

Appendix 8. Potomac Center/SETT Pandemic Protocol

I. Admission Requirements for fully vaccinated residents

Fully vaccinated individuals will forgo any additional testing or isolation upon admission and will be placed on their home cottage and room.

II. Admission Requirements for partially or unvaccinated individuals.

- a. An individual must be asymptomatic for 10 days. If a COVID-19 test was administered prior to admission, the resident would be admitted after results are negative.
- b. If results are positive, an additional 10 days with improving symptoms and hours, without fever reducing medications, for 72 hours is required prior to admission.
- c. Once the resident is admitted they will be placed in isolation for a minimum of 72 hours and will be tested for COVID-19.
 - i. If the resident tests positive, the Potomac Center/SETT Pandemic Protocol for isolation of residents will be followed.
 - ii. If a resident tests negative the resident will be placed on their home cottage and room.

III. Current Resident Testing

- a. Residents who are experiencing flu like symptoms and/or have a fever of 100.4 will be placed in isolation and shall remain in isolation for a minimum time of twenty-four hours symptom free and afebrile, without an analgesic (i.e. Tylenol, ibuprofen).
 - i. For each resident we place in isolation we will request from a physician an order for a rapid COVID-19 testing and a rapid influenza test during traditional influenza season (October 1st – March 30th), and a Polymerase Chain Reaction (PCR) COVID-19 test will be sent to our MDH State laboratory and be tested for both COVID-19 and influenza.
 - ii. Temperature checks will additionally be initiated on all residents on the cottage. As indicated, PPE may also be provided.
 - iii. While awaiting the results, the isolation protocol will be utilized.
- b. Positive Results
 - i. If the resident's rapid influenza test is positive they will continue to stay in isolation for 5 days or until they are symptom free for 24 hours.
 - ii. If the resident's rapid COVID-19 test is positive they will continue to stay in isolation for a minimum of 10 days and 24 hours afebrile and symptoms improving.
 - iii. If they leave isolation, despite redirection, the resident will be encouraged to don PPE and will be assessed by their Interdisciplinary Team for additional strategies.

1. If resident refuses to wear PPE, we will encourage all other residents to don PPE as an additional precaution.
- iv. If the PCR COVID-19 and Influenza results confirm the rapid testing completed on site, no further intervention is needed. If the results are negative, the nursing department will make a determination if they should be retested or removed from isolation.
- c. Negative Results for fully vaccinated residents
 - i. The resident may return to their normal activities.
- d. Negative Results for residents who have not been fully vaccinated
 - i. If isolated with peers with a positive test of a communicable disease the resident may return to their previous living space 10 days after the peer who has COVID- 19 meets the criteria to end isolation or 5 days if the peer was positive for influenza; the date of return will be provided by the nursing department.
 1. Isolation timeframe may be altered based on CDC recommendations
 - a. Examples may include but may not be limited to all isolated parties have negative results and are symptom free.
 - ii. The isolated resident will be required to do all of their activities including but not limited to activities such as eating, Activities of Daily Living (ADLs), and activities in their isolation space while in isolation.

IV. Isolation of Potomac Center Residents

- a. We will isolate residents in the gym/vocational pods if they are in need of isolation.
 - i. Cots and/or beds will be placed in the gym/vocational pods strategically that will allow adequate spacing if there are multiple residents.
 - ii. Isolation carts will be placed strategically throughout the area and outside the gym doors in response to the number of residents in isolation; with the opportunity for additional supplies to be added if necessary.
- b. The resident will be required to stay in their isolated space for the duration of the isolation.
- c. The isolated resident will be required to eat in their isolation space while in isolation and if they leave the isolation space the resident will be encouraged to don PPE.
- d. Each staff member will be required to don PPE prior to each interaction of the isolated resident/residents.
- e. Resident/Residents will utilize the available bathroom in the gym/pod area.
 - i. If it is a shared bathroom, the bathroom space must be disinfected after residents utilize the bathroom for each individual encounter of the isolated resident.
- f. Continued training/retraining will be completed for those who are in need of PPE training.

V. Isolation of SETT Residents

- a. We will begin by utilizing the TV room 102 and 128 on cottage 3 and the respite room on cottage 4. If additional beds are needed on cottage 4 we will utilize one of the dining rooms to allow the other dining room to remain accessible. The dining room will also be utilized if we are unable to maintain an individual in their room.
 - i. Isolation carts will be placed outside the door of the individual isolation space. A trash can with a bag will be placed inside the door of the room as well as outside of the room.
 - 1. Additional PPE will be placed in containers/cart for staff members during the isolation period.
 - ii. Residents will utilize the available bathroom in isolation from other residents.
 - 1. If it is a shared bathroom, the bathroom space must be disinfected after residents utilize the bathroom for each individual encounter of the isolated resident.
- b. If we have more than 5 individuals per cottage in isolation during a 7 day time-frame, or if current census and population warrants it, we will utilize a wing of the cottages.
 - i. The wing that will be utilized will be discussed by the team and finalized by nursing.
 - ii. If we are utilizing wing/wings for isolation, the isolation carts will be placed outside the double doors of the wing in addition to the isolation bedrooms.
 - iii. The cart/carts and cottages will be stocked with additional PPE.
- c. The resident will be required to stay in their isolation space for the duration of the isolation and if they leave their isolation space the resident will be required to don PPE.
 - i. If resident refuses to wear PPE, we will encourage all other residents to don PPE.
- d. Each staff member will be required to don PPE prior to each interaction of the isolated resident/residents.

VI. Staffing for Residents Testing Positive for COVID-19 or Influenza

- a. Volunteers will be asked to work with positive, isolated residents; if no staff volunteer or if the number of staff who volunteer is inadequate to meet minimum staffing needs, staff will be assigned as per scheduling procedure.
 - i. Each staff will be trained/retrained on PPE protocol and trained on isolation protocol. Only PPE approved by nursing may be worn.
 - ii. Nursing will be accessible 24 hours for any immediate needs or questions.

VII. Resident Off-Site Appointments/Medical Emergency

- a. Scheduled, off-site appointments are limited to only if medically necessary or court mandated and will be reviewed on a case by case basis.
 - i. Upon return from appointment, resident is to wear PPE and will be on temperature checks for 10 days.

- b. For unvaccinated residents who have left the premises to go to the emergency room or urgent care they should be encouraged to wear a mask & will be tested 3-5 days after their visit.
 - i. Please refer to section III & IV: Current Resident Testing & Isolation of Residents
- c. For vaccinated residents who have left the premises to go to the emergency room or urgent care they should be encouraged to wear a mask during their visit and for 10 days after their visit but may return to their normal activities.

VIII. Visitors, Volunteers, Contractors in non-residential areas, etc.

- a. Limitations will be placed on who will be allowed on-site access. This will be based on needs of the residents and the facility.
 - i. Individuals allowed on campus will have their temperature taken and must be afebrile and deny having COVID-19 or Influenza like symptoms to be able to enter the campus.
 - ii. Individuals allowed on campus will be required to wear face masks for the entirety of their visit and required to maintain social distancing when possible.
 - 1. Individuals may choose to wear an N95 mask or a mask with 2 or more layers that is washable and breathable.
 - 2. The mask must completely cover your nose and mouth.
 - 3. The mask must fit snugly against your face and not have gaps.
 - 4. Gaiters are not allowed as a substitution for masks at this time.
- b. On-site visitation policy will be permitted under certain guidelines and restrictions to ensure our residents' and staffs' health and safety, which will be outlined in Amendment A. Phone and video calls are also offered as alternative means for connecting with family/friends.

IX. Contractors in Residential Areas

- a. Limitation will be placed on who will be allowed on-site access. This will be based on needs of the residents and the facility.
 - i. Individuals allowed on campus will have their temperature taken and must be afebrile.
 - ii. The Contractor's temperature must be less than 100.4 degrees Fahrenheit to be allowed to enter the campus; if longer than an 8 hour shift it will be taken twice during their shift to ensure the staff continue to remain afebrile.
 - iii. The staff will complete a self-temperature check with the wrist thermometer located in the administrative building.
 - 1. They will then write their temperature on the assessment log.
 - 2. If their temperature reads less than 97.0 degrees or greater than 100.4 degrees, the staff will have their temperature immediately re-taken manually by the staff in the reception area.
 - iv. Staff must also deny having symptoms of COVID-19

1. If any answer is yes, they will be required to take a rapid COVID-19 test and a rapid influenza test on campus, and a PCR COVID-19 test will be sent out for testing during the months of October through March.
 - a. If both the COVID-19 and influenza rapid tests are negative, staff will report to their assigned shift while awaiting the result of the PCR test.
 - i. If the result of the PCR test is also negative no further intervention is needed.
 - b. If the Contractor's rapid influenza test is positive they will continue to stay in isolation for 5 days or until they are symptom free for 24 hours while awaiting the result of the PCR test.
 - i. If the result of the PCR test is also positive no additional intervention is needed.
 - ii. If the result of the PCR test is negative, the contractor can resume their scheduled work on campus.
2. During the months of April through September staff members will only be tested for COVID-19 unless a confirmed exposure to a person with influenza.
 - a. If the rapid COVID-19 test is negative staff will report to their assigned shift while awaiting the results of the PCR COVID – 19 test results.
 - i. If the PCR COVID-19 test is also negative no further interventions are needed.
 - ii. If the PCR COVID-19 test is positive the staff may not return to campus until
 1. A minimum of 10 days and 24 hours afebrile and symptoms improving.
3. Once on campus they are required to wear a mask for the entirety of their shift.
- v. Individuals allowed on campus will be required to wear face masks for the entirety of their visit and required to maintain social distancing when possible.
 1. Individuals may choose to wear an N95 mask or a mask with 2 or more layers that is washable and breathable.
 2. The mask must completely cover your nose and mouth.
 3. The mask must fit snugly against your face and not have gaps.
 4. Gaiters are not allowed as a substitution for masks at this time.

X. Staff precautions

- a. Before staff entry on campus

- i. The staff's temperature must be less than 100.4 degrees Fahrenheit to be allowed to enter the campus; if longer than an 8 hour shift it will be taken twice during their shift to ensure the staff continue to remain afebrile.
- ii. The staff will complete a self-temperature check with the wrist thermometer located in the administrative building.
 1. They will then write their temperature on the assessment log.
 2. If their temperature reads less than 97.0 degrees or greater than 100.4 degrees, the staff will have their temperature immediately re-taken manually by the staff in the reception area.
- iii. Staff must also deny having symptoms of COVID-19.
 1. If any answer is yes, they will be required to take a rapid COVID-19 test and a rapid influenza test on campus, and a PCR COVID-19 test will be sent out for testing during the months of October through March.
 - a. If both the COVID-19 and influenza rapid tests are negative, staff will report to their assigned shift while awaiting the result of the PCR test.
 - i. If the result of the PCR test is also negative no further intervention is needed.
 - b. If the staff's rapid influenza test is positive they will continue to stay in isolation for 5 days or until they are symptom free for 24 hours while awaiting the result of the PCR test.
 - i. If the result of the PCR test is also positive no additional intervention is needed.
 - ii. If the result of the PCR test is negative, staff should report to work immediately for their next scheduled shift.
 - c. If the staff's rapid COVID-19 test is positive they will continue to stay in isolation for a minimum of 10 days and 24 hours afebrile and with symptoms improving while awaiting the result of the PCR test.
 - i. If the result of the PCR test is also positive no additional intervention is needed.
 - ii. If the result of the PCR test is negative staff should report to work immediately for their next scheduled shift.
 2. During the months of April through September staff members will only be tested for COVID-19 unless a confirmed exposure to a person with influenza.
 - a. If the rapid COVID-19 test is negative staff will report to their assigned shift while awaiting the results of the PCR COVID – 19 test results.
 - i. If the PCR COVID-19 test is also negative no further interventions are needed.

- ii. If the PCR COVID-19 test is positive the staff may not return to campus until
 - 1. A minimum of 10 days and 24 hours afebrile and symptoms improving.
- b. Once on campus they are required to wear a mask for the entirety of their shift.
 - i. Staff may choose to wear an N95 mask or a mask with 2 or more layers that is washable and breathable.
 - ii. The mask must completely cover your nose and mouth.
 - iii. The mask must fit snugly against your face and not have gaps.
 - iv. Gaiters are not allowed as a substitution for masks at this time.
- c. Staff who are not fully vaccinated and exposed to individuals with the COVID-19 virus greater than 15 minutes during a 24 hour period without PPE precautions and will not have further contact will be tested for the COVID-19 virus no later than 24 hours after exposure. The will be sent home and may return:
 - i. Immediately after negative test results.
 - ii. Minimum of 10 days and 24 hours afebrile and symptoms improving after positive test results.
 - iii. Any time exceeding 48 hours before testing will require leave time without pay.
- d. Staff who are fully vaccinated for the COVID vaccine virus and exposed to individuals with the COVID-19 virus, will be able to work in their previous capacity and do not need to be tested unless they have symptoms. Please refer to section X, item iii.
- e. Staff who are not fully vaccinated and lives with someone with COVID-19 and cannot avoid continued close contact
 - i. May return 10 days after the person who has COVID-19 meets the criteria to end home isolation; the date of return will be provided by the nursing department.
- f. Staff who are not fully vaccinated and exposed to individuals with the COVID-19 virus while wearing PPE precautions will have their temperature checked twice a day for a minimum of 72 hours.
 - i. If the staff's temperature check yields an elevated temperature greater than 100.4 degrees Fahrenheit they will be sent home and can return immediately after a negative COVID-19 test or after a minimum

- of 10 days and 24 hours afebrile and symptoms improving.
- g. Staff who call in with complaints of COVID-19 like symptoms will be required to get tested for the COVID-19 virus no later than 24 hours and may return to work:
 - i. Immediately after negative test results
 - ii. Minimum of 10 days and 24 hours afebrile and symptoms improving after positive test results.
- h. Staff who intend to travel for non-essential reasons, are encouraged to report this travel, and asked to test upon return to work and may return:
 - i. Immediately after negative test results.
 - 1. Please contact immediate supervisor for consideration of a change in your staffing schedule.
- i. All vaccinated staff shall continue to test for the COVID-19 virus monthly and all non-vaccinated staff shall continue to be tested weekly for the COVID-19 virus.
- j. Staff who test positive for COVID-19 during MDH required monthly or weekly testing:
 - i. Shall not report to work.
 - ii. If on campus, the staff will be asked to leave the campus.
 - iii. They may return after a minimum of 10 days and 24 hours afebrile and symptoms improving.
 - iv. A staff member who has tested positive for COVID-19 will not need to be retested for the purposes of MDH COVID-19 testing guidelines within 8 weeks of their initial positive test.

XI. New Staff:

- a. All new staff will be required to test prior to their start date.

XII. Non-Compliance

- a. Universal COVID-19 monthly testing is required of each staff member during this pandemic. Fully vaccinated staff are required to test monthly. Staff who are not fully vaccinated are required to test weekly. The week will begin on Wednesday at 8:00 am and will end at close of business on Tuesday.
 - i. An employee who refuses to allow PC to collect a specimen for an MDH-administered COVID-19 test shall not be permitted to work and will remain on leave without pay status until the employees has submitted their specimen for an MDH administered COVID-19 test.
 - ii. There will be a requirement of 7 days or more in between testing time for the universal testing completed each month for staff members.
 - iii. The employee shall be rescheduled for the next available testing date and time.

- b. Failure to comply with the Pandemic Protocol may result in disciplinary action.

XIII. Staff Shortage Protocol

- a. The current mandate procedure will be followed for direct care staff.
- b. Essential employees will be utilized to assist with the daily operations of the facility. This will be determined by the appropriate supervisor or director for immediate and urgent needs and will be re-evaluated if needed for long-term solutions.
- c. Mission critical employees will be utilized to assist with the daily operations of the facility. This will be determined by the appropriate supervisor or director for immediate and urgent needs and will be re-evaluated if needed for long-term solutions.