**Day Support Providers’ Internal Assessment of Readiness to Reopen**

Due to COVID-19, there are a number of factors that must be considered and addressed prior to reopening Group Day sites, including those sites used as starting locations for Community Engagement and Community Coaching. These precautions will facilitate the safety of the individuals being supported, as well as staff present on site. DBHDS recommends that all providers stay abreast of new developments/guidance from the (CDC). In addition, the Virginia Department of Labor and Industry has issued emergency temporary standards for workplaces across the Commonwealth and require adherence to certain precautions. Please see <https://www.doli.virginia.gov/wp-content/uploads/2020/07/RIS-filed-RTD-Final-ETS-7.24.2020.pdf> for more details.

The following items to consider and practices to implement may be of assistance. These have been divided into *provider site considerations* and *individual considerations*. Note that links to the related portions of the CDC website have been inserted.

1. **Site Considerations/Assessment**

For each location it is essential to consider and plan for the following:

* + - **Cleaning protocols**, particularly for high touch surfaces (i.e., tables, doorknobs, light switches, countertops, handles, desks, writing implements, remote controls, keyboards/computers, phones, toilets, faucets, sinks, etc.). Pay special attention to shared spaces such as kitchens and restrooms. The CDC recommends:
		- wearing reusable or disposable gloves for routine cleaning and disinfection.
		- cleaning surfaces using soap and water, then using disinfectant.
			* cleaning with soap and water **reduces the number of germs**, **dirt and impurities** on surfaces, while **disinfecting kills germs** on surfaces.

<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/disinfecting-your-home.html>

* **Use of Face Coverings** by both individuals and staff. Governor Northam’s Executive Order 63 requires, “Virginians to wear face coverings in public indoor settings to help contain the spread of the novel coronavirus.” This is applicable to a variety of public settings including, “any indoor space shared by groups of people who may congregate within six feet of one another or who are in close proximity to each other for more than ten minutes,” which would include Group Day programs. There are some exceptions; see the information at the following link.

<https://www.governor.virginia.gov/newsroom/all-releases/2020/may/headline-857020-en.html#:~:text=Under%20the%20Governor's%20executive%20order,Personal%20care%20and%20grooming%20businesses>

Further, the CDC recommends wearing a [cloth face covering](https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html) as feasible. Face coverings are **most** essential in times when social distancing is difficult.

* **Maintaining clean hands.**
* Handwashing is one of the best ways to protect the individuals being supported and staff from getting sick.
* The CDC recommends thoroughly washing hands:
* **Before, during,** and **after** preparing food
* **Before** eating food
* **Before** and **after** caring for someone who is sick with vomiting or diarrhea
* **Before** and **after** treating a cut or wound
* **After** blowing your nose, coughing, or sneezing
* **After** touching garbage
* **After** using the toilet
* **After** you have been in a public place and touched an item or surface that may be frequently touched by other people, such as door handles, tables, gas pumps, shopping carts, or electronic cashier registers/screens, etc.
* Five steps for proper handwashing:
* **Wet** your hands with clean, running water (warm or cold), turn off the tap, and apply soap.
* **Lather** your hands by rubbing them together with the soap. Lather the backs of your hands, between your fingers, and under your nails.
* **Scrub** your hands for at least 20 seconds. Need a timer? Hum the “Happy Birthday” song from beginning to end twice.
* **Rinse** your hands well under clean, running water.
* **Dry** your hands using a clean towel or air dry them.
* If soap and water are not readily available, the CDC recommends that those who can safely use hand sanitizer use hand sanitizer that contains at least 60% alcohol and rub hands together until dry.

 <https://www.cdc.gov/handwashing/index.html>

* **Ability of both staff and individuals to maintain safe distances** from one another (the CDC recommends staying at least 6 feet away – approximately two arms lengths – from people you don’t live with i.e., “social distancing”). This may also include considerations for:
* the number of people permitted to access restrooms at one time
* the individual’s ability to practice considerations for social distancing while in the community away from a center.

<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/social-distancing.html>

* + **Ability to group individuals together with those with whom they live.** Pre-COVID-19, DBHDS strongly encouraged providers to enable individuals to engage in activities with persons other than those with whom they lived. However, the CDC currently recommends avoiding, as much as possible, gathering with people with whom one does not live.
	+ **Ability to operate with smaller groups** on a staggered (e.g., one group present from 9 – 12 and another group present from 1 – 4 with cleaning in between groups) or extended week (i.e., Sunday through Saturday) schedule so that fewer individuals are grouped together at the same time.
	+ **Safe, clean place for meals to be eaten**. Masks may be removed while eating, but should be replaced immediately after.
	+ **Training offered to DSPs *and individuals* on safety procedures** for on-site and community locations. For example,
		- practicing proper [respiratory etiquette](https://www.cdc.gov/flu/professionals/infectioncontrol/resphygiene.htm) (e.g., sneezing into an upper sleeve or the crook of one’s arm vs. hand)
		- washing hands often with soap and water per the above guidelines
		- avoiding touching one’s eyes, nose, and mouth with unwashed hands
		- knowing how COVID-19 spreads (so as to prevent its spread)
		- [physical distancing](https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/social-distancing.html) of at least 6 feet between persons not living in the same household
		- [quarantining](https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine.html) if exposed to COVID-19.

<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html>

NOTE: There are some easy to understand videos at the CDC website links cited here, which may be helpful in educating both staff and the individuals you support.

In addition, please review the “COVID-19 Infection Control” Power Point under “Educational Resources” at the following link:

[http://www.dbhds.virginia.gov/office-of-integrated-health#](http://www.dbhds.virginia.gov/office-of-integrated-health)

* + **Transportation considerations**: because traveling in vans with a number of other individuals for any length of time can involve sitting within 6 feet of others the following suggestions are made:
		- Encourage, as much as possible, individuals to travel with people with whom they live
		- Encourage individuals to wash their hands before boarding vans or use hand sanitizer immediately prior to boarding
		- Encourage individuals to wear masks or face coverings and not to touch their faces while on vans
		- Encourage individuals to wash/sanitize their hands upon arriving at the day support site
		- If the day support provider is operating the vehicle, instruct staff to wipe down the interior surfaces after individuals exit
		- Consider transporting fewer individuals at a time so that they are better able to socially distance in the vehicle.

For CDC travel guidance, see “If You Travel” at the following link:

<https://www.cdc.gov/coronavirus/2019-ncov/travelers/travel-in-the-us.html>

* + **Ventilation**: activities that take place outdoors may pose a lower risk of transmission. Recirculated air (as with air conditioning) may recirculate aerosol droplets and pose additional risk of transmission. See the “Take steps to improve ventilation in the building” section at the following link:

<https://www.cdc.gov/coronavirus/2019-ncov/community/office-buildings.html>

* + **Policies/practices for when staff and individuals may return to the site/day services** after becoming infected with COVID-19. Policies should include maintaining confidentiality related to record keeping regarding staff or individuals who experience COVID-19.

<https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/end-home-isolation.html>

Establish policies/practices to be implemented in the event an individual or DSP, or one of the individual’s household members becomes ill with COVID-19 requires quarantine (e.g., travel out of state, contacted by a contact tracer).

* + **Following the Virginia Department of Health guidance** contained in”Interim Guidance for Daily COVID-19 Screening of Employees” and “Interim Guidance for Daily COVID-19 Screening of Patrons” upon arrival for both staff and individuals being supported:

<https://www.vdh.virginia.gov/content/uploads/sites/182/2020/06/Employee-Screening.pdf>

<https://www.vdh.virginia.gov/content/uploads/sites/182/2020/06/Visitor-Screening.pdf>

Another resource is “Should we be screening employees for COVID-19 symptoms (such as temperature checks)? What is the best way to do that?” at the following link:

<https://www.cdc.gov/coronavirus/2019-ncov/community/general-business-faq.html#Reducing-the-Spread-of-COVID-19-in-Workplaces>

* **Training for DSPs to recognize symptoms** in themselves and the individuals being supported, *since not all people with COVID-19 will present with a temperature*.

<https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>

* **Safety factors when planning activities in the community**:
* Cleaning protocols at community sites, including shared spaces such as restrooms
* Ability to maintain physical distance of at least 6 feet between persons not living in the same household
* Providing a safe place for meals to be eaten, if applicable
* Training offered to the individual and DSP in safety requirements (such as for volunteer sites, gyms, etc.);
* Provision of outdoor or indoor services, depending on ventilation concerns
* Potential for frequent contact with others
* High touch activities (e.g., cleaning and disinfection of surfaces, use of appropriate cleaning and disinfection products, risk to individuals)
* Whether the individual’s participation in the environment may pose a risk to others due to his inability to properly follow precautions
* Access to PPE.
1. **Individual Considerations/Assessment**

For each individual to be supported, the provider and/or Support Coordinator are encouraged to consider and document the following prior to the individual’s return.

**What is the individual’s and family members’, as appropriate, level of interest and concerns with restarting participating in activities in the community?**

This may be assessed by asking the individual/family member, as appropriate:

* their thoughts about returning to activities in the community;
* what (if anything) they are worried about and addressing concerns to the extent possible;
* what activities they would like to start doing or places to which they would like to start going;
* which activities are the most important to them.

This information may be used to determine the timing of the individual’s return and the feasibility of providing him/her with the desired supports/activities.

**What is the risk to the individual? [There is value in also considering age and medical conditions related risk factors regarding DSPs in addition to considering if any DSPs work in other locations where risk of coronavirus is high.]**

**Older adults and people who have severe underlying medical conditions** like heart or lung disease or diabetes seem to be at higher risk for developing more serious complications from COVID-19 illness.

<https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fneed-extra-precautions%2Fgroups-at-higher-risk.html>

While maintaining confidentiality, providers and/or Support Coordinators are encouraged to note any underlying medical conditions and determine if the individual is:

[ ]  High-Risk Health Status;

[ ]  Not High-Risk Health Status.

Those who are **high risk** may not be good candidates for immediate return to group activities.

Another factor to consider/document for those who are at a higher risk for serious illness is the impact on the individual’s mental health when participating/not participating in day support services.

**What is the individual’s ability to follow safety precautions?**

Providers and/or Support Coordinators are encouraged to discuss with individuals and their family members, as appropriate, the individual’s likelihood of complying with CDC guidance regarding:

* Wearing face coverings properly: how (covering both nose and mouth) and when to wear, as well as the safe way to put on and take off (avoiding touching the outside of the face covering)
* Handwashing
* Physical distancing (to include avoiding direct physical contact)
* Wearing gloves (if needed)
* Limiting touching of surfaces

<https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-disabilities.html>

Those who will have difficulties complying with CDC guidelines may not be good candidates for immediate return to group activities

**Will an individual’s return to day support potentially compromise a high risk individual in that person’s home? [There is value in also considering risk to household members regarding DSPs.]**

See the following link for considerations regarding individuals’ family members or roommates who are not participating in day support activities.

<https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fneed-extra-precautions%2Fgroups-at-higher-risk.html>

It may be wise for the provider and/or Support Coordinator to discuss and document the individual’s, family members’, or roommates’ (and *their* family members’/guardians’, as applicable) understanding of the risks involved with the individual returning to community activities.

Finally, it may be advantageous for providers and/or Support Coordinators to reach out to individuals’ families or residential providers to discuss measures individuals should take upon returning home after a day at the center or out in the community in order to decrease the risk of exposure to other members of the household (e.g., washing hands, washing face covering, changing clothes, showering).

Much more information is available through the CDC’s overarching COVID-19 website:

<https://www.cdc.gov/coronavirus/2019-ncov/your-health/index.html>