



- Staff began working remotely on 3/20/2020
- 38 staff have consistently worked remotely since March
- Successful remote work opportunities prevented layoffs
- Modified in-person Summer Camp Program began on July 6<sup>th</sup>
- Successful Summer Camp concluded by the end of July 2020
- Modified in-person visits began in July 2020
- PCBDD staff remain productive
- Children's Program has seen increased productivity
- Many staff have increased training hours
- Senior Leadership Team continues to meet weekly to review status, assess impact, and recommend change, as necessary.
- Uninterrupted, continued connections with people and families
- Virtual communication methods include:
  - Office 365 Teams, Facetime, Zoom, GoTo Meeting, Text, and Facebook Messenger
- Plans and updates are deployed to staff and community
- In August 2020, in-person connections were permitted to resume with supervisor approval
- Effective November 2020, staff are coming the office environment on a more regular basis

# PCBDD COVID-19 Preparedness & Response Plan:

## A. Prevention Measures, Compliance, and PPE

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1. Staff shall stay home when they are sick, symptomatic, or have been exposed to COVID<sup>1</sup>.
2. A full supply of Personal Protection Equipment is stocked in each facility (masks, gloves, hand sanitizer, surface disinfectant). PPE stock and supplies are checked regularly. If PPE runs low and a sufficient supply cannot be obtained, staff may be requested to work remotely.
  - a. Face masks are available for all staff.
  - b. Staff are supplied with a personal stock of hand sanitizer.
  - c. Other PPE such as gloves, disinfectant wipes, and face shields are available as necessary or requested.
3. Hygiene guidelines are posted throughout PCBDD facilities. Staff are expected to follow all hygiene guidelines.
4. Support and flexibility may be considered for staff who want to continue to work remotely, although staff are encouraged to develop plans to return, in some capacity, to the traditional office environment.
  - a. Vulnerable staff or staff in one of the at-risk categories below should connect with their supervisor to discuss a plan to continue working remotely.

At risk categories include:

    - i. People who are 65 years of age and older
    - ii. People who are any age and suffer from the following conditions:
      - *Cancer*
      - *Chronic kidney disease*
      - *COPD*
      - *Immunocompromised state*
      - *Obesity (BMI of 30 or higher)*
      - *Serious heart condition*
      - *Sickle Cell Disease*
      - *Type 2 diabetes*

5. Visitors (non-PCBDD staff) are **not permitted to access** PCBDD facilities at this time. Exceptions may be made by department directors and communicated to appropriate PCBDD staff.
6. Staff are expected to follow all state orders and guidelines.
  - a. Staff will comply with 6 ft. social distancing standards.
  - b. Staff will wear a face mask/covering in *shared*, indoor office spaces or when social distancing cannot be practiced<sup>3</sup> unless there is a proper exception.
7. Staff may be asked to quarantine upon return from vacation<sup>4</sup>. Supervisors will consider the State Travel Advisory Map (updated every Wednesday) when making individual quarantine decisions related to travel.

## B. In-Office Protocol

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1. Staff review, acknowledge, and adhere to daily screening protocols<sup>1</sup>.  
*Note:* staff may continue to work remotely as specific situations are considered.
2. Staff continue to utilize virtual meetings and consider in-person connections when the ability to safely adhere to office protocol<sup>2</sup> is possible.
3. Staff Outlook calendars reflect when they will be working in the office setting (vs. working remotely).
4. Staff adhere to the following protocols when accessing any PCBDD facility:
  - a. *Initially* enter the facility at designated entrances:
    - Administration: front door
    - Children’s Program: side alley door
    - Service and Support Administration (SSA): front door
    - Community Connections Center (CCC): front door
  - b. Wear a mask or facial covering upon arrival
  - c. Perform temperature screening and symptoms check<sup>1</sup> with **no access for any ‘yes’** response (After waiting 5 minutes, one temperature re-take is permitted).
  - d. Wash or sanitize hands upon entering and regularly throughout the day
  - e. Adhere to standard office protocols<sup>2</sup> throughout the day
  - f. Sanitize personal workspaces upon arrival, throughout the day, and before leaving.
  - g. Wear face masks/coverings when leaving personal desk or office area and upon entering shared spaces<sup>3</sup>
  - h. Limit congregating (i.e. lunches, breaks, copy machine/mailbox area, cubicles, etc.)
5. Physical barriers may be installed, as necessary.

6. Only one staff will work in a cubicle at one time.
7. Staff shall go home immediately and contact their department director/supervisor if they have been exposed to someone who has COVID or if they themselves develop COVID symptoms<sup>1</sup>.
8. [Upon exposure or symptoms] Staff communicate their intent to return to the office with prior approval from their department director with the following considerations:
  - a. Fever free (without medication) for 72 hours
  - b. Improved symptoms for 72 hours
  - c. May consult with Perry County Health Department (PCHD) before return

## C. Response Measures

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1. Staff communicate suspected exposure to COVID-19 with their supervisor and/or department director. All exposure reports are communicated to the Administrative Supports Director.
2. Department Directors will determine if there was exposure in facilities or to others and recommend/require isolation or quarantine as necessary<sup>5</sup>.
3. Facilities will be closed for decontamination, as necessary.
4. Closed facilities will reopen when it is safe to do so.

## D. Communication

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1. Plans and protocols are updated as new information becomes available. Those plans and protocols are emailed to all staff with follow up conversation.
2. Plans and protocols are deployed externally to customers, stakeholders, and members of the community:
  - a. [Facebook](#) and website [PerryDD.org](#)
  - b. Signage on facility doors and internally throughout buildings
  - c. Active caseload communication about the possibility and status of in-person connections
  - d. Continued communication and support for people, children and families, and providers

## E. Office Sanitation Procedures

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1. Each building has developed a department-specific plan for cleaning, sanitizing, and disinfecting high touch surfaces that includes but is not limited to:
  - a. personal workstations
  - b. shared workstations
  - c. other shared surfaces (lunch tables and countertops)
  - d. copy machines and other shared technology
  - e. railings, door handles, doorknobs
  - f. light switches
  
2. Each building has removed the following items from shared spaces and encourages people to only use their own supply:
  - a. pens
  - b. pencils
  - c. highlighters
  - d. scissors
  - e. staplers
  - f. brochures
  - g. booklets, etc.

## F. Reinforce Key Messages

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1. Protocol signage is posted at the entrances to all PCBDD facilities.
  
2. The following signage is posted throughout all facilities:
  - a. Screening Protocols
  - b. Office Environment Protocols
  - c. Face Mask / Coverings Mandate
  - d. Travel Advisory Guidelines
  - e. Isolation vs. Quarantine Information
  - f. Social Distancing Standards
  - g. Hand Washing Standards
  - h. Other Health & Safety Guidelines, as appropriate