



Emergency Preparedness Plan (EPP)

COVID19

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Purpose

To protect our participants, families, and staff from harm resulting from exposure to an emergent infectious disease while they are in our care, the objective of this policy is to provide guidance to ARC OF HILO direct support staff and administrators on how to prepare for Emergent Infectious Diseases (EID) with potential to pose a significant health threat and danger of infection to our participants, families and staff.

Policy Scope

Local, state, and federal health authorities are the source of the latest information and guidance on prevention, case definition, surveillance, treatment, and response related to a specific disease threat. Regulations and requirements for reporting and responding may vary by state and local health authority. This plan does not constitute medical or legal advice.

The policy addresses four scenarios:

1. General Preparedness for EIDs
2. Local Threat Mitigation – EID outbreak in our Community
3. Suspected Case in an ARC OF HILO Program
4. Vaccination and Return to Work/Program

1. General Preparedness for Emergent Infectious Diseases (EID)

- a. The ARC OF HILO’s emergency response will plan for a community-wide infectious disease outbreak, such as the coronavirus infection COVID19. The ARC OF HILO commits to:
 - i. Build on workplace best practices with a focus on hygiene;
 - ii. Include administrative controls (screening, self-quarantine, visitor policies, employee absentee plans, and medical clearance to return to work/program);
 - iii. Address environmental controls (PPE supply logistics, hard surface cleaning, social distancing within Event Center, ADH and onsite commercial services, disposal of contaminated wastes);
 - iv. Address human resource issues such as employee leave and staff shortages;
 - v. Provide communication planning for staff, participant participants, and families;
- b. ARC OF HILO leadership will be vigilant and informed about EIDs progress and status.

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They will keep the Board briefed as needed on potential risks of new infections through the changes to existing organisms and/or immigration, tourism, or other circumstances.

- c. Communications and updates will be distributed to all employees. The ARC OF HILO website should act as a source of truth and standardized information regarding news, health authority updates, procedures and policies, and provide linkage to CDC and all state health departments where the ARC OF HILO does business. The EPP will be updated as a PDF on the ARC of Hilo of Hilo website.
- d. As part of the emergency response plan, the ARC OF HILO will designate leaders in each program and service group to be responsible to:
 - i. Identify participants we support who may have exceptional/fragile medical needs, premorbid conditions or other high risk vulnerabilities according to CDC guidelines, that may indicate the need to restrict their attendance at the program due to their vulnerable health condition, until such time as they are both vaccinated from the pathogen and cleared to return to program by their PCP.
 - ii. **Observe and report immediately** to ARC OF HILO Management (CEO and Program Director) any identified staff and participants who may have been observed, or reported, to be in close proximity to an infected person, and confirm notification to the Department of Health (DOH) Disease Outbreak Control Division. Immediate cleaning of the suspected infected person's area of physical participant shall be triggered, whether the campus, vehicle or workplace, according to 2 ("M") procedures below.
 - iii. Ensure use at all times by all staff and participants of personal protective equipment (PPE) including masks and gloves during the outbreak until such time as the CDC and local authorities dictate otherwise. The amount that is stockpiled will minimally be enough for several days of care as determined by the number of staff and supported individuals, as well as available storage space and costs.
- e. The ARC OF HILO will regularly train employees and practice the EID response plan through daily observation, training, drills and exercises as part of the ARC OF HILO's emergency preparedness training, with a focus on personal and hand hygiene, campus cleanliness and workplace cleanings.
- f. Policies and procedures will be reviewed by ARC OF HILO Management, Board and Quality Assurance annually, and as needed, to the best of the ARC OF HILO's ability and current expert knowledge of the risks, to ensure the safety and wellbeing of the ARC OF HILO participant population and staff.

2. Local Threat Mitigation – EID outbreak in our Community

- a. **Notification** - Once notified by the public health authorities at either the federal, state and/or local level that the EID is likely to or already has spread to any community where we provide service, the ARC OF HILO leadership will activate specific surveillance and screening according to instructions posted by the Centers for Disease Control and Prevention (CDC), state agency and/or the local public health authorities.
- b. **Mitigation Plan** - The ARC OF HILO will activate a mitigation plan to protect participants and staff by researching the specific signs, symptoms, incubation period, and route of

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infection, the risks of exposure, and the recommendations for community and center-based IDD services, as provided by the CDC, Occupational Health and Safety Administration (OSHA), and other relevant local, state and federal public health agencies. The ARC OF HILO will update the EPP according to changes in community conditions, and change/adjust our various protocols accordingly, as well as communicate those changes to staff and participants served in a timely manner via phone, email or virtual meeting.

- c. **Personal Protection Equipment** - Working with advice from local and state public health authorities, and others as appropriate, the ARC OF HILO leadership including CEO, human resource director and program leadership, in collaboration with the Board, will review and revise internal policies and procedures, and immediately stock up on medications, environmental cleaning agents, and personal protective equipment as indicated by the specific disease threat.
- d. **Staff Education** - Staff will be immediately educated on exposure risks, symptoms, and prevention of the EID. Emphasis will be placed on reviewing basic infection prevention and control, use of PPE, and other infection prevention strategies such as hand washing, personal hygiene, and screening of existing participants, visitors, and new admissions at the beginning of each day. Ongoing training will be provided to ensure compliance and competence to the protocols.
- e. **Respiratory Protection Plan (RPP)** - If EID is spreading through an airborne route, the ARC OF HILO will activate a Respiratory Protection Plan to ensure that employees and participants are not put at undue risk of exposure. The RPP will require immediate use of Personal Protective Equipment, and up to, or including, immediate suspension of the program until the CDC, and the local and state authorities determine that the risk of contagion is low. As we are in an ongoing pandemic with COVID19, the Respiratory Protection Plan remains fully active until further notice.
- f. **Communication with Stakeholders** - Participants and families will receive education about the disease and the ARC OF HILO's response strategy at a level appropriate to their interests and need for information, to include information on the ARC OF HILO website, mailers and calls.
- g. **Communication to third parties** - Contractors and other relevant stakeholders will be briefed on the ARC OF HILO's policies and procedures related to minimizing exposure risks to participants. Suspected COVID infections will be communicated to the DOH for contact tracing and follow-up to ensure that the community is safe.
- h. **On-campus Signs** shall be posted regarding enhanced universal precautions, hand sanitation, respiratory etiquette and/or other prevention strategies relevant to the route of infection at the entry of the homes and other ARC OF HILO facilities along with the instruction that anyone who is sick must not enter the building.
- i. **Pre-Work / Pre-Program Screening** shall be conducted of staff and participants to ensure that symptoms are not present: coughing and fever/temperature over 100 degrees using questions, observations, and thermal scan. Logs may be kept to track screenings based on tier level of the county/state and risk levels in the community at large that poses an increased risk to ARC OF HILO participants and staff.
- j. **Program Temporary Closure** - in the event there are confirmed cases of the EID in the local community, the ARC OF HILO may choose to close the program(s) temporarily, or per county and state directives, and / or delay new admissions, and / or limit visitors, as well as suspend or reduce community activities out of an abundance of caution.

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- k. **Environmental cleaning** - the ARC OF HILO will follow current CDC guidelines for environmental cleaning specific to the EID, in addition to routine daily cleaning for the duration of the threat at large. Staff will be informed and trained in maintaining campus and workplace cleanliness using appropriate cleaning equipment and processes.
- l. **Community Access/Inclusive Activities** – While the mission of the ARC OF HILO is to provide meaningful integration of persons served in their community, the ARC OF HILO will abide by CDC/State/County/City/Business guidelines and restrictions (in that order) to help ensure participant and staff safety and wellbeing, until such restrictions have expired.
- m. **Transportation** – Our goal remains to help participants get to their program, whether onsite with the ADH, or into the community to participate in work activities. ARC OF HILO vehicles used to transport participants will be cleaned at least daily in accordance with ARC OF HILO policy and procedures, and include additional hygienic methods as indicated. Until such time as COVID remains an active threat to our consumers, we will wipe down hard services with anti-bacterial cleaner in each vehicle used to transport participants, such as seats, arm rests, and handrails, before and after pick-up and drop-off.
- n. **Engineering controls** – If indicated by county/state/CDC guidelines, ARC OF HILO staff will direct physical plant alterations such spacing and separation of participant activities to accepted standards, including special processes and areas for contaminated wastes. With COVID19, the recommended social distancing is six (6) feet, which will be the best practice that guides our program operations until the thread has diminished.

3. Suspected Case in Our Program

- a. Participants or on-duty staff who exhibit symptoms of the EID will be asked to exit the program immediately, self-quarantine, and contact their PCP for testing. The ARC OF HILO will follow up with the staff and / or participant / guardian for status of testing, and will notify local public health authorities.
- b. If a suspected infectious participant exhibits symptoms requiring support while awaiting transfer from the ARC OF HILO campus or workplace, the individual will be isolated in a designated isolation room, and all staff contact will remain strictly distanced, and use of PPE and gloves will be emphasized. If ARC OF HILO provides transportation to the individual, a separate trip will be arranged for the suspected infectious person; the driver will maintain PPE throughout the trip, with thorough cleaning of the vehicle upon return.
- c. The ARC OF HILO will report and document suspected COVID cases among our population including staff. Self-quarantine interventions for participants and staff with suspected exposure will be activated as directed by local and state public health authorities, using CDC/state/county/city guidelines. On order to help protect the health and welfare of staff and participants, the ARC OF HILO will restrict any participant or staff with COVID symptoms on ARC OF HILO campus or workplaces until such time as staff or participants are cleared by healthcare authorities, with written documentation thereof.
- d. Person-centered service support and coordination efforts will be central to our approach to handling a suspected COVID case or any more potentially contagious disease that requires the participant served to remain absent from the program until cleared by a medical

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professional. In the event of a prolonged absence from program, we will work with the participant, family, guardian and case manager to help provide a workaround such as virtual access to program components so that the individual can continue to be supported in their activities of daily living.

- e. Staff who must self-quarantine may pose an operating challenge to the ARC OF HILO where we are short-staffed to the required ratio of support in the program, and unable to operate safely. The ARC OF HILO will make every effort to accommodate these staff shortages, including using administrative personnel to help fill staffing gaps, and / or rotate participant attendance randomly to help ensure that participants are able to attend a partial program week until a return to normalcy.

4. Employer & Participant Return to Program Considerations

- a. ARC OF HILO management will abide by its requirements under OSHA, (Center for Medicare and Medicaid (CMS), state licensure, Equal Employment Opportunity Commission (EEOC), American Disabilities Act (ADA) and other state or federal laws in determining the precautions it must take to protect its participants and staff. Protecting the participants and other employees shall be of paramount concern. Management shall consider the following on a case by case basis:
 - i. Degree of vulnerability of the participant in the ARC OF HILO programs or onsite the campus, including Health and Risk Criteria. The ARC OF HILO will consider the program and participants ability to:
 - Wear face coverings at all times
 - Be able to socially distance
 - Limit physical interaction
 - Abide by ARC OF HILO protocols and mitigation
 - Be able to limit activities that are known to spread (singing, shouting, heavy breathing, spitting, etc)
 - ii. Likelihood of disease transmission to the participants and employees;
 - iii. Method of spread of the disease (for example, through contact with bodily fluids, contaminated air, contaminated surfaces)
 - iv. Precautions which can be taken to prevent the spread of the infectious disease and other relevant factors.
 - v. Medical advice and directives for each participant, as available;
 - vi. Age of the individual served and medical fragility, taking into account individual tolerance to wearing a mask, limited physical touch, and safety considerations in light of social distancing mandates; **Individuals age 65 or older will be provided enhanced screening for appropriateness to attend the program, including consideration of (vii) as well as status of vaccination, and PCP recommendations.**
 - vii. Isolation of the participant in their home environment, and mental health considerations of prolonged isolation without socialization;

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- b. Once these factors are considered, ARC OF HILO management will:
 - i. Apply whatever action is taken uniformly to all staff or participants in “like” circumstances.
 - ii. Do not consider race, gender, marital status, country of origin, and other protected characteristics unless they are documented as relevant to the spread of the disease.
 - iii. Make reasonable accommodations for employees such as permitting employees to work from home if their job description permits this.
 - iv. Generally, accepted scientific procedures, whenever available, will be used to determine the level of risk posed by an employee or participant.
 - v. Permit employees to use sick leave, vacation time, and FMLA where appropriate while they are out of work.
 - vi. Permit employees and participants to return to work, and return to program, when cleared by a licensed physician or documented evidence of a negative PCA test; however, precautions will continue to be taken based on policy and symptomology.
 - vii. Employees or participants who refuse at any time to take the precautions set out in this and other sections of this policy may be subject to temporary program release, or employment discipline, up to and including termination.
- c. Vaccinations – FDA approved vaccinations will be supported by the ARC OF HILO in accordance with CDC/State/County guidance, and information provided on accessing vaccines, but taking a vaccine will not be mandatory for return to program or work. Until such time as the threat of contagion has passed, per CDC/State/County directives, the ARC OF HILO will adhere to the EID policy components contained herein, and adherence to precautions as related to symptoms and appropriate precautions to protect participants and staff.

5. Definitions

- a. Emerging Infectious disease -- Infectious diseases whose incidence in humans has increased in the past two decades or threatens to increase in the near future have been defined as "emerging." These diseases, which respect no national boundaries, include:
 - i. New infections resulting from changes or evolution of existing organisms
 - ii. Known infections spreading to new geographic areas or populations
 - iii. Previously unrecognized infections appearing in areas undergoing ecologic transformation
 - iv. Old infections reemerging as a result of antimicrobial resistance in known agents or breakdowns in public health measures
- b. Pandemic -- A sudden infectious disease outbreak that becomes very widespread and affects a whole region, a continent, or the world due to a susceptible population. By definition, a true pandemic causes a high degree of mortality.
- c. Isolation – Separation of an individual or group who is reasonably suspected to be infected with a communicable disease from those who are not infected to prevent the spread of the

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disease.

- d. Quarantine – Separation of an individual or group reasonably suspected to have been exposed to a communicable disease but who is not yet ill (displaying signs and symptoms) from those who have not been so exposed to prevent the spread of the disease.