

# PHASE ONE: GUIDELINES TO SUPPORT THE GRADUAL REOPENING OF DAY SERVICES

## A) INTRODUCTION

In response to the COVID-19 pandemic and to ensure the health of participants and staff, as of March 18, Community Living disABILITY Services (CLDS) began only offering day services to individuals who met one of the following critical criteria:

- a family member might lose their job if the day service is not provided;
- a home share provider cannot provide care during the day; or
- the individual cannot be safely supported at their home during the day.

CLDS is working closely with public health officials on when we can phase-in a safe reopening of day services. Day services providers are being asked to consider how public health directives will impact their daily operations upon reopening.

When non-critical day services reopen to the first group of individuals, it will not be a return to normal. This transition must be done in a thoughtful, limited and gradual manner.

## B) RISK MITIGATION – GENERAL GUIDELINES

CLDS continues to implement public health directives regarding social distancing, use of personal protective equipment (PPE) and handwashing in all facilities.

The most effective measures to reduce the spread of COVID-19 include separating people by maintaining physical distance and the use of physical barriers. COVID-19 spreads more easily when contact between individuals is close (within two metres or six feet) and prolonged (more than 15 minutes). Day services facilities may operate if the number of people and the activities allow for maintaining a physical distance of at least two metres, except for brief exchanges, where possible. Similarly, where possible, day services providers are encouraged to keep participant groups in separate rooms or spaces to limit the amount of contact between participants.

CLDS recognizes that the recommended physical distancing measures are not always practical during the provision of services. Therefore, it is most effective to use a layered approach and to develop administrative measures that support individuals to consistently follow personal preventive practices (e.g., environmental cleaning, conducting frequent hand hygiene) that decrease the number of interactions, while increasing the safety of interactions that occur. Adapted responses and recommendations may be required in situations where health, age, ability, status or other socio-economic and demographic circumstances may limit the ability of some groups or individuals to follow the recommended measures.

Direct service providers must prepare to follow these public health guidelines as they plan for reopening:

### **Maximum Number of Individuals**

The maximum number of individuals allowed within a facility will depend on:

- the size of the room,
- the type of activity, and
- the ability to maintain physical distancing (two metres or six feet) wherever possible.

Day services providers will have to set occupancy limits for their spaces based on physical distancing requirements. For example, if only 10 individuals (including staff) can meet physical distancing requirements, then a 10 person maximum must be enforced.

Staff-to-participant ratios must be considered when determining the number of participants and staff who can safely return to a facility. If a day service supports individuals with higher support needs, more staff may be required. This may reduce the number of participants who can return.

The most important considerations when determining the number of individuals who can safely be supported at the day service are the ability to maintain physical distancing and the level of risk to program participants, as outlined in the following section.

### **Gradual Reopening**

Day services providers may reopen gradually, which could include a staged increase in participant numbers to ensure public health guidelines can be maintained. A gradual return to services will allow day services staff the opportunity to identify and address any challenges with respect to reopening.

### **Promote Physical Distancing**

Physical distancing of two metres or six feet between all individuals in the facility should occur as much as possible between all individuals present in the day service setting. This is applicable for both indoor and outdoor activities and during pick-up and drop-offs.

When working in this setting:

CLDS participants with no symptoms should continue to be treated as they typically would be treated by staff, but with physical distancing now in place as much as possible.

Where possible, arrange spaces to encourage the recommended physical distancing. For example, spacing participants to avoid close contact during activities.

Facilities must maintain a single point of entry which is regulated to help prevent people gathering around the doors. Physical barriers should be used, if necessary, to encourage distancing at entrances and exits.

External signs should remind people about physical distancing protocols which can be reinforced with floor markings.

The number of individuals entering the facility should be minimized. Consider doing drop-offs and pick-ups outside if possible or staggering drop-off and pick-up times.

### **Hand Hygiene**

Practicing frequent hand hygiene is an essential protective measure to keep staff and program participants safe from COVID-19. Both staff and participants need to wash their hands frequently with soap and water for at least 20 seconds:

- when they arrive
- after coughing or sneezing
- after using the toilet
- before, during and after preparing food
- before eating any food including snacks
- before using shared materials
- when they leave

An alcohol-based hand cleanser (with at least 60 per cent alcohol) may be used if hands are not visibly dirty and soap and water is not available.

Hand sanitizer should be available at the entrance/exit for day services participants and staff. All individuals must wash or sanitize their hands when arriving.

Handwashing signs must be posted in restrooms. Facilities must monitor stocks of hand cleaning supplies to ensure all sinks have handwashing supplies at all times (i.e., soap and single-use towels).

### **Enhanced Cleaning and Sanitizing Protocols**

Service providers should review existing cleaning and sanitizing practices and determine where improvements or more frequent cleaning are required. A cleaning regime for environmental sanitization must be in place when day services reopen.

High touch objects and surfaces (e.g., pencil sharpeners, doorknobs, faucet handles, remote controls, electronic devices and small appliances) in facilities must be cleaned and disinfected regularly and sanitizing processes must be monitored.

Additionally, special care must be taken to protect individuals within group settings by:

- sanitizing work/service areas after each use
- cleaning and disinfecting high touch items that are shared between participants (e.g., computers, telephones, writing utensils, etc.) between each use

Following the appropriate steps to clean and sanitize will help eliminate germs within the facility, decreasing the risk of spreading COVID-19 to participants and staff.

#### **Cleaning**

- If using a utility sink, be sure it is clean and sanitized before filling with warm/hot water and detergent.
- Paper towels or disposable cloths must be used to clean surfaces.
- Clean surfaces and objects with warm water and detergent first.
- Using friction helps remove most germs as well as dirt.
- Rinse the surface or object well and dry.

#### **Sanitizing**

- Bleach solution must be mixed daily to be effective.
- Use a mixture of five (5) ml of bleach to 500 ml of water.
- This can be used in a variety of areas such as tables, countertops, door knobs or handles, books, toilets or telephones.

- Spray sanitizer on the surface and let it sit for at least 30 seconds before wiping to be effective.
- The most effective procedure is to allow the surface to air dry. If wiping dry, use a paper towel (not a cloth towel) and throw it into the garbage.
- Label the sanitizer (bottle/container) with name and contents of solution.
- Store in a secure location away from heat and light.
- Wear rubber gloves to protect hands from irritation and wash your hands immediately after removing them.

### **Cleaning and sanitizing spills that include blood or bodily fluids**

- Disposable rubber gloves must be worn.
- Clean the majority of the spill with paper towels and throw them into a covered, plastic-lined garbage.
- Clean the contaminated area with water and a detergent using disposable paper towels. Use additional paper towels to rinse and then dry the area.
- Sanitize using a freshly-made bleach solution.
- Discard rubber gloves into the garbage.
- If a mop was used to clean bodily fluids, rinse it in a sanitizing solution and air dry with the mop head up. When cleaning blood, use a disposable mop if possible and discard into the garbage immediately. If the mop is not disposable, remove the mop head and wash in hot water and detergent immediately after cleaning.

### **Engineering and Other Facility Considerations**

Service providers should create an environment that promotes personal hygiene and helps reduce the spread of germs. Facilities should consider:

- removing objects that cannot be easily disinfected from common areas;
- replacing objects that require touching with non-touch objects (e.g., trash cans);
- placing hand soap and alcohol-based hand rubs throughout the facility; and
- providing disinfectants and disposable towels for staff to clean facility surfaces.

Facilities should also increase ventilation within the building by adjusting the HVAC system or opening windows, whenever possible.

## **C) ADMINISTRATIVE CONTROLS**

### **Record Keeping**

Day services providers must record daily staff schedules along with daily participant attendance/schedules. This will help expedite contact tracing if someone is suspected to have been exposed to COVID-19.

### **Screening**

Screening for symptoms is important to identify any potential cases of COVID-19 as quickly as possible, before exposure to others. Day services providers must implement a daily self-assessment procedure for staff, CLDS participants and visitors (if applicable).

The self-screening tool can be found online at:

<https://sharedhealthmb.ca/covid19/screening-tool/>

Service providers should strengthen communication with staff and CLDS participants about when to stay home. People should self-isolate if they:

- are experiencing symptoms similar to those of COVID-19
- have travelled outside Manitoba in the previous 14 days
- are a close contact of a confirmed case of COVID-19
- are awaiting a COVID-19 test result (excluding people tested as part of voluntary asymptomatic surveillance for COVID-19 who do not need to self-isolate)

### Staff Screening

Staff who have symptoms or are otherwise required to self-isolate should not provide services or enter a day services facility. In addition, staff should self-monitor daily for signs and symptoms of COVID-19. Staff with an elevated temperature or any symptoms of COVID-19 must stay home, self-isolate and be excluded from work. Day services providers must maintain records of staff absenteeism.

### Participant Screening

Service providers should develop a plan to clearly communicate the requirement to monitor daily for symptoms before attending services to CLDS participants and/or their families. CLDS participants and/or their families should be asked daily to confirm they have no symptoms and are not otherwise required to self-isolate. Day services facilities are not required to screen participants for specific symptoms or take temperatures upon arrival.

If a CLDS participant meets any of the exclusion criteria, they should not be provided services and should be advised to immediately self-isolate and consult Health Links – Info Santé or their health care provider. If those with symptoms test negative for COVID-19, they can return 24 hours after symptoms clear. If individuals choose not to be tested, they should self-isolate for 14 days from symptom onset and may return if symptoms have resolved at that time.

A chronic stable cough, sneeze, runny nose or nasal congestion that is unchanged and clearly linked to a known medical condition such as asthma or allergies is not an absolute requirement for exclusion. However, changing or worsening of chronic symptoms require self-isolation and contact with Health Links – Info Santé. Service providers should exercise judgment related to symptoms but, when in doubt, err on the side of caution to exclude the individual from services and advise them to contact Health Links – Info Santé or their health care provider.

Guidelines may change based on information from public health officials. You can visit [www.manitoba.ca/covid19](http://www.manitoba.ca/covid19) for information on prevention and updates on the evolving situation.

### Screening Visitors to Day Service Facilities

Visitors or volunteers are permitted but must adhere to physical distancing and recommended hygiene practices when on the premises. It is recommended that volunteers and visitors are limited to those who regularly attend day services to minimize the number of possible exposures outside the facility.

Before entering the facility, visitors should complete the self-screening tool to confirm that they have no symptoms consistent with COVID-19 and are not required to self-isolate.

Visitors with symptoms should not enter the facility. Facilities are required to keep a list of all visitors with confirmation that they have been screened.

## **D) PERSONAL PROTECTIVE EQUIPMENT PROTOCOLS**

Day services staff must be provided with personal protective equipment that is appropriate for their environments. Refresh staff learning on proper PPE application and removal techniques. Participants do not need to wear PPE if they are well.

### **Facility-Based Day Services**

Facility-based day services staff must adhere to the following:

Masks must be worn at all times.

- Masks should not be removed throughout the day as this increases risks of transmission.
- Masks should be removed and discarded at the end of a shift.
- Use one mask per shift and change only if it becomes wet, damp, damaged or soiled.
- Eye protection is not required to be worn unless a participant arrives at the day service and becomes symptomatic during the day. Participants who are symptomatic before arriving at the day service, awaiting a COVID-19 test result or who have been exposed to a confirmed case should not be attending day service.
- Gloves are required when providing intimate personal care as per routine practice (e.g., contact with blood or bodily fluids).
- Disposable gloves must never be reused or washed.
- Gloves do not replace the need for hand hygiene.
- Hand hygiene must be done before putting on gloves and after removing them.
- Gloves must be changed when they become visibly soiled.
- Gloves must not be worn outside of the facility, as this increases the risk of transmission.

Gloves, gowns and eye protection must be worn if a participant becomes ill or begins showing new symptoms during the provision of facility-day services. In this scenario, service providers should isolate the participant. If the symptomatic participant can wear a mask they should do so. If they require personal care then staff should put on full PPE. Contact Health Links at 204-788-8200 or 1-888-315-9257 for additional guidance.

Staff must follow guidelines for appropriate PPE usage as directed by public health officials and Shared Health: <https://sharedhealthmb.ca/covid19/providers/ppe-resources/>.

### **Community-Based Day Services**

Community-based day services staff must adhere to the following:

Masks do not need to be worn if physical distancing can be maintained (i.e., two meters or six feet). If a mask is deemed necessary, follow these guidelines:

- Masks should not be removed throughout the day as this increases risks of transmission.
- Masks should be removed and discarded at the end of a shift.
- Use one mask per shift and change only if it becomes wet, damp, damaged or soiled.

Gloves are required when providing intimate personal care as per routine practice (e.g., contact with blood or bodily fluids).

- Disposable gloves must never be reused or washed.
- Gloves do not replace the need for hand hygiene.
- Hand hygiene must be done before putting on gloves and after removing them.
- Gloves must be changed when they become visibly soiled.

Gloves, gowns and eye protection must be worn if a participant becomes ill or begins showing new symptoms during the provision of day services. In this scenario, service providers should isolate the participant. If the symptomatic participant can wear a mask they should do so. If they require personal care then staff should put on full PPE. Contact Health Links at 204-788-8200 or 1-888-315-9257 for additional guidance.

Staff must follow guidelines for appropriate PPE usage as directed by public health officials and Shared Health: <https://sharedhealthmb.ca/covid19/providers/ppe-resources/>.

## **Employment-Based Services**

CLDS participants who work within the community and service workers who provide direct supports at their place of employment should follow the PPE guidelines of the participant's workplace.

PPE must be used in combination with physical distancing, hand hygiene and other measures. In some workplaces, PPE may be used to protect workers and customers. PPE requirements for businesses are at the discretion of employers and are based on a risk assessment that considers the specific task/activity, as well as the risk of COVID-19. Ideally, the use of PPE is implemented with the advice of an organization's occupational health and safety office, health or safety committee or health and safety representative.

If PPE is determined to be a workplace requirement then employers are required to supply program participants with the required PPE. Additionally, if employers provide PPE then they must also provide training to workers on when PPE should be used, how they should put it on and take it off and how to clean, store and/or dispose of it. CLDS is responsible for supplying agencies with PPE when employment-based service workers require it.

Additional information on workplace guidance for businesses and employees can be found at: [www.manitoba.ca/restoringsafeservices](http://www.manitoba.ca/restoringsafeservices). Industry specific guidelines can be found at [www.gov.mb.ca/covid19/restoring/industry-sectors.html](http://www.gov.mb.ca/covid19/restoring/industry-sectors.html).

## **E) PPE SUPPLY CHAIN**

Required PPE is ordered and distributed on a biweekly schedule. Agency staff are allotted one mask per shift.

Agencies are responsible for emailing their PPE contact to request PPE.

- In Winnipeg, email [Misty.Prescott@gov.mb.ca](mailto:Misty.Prescott@gov.mb.ca)
- In rural and northern regions, email [Lorna.Ives@gov.mb.ca](mailto:Lorna.Ives@gov.mb.ca)

Agencies must provide the number of staff scheduled per day. PPE contacts use this information to calculate PPE requirements. Once an agency submits their first order it remains as a standing biweekly order. Agencies must inform their PPE contact when changes to staffing occur so a new standing order can be created.

Agencies are responsible for picking up their orders.

- In Winnipeg, at 114 Garry Street.
- In rural and northern regions, at regional offices or they may be delivered to the agency.

**Note:** For day services agencies who have redeployed staff to residential settings, the residential agency will provide PPE.

## F) ASSESSING PARTICIPANT RISK FOR ATTENDING DAY SERVICES

Protecting vulnerable CLDS participants remains the program's top priority. Day services providers should work with community service workers to assess participant risk for attending day services.

Some participants are more at risk of developing severe complications and a cautious approach needs to be taken when delivering services to them.

This includes **medically compromised individuals** who are over the age of 65, have underlying medical conditions (including cardiac or respiratory issues) or have a compromised immune system.

Day services providers are encouraged to mitigate risk by reducing the number of participants at the day service who are medically compromised.

Community support workers should also identify **CLDS participants with medically compromised roommates** and share this information with service providers. This is not to suggest that medically compromised individuals or individuals with medically compromised roommates should have limited access to day services, but extra precautions should be taken to protect vulnerable individuals from potential COVID-19 exposure.

Individuals at greater risk of getting a COVID-19 infection include those who:

- have difficulty with preventive activities like frequent handwashing and covering coughs and sneezes, or
- have behavioural challenges and may have difficulty maintaining physical distancing requirements.

Day services providers are encouraged to use best practices to protect staff and program participants, including the use of PPE and frequent handwashing.

## G) TRANSPORTATION

It can be difficult to maintain social distancing within a vehicle, however, the following practices should be implemented to ensure that transportation is provided in the safest manner possible:

- The driver and passenger(s) should be screened for COVID-19 symptoms prior to transport.
- Reasonable physical distancing should be enforced to the greatest extent possible, taking into account the size of the vehicle. In smaller vehicles with one passenger, having the participant sit in the rear passenger-side seat with the windows open is good practice.
- Drivers and passengers should practice hand hygiene, avoid touching their face and practice cough/sneeze etiquette.
- Drivers may wear face masks, however, eye protection must not be used as it could affect their ability to drive safely.

- Vehicles must be disinfected regularly, paying particular attention to high touch areas (e.g., door handles, window controls).

Additional resources for employees providing transportation services can be found online at: [https://www.gov.mb.ca/asset\\_library/en/coronavirus/business-employees-vehicles-guidance.pdf](https://www.gov.mb.ca/asset_library/en/coronavirus/business-employees-vehicles-guidance.pdf).

## H) ADDITIONAL INFORMATION

Day service providers should communicate all current and expanded health prevention and protection measures to returning staff. Additional information on reducing risk and workplace guidance can be found at: [www.manitoba.ca/restoringsafeservices](http://www.manitoba.ca/restoringsafeservices) and <https://www.gov.mb.ca/covid19/restoring/index.html>

As plans continue to restore services in Manitoba, CLDS program staff will continue to be in contact with all facilities to support their reopening or expansion efforts including circulars and emails.

Several printable resources, including posters and factsheets on COVID-19, are available online at: [manitoba.ca/covid19/resources/index.html](http://manitoba.ca/covid19/resources/index.html) and <https://sharedhealthmb.ca/covid19/providers/posters/>.

Further details on PPE application/removal and infection control procedures are available at: <https://sharedhealthmb.ca/files/PPE-on.pdf> and <https://sharedhealthmb.ca/files/PPE-off.pdf>.