



## Considerations for Day Programs' Transition to In-Person Attendance

The California Roadmap to Resilience and local county Public Health Departments will continue to outline requirements for businesses during the COVID-19 pandemic. It is the responsibility of each business to be informed of these requirements so any necessary adjustments to internal Policies and Procedures can be made to maximize safety for all. These requirements will change over time, so business owners must continue to adapt and modify operations as needed, communicating closely with employees and the individuals they serve.

Below are the key planning components along with some ideas and questions to consider when planning to reopen a day program for individuals served by San Andreas Regional Center.

### Planning Prior to Reopening:

- Communication with families/individuals/residential providers
  - Complete preliminary plan for transition to be shared with individuals/families
  - Survey families/individuals/residential providers about day program's plan for re-entry
    - Client's level of comfort with wearing a face mask/social distancing
  - Notice to families/individuals/ residential providers regarding changes in programming and new day program guidelines
- Criteria for bringing individuals back into program
  - How is the program, as part of the ID team, taking into consideration the individual's choice to return
  - Ensuring no discrimination of clients but assessing the health and safety of each client on an individual basis with the ID team
    - Criteria for resuming services should be based on health and safety needs of the individual, should not be based on criteria related to: behavior or health care plans, previous COVID positive result, history of COVID positive result in the residence, etc.
  - SARC services are self-entitlement services. Providers cannot make families sign liability waivers
  - Assessing clients for readiness with consideration of:
    - Risks versus benefits of delaying re-entry
    - Ability to cope with the at-home routine
    - Ability to participate in precautionary measures for infection control
    - Any alterations to the expected routine and the consumers ability to adapt
  - Consideration for day programs to ensure person-centered planning is still practiced
- Review of behavior intervention and restricted health care condition care plans for each individual. Plans to be updated to address COVID risk prevention in relation to behavior and health needs
- Personal Protective Equipment (PPE)
  - Who is required to provide PPE for staff/clients
  - How will day program support clients/staff if they forget their PPE
  - What types of PPE will the day program offer and to whom (staff only, client's attending, visitors, etc.)
  - What is the day program's support system for getting more PPE when they are out?
    - What is the day program's standard for PPE? (Ex. "material covering," "fabric face covering," "N95," etc.)
    - Alternatives (face shield) for individuals who can't wear a mask



- Process and procedures for following CDC and public health guidelines
  - Prepare and complete a Social Distancing Protocol (SDP) for each facility in the county according to requirements and guidance by the county.
  - “COVID-19 Prepared” sign and SDP Visitor Information Sheet, to be printed and posted at or near the entrance of the facility, such as a window, easily viewable by the public and personnel from outside the facility.
  - Provide training for staff/clients about CDC and public health guidelines and new program procedures or protocols
  - Conduct symptom checks following CDC health guidelines and Title 22 Section 82075.1 requirements while ensuring HIPAA compliance
    - Ensure symptoms check is completed and recorded in a communication book that can be shared between residences and day programs
  - When staff/client come to program with COVID-19 identified symptoms, what is the program’s process for sending them home, site disinfection, quarantine from program for two weeks, etc.

#### Site & Community Based Day Programs:

- Visitor consideration\*\*
  - Limit non-essential individuals entering the site. The definition of a non-essential individual should follow the county’s definition and may change as the county enters different phases for reopening. All changes to procedure should be communicated with staff/individuals/families.
  - Maintain a log of who is entering and exiting the building that documents a self-symptom check, handwashing, wearing mask.
- Reconfiguring facilities\*\*
  - Stagger break and lunch times for individuals
  - The “COVID-19 Prepared” sign and SDP Visitor Information Sheet must be printed and posted at or near the entrance of the facility, such as a window, and shall be easily viewable by the public and personnel from outside the facility
  - Remove communal furniture (e.g. cloth couches) that is difficult to clean
  - Place physical guides (e.g. tape on floors, signs on walls, “one-way routes” in hallways)
  - Modify layouts for tables and chairs to allow for 6 ft. social distancing
  - Install physical barriers such as sneeze guards and partitions in high traffic areas
- Remove high touch items (books, magazines, etc.) that are difficult to clean or keep what each client uses separate from that of others (e.g. each client is assigned a storage container)
  - Provide clients with their own supplies (pencils, pens, pencil box, etc.)
- Update protocol for cleaning the facility and surfaces\*\*
  - Hourly cleaning on high touch areas or between each user
  - Touchless soap and paper towel dispensers
  - Appropriate ventilation throughout facility (increased air flow, allowing outside air to move through the building)
- For individuals and staff hygiene:
  - Use hand sanitizer or handwashing with soap and water for at least 20 seconds after touching face, touching communal surfaces, etc.



- Promote wearing appropriate PPE, including face covering, during transportation and program hours
  - Provide training of proper hygiene techniques to be followed while at the day program prior to reopening and ongoing
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- All activities held outside, in facility's backyard or community setting, must follow social distance guidelines according to the CDC and state and local Public Health departments
  - Assess community or volunteer locations for social distancing and safety appropriateness and assess potential risks. If it doesn't meet program expectations, find an alternative.
  - Adequate supplies are packed and carried by staff to support health hygiene behavior for staff and consumers, including hand sanitizer, tissues, trash receptacles, etc.

\*\*Asterisks are placed next to sections pertaining to site based/licensed programs.

#### Program Services Implementation:

- Any adaptations to the current service model must be submitted to SARC under a Program Design Reinvention Addendum (i.e. flexible schedules, modified settings, etc.).
- Consider hybrid services with remote and on-site combinations, such as
  - 1 staff with 2 clients on site and 2 clients are on remote services experiencing the same class
  - Clients attending on alternating days, e.g. client attends Mon/Wed/Fri in person and Tue/Thur remotely
  - Clients come in once a week on a rotating schedule and engage in remote services the rest of the days that week
  - Groups and schedules should be consistent with the same individuals to minimize contact with individuals

#### Transportation:

- Ensure that drivers and individuals are following the social distancing guidelines based on CDC and public health guidelines and recommendations.
  - The "COVID-19 Prepared" sign and Information Sheet must be printed and posted at the front or on the side windows, and shall be easily viewable by the public and personnel from inside the vehicle
  - Notice is given by the transportation provider to families/individuals/residential providers/day programs regarding changes in process, procedure, and new transportation guidelines
- Cleaning
  - Store cleaning kits in every vehicle
  - Cleaning between each ride on every touch point
- Collaborate with day programs/families/ residential providers on drop off/pick up schedules
  - Geographical location of clients kept in mind
  - Families/care homes who may be able to transport individuals
  - Transporting individuals from the same residential facility together to their day programs
  - Driver training and supervision to ensure individuals are receiving appropriate supervision and support.
- Personal Protective Equipment
  - Ensure that drivers have been trained in appropriate use of PPE and social distancing guidelines
  - Are individuals responsible for providing their own PPE?
  - How will transportation providers support clients if they forget their PPE?



Additional Resources for Guidance:

[US Department of Transportation](#)

[CDC- Planning, Preparing & Responding](#)

[CDC Flowchart for Reopening](#)

[State of CA Resilience Roadmap](#)

[Cal/OSHA and Statewide Industry Guidance](#)

[Santa Clara County Site-Specific Protection Plan](#)

[Santa Clara County Additional Businesses Allowed to Operate](#)

[Monterey County Reopening Guidance](#)

[San Benito County Reopening Guidance](#)

[Santa Cruz County Reopening Guidance](#)

[CDC Guidance for reopening regarding cleaning and disinfection](#)

[CDC Decision-making guide for cleaning/disinfection](#)

[CDC Guidance on Disinfecting transport vehicles](#)

[California Department of Public Health County Variance Attestation Form](#)