





# Inspire from homeless to home

### COVID-19 Protocols March 16, 2020

## **COVID-19 Protocols**

- 1. Signage
- 2. Communication with Staff and Tenants of Coronavirus Best Practices
- 3. Sanitizing and Supply Replenishment Schedule
- 4. Social Distancing
- 5. Contingency Planning for Staffing
- 6. Client Care
- 7. Quarantine Planning
- 8. Organizational Leadership via Communication



### 1. Signage

- Post CDC Flyers to provide awareness and guidance on prevention.
  - Building entrances "Stop the Spread of Germs"
  - Every floor "Stop the Spread of Germs"
  - Bathrooms "Wash your hands"
  - Kitchens "Food safety"



#### 2. Communication with Staff and Tenants of Coronavirus Best Practices

- Staff Meeting 3/5/2020 Coronavirus Information
- Distribute key CDC flyers to all clients and residents
- Information on Coronavirus: Call 2-1-1 or text "CTCOVID" to 898211



# 3. Sanitizing and Supply Replenishment Schedule

- All staff provided with hand sanitizer, disinfecting wipes, and latex gloves (face masks unavailable)
- Staff to sanitize surface areas and check supply levels 2x per shift (every 4 hours) create checklists
- Wear gloves, use disinfecting wipes, remove gloves and wash hands
- Ensure hand sanitizer is available at all entrances and on every floor
- Ensure bathrooms are stocked with soap and paper towels
- Make tissues available to all
- Ventilate rooms, weather permitting



#### **4. Social Distancing**

- Cancel group activities (parenting program, youth center, CSP group events, etc.)
- Cancel volunteer activities (no donated food unless nonperishable or prepared by organization with Health Department license)
- Limit movement between programs (e.g. for meals and activities)



#### **5. Contingency Planning for Staffing**

- Each program to submit contingency staffing plan to CEO and COO. Assume schools closed and staff calling out sick
- Case management and admin: Work from home? Ensure ability to connect with client and colleagues
- 24/7 facilities: How to staff with skeleton crew?
- All programs and receptions to send staffing schedules to COO and HR. Will be tracking staffing at all locations to ensure adequate coverage through end of fiscal year (6/30/2020)



#### 6. Client Care

- Identify vulnerable clients/tenants (age, medical condition, etc.)
- Case management to make plans to check on the most vulnerable on a regular basis.
- Case management to be provided via phone when necessary, especially fieldwork (CSP and Rapid Rehousing). Ensure contact information is current.
- Case management to ensure client/tenant needs are being met, especially with respect to adequate food supplies for clients/tenants



#### 7. Quarantine Planning

For those who have received medical diagnosis or are exhibiting symptoms and willing to self-quarantine

- Need to provide separate bathroom and kitchen for those infected, if possible.
- Prepare staff with protective gear (face masks and latex gloves supplies needed)
- Ensure ongoing case management (remotely)
- Ensure provisions are made available (food, toiletries, disinfectants, etc.)
- Close off areas used by ill persons. Wait 24 hours for cleaning and disinfection, if possible.
- Continue cleaning and disinfection of shared areas.

# 8. Organizational Leadership via Communication

- Weekly Senior Leadership Meetings review new protocols and overall preparedness
- Emails to entire organization regarding new information (suspension of programs, status of community providers, etc.)
- Coordination with governing bodies, local government, and fellow community providers as needed
- Constant monitoring of new recommendations and developments with respect to coronavirus
- Any suspected cases (staff or clients/tenants) to be reported immediately to COO and HR

