

SUNSHINE VILLAGE

COVID-19 CONTROL PLAN

Mandatory Safety Standards and Protocols

Established May 1, 2020 - Revised May 22, 2020
Revised and approved by the Board of Directors June 4, 2020
Revised based upon the MA EOHHS (Min Requirements for Health and Safety) July 24, 2020
Westover Maintenance Systems: August 3, 2020
Revised (mass.gov): Aug 17, 2020; Sept 1, 2020; Oct 1, 2020; Nov 17, 2020; Dec 2, 2020;
Dec 9, 2020; Dec 23, 2020; February 15, 2021; March 25, 2021
Revised based upon DDS-ADDP Guidance: Oct 15, 2020
Transportation Control Plan Established May 3, 2021
REBUILDING PLAN REVISIONS: May 7, 2021; June 1, 2021, July 8, 2021, Aug 25, 2021

INTRODUCTION (has been moved to the end of the document)

REBUILDING PLAN REVISIONS

REVISIONS: As Sunshine Village moves forward as part of its **REBUILDING PLAN** and in accordance with lessening restrictions, these revised policies and protocols will override other parts of the original policy.

EXPOSURE AND SYMPTOM PROTOCOLS (Dec 2, 2020 – Dec 9, 2020 – March 25, 2021 - August 25, 2021)

- Definition of Fully Vaccinated
- Clients Living in Group Homes (Exposure and Symptom)
- Exposure Protocol – Fully Vaccinated
- Exposure Protocol – Not Vaccinated
- Symptom Protocol

DEFINITION OF FULLY VACCINATED: Clients and staff are fully vaccinated for COVID-19 if they have received two doses of either the Pfizer or Moderna COVID-19 vaccines or single dose of the Johnson & Johnson vaccine more than 14 days ago.

If those requirements are not met, the client/staff is **NOT** fully vaccinated and must follow the exposure protocol for unvaccinated.

The Human Resources Department will maintain a record of employees who are fully vaccinated and the Health Care Coordinator will maintain a record of clients who are fully vaccinated.

CLIENTS LIVING IN GROUP HOMES: To reduce the risk of COVID-19 exposure and transmission, clients living in group homes will be deemed as close contacts when either their roommate or residential staff test positive or experience symptoms consistent with COVID-19. They will be required to quarantine regardless of vaccination status.

- If a client lives in a residential group home and one of their roommates or support staff tests positive, they will need to quarantine for 14 days, regardless of vaccination status, and then can return if they are symptom free.
- If a client lives in a residential group home and one of their roommates or support staff exhibits one or more symptoms
 - If at the program, they need to go into isolation until they can leave the property
 - They need to quarantine for 10 days OR receive a negative test OR medical documentation that a test is not warranted - and then can return if they are symptom free

EXPOSURE PROTOCOL – FULLY VACCINATED (applied to clients who live on their own or with their families or with a shared living provider – and employees.)

- If someone (client or staff) *tests* positive
 - They need to quarantine for 14 days from day of test and can return if they are symptom free
- If someone (client or staff) *lives with* someone who tests positive - no quarantine is necessary.
- If someone (client or staff) comes in *close proximity* (within 6 feet for a cumulative total of 15 minutes or longer over a 24-hour period) including riding a van - no quarantine is necessary.
- If someone (client or staff) is *near* someone (in the same room but farther than 6 feet away for a cumulative total of 15 minutes or longer) who tests positive:
 - No action is required.

EXPOSURE PROTOCOL – UNVACCINATED (applied to clients who live on their own or with their families or with a shared living provider – and employees.)

- If someone *tests* positive
 - They need to quarantine for 14 days from day of test and can return if they are symptom free
- If someone *lives with* someone who tests positive
 - They need to quarantine for 14 days from day of test and can return if they are symptom free
- If someone comes in *close proximity* (within 6 feet of someone for a cumulative total of 15 minutes or more over a 24-hour period) including riding a van with someone who tests positive
 - They need to quarantine for 14 days from day of exposure and can return if they are symptom free
 - OR

- Quarantine for 7 days and can return with a **NEGATIVE TEST** taken 5 days after initial exposure.
- If someone is **near** someone (in the same room but farther than 6 feet away) who tests positive
 - Communicate that they were near but not in close proximity to the person and/or their guardian/family

SYMPTOM PROTOCOL (applied to all clients and employees – regardless of vaccination status.)

- If someone **exhibits** one or more symptoms
 - If at the program, they need to go into isolation until they can leave the property
 - They need to quarantine for 10 days OR receive a negative test OR medical documentation stating that a test is not warranted - and then can return if they are symptom free
- If someone **lives with** someone who exhibits one or more symptoms
 - If at the program, they need to go into isolation until they can leave the property
 - They need to quarantine for 10 days OR receive a negative test OR medical documentation that a test is not warranted - and then can return if they are symptom free
- If someone comes in **close proximity** (within 6 feet of someone for a cumulative total of 15 minutes or more over a 24-hour period) to someone who exhibits one or more symptoms including on a van or vehicle
 - Communicate that they were in close proximity to a person who was exhibiting symptoms
- If someone is **near** someone (in the same room but farther than 6 feet away for more than 15 minutes) who exhibited symptoms
 - No action required

NOTE: If the recommended time for quarantine changes based upon CDC or other regulatory guidelines, these protocols may change to mirror the new guideline.

ADDITIONAL REVISIONS August 25, 2021

GROUP MEALS/SHARING FOOD: Group meals may begin on August 25, 2021, including sharing food (i.e., pizza or cake) – if the food is served on individual plates and then distributed by a staff person – while maintaining social distancing as much as possible.

CULINARY ACTIVITIES: Culinary activities can resume in all day programs on August 25, 2021. Social distancing will continue to be encouraged, as able, during such activities.

FOOD DELIVERY: Food can be delivered from area restaurants and/or through meal delivery services beginning August 25, 2021.

REVISION: MASKS, SOCIAL DISTANCING, HOYER LIFT SLINGS, LOCKERS, CONTROL ACCESS, COMMUNITY ACCESS, SHARING (July 8, 2021)

MASKS:

Indoors: Masks will need to be worn in programmatic areas and common areas whenever clients are present. If only staff are present in programmatic or common spaces, as long as social distancing of 3 or more feet can be achieved, masks do NOT need to be worn. Clients will wear masks, as able.

Outdoors: Masks do NOT need to be worn outdoors (even if social distancing is not able to be maintained.)

SOCIAL DISTANCING: Social distancing will be maintained, as able, indoors and outdoors, with an arm's length between people OR 3 feet on each side of seated clients. Staff will intermingle within this space for support but will be cognizant to try to maintain distance, as able.

HOYER LIFT SLINGS: Sunshine Village will provide slings for Hoyer Lifts and will sanitize the slings in between uses.

LOCKERS: Clients will be able to access their own personal LOCKERS – if available at their site – being encouraged to be cognizant of social distancing.

CONTROL ACCESS:

Visitor Policy: Visitors will be allowed to enter any building operated by SSV as long as they wear masks and social distance six feet from clients. Doors will remain locked so that admittance can be controlled and monitored.

COMMUNITY ACCESS: Sunshine Village will begin – in a limited way - supporting people with community access to local venues (both indoors and outdoors) on August 1, 2021. Transportation will be provided through agency vehicles – which will be cleaned daily. Clients and staff will wear masks while in vehicles and then follow mask requirements of the establishments they frequent.

SHARING: Clients and employees can share equipment, furniture, games and supplies. Staff will follow cleaning protocols established by the program.

OUTDOOR ACTIVITIES: COVID cleaning protocols and social distancing, as well as mask wearing protocols, do not have to be adhered to in outdoor spaces.

REVISION: REFRIGERATORS and FOOD DELIVERY (June 1, 2021)

Effective June 1, 2021, refrigerators can be used to store lunches, beverages and other food. Refrigerators will be accessed by staff – and each program will develop and implement a cleaning plan.

Food delivery can begin on June 1, 2021 on a limited basis for each site. Each site will develop an “approved listing” of local restaurants that staff and clients can order lunch from. Lunches will be delivered directly to the building when the lunch was ordered and each program will manage the intake

process. Independent delivery services such as GrubHub and Door Dash will not be used at this time to limit the number of delivery drivers on each property.

REVISION: NOT WEARING MASKS OUTDOORS WHEN ABLE TO SOCIAL DISTANCE and MICROWAVES (May 7, 2021)

Effective May 7, 2021, when outdoors, clients and staff do not need to wear a mask if they are able to social distance – 6 feet apart – from other people. If social distancing is not able to be maintained, masks will need to be worn.

Microwaves can be used by staff if a cleaning protocol has been put in place.

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ORIGINAL POLICY

SCREENING AND MONITORING (updated Nov 17, 2020)

- **RETURN TO WORK**
 - All employees will be screened through the Human Resources Department with a listing of questions related to their possible exposure to COVID-19 before returning to work from a furlough or laid off status.
- **PRE-ARRIVAL TO PROGRAM**
 - All clients and employees must self-screen at home BEFORE arriving to their program.
 - Clients and staff are encouraged to remain home if not feeling well or any symptoms are evident during self-screen.
- **ARRIVAL AT PROGRAM**
 - Employees working at programmatic locations will have their temperature checked upon arrival at the program.
 - Upon arrival to the parking lot/transportation area, a nurse or designated trained staff will meet the client and perform a visible check AND check temperature by using a no-touch thermometer.
 - If for some reason the client arrives after 9:00 am, the client and their designated driver must call the program upon arrival and either the nurse or designated trained staff will meet the client outside in the parking lot to perform a visible check AND check temperature using a no-touch thermometer.
 - Clients with a temperature exceeding 100.0 will not be allowed into the building.
 - In addition to temperature screening, the client and/or person transporting them to the program will be asked a series of questions daily including:
 - Today or in the past 24 hours, have you or any household members
 - (1) been tested positive for COVID-19;
 - (2) been in close contact with someone who has tested positive (within 6 feet for more than 15 minutes in a 24-hour period); and
 - (3) had any of the following symptoms:
 - Fever 100.0 degrees or above, felt feverish, or had chills. Feeling feverish typically means experience chills and body aches; New Cough; Sore throat; Difficulty breathing or shortness of breath; Unexplained rash; Fatigue; Abdominal pain; Persistent Headache; Loss of smell/taste; New or unexplained muscle

aches; Nausea and/or Vomiting; Diarrhea; Congestion/Runny
Nose

- Anyone choosing not to answer questions will not be allowed to enter the building. (If client uses MART transportation, they will be taken to an isolation room and their caregiver will be called so they can be picked up.)
- No individual can enter the building until they successfully pass screening.
- If for some reason a client was dropped off and the driver left without answering the symptom questionnaire, the client will be taken to the isolation area.
- Anyone with temperature of 100.0 or above or any signs of illness or answered positively to criteria cannot enter or must be ISOLATED immediately and steps taken to return client home.
- Staff must visually inspect clients for signs and symptoms of illness such as flushed cheeks and fatigue as well as being aware of coughing or complaints of sore throat and other ailments throughout the day and, if any symptoms are present, the client must be accompanied to an isolation area.
- Anyone, client or staff, appearing ill must be separated from the larger group and isolated until able to leave the program.
 - If a client or employee lives with a client or employee who falls ill, that client or employee must also go into isolation and leave the program as soon as able and not return without medical documentation.
- Contact 911 if any client or staff experience severe symptoms such as difficulty breathing, bluish lips/face, persistent pain or pressure in the chest, severe dizziness, a new seizure or seizures that do not stop among other emergency situations.
- ABSENTEE CLIENT MONITORING: If a client does not come into a program on a day they were scheduled to attend, SSV will contact that individual to see if a test or medical documentation will be needed before return.

ENTRY PROCEDURE and PROGRAMMING

- Once screened outside in the vehicle parking area and determined safe, client will be authorized to enter the building.
- The single entrance will be monitored by support person and door will be opened for all to enter.
- In the event of inclement weather, the door will be propped open and the staff will be inside the door with hand sanitizer.
- Upon entry, all staff and clients will be given hand sanitizer on palms of hands. Both staff and clients will be encouraged to rub hands together with hand sanitizer.
- A staff person will accompany client to the appropriate program area.
- Clients and staff will be in the same program area daily as much as possible.
- The Program Manager will maintain a log of clients and staff working together each day.
- The log will be maintained for at least 15 business days.

ISOLATION AND DISCHARGE OF SICK:

Each program has at least one designated separate space available to safely isolate clients and/or staff who may exhibit signs and symptoms of illness. A separate bathroom will be made available if a client or staff becomes ill and in isolation, as able. Isolated clients must be supervised at all times. If more than one client / staff become ill, SSV will enact isolation procedures and attempt to keep everyone separate. If several people become ill at the same time and isolation space becomes limited, sick clients will be kept in the same room but at least 6 feet apart.

Isolation areas have a door or half door which will allow clients to be monitored at all times while in the isolation area until picked up. The door will remain open for monitoring purposes and if it is a half door, the top half will remain open.

SSV will try to ensure that a separate exit is available to clients and staff in the isolation area.

- **If a client becomes symptomatic:**
 - Immediately isolate client from others by accompanying the client to an isolation area.
 - Ask client to use a face mask to cover their nose and mouth. A face mask, face covering or shield will be available if client agrees and is safely able to wear.
 - Contact the client's caregivers and indicate symptoms of illness evident and client must be picked up as soon as possible – but no later than within one hour.
 - If at any point, symptoms emerge warranting emergency care, 911 will be contacted.
 - Provide information to client and their caregiver regarding contacting their health care provider to obtain the latest information on how and when to obtain testing and proper self-quarantining and self-isolating procedures.
 - See Exposure and Symptom Protocol
- **If a staff becomes symptomatic:**
 - The staff member must immediately let the Program Manager or their designee know they are ill and cease working.
 - They must leave the program or isolate in isolation area until they are able to leave.
 - If they are unable to leave immediately, they must make arrangements to be picked up within one hour.
 - If at any point, symptoms emerge warranting emergency care, 911 will be contacted.
 - The staff must continue to cover their nose and mouth. If for some reason they are unable to safely wear a face mask, a face covering or shield will be made available.
 - Provide information to the employee regarding contacting their health care provider to acquire more current information as to how and when to obtain testing and proper self-quarantining and self-isolating procedures.
 - See Exposure and Symptom Protocol

EXPOSURE AND SYMPTOM PROTOCOLS (Dec 2, 2020 – Dec 9, 2020 – March 25, 2021)

Exposure Protocol

- If someone (client or staff) *tests* positive
 - They need to quarantine for 14 days from day of test and can return if they are symptom free
- If someone (client or staff) *lives with* someone who tests positive
 - 7 days of strict quarantine (release on day 8) – from day of exposure – with a test (either PCR or antigen) taken on Day 5 or later is negative AND the individual has not experienced any symptoms. The individual conducts active monitoring thru Day 14.

- 10 days of strict quarantine (release on day 11) – from day of exposure – if the individual has not experienced any symptoms AND the individual conducts active monitoring thru Day 14.
- 14 days of strict quarantine (release on day 15) – from day of exposure – if the individual experienced ANY symptoms during the quarantine period EVEN if they have a negative COVID-19 tests OR the individual indicates that are unable or unwilling to actively monitor thru Day 14.
- NOTE: If a client lives in a residential group home and one of their support staff tests positive, they will need to quarantine for 14 days, regardless of vaccination status, and then can return if they are symptom free.
- If someone (client or staff) comes in **close proximity** (within 6 feet for longer than 15 minutes over a 24-hour period)
 - 7 days of strict quarantine (release on day 8) – from day of exposure – with a test (either PCR or antigen) taken on Day 5 or later is negative AND the individual has not experienced any symptoms. The individual conducts active monitoring through Day 14.
 - 10 days of strict quarantine (release on day 11) – from day of exposure – if the individual has not experienced any symptoms AND the individual conducts active monitoring through Day 14.
 - 14 days of strict quarantine (release on day 15) – from day of exposure – if the individual experienced ANY symptoms during the quarantine period EVEN if they have a negative COVID-19 tests OR the individual indicates that are unable or unwilling to actively monitor through Day 14. If someone (client or staff) comes in **close proximity** with an individual who tests positive (within 6 feet for longer than 15 minutes over a 24-hour period)
- **UNLESS:**
 - They have been fully vaccinated within the last two weeks AND show no symptoms of COVID-19 – then no quarantine required. (The agency will refer to client health records for a client’s vaccination status.)
 - NOTE: If a client lives in a residential group home and one of their support staff tests positive, they will need to quarantine for 14 days, regardless of vaccination status, and then can return if they are symptom free.
 - **OR**
 - They have had COVID-19 illness within the previous 3 months **AND** have recovered **and** remain without COVID-19 symptoms (for example, cough, shortness of breath) – then no quarantine required.
- If someone (client or staff) is **near** someone (in the same room but farther than 6 feet away for more than 15 minutes) who tests positive
 - Communicate that there were near but not in close proximity to the person and/or their guardian/family
- If someone (client or staff) **rides a van** or in the same vehicle with someone who tests positive
 - Communicate that there were near but not in close proximity to the person and/or their guardian/family (because it was longer than 15 minutes)

Symptom Protocol

- If someone (client or staff) **exhibits** one or more symptoms
 - If at the program, they need to go into isolation until they can leave the property

- They need to quarantine for 10 days OR receive a negative test OR medical documentation stating that a test is not warranted - and then can return if they are symptom free
- If someone (client or staff) **lives with** someone who exhibits one or more symptoms
 - If at the program, they need to go into isolation until they can leave the property
 - They need to quarantine for 10 days OR receive a negative test OR medical documentation that a test is not warranted - and then can return if they are symptom free
- If someone (client or staff) comes in **close proximity** (within 6 feet for longer than 15 minutes over a 24-hour period) to someone who exhibits one or more symptoms
 - Communicate that there were in close proximity to a person who was exhibiting symptoms
- If someone (client or staff) is **near** someone (in the same room but farther than 6 feet away for more than 15 minutes) who exhibited symptoms
 - No action required
- If someone (client or staff) **rides a van** or in the same vehicle with someone who tests positive
 - Communicate that there were near but not in close proximity to person who was exhibiting symptoms and/or their guardian/family (because it was longer than 15 minutes)

NOTE: If the recommended time for quarantine changes based upon CDC or other regulatory guidelines, these protocols may change to mirror the new guideline.

NOTIFYING REQUIRED PARTIES OF EXPOSURE:

- Employees and clients will be notified about an exposure (which means they are COVID-19 positive or symptomatic and presumed to have COVID-19) while maintaining confidentiality. Communication detailed in Symptom and Exposure Protocols will be followed.
 - Once a suspected occurrence of COVID19 is identified, the Director of Day Services (client) or Director of Human Resources (staff) will be notified and, in turn, the Executive Director will be apprised of the possible COVID19 exposure.
 - When a possible exposure occurs, an internal ‘contact tracing’ will be conducted for the previous 2 days prior to exposure to determine all clients and staff that may have been within 6 feet of the person for longer than 15 minutes.
- The local Board of Health will be notified if a client or employee tests positive for COVID-19.
 - The Executive Director is the point of contact for Board of Health
- The referral agency and the Division of Medical Assistance (DPH Division of Epidemiology and Immunization 617-983-6800, #3) will be notified if a client or an employee who works directly with clients tested positive for COVID-19.

TESTING, EDUCATING, COMMUNICATING and TRACKING

- SSV will educate staff, clients and client families/caregivers about TESTING, when and how to schedule a testing appointment and where they can get tested.
 - Massachusetts COVID-19 testing information can be found online at <https://www.mass.gov/info-details/about-covid-19-testing>
- In the event a client or staff tests positive for COVID-19, all clients and staff who have had close contact with them (defined as within 6 feet for 15 minutes over a 24-hour period) will be advised that they should be tested and will be required to quarantine as long as mandated by the

Commonwealth of Massachusetts. A client or staff can return after that quarantine period as long as they are symptom free.

- Logs of clients and staff who have been tested, when they were tested and the results of their tests should be maintained as best as possible. The Health Care Supervisor is responsible for maintaining client records and Human Resources maintains employee records.

TRAVEL RESTRICTIONS

Sunshine Village will follow the guidance from the Commonwealth of Massachusetts as it relates to out of state and out of country travel. If a client or staff travels to a state or country that is not on the approved list by Massachusetts, the client or staff must quarantine for the mandated time upon their return or present a negative test following the requirements at time, unless exempt.

CLEANING, DISINFECTING and SANITIZING:

Sunshine Village is committed to providing services to individuals with a variety of support needs across different program spaces and work locations in a clean and sanitary condition.

All environments and their equipment, materials, items and surfaces are monitored for cleanliness and specific cleaning regimens are employed at all locations.

The cleaning of each location-physically removing dirt and debris with detergent and water-takes place at the end of each day and as needed when visibly dirty and unclean throughout the day.

Sanitizing and disinfecting takes place AFTER cleaning. Surfaces must be clean PRIOR to using sanitizing and disinfecting solutions. Sanitizing is the appropriate treatment for most equipment and surfaces to reduce germs. Disinfecting is more powerful than sanitizing.

SSV will abide by the specific directions listed on each cleaning, sanitizing and disinfectant product.

UVC LED Sterilization Wands are available at all locations and can be used to disinfect telephones, electronics, remote controls, Wii consoles, puzzles, art supplies, playing cards amongst other items.

General minimum guidelines for cleaning, disinfecting and sanitizing:

- **RESTROOMS / CHANGING ROOMS**
 - All restrooms-including toilets, sinks, faucets, paper towel dispensers, doors, door handles, grab bars and sanitary receptacles will be disinfected a minimum of once daily or between uses as much as possible.
 - Changing tables should be disinfected after each use.
 - Raised toilet seats and commodes must be disinfected after use.
 - Portable lifts should be disinfected after each use.
- **KITCHENS**
 - All kitchens and kitchen appliances including microwaves, coffee makers, door handles, faucets and knobs, must be cleaned and disinfected at least once daily or between uses as much as possible. Before and after eating lunch, when possible, all tables and chairs will be sanitized.
 - Dishwasher will be used to sanitize items such as Legos, plastic equipment and other sensory products touched or mouthed by clients daily.

- IMMEDIATE
 - Any surface exposed to body fluids must be cleaned and disinfected immediately.
- SPECIFIC ITEMS
 - All regularly shared surfaces and equipment, including door handles and knobs, will be cleaned and disinfected regularly, preferable before lunch and before leaving for the day.
 - All hand sanitizing stations will be disinfected at the end of each day.
 - Medication cabinet must be disinfected daily.
 - Floors need to be swept, vacuumed, and washed daily.
 - All mop heads need to be washed daily after use.
 - Regularly used equipment and objects such as remote controls, recliner handles, Wii consoles, light switches, copy machines and other office equipment must be disinfected daily.
 - Weighted blankets cannot be shared amongst clients without disinfecting with spray.
- TRASH / WASTE DISPOSABLE
 - All disposable PPE will be properly disposed in plastic lined trash barrels.
 - All trash barrels will be easily accessible for ALL employees and clients.
 - Trash barrels are equipped with foot pedals for opening to allow for no-touch use.
 - If the foot pedals are not practical for a specific site, the covers can either be removed or kept open.
 - Trash barrels will be emptied daily and trash will be disposed of in the dumpster daily.
 - Trash barrel covers, if used, will be disinfected twice daily.
- FURNITURE
 - Furniture such as futons, couches, recliners will be sprayed with a disinfectant at the end of each day.
 - All tables and chairs must be disinfected at the end of each day.
 - Outdoor furniture such as picnic tables and chairs need to be disinfected daily when used.
 - Items that are porous (such as bean bag chairs and large pillows) will be removed from program areas and not available for use.
- LAUNDRY
 - Laundry of different items from different individuals can be laundered together regardless of symptoms of COVID19.
 - Staff and clients are encouraged to launder their clothes daily prior to re-wearing.
 - Caps and fabric face coverings should be laundered or sanitized daily.
 - Towels, machine washable fabric sensory products, blankets can be laundered together.
- CLIENT'S PERSONAL BELONGINGS
 - Blankets will not be used unless it belongs to a specific individual.
 - Clients needing assistance of portable body lifts and mobility tools such as a Hoyer must bring their own sling from home each day. The sling will be returned each day.

DECONTAMINATION TEAM

At the discretion of SSV, a “Decontamination Team” (DT) will provide disinfecting throughout the building when a client or staff member is presumed to have COVID19.

The DT is comprised of two trained employees who are familiar with each of the buildings operated by SSV. Their “Decontamination Kit”, which will be kept up to date at all times, will include:

disinfectant cleaner that can be used on all surfaces including glass, stainless steel, counters and floors. Each kit will have a Victory Sprayer equipped with chlorinated disinfecting tablets and a commercial vacuum with HEPA filters. The kit will include a bucket, toilet brush, scrub brush, mop, broom, dustpan, counter brush, paper towels, trash bags and latex free gloves. After use, all supplies will be properly cleaned and disinfected.

If additional personnel are needed to supplement the DT's efforts, maintenance personnel from Westover Maintenance Systems will be utilized.

When an exposure is suspected, outside doors and windows will be opened if feasible and ventilating fans will be used to increase air circulation in the area. The organization will wait until the end of the day – after everyone leaves - before beginning sanitation and disinfection. Alternative space may need to be used or a program may temporarily need to close for such cleaning.

Program staff will clean and disinfect bathroom areas – as part of the regular cleaning protocols, using traditional means and – at the end of each day – sprayers. Cleaning staff will clean and disinfect all other areas that the person with the suspected case used. Particular focus will be paid to frequently touched surfaces.

Programs will also comply with OSHA's standards on blood borne pathogens

CLEANING PROTOCOLS

Basic Safeguards and Proper Usage for Employees to Adhere:

- Wear gloves while cleaning, sanitizing and disinfecting.
- Only single use, disposable paper towels shall be used for cleaning, sanitizing, and disinfecting.
- Sponges or cleaning towels shall not be used for sanitizing or disinfecting.
- To ensure effective cleaning and disinfecting, always clean surfaces with soap and water first, then disinfect using a diluted bleach solution, alcohol solution with at least 70% alcohol, or an EPA approved disinfectant for use against the virus that causes COVID-19.
- Cleaning first will allow the disinfecting product to work as intended to destroy germs on the surface.
- Follow manufacturer's instructions for application and proper ventilation. Never mix household bleach with ammonia or any other cleanser.
- Leave solution on the surface for at least 1 minute.
- Surfaces and equipment must air dry after sanitizing or disinfecting.
- Do not wipe dry unless it is a product instruction
- Programs shall use safe cleaning, sanitizing, and disinfecting solutions and participants should never be present when mixing solutions.
- All sanitizing and disinfecting solutions must be labeled properly to identify the contents and date mixed, kept out of the reach of clients and stored separately from food items.
- Do not store sanitizing and disinfecting solutions in beverage containers.
- Avoid aerosols because they contain propellants that can affect breathing. Pump or trigger sprays are preferred.
- Directions for the various cleaning, disinfecting and sanitizing solutions must be followed.
- All solutions must be kept out of reach and stored in a cleaning cabinet.
- All sanitizing and disinfecting solutions must be used in areas with adequate ventilation and

never in close proximity to participants as to not trigger acute symptoms in participants with asthma or other respiratory conditions.

- Do not spray chemicals around clients. If possible, move clients to another area or have someone distract them away from the area where a chemical is being used.

Resources and Supplies utilized for cleaning, sanitizing and disinfecting will be used according to label instructions and only on surfaces approved on label.

We have identified a partial listing of approved products for use – and other products may be utilized in the course of cleaning. If you are unsure about a product's effectiveness, please contact a manager.

The following EPA-registered products are used and stored in a designated closet /cabinet at each program:

Cleaning: Balance and Tranzyme are cleaning products only. These products do NOT disinfect.

Sanitizing and Disinfecting: disinfecting wipes, alcohol wipes, AirX 75 (appliances, counters, tables, faucets) D3 multipurpose detergent and deodorizer, Fantastik Multi-Surface cleaner and bleach and Pine Sol.

Directions for Bleach: When EPA-approved disinfectants are not available, a bleach solution can be used (for example, 1/3 cup of household bleach added to 1 gallon of water OR 4 teaspoons bleach per quart of water, or 70% alcohol solutions).

All bleach and water dilutions must be freshly mixed every 24 hours. Bleach solutions must be prepared daily to ensure their ability to safely sanitize or disinfect. When preparing sanitizing or disinfecting dilutions always add bleach to water. This helps to avoid bleach splashes caused by adding water to bleach. Use either the sanitizing or the disinfecting dilution as specified above.

Many cleaning agents can be irritants and trigger acute symptoms in participants and staff with asthma or other respiratory conditions. Programs must not prepare cleaning solutions in close proximity to participants or staff with asthma.

Check the label to see if your bleach is intended for disinfection, and ensure the product is not past its expiration date. Unexpired household bleach will be effective against COVID-19 when properly diluted. Some bleaches, such as those designed for safe use on colored clothing or for whitening may not be suitable for disinfection.

Never mix household bleach with ammonia or any other cleanser.

CLEANING SUPPLY AND INVENTORY PLAN

Sunshine Village has processes for procuring and tracking cleaning supplies. Prior to the initial opening of any SSV program, the organization will have a minimum of a two-week supply of all necessary items.

A minimum of two vendors have been identified for all cleaning items, when able. Each building will have a supply storage of cleaning products.

The Program Manager is responsible for maintaining the supply of all cleaning, sanitizing and disinfectant products.

A requisition form is submitted to the Administrative Office and supplies are ordered through various vendors. Products are delivered to 75 Litwin Lane and distributed to the various locations.

LOCAL ORDINANCE PLAN

- Prior to opening a site for programmatic purposes, the organization will contact the Board of Health in the city or town the program is located in to alert them of the opening. A copy of this plan will be provided (if requested) and revisions will be made if requested.

SOURCE CONTROL

- Lunch and snacks will be eaten in designated program areas
- Clients and staff will be with the same clients and staff working as a cohort each week, as feasible.
 - This may change based upon actual attendance of clients and staff, however, cohorts of staff and clients is the goal.
- Restrooms may be identified to be unisex.
- Each program area will be assigned a particular restroom to use for clients and staff, as able.
- The number of individuals using the stalled bathrooms at one time will be limited.
- Each program will identify staff to monitor restrooms, as much as possible, to insure proper hand washing and disinfecting throughout the day.
- No culinary activities will be allowed.
- Clients cannot be transported in any staff person's vehicle.
- No restaurants will be allowed to deliver. Microwaves and coffee machines can be used within programs and each program will develop and follow a use and cleaning protocol.
 - Until refrigerators are allowed, staff and clients will need to bring their lunches and snacks in in insulated bags.
 - If coffee is part of an established routine, a staff person will be assigned responsibility for making, pouring and distributing coffee in Styrofoam cups.
- Clients and staff will not be able to leave the property once screened and allowed into the building unless authorized by their program manager.
- Plastic utensils will be pre-wrapped or distributed by a staff wearing gloves.
- Anyone requiring adaptive utensils or place settings such as plates, bowls, cups and dysem placemats will need to have their own. No sharing.
- Each client will have their own storage bin or bag for their own supplies such as markers, paints, books.
- Each client will social distance – six feet away from others – as able.
- Programs will be prepared to promote social distancing. Partitions and/or floor markings will be used for visual demarcation, as able. Chairs and tables must be at least 6 feet apart from others.
- Floor markers will be used for directional and safe distancing, when needed.
- Wall/door signage will identify access and egress, when needed.
- Each room will identify maximum number of people who should occupy each portioned area to ensure distancing.
- Drinking fountains will not be used.

- Ventilation systems will work correctly and be serviced as required.
- Signage will be posted for proper PPE use and donning and doffing, particularly face masks.

SOCIAL DISTANCING

- All clients and staff, as able, will be encouraged to social distance – 6 feet apart.
- All persons (inclusive of employees, clients, visitors, and vendors) will maintain 6 feet social distance both inside and outside of workplace structures, to the greatest extent possible. Recommendations to SSV programs and worksites for how to comply with this guideline include but are not limited to:
 - Signage that reminds individuals to give the proper distance when sitting, standing or walking. (Signage will be at least 8.5” by 11” and will be posted at entrances and on doors and in high traffic areas.)
 - Visual cues such as colored tape on floors indicating one-way directions for traversing hallways, aisles, etc., and/or for indicating spacing between individuals while sitting, standing, or walking, where applicable.
 - High Traffic areas
 - Designate hallways in high traffic areas, as needed and able, as “one way” to minimize traffic congestion.
 - The direction of foot traffic on stairwells to be identified as “up” for one stairwell and “down” for one stairwell, as able.
 - Verbal reminders to persons when entering the workspace to abide social distancing and other safety guidelines will be given when able.
 - Seats at tables will be spaced sufficiently to permit a minimum of 6 feet distance.
 - Practical demonstration of 6 feet distance to employees and clients (e.g., 2 arms-length, measuring tape, signs, etc.) will be provided when able
 - Meetings and trainings will be held virtually, as able.
 - All employees will have an assigned working space that is at least six feet away from any other employee when possible.
 - Safeguards, such as dividers, will be used, when able, when workspace cannot provide for appropriate social distancing.
 - Offices will be occupied by only one person.
 - Couches and futons can only have one person sitting at a time.

HYGIENE PROTOCOLS

All SSV programs and worksites will provide employees and clients with the means and opportunity to engage in regular hand washing throughout the workday.

All staff and clients will wash their hands or use hand sanitizer throughout the day. It is imperative to wash all portions of hands (front and back, wrists, between fingers, under fingernails) with soap and water for at least 20 seconds during the following instances:

- Upon entry into and exit from program space; When coming in to program space from outside activities; Before and after eating; After sneezing, coughing or nose blowing; Before, during and after handling food; After touching or cleaning surfaces that may be contaminated; After toileting; After using any shared equipment such as telephone, keyboard, musical instrument, remote control; Before and after administration of medications; Before entering and after exiting vehicles used for client transportation;

- After contact with face mask or cloth covering; Before and after changes of gloves; When visibly soiled.
- Staff members will be responsible for monitoring bathroom for hand hygiene, sanitizing and disinfecting.
- Post visual steps of hand washing and utilize timers, when able, and other cues for 20 seconds.
- Remind clients why it is not healthy to share drinks or food or other items that may be contaminated.
- Remind clients that handshakes, fist-bumps and hugs are not acceptable and to avoid touching eyes, nose and mouth.

RESPIRATORY ETIQUETTE

- All clients and staff must abide by proper respiratory etiquette.
 - Cover nose and mouth when coughing or sneezing.
 - Do this by using a tissue or inner elbow.
 - Discard tissue in a trash receptacle.
 - Perform hand hygiene after sneezing, coughing or nose blowing.

SAFE VENDOR DELIVERY PLAN

- Access by Vendors to all buildings will be limited during hours of operation, most particularly while clients are not present.
 - Deliveries will be non-contact and will be made to a central point of acceptance with limited employees and where clients are not present.
- Vendors will be required to wear masks while inside a building and adhere to all protocols, including social distancing.
- Vendors will be accompanied by staff while maintaining social distancing when they are in buildings to insure, they are adhering to policies.
 - Vendors may be on the property, outside of the buildings, without restriction unless in proximity to others.

PERSONAL PROTECTIVE EQUIPMENT PLAN

- Clients will be encouraged to wear masks and may wear disposable masks or cloth masks if they choose.
- Clients will receive training regarding donning and doffing face masks and appropriate face mask etiquette.
- All employees, vendors and other authorized persons will be required to wear masks or other face coverings while interacting or walking inside workspaces unless they are unable to due to a medical condition.
- Employees will be required to wear masks. Disposable masks will be available. In the event that disposable masks are not available, or if it is the employee preference, cloth masks may be worn.
- Employees who work within a private office or are six feet away from other individuals do not have to wear the masks while at their workstation – but must have masks immediately available
- For employees who provide direct service and/or have to work within six feet of other individuals, these employees must wear masks at all times.

- Employees who need to wear masks or face coverings for extended periods of time will be encouraged to take regular breaks so masks can be removed for a short period of time.
- Masks or face coverings must be worn at all times in common areas, such as hallways, bathrooms and when entering and exiting the building.
- Employees will be provided with gloves, gowns and face shields upon request. It is not required that employees wear gloves, gowns or face shields unless they are providing personal care or other supports where additional PPE is necessary.
 - Employees will be encouraged to wear gloves, gowns and face shields when providing personal care.

Required PPE needed by SSV is as followed:

- Disposable masks
- Cloth masks
- Non-latex Gloves (S, M, L, XL)
- Gowns
- Face Shields OR Goggles / Eye Shields

Gloves will be used for the following activities:

- During personal care activities
- While assisting clients with dining
- While cleaning, sanitizing and disinfecting
- While preparing food

Additional Guidance on Using Gloves:

After removing gloves for any reason, hand hygiene should be performed with alcohol-based hand sanitizer or soap and warm water.

Previously removed gloves should not be re-donned as the risk of tearing and contamination increases. Therefore, disposable glove “re-use” should not be performed.

To reduce cross-contamination, disposable gloves should always be discarded after the following instances:

- Visible soiling or contamination with blood, respiratory or nasal secretions, or other body fluids occurs.
- Any signs of damage (e.g., holes, rips, tearing) or degradation are observed.
- After assisting clients with activities of daily living, activities requiring contact and personal care.
- If gloves come in contact with another client.

Programs shall follow CDC infection control guidelines designed to protect individuals from exposure to diseases spread by blood, bodily fluids, or excretions that may spread infectious disease. Health precautions include, but are not limited to, the use of PPE, proper disposal containers for contaminated waste, hand washing and proper handling of bodily waste.

Non-latex gloves shall be provided and used for the clean-up of blood and bodily fluids;

Used gloves and any other materials containing blood or other bodily fluids shall be thrown away in a

lined, covered container.

Blood Borne Pathogens

Only material saturated/dripping with blood is considered medical waste and must be stored and disposed of pursuant to any regulations. Materials such as Band-Aids, tissues and others with minimal blood are not considered medical waste and can be placed in regular garbage.

Contaminated clothing shall be sealed in a plastic container or bag, labeled with the participant's name, and returned home with the participant at the end of the day. Sharps waste shall be stored and disposed of in appropriate sharps containers with the word biohazard and the universal biohazard symbol.

Many clients require unique supports which may make it less possible to practice social distancing and will require ample staff support to carry out the necessary hygiene practices.

Staff must be prepared to provide hands-on assistance to participants who require additional support with activities of daily living such as feeding, toileting, and changing of clothes.

To protect themselves, staff who care for participants requiring hands-on assistance for routine care activities, including toileting, feeding, washing, or dressing, and other direct contact activities must wear a gown or a long-sleeved, button down, oversized shirt (or other type of garment) over their clothing and wear long hair up or tied back during all activities requiring direct contact with a participant.

Staff must change outer clothing if body fluids from the participant get on it. Staff must change the participant's clothing if body fluids get on it. Soiled clothing must be placed in a plastic bag until it can be sent home with the participant to be washed.

PLAN FOR PERSONAL PROTECTION EQUIPMENT PROCUREMENT

Sunshine Village has processes for procuring and tracking PPE. Prior to the initial opening of any SSV program, the organization will have a minimum of a two-week supply of all necessary items.

A minimum of two vendors have been identified for all PPE items.

Each building will have a PPE supply storage and the Program Manager is responsible for maintaining supplies.

PLAN FOR TRANSPORTATION

Sunshine Village will begin providing transportation on May 3, 2021 to clients who meet identified standards and then it will be expanded in phases. Timelines for phases is unknown as they are dependent on restrictions being lessened. Please refer to the Transportation Control Plan that was established on May 3, 2021 and revised as needed for details specific to operations.

All Drivers will receive the training listed in this plan as well as additional training specific to

transportation.

PLAN FOR PROGRAM CLOSINGS

If SSV were to close a program after reopening, a communication plan will be followed to notify all appropriate stakeholders, including clients, families/caregivers, residential providers, employees, funding sources and the appropriate Board(s) of Health.

PLAN FOR MEALS AND SNACKS

- All employees and clients will bring in their own lunch, snacks and beverages and keep food, as needed, in insulated cooler bags. Bags are not to touch other peoples' property.
- All snacks provided by SSV will be pre-packaged.
- SSV will have pre-wrapped utensils available at each site and utensils will be disposed of after use.
- Paper plates and napkins will be available and will be disposed of after use.
- Clients and employees will maintain social distancing rules while enjoying meal breaks.
- Staff who are assisting clients during meal and snack times will ensure that proper PPE is used, including gloves.
 - Gloves will be changed after assisting each client if any part of the gloves come in contact with the client.

FOOD SAFETY

- Whenever possible, snacks must be pre-packaged or ready to serve in individual portions to minimize handling and preparation. Meals shall not be served family style.
- To minimize potential spread of infection and to promote social distancing, cafeterias must be avoided. Clients and staff will eat lunch in their assigned program area.
- Multiple participants shall not use the same serving or eating utensils.
- Each client must have their own drink ware.
- Sinks used for food preparation must not be used for any other purposes.
- Staff and clients will be encouraged to wash hands prior to and immediately after eating and must wash their hands before preparing food.
- If helping clients to eat, staff must wash hands before and after.
- Tables and chairs used for meals need to be cleaned and sanitized before and after use.
- All food contact surfaces, equipment, and utensils used for the preparation, packaging, or handling of food products must be washed, rinsed, and sanitized before each use.

MEDICATION ADMINISTRATION PLAN

- Sunshine Village has a comprehensive Medication Administration Plan.
- Anyone requiring a nebulizer treatment will not be able to have this treatment while at Sunshine Village.
- The plan now requires all clients administered medications to either wash hands or use hand sanitizer prior to taking medication and after taking prescribed medication.
- All nursing personnel and staff who are MAP certified will be required to read the updated policy and sign an attestation of understanding.

CONTROL ACCESS

- **Visitor Policy:** Visitors will not be allowed to enter any building operated by SSV without prior authorization from the Program Manager.
- **Vendor Policy:** See Safe Vendor Policy above
- **Signage:** All sites will have signage on doors noting compliance with Emergency Orders.
- **Technology:** SSV will use approved video platforms such as ZOOM and Facebook for virtual meetings. SSV has established a Client Technology Program Information sheet and has posted it on the agency's website.

PLAN FOR COMMUNITY ACCESS

- Until restrictions involving transportation are lifted, SSV will not be supporting clients in activities away from SSV programmatic sites. When restrictions are lifted or modified and community engagement activities are resumed, SSV will follow guidelines established by DDS.

EMPLOYEE TRAINING

- All SSV employees are trained in proper hand washing techniques, social/physical distancing, storing and disinfecting equipment, and cleaning and disinfecting surfaces and signs and symptoms of illness.
- The COVID19 Pandemic Preparedness Training Series, which was administered to all employees, includes:
 - COVID 19 Q&A
 - Preparing for Pandemic Influenza
 - Infection Control: The Basics
 - Infection Control: Airborne Precautions
 - Infection Control for Healthcare Professionals
 - Blood borne Pathogens and Standard Precautions
 - Transmission-Based Precautions
 - Hand Hygiene: The Basics
 - Hand washing (Video)
 - Social Distancing (Video)
 - Cleaning Techniques (Video)
 - Personal Protective Equipment
- All new staff will need to complete this course prior to working at a programmatic site.
- For staff returning from inactive status, an amended Pandemic Series will be administered as a refresher course.
- Each program and/or worksite will provide additional training specific to their service types and locations, in compliance with state and federal guidelines.
 - Additional trainings will be completed monthly through 2020.
 - Posters with reminders about how to “stop the spread” will be placed throughout all buildings and maintained through 2020.
 - The Mandatory Safety Standards for Workplaces will be placed on all Employee Bulletin Boards and remain there through 2020.
- SSV will require that all employees read the newly developed Covid-19 Control Plan and this will be documented in their personnel files. The Covid-19 Control Plan is available on the agency's website.

- Employees will be encouraged to use the Employee Assistance Program or other community resources for support when needed.

CLIENT TRAINING

- All clients will be provided with training in proper hand washing techniques, respiratory etiquette, social/physical distancing, signs and symptoms of illness and cleaning and disinfecting surfaces, as able and applicable.
 - Each program and/or worksite will provide additional training specific to their service types and locations, in compliance with state and federal guidelines.

SUNSHINE VILLAGE REQUIREMENTS

- The Program Manager at each worksite is the designated COVID-19 primary point person responsible for compliance.
- The Director of Human Resources is the secondary COVID-19-point person.
- These Mandatory Safety Standards are newly implemented policies that all employees will be expected to comply with. Failure to comply may result in disciplinary action, up to and including termination.
 - Falsification of any issue related to a COVID-19 status (vaccination status, test results, exposure etc.) will be considered a serious enough offense to result in termination of employment or discharge from services.

Each worksite must also have the following in place:

- A COVID-19 Control Plan completed and available for inspection by SSV, the Department of Public Health (DPH), town/city inspector, or other licensing entities.
- A Compliance Attestation Poster, signed by the executive director, and posted at the entrance to each building which is visible to employee, clients, and visitors.
- The Employee Mandatory Safety Standards poster posted on the Employee Bulletin Board at each site.
- The Employer Mandatory Safety Standards reviewed by all managers and those with supervisory responsibility and kept in a central location for managers to review and ensure compliance.

INTRODUCTION

Sunshine Village (SSV) seeks to ensure the safety of all its employees, clients, visitors, vendors and friends by adhering to the guidelines established by the Commonwealth of Massachusetts, the Center for Disease Control (CDC), and Executive Office of Health and Human Services (EOHHS) relative to COVID-19 to prevent the spread of transmittable diseases such as COVID-19. The protocols contained in this plan comply with – or exceed - state and federal social and business guidelines. The plan includes policies, protocols and directions.

During the various phases of the organization’s reopening, changes may be made to this plan at any time – either at the direction or change from a regulatory body or at the discretion of Sunshine Village. The plan will apply to any and all open programs and sites as the agency may not open all programs and sites at the same time.

This plan will be available on the organization’s website so that it is accessible to all stakeholders.

As part of its REBUILDING PLAN, Sunshine Village plan on providing the following array of services, if funding and regulations allow:

IN PERSON SERVICES: In Person Services are provided at a location operated by the organization – including Supported Employment; CBDS; Day Hab; FUSION supports.

VIRTUAL SERVICES: Virtual Services are services that are provided through the use of technology. This would include small group communication platforms including ZOOM and Facebook Live as well as the utilization of the organization’s website.

REMOTE SERVICES: Remote services will include those supports that are provided at locations that are not controlled by the organization; including: In Home Supports (at a person’s home); In Community Supports (which would be support in the community without a connection to a site); and supports through the Great Outdoors Program (which are supports that are provided outside of buildings.)

ANCILLARY SERVICES: These services provide the necessary support to the programmatic services listed above and include: Clinical and Therapeutic Services; Nursing Services; Administrative Services and Transportation.