Wingspan Life Resources Covid-19 Preparedness Plan

In response to the Covid-19 Pandemic, Wingspan Life Resources has identified a team to plan contingencies for the protection of clients and staff. The members of this team include: Therese Davis, Executive Director; Frank Merrill, Director of Residential Services; Stacy Jacobsen, Registered Nurse; Deborah Monk, Director of Human Resources; and Pam Carlson, Director of Operations. The team will develop and implement the plan by doing the following:

- Monitoring information from MDH, CDC, and Governor Walz via conference calls, webinars, websites, and direct calls to MDH.
- Processing this information and assess for needed plan changes on a regular basis.
- Communicating any changes in the plan to staff, clients, and guardians.

Hygiene and Source Control

- All staff and clients will be educated on hand and cough hygiene.
- Handwashing and “cover your cough” signs will be posted at all locations.
- Hand hygiene should be performed by staff and clients after having been in a public place, prior to and after eating, after using the toilet, or after blowing your nose, coughing, or sneezing.
- Clients, staff, and visitors should wash their hands for at least 20 seconds with soap and water. If soap and water are not available, a hand sanitizer that contains at least 60% alcohol will be used.
- Hand sanitizer will be readily available and stocked by entrances, if feasible.
- Trash-receptacles will be placed by the bathroom door so a paper towel can be readily disposed of when operating the door.
- Clients and staff will be encouraged to avoid touching their mouth, nose, or eyes with unwashed hands.
- Tissues for proper cough/sneeze etiquette and no-touch disposal containers will be provided.
- Facemasks will be used by all visitors; vaccinated visitors may take off their masks inside the room of the individual they are visiting in non-ICF homes.
- Unvaccinated clients will be strongly encouraged to wear facemasks when outside of their rooms.
- Vaccinated clients do not have to wear masks in the common areas of the home unless:
  - they are in the presence of unvaccinated clients
  - the mental health and rights of the clients should be considered in regard to the benefits of wearing a mask.
- Staff will be provided with recommended protective supplies, such as facemasks, gloves, disinfectant, eye protection, etc. as supply allows.
- Fully vaccinated staff in HCBS homes do not have to wear PPE unless:
  - there is an active case of COVID-19 in the home
  - state or local authorities mandate its use
• Unvaccinated staff must wear surgical facemasks throughout their shift; eye protection is also recommended.

• Surgical masks and eye protection for is required for all staff working in an ICF setting with following exception:
  o Fully vaccinated staff can dine and socialize together in break rooms and conduct in-person meetings without source control or physical distancing. If unvaccinated HCP are present, everyone should wear source control and unvaccinated HCP should physically distance from others.

• All efforts will be made to stock the sites and offices with the proper PPE. Contingency plans will be made in the event this is not possible.

• Personal hygiene items will not be stored directly on bathroom countertops

**Cleaning and Disinfecting**

• Sites and offices will be cleaned and disinfected according to recommendations from the CDC and MDH: [https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html](https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html)

• A sanitation schedule and checklist will be utilized, identifying surfaces/equipment to be sanitized, the agent to be used, and the frequency at which sanitation occurs.

• High-touch surfaces such as doorknobs, light switches, stair rails, counters, tables and chairs, appliance handles, remote controls, phones, keyboards, toilets, faucets, program equipment and other shared items will be cleaned and disinfected at least twice daily.

• The use of shared supplies (e.g. arts and crafts, office supplies) that cannot be sanitized will be minimized; bins will be designated for clean and used items as feasible.

• EPA-registered disinfectants recommended by the CDC will be used: [https://www.epa.gov/coronavirus](https://www.epa.gov/coronavirus)

• Towels, bedding, and other items will be laundered using the warmest appropriate water setting and dried on the highest heat setting.

• Cleaning and disinfection in common areas will increase if a positive Covid-19 case is identified; cleaning and disinfection of the ill person’s room will be reduced to as-needed.

**Screening and Policies for Staff and Volunteers Exhibiting Signs or Symptoms of COVID-19**

• Staff and volunteers will be screened for signs of illness, including accessing exposure history and using a health survey with temperature screening before beginning a work shift.

• This screening applies to fully vaccinated and unvaccinated individuals.

• Sick staff or volunteers will not be allowed to enter the site.

• Sick policies will be clearly communicated and supportive of staff and volunteers staying home when sick.

• Staff and volunteers will be educated on the signs and symptoms of the COVID-19 illness which include: fever, cough, shortness of breath, chills, headache, muscle pain, sore throat, nausea, vomiting, diarrhea, new loss of taste or smell.
• Staff and volunteers will be educated on the signs of serious illness that require emergency care including: severe trouble breathing, lasting chest pain or pressure, new confusion, or inability to wake up or stay awake.
• The Wingspan RN will be notified of any staff members or volunteers exhibiting symptoms of Covid-19 or reporting significant exposure to COVID-19; these individuals will be encouraged to be tested for COVID-19.
• MDH will be notified if a staff member or volunteer is diagnosed with COVID-19 and will be consulted for direction on next steps.
• Staff members or volunteers exhibiting symptoms of COVID-19 or testing positive for COVID-19 will be excluded from the site according to current MDH guidelines.
• Emergency contact information for staff and volunteers will be verified to confirm it is up-to-date.

Screening and Policies for Staff and Volunteers Exhibiting Signs or Symptoms of COVID-19

• Communication protocols will be established for a positive COVID-19 case or potential exposure that ensures an individual’s identity is not disclosed, other than to a person authorized to receive the information. This information will be restricted to members of the COVID-19 team and site management as appropriate.
• Guardians and staff will be notified of positive Covid-19 cases in the site, while maintaining privacy as appropriate. The individual’s identity may be disclosed to other staff if it is necessary to determine exposures.
• Non-essential staff and volunteers are discouraged in the sites.

Back-up Staffing Plan in Case a Staff Member or Volunteer Becomes Ill

• Staff must leave the site as soon as the illness is discovered; if there is not a second staff, they will leave the site after their supervisor arrives to relieve them. A surgical mask and social distancing will be used in the interim.
• If the supervisor is unavailable, call the Program Director. If the PD is unavailable, call the emergency cell phone for assistance.

Staffing Contingency Plan for Ill or Excluded Staff

• Hazard pay will be provided for staff working at homes with positive COVID-19 clients
• Current site staff will be offered longer shifts.
• Site management staff will work direct care shifts
• Staff from others sites will be contacted to work.
• Star Services will be contacted for temporary workers.
• Conserve staff by focusing staff time on core, direct care tasks that are critical to client health; reassign staff accordingly.
• Asymptomatic quarantined staff may be called back under the direction of MDH.
• DHS Disability Services Division (DSD) Provider Response Team will be called for assistance.
• The State Emergency Operations Center will be contacted for emergency staffing resources.
• COVID-19 positive clients may be transferred to COVID-19 care sites.
• Clients may be moved to locations in the organization with open beds; clients will be cohorted according to COVID-19 status.
• Asymptomatic COVID-19 positive staff will only be called back under the direction of the SEOC and the Commissioner of Health.

Screening and Policies for Clients Exhibiting Signs or Symptoms of COVID-19

• Clients will be screened for signs of illness, including using a health screening survey and taking temperatures daily; screening will increase if clients display symptoms or test positive for COVID-19.
• Clients residing at ICF facilities will be screened for COVID-19 symptoms twice daily including checking oxygen saturation, temperatures and reviewing a list of other possible symptoms.
• Client screenings apply to vaccinated and unvaccinated clients.
• The Wingspan RN will be notified immediately of any clients exhibiting symptoms of COVID-19 or reporting significant exposure to COVID-19; arrangements will be made for these individuals to be tested for COVID-19 and their primary care provider will be notified.
• Clients exhibiting symptoms of COVID-19 or testing positive for COVID-19 will be isolated to their rooms and encouraged to wear a surgical mask; preferably using a dedicated bathroom and having dedicated medical equipment. Their isolation period will be determined by current MDH guidelines.
• MDH will be notified follow if a client is diagnosed with COVID-19 and will be consulted for current best practices.
• Clients will be educated on the signs and symptoms of the COVID-19 illness.
• Emergency contact information for clients will be verified it is up-to-date.
• Communication protocols will be established for positive COVID-19 cases or potential exposure and ensure that an individual’s identity is not disclosed, other than to a person authorized to receive the information. This information will be restricted to members of the COVID-19 team and site staff as appropriate.
• Guardians and staff will be notified of positive Covid-19 cases in the site, while maintaining privacy as appropriate.

Arrivals and Departures for In-Home/SES Programs

• Clients, Staff and Volunteers will be screened outside or near the program entrance for signs of illness, including using a health screening survey and taking temperatures daily.
• Instructions will be posed at entrances informing people:
• Not to enter if they are experiencing COVID-19 symptoms;
• To wash or sanitize their hands upon arrival;
• Screening for COVID-19 symptoms by staff is required prior to or immediately upon entering the program;
• To wear face-coverings whenever possible if unvaccinated; and
• To adhere to hygiene and social distancing instructions, signage and markings.

• Stagger when people arrive and leave so that larger groups of people do not congregate during these times.
• Consider use of multiple entrances and exits when these can be used safely by the service recipient, staff, volunteers and visitors.
• Clearly mark areas for pick-up and drop-off. Limit the number of persons accompanying the service recipient.
• Limit use of shared items for check-ins (i.e. pens).

Social Distancing

For homes with any unvaccinated clients

• Gatherings of clients and staff in the facility should be carefully considered and redesigned, as necessary, to reduce prolonged close contact among staff and clients.
• Encourage social distancing in the group home/site.
• Rearrange seating spaces to maximize the space (at least 6 feet) between people. Turn chairs to face in the same direction (rather than facing each other) to reduce transmission caused from virus-containing droplets (e.g., from talking, coughing, sneezing).
• The mental health and rights of the clients should be considered in regard to the risks and benefits of not maintaining a social distance.
• Hold meetings remotely, if possible.
• Staff should limit entering clients’ rooms as much as possible to reduce potential for cross-contamination, unless required for direct care.

For all homes

• Unvaccinated staff and volunteers should maintain social distance when interacting with each other.

Food Preparation and Meals

For homes with any unvaccinated clients

• Stagger meal times to maximize social distancing, if possible.
• If meals are served family-style, plate each meal to serve it so that multiple people are not using the same serving utensils; use the same procedure in ICF settings.
For all homes

- Promote hand hygiene before and after meals.
- Prohibit food and beverage sharing.

**Ventilation**

- Work to maximize the amount of fresh air being brought in, limit air recirculation and ensure ventilation systems are properly used and maintained.
- Take steps to minimize air flow blowing across people.

**Visitors**

- All clients may have indoor and outdoor visits except as noted in the exceptions below.
- Visits should be arranged in advance with the house coordinator.
- One visitor at a time is preferred.
- If the visit is at the group home, it should occur in the client’s room or outside, if possible.
- Visitors must wear a well-fitting mask and social distance except as noted in the exceptions below.
- Visitors should limit interactions to those individuals that they are visiting.
- Visitors and clients must not have symptoms of Covid-19 or be under quarantine or isolation due to Covid-19.
- All visitors will be screened for symptoms of and possible exposures to COVID-19.
- Clients and visitors should perform hand hygiene before and after the visit.
- Commonly touched surfaces should be disinfected after a visit to the home.
- Clients who are fully vaccinated may gather indoors (in the client’s room or other designated area) or outdoors with visitors of their choice.
- Clients who are fully vaccinated can choose to visit without masks and social distancing in the designated area if:
  - Their visitors are fully vaccinated or if their visitors are from a single household who are at low risk for severe COVID-19 infection (HCBS settings)
  - Their visitors are fully vaccinated (ICF settings)
- If the client is fully vaccinated, they can choose to have close contact (including touch) with the persons they are visiting.
- Unvaccinated clients are strongly encouraged to mask, maintain a social distance, and have outside visits.
- Visitation to the group home may be temporarily suspended due to: COVID-19 exposures or cases in the home, a county percent positivity rate above 10% in a home with unvaccinated clients, or if mandated by executive order.
- Compassionate care visits will be allowed in all circumstances.
- More information for visitation in ICF settings can be found here: Ref: QSO-21-14-ICF/IID & PRTF
Community Outings

• The client’s risk factor for Covid-19 complications and possible benefits of community outings must be weighed when making decisions regarding outings.
• The current Stay Safe MN guidance should be followed when going out in the community.
• Clients and the individuals who accompany them will be educated on social distancing and masking for the community outing, if required.
• Frequent hand hygiene will be encouraged.
• If a client who is fully vaccinated chooses to attend a place of worship or other group event, or to shop or eat in public establishments, the client should follow the core principles of COVID-19 infection prevention according to the current guidelines.
• MDH strongly encourages attending places of worship or other group events only when the 14-day county percent positivity rate is below 5%.
• Outings without staff (work environments, family home visits, etc.) will require the client using a cloth face mask when in communal areas, eating meals in a private room or at least 6 feet apart from others, and frequent hand washing for 14 days, if the client is unvaccinated.
• Community outings may be suspended due to current statewide mandates and executive orders.

Admissions from Other Facilities

• The client will be screened for symptoms of COVID-19.
• Fully vaccinated clients will not require testing or quarantines upon admission unless they have had prolonged close contact to someone with COVID-19.
• The client will be encouraged to quarantine in their room for 14 days and/or be tested for Covid-19 if unvaccinated.

Transportation

• Unvaccinated staff and clients must use facemasks during transportation.
• Masks are also required if anyone in the vehicle is diagnosed with COVID-19 or is exhibiting symptoms.
• For increased protection, unvaccinated staff should wear goggles or face shields.
• Take precautions recommended by the CDC when using public transportation, ride-sharing, or taxis.
• Limit the number of clients in the vehicle and ask them to spread out to maintain social distancing as much as possible, if they are unvaccinated.
• Do not have air recirculated while in a vehicle. Use the vehicle’s ventilation system to exchange fresh air from outside of vehicle; lower windows as much as possible.
• Remind clients to follow current disease prevention guidelines while they are away.
COVID-19 Vaccine

- Wingspan Life Resources will assist new staff and clients in receiving free vaccinations through the MN Vaccine Connector.
- A record of the vaccination status of clients/staff will be maintained.

Quarantine and Isolation Periods

- Quarantine and isolation periods for high risk exposures to and symptoms of COVID-19 may differ depending on vaccination status, whether an individual is a client or staff, and the home setting for clients (ICF vs. HCBS).
- All quarantine and isolation periods will be determined by the guidance of MDH.

International and Domestic Travel

- Travel increases the chances of getting and spreading COVID-19.
- Vaccination status, destination, and status as a client or worker in a healthcare setting may impact precautions needed before and after travel.
- These recommendations are subject to frequent change. Contact your Program Director for the most up to date information.

Communication and Training about the Plan

- The preparedness plan will be available to staff, contracted service providers, and volunteers.
- Staff should direct questions regarding the Plan to their House Coordinator or Program Director.
- Staff and volunteers will be trained on the plan and will receive updates on any changes to the plan.
- The plan must be available to the Commissioner and posted in a prominent place and readily accessible to staff who need to review it.
- The plan will be explained in plain language to the clients and, as appropriate, parents, guardians, legal representatives, and case managers. Resources may be provided to assist individuals in following the plan.
- Staff with concerns about their employer’s COVID-19 Preparedness Plan or questions about their rights should contact MNOSHA Compliance at osha.compliance@state.mn.us, 651-284-5050 or 877-470-6742.