a fever, respiratory symptoms or an immediate family member with COVID-19 infection will be provided with a mask, escorted to a "containment" meeting room where they will be educated about COVID and arrangements made to assist them remotely as appropriate.

# Meeting with Visitors

All meetings will take place in public space meeting rooms. Do not bring non-staff visitors into the office space. (This includes consumers, their family, other professionals, and CDPAS attendants. AAY attendants and community support staff are still able to come into our program space, as needed.) If a staff person anticipates needing computer access for a meeting, they should request a laptop from IT.

When staff take the visitor into a meeting room, after they close the door, they should use unscented hand sanitizer which is located on the wall in the meeting rooms. Following the meeting, staff should escort the visitor back into the main lobby, closing the door to the meeting room as they leave. After saying goodbye to the visitor, staff should get cleaning supplies from the front desk and return to the meeting room to clean all high-touch surfaces, including

- the tabletop,
- the top of the backs of meeting room chairs,
- the phone if used, and
- meeting room door knobs.

When they are finished cleaning the room, they should leave the door to the meeting room open (indicating that it is ready for use), dispose of the used cleaning supplies, return the cleaning products to the front desk, and use unscented hand sanitizer before returning to their desk.

## Surgical Masks

Surgical masks do not protect people from becoming infected. These should be used by people experiencing symptoms to protect other people. All staff should familiarize themselves on how to correctly handle and wear a mask. <u>https://www.sfcdcp.org/communicable-disease/healthy-habits/how-to-put-on-and-remove-a-face-mask/</u>

Surgical masks will be available at the front desks in our offices. In the event that someone who needs to wear a surgical mask must be lipread, staff can request a surgical mask that has a clear window that allows the person's mouth to be seen.

Additional Information for Community Support Staff and AAY Personal Care Aides Community Support Staff and AAY Personal Care Aides are instructed to purchase a small bottle of unscented hand sanitizer with at least 60% alcohol for their personal work-related use. CDR will reimburse the cost of this, up to \$4.00.

Prior to entering the consumer's home, the staff should use unscented hand sanitizer.

During the visit, staff must perform proper hand hygiene – washing their hands (if possible) or using unscented hand sanitizer at a minimum – before each new contact to protect the individual for whom they provide assistance, and the families with whom they interact. More specifically, staff should perform hand hygiene before and after completing the following activities:

- providing the individual with hands on assistance,
- touching the individual's clothes or bedsheets,
- feeding the individual,
- handling bedrails, personal mobility or personal assistance equipment, television remote, or other equipment in the home.

Community Support Staff and AAY Personal Care Aides will be given additional information to support the disabled individual they serve to take steps to clean and sanitize their home.

Upon completing of their visit, staff should use unscented hand sanitizer.

If AAY or CDR is notified that a consumer or a member of their household is sick, we will notify the staff who work with them. If Community Support Staff or PCA see that a consumer or a member of their household is sick and they have not been notified of the illness, they should contact their supervisor immediately.

Depending on the needs of the consumer, we may reduce the number of visits they receive, however many of our consumers rely on the services and supports we provide to remain in the community. All decisions will be made on a case-bycase basis, based on the circumstances at the time as the situation evolves.

The CDC has indicated that wearing masks does not prevent healthy people from becoming infected. If a consumer is sick and they cannot cover their mouth when

they cough or sneeze, CDR/AAY will provide you with masks for the consumer to wear when you are working with them. You will receive sufficient masks for the number of visits you will make to that consumer during a three-week period.

At this point, because there is not community spread there are no limitations or restrictions related to community-based activities. Should community spread of the virus occur, we may establish recommendations and a policy to limit exposure.

# Additional Information for Congregate Service Support Staff

Congregate program sites (Edgerton and Canandaigua) will be provided with unscented hand sanitizer with at least 60% alcohol for work-related use.

All staff, upon arrival at work, the staff should use unscented hand sanitizer.

Staff must perform proper hand hygiene – washing their hands if possible or using unscented hand sanitizer at a minimum – before each new contact to protect the individual for whom they provide assistance, and the families with whom they interact. More specifically, staff should perform hand hygiene before and after completing the following activities:

- providing the individual with hands on assistance,
- touching the individual or the individual's clothes,
- feeding the individual,
- handling frequently-touched items like the doorknobs, telephone, personal mobility or personal assistance equipment, remote controls, or other equipment.

Each site should identify frequently touched surfaces that should be cleaned. A schedule for cleaning such surfaces should be established, posted and adhered to. At a minimum, frequently touched surfaces should be cleaned three times daily (at the beginning of the day, mid-day and at the end of the day).

At the end of their shift, staff should use unscented hand sanitizer.

All program consumers should be monitored for fever or respiratory symptoms. If a consumer has a 100.4 fever or respiratory symptoms, staff should separate the individual from the rest of the group, have the individual put on a surgical mask and contact their supervisor immediately so we can make the appropriate arrangements.

At this point, there are no limitations or restrictions related to community-based group activities. Should community spread of the virus occur, we may establish recommendations and a policy to limit exposure.

#### Additional Information for Administrative Staff

To ensure security and integrity of protected confidential health information and financial data, most administrative positions are not able to work remotely. To minimize the risk of spreading infection, AAY, CDR and RCIL are taking steps to increase the distance between employees who work together in shared space and will evaluate offsetting schedules as an approach to increase social distancing. In a limited number of circumstances, some administrative staff may be able to work remotely. This will be determined on an individual basis.

#### Additional Information for Office Based Program Staff

To minimize the risk of spreading infection, AAY, CDR and RCIL are taking steps to increase the distance between employees who work together in shared space. Most program staff have specific work hours that cannot be flexed, however, in certain circumstances, it is possible for a limited number of program staff to work remotely as a way to increase social distancing. This measure is not necessary at this time because there is no community spread. If some staff are allowed to work remotely, it is critical that we maintain office coverage to assist walk-in individuals during all business hours. Additionally, remotely working staff will be expected to provide their supervisor (or designee) with service notes documenting at least 80% of their office-based expected level of documented work by 4:45 PM each day. If this condition is not met, the employee may be required to return to office-based work.

Office Based Program Staff who regularly have appointments in the community may purchase a small bottle of unscented hand sanitizer with at least 60% alcohol for their personal work-related use. CDR will reimburse the cost of this, up to \$4.00.

# Additional Information for Staff in Nursing Facilities

To limit the risk to ourselves and the nursing facility residents we serve, staff should ensure that they are not running a fever before going to the facility. Prior to leaving for the facility, staff should wash their hands. After arriving but prior to entering the facility, staff should use also unscented hand sanitizer.

Staff should organize their work so that staff maximize the use of remote support to eliminate unnecessary on-site visits in order to minimize direct contact while meeting the needs of our consumers. Staff should also consolidate their on-site work as much as possible to limit the overall number of visits. In the event of community spread, staff should monitor the status of the facilities in our region to ensure that they are open to visitors prior to leaving the office.

## Additional Information for Contracted Sign Language Interpreters

Like our attendants, Sign Language Interpreters provide a vital support service for people with disabilities. We recognize that there may be circumstances that impact an interpreter's ability to cover a shift. Although it is the interpreter's responsibility to find their own replacement, we will work diligently to support them. We also remind interpreters, particularly those who work in medical settings and provide tactile interpreting, that they should refresh themselves on universal precautions.

## Common Spaces

CDR is supplying unscented hand sanitizer stations in common spaces for our major offices. There are three primary areas that require specific attention: the lobbies, breakrooms and restrooms.

# Rochester - Lobby

Maintenance will clean the counters and other high touch surfaces (restroom door handles, vending machines, first floor copier controls, public use computer keyboards and mice) in the lobby and first floor copy room at the beginning of the day. A department will be assigned to clean these surfaces at the end of each day.

## Rochester - Breakroom

Staff should wash their hands or use unscented hand sanitizer prior to preparing food or eating. After using a breakroom, staff are expected to clean the top of

the chair back (a high touch surface). They should also wipe their section of the table with cleaner. If they are the last person at a table, they should clean the entire top of the table. Prior to returning to their work station, they should use unscented hand sanitizer.

Maintenance will clean the kitchen counters, tabletops and other high touch surfaces (refrigerator door handles, vending machines) at the beginning of the day.

#### Rochester – Copier and Elevator Controls

Staff will be assigned to clean the controls on the copiers and elevator each morning and afternoon.

#### Rochester - Restrooms

Where possible waste baskets have been moved closer to the doors to facilitate staff opening the door with the paper towel and then throwing it away as they exit the restroom. Maintenance will clean the counters and other high touch surfaces (sink, restroom door handles) at the beginning of the day. A department will be assigned to clean these surfaces at the end of each day.

#### Geneva – Lobby and Conference Room

Staff will be assigned to clean the high touch surfaces (table, restroom door handles, the tops of chairs in the lobby, copier controls, public use computer keyboards and mice) each morning.

#### Geneva - Breakroom

Staff should wash their hands or use unscented hand sanitizer prior to preparing food or eating. After using the breakroom, staff are expected to clean the top of the chair back (a high touch surface). They should also wipe their section of the table with cleaner. If they are the last person at a table, they should clean the entire top of the table. Prior to returning to their work station, they should use unscented hand sanitizer.

Staff will be assigned to clean the counters, tabletops and other high touch surfaces (microwave controls, sink controls, kitchen nobs, refrigerator door handle) each morning to share this responsibility among the office staff.

#### Geneva - Restrooms

Where possible waste baskets have been moved closer to the doors to facilitate staff opening the door with the paper towel and then throwing it away as they exit the restroom. Staff will be assigned to clean the counters and other high touch surfaces (sink, restroom door handle) each morning to share this responsibility among the office staff.

## Corning – Entrance, Lobby, Conference Room and Kitchenette

Staff will be assigned to clean the counters and other high touch surfaces (door handles, tables, chairs, copier controls, public use computer keyboards and mice) each morning to share this responsibility.

# Additional Steps We Are Taking to Limit the Spread of COVID-19

We have purchased UV light sanitizers for each of the major offices. These are being made available to staff and consumers to sanitize their cellphones or smartphones.

## Equipment Loans

RCIL already cleans and sanitizes all loaned equipment prior to loan. Staff are expected to adhere to universal precautions when handling equipment that has been returned from a loan or is being donated. However, we are establishing policies to better limit the potential to spread infection. Staff will use gloves when receiving donated equipment and immediately transfer the equipment to the loan closet so it can be disinfected. The equipment will be segregated from other equipment and labeled as needing to be cleaned and sanitized. We are exploring how we can upgrade our disinfecting process to address soft surfaces. Finally, we will monitor the situation and may implement screening and limit the receipt of donated equipment based on specific circumstances.

## Large Group Events

At this point, there are no limitations or restrictions on large group events or activities. Should community spread of the virus occur, we may establish recommendations and a policy to limit exposure.

## Public Transportation and Travel

Staff who use public transportation are reminded of the importance of not touching their faces, washing their hands and using hand sanitizer as measures to

reduce the likelihood of infection from the use of public transportation. At this point, there are no limitations or restrictions on travel. Should community spread of the virus occur, we may establish recommendations and a policy to limit exposure.

#### Contact Tracking

Being able to track infections allows public health officials to quarantine individuals and work to contain the virus. Staff are reminded that documenting their service delivery to consumers is an important function. In the context of COVID-19, documentation of service notes will allow us to identify specifically who may have been exposed to a virus in the case of community spread. It is critically important that staff document all service contacts with all consumers in a timely manner.

At this point, we are not taking any additional steps to track contacts. Should community spread of the virus occur, we may establish a policy to do this as a way to support public health officials in containing the virus.

#### Personal Preparedness

Although the overall mortality rate is generally low, we are seeing signs that it will be higher for people with disabilities. Consequently, we are taking significant steps to limit the risk we pose to our consumers.

The people we serve depend on us to be able to meet their needs and we have a responsibility to take care of ourselves to be able to support them. The best way to ensure that we are able to do that – while helping limit exposure to others – is to take steps to reduce the opportunity for us to become infected through social distancing. Limiting contact reduces your individual risk and our collective risk.

The World Health Organization is encouraging people to prepare in case one is declared. If you go to the store, here is what you should get:

- A two-week supply of water, non-perishable food and supplies (paper towels, toilet tissue, etc.),
- A 30-day supply of your prescriptions,
- Nonprescription drugs like pain relievers, stomach remedies, cough and cold medicines, fluids with electrolytes, and vitamins, and
- Soap and hand sanitizer.

The NYS Department of Health operates a Novel Coronavirus Hotline that provides accurate and updated information on the Coronavirus for New York residents. You can reach them at 1-888-364-3065.

Additionally, the CDC has issued interim guidance is to help household members plan for community transmission of COVID-19 in the United States:

https://www.cdc.gov/coronavirus/2019-ncov/community/home/get-yourhousehold-ready-for-COVID-19.html

## Additional Information

AAY, CDR and RCIL will provide regular updates to all staff and consumers. Updates will be sent from <u>Alerts@cdrnys.org</u> so that all staff can prioritize these emails for review.

## As the Situation Evolves, So Will Our Policy

These policies are in effect as of March 5, 2020. We are monitoring the situation and will update these policies as appropriate.

Effective March 5, 2020