


## Attestation of Certified Day Program Operations in Accordance with OPWDD Interim Reopening of Day Services Guidance

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|---|--|---|--|
| <b>Agency Legal Name</b>                            |  |   |  |
| <b>Agency Address</b>                               |  |   |  |
| <b>Day Program Type</b>                             | <input type="checkbox"/> <b>Certified Site</b><br><br><input type="checkbox"/> <b>Community, without Walls</b> | <input type="checkbox"/> <b>Day Habilitation</b><br><br><input type="checkbox"/> <b>Day Treatment</b><br><br><input type="checkbox"/> <b>Sheltered Workshop</b> | <input type="checkbox"/> <b>Prevocational</b><br><br><input type="checkbox"/> <b>Respite</b> |
| <b>Operating Certificate Number</b>                 |  |   |  |
| <b>Site Address</b><br>(certified sites only)       |  |   |  |
| <b>Certified Capacity</b><br>(certified sites only) |  |   |  |
| <b>Primary Contact Name</b>                         |  |   |  |
| <b>Primary Contact Email and phone</b>              |  |   |  |

The submission of this signed attestation and safety plan for the above program to [quality@opwdd.ny.gov](mailto:quality@opwdd.ny.gov) advises OPWDD of the agency's plan to resume operations at the day program in accordance with requirements as outlined in the guidance document *Interim Guidance Regarding the Reopening of Day Services Certified by the Office for People With Developmental Disabilities*.

The agency must attest to its ability to adhere to all requirements in the guidance as appropriate to the program, and to ensure ongoing compliance with the requirements upon opening.

**Any attestation is a filing of a written document with a government agency and is enforceable against the signatory.**

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Signature of Agency CEO

Date

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Printed Name of Agency CEO

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

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|---|--|--|
| <b>Agency Legal Name</b>                            | Services for the UnderServed (SUS Inc)   |  |
| <b>Agency Address</b>                               | 463 7 <sup>th</sup> Ave 17 <sup>th</sup> Floor, New York, NY 10016   |  |
| <b>Day Program Type</b>                             | <input checked="" type="checkbox"/> <b>Certified Site</b><br><input type="checkbox"/> <b>Community, without Walls</b>                | <input checked="" type="checkbox"/> <b>Day Habilitation</b> <input type="checkbox"/> <b>Prevocational</b><br><input type="checkbox"/> <b>Day Treatment</b> <input type="checkbox"/> <b>Respite</b><br><input type="checkbox"/> <b>Sheltered Workshop</b> |
| <b>Operating Certificate Number</b>                 | 75590449   |  |
| <b>Site Address</b><br>(certified sites only)       | 1029 East 163 <sup>rd</sup> Second Floor Bronx, NY 10459   |  |
| <b>Certified Capacity</b><br>(certified sites only) | 28   |  |
| <b>Primary Contact Name</b>                         | Freddie Bratcher and/or Jajaida Gonzalez   |  |
| <b>Primary Contact Email and phone</b>              | 718-617-7492<br><a href="mailto:fbratcher@sus.org">fbratcher@sus.org</a> or <a href="mailto:jgonzalez@sus.org">jgonzalez@sus.org</a> |  |

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.

## **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:**

Limited number of visitors – only essential visitors welcomed. All others will not have access to program space. Signage posted in all entrance/exits – provide written notification to all parents/advocates/Care Managers etc., of policy to decrease number of people in the common space and program buildings.

COVID-19 posting placed in common space, HR Bulletin board, Staff Bulletin board and at all exits/entrances to program space.

### **Signage posting include the following guidance:**

- Social distancing requirements
- Use of mask or cloth face-covering requirements.
- Proper storage, usage and disposal of PPE.
- Symptom monitoring and COVID-19 exposure reporting requirements.
- Proper hand washing and appropriate use of hand sanitizer.
- Visitor Policy

Prohibit any entry of transportation personnel into the program space and instead, walk people receiving services to family cars, access-a-ride and other transportation vehicles.

### **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 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.

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

A tiered approach to opening up and reengaging in day programming:

- a. People living at home with families
- b. People living in SUS Inc. residences
- c. People living in other organizations residences
- d. New admissions- new graduates

We hope this will allow for the program to be measured in welcoming back people supported and still allow for flexibility based on the COVID-19 State Infection rate with in the State.

14 Calendar days prior to re-opening, staff and people supported should track temperature and symptoms – on the Pre-Screening Health COVID-19 form. Submission of completed form to Program Director is necessary prior to the start of 1st day for people supported.

Identified high risk population – medical clearance to engage in community activities and verification of safe mask usage- no pre-existing medical conditions preventing mask usage is required prior to the start of 1st day for people supported.

All people supported, staff and essential visitors must undergo a daily health check and may only

participate in/work at/visit the day program if all of the following circumstances are met:

- The person is not suspected or confirmed to have COVID-19, and not under quarantine or isolation.
- No member of the person's household is under quarantine or isolation for COVID-19.
- The person has not been exposed to COVID-19 in the past 14 days.
- The person has not traveled to a state or country under travel advisory due to COVID spread in the past 14 days.
- The person passes a health screen and temperature check prior entering the program and is free of fever of 100F or greater and symptoms of COVID-19. The screening will be conducted by a designated staff and overseen by a supervisory level staff, and the results will be documented in a log.
- Persons who do not pass the health screen or present with a fever of 100F or greater, will not be permitted to enter the program area and will be asked to remain in an identified contained area as management coordinates departure and makes all necessary notifications.
- The person will be advised to contact their health care provider and provide medical documentation prior to return.
- Person supported must be tested for COVID-19 and isolated for 14 calendar days prior to return to program. Results of testing and additional Pre-Screening Health form must be completed and submitted prior to return.

Upon arrival to the day program, the person washes their hands immediately, and adheres to all PPE, social distancing and hygiene guidelines set forth in this document throughout the day.

Any person who develops a fever or other symptoms over the course of the day will be immediately separated from others and sent home as soon as possible (see Monitoring for Signs and Symptoms/ Isolation Protocols). They will be required to remain home at least 14 days, provide COVID-19 testing results, complete Pre-Screening health form and be fever free for 72 hours without the use of fever-reducing medication.

Nonessential visitors are not permitted until further notice. All visitors must be approved by administration, and must wear a mask while on the premises.

### **Monitoring for Signs and Symptoms / Isolation Protocols:**

Although all people supported and staff will be screened upon entry to the program, staff will be expected to self-monitor and monitor people supported throughout the day for the emergence of any signs and symptoms of COVID-19 and report to management (safety officer on duty) immediately.

According to the Center for Disease Control (CDC) people with COVID-19 have had a wide range of symptoms reported – ranging from mild symptoms to severe illness. Symptoms may appear 2-14 days after exposure to the virus.

People with these symptoms may have COVID-19:

- Fever or chills (agency protocol is fever of 100.0F or higher)
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

This list does not include all possible symptoms.

Any concerns must be brought to the attention of management (safety officer) immediately. Upon the report that a person (served or staff) has COVID-like symptoms management will immediately remove the individual from their cohort and accompany them to the isolation room. Any staff and person supported who may be in the isolation room must be removed prior to the symptomatic person being brought into the room (unless they are in the room to care for another COVID symptomatic person). All staff assisting the symptomatic person will wear a gown, gloves, and a face shield as well as a N95/KN95 rated face mask. Every effort will be made to have the symptomatic person served wear a surgical face mask unless doing so presents a greater risk to their health and safety.

Management staff will complete an assessment and determine the best course of action. If it is confirmed that there is COVID like symptoms, the person supported may not leave the isolation room until arrangements are made for them to be picked up from program.

Participants within the symptomatic individual's cohort will be restricted to their classroom. Arrangements must be made to have them return home as quickly as possible. SUS Nursing Department will be responsible to provide all effected individuals and their caregivers with instructions to contact their health care provider as well as written information about healthcare and testing related to COVID-19.

Access to all areas of the building where the symptomatic individual and their cohort have been will be restricted until they have all left the building. The program Director/Management will be responsible to ensure access is restricted until the areas can be disinfected. Program staff working within the cohort who assisted the symptomatic individual will be responsible to disinfect the spaces used by all the effected person. When possible, the areas should be allowed to sit undisturbed for 24 hours before disinfection to allow any air particles to settle. If this is not possible, staff should wait as long as possible before disinfection occurs. No one should enter the areas until disinfection occurs. Once the area has been disinfected, they will be made available for general use again. Effected people supported must follow the return to program guidance within this plan. Staff exposed to the symptomatic individual will follow agency protocols established for essential workers

Staff exhibiting signs and symptoms of COVID will be responsible to report their condition to their supervisor and leave the building immediately. Management should notify the Human Resources department which will follow up with the symptomatic staff. The Human Resources Department will be responsible to provide the staff with instructions to contact their health care provider as well as written information about healthcare and testing related to COVID-19. Program Director should contact the Director of Facilities to disinfect the affected areas. All suspected or confirmed cases of COVID will be reported to the agency Quality Assurance Department which will be responsible to make all required notifications to NYSDOH and OPWDD.

Staff will be provided with initial training on how to properly wear, dispose, and clean all face masks and coverings. Staff will be trained on how to properly clean, use, dispose and/or reusing and sanitizing the program space appropriately. Copies of in-services will be maintained at the program level at each site.

Handwashing Protocol has been developed and all staff will be trained on proper handwashing. Handwashing posting are currently located in each bathroom and proper supplies to ensure healthy hand hygiene are readily available.

- Trainings for staff on all changes made to insure social distancing
- Trainings on COVID symptoms, wearing PPE properly
- Trainings for supervisors on all new HR policies regarding COVID-19
- Training for staff on how to recognize signs that a person supported may not be feeling well

## **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:**

- Each Location will establish site specific capacity based on 6 feet social distancing in all directions from the person. Capacity is based on identified program space (Square Feet) and the necessary square footage to maintain 6 feet social distancing in all directions. Capacity per program site, is posted in the Program Directors Office. Program will operate at a 50% reduction based on the physical plant capacity rate.
- Based on the capacity per person space/program there will a seating in the space/program for that exact number in capacity. All extra seating and tables will be removed from space and placed in storage- for future use. Replace any fabric chairs or sofas with plastic, vinyl or any other surface that is easily cleaned hard surface.
- Clinical services by outside vendors will take place in a designated area and in-between session the clinician must clean and disinfect all hard surfaces- using approved EPA certified cleaners and disinfectants.
- Clinician must wear face covering with engaging with people receiving services and when escorting the person back to their assigned group. Clinician who fail to wear face covering or cannot will be unable to provide services and clinician’s employer should find alternative clinician to provide services.
- Floor signage/indicators will be placed on the floor to indicate proper chair/table placement in each space to ensure 6 feet social distancing in all directions.
- Person Centered Training will be provided for individuals supported to better understand need for distancing, flow of traffic and learning markers.
- People supported will engage in learning activities to learn more about social distancing and importance of social distancing due to COVID-19 as part of the daily review of Day Hab rules and schedules.
- Established cohorts and staff schedules will indicate assigned staff and staff assignments will remain static during the duration of the day. Staff and people supported assignments will be not be change throughout the day. Cohorts to remain together for the duration of the day.
- Day Program Directors/Management will be responsible to assign staff to work within one



cohort. At the discretion of the program management staff may be transferred between cohorts to ensure safe staffing ratios. Staff should limit their interaction with other staff outside their cohort and ensure social distancing between staff from other cohorts (e.g. breaks within shared spaces). Staff providing transportation or assisting with arrivals and departures of participants should be assigned within their cohort as much as possible. Program management staff will be required to work between cohorts to provide proper supervision and delivery of activities. Day program staff are essential workers. Agency protocols have been established for essential workers to ensure the health and safety of the employees and program participants when a suspected or actual COVID exposure occurs. Questions regarding this matter should be directed to Human Resources.

### 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:**

- Optimize floor plans to insure proper set up for social distancing- set up furniture and other working surface to only accommodate the approved group size, no extra furniture or seating areas.
- Programs will minimize group sizes and movement between groups.
- Groupings shall not exceed 10 totals (including staff) and interactions between groups are prohibited.
- Staff shall be assigned to and remain with the group. (no floating staff)
- Programs shall ensure that the spacing of groups within the facility allows for 10 feet of

separation between groups at all times while people supported are in attendance.

- Groups shall include the same group of people receiving services each day, to the greatest extent possible, and also to the greatest extent possible, the same staff shall be assigned to care for each group daily.
- Groups shall congregate not less than 10 ft. in all directions from other groups or be separated by walls or other physical partitions. Combining or mixing groups shall not be permitted.
- Close person to person contact (hugging, high fives, fists bumps, games involving touching or tagging) shall be strictly limited and discouraged.
- People receiving services cannot share personal items, such as hats, tee shirts, lunch bags and food for example.
- Sharing of supplies, manipulatives, task items and other items must be strictly limited.
- Each group will have a set of art and other supplies to preclude the need for sharing items with other groups.
- People receiving services belongings shall be kept separate in individual storage bins/cubbies/lockers and sent home each day – any items left behind will be discarded.
- Groups are encouraged to use all open space areas in the outside- in fresh air, whenever 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:**

Program hours will be staggered with session arrival and departure times occurring from 9:00 am to 2:00PM and 10:00 am to 3:00pm. Staggering times in this manner will reduce congestion during entrance and exit. As well as allow additional time for needed health screenings. Each programs capacity will be decreased to ensure that each person in the building can have 36 square feet to ensure social distancing.

Each group will have a box of supplies for their person use and will not be shared. Each group will have a disinfectant wipe for group usage. All items will be cleaned as part of our cleaning and disinfecting process. (see cleaning protocol)

There will be no large group recreational outings at this time to decrease possible COVID-19 exposure and decrease added risk of travel in co-mingled travel options. All community opportunities will be within walking distance of the program location as to minimize travel in vans/buses and/or limited to no more than 90 minutes travel time to location and back from location via vans/buses/mass transit.

People supported while out in the community will be wearing mask as will staff. Staff will ensure that the group remains together and will adhere to social distancing rules when they are in indoor closed environments.

Volunteer locations that are in designated high-risk population for COVID-19 exposure, like nursing homes, senior centers etc., will be placed on pause until after the pandemic to avoid exposure to COVID-19.

Volunteer locations in enclosed areas or requiring transportation will continued to be placed on pause until the State of Emergency as declared by the Governor is over.

Volunteer locations that are located in local parks, open air space, don't require transportation or the environment is deemed "empty" as defined as only the SUS volunteers are in the physical space will resume and staff and people supported will engage in mask wearing and social distancing as necessary to reduce possible exposure to COVID-19.

**Community Inclusion/Recreational Trips:**

- All off-site activities that are within walking distance of the program building, as long as social distancing can be maintained throughout the entire experience are encourage and welcome.
- Recreational outings will be encouraged to increase outdoor exposure (within walking distance-only) as along as small group size is maintained

- Recreational outings will not be more than 10 people in group inclusive of staff
- One recreational outing will be planned and offered per day for people supported to decrease possible exposure and ensure effective tracking and tracing.

The following mealtime protocols are in place to adhere to social distancing and reduce risk:

- Meals and snacks will be consumed in assigned classroom space.
- The staff will follow all individual specific meal preparation and dietary guidelines.
- The sharing of food and beverages, is prohibited. All food items must be in their own individual containers. Handwashing before and after meals will occur with staff assistance.
- Disposable utensils and plates will be used and promptly discarded.
- The kitchen area, including high touch areas such as refrigerator and microwave handles, will be sanitized before and after meals.
- items such as modified dishes, cups and utensils will be sterilized on a daily basis through use of a dishwasher. Each item is to be clearly marked with the individuals name and contained in its own plastic bin.
- Staff will be encouraged to bring in lunch and use designated refrigerators as food delivery is discouraged during active program hours. Staff will be able to eat meals after active programming hours are over. Only disposable plates and sealed silverware are to be used and immediately disposed after use by user. Staff will be responsible for cleaning Microwave handles and other hard surface will be cleaned after their own personal use.

#### **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:**

#### **Use of Personal Protective Equipment (PPE):**

Staff are required to wear approved masks at all times while working with participants, while in common areas of the building, and when within 6 feet of another staff member. Masks must cover

the person's mouth and nose. If staff arrive to work without an appropriate face mask/covering, Program management or designee will provide at no cost a mask/face covering to staff. Disposable masks are to be changed daily or when soiled. Cloth masks are only to be allowed over a disposable mask and must be cleaned at least once a day or changed when soiled. Masks must never be shared between people. Gloves are used for the protection of the staff as well as the participant. Gloves are to be worn whenever staff are providing personal care to a person receiving support or cleaning and disinfecting. Gloves are for single use only and must be changed between each person supported. The same gloves should never be worn to clean and then assist a person with personal care. For their own protection, staff must use proper donning and doffing procedures. Clear face shields must be worn by staff in addition to their face masks when assisting a person supported when splashes or sprays are anticipated. Clear face shields will be provided to staff for their individual use, if they choose to do so. They must be labeled for that particular staff's use only. Clear face shield are reusable and must be cleaned after use. Gowns are only necessary when there is a risk of clothes being soiled by bodily fluids, or during isolation protocols (see Isolation Protocol section of this plan for more detail).

Non-essential visitors are not allowed in the program space currently. All essential visitors will be asked to wear face coverings and all necessary PPE based on their roles/needs of person served. If essential visitors arrive to the program space with an unacceptable face covering (as defined by the CDC) they will be provided with a mask for their use.

The agency is responsible to maintain an ample supply of PPE for all staff. Staff disposing PPE must place the items in a receptacle with a plastic bag and lid. People supported will be encouraged to wear a face mask that covers their mouth and nose as long as there is no health or safety risk to the person. It is anticipated that there will be people supported who will not tolerate wearing a mask for the entire program day. The program location will keep on site a 14-day supply of masks, gloves, gowns and face shields for program use. As a backup, supply, each region has access to agency wide back up PPE supplies to supplement the 14-day supply stored at the program location.

People supported in the program who are unable to wear a mask for at least two hours will be provided with alternative programming options directly in the community with the focus on gradually increasing their comfort level with wearing a mask for longer periods of times. We will work with families to help develop this skill prior to engaging in group site-based programming. People supported will be provided daily with lessons and activities to help them better understand the concept of social distancing and the importance of face covering.

## **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 agency will provide and maintain hand hygiene stations throughout each location where possible 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.
- Hand sanitizer should be available and utilized frequently throughout community-based services.

All staff and people supported should wash their hands frequently with soap and water, for at least 20 seconds upon arriving to any site-based programming, before handling food, before and after eating and drinking, smoking/vaping, using the bathroom, after touching shared objects or surfaces, after touching their eyes, nose or mouth, or after cleaning, sanitizing or disinfecting surfaces or when hands are visibly dirty. People supported will be encouraged and monitored upon arrival to ensure proper handwashing when arriving to program and when returning from community as necessary.

Use of alcohol-based hand sanitizers with at least 60% alcohol are also acceptable. Use of hand sanitizer by people supported should be supervised as needed by staff. Staff must support persons in practicing hand hygiene as necessary to comply with these requirements. Touchless hand sanitizing/Anti-bacterial dispensers/stations are readily available in each program space at the entrance.

Usage of approved EPA certified cleaners and disinfectants are readily available and accessible to staff for cleaning. Program Staff shall clean and disinfect surfaces and objects that are touched often. Disinfecting methods shall utilize Environmental Protection Agency, for use against COVID-19.

### **Cleaning Protocols:**

Cleaning and disinfecting activities will occur at various levels throughout the program day. Staff will follow a "clean-then-disinfect" procedure – items should be cleaned using typical means to remove any visible dirt and grime as needed before disinfectant is applied to the surface. This ensures maximum effectiveness of any disinfecting products applied. The agency will supply disinfecting products that are approved by the Environmental Protection Agency (EPA) as effective against the virus that causes COVID-19, this will include but not be limited to bottle sprayers to be used with disposal paper towels, disinfectant wipes, and area sprayers for larger surfaces.

Staff will adhere to the product dwell time required to kill the virus before wiping the surface. Staff will change gloves between cleaning activities. Gloves used for cleaning should never be used when providing personal care to people supported. Proper hand hygiene should be practiced after cleaning.

Cleaning activities can be grouped into three areas as follows:

**Routine and Ongoing:** Day program staff are responsible to maintain a clean and sanitized environment within their cohort classroom by disinfecting the following ongoing throughout the program day:

- All program material before being passed to another participant
- All program material when finished being used by the participants
- All travel wheelchairs before and after each person's use.
- All shared equipment before and after use, for example: lifts, beds, mats, etc.
- The toilet seat and bathroom grab bars and faucet handle before and after each person's use
- Chairs and table tops when individuals interchange places
- Table tops / eating area before and after eating
- Any item contaminated by bodily fluids
- In addition, any high touch surface areas used by staff and participants should be disinfecting throughout the day.

### **Cleaning and disinfection Technology hardware and gadgets (like Kindles, Wii controls, X-Box etc.)**

Staff should take note of use of computer keyboards, tablets and touch screens, phones, light switches, door knobs, appliance handles, etc. Sprays should not be used on electronic equipment.

People supported will be asked to wash hands after and prior to using computers and other technology-based items.

Each Program will create a "used" bin for the Kindles, Controls, iPad etc., once someone has used something or touched it, after he or she is finished, it should be put in the "used" bin for later disinfecting. (as these items need special attention to cleaning, as some cleaning agents can damage the equipment- at the end of the day an assigned staff will clean all items and place in the "clean" bin for use the following program day.

Staff are to use disinfecting wipes prior and after using all computers and keyboards. Staff will be encouraged to wear gloves but not required when using computers and printers.

Share phones in the program space will be cleaned after each use. By each phone there will be cleaning wipes for the user to clean the equipment after use. There will be no sharing of personal cellphones.

Day Program staff will be responsible on a daily basis to clean and disinfect their cohort classroom at the end of the day and document it on the Day Program Room Cleaning Checklist.

Day Program staff who bring their cohort into a common room within building for activities will be responsible to disinfect the room (i.e. chairs, tables, equipment) before and after use.



Management staff will be responsible to clean and disinfect all areas within their offices that are touched or used by a program staff and people supported or shared among staff. All day program staff are responsible to disinfect any common rooms before and after they use them.

### **Staff contracted through the agency Facilities Department will be responsible to:**

follow agency established procedures for cleaning throughout the day, including but not limited to cleaning and disinfecting all bathrooms twice a day, emptying trash bins within the program rooms twice a day, and wiping down high touch surface areas in the common areas of the building throughout the day.

**Rapid Response:** When a visitor to the building has been denied entrance past the lobby, or anyone has been sent out of the building because they are exhibiting signs or symptoms of COVID, a rapid response cleaning procedure must be followed.

All staff must be restricted from entering the contaminated area until it has been cleaned and disinfected. When the person sent home is a person supported by the program, the staff assigned to that cohort will be responsible to clean the area

When the individual sent home is a staff or visitor the Facilities Director must be notified and assign someone from within the facilities department to disinfect the affected areas.

**Daily Commercial Cleaning:** The agency contracts the services of a professional cleaning company to clean and disinfect our commercial properties on a daily basis after program operation hours. Cleaning protocols and disinfection logs are maintained by agency administration.

### **Elevator Usage**

People receiving services and staff should use designated stairs to enter and exit the building. If staff or person receiving services is unable to use the stairs no more than 2 people can ride the elevator and face covering are required.

At the entrance of each elevator there will be wipes to clean buttons and elevator handle (if applicable) and foot activate trash can to dispose of use wipes.

### **Ventilation and Filtration**

- All vents will have HEPA filters (MERV 13 Filters) and all windows (weather permitting) will remain open
- All window will have screens to decrease mosquito and other bugs from having access to building.
- All vents will be cleaned bi-weekly and HEPA filterers will be inspected for effectiveness.
- Free standing A/Cs filters will be cleaned once daily at the end of the day and replaced as

necessary due to usage.

- All HVAC ducts and AC systems will be inspected and cleaned by facilities monthly to ensure effectiveness and assess needs based on usage.

## **Bathrooms**

- No more than (2) people in single stall bathrooms.
- No more than (3) people in multi staff bathrooms – everyone other stall will be closed and only three alternating stalls shall remain accessible.
- All handles and bathroom stalls are to be cleaned prior to use by user and after use by user, using approved COVID-19 cleaning agent.
- User should wash hands prior to use and after use of the facilities
- Entire bathroom will be cleaned and disinfected prior to the start of the day and at the end of the day
- For programs that special equipment to assist people receiving services, staff will use full PPE equipment to assist the person. (gown, gloves, mask and approved face shield)
- All equipment will be cleaned prior to use and after use and all used gloves, paper towels and other disposable items after sanitizing and/or disinfecting will be tied in a trash bag and removed from the program space. (disposed in outside trash bins)

## **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 from the same facility will be transported together; preventing individuals or staff from other residences to be intermingled whenever possible;
- Reduce capacity on buses, vans, and other vehicles to 50% of total capacity;
- As possible, stagger arrival and departure times to reduce entry and exit density.
- To the extent possible, restrict close contact of individuals and staff 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. Ensure staff who cannot medically tolerate the use of a face covering are not assigned to transport individuals.
- To the extent they can medically tolerate one, support individuals to wear masks in vehicles.
- 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:**

Individuals traveling in the same vehicle to and from the day program will be either:

- living within the same residence or from within the same cohort at day program.
- Individuals who reside together in the same home may be transported together to day program in the same vehicle without a vehicle capacity reduction.

When individuals being transported together are within the same cohort but are from different residences vehicle occupancy will be reduced to 50% of capacity to maximize social distancing and reduce COVID-19 transmission risks; While in the vehicle, participants should be encouraged to wear a face mask as long as there is no risk to their health and safety.

Staff must wear a face mask while transporting individuals. After each trip is completed, the driver will be responsible to disinfect the interior of the vehicle before additional individuals are transported. All seats, steering wheel, doors, handles, buttons and equipment in vans is to be disinfected after every use by staff members. The driver or a designee will be responsible for disinfecting the vehicle after each trip.

All vehicles will run at reduced capacity to ensure social distancing. If person supported and/or staff is unable to wear a mask the vehicle capacity will be reduced to 10% capacity. (ie., 12 passenger van transport 6 people in total, including driver and staff if everyone is wearing a mask. If masks are not worn 12 passenger van can only transport 3 people including driver and staff)

As weather permits, windows will be opened to allow for airflow as long as doing so will not create a safety hazard.

#### **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:**

SUS Day Habilitation is committed to doing our part in the tracing and tracking of COVID-19 cases by doing the following:

The Corporate Compliance or designee will notify the local health department and OPWDD immediately upon being informed of any positive COVID-19 test result by an individual or staff.

In the case of a staff or visitor testing positive, we will cooperate with the local health department to trace all contacts in the workplace. We will notify the health department of all staff, individuals and visitors who entered the facility dating back to 48 hours before the staff began experiencing COVID-19 symptoms or tested positive, whichever is earlier, but maintain confidentiality as required by federal

and state law and regulations.

Staff who are alerted that they have come into close or proximate contact with a person with COVID-19, and have been alerted via tracing, tracking or other mechanism, are required to self-report to their manager and Human Resources at the time of alert and shall follow all required protocols as if they had been exposed at work.

#### **ADDITIONAL SAFETY PLAN MEASURES:**

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

**Communication with Families:** Day Program staff will contact the person the person supported lives with to extend an invitation to return to program at least 14 days prior to the person's scheduled return date. If the person lives within a certified residential setting, Day Staff will coordinate communication to the families through the residential provider. A copy of this reopening plan will be made available to anyone who requests a copy and will posted on the SUS Inc. web page. Questions or concerns about this plan can be directed to the Vice President of Day Services, Jajaida Gonzalez and Chief Program Officer, Monica Santos.

If a participant exhibits signs or symptoms of COVID-like illness or is exposed to someone exhibiting signs or symptoms of COVID-like illness, Day Program staff will directly inform all families (regardless of the person's supported residential status) of the situation, ensuring to respect the privacy of individuals as required by HIPAA regulations. If there is a confirmed case of COVID within the program, similar notification will be made to all families of individuals exposed.