

## **Risk of Covid-19: Reintroduction into the community**

Name:

Date:

### **Location of use: Community Inclusion (CI)**

The following Reintroduction into the Community Plan will be implemented by the program to support community inclusion while reducing the risk of contracting COVID-19. An order by the Governor ODDS or public health authority may supersede this plan.

An ISP discussion will occur on how to support the person in the community and with visitors if the person is unable to follow the guidelines.

### **Before going out:**

- Sterilize vehicles at least weekly.
- Uses restroom prior to leaving the house.
- Wash hands before leaving.
- Review safety measures and what the response will be for not following the plan.
  - Social distancing from others

### **While in the community the person will:**

- Use the provided sanitizers to clean hands when entering and leaving public buildings, especially where you must use your hands to open doors. Use wipes to open the door rather than your hands or carry some paper towels to do so.
- Practice social distancing keeping 6ft of more from others.
- Avoid public restrooms when possible. (If not possible then wipe down door handles and toilet before use).
- Avoid close contact with anyone who is sick or displaying signs of sickness.
- Rather than shaking hands, people should politely decline. If they don't, staff should intervene and suggest that a wave from 6 ft away is sufficient. If contact is made staff should provide the person with hand sanitizer/wipes to clean hands.
- Wear a clean facemask at all times.

Remind everyone to avoid touching their eyes, nose, and mouth with unwashed hands.

### **Upon returning home:**

- Everyone will disinfect the bottoms of their shoes using an aerosol disinfectant such as Lysol (or take them off to be washed). They can also use shoe coverings if needed.  
Or
- Disinfect the wheels of the any wheelchair/walker using a disinfectant such as Lysol aerosol or wipes.
- The people returning will wash their hands with soap for 20 seconds.
- Then will immediately take a shower if in contact with community members.
- The person will change their clothes if in contact with community members.

- Staff will assist in gathering up clothes that have been out in the community and get them washed as soon as possible. Staff are encouraged to bring a change of clothing to work to change into when back from an outing.
- Document in Therap the locations of community involvement, and any time there was contact with another person.
- Continue taking temperatures 2x per day.

### **What to do if the person in services has a temperature or cough:**

Temperature over 100.0 F and/or a persistent cough or difficulty breathing (heavy, shallow, rapid, or audible breathing) move to #2.

#### 1. Action

- a. Apply standard face mask to the symptomatic person (if tolerated) and to self
- b. Take a full set of other vital signs if tolerated and available:
  - Blood pressure
  - Pulse/heart rate
  - O2 sat. (oxygen saturation) with pulse oximeter if one is available at the site

#### 2. Contact

- a. Admin on Call who will forward the information to Don and Gretchen
- b. Contact health care provider or on-call triage, and report the following:
  - Vital signs
  - Current symptoms
  - General health conditions such as: mobility status, heart conditions, lung disease, diabetes, and history of pneumonia etc.

## **Guidelines and Tips**

### **Social distancing:**

- Assist everyone in following guidance from authorities where they live.
- If they need to shop for food or medicine at the grocery store or pharmacy, assist/remind the person stay at least 6 feet away from others.
- Encourage them to cover their mouth and nose with a cloth face covering when around others, including when they have to go out in public, for example to the grocery store.
  - Remind/assist people to keep at least 6 feet between themselves and others, even when they are wearing a face covering.

### **Hand washing:**

- With soap and water for at least 20 seconds
- After sneezing or coughing
- Before and after eating
- After toilet use
- When hands are visibly dirty
- After handling animals or animal waste

## **Phases for Re-entry**

The following Phases are to work in accordance with Governor Brown's phases for re-entry back into the community. This risk will be removed once the COVID-19 pandemic has been cleared by the Governor and approved by the ISP team.

### **Phase 1**

Person can go out into the community in uncovered areas outdoors, while still maintaining rules around Social Distancing, as well as wearing a mask.

Example of outdoor areas:

- Parks
- Drives
- Low impact Hiking trails
- Beaches

### **Phase 2**

**The person specific Integration Plan must be reviewed and approved by the Admin and ISP team before supporting the person in the below Phase 2 activities.**

During phase two, the visiting with others and community outings have been expanded. Essential persons has been expanded to include a maximum of two essential visitors per household at any one time. Community outings have been expanded to include:

- The areas listed in Phase 1 as, well as the following;
- Non-essential doctor appointments: while still able to follow social distancing guidelines.
- Drive-through: Wiping down all containers.

### **Home Visitors:**

**Essential persons who may visit the home include:**

- Nursing Service
- Service Coordinators/Personal Agents
- Family Members
- Oregon Public Guardian (OPG) and other Guardians ODDS

- Close, personal friends
- Maintenance people performing work in programs

During Phase Two, homes having visitors must be “COVID-free”, meaning that there are no persons who live in the home with or suspected to have COVID-19, including demonstrating symptoms associated with COVID-19 that are not attributed to other non-contagious causes. COVID-19 symptoms include:

- Fever
- New or worsening cough
- Difficulty breathing
- Chills or repeated shaking with chills
- Muscle pain
- Headache
- Sore throat
- New loss of taste or smell

**Visitor Guidelines:**

The staff may request that visitation by personal visitors, behavior professionals and vendors is pre-arranged (see Integration Plan). This is only for the purpose of ensuring there are not more than two visitors at a time in the home and there is adequate time to clean between visitors.

OSLP shall implement the following protocol for visitors:

- Visitors must be screened prior to entering the home or visiting outside of the home. (See COVID-19 Screening Protocol).
- Visitors are expected to wear face coverings or masks, wear shoe coverings or sanitize bottom of shoes, and wash hands upon entry and as requested.
- Visitors, persons supported, providers, and staff are to maintain physical distancing (at least six feet) to the degree reasonably possible.
- Any areas of the home where visitors spent time must be cleaned immediately afterwards.

If visitors are unable to follow these guidelines they may be requested to leave the residence. A follow up discussion with the ISP team will occur on how to better support the person during visitation with essential persons.

### **Phase 3**

People can go out in the community safely. The areas listed in Phase 1, Phase 2, as, well as the following while adhering to social distancing guidelines.

- Gatherings: up to 10 people as long as they are outside and able to maintain social distancing.
- Small classes: up to 10 people
- See family members
- Camping

### **After Phase 3**

- Shopping: while maintaining a mask.
- Gatherings: up to 25 people while maintaining a mask. Social distancing will still occur in community gatherings based on state guidelines.

Author: \_\_\_\_\_