

COVID-19 CLIENT PROTOCOL

Revised: 9/27/21

In order to maintain the health and safety of the HCRS community, it is essential that clients follow these guidelines:

**Note: These guidelines do NOT apply to our Residential Programs.
Please refer to Residential-specific protocols.**

ILLNESS SYMPTOMS

Any client who is experiencing symptoms of COVID (see chart below) or any other contagious illness, such as the common cold, should remain at home until they have been free of these symptoms for at least 24 hours. Normal symptoms of seasonal allergies do not apply.

COVID-19 Related Symptoms		
<ul style="list-style-type: none"> • Fever or chills • Cough • Shortness of breath or difficulty breathing 	<ul style="list-style-type: none"> • Fatigue • Muscle or body aches • Headaches • New loss of taste or smell 	<ul style="list-style-type: none"> • Sore throat • Congestion or runny nose • Nausea, vomiting, or diarrhea

Clients who are ill may be offered the option of virtual services until their symptoms clear up.

CLIENTS IN QUARANTINE

Any client who is in quarantine should request virtual services until their quarantine period ends.

USE OF FACE MASKS

Effective September 27, 2021, all clients are asked to wear a medical face mask (surgical, KN95, N95 or other medical masks), when receiving in-person and indoor services. A mask and sanitizing station will be available at the entrance to each office location, providing surgical masks for those who don't have a medical mask. We emphasize the importance of fit in order to eliminate any gaps on the side of the mask. Some individuals may need to wear a cloth mask in conjunction with one of the medical masks listed above. Providers will discuss the appropriate use of masks with any client who opts not to wear a medical mask in indoor settings.

NON-FULLY VACCINATED* CLIENTS

While we strongly encourage that all clients get vaccinated against COVID-19, we understand and respect that there are many reasons they may opt not to. Due to the contagiousness and seriousness of COVID-19, any client who is not fully vaccinated must take the following measures to protect not only themselves but also the entire HCRS community:

- Wear a mask at all times while at an HCRS location or receiving HCRS services either indoors or outdoors.
- Maintain distancing from others of at least 3 feet.

COMMUNICATING WITH CLIENTS ABOUT MASKS AND DISTANCING

HCRS guidelines require that staff conduct a screening with individuals they support in advance of any appointments. This screening should also include a conversation about the client's preferences for safe masking, distancing, or other safety measures. This includes for both fully and non-fully vaccinated clients.

Attached are tips for having these conversations, including how to respond when clients ask staff about their vaccination status.

WHEN COVID IS SUSPECTED OR CONFIRMED

If COVID-19 is Suspected
<p>Client will be asked to contact their health care provider for a medical evaluation or recommendations.</p> <p>The health care provider may refer the client for PCR testing. The client should remain at home in isolation while awaiting any PCR test results.</p> <ul style="list-style-type: none">• If PCR test is positive, and the client does not have symptoms, they may return to in-person services 10 days from date of first positive test.• If PCR test is negative, the client may return to in-person services as long as there have been no symptoms for at least 24 hours. <p>If testing is not recommended, or the client chooses not to be tested, they may return to in-person services after:</p> <ul style="list-style-type: none">• Symptoms have resolved for at least 24 hours, and• At least 10 days have passed since symptoms first appeared.

When Clients Test Positive for COVID-19

When a client who is receiving in-person services reports that they have tested positive for COVID-19, the following measures need to be taken immediately:

- Staff will obtain critical information from the client (using the form provided below), to include:
 - Date of first symptoms
 - Date of test
 - Date they received positive results
- Staff will contact their supervisor immediately, who will contact the Division Director.
- The Division Director, or designee, notifies appropriate state agencies such as DMH and DAIL
- Staff person to provide Rhett Sorensen, *Director of Quality Assurance & Compliance*, and Cheryl Cavanagh, *Compliance & Admin Manager*, with a list of all clients and staff they have had in-person contact with in the past two weeks.
- Staff person will fill out an HCRS critical incident report to be faxed/emailed within 24 hours of learning their client who has COVID-19. In addition, the staff person will complete the State's Critical Incident Report form within 24 hours.
- Division Director will notify Anne Bilodeau, Chief Human Resources Officer. Anne will organize a meeting with a subgroup of the EPRT (Emergency Preparedness Response Team), to review the situation. The subgroup will include at a minimum: Dr. Paul Boutin, *Medical Director*, our Nurse Manager, and the relevant Division Director. This subgroup will review the situation in detail and identify next steps.
- Anne Bilodeau to notify any potentially exposed staff.
- Anne, or designee, notifies the Department of Health and discusses any potential exposure with them. The Department of Health provides us with the minimum guidelines that we need to follow for each situation. However, HCRS may decide to implement additional measures we deem necessary for the health and safety of staff and clients. HCRS will also make any necessary decisions regarding in-person or remote services.
- The EPRT (Emergency Preparedness Response Team) will review the case (with no identifying information) at their next regularly scheduled meeting.
- A communication will go out to relevant staff to make them aware that there's been a new case and any special circumstances they need to know.
- Once a plan is developed and implemented, HR will continue to monitor the situation on a daily basis, following up on staff test results, symptoms, etc.
- Division staff to continue to follow-up with client test results, symptoms, etc.

Contact Tracing

- Contact tracing for HCRS clients will be managed by Cheryl Cavanagh. She will share client information, as necessary, with Vermont's contact tracing team using the following contact information.
 - 1-800-464-4343

- 1-802-863-7240
- 1-802-863-7200
- AHS.DMHReporting@vermont.gov
- It is important that PHI remain confidential. Staff will not answer questions from an external tracer, law enforcement, or from the State. These inquiries should be redirected to Cheryl Cavanagh, (802) 886-4567, extension 1144.
- An Accounting for Disclosure Form will be completed by Rhett Sorensen or Cheryl Cavanagh when PHI is disclosed due to contact tracing.
- Rhett Sorensen and Cheryl Cavanagh will be on-call in the event that contact tracers need to be contacted on the weekend. (See the EPRT emergency contact list for emergency contact information.)

HCRS COVID/Infection Control Lines

- **HCRS Staff –**
(802) 886-4561 (that goes to HR staff at ext. 2181)
HRCOVID19@hcrs.org
- **Kindle Farm Staff –**
(802) 886-4562 (that goes to Kindle staff at ext. 2182)
KindleCOVID19@hcrs.org

Note: The COVID/Infection Control Lines are not monitored during non-office hours or on weekends.

* **Fully Vaccinated:** It's been at least 2 weeks since your final dose of COVID-19 vaccine.

COVID-19 Positive Client – Data Collection Form

Client Name: _____ Date: _____

Staff Name: _____ Program: _____

Date of Client’s First Symptoms: _____

Date of COVID-19 Test: _____ Date of Positive Results: _____

List All Contacts of Client within Past 14 Days

And check whether a staff or client

Name	Client	Staff

Send form to Division Director, Anne Bilodeau, Rhett Sorensen, and Cheryl Cavanagh