

NY Forward Safety Plan

1. List common situations that may not allow for 6 ft. of distance between individuals. What measures will you implement to ensure the safety of your employees in such situations?

- Each day program has assessed the maximum amount of participants and required staff which ensures that at least six feet of physical distance is maintained among individuals and staff, unless safety of the core activity requires a shorter distance or an individual's treatment plan requires that closer contact be maintained with a staff member.
- The current plans do not exceed more than 50% occupancy.
- Extraneous equipment is being removed from all rooms to maximize program space. Physical barriers and protective shields are being utilized. Use of signage and floor markers denoting 6 feet of social distancing space will be used throughout the building.
- Each program is designing "clusters" of staff and individuals to be together on a daily basis to provide an environment that is as static as possible by having the same group of individuals work with the same staff whenever and wherever possible. Group size will be limited to no more than fifteen (15) individuals receiving services. The restriction on group size does not include employees/staff.
- It is not our intent to have programs with a staffing plan that requires employees to "float" between different rooms or groups of individuals, unless such rotation is critical to safely staff individuals due to unforeseen circumstances (e.g. staff absence).
- The use of program rooms and seating areas will be modified to allow for social distancing of at least six feet apart in all directions (i.e. 36 square feet). When distancing is not feasible between workspaces, the program will provide physical barriers, such as plastic shielding walls where they would not affect air flow, heating, cooling, or ventilation
- The use of tightly confined spaces (e.g. supply closets, equipment storage areas, kitchens, or restrooms) is not to exceed 50% occupancy of the maximum capacity of the space.
- Social distancing will be maintained in areas to prevent congregation in lobbies, hallways, and in elevator waiting areas and limit density in elevators.
- Additional measures will be implemented to prevent congregation in elevator waiting areas and limit density in elevators, such as enabling the use of stairs, when possible.
- Signage and distance markers to denote spaces of six feet will be visible in all commonly used areas and any areas in which lines are commonly formed or people may congregate.
- Social distancing will not always be possible when caring for our individuals with higher medical, behavioral or adaptive support needs. Their specific treatment plans

#1 Continued

may necessitate physical contact to ensure health and safety during activities of daily living (e.g. toileting, eating etc.), behavior intervention techniques (e.g. physical restraint)

or medical treatments (e.g. administration of daily medication or first aid etc.). Appropriate personal protective equipment and hygiene will be utilized.

- Programs will increase ventilation with outdoor air to the greatest extent possible (e.g. open program room and vehicle windows and prop open doors and/or open as frequently as possible), unless such air circulation poses a safety or health risk (e.g., allowing pollens in or exacerbating asthma symptoms) to individuals using the facility.
- For sport and athletic activities, stable groups of individuals will be kept together and separated from other groups and will focus on activities with little or no physical contact (e.g. walking or hiking) and which do not rely on shared equipment.

2. How you will manage engagement with customers and visitors on these requirements (as applicable)?

- Visitors will not be allowed. If any person, outside of the identified cluster, is given permission by the Program Director to enter the facility, the Health Assessment Screening, including temperature check will be completed. The visitor will have identified and limited access to a specific area. All CDC guidance will apply to any approved visitor, including face covering and social distancing.
- All deliveries are directed to the main entrance. Communication via intercom instructs all deliveries to be left in the vestibule. The Director of Physical Plant coordinates all vendors who need entrance to the building. All CDC guidance is enforced.

3. How you will manage industry-specific physical social distancing (e.g., shift changes, lunch breaks) (as applicable)?

- Each program is designing “clusters” of staff and individuals to be together on a daily basis to provide an environment that is as static as possible by having the same group of individuals work with the same staff whenever and wherever possible.
- It is not our intent to have programs with a staffing plan that requires employees to “float” between different rooms or groups of individuals, unless such rotation is critical to safely staff individuals due to unforeseen circumstances (e.g. staff absence).
- The use of tightly confined spaces (e.g. supply closets, equipment storage areas, kitchens, or restrooms) is not to exceed 50% occupancy of the maximum capacity of the space.
- Social distancing will be maintained in areas to prevent congregation in lobbies, hallways, and in elevator waiting areas and limit density in elevators.
- Additional measures will be implemented to prevent congregation in elevator waiting areas and limit density in elevators, such as enabling the use of stairs, when possible.
- The cafeteria will be open to prepare food. The individualized prepared food will be delivered to the individual’s classroom. The individuals will not be using the cafeteria for communal dining as social distancing cannot be maintained.
- Adequate space will be provided to staff for breaks and lunch to maintain 6ft of social distancing. Break and lunch times may need to be staggered to maintain social distancing.
- Shared food and beverages and buffet-style food is prohibited.

4. What quantity of face coverings – and any other PPE – will you need to procure to ensure that you always have a sufficient supply on hand for employees and visitors? How will you procure these supplies?

- The Agency has assessed our need for PPE's in both a COVID and a non-COVID environment. As a result of that assessment, the Agency is maintaining a three-month supply of necessary PPE's, which include KN95's, surgical masks, face shields, homemade masks, disposable isolation gowns and gloves. The Agency also has a minimum of a three-month supply of sanitizers and an adequate supply of touch less Thermoscan thermometers. At the current time, the Agency has enough N95's to handle a crisis in our non-COVID environment. The Agency is actively seeking to purchase additional N95's in the event of a future outbreak.

5. What policy will you implement to ensure that PPE is appropriately cleaned, stored, and/or discarded?

Masks

- To Put On A Mask (Donning):
 - Wash hands for at least 20 seconds.
 - Secure an ear loop over an ear then place other ear loop over the other ear.
 - Then grasp the nose piece and bring it over the bridge of the nose.
 - Mold the nose piece with fingertips from both hands to fit your nose.
 - Ensure that mask covers the nose, mouth and chin.
 - The mask should fit snugly on your face.
- To Take Off A Mask (Doffing):
 - Do not touch the surface.
 - Remove the mask from the ear loops.
 - Pull the mask forward off the face to remove the mask.
 - Masks must be cleaned or replaced after use and may not be shared.
 - Never leave used masks laying around.
 - Disposable masks must be immediately discarded after used.
 - Wash hands for at least 20 seconds.

Gloves

Gloves should be applied right before you are going to touch contaminated surfaces.

Gloves should be applied after you have gathered all the supplies you need.

Gloves are the last element of PPE to be applied.

- **To Put on Gloves:**

- Wash hands for at least 20 seconds.
- Select a size glove that fits your hand. The gloves should not be very tight as they might be more likely to rip and they shouldn't be loose and baggy, as this makes it more likely to get germs on the inside.
- Extend the hands into the gloves and extend the gloves to cover as much of the wrist as possible
- Make sure there are no rips or tears.
- Adjust for comfort and dexterity.

- **Removal of Gloves:**

- Use your non dominant hand (for most people the left hand) to pull the glove off your dominant hand away from your body.
- Holding the dirty glove in your non-dominant hand take one finger and slide the glove inside the wrist of the glove. Pull the glove off so that it is turning inside out as you pull it off.
- The inside out glove should become a bag holding the other dirty glove inside.
- Immediately discard gloves.
- Wash your hands for at least 20 seconds.

6. List common objects that are likely to be shared between employees. What measures will you implement to ensure the safety of your employees when using these objects?

- There will be a limited use of shared objects/equipment and these items will be sanitized after each use. Items that cannot be cleaned and sanitized will not be use (i.e. soft toys, cloth placemats, etc.) Individuals will not be permitted to bring personal items from home.
- All staff have their own computer and keyboard. The copier machines seem to be the most commonly shared piece of equipment. Disinfecting wipes will be next to each piece of shared equipment and staff are trained to utilize.
- See answer # 9 for further details.

7. Who will be responsible for maintaining a cleaning log? Where will the log be kept?

- Director of Physical Plant will be responsible for maintaining cleaning logs indicating the date, time, and scope of cleaning.
- Maintain an adequate stock of cleaning and EPA approved disinfecting agents.
- Conduct frequent cleaning and rigorous disinfection of high-risk areas (i.e. bathrooms, nursing stations) and high touch surfaces (i.e. shared equipment or supplies).
- 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. Use only EPA registered products for disinfecting non-porous surfaces.
- Cleaning products, sanitizers and disinfectants will be kept secure and out of reach of individuals who may misuse. Products are locked in a separate supply closet or cabinet, with only staff having key access. After sanitizing or disinfecting any gloves, paper towels or other disposable items used will be immediately discarded.
- The Quality Assurance Department will implement weekly checks to ensure regulatory compliance.

8. Where on the work location will you provide employees with access to the appropriate hand hygiene and/or sanitizing products and how will you promote good hand hygiene?

- Hand sanitizing hygiene stations are located at each entrance and throughout the facility.
- Hand sanitizers with at least 60% alcohol will be available throughout the facility.
- All staff and individuals will wash their hands frequently with soap and water, for at least 20 seconds upon arriving to any site-based program. Specifically, staff will wash their hands before handling food, before and after eating/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. Use of alcohol-based hand sanitizers with at least 60% alcohol are also acceptable. Use of hand sanitizer by individuals will be supervised as needed by staff.

9. What policies will you implement to ensure regular cleaning and disinfection of your worksite and any shared objects or materials, using products identified as effective against COVID-19?

- The new I-Wave system has been installed at the Center and the Oceanside site. This system filters out viruses, bacteria and germs as air passes through the HVAC system.
- Purchased the following disinfecting equipment:
 - Sterilizer UV floor unit used to clean flat services such as floors and mats.
 - E-Spray Electrostatic Sprayers to be used throughout the facility, especially in commonly used areas.

The Sterilizer Floor Unit will be used over large surfaces such as: Hallways, bathroom mats,

carpets, area rugs, etc.

The E-Sprayer Backpack will be used to coat frequently touched surfaces such as: Chairs, tables, desks, phones, light switches, door knobs, counter tops, microwaves, refrigerators, toilets, faucets and sinks, handles and rails, time clocks.

CleanSmart: Nursery and high chair cleaner

- Gentle , no rinse cleaner and disinfectant against common bacteria and can be used against the 2019 Novel Coronavirus, SARS-CoV-2, the cause of COVID-19.
- Sanitize hard, food contact surfaces let stand 60 seconds, wipe with paper towel for common bacteria.
- Disinfect hard surfaces let stand for 10 minutes, wipe with paper towel used against Human Coronavirus.

256 Century Q: No rinse, neutral pH, intermediate level disinfectant cleaner

- For common bacteria and can be used against the 2019 Novel Coronavirus, SARS-CoV-2, the cause of COVID-19.
- Disinfectant, non-food contact sanitizer used at, hospitals, nursing homes, schools. Use dilution in spray bottle, against the Human Coronavirus let stand for 1 minute, wipe dry. Suggested for daily usage.

Sanicloth Wipes: Germicidal disposable wipe

- High level disinfectant that can be used against the 2019 Novel Coronavirus, SARS-CoV2, the cause of COVID-19 effective against microorganisms in 2 minutes.
- For use in hospital and healthcare settings – details on label.
- Convenience item for use on desk, phones and personal areas.
- Treated surface must remain wet for 2 minutes, let air dry.

10. Which employee(s) will be in charge of maintaining a log of each person that enters the site (excluding customers and deliveries that are performed with appropriate PPE or through contactless means), and where will the log be kept?

- Daily documentation of all Health Assessment Screenings will be maintained by each department Director. The Director of each department is responsible to maintain a log of each person who enters into their department's designated area.

11. If a worker tests positive for COVID-19, which employee(s) will be responsible for notifying state and local health departments?

- The Director of each Department is responsible to maintain a log of every person, including staff and essential visitors, who may have close contact with other individuals at the facility. Log will contain contact information, such that all contacts may be identified, traced and notified in the event someone is diagnosed with COVID-19.
- The Agency will follow NYS DOH, SED and OPWDD guidance related to reporting

and contact tracing in the case of a positive or presumed positive COVID-19 individual or staff.

- The Quality Assurance Department has taken the lead and responsibility to contact all regulatory agencies.

12. What type(s) of daily health and screening practices will you implement? Will the screening be done before employee gets to work or on site? Who will be responsible for performing them, and how will those individuals be trained?

- All staff will complete a Health Assessment Screening (see revised forms 1/29/2021) before they are allowed entry into the building. Each program area will have a designated entrance.
- Any staff who answers yes to any of the questions or has a fever of 100 degrees or over upon arrival will not be allowed to enter the program building. The screener will ask for and record the staff person's cell phone number and instruct the staff person to immediately return to their car and wait for a call from their Supervisor. The screener will immediately contact the Supervisor on Duty. The Supervisor on Duty who will contact the staff person waiting in their car and will complete the Staff Sick Form (see revised forms 1/29/2021). The completed form will be forwarded immediately to the Director of Nursing. The Director of Nursing will be on call to speak to any staff who answered yes to any of the questions or has a temperature of 100 degrees or over to direct them to follow up with their Health Care Provider and provide resources, if needed.
- All individuals who are transported by CP Nassau will have their Health Assessment Screening (see revised forms 1/29/2021) before being put on the bus.
- Any individual who answers yes to any of the questions or has a fever of 100 degrees or over will not be put on the van. The driver will contact the Transportation Coordinator who will complete the Program Participant Sick Form (see revised forms 1/29/2021) and immediately send to the Supervisor on Duty. The Supervisor on Duty will immediately send a copy of the Program Participant Sick Form to the Director of Nursing. All information will be reviewed with the Director of Nursing. Family will be encouraged to follow up with their Health Care Provider.
- All individuals who are transported to CP Nassau by other means such as Able Ride, a family or a residence will be asked to complete the Health Assessment Screening before they leave their house and the Health Assessment Screening (see revised forms 1/29/2021) will be completed again upon arrival at the Center.
- Any individual who answers yes to any of the questions or is exhibiting signs or symptoms of COVID-19 upon arrival will not be allowed to enter the program building. The staff person will contact the Supervisor on Duty who will complete the Program Participant Sick Form (see revised forms 1/29/2021). The Supervisor on Duty will immediately send a copy of the Program Participant Sick Form to the Director of Nursing. The family/residence will be immediately contacted.
- If the individual was transported on Able Ride, a CP Nassau staff person will bring the individual home. The staff person will be using the contents of the Emergency PPE

#12 Continued

- packet, which includes a N95 mask, face shield, gown and gloves;

- If the individual was transported by family or a residence, the family member or residence will take the individual home;
- Family/residence will be encouraged to follow up with their Health Care Provider.
- If an individual develops a temperature or shows symptoms of COVID-19 during the program day, the staff will immediately inform the Supervisor on Duty who will contact the Director of Nursing. The immediate goal will be to separate the individual who is sick from the rest of the program participants and the staff. An isolation room in the ADS program has been established for this purpose. The family/residence will be contacted to pick up the individual upon receiving the phone call. The Supervisor on Duty will complete the Program Participant Sick Form. (see revised forms 1/29/2021)
- If an individual needs to be picked up during the program day, pick up time will be pre-arranged, a phone call will be made to the program when they are outside and the day program staff will bring the individual outside to the waiting vehicle. Staff will be using the contents of the Emergency PPE packet.
- Staff will be trained to monitor their own health during the day and self-report if they are experiencing any COVID-19 related symptoms. They will notify their Supervisor immediately via an adult day program phone and leave the building. The Supervisor will complete the Staff Sick Form (see revised forms 1/29/2021) and immediately forward to the Director of Nursing for appropriate follow-up. The program must keep sick individuals and staff separate from well individuals and staff.
- Visitors will not be allowed. If any person, outside of the identified cluster, is given permission by the Program Director to enter the facility, the Health Assessment Screening, including temperature check will be completed. The visitor will have identified and limited access to a specific area. All CDC guidance will apply to any approved visitor, including face covering and social distancing.
- Families who are transporting their family member to and from day program will be eligible to complete and submit a Day Hab Monthly Transport Mileage Reimbursement Form. (see revised forms 1/29/2021).
- All staff who are responsible for performing a Health Care Assessment Screening have been trained by a Health Care Professional. The Health Care Professional will conduct a train the trainer session to enable Supervisors to train staff.

13. If screening onsite, how much PPE will be required for the responsible parties carrying out the screening practices? How will you supply this PPE?

- All staff, visitors and vendors are required to wear a face covering at all times. There are limited access points into the building. Each area has a maximum of two entrances where the Health Assessment Screenings are performed. At each of these designated entrances, appropriate PPE's are available if someone requires one.

14. In the case of an employee testing positive for COVID-19, how will you clean the applicable contaminated areas? What products identified as effective against COVID-19 will you need and how will you acquire them?

- CDC guidelines on "Cleaning and Disinfecting Your Facility" will be followed if someone is

suspected or confirmed to have COVID-19 infection:

- Areas used by the person will be closed off.
- Open outside doors and windows to increase air circulation in the area.
- Wait 24 hours before area is cleaned and disinfected.
- Clean and disinfect all areas used by the person who is sick such as offices, classrooms, bathrooms, common areas and shared equipment.
- Once the area has been appropriately disinfected, it can be opened for use. Employees and individuals without close contact with the person who is sick can return to the area immediately after disinfection.

CleanSmart: Nursery and high chair cleaner

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Sanicloth Wipes: Germicidal disposable wipe

- High level disinfectant that can be used against the 2019 Novel Coronavirus, SARS-CoV2, the cause of COVID-19 effective against microorganisms in 2 minutes.
- For use in hospital and healthcare settings – details on label.
- Convenience item for use on desk, phones and personal areas.
- Treated surface must remain wet for 2 minutes, let air dry.

Supplies: The Agency maintains a 3-month supply of products.

15. In the case of an employee testing positive for COVID-19, how will you trace close contacts in the workplace? How will you inform close contacts that they may have been exposed to COVID-19?

- Each program is designing “clusters” of staff and individuals to be together on a daily basis to provide an environment that is as static as possible by having the same group of individuals work with the same staff whenever and wherever possible.
- Logs of the names in each “cluster” will enable everyone in close contact to be notified.

- Individuals in the “cluster” will be notified that they may have potential exposure to someone who has symptoms or has been diagnosed with COVID-19.
- Individuals in that “cluster” will be referred for testing.
- Individuals will be instructed to monitor for signs and symptoms of COVID-19
- Individuals might need to self-quarantine.
- Individuals are asked to keep their Supervisors apprised of all medical updates.
- Confidentiality will be maintained.

16. Please use this space to provide additional details about your business’s Safety Plan, including anything to address specific industry guidance.

The Adult Day Programs at CP Nassau transports many of their program participants to program and back home again. The following guidelines are being put into place to maximize health and safety:

- The goal for transportation runs is for individuals transported together to be in the same cluster at the day program to further reduce intermingling.
- Capacity on vehicles should be reduced to maximize social distancing and reduce COVID-19 transmission risks.
- All staff must wear face coverings at all times. Individuals will be encouraged to wear face coverings, if can be tolerated.
- After each trip is completed, the interior of the vehicle will be thoroughly disinfected before vehicle is used again.
- Where appropriate and safe, windows will be rolled down to permit air flow.