

STAGE ONE RE-ENTRY PLAN

Equity

- Staff will be trained on conversation styles and techniques that ensure that all families feel empowered to advocate for their children.
- Race and ethnicity data for children and families receiving in-person services will be gathered from current information in the DMS and paper files. Data will be entered into the service delivery spreadsheet and analyzed on a monthly basis to ensure ethnicity percentages for limited in-person services are comparable to ethnic makeup of current caseload.

Staff training

- All staff will be provided a written copy of the <u>COVID-19 Exposure Control</u>, <u>Mitigation</u>, and <u>Recovery Plan</u>.
- Training of the <u>COVID-19 Exposure Control</u>, <u>Mitigation</u>, and <u>Recovery Plan</u> will occur weekly during staff meetings.
- Record and procedural reviews will occur by site COVID-19 supervisors on a daily basis.

Communication with families

- Primary Service Providers previously established for each child/family will be responsible for distribution of information to families.
- Written communication from ESIT will continue to be distributed via email or regular mail as preferred by the family.
- Those families receiving limited in-person services will be notified of expectations and screening procedures when scheduling sessions by primary service providers.

Infection prevention

- When indoors at the clinic,
 - <u>COVID-19 Exposure Control, Mitigation, and Recovery Plan</u> will be followed for child/families attending clinic-based sessions to mitigate risk of infection. This attached plan details screening procedures, PPE protocols, and disinfecting procedures.
 - Individual clinic rooms will be used. Rooms allow for 6 foot physical distance with isolation from other providers and individuals in the clinic.
 - \circ $\;$ Number of providers in the clinic at a single time will be limited to 4.
- When outdoors, providers will:
 - Take temperature prior to session and email results to site COVID-19 supervisor. (Supervisor will add to employee's personal health tracking sheet.)
 - Wash or sanitize hands prior to session.
 - Wear a mask at all times.
 - Conduct "patient screening procedures" outlined in the <u>COVID-19 Exposure Control</u>, <u>Mitigation, and Recovery Plan</u>.
 - Provider will maintain 6 foot physical distance.
 - \circ $\;$ Wash or sanitize hands at the conclusion of the session.

• Follow sanitizing procedures of objects touched following the session.

Environmental controls

- Single adult family member will be allowed to accompany child to the session (with the exception of families requiring interpreter services).
- Primary service provider model will be continued with all possible services provided by a single consistent provider. Continued collaboration and teaming will occur during virtual staff meetings.
- Sessions will be conducted outside whenever possible.

This plan has been developed with consultation from the **Sector Sector**, the Washington State Department of Health, Washington State Department of Labor and Industries, and the Centers for Disease Control and Prevention. It was approved by our president and board of directors on 6/26/2020.

COVID-19 Exposure Control, Mitigation, and Recovery Plan

Sick employees must stay home:

- Employees who have fever, cough, shortness of breath, fatigue, muscle aches or new loss of taste or smell should notify a site COVID-19 supervisor and stay home.
- Sick employees should follow CDC-recommended steps. Employees should not return to work until the criteria to discontinue home isolation are met, in consultation with healthcare providers.
- Employees who are well but who have a sick family member at home with COVID-19 should notify site-COVID-19 supervisor and follow CDC recommended precautions.

Screening of Employees Upon Arrival of work day

- Take temperature when entering
- Record on your personal tracking sheet provided
- If temperature is above 100.4 degrees, go home and follow CDC recommended steps.
- Wash hands upon arrival

Employee Practices

- Wear a mask at all times when in common spaces.
- Wash hands often with soap and water for at least 20 seconds or use hand sanitizer with at least 60% alcohol if soap and water are not available. If hands are visibly dirty, use soap and water over hand sanitizer. Key times to clean hands include:
 - Before and after work shifts
 - Before and after work breaks
 - After blowing their nose, coughing, or sneezing
 - After using the restroom
 - Before eating or preparing food
 - After putting on, touching, or removing cloth face coverings
 - After every client session
- Avoid touching eyes, nose, and mouth with unwashed hands.
- Cover mouth and nose with a tissue when you cough or sneeze, or use the inside of their elbow. Throw used tissues into no-touch trash cans and immediately wash hands with soap and water for at least 20 seconds. If soap and water are not available, use hand sanitizer containing at least 60% alcohol. Learn more about coughing and sneezing etiquette on the CDC website.
- Practice routine cleaning and disinfection of frequently touched objects and surfaces such as workstations, keyboards, telephones, handrails, and doorknobs.
- Avoid using other employees' phones, desks, offices, or other work tools and equipment, when possible. Clean and disinfect them before and after use.
- Practice social distancing by avoiding large gatherings and maintaining distance (at least 6 feet) from others when possible.

Screen Patients Upon Arrival

Persons who have a fever of 100.40 (38.00C) or above or other signs of illness should not be admitted to the facility. Encourage parents to be on the alert for signs of illness in their children and to keep them home when they are sick.

- Upon patient arrival, wash your hands and put on a facemask and a single pair of disposable gloves.
- Ask patient or caregiver if anyone in the family has signs of illness which could include flushed cheeks, rapid breathing or difficulty breathing (without recent physical activity), fatigue, or extreme fussiness.
- Make a visual inspection of the patient for signs of illness, which could include flushed cheeks, rapid breathing or difficulty breathing (without recent physical activity), fatigue, or extreme fussiness, and confirm that the patient is not experiencing coughing or shortness of breath.
- Take the patient's temperature as well as the accompanying adult, if they are entering the clinic.
- Note temperatures in the subjective portion of the daily note.
- Sanitize thermometer with alcohol wipe
- After each screening, remove and dispose of gloves, and wash hands for at least 20 seconds.
- Have patient wash hands for at least 20 seconds or use hand sanitizer with at least 60% alcohol if soap and water are not available.

Clean and Disinfect

Intensify cleaning and disinfection of therapy rooms:

- After client leaves treatment area, put on a single pair of disposable gloves. Use diluted bleach spray to clean objects/surfaces touched during the session.
- If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection.
- All cleaning materials should be kept secure and out of reach of children.
- Cleaning products should not be used near children, and staff should ensure that there is adequate ventilation when using these products to prevent children from inhaling toxic fumes.

Clean and Sanitize Toys

- Toys that cannot be cleaned and sanitized should not be used.
- Set aside toys that have been in contact with a patient and/or clinician to be cleaned. Place in a container marked for "used toys." Washing with soapy water is the ideal method for cleaning. Try to have enough toys so that the toys can be rotated through cleanings.
- Toys that children have placed in their mouths or that are otherwise contaminated by body secretions or excretions should be set aside until they are cleaned by hand by a person wearing gloves. Place in a container marked for "soiled toys." Clean with water and

detergent, rinse, sanitize with a diluted bleach solution, rinse again, and air-dry. Be mindful of items more likely to be placed in a child's mouth, like play food, dishes, and utensils.

• Children's books, like other paper-based materials such as mail or envelopes, are not considered a high risk for transmission and do not need additional cleaning or disinfection procedures.

Daily sanitizing procedures

- After the last session of the day, the frequently touched surfaces in the clinic will be sanitized using a CDC approved disinfectant (Neutral 64).
- Put on a facemask and a single pair of disposable gloves. Spray surfaces with disinfectant. Let sit for 10 minutes. Remove excess liquid.

