



ColumbiaCare Services, Inc.

# CORONAVIRUS ALERT

April 29, 2020

**ColumbiaCare COVID-19 Plan**  
**Hourglass Community Crisis Center**

## General Information about COVID-19

<https://www.cdc.gov/coronavirus/2019-nCoV/index.html>

Coronaviruses are a group of viruses that can cause a range of symptoms. Some usually cause mild illness. Some, like this one, can also cause more severe symptoms.

The following symptoms may appear 2-14 days after exposure.

- Cough
- Shortness of breath

*Or at least two of these symptoms:*

- Fever
- Chills
- Repeated shaking with chills
- Muscle pain
- Headache
- Sore throat
- New loss of taste or smell

\*Please find the CDC Coronavirus Self-Checker: <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.htm>

## Prevention

1. Take care of your health, be proactive.
2. Practice good hygiene.
  - a. Stop handshaking – use other non-contact methods of greeting.
  - b. As possible, maintain a 6-ft distance barrier between yourself and others
  - c. Ensure hand hygiene supplies are readily available in the building
  - d. Clean hands regularly and often:
    - i. At the door. Also, post reminders at entry way, kitchen/breakrooms and bathrooms for staff, clients and visitors. Consider scheduling regular hand

- washing prompts.
  - ii. Wash hands with soap and water for at least 20 seconds, especially after blowing your nose, coughing, or sneezing; going to the bathroom; and before eating or preparing food, and when leaving and entering the program.
  - iii. If soap and water are not readily available, use an alcohol-based hand sanitizer with at least 60+% alcohol, covering all surfaces of your hands and rubbing them together until they feel dry. Soap and water are the best option if hands are visibly dirty.
  - e. Avoid touching your eyes, nose, and mouth with unwashed hands.
  - f. Create habits and reminders to avoid touching faces, and cover coughs and sneezes with your sleeve, or tissues that are then thrown away.
  - g. Increase fresh air and circulation/ventilation, as appropriate (ex. Opening windows).
3. Identify clients who require in-person contact, develop protocol to minimize employee exposure.
  4. Replace all in-person services with services provided electronically (by video or phone) WITH THE EXCEPTION of services identified by the Program Director that are deemed incapable of being delivered remotely.
  5. Give emotional support to clients electronically (by video or over the phone) and encourage clients to maintain their health during this time of less personal contact.
  6. Assist clients to gather resources they would need to stay at home for up to 2 weeks if they become sick or need to minimize contact with others (such as medication refills or groceries), as appropriate by position.
  7. Use COVID-19 Screening Tool for electronic (by video or by phone) and in-person assessments. If client is experiencing COVID-19 symptoms, inquire if client has contacted their healthcare professional. If they have not, encourage and support them in doing so.
  8. Proactively develop backup systems to ensure ongoing support for clients.
  9. Modify group meetings.
    - a. Transition meetings (eg. Staff meetings) to electronic formats (videoconferencing or telephone).
    - b. If not scheduled to be at work, participate remotely.
    - c. When not possible, hold in-person meetings in open, well-ventilated spaces, following social distancing protocols.
      - i. Use separate electronic devices (smartphones) for access to online meetings within one facility if you cannot maintain social distancing requirement of 6 ft or more.
  10. Eliminate unnecessary travel.
  11. Handle food carefully.
    - a. Do not share food. (You should not share dishes, drinking glasses, cups, eating utensils, etc.)
    - b. Do not eat out or utilize take out or meal delivery where food/beverages are handled or prepared outside of the program.
    - c. Eliminate situations whereby staff and/or clients could expose other to through cross-contamination of food (chip bags, double-dipping). Use individual packaging as possible.

- d. If client brings in food from the community, staff should observe and help client utilize social distancing, practice proper hygiene and other safeguards to avoid possible contamination.
12. Clean all “high-touch” surfaces frequently, at least twice daily.
    - a. High touch surfaces include counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets, and bedside tables. Also, clean any surfaces that may have blood, stool, or body fluids on them. Use a CCS approved disinfectant, according to the label instructions. Labels contain instructions for safe and effective use of the cleaning product including precautions you should take when applying the product, such as wearing gloves and making sure you have good ventilation during use of the product. *\*(For your convenience, we have listed the appropriate Item #'s from Staples Advantage, as follows: 1 Gallon – [Item # 102109](#), 4 Gallons – [Item #100821](#), Silk Screen Bottle (1 Quart) - [Item # 24392551](#). The silk screen bottle reads Coastwide #66 instead of Staples # 66; however, it has been confirmed that the product is exactly the same, they are in the middle of re- branding. Secondary labels can be printed from the SDS website.*
    - b. When using a vehicle, clean with sanitizer each time you enter and exit paying close attention to handle and seat belts or any other area touched frequently. Clean and sanitize gas cards and credit cards.
  13. Program staff should self-screen according to Symptom Assessment & Care section below prior to coming to on-site work spaces.
  14. Restrict/Limit Visitors. Effective immediately take the following actions:
    - a. Restrict and limit entry of 100% of individuals **in your program** using the CCS-approved COVID-19 Screening Tool before entering the **Outpatient Clinics and VRC**.
      - i. Complete and maintain all COVID-19 screenings forms.
    - b. Visiting should be limited to essential individuals only, defined as:
      - i. Adult protective services staff
      - ii. Advocacy agency staff for the purpose of investigating allegations of abuse and neglect
      - iii. Emergency response including EMS, police and fire
      - iv. Individuals who are required for direct assistance to complete the client's appointment (due to physical disability, cognitive impairment, language barrier), and then only one.
      - v. Licensing/survey staff
      - vi. Office of Training, Investigations, and Safety (OTIS) staff or delegates
      - vii. Outside medical and behavioral health personnel
      - viii. Vendors who must enter the facility in order to deliver medical supplies or other essential items.
    - c. Entrances and Signage
      - i. Limit points of entry for visitors and post CCS-approved signage that clearly states the visitor policy as described above
        1. Instruct all essential visitors to:
          - Use good hygiene. They should wash their hands with soap and water for 20 seconds, or clean their hands with alcohol-based hand sanitizer
          - Avoid touching their face
          - Use good respiratory etiquette by covering their coughs and sneezes with the crook of their elbow, or use a tissue and dispose of it properly.
15. Per CDC recommendations, to help prevent the transmission of illness in people without symptoms, staff should wear a cloth face covering in public and in work

settings.

- a. Cloth face coverings can be fashioned from household items or made at home from common materials and used as an additional, voluntary public health measure.

16. Per CDC recommendations, practice social distancing with animals: Do not let service animals or program pets interact with people or other animals outside the household/program; Keep cats indoors when possible to prevent them from interacting with other animals or people; Walk dogs on a leash maintaining at least 6 feet from other people and animals; and Avoid dog parks or public places where a large number of people and dogs gather.

## **Symptom Assessment & Care**

### **Employees**

1. Stay home if:
  - a. You are experiencing symptoms of COVID-19
  - b. You have a family member in your home experiencing COVID-19 symptoms
  - c. You have been exposed to COVID-19 through Close Contact within 7 days of their symptom onset. The CDC considers Close Contact as:
    - i. Living in the same household as a sick person with COVID-19
    - ii. Caring for a sick person with COVID-19
    - iii. Being within 6 feet of a sick person with COVID-19 for about 10 minutes, OR
    - iv. Being in direct contact with secretions from a sick person with COVID-19 (e.g., being coughed on, kissing, sharing utensils, etc.).
2. Call your healthcare provider right away.
3. Immediately inform Supervisor of healthcare provider recommendations and/or positive test results.
4. Notify HR and provide a copy of your healthcare provider's recommendation via fax or email.

### **If a client is experiencing symptoms of COVID-19 (see description above).**

1. Do not provide in-person services.
2. Notify Supervisor of client symptoms immediately.
3. Electronically (by video or telephone) assist the client in connecting with their healthcare provider immediately.
4. Electronically (by video or telephone) assist client to follow through with healthcare recommendations.
5. Additional information can be found on the OHA COVID-19 Website:  
<https://www.oregon.gov/oha/PH/DISEASES/CONDITIONS/DISEASESAZ/Pages/emerging-respiratory-infections.aspx>

### **If a client has confirmed positive results of COVID-19, or the healthcare provider has recommended isolation or quarantine:**

1. Immediately report the information to the Program Manager.

*\*Please take a moment to review and utilize the body fluids section of the **Bloodborne pathogens program**. In addition, we also feel it is important to protect our employees from exposure to hazardous chemicals used for cleaning and disinfecting. If you are unfamiliar with a product please review the SDS sheet before using it and follow all manufactures instructions for proper use.*

## **Workplace Emotional Support**

1. Be aware of team stressors and risks for emotional distress. Stressors/risks may include but not be limited to:
  - a. Sense of isolation
  - b. Lack of clear communication between team members
  - c. Individual/family/colleague/client health impact
  - d. Local community stressors
  - e. Financial stressors
  - f. Loss of social supports
  - g. Loss of self-care resources
  - h. Increased stress and demand from clients
  - i. Uncertainty of outcome
2. Stay connected and increase/improve communication within the team.
  - a. Develop a team approach for offering social support and fostering a sense of community.
  - b. Develop clear guidelines for all levels of management to deliver information and support.
    - i. Develop regular emotional/mental health check-in intervals and protocol for checking in on team member needs and concerns.
  - c. Create an environment that regularly honors team members who are supporting people during the COVID-19 pandemic.
    - i. Acknowledge the role the team plays in keeping clients and co-workers cared for and safe.
    - ii. Protect yourself and be supportive to others. Assisting others in their time of need can benefit both the person receiving support and the helper.
  - d. Observe for and ask/report when there is a concern about:
    - i. Team member safety (and make contact with those who may need support with obvious urgent basic needs).
    - ii. Team members with serious distress reactions.
  - e. Listen to team members
    - i. Encourage positive support between team members, your managers or other trusted persons for social support – your team may be having similar experiences to you.
    - ii. Share helpful information regularly.
    - iii. Provide clear and accurate information that helps the team perform their duties.
    - iv. Provide timely, regular updates to all team members (share why changes

- are being made and how to implement them)
- v. Find opportunities to amplify positive and hopeful stories. Celebrate successes and good news.
  - vi. Use meaningful ways to share messages.
    - A. Where possible, include forms of communication that do not rely solely on written information (in-person first as safety allows, video second as available, by telephone third, by email as needed for broader distribution or consistency or documentation of information).
3. Support team members to access helpful tools and reliable therapeutic resources:
- a. To help themselves regain control of what they can in their situation
  - b. To help team members address basic needs and access services
  - c. To help team members cope with problems
  - d. To remind team members to connect to loved ones and social support

Example Sites: <https://www.sanvello.com/coronavirus-anxiety-support/>  
<https://www.uclahealth.org/marc/default.cfm>

4. Practice team self-care activities in the workplace.
- a. Prompt, support and monitor work breaks
  - b. Allow for social support amongst team members, as possible.
  - c. Share examples of emotional support activities by sending them to the Wellness Team for review/approval and tracking: [wellness@columbiacare.org](mailto:wellness@columbiacare.org)
    - i. Reviewed sample emotional support activities will be available for staff access and filed here: Facilities>\_CCS>COVID-19 PROTOCOL-Adopted>EMOTIONAL WELLNESS TOOLS

**This protocol shall be followed and enforced by all members of management. Management staff are responsible for ensuring that employees comply with this protocol.**

**Employees who observe violations of this protocol shall report the violations to management or concerns can be reported to their Program Manager.**