

TAP COVID-19 PROCEDURE

Effective July 9, 2020/Revised August 13, 2020

Revised Sections regarding Time Period in Quarantine, Symptoms & Close Contact to someone with Symptoms, and Positive Test Results Nov. 2, 2020

Revised 2/1/21 – Cloth Face Coverings and Face Shield are Required; Those in Contact with someone who tested positive for COVID-19 must quarantine for 10 calendar days.

Revised March 24, 2021 - This protocol has been revised and updated to conform with Virginia's Final Permanent Safety Standard 16VAC25-220 for Infectious Disease Prevention of the SARS-Cov-2 Virus that causes COVID-19 that became effective January 27, 2021.

COVID-19 Procedure

I. Face Covering and Social Distance Requirements

A. Face Coverings

“Face Covering” means an item made of 2 or more layers of washable, breathable fabric that fits snugly against the sides of the face without any gaps, completely covering the nose and mouth and fitting securely under the chin. Neck gaiters made of 2 or more layers of washable, breathable, or folded to make 2 such layers are considered acceptable face coverings. Face coverings shall not have exhalation valves or vents, which allow virus particles to escape, and shall not be made of material that makes it hard to breathe, such as vinyl. If someone is not able to wear a face covering, TAP will provide a face shield that wraps around the sides of the wearer’s face & extends below the chin.

1. Face coverings (disposable or reusable) of the mouth and nose; and face shields are **REQUIRED** to be worn by all employees while conducting TAP business.
2. Face covering (disposable or reusable) of the mouth are REQUIRED for clients and guests while visiting or receiving TAP business.
3. Staff do not have to wear the mask and shield if they are alone in their office.
4. Face coverings and face shields are required when walking down the hallway of TAP property or a facility where TAP work is conducted (i.e. Higher Ed, Head Start Centers).
5. Individuals, who cannot wear face coverings due to medical contraindications, can work remotely “if” the director has deemed that the individual’s duties can be performed off site and the individual meets the criteria of the Telecommuting Policy.
6. Individuals who cannot wear face coverings and cannot work remotely are to be referred to the HR Director to determine if accommodations can be

identified or the employer shall provide and employees shall wear either a face shield that wraps around the sides of the wearer's face and extends below the chin or a hooded face shield. (Hooded face shields are not available at this time until further guidance is issued from the VDOLI.

7. Clients/Guests unable to wear face coverings can receive TAP services remotely, as applicable.
8. Face shields are required. The Program Director can provide a face shield when requested by an employee. However, the face shield must still be worn with a face covering. Per the Permanent Standard a face shield cannot be used instead of a face covering (mask) because, a face shield without the face covering does not provide protection from COVID-19.
9. Cleaning of face coverings and face shields are the responsibility of the staff member.

B. Social Distance

1. No one is to shake hands or hug anyone during TAP business.
2. Staff is to maintain 6 ft. distance between each other and clients/guests.
3. PMM (Property Management & Maintenance) will mark off 6 ft. distances in areas where lines of people could be formed (i.e. entrances or exits).

II. Screening Requirement

- A. All employees and clients/guests are to be screened when entering TAP property.
- B. The Screening process will include Body Temperature Scanning.
- C. The Screening Form and Protocol are to be used during screening.

III. Personal Cleaning Recommendations

- A. Wash hands often with soap and water for at least 20 seconds, or use hand sanitizer with at least 60% alcohol if soap and water are not available.
- B. Avoid touching eyes, nose, and mouth without washing hands first.
- C. Cover mouth and nose with a tissue or inside of the elbow when coughing or sneezing. Immediately throw tissue in trash, and then wash hands.

IV. Office Cleaning Procedures and Recommendations

- A. Clean and disinfect frequently touched objects and surfaces in your office at the beginning and end of each shift.
- B. Avoid using other employees' phones, desks, offices, or other work tools and equipment. Clean and disinfect if you do use a fellow staff member's office materials.

- C. When sharing copiers, printers or faxes with other staff members, it is important to use hand sanitizer or gloves prior to touching the machines and immediately following using the office equipment. Throw the gloves away following use.
- D. Never use spray on computer equipment, copiers, or phones.
- E. Cleaning and disinfecting products are readily available for employees to accomplish the required cleaning and disinfecting. Please request from your supervisor if needed.

V. Action To Be Taken for COVID-19 Existence or Suspicion

Symptoms of COVID-19 are medical conditions that are subjective to the person and not observable to others and may include chills, fatigue, muscle/body aches, headache, new loss of taste or smell, sore throat, nausea, congestion or runny nose, or diarrhea, etc.

Signs of COVID-19 are medical conditions that can be objectively observed and may include fever, trouble breathing or shortness of breath, cough, vomiting, new confusion, bluish lips or face, etc.

- A. **Identification of the existence or possibility of COVID-19 can take place as a result of the following.**
 - 1. Symptoms identified by agency screening process or self-reported
 - 2. Positive COVID-19 Test
 - 3. Close Contact or living with someone confirmed to have COVID-19
 - 4. Close Contact or living with someone who is suspected of having COVID-19
(Suspected Definition: Person who has to take a COVID-19 virus test or be quarantined due to a COVID-19 incident)
- B. **Report must be made “immediately” to EACH of the following people when any COVID-19 related activity (as listed in Section V.A.) takes place regardless of the hour of the day that a COVID-19 related activity. The report could be done verbally (face to face or telephone) or written (email, text, letter). Sound judgment should be used with this urgent matter. The Screening Protocol outlines a specific reporting procedure. That procedure remains in place.**
 - 1. Immediate Supervisor
 - 2. Program Director
 - 3. HR Director
 - 4. PMM Superintendent
 - 5. TAP President

C. Contact Tracing will take place by the HR Director following identification of an individual that falls under Section V. A. (referred to in this section as “subject”).

1. The HR Director will ask the subject who has been in close contact with them.

Close Contact Definition: Not limited to having touched the subject. It also includes having been in the same room as the subject for at least 15 minutes and had a conversation with the subject whether or not either person had on a cloth mask or maintained social distance.

Close contact could also mean that a person shared an office with the subject, used the subject's office or work equipment, rode in a vehicle with the subject, opened the door and touched the handle touched by the subject, or worked at the subject's work station.

The HR director will contact the Health Department if there is a question about “close contact.”

2. The HR Director will contact everyone named as having been in close contact as soon as possible, subject to the ability to reach all individual(s) named. The HR Director will solicit assistance from a staff member, colleague or the President if needed. Every attempt must be made to make contact with the named individual(s) within 24 hours.
3. If the HR Director has found that either of the persons contacted in Section V.C.2. did not actually have close contact or does not pose a safety risk, the person is to be instructed to return to normal work duties.
4. The HR Director will maintain a record of Contact Tracing activity.
5. The HR Director will discuss methods of communication with a client or guest who has been around a COVID-19 case. Actions will involve consultation with the Health Department and following Health Department instructions.
6. The HR Director will contact the Health Department immediately (within 24 hours of notification by the employee) of 2 or more positive COVID-19 tests within a 14 day period. The Health Department will take the lead in Contact Tracing with the HR Director's assistance.
7. The HR Director will notify the Department of Labor and Industry (DOLI) within 24 hours if 3 or more employees have tested positive for COVID-19 at the same location within a 14 day-period. The HR Director will communicate findings from any Contact Tracing activities to the employee/client/guest involved, Program Director and TAP President.

**D. Instructions will be given to employees identified in Section V.A. (2-4).
(Revised Nov. 2, 2020)**

1. If tested positive for COVID-19, the employee
 - a. Must quarantine for at least **10 calendar days from their first positive test result and** not return to work until approved to return; **or**
 - b. remain under medical care until they are no longer showing symptoms, not had a fever for 24 hours if fever existed, respiratory conditions such as cough, shortness of breath have improved and provide medical documented approval to return to work; **or**
 - c. if not under medical care, employee MUST provide 1 negative virus test results and not have a fever for 24 hrs. if fever existed and respiratory conditions have improved. If the test is not available, the employee must not return to work for 10 calendar days from the onsite of the symptoms and not have a fever for at least 24 hrs., and respiratory conditions have improved and receive approval by their Director and HR Director before returning to work.
2. Employees **MUST** quarantine for 10 days if they have been in close contact or living with someone confirmed to have COVID-19. The employee can return to work after 10 days if feeling well. If at any time during the 10-day quarantine period, the employee develops signs and/or symptoms of COVID, the employee must notify the supervisor and present a negative test result before returning to work. The employee can return to work with the permission of their Director and HR Director without the test result.

Close Contact or living with someone who is suspected of having COVID-19
(Suspected Definition: Person who has to take a COVID-19 virus test or be quarantined due to a COVID-19 incident)

3. The Telecommuting, PTO, ESLB, or FMLA policy is to be used for staff that are not able to work onsite as a result of a COVID-19 related incident.
- E. Instructions will be given to employees identified in Section V. A. 1 - 4 (Symptoms of COVID-19 and Close Contact with Someone With Symptoms)
 1. If an employee has symptoms of COVID-19, the employee must
 - a. Quarantine for at least 10 days and take the COVID-19 test and;
 - b. Not return to work until respiratory conditions have improved; fever-free (less than 100.0 F) for at least 24 hours, without the use of fever reducing medications and a negative test result is received
or
 - c. Not return to work for 10 calendar days and feeling better and respiratory conditions have improved; and fever free for at least 24 hours without the use of

fever reducing medications if the test result has not been received within 10 calendar days.

d. Close contact staff must quarantine until the employee with symptoms has received the negative test result or the employee with symptoms returned to work without a negative test result, but is feeling better and respiratory conditions have improved.

e. No one in Section E can return to work without the approval of their Director and HR Director.

2. If the employee with symptoms of COVID-19 tests positive, the employee must

a. remain under medical care until not showing signs or symptoms, not have a fever for 24 hours if fever existed, respiratory conditions have improved and receive documentation that they can return to work; **or**

b. if not under medical care, employee quarantine for at least 10 days and MUST provide 1 negative virus test result and not have a fever for 24 hrs. if fever existed and respiratory condition have improved. If the test is not available, the employee must not return to work for 10 calendar days from the onsite of the symptoms, not have a fever for at least 24 hrs., and receive approval by their Director and HR Director before returning to work.

c. Those in close contact with the employee must take a COVID-19 virus test 5 days from last contact with the positive individual and remain in quarantine until receiving a negative test result. (If tested positive, the employee must follow a-b listed in this E.2. section.)

However, a limited number of employees with severe illness may produce replication-competent virus beyond 10 days that may warrant extending duration of isolation for up to 20 days after symptom onset. Employees who are severely immunocompromised may require testing to determine when they can return to work, and the employer shall consider consultation with infection control experts. VOSH (Virginia Occupational Safety and Health Program) will consult with VDH (Virginia Department of Health) when identifying severe employee illnesses that may warrant extended isolation or severely immunocompromised employees required to undergo testing.

Severely “immunocompromised” means a seriously weakened immune system that lowers the body’s ability to fight infection and may increase the risk of getting severely sick from SARS-CoV-2, from being on chemotherapy for cancer, being within 1 year our from receiving a hematopoietic stem cell or solid organ transplant, untreated HIV infection with CD4 T lymphocyte count less than 200, combined primary immunodeficiency disorder, and receipt of prednisone greater than 20mg per day for more than 14 days. The degree of

immunocompromised is determined by the treating provider, and preventive actions are tailored to each individual and situation.

F. Sanitation will Take Place

1. The PMM Superintendent **MUST CLOSE OFF** the area where an individual has been located who
 - a. was diagnosed with COVID-19, or
 - b. has had close contact with someone diagnosed with COVID-19, or
 - c. symptoms of COVID-19, or
 - d. close contact with someone with symptoms of COVID-19, or

The area is to be closed off for at least 24 hours before it is sanitized. (Note: the entire facility does not “have to be closed” unless the exposure involves the entire facility.) Contact tracing and/or the Health Department can help determine the area required to be sanitized.

The PMM staff will use cleaning and sanitation products used by EPA and/or listed as a product that meets EPA criteria.

PMM will develop strategies to extend PPE usage during periods when supplies are not available and no other options are available for protection, as long as the extended use of the PPE does not pose any increased risk of exposure. The training to extend PPE usage shall include the conditions of extended PPE use, inspection criteria of the PPE to determine whether it can or cannot be used for an extended period, and safe storage requirements for PPE used for an extended period.

2. Staff are to be informed by the applicable director(s) to not go in the location until the area has been sanitized.
3. The HR Director and Director are to be informed when the sanitization has been completed so that normal work activities can resume.

G. Notification to the Staff and Agency

1. The staff member is to notify the director within 24 hours of a COVID-19 related status as identified in Section V.A.
2. Once a person (employee, client or guest that was at one of our sites) has been identified based on Section V.A. as having a COVID-19 status, the program director is to draft a letter to the component staff notifying them that a COVID-19 related case existed. The letter should include confirmation of the following: Appropriate contact tracing, location has been or is

scheduled to be sanitized, and the precautions that have taken place (applicable staff have been quarantined, etc.) to prevent the potential spread.

3. The letter must be approved by the TAP President before distribution.
4. The TAP President will send an email to All Staff so that the agency is kept up-to-date on COVID-19 related activity.
5. The Head Start director will make sure a staff member in Head Start will copy the President's email to Head Start staff since not all Head Start staff have "tapintohope" email addresses. (Effective August 17, 2020 all new agency employees will be assigned a TAP email address.)
6. At no time is a person who has been identified with a COVID-19 related case, as listed in "Section V.A," to be identified by name verbally or in writing other than those who "need to know."
7. Neither should any identifying information be provided to anyone who is not in the need to know. **Need to know persons** are the direct supervisor, program director, HR Director, President and contact traced person(s).

H. Confidentiality must be valued and respected by all employees.

1. Each employee is bound by the TAP Confidentiality Policy. Therefore, we should not be sharing personal information about one another or a client especially if it is not based on fact or communicated with those classified in Section V.F.5. as persons having a "need to know."
2. HIPPA guidelines require that medical information be maintained in a separate confidential location, not discussed among employees. For this reason, the HR Department plays a major role in COVID-19 activity at TAP.

Please contact your Program Director or the HR Director if you have a question regarding the procedure. Changes to the procedure will not be made without the approval of the TAP President.

Thank you for all that you do to help keep your colleagues and the families that we work with safe.

Attachments:

Telecommuting Policy

Confidentiality Policy

Procedure for Screening (Revised March 24, 2021)

Screening Form (Revised March 24, 2021)

Screening Protocol (Revised March 24, 2021)

Jumper JPD (Thermometer Instructions)

Examples of Acceptable Face Coverings (Effective April 6, 2021)

Virginia Final Permanent Standard 16VAC25-220 (Effective January 27, 2021 – Available upon request from HR Department)

TAP Infectious Disease (COVID-19) Emergency Preparedness Plan (Eff. September 25, 2020; revised March 31, 2021)

COVID ESLB Leave Policy (Effective 4/1/2021 - 12/31/2021)