Albertina Kerr Pandemic Response Plan for COVID-19

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This COVID-19 plan is an extension of Albertina Kerr’s Enterprise Emergency Management Plan and Kerr’s General Infection and Prevention Policy. This plan was updated on 12/03/2020. This plan will be updated based on recommendations or mandates by federal, state, county, and local authorities. The plan’s administrator is Owen Gibson, MA, CHC, Albertina Kerr’s Chief Compliance Officer. This plan will be reviewed every 90 days. Any communications initiated by Kerr’s CEO, after the date noted above, will supersede anything noted in this document if those communications conflict with this plan. Also, please note that this document AND Kerr’s General Infection and Prevention Policy are to be referenced in preventing the spread of COVID-19.

This plan applies to all employees, volunteers, and clients of Albertina Kerr.

What is COVID-19?
Adapted from the World Health Organization:

Coronavirus disease (COVID-19) is an infectious disease caused by a newly discovered coronavirus.

Most people infected with the COVID-19 virus will experience mild to moderate respiratory illness and recover without requiring special treatment. Older people and those with underlying medical problems like cardiovascular disease, diabetes, chronic respiratory disease, and cancer are more likely to develop severe illness. Those people experiencing developmental disabilities are also highly vulnerable to experiencing complications or more severe symptoms or even death.

The best way to prevent and slow down transmission is to be well informed about the COVID-19 virus, the symptoms it causes, and how it spreads. Protect yourself and others from infection by washing your hands or using an alcohol-based rub frequently and not touching your face. One of the best protections is to wear a mask around others and to maintain social distancing, both at work and when not at work.

The COVID-19 virus spreads primarily through droplets of saliva or discharge from the nose when an infected person coughs or sneezes.

Effective immediately and until further notice, the following pandemic response plan must be implemented across all Kerr service locations and sites in response to the COVID-19 Pandemic.

In this unprecedented time, Kerr is dedicated to minimizing the impact of COVID-19 on Kerr’s community of clients, staff, and families. To that end, Kerr has implemented several strategies and changes to services to keep everyone safe. Kerr is dedicated to staying current and implementing the recommended actions needed to limit the spread of COVID-19.

Initiation of Emergency Management Team
Kerr has initiated a Level 4 Emergency Management Team to manage the COVID-19 Pandemic. This team of leaders and staff within Kerr are meeting, 5 times per week, to address the needs of clients and staff during this crisis. Leadership members are available 24 hours a day/7 days a week to address
staff, client, family, and community needs. Kerr maintains an Emergency Management Plan that guides Kerr’s response to natural and other disasters.

State Guidelines
Kerr programs are currently being guided by state guidance and mandates issued by the Oregon Department of Human Services and Oregon Health Authority to address COVID-19.

Summary of actions taken to date to limit the spread of COVID-19 within Kerr’s community:

- Staff are required to wear a mask at all times while in a Kerr facility or vehicle unless they are alone in a separate office enclosed by four walls and a closed door. Staff should maintain social distancing as much as possible. Clients should be encouraged to wear a mask when they are in any common area.
- All programs have implemented enhanced sanitation at all sites. All sites, at a minimum, will be sanitized each business day. For all programs providing 24-hour care, sites will be sanitized every 8 hours. Logs of sanitation will be completed and retained. Staff will use disinfectants that kill COVID-19 and are approved by Kerr’s Facilities department.
- Kerr has deployed an updated Infection and Prevention plan to mitigate COVID-19 exposure.
- Kerr has closed all group day and community programs until further notice.
- We have permanently closed most Social Enterprise Businesses. Kerr Bikes will open based on Multnomah County’s open/closed planning.
- Any person entering a Kerr program site or office, including staff, will be screened for symptoms of COVID-19. Those exhibiting COVID-19 symptoms are being excluded from the workplace.
- We have significantly limited visitors who are allowed in a Kerr facility.
- All routine Outpatient Mental Health Services are moving to Telehealth visits to limit exposure.
- Administrative staff, if able, are working at home.
- We have limited staff and group meetings to video conference only.
- For limited in-person training, all staff will maintain 6 feet distance, and each training space will have 35 sq. ft. per person.
- We are limiting staff’s travel from worksite to worksite.
- We have limited the places where group home youth and staff may visit.
- Staff are staying home if they have any symptoms of COVID-19. We are working with staff to limit their loss of wages during this time. Albertina Kerr will arrange for COVID-19 testing in the case of a workplace exposure at no cost to the employee. Staff may also seek testing through their primary care as an alternate if desired.
- Kerr is communicating regularly with clients, staff, parents/guardians/personal representatives, and the community.
- We will track COVID-19 exposures within our agency and respond quickly to address any outbreaks.
HVAC systems have been reviewed and are maximized to provide the highest level of fresh air or filtering based on the equipment specifications. When possible, windows should be opened to allow for fresh air circulation.

An Exposure Risk Assessment has been completed for employees at Kerr. Kerr will follow all recommendations and mandates by local, state, and federal government agencies.

Kerr staff are participating in all state conference calls to stay abreast of best practices and to implement recommended and required mandates.

Official Pandemic Communication Procedures and Channels.
As COVID-19 evolves, clear lines of communication become even more essential for the protection of everyone involved with the agency, and the following communication procedures are enacted. To ensure rapid and reliable communication, this plan and all future agency directives related to COVID-19 will be communicated through the following communication channels:

- Emails sent by the CEO or sent on his behalf
- Posts in the official Coronavirus Teams channel by the CEO or designee.
- Posts on Kerr's website (external and internal) by Kerr’s Development Department.
- Alerts through Paycom mobile.
- Virtual Employee Town Halls
- Direct phone calls from leadership as needed or requested.

If there is conflicting information relayed to the Kerr community, communications and instructions from Kerr’s CEO are to be followed until clarification of the conflict can be resolved.

Keeping informed of the response
Kerr has a duty to keep everyone involved informed as the COVID-19 Pandemic evolves. In addition, everyone involved must keep themselves informed of this plan and any future agency directives related to COVID-19.

The following actions and expectations are now in effect.

1. **Posted Notices**: Notices will be posted outside the front door of each location to inform any visitors of the requirements of this plan, including a sign that specifically requires masking while in the building. Other required posters, including the “Covid-19 Hazards Poster” will be placed in a visible place in the workplace.

2. **Keeping informed as a staff**: All staff shall monitor Kerr communications to stay informed of the agency's response, as well as future agency directives related to COVID-19 and take actions as directed through official communication channels.

3. **Keeping families and friends informed**: Family and friends of clients are encouraged to stay informed by monitoring Kerr’s website, remain in contact with the program and the client
Communicating barriers to this plan

This plan relies on everyone involved to communicate when obstacles arise, including resistance to implementing any part of this plan and future directives, there are an inadequate supply of personal protective equipment or other essentials, or unforeseen situations that may elevate the risk of exposure.

Barriers to this plan must be reported promptly and directly to the Program Manager (or their designee), and:

- Quickly addressed by the manager whenever possible, or
- The manager should seek out their Assistant Director or Director for guidance.
- The Director will escalate issues to the Crisis Management Team as needed.
- You may contact a Senior Leadership Team member, at any time, if other communication channels are not sufficient to address your concern.

Avoiding the risks of misinformation

The risk of misinformation leading to fear and irrational action increases during a pandemic, and irrational action increases the potential for exposure. It is essential for us all that everyone involved with Kerr remain calm, stay focused on the available facts, and enact this plan to the fullest. To help avoid misinformation, use the following guidance:

- Speculation about COVID-19 at any Kerr location is strongly discouraged, especially in the presence of the people we support.
- Refer to official announcements from Kerr, as well as state and local governments.
- Communicate directly with supervisors, and avoid spreading rumors, conspiracies, or gossip about COVID-19. Staff should refrain from forwarding questionable information to other Kerr employees.
- Reference this plan as questions arise. If a situation is not addressed by this plan or any future agency directives, follow the procedure for Communicating barriers (above).

Immediate Precautions

During COVID-19, reasonable precautions are essential for the protection of everyone involved with Kerr. In support of this, the following precautionary measures are required at all Kerr locations:

Mandated Universal Masking

Until further notice, all staff, in all locations, are required to wear a cloth face covering or mask at all times unless they are working alone in an office that is separated by others with 4 walls and a closed
Employees may not opt-out of this new requirement. This change is being mandated by Oregon’s Department of Human Services, and similar mandates already exist in most other congregate care settings. Studies have shown that wearing cloth face masks significantly reduces the risk of transmission of COVID-19. Each staff has been issued two cloth masks while at work. If an employee needs a replacement mask, Kerr will supply it to them at no cost.

All occupants must wear masks at all times if they are in a vehicle with another person. This masking requirement includes any clients served.

**Enhanced Sanitation Measures**

These sanitization measures are required to reduce the likelihood of transmission within each Kerr location. Each site has a recently updated Kerr General Infection Prevention Policy for reference.

Staff should follow Albertina Kerr’s General Infection and Prevention plan for how to clean the site.

All staff will remain currently trained in Kerr’s infection control training and other trainings designed to reduce the spread of COVID-19.

All worksites must be sanitized each business day, at minimum.

For all programs that provide 24-hour care, sanitation must occur every 8 hours. Sanitation logs will be completed at the time of the cleaning and maintained for inspection.

Sanitizing expectations include:

1. Sanitize all high-touch surfaces, including but not limited to:
   a. Doorknobs
   b. Light switches
   c. Remote controls
   d. Pens or pencils
   e. All cell phones and landline phones
   f. Touchscreens/keyboards
   g. All bathroom and kitchen surfaces
   h. Tablets or other devices
   i. Any other shared item

2. Sanitize all adaptive equipment and devices upon return from the community, including but not limited to:
   a. Wheelchairs
   b. Walkers
   c. Any other equipment or devices taken into the community

3. All persons within a Kerr facility (staff, clients, and visitors) will be required to wash hands with soap and water for at least 20 seconds after:
a. Arriving at a Kerr location.
b. Coughing or sneezing,
c. Before and after handling food or potentially infectious material,
d. After providing care for yourself or others,
e. Putting or taking off a mask or other PPE,
f. When returning from the community.

Note: Alcohol-based hand sanitizer can be used if handwashing is not possible. You should wash your hands as soon as that option is available. Soap and hand sanitizer are available for staff and client use. Because some hand sanitizer contains alcohol, those types of products should not be left unsupervised with clients.

4. All program sites will notify all staff, clients, and visitors, verbally, and in writing of the requirements of:
   a. Completing screening requirements before entry.
   b. Denial of entry if the person fails screening requirements.
   c. Handwashing (see above).
   d. Social distancing of 6 feet.
   e. Notifying the Kerr program manager if they develop symptoms for suspected or presumed COVID-19 after they visit the program.
   f. Other precautions based on the home, unit, or client needs.

5. All required state issued notices will be posted in all work sites.

Distribution of PPE and Sanitizing Supplies
Kerr Facilities maintains a centralized supply of PPE and sanitizing supplies. All locations are expected to communicate, through the Program Manager, to facilities to obtain additional supplies as needed. Program managers will also communicate, weekly, their current stocks of PPE and other sanitizing supplies to facilities. Kerr Facilities is continuing to track and acquire materials as they become available.

Each location is expected to have the following PPE and sanitizing supplies:

- Cloth facial coverings and surgical masks
- Disinfecting supplies (wipes, sprays, bleach solution, etc.)
- Gloves
- Hand Sanitizer
- Emergency use supply of surgical masks for at least 48 hours of operation before a 14 day kit of supplies is delivered
- Face shield

As needed during an outbreak at the site, programs will be issued the following based on availability and need:
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- Additional surgical masks and N95 masks for those staff that are fitted (see Use of Protective Facial Covering and Masks)
- Protective eyewear
- Protective gowns

Distribution of Food and Medications
Albertina Kerr is in continual contact with its pharmacy to ensure that medications are delivered to programs as needed. Also, Kerr is working to ensure that programs have the food and other supplies needed during this event. Programs will continue to maintain emergency food and other supplies in the case of a sudden loss in the availability of food and other essential materials.

Agency Protective Measures
These measures are required to reduce the likelihood of transmission between Kerr locations and prepare for potential quarantine of one or more Kerr locations.

1. Use of cloth masks unless working alone in an office separated by four walls and a closed door. Employees may remove masks while on a meal break. However, they must maintain a social distance of at least 6 feet from others when their mask is removed during meals. Staff should, if at all possible, eat their meals in a separate space away from other people.

2. Limit any group gathering of staff. All staff meetings will be held via phone or video conference. Communicate through established team huddles.

3. Minimize staff traveling from site to site.

4. Offer other essential meetings in a virtual format (Teams) or phone, whenever possible for internal or external meetings.

5. Cancel all non-essential training that can be postponed at Kerr sites. Continue with essential training to ensure staff has the tools needed to address health and safety needs. Training spaces must allow for 6 feet of separation between participants and at least 35 sq. ft. per person.

6. Program support and administrative staff will work from home whenever possible.

7. Implement the Quarantine Procedure if anyone at a group home within the last 5 days is credibly believed to have been exposed to a confirmed COVID-19 case.

8. Implement Isolation Procedures if a supported person at a group home has signs or symptoms of COVID-19, is pending screening, or is confirmed infected with COVID-19 by a qualified healthcare professional.

Use of Protective Facial Covering and Masks
Below are the type of facial coverings that are available to employees during the COVID-19 Pandemic. There are 4 categories of coverings:
1. **Face Shield:** Full face shields will be made available at all program sites. Face shields will be used when in close contact with a COVID-19 positive client. Face shields are to be disinfected after each use and are reusable. You must also wear a surgical mask along with the face shield when working with a COVID-19 positive client. **A face shield alone does not provide respiratory protection, and a mask must also be used at the same time.** If unavailable, safety glasses may be substituted for a face shield when accompanied by the correct type of mask.

2. **Cloth Mask/Facial Covering:** These are handmade or professionally made 2 ply cloth masks that should be worn when not working with someone diagnosed with COVID-19. These masks are the type worn by staff for universal masking. The mask should cover both your nose and mouth. Masks must be at least 2 ply and cannot have a valve attached. These masks may be worn throughout your shift. Please launder the mask before your next shift. Clean your hands before putting your mask on, and after you take it off. Additionally, clean your hands if you touch the front of the mask while you’re wearing it.

3. **Surgical Mask:** These masks vary in appearance. These masks are used when employees are working with a client diagnosed with COVID-19. These masks do not need to be professionally fitted for the employee. To use, wash hands with soap and water and place the mask over your nose and mouth. With your hand, form the metal piece on the nose so the mask fits, and there are no gaps. The mask must cover both your nose and mouth. When you breathe in deeply, the sides or front of the mask should move slightly inward or deflate (look in a mirror). Type 5 and 6 masks (see grid below) may not move or deflate as they are much more rigid. You may wear the same mask as long as you are working with the same infected client. However, if you begin to work with another client, are taking a break, etc. please dispose of the used mask first and get another clean one. Most staff will use 4-5 (or more) surgical masks during a shift if they are working with a COVID-19 client. Clean your hands before putting your surgical mask on, and after you take it off. Additionally, clean your hands if you touch the front of the mask while you’re wearing it. A single surgical mask should not be worn for more than 6 hours before disposing of it and replacing it with a new one.

4. **N95 Mask:** These masks are used when employees are working with a client diagnosed with COVID-19, who also has a severe cough or requires an aerosolized generating procedure. These types of masks can be professionally sanitized. When you are done with the mask for the day, place the mask in the designated bag to be professionally cleaned. If you can, you can reuse the same mask with the same client during the day. For example, you would use the N95 mask when working with the COVID-19 positive client. Once done, store the mask in a way that other staff or client can’t accidentally use or touch the mask. Then don a surgical mask when working with other staff or other clients. When you go back to the COVID-19 client, put the N95 mask you were using back on, being careful to not touch the front of the mask. If you are in doubt that you can reuse the same mask safely with the same client, go get a clean N95 mask and place the dirty mask to be sanitized. **Clean your hands before putting**
your mask on, and after you take it off. Additionally, clean your hands if you touch the front of the mask while you’re wearing it. **N95 masks must be professionally fitted to the employee to ensure they are effective. You will set up an appointment with Human Resources for a mask fit session.** Generally, N95 masks are used when a COVID-19 positive client is exhibiting severe coughing, sneezing, shouting, or has an Aerosolized Generating Procedure (AGP). These procedures include:

a. CPAP or BiPAP machines  
b. Oral/Airway suctioning  
c. Receiving oxygen  
d. Nebulizer treatments  
e. Wound irrigation  
f. A client with a tracheostomy  
g. Manual cough assist  
h. Collection of sputum  
i. Nasopharyngeal swab sample collection  
j. Oropharyngeal swab sample collection  
k. Nasal wash sample collection  
l. Cardiopulmonary resuscitation

Below is a current review of masks that are currently in stock at Kerr. The Facilities Department monitors all level of inventory of PPE and orders items as needed to ensure that protective equipment is available for staff use.

<p>| Cloth Masks/Facial Covering | Description | Homemade cloth masks all have the same effectiveness. Masks must have 2 layers of fabric and cannot have any one-way valves attached. “Gators” or bandanas are not acceptable masks. | homemade or professional’s made mask. Varied styles and colors. | To be used when 6 feet or less of another employee or client. Not for use when working with someone with COVID-19. Mask can be laundered and re-used. Each employee has either been issued a mask (Group Homes) or has access to a mask when they arrive at work (Subacute). |</p>
<table>
<thead>
<tr>
<th>Surgical Masks</th>
<th>Description</th>
<th>Type 1 Surgical Grade Mask is suitable for working with someone with COVID-19 without aerosolized procedures. You do not need to be “fitted” for this kind of mask. Should be disposed of at the end of the shift (do not launder).</th>
</tr>
</thead>
<tbody>
<tr>
<td>KN95 imprinted Left and Right Covered Nose Piece</td>
<td>All Types 1-19 have the same effectiveness.</td>
<td></td>
</tr>
<tr>
<td>KN95 imprinted Left and Right Covered Nose Piece</td>
<td>Type 2 Surgical Grade Mask is suitable for working with someone with COVID-19 without aerosolized procedures. Should be disposed of at the end of the shift (do not launder).</td>
<td></td>
</tr>
<tr>
<td>KN95 imprinted Left and Right Covered Nose Piece</td>
<td>Type 3 Surgical Grade Mask is suitable for working with someone with COVID-19 without aerosolized procedures. Should be disposed of at the end of the shift (do not launder).</td>
<td></td>
</tr>
<tr>
<td>KN95 imprinted Right and exposed Covered Nose Piece</td>
<td>Type 4 Surgical Grade Mask is suitable for working with someone with COVID-19 without aerosolized procedures. Should be disposed of at the end of the shift (do not launder).</td>
<td></td>
</tr>
<tr>
<td>Description</td>
<td>Type 5 On Hold</td>
<td></td>
</tr>
<tr>
<td>-------------</td>
<td>---------------</td>
<td></td>
</tr>
<tr>
<td>No Marking - Broad Single Strap</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Description</th>
<th>Type 6 On Hold</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Marking - Single thin strap with Nose Piece</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Description</th>
<th>Type 7-19</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Marking. Square blue mask with earloop style</td>
<td></td>
</tr>
</tbody>
</table>

**N95 Masks**

<table>
<thead>
<tr>
<th>Description</th>
<th>All Types A-B have the same effectiveness.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Description</th>
<th>Type A</th>
</tr>
</thead>
<tbody>
<tr>
<td>3M 8000 or 8210 Mask printed on the front.</td>
<td></td>
</tr>
</tbody>
</table>

**Type A**

N95 Grade Mask is suitable for use when working with any COVID-19 client. It should be reserved for those clients with severe coughing symptoms or with aerosolized procedures. It can be professionally sanitized. Do not throw away this mask. **You must be fitted, tested, and approved to wear a N95 mask. An unfitted N95 mask is LESS effective than a surgical mask.**

<table>
<thead>
<tr>
<th>Description</th>
<th>Type B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gerson 1730 printed on bottom</td>
<td></td>
</tr>
</tbody>
</table>

**Type B**

N95 Grade Mask is suitable for use when working with any COVID-19 client. It should be reserved for those clients with coughing symptoms or with aerosolized procedures. It can be professionally sanitized. Do not throw away this kind of mask. **You must be fitted, tested, and approved to wear a N95 mask. An unfitted N95 mask is LESS effective than a surgical mask.**
Staff must be “fitted” to wear an N95 mask. An N95 can't protect you if it doesn't fit your face. Certain respirators, known as tight-fitting respirators, must form a tight seal with your face to work properly. If your respirator doesn't fit your face properly, contaminated air can leak into your respirator facepiece, and you could breathe in hazardous substances. Before you wear a tight-fitting respirator at work, a Kerr designated staff must be sure that your respirator fits you. Kerr will do this by performing a fit test on you while you wear the same make, model, and size of respirator that you will be using on the job. That way, you know that your respirator fits you properly and can protect you, as long as you use it correctly. Only a Kerr staff member or another person specially trained may administer a fit test.
**Cloth Face Covering**
Covers your mouth and nose. May help reduce spread of virus, prevent those with virus but no symptoms from passing it to others.
- Recommended that anyone providing care to people with I/DD wear cloth mask or face covering
- Can be homemade
- People with I/DD should wear a cloth mask or face covering when they go out in public, or if they are showing signs of illness
- **Not for use with COVID-19 positive individuals**

Snug & Comfortable  
Ties or Ear loops  
Multiple layers  
Able to be laundered/dried

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**Surgical Mask**
Minimum protection required for suspected or positive COVID-19 cases. Covers your mouth and nose. May help reduce spread of virus, prevent those with virus but no symptoms from passing it to others.

Snug & Comfortable  
Ties or Ear loops  
Multiple layers  
Disposable

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**N95**
Ideal protection required when working with an individual suspected or positive for COVID-19 in any setting.
- Identified by having “N95” stamp
- Follow OSHA guidance for fit testing
- Must be used for aerosolizing procedures for anyone who has COVID-19

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**Other Personal Protection**
Those working with people with I/DD who have COVID-19 or in environments where the disease is present may have a safety plan that includes other PPE like gloves and goggles.

Remember: Wash or sanitize your hands before touching your eyes, nose or mouth.
Other PPE available to staff:

**Disposable gowns:** These gowns are to be used when working with an infectious client. They are to be disposed of after each use.

**Gloves:** Nitrile or other types of gloves are available in different sizes and may be used if there is any concern about touching bloodborne or other pathogens or any other duties where needed to prevent transmission to the staff. Gloves should not be washed or reused. Gloves should be disposed of after each use and after each client interaction.

Screening for symptoms of COVID-19

To reduce the risk of spreading COVID-19, Kerr is implementing a screening process that will be completed for all persons, including employees, clients, and professionals entering all locations. Kerr staff will ask anyone entering the site to answer a few questions so that staff can complete a COVID-19 Screening log. The form will ask if they are experiencing any symptoms of the COVID-19 virus, if they have been exposed to the virus or are being tested, or if they have recently traveled to a country that has been significantly impacted. This screening may be updated based on directions from OHA/DHS or ODDS.

Any visitor that answers YES to any screening questions OR has a fever of 100.4 (or higher) may not enter the facility. If an employee or client responds YES to any screening question or has a fever of 100.4 (or higher), staff will contact their supervisor immediately, don a surgical mask, and the staff will not have close contact (less than 6 feet) with anyone within the site until they receive further instructions from a supervisor.

Additionally, for all sites, we ask all employees and professional visitors to take their temperature before entering the site each day. Kerr staff will provide a method for taking temperature as a part of the screening process. We will take every client’s temperature each day and when returning from a home visit.

Documentation of all screenings will be maintained for inspection by state agencies, as requested.

Due to the significant need for services, Kerr is currently allowing new admissions into Group Home and Subacute services. All new entries will be screened for COVID-19 symptoms prior to admission. Those new admissions with suspected or presumed COVID-19 will not be allowed to enter programs until they are medically cleared. Also, if a home or program has a suspected or confirmed case of COVID-19, new admissions to that program will be halted until the infection has passed.

Limiting those that enter Kerr programs

During the COVID-19 pandemic, in-person visits from family and friends of the people we support may be limited inside Kerr Group Homes. Visits will be based on the current status of the county in which the group home resides and by rules set by Kerr’s licensing bodies. Some counties may be on “pause”
or “high risk” where visitors are not allowed. Visitors should contact the program ahead of time to know if visitations are currently allowed. Virtual visits via phone or video chat are encouraged. Parents, guardians, personal representatives, or family may take a client on a visit away from the home. However, they must limit the client’s exposure to COVID-19, including not being around someone that may have or was exposed to COVID-19, and avoid groups of people or other precautions that help promote social distancing.

Visits from case managers and other officials may continue but should be limited to the minimum necessary. Any professionals will be screened for COVID-19 and will not be allowed into the facility if they do not pass the screening. All professionals must follow staff instructions regarding physical distance from others and handwashing when entering and leaving, etc.

For Subacute only, family members are allowed to visit to participate in treatment if approved by the clinical team on a case by case basis. Families are limited to 2 people per visit, and no youth under the age of 12 is allowed to visit. We will also encourage families to remotely visit with clients or participate in therapy via video or phone. Family visitors must also complete the screening process and also have their temperature taken before visiting the facility and where masks while visiting.

Please note that Public Health may restrict visitors, regardless of any county or licensing rules, in the event of an outbreak at a Kerr facility.

In addition, we are taking the following precautions:

- When possible, staff and clients will maintain a personal space of 6 feet within the home.
- Client will be encouraged to wear masks when they are not in their rooms.
- Kerr will suspend large-group community activities involving more than ten people, including but not limited to:
  a. Day programs
  b. Church
  c. Cinemas
  d. Dining-in at restaurants
  e. Bowling
  f. Arcade
  g. Swimming
  h. Public mass transit
  i. Community classes, etc.
- Staff may not utilize public mass transit for group outings. Staff will utilize agency vehicles for transportation needs and sanitize the vehicle upon return. All staff and clients are required to wear a mask while in a vehicle. If a client’s medical condition prohibits the use of a mask, staff should contact the program's Director to develop a plan to safely transport the person as needed.
• Staff will ideally limit community activities to open-air places. Distances of at least 6 feet should be maintained (unless directed otherwise by a person’s ISP) on outings between staff, the person(s) supported, and the public.

Supporting the people we serve
During COVID-19 pandemic, the people we support may experience increased challenges, behaviorally, and emotionally. To help minimize these challenges, the following will occur:

- Training for staff on approaches and communication techniques that promote staying calm and offering distraction and redirection at home, including but not limited to:
  - Fun activities, such as crafting and other hobbies
  - Movies, games, and music
  - Cooking
  - Gardening
  - Meditation
  - Physical activity, such as walks
  - Phone calls and virtual meetings with friends and family
  - Drives to parks or other open spaces where there are no crowds and allow for social distancing (unless prohibited by a shelter in place order).

- Behavior Support and program staff will update individualized plans for people who face challenges as a result of this Pandemic. Behavior Support Specialists will work with the team to develop plans that will reduce behavioral challenges during this crisis.

- Each person’s ISP and Safety Plan will be followed, to the best of Kerr’s ability, during COVID-19. If Kerr is unable to follow an established Safety Plan, we will notify their case manager, as soon as possible, to develop a plan to ensure the safety needs of the client in care.

Supporting staff
Kerr is focused on the physical and emotional safety of all clients and employees. As caregivers, it is especially crucial during this time to practice good self-care. There are several resources available through Kerr’s Employee Assistance Program, which can be accessed by phone (1-800-433-2320) by text (503-980-1777) or online (www.cascadecenters.com).

Additional resources can be found and shared on Kerr’s website, including Taking Care of Your Mental Health During an Infectious Disease Outbreak.

Staff Attendance and Shortages
All staff are expected to attend scheduled work shifts unless they have been exposed to a confirmed COVID-19 case or if they are experiencing symptoms. If suspected, staff shall follow the procedure for suspected exposure of staff or visitor (below).
As part of this plan, the Employee Handbook is modified so that absences due to suspected cases of COVID-19 will not be counted toward the agency’s attendance policy. Exceptions for other absences during COVID-19 will be evaluated by the CHRO on a case-by-case basis. Albertina Kerr is working to ensure that the staff loses as little pay as possible if they are not able to work due to illness.

Communicate with HR about your rights concerning Workers Compensation and short-term disability eligibility.

Kerr will ensure that we have appropriate staffing plans in place to meet the safety and support needs of clients, even if this necessitates changes to our usual staffing patterns or program designs. Specific strategies to address staffing needs and updates will be announced via our communication platforms.

All Kerr staff, each day, will be screened for symptoms or risk of COVID-19 infection and will complete the COVID-19 screening log before work. This includes taking their temperature before working with other staff or clients.

**Signs or symptoms to watch for**

Signs or symptoms that a person may be infected with COVID-19 illness include one or more of the following symptoms not related to a pre-existing diagnosis or condition.

1. Cough (usually dry) (most likely)
2. Fever and/or chills (most likely)
3. Shortness of breath (most likely)
4. Loss of taste (most likely)
5. Congestion or runny nose
6. Headache
7. Fatigue
8. Aches and pains
9. Sore throat
10. Diarrhea (possible, mostly in children)
11. Vomiting

**Suspected exposure of staff, visitor, or client**

Given the risk of harm to the people we support and staff, Kerr requires all staff and visitors to follow these procedures.

**Staff:** If you experience an onset of signs or symptoms before working, please contact your manager. Contact your Physician for further care instructions. Care is readily available through Kaiser, including virtual visits. **You will be asked to stay home until you are better. You may also be required to be tested for COVID-19.** If you are being screened (actively tested) or have been diagnosed with COVID-19, please contact Kerr’s HR Department as soon as possible. Also, Kerr will follow the process
outlined in the section of this plan titled State and County agency notification of confirmed or suspected COVID-19 cases (staff or clients).

**Staff:** If you experience an onset of signs or symptoms while at work:

1. Put on a surgical face mask and gloves immediately.
   Note: if PPE is not available, distance yourself from others by at least 6 feet.
2. Call your supervisor immediately to make arrangements to be absent from or leave work.
3. Contact your primary care physician for further instructions and testing.
4. If you are being screened (actively tested) or have been diagnosed with COVID-19, please contact Kerr’s Human Resources Department as soon as possible.
5. Kerr will follow the process outlined in the section of this plan titled State and County agency notification of confirmed or suspected COVID-19 cases (staff or clients).
6. Do not visit any Kerr location until cleared by your healthcare provider.

**Staff with a presumptive positive of COVID-19 (a person’s initial test was positive):**

1. Staff should notify Kerr’s HR Department and their manager as soon as possible.
2. The manager will contact the Assistant Director, Director, Chief Program Officer or CEO.
3. The COVID-19 Coordination Team will convene via Teams to address the issue.
4. The program will immediately switch to surgical masks for all staff. Clients will be encouraged to wear a mask.
5. The Coordination Team will arrange for testing of all clients, as well as staff who may have been exposed.
6. Clients, guardians, and staff who were exposed will be notified verbally as soon as possible and in writing within 24 hours.
7. Kerr will notify ODDS or OHA (depending on the site) of the issue as well as the person’s served CME. Kerr will also provide a list of any clients impacted.
8. Kerr will ensure heightened precautions at the location.
9. Kerr will contact and follow Public Health guidance on testing and all precautions.
10. Restrict the employee from returning until cleared by a Healthcare Provider
11. Clean any site as directed by Public Health
12. Initiate quarantine for any site or unit where that staff member worked
13. Kerr will follow the process outlined in the section of this plan titled State and County agency notification of confirmed or suspected COVID-19 cases (staff or clients)

**Staff with a suspected case of COVID-19 (a test for COVID-19 is in the process):**

1. Staff should notify Kerr’s HR Department as soon as possible.
2. Kerr will notify the person’s served CME.
3. Kerr will ensure heightened precautions at the site.
4. Restrict the employee from returning to work until cleared by a Healthcare Provider
5. Kerr will contact the CME regarding any test results and follow and instructions given by state or county agencies. If a staff member tests positive for COVID-19, we will follow the steps noted in the above section of this plan, Staff with a presumptive positive of COVID-19.

**Recent Visitors:** If you have a suspected or confirmed case of COVID-19 by a healthcare professional:

1. Notify the program manager of the program so they can initiate Quarantine Procedures.
2. Do not visit any Kerr location until cleared by your healthcare provider.
3. Kerr will notify ODDS or OHA of the potential exposure and will follow the same procedures as a staff member with potential exposure (see above).
4. Kerr will follow the process outlined in the section of this plan titled State and County agency notification of confirmed or suspected COVID-19 cases (staff or clients).

**Current Visitors:** If someone other than staff or a person we support is showing signs or symptoms while at a Kerr location:

1. Have the person don a face mask and gloves (as available)
2. Keep yourself and others at a distance of at least 6 feet
3. Ask them to leave the location as soon as it is safe to do so
4. Sanitize all high-touch surfaces, and
5. Notify the Program Manager

**Client with a presumptive positive of COVID-19 (a person’s initial test was positive):**

1. All staff should remove their cloth face-covering and put on the appropriate surgical mask (see Use of Protective Facial Covering and Masks above) from the COVID-19 Emergency Kit.
2. All staff should don gloves.
3. Kerr will implement Isolation and move the resident into their room.
4. Initiate home or unit quarantine.
5. Any staff working directly with the positive client should wear a face shield, gloves, and surgical mask (at minimum).
6. Contact the Director of the program immediately. Director will arrange for the delivery of a 14 day COVID-19 kit to the site impacted. Once delivered, staff will also use disposable gowns and n95 masks (if clinically indicated) when working with a positive client.
7. Kerr will notify ODDS or OHA (depending on the site) of the issue. Kerr will follow all instructions given by ODDS or OHA. Kerr will also notify the person’s served CME.
8. All clients, their guardians, and staff with potential exposure will be notified as soon as possible. Written notification will follow within 24 hours. Kerr will also follow Public Health guidance on how and whom to notify.
9. Those staff or clients that require testing, based on public health direction, will be either tested on site or through the person’s health care provider.

10. Kerr will maintain a log of all non-residents (including staff) who interact with the isolated client.


12. Kerr will ensure heightened precautions at the location.

13. Kerr will restrict internal group activities to prevent exposure (this includes group meals and recreation).

14. All staff will be provided and wear PPE when working with the client.

15. Clean any site as directed by Public Health.

16. Move residents to other group homes or sites if ordered by Public Health guidance and available.

17. Facilitate electronic communication between the client and family/friends.

18. Complete enhanced training and review of protocols with all staff and providers.

19. Provide all meals to the person in the isolation area.

20. Provide all supports, such as med. administration, to the person in the isolation area.

21. Keep doorways into the isolation area closed as much as possible.

22. If possible, identify a restroom that can be used only by the person or sanitize the bathroom after each use.

23. Keep other people we support at least 6 feet away from the person.

24. Sanitize all high-touch surfaces after each use.

25. If able and medically appropriate, other clients should wear a surgical mask. Surgical masks should only be worn for 6 hours and then disposed of and replaced with a new mask.

26. If medically approved, the client with COVID-19 should wear a mask when staff are working with them.

27. If possible, use only one designated vehicle for essential transportation. If not possible, any vehicle used by a person we support must be sanitized immediately after use. All occupants of the vehicle must wear a mask at all times.

28. Public Health directives are to be followed in all cases and may supersede instructions noted above.

29. Kerr will follow the process outlined in the section of this plan titled State and County agency notification of confirmed or suspected COVID-19 cases (staff or clients).

30. Kerr staff will notify the guardians of each client in the home of the current infection planning.

**Client with a suspected case of COVID-19 (a test for COVID-19 is in the process):**

1. All staff should remove their cloth face-covering and put on the appropriate surgical mask (see Use of Protective Facial Covering and Masks above) from the COVID-19 Emergency Kit.

2. Contact the Director of the program immediately.
3. Call the client’s physician.
4. Initiate home or unit quarantine.
6. Notify ODDS or OHA (depending on site).
7. Implement Isolation and keep the resident in their own room until test results indicate no COVID-19 and symptoms ceased for 72 hours.
8. Maintain a log of all non-residents who interact with the resident who is isolated (including staff).
9. Restrict internal group activities to prevent exposure – this includes meals, recreation, etc.
10. Provide info to all staff and residents on heightened precautions.
11. Staff working with the client should wear a surgical mask if the client is asymptomatic. If symptomatic, staff should wear gloves, surgical masks, and a face shield at minimum.
12. If medically approved, the client with COVID-19 should wear a cloth mask when staff are working with them.
13. Facilitate electronic communication for family and friends.
14. Initiate required enhanced training and protocol review with DSPs or other direct providers.
15. Provide all meals to the person in the isolation area.
16. Provide all supports, such as med. administration, to the person in the isolation area.
17. Keep doorways into the isolation area closed as much as possible.
18. If possible, identify a restroom that can be used only by the person or sanitize the bathroom after each use.
19. Keep other people we support at least 6 feet away from the person.
20. Sanitize all high-touch surfaces after each use.
21. If possible, use only one designated vehicle for essential transportation. If not possible, any vehicle used by a person we support must be sanitized immediately after use.

22. Public Health directives are to be followed in all cases and may supersede instructions noted above.
23. Kerr will follow the process outlined in the section of this plan titled State and County agency notification of confirmed or suspected COVID-19 cases (staff or clients).
24. Kerr staff will notify the guardians of each client in the home of the current infection planning.

If an illness occurs in Subacute, the Kerr Medical Director or designee will direct additional quarantine or isolation procedures to ensure the safety of clients and staff.

Home or Unit Quarantine Procedures
Quarantine status applies to the home or unit versus a client. If a client is suspected with COVID-19, also see above. If a healthcare professional suspects exposure to COVID-19 at a Kerr group home by a visitor, staff, or client, quarantine is essential for the protection of everyone involved. In that event, the
following actions will be taken and remain in effect until COVID-19 is ruled out by a healthcare provider or public health. Quarantine means separating and restricting the movement of people who likely have been exposed to a contagious illness, but do not have symptoms. This also applies if a client in the home is exhibiting signs of COVID-19 illness or other possible contagions. We must ensure that staff does not accidentally act as a COVID-19 or other disease transmission conduit between sites.

2. Immediately notify the CEO or Chief Program Officer.
3. Suspend all community activities or limit to activities where there is no contact with other community members and approved by the Director.
4. Limit staffing to those essential to maintain safe supervision.
5. Maintain social distancing. Utilize PPE if unable to maintain distance.
6. Staff assigned to the program may not visit or work at other Kerr facilities.
7. Kerr staff not regularly assigned to the program may not enter the building unless approved by the Program Director.
8. If signs and symptoms of COVID-19 are observed by a client, begin isolation procedures for the client and implement steps noted in above section Client with a suspected case of COVID-19.

Staff will notify the Director of the program if a home is placed in quarantine.

If an illness occurs in Subacute, the Medical Director or designee will direct quarantine or isolation procedures to ensure the safety of clients and staff.

Relocation or closure of a program
Kerr’s goal, during this crisis, is to reduce disruptions to our clients where possible. This includes all attempts to maintain the client in their group home or unit. However, Kerr will continually review options available to relocate clients to other Kerr or other facilities if ordered by Public Health or another state agency. For ODDS licensed programs, the DHS Summary of the Emergency plan will be followed as closely as possible regarding sheltering in place, evacuation plan and locations, transportation and notifications to be made, unless doing so would pose a risk for individuals (if alternate evacuation location is necessary due to increased risk). ODDS will be notified of variations from that plan to ensure the location of individuals is communicated at all times. At the direction of ODDS/OHA/DHS or Public Health, Kerr will close and relocate clients to either Kerr or other facilities.

State/County agency notification of confirmed or suspected COVID-19 cases (staff or clients).
Any confirmed or suspected cases of COVID-19 of either staff or clients will be communicated to local health authorities by the Chief Program Officer (or their designee). Kerr will follow all recommendations and instructions given by the County Health Authority, Department of Human
COVID-19 Exposure Communication Flow

The following communication process will occur with ANY confirmed case of COVID-19 for either staff or clients.

1. If a staff suspect a case of COVID-19, they should contact their manager immediately.
2. Manager will immediately contact their Assistant Director or Director.
3. The Assistant Director or Director will notify either the CEO or Chief Program Officer.
4. The CEO or Chief Program Officer will initiate the COVID-19 Coordination Team.
5. The designated Kerr liaison will contact Public Health and arrange for testing of clients and exposed staff in the home.
6. All clients, their guardians, and staff impacted will be verbally notified as soon as possible. Written notification will follow within 24 hours.
7. Case Management Entities will be notified via the ODDS Reporting Form via email. ODDS will also be notified through their field liaison (ODDS.COVID-19ScenarioReport@dhsoha.state.or.us).

In the case of exposure at Subacute, OHA will be notified at (OHA.LC@dhsoha.state.or.us), and the DHS licensing body will be contacted at TODD.COOLEY@dhsoha.state.or.us.