

5000 SERIES

HEALTH AND MEDICAL

[5100 Severe, Life Threatening, or Other Medical Emergencies](#)

[5150 Advance Medical Directives](#)

[5200 Communicable Disease/Infection Control](#)

[5250 Disposable Undergarment Changing](#)

[5300 Employee Medical Statement and Communicable Disease Prevention](#)

[5350 Linens](#)

[5400 Bloodborne Pathogen Exposure Control Plan](#)

[5450 Handwashing](#)

[5500 Delegated Nursing](#)

[5550 Delegated Nursing Suspension & Revocation](#)

[5600 Medication Policy](#)

[5700 Pandemic Preparedness Plan](#)

POLICY:

Easterseals Central & Southeast Ohio, Inc. has appropriate procedures in place to handle severe, life threatening, or medical emergencies.

PROCEDURE:

1. Upon discovery of an emergency, the individual shall:
 - a. Call out loudly for help (if others are near) or use the intercom system.
 - b. Call 911 or emergency medical services number.
 - c. Begin CPR or First Aid unless a legal advanced medical or DNR order is available in the client record.
2. If a second person arrives at the emergency scene they shall:
 - a. Call 911 or emergency medical services number if not already called.
 - b. Give responsibility to another to call 911 or emergency medical services (if not already called), while assisting with CPR and First Aid.
 - c. Call for, if needed and available, additional assistance.
3. All available staff that can safely leave their consumer(s) or work area may respond to the emergency and assist as directed. (i.e. In a facility keeping hallways clear, waiting near entrance to direct emergency medical services personnel to the emergency site).
4. All records pertaining to the medical health status of the individual are gathered. The individual's information accompanies them to the hospital as well as an appointed staff of Easterseals.
5. The personal representative shall be notified of the emergency. Information shall be given regarding the hospital location where the individual was transported and for what reason.

6. Situations involving the media will be handled by members of the Crisis Communication Team. Staff are to contact their supervisor. If a supervisor is unavailable, then contact a member of the Senior Management Team and do as directed.
7. Easterseals is responsible for providing emergency care only. Decisions regarding further care and treatment rest with the individual or his/her personal representative and the physician.
8. Documentation of the emergency shall be completed on the appropriate incident reporting form and processed within established incident reporting guidelines.

Originated:

Reviewed: 1/84, 7/88, 11/89, 6/91, 7/92, 7/93, 10/95, 4/96, 3/97, 2/98, 8/2000, 9/03, 6/04, 4/05, 12/05, 12/06, 12/07, 12/08, 11/09, 12/10, 1/12, 11/13, 11/14, 11/15, 11/16, 11/17, 11/18, 11/19, 3/21, 4/24, 1/25

Revised: 1/84, 7/88, 11/89, 8/90, 6/91, 7/92, 7/93, 10/95, 4/96, 3/97, 2/98, 8/2000, 9/03, 6/04, 4/05, 12/08, 11/13

POLICY:

Easterseals Central & Southeast Ohio, Inc. recognizes a consumer/personal representatives' right to make health care decisions, including the right to formulate advance medical directives.

PROCEDURE:

1. Easterseals staff will respond to all severe, life threatening, or other medical emergencies in accordance with operations policy #5100. This includes an all-emergency response and implementation of basic First Aid/CPR until the consumer can be transferred to an appropriate hospital/health care facility by trained emergency squad personnel.
2. A consumer/personal representative may present documentation of advance medical directives to Easterseals and request they be placed in the consumer's file. The file will be labeled externally with a sticker indicating "Advance Medical Directives in Chart."
3. The consumer/personal representative may also request that in the event an Emergency Response Squad is called, these advance medical directives be given to Emergency Response Squad staff, for assessment by appropriate licensed medical professionals.

Originated: 3/98

Reviewed: 8/2000, 9/03, 6/04, 4/05, 12/05, 12/06, 12/07, 12/08, 11/09, 12/10, 1/12, 11/13, 11/14, 11/15, 11/16, 11/17, 11/18, 11/19, 3/21, 4/24, 1/25

Revised: 9/03, 11/13

POLICY:

Easterseals Central & Southeast Ohio, Inc. provides all necessary interventions/precautions to prevent the transmission of communicable disease.

PROCEDURE:

1. Universal/Standard Precautions will be used in all Easterseals programs as required.
2. Staff will be trained upon hire and yearly thereafter in universal/standard precautions. The site/program manager or designee is responsible to assure that staff training occurs. A communicable disease chart will be posted at each site for quick reference. All direct care staff and any back-up staff must attend communicable disease training as per applicable certifications and standards.
3. Easterseals staff that is sent home with suspected or known communicable disease will not be permitted to return to work until the period of communicability has terminated. A written or verbal physician's statement about current health status may be requested by the supervisor before reinstating the staff member to work.
4. The following is a list of symptoms for which a consumer/staff shall be sent home from Easterseals:
 - a. Diarrhea (more than two abnormally loose stool within a 24-hour period; blood or mucus in stool)
 - b. Severe coughing, uncontrollable in nature, especially if productive.
 - c. Difficult or rapid breathing.
 - d. Yellowish skin or eyes.
 - e. Conjunctivitis (Pink Eye).
 - f. Temperature of one hundred degrees Fahrenheit taken by the axillary method when in combination with any other sign of illness. (100 axillary adjusted to 101 orally/rectally.)

- g. Untreated infected skin patch(es).
- h. Unusually dark urine and/or gray or white stool.
- i. Stiff neck.
- j. Head lice (nit-free before returning).
- k. Vomiting one or more times within the last 24 hours, unless the vomiting is determined to be caused by a non-communicable condition and the consumer is not in danger of dehydration.
- l. Rash or behavioral change, until a physician has determined the illness is not a communicable disease.
- m. Any other questionable symptoms until clarified by a physician.

If symptoms appear to be severe, Policy #4600 will become applicable.

- 5. If illness is present, the consumer will be isolated with a staff member assigned to monitor the situation. Personal representative will be notified, and arrangements made for transportation home. Personal representative will be given information regarding staff concerns and recommendations.

Consumer/personal representative will notify program site of the nature of the illness and appropriate follow-up. The area will be disinfected after the consumer leaves.

- 6. If the consumer has a suspected or known communicable disease, he/she may not return until the disease cannot be passed to another person. Re-admittance to the programs will require either written or verbal release from the consumer's physician stating that the consumer is no longer contagious. This is to be submitted to the program manager or designee upon return to site program services.
- 7. Personal representative is required to keep consumers at home if any symptoms of illness are present.
- 8. Personal representative will be notified if the consumer has been exposed to a communicable disease.

9. If staff or the consumer is identified as having antibiotic resistant infection, staff/consumer/personal representative should notify Easterseals immediately, so that we can gain appropriate consultation on infection control. Staff will notify Site/Program Managers of any potential infection control issues. Site/Program managers will review the need for additional precaution for individuals with resistant infections prior to beginning or returning to an Easterseals program.
10. Specific guidelines will be adhered to for the following diseases:
 - a. Cytomegalovirus (CMV) – Known CMV shedders will be served by nonpregnant staff. Personal protective equipment (gloves, gowns, goggles, etc.) will be available and should be used when changing a disposable undergarment (diaper/brief).

CMV titer tests are available to any staff member through the Ohio Department of Health.
 - b. Herpes simplex infections – Adults and older children who have good hygiene habits do not require any specific precautions. Adults or older children who have active lesions, particularly cold sores, should make an effort to avoid contact of their infected skin with others.
 - c. Methicillin Resistant Staphylococcus aureus (MRSA) – This form of staph is usually spread from hands that have been contaminated through contact with an open area of an individual having MRSA. Personal protective equipment should be used. Consumer/staff with active lesions will not be permitted to attend programming until a physician release is received.
 - d. Tuberculosis – This is a contagious bacterial infection caused by mycobacterium. It involves a primary infection to the lungs with potential spread to other organs. Tuberculosis is transmitted through droplets sprayed into the air after an infected person sneezes or coughs. Staff should be alert to signs/symptoms which include productive cough, fatigue, mild fever, loss of appetite, weakness, night sweats, coughing up blood, and wheezing. In the event of a confirmed exposure to tuberculosis, the local health department must be notified. Consumers/staff with active tuberculosis will not be permitted to attend programming until a physician release is received.

11. For information on additional diseases, a communicable disease chart will be posted at each site.
12. If a consumer, staff, volunteer, or visitor is identified as having an infectious disease, not identified here, the Health Department is contacted for infection control advice.
13. Communicable diseases that must be reported to the local Health Department are listed in the Ohio Administrative Code 3701-3-02.1. Reports will be made by the site/program manager or designee.

Originated: 7/85

Reviewed: 12/87, 7/88, 11/89, 2/93, 7/93, 9/94, 4/96, 10/96, 3/97, 8/2000, 9/03, 1/04, 6/04, 4/05, 12/05, 12/06, 12/07, 12/08, 11/09, 12/10, 1/12, 11/13, 11/14, 5/17, 11/18, 11/19, 3/21, 4/24, 1/25

Revised: 12/87, 7/88, 11/89, 9/90, 2/93, 7/93, 9/94, 4/96, 10/96, 3/97, 8/2000, 9/03, 1/04, 6/04, 4/05, 12/05, 12/06, 11/14, 5/17

POLICY:

Easterseals Central & Southeast Ohio, Inc. has in place procedures for infection control regarding disposable undergarment (diaper/brief) changing.

PROCEDURE:

1. A clean barrier must be placed between undergarment and surface where changing is taking place.
2. Wash hands and put on gloves.
3. Remove the soiled undergarment.
4. Cleanse the perineal area (private area) using appropriate techniques and cleansing solutions to rid skin of contaminate.
5. Throw away disposable undergarment (diaper/brief) as well as barrier into a covered container containing a disposable garbage bag. If there is any evidence of blood or body fluid contaminated with blood, the undergarment must be placed in a red bio-hazard bag, then placed in another garbage bag and then a covered container. (Unless waste management of a particular agency requires differently.)
6. Remove soiled gloves and throw away in a covered container.
7. Prior to placing clean disposable undergarment, wash hands and apply new gloves.
8. Using a specified disinfectant, spray the surface where changing took place and wipe dry with a paper towel.
9. If staff witnesses disposable undergarment changing, he/she will ensure changing area is disinfected appropriately.

Originated: 7/82

Reviewed: 7/88, 11/89, 9/90, 2/93, 4/96, 3/97, 8/2000, 9/03, 6/04, 4/05, 12/05, 12/06, 12/07, 12/08, 11/09, 12/10, 1/12, 11/13, 11/15, 11/16, 11/17, 11/18, 11/19, 3/21, 4/24, 1/25

Revised: 7/88, 11/89, 9/90, 2/93, 4/96, 3/97, 8/2000, 9/03, 6/04

POLICY:

Easterseals Central & Southeast Ohio, Inc. requires staff and volunteers to submit appropriate documentation to assure that proper health requirements are followed.

PROCEDURE:

1. Staff working in a childcare licensed program are required to have a physical evaluation upon hire. This is in accordance with Ohio Administrative Code 5101:2-12-08.
2. Any staff hospitalized for any communicable diseases, medical or surgical reasons needs a signed physician's release prior to returning to work to include any special restrictions or requirements.
3. All original documentation will be maintained in the Human Resources Department.

Originated: 9/86

Reviewed: 8/89, 9/90, 7/93, 9/94, 4/96, 3/97, 8/2000, 9/03, 6/04, 4/05, 12/05, 12/06, 12/07, 12/08, 11/09, 12/10, 1/12, 11/13, 11/15, 11/16, 11/17, 11/18, 11/19, 3/21, 9/22, 4/24

Revised: 8/89, 9/90, 7/93, 9/94, 4/96, 3/97, 8/2000, 9/03, 6/04, 4/05, 12/06, 12/08, 1/12, 9/22

POLICY: Easterseals Central & Southeast Ohio, Inc. has procedures regarding the maintenance and storage of linens.

PROCEDURE:

1. Where applicable, a quantity of linens essential for proper care and comfort of consumers will be available.
2. All linens will be washed with hot water, bleach, and detergent after each use and will be stored in a clean and sanitary fashion.
3. Designated personnel will be responsible for cleaning and maintaining the supply and the disposal of soiled or worn linens.

Originated: 5/92

Reviewed: 2/93, 4/96, 3/97, 8/2000, 9/03, 6/04, 4/05, 12/05, 12/06, 12/07, 12/08, 11/09, 12/10, 1/12, 11/13, 11/15, 11/16, 11/17, 11/18, 11/19, 3/21, 1/25

Revised: 2/93, 4/96, 3/97, 9/03, 6/04, 4/24

POLICY:

Easterseals Central & Southeast Ohio, Inc. has in place the following bloodborne pathogen exposure control plan which is in compliance with the Occupational Exposure to Bloodborne Pathogens Federal Register 29 Code of Federal Regulations (CFR), part 1910.1020, December 6, 1991.

PROCEDURE:

Occupational Safety and Health Administration (OSHA) defines an exposure incident as a specific eye, mouth, other mucous membrane, non-intact skin, parenteral (piercing through such events as needle sticks, human bites, cuts or abrasions) contact with blood, or other potentially infectious materials that result from the performance of any employee duties.

1. EXPOSURE DETERMINATION:

All employees working or assisting in a direct service area are at risk for exposure to bloodborne pathogens or other potentially infectious materials.

2. UNIVERSAL PRECAUTIONS:

- a. Universal/Standard Precautions are used to prevent contact with blood or other potentially infectious materials to reduce the risk of occupational exposure.
- b. Body fluids which are directly linked to the transmission of Hepatitis B (HBV) and/or Human Immunodeficiency Virus (HIV) to which universal/standard precautions apply are:
 - i. Blood
 - ii. Blood products
 - iii. Semen
 - iv. Vaginal secretions
 - v. Cerebrospinal fluid (Spine)

- vi. Synovial fluid (Joints)
- vii. Pleural fluid (Lungs)
- viii. Peritoneal fluid (Abdomen)
- ix. Pericardial fluid (Heart)
- x. Amniotic fluid
- xi. Saliva in dental procedures
- xii. Tears
- xiii. Concentrated HIV and/or HBV viruses
- xiv. All body fluids where it is difficult to differentiate between body fluids

3. ENGINEERING AND WORK PRACTICE CONTROLS:

The following engineering and work practice controls will be used:

- a. Hand washing stations to contain running water, soap and disposable towels.
- b. Puncture-resistant sharps containers are required if performing needle sticks (blood sugar check, flu vaccine, or tuberculosis (Mantoux)).

4. PERSONAL PROTECTIVE EQUIPMENT (PPE):

- a. Employees are provided appropriate personal protective equipment in appropriate sizes.
- b. Personal protective equipment includes gloves, gowns/aprons, face shields, masks, protective eye wear, and any other PPE deemed necessary to reduce risk of exposure.

- c. The protective equipment will be considered appropriate only if it does not permit blood or other potentially infectious materials to pass through or reach the employee's clothing, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time, which the protective equipment will be used.
- d. Disposable gloves shall be worn where it is reasonably anticipated that employees will have hand contact with blood, other potentially infectious materials, non-intact skin, and mucous membranes. Gloves are not to be washed or decontaminated for re-use and are to be replaced as soon as practical when they become contaminated, torn, punctured, or when the ability to function as a barrier is compromised.
- e. Masks are required to be worn in combination with eye protection devices whenever splashes, spray, splatter or droplets of blood, or other potentially infectious materials may be generated and eye, nose, or mouth contamination can reasonably be anticipated.

5. HOUSEKEEPING:

- a. Supervisors are responsible for assuring that the work site/area is maintained in a clean and sanitary condition.
- b. All equipment and environmental surfaces must be properly cleaned and disinfected after contact with blood or other potentially infectious materials.
- c. All bins, pails, cans, and similar receptacles intended for reuse, which have potential for contamination must also be inspected and decontaminated on a regular basis.

6. INFECTIOUS WASTE DISPOSAL:

- a. Closable containers or bags that are designed to prevent leakage of fluids during handling, storage, transport, or shipping must be provided for disposal of potentially infectious waste.

- b. Puncture resistant sharps containers must be available and disposed of properly. (May be arranged to be taken to a local hospital lab or pharmacy that disposes of bio-hazardous materials).
- c. Bio-hazardous waste shall be placed in red biohazard bags, then placed in waste containers labeled biohazard waste.
- d. Once red bag is removed, containing the biohazard material, the container must be decontaminated and labeled to indicate the contents have been rendered non-infectious.

7. LAUNDRY:

- a. Laundry contaminated with blood or other potentially infectious materials will be handled as little as possible. Such laundry will be placed in appropriately marked bags at the location where it was used.
- b. Potentially contaminated laundry should not be washed in work areas where laundry considered non-contaminated is washed.

8. HEPATITIS B VACCINATION:

- a. All employees who have been identified as having exposure to blood or other potentially infectious materials will be offered the Hepatitis B vaccine, at no cost to the employee. The vaccine may be given by the local health department, or the employee may make other arrangements with their physician.
- b. Employees having had the vaccine are requested to provide verification of the vaccine. This is kept in the Human Resources Department.
- c. Employees who decline the Hepatitis B vaccine will sign a waiver indicating such but may at any time change their mind and request it.

9. POST-EXPOSURE EVALUATION AND FOLLOW-UP:

- a. When an employee incurs an exposure incident, it should be reported immediately to the supervisor and Human Resources.
- b. All employees who incur an exposure incident will be evaluated and provided follow-up in accordance with OSHA standard. This follow-up shall include a confidential post-exposure medical evaluation and follow up counseling, including:
 - i. Documentation of the route(s) of exposure. This should include the date and time of exposure, and the job being performed by the employee at the time of exposure.
 - ii. Identification of the source individual, including a blood test to determine the source of the individual's HBV and HIV antibody status.
 - iii. An employee blood test for HBV and HIV or retention of a baseline serum specimen for three months following the exposure incident.
 - iv. Post-exposure prophylaxis as medically indicated by the U.S. Public Health Service.
- c. Counseling and evaluation of reported illnesses. This must include a written assessment of the employee's risk and recommended follow-up due to an exposure incident, to be given to the employee within fifteen (15) days of the exposure.

10. INFORMATION AND TRAINING:

All employees with occupational exposure risk will be trained upon hire and annually thereafter on OSHA guidelines, HBV and HIV, standard/universal precautions, the agencies exposure control plan and personal protective equipment use, removal, and disposal.

11. RECORDKEEPING:

Records of all training given will be kept by the Human Resources Department. The training record shall consist of content of the training, names and qualifications of the trainers, and the names and jobs of all persons attending the training. These records must be maintained for three years from the date the training occurred.

12. EXPOSURE PLAN REVIEW:

The exposure control plan must be reviewed yearly and more frequently if and when OSHA changes occur.

13. Supervisors are required to ensure that employees follow protective practices outlined in this plan.

Originated: 9/03

Reviewed: 9/03, 6/04, 4/05, 12/05, 12/06, 12/07, 12/08, 11/09, 12/10, 1/12, 11/13, 11/15, 11/16, 11/17, 11/18, 11/19, 3/21, 4/24, 1/25

Revised: 6/04, 4/05, 12/07, 12/08

POLICY:

Easterseals Central & Southeast Ohio, Inc. has procedures for reducing the spread of infection.

PROCEDURE:

1. The most effective barrier to prevent spreading of bloodborne pathogens or other germs/bacteria is hand washing. The hand washing process should take 15-30 seconds to complete.
2. Hands should be washed as follows:
 - a. before and after eating or handling food
 - b. before and after toileting
 - c. before putting on gloves
 - d. after removing gloves
 - e. if hands become soiled with blood or body fluids, wash immediately
 - f. before and after giving or assisting with care of another person
3. Hand washing procedures are posted at all appropriate locations.

POLICY:

Easterseals Central & Southeast Ohio, Inc. has in place procedures that comply with the Ohio Board of Nursing, Ohio Department of Developmental Disabilities, Administrative Code and Ohio Revised Code for the implementation of Delegated Nursing by licensed nurses.

PROCEDURE:

1. A licensed registered nurse who has completed the delegated instructor training program set forth in Rule 5123:2-6-03 of the Administrative Code will be responsible for training unlicensed workers.
2. A licensed registered nurse, in accordance with Rule 5123:2-6-03 of the Administrative Code, appropriately supervises the delegation of administering medications or tasks to unlicensed workers.
3. A licensed nurse may request copies of health information that would directly affect delegated nursing of a task or medications, for review prior to assessment.
4. A licensed registered nurse will arrange to do the nursing assessment of the consumer complying with Rule 5123:2-6-03 of the Administrative Code.
5. Upon completion of the nursing assessment and signing of delegated nursing release by the consumer/personal representative, the nurse decides what nursing tasks are to be delegated in accordance with Rule 5123:2-6-03 of the Administrative Code.
6. The licensed nurse acquires from the consumer's physician an order to delegate the task or medications under supervision of the licensed registered nurse.
7. A licensed nurse will reassess the consumer a minimum of once a year and more frequently if needed.
8. Delegated Nursing will be reflected in the consumers' service plan.

Originated: 10/94

Reviewed: 4/96, 4/97, 2/98, 8/2000, 10/04, 4/05, 12/05, 12/06, 12/07, 12/08, 11/09, 12/10, 1/12, 5/12, 11/13, 11/15, 11/16, 5/17, 11/17, 11/18, 11/19, 3/21, 4/24, 1/25

Revised: 4/96, 4/97, 2/98, 10/04, 1/12, 5/12, 5/17

POLICY:

Easterseals Central & Southeast Ohio, Inc. has in place procedures regarding the suspension and revocation of the ability of staff to perform delegated nursing duties.

PROCEDURE:

1. When certified staff does not safely perform the responsibilities required for medication delegation, the Delegating Nurse, the Director of Adult Community Services and the Human Resources Manager shall immediately suspend their ability to perform any certified functions. Suspension may be temporary but could lead to revocation depending upon circumstances.
2. Employees who are suspended will go through additional training with the Delegating Nurse. After the retraining the Delegating Nurse will report to Director of Adult Community Services and Human Resources Manager the status of the employee's retraining.
3. Delegating Nurse must report all evidence to Director of Adult Community Services and Human Resources Manager prior to the possible State revocation process.
4. Revocation will occur if certified personnel do not demonstrate compliance and /or are not performing their duties in a safe manner according to certification training. Revocation is a permanent removal of certification and may lead to termination of employment. The agency/employer needs to notify DODD or use MAIS to request a DODD review of evidence that would then be determined by DODD if pursuit of revocation is warranted and supported by sufficient evidence. DODD will send out the notification of intent to revoke and reason for revocation.
5. Revocation is initiated only by DODD formal notice of intent to revoke, and is sent to the employee's home via certified mail. In the notice the steps and timelines for requesting a hearing are listed.
6. The employee may appeal the revocation with DODD.

Originated: 10/18

Reviewed: 11/19, 3/21, 4/24, 1/25

Revised:

POLICY:

Easterseals Central & Southeast Ohio, Inc. has in place procedures that comply with applicable standards to give oral or apply topical medications.

PROCEDURE:

1. All staff intending to give oral or apply topical medications must satisfactorily complete the program of instruction to give oral or apply topical medications set forth in Rule 5123:2-6-03 of the Administrative Code, including successful return demonstration.
2. Before any medications, prescribed or over the counter (OTC) are administered, a physician's order must be obtained per program requirements.
3. The physician's order should state the name of the medication, dose, frequency, time, and route to be given. This must be signed and dated by the prescribing physician.
4. All medications must be in an appropriately labeled bottle or container for that medication strength or dose, frequency, and route. Staff cannot accept medications that arrive in plastic bags or any other container except a properly labeled one.
5. Medications may be transported for outings or appointments in properly labeled bottles or containers and administered as prescribed/ordered.
6. At the end of every shift, controlled substances will be counted and documented by each certified personnel administering a controlled substance. This procedure is very important to ensure that an individual receives the prescribed amount of a controlled substance as well as ensuring that the controlled substance is not being stolen and/or used by others.
7. All Incident Reports containing medication errors will be sent to the delegating nurse and the county board.

Originated: 9/89

Reviewed: 6/90, 2/93, 7/93, 10/94, 4/96, 8/2000, 10/04, 4/05, 12/05, 12/06, 12/07, 12/08, 11/09, 12/10, 1/12, 5/12, 11/13, 11/14, 11/15, 11/16, 11/17, 11/18, 11/19, 3/21, 4/24, 1/25

Revised: 6/90, 2/93, 7/93, 10/94, 4/96, 10/04, 5/12, 11/14, 10/18, 1/25

Easterseals Central & Southeast Ohio, Inc. has a plan in place to prepare for and respond to a threat of influenza or other pandemic that causes serious or widespread illness.

POLICY:

All Easterseals center-based locations will remain open unless mandated to close by state or federal agencies.

To minimize the risk to the individuals we serve, as well as that of staff, the following protocols will be in place by direction of the C.E.O. and continued until further notice.

General Staff Protocols:

1. Always use Universal Precautions.
2. Practice Handwashing Protocols.
3. If you are in direct contact of those served change your clothes as soon as you return home.
4. No handshakes or hugs.
5. Remember to disinfect surfaces in your home and workspace.
6. Do not come to work ill. If you have been ill, follow medical advice before returning.
7. If you plan to travel out of the country, you need to make Human Resources and your supervisor aware. It should be further noted upon your return you will be required to self-quarantine at home for 14 days. You may use PTO during this time but if none is available you will not be paid.
8. In the event of self or government quarantine only exempt essential personnel will be eligible to work from home.

Facility Based Protocol for Early Intervention and Adult Day Services:

1. There are to be no visitors in spaces utilized by students and participants. This includes the program floors, classroom, and gyms. Visitors include but are not limited to Volunteer Groups, Case Managers, SSA's, Families, Guardians, outside home health providers, therapists, and educational staff from schools.
2. Visitors may be in lobby areas.
3. Easterseals staff who work in an administrative capacity in the Hilliard office should refrain from being in the classrooms and gym while students are present.
4. All tours of facilities should occur when students or participants are not receiving services.
5. All outside social and recreational activities/outings are cancelled. Likewise, any social or recreational activities from outside groups in the programs should be cancelled and rescheduled.
6. No meetings should be scheduled or occur with outside entities within Easterseals buildings.
7. Education and Adult service staff should ensure handwashing of students and participants upon arrival, before and after lunch, as well as upon departure at a minimum. We should discourage peer to peer touching and encourage adequate space between people.
8. Adult Day staff should be prepared to assist with In Home participants in the event ADS census is low.

In Home Services:

1. In Home Services will operate even in the event of government quarantine for individuals who have no natural supports who need health and safety related services.
2. Outings into the community should be limited to grocery shopping, medical appointments, banking, and medication pick up.

3. In Home Management should be scheduling staff in minimum number of homes as possible to eliminate the potential for cross contamination.
4. PPE is available to staff for their protection. Please contact your supervisor.

In the event of a mandated closure, the following are considered essential staff positions, and will be required to continue working as needed:

Revenue Cycle Manager	Outreach & Community Engagement Manager
Community Service Managers	Marketing Manager
Human Resources Manager	School Age Programs Manager
Controller	Senior Team Members
In Home Coordinators	Ombudsman Staff
Nurse	

In Home direct service staff working in sites that are still operating will also be considered essential staff.

Absence of staff during a Pandemic will be excused if the absence is due to either a diagnosis or quarantine, for staff or family member living in the same home and confirmed by documentation from a licensed medical provider. Staff will be eligible to use their accrued Short-Term Disability (STD) after 3 days of PTO are applied for quarantine, or quarantine while awaiting test results. If COVID test results are positive, only 1 day of PTO will be required before accessing the STD bank. Number of hours applied for part-time staff will be calculated as an average day over the past 3 months. Staff must provide written proof of quarantine requirements and/or test results.

Teleworking:

Essential staff listed above may be asked to work from home intermittently, or full-time during a pandemic event. Each of the staff listed above have been provided with the equipment necessary to perform their job duties. When working from home your work schedule and availability should mirror your typical work schedule as closely as possible.

Easterseals has security measures in place to protect the integrity of confidential and HIPAA protected information. Only Easterseals owned and issued computers may be used for work purposes. FortiClient must be installed on all computers for VPN access to the Easterseals server.

Originated: 03/20

Reviewed: 08/22, 9/22, 4/24, 1/25

Revised: 01/21, 08/22, 9/22