

Park Avenue Center's COVID-19 Preparedness Plan

Executive Order 20-74 signed by Gov. Walz, requires all critical businesses to develop and implement a COVID-19 Preparedness Plan that describes how businesses will implement, at minimum, the following components, in compliance with Minnesota Department of Health (MDH) and national Centers for Disease Control and Prevention (CDC) guidelines:

1. hygiene and source control;
2. cleaning and disinfecting;
3. policies related to arrivals and departures;
4. screening and policies for staff and volunteers exhibiting signs or symptoms of COVID-19;
5. screening and policies for service recipients exhibiting signs or symptoms of COVID-19;
6. social distancing;
7. food preparation and meals;
8. ventilation;
9. communication and training about the Plan.

In addition, the Executive Order requires providers to:

- notify service recipients about the plan and make it available to them upon request, and if appropriate to their parents, legal guardians, or case workers;
- train staff and volunteers on the plan and ensure they can implement it; and
- post the plan in a prominent place or make it accessible to staff and volunteers who need to review it.

NOTIFYING AND WORKING WITH MINNESOTA DEPT OF HEALTH

Park Avenue Center staff will notify MDH when there is a confirmed case of COVID-19 in our program by calling 651-201-5414 (Mon. – Fri., 8AM-5PM) or through the web link at <https://redcap-c19.web.health.state.mn.us/redcap/surveys/?s=H8MT9TTNCD>. We will work with MDH and comply with their directive when given.

ENSURE SICK STAFF STAY HOME / SCREENING AND POLICIES FOR STAFF EXHIBITING SIGNS OR SYMPTOMS OF COVID-19

Park Avenue Center has implemented a mandatory At-Home Health Screening policy for all staff and external partners who work in our facilities when clients and staff are present (i.e. on-site medical staff). For each day staff or partners are scheduled to work, they are required to record their temperature, and document whether they are experiencing any known COVID-19 symptoms as identified by the CDC. As the identified symptoms change, we update the screening tool. Staff and partners have been instructed,

which is also documented on the At-Home Health Screening form, that they are not to come to work if they are symptomatic or have a fever in excess of 100.0 degrees. They are also instructed to stop working and leave the facility immediately if they start to experience symptoms while they are working and notify their supervisor. Completed At-Home Health Screening forms are submitted to the Human Resources team at the end of each week for tracking and filing. For any staff without access to a thermometer at their home, a non-contact thermometer is stationed at each facility front desk.

Any staff experiencing symptoms are not able to return to work until they have consulted with and followed the recommendations of their healthcare provider. Staff who test positive may not return to work until they have 3 days with a temperature of <100.0 degrees and 10 days since symptoms first appeared and any respiratory symptoms have improved (and/or any new recommendations released by the CDC). If a person tested positive but did not have symptoms, they follow the recommendations of the Healthcare Provider to return to work assuming they have not developed symptoms. Any staff who has been exposed to another person known to have tested positive or be presumed positive for COVID-19 and is not experiencing symptoms must complete the health screening twice daily for 14-days after the last exposure. A separate form is provided to those staff members to record the twice daily screenings.

SCREENING AND POLICIES FOR WHEN SERVICE RECIPIENTS EXHIBIT SIGNS OR SYMPTOMS OF COVID-19

Prior to initiating services, a person must complete and sign a screening tool acknowledging that they are aware of COVID-19 symptoms and that they are not experiencing any symptoms. If a person who is here for an assessment does report or demonstrates symptoms, they will not be allowed to continue services onsite. Resources will be provided to the person such as local testing information and will be made aware of the ability to access services via telemedicine.

For individuals who have been referred to treatment with us, upon initial contact prior to scheduling a start date, a member of the Admissions team reviews the CDC symptoms over the phone. If the person reports symptoms, they are provided with COVID-19 testing site information and informed they cannot enter treatment. If an individual does not report symptoms, they are scheduled to begin treatment. Upon arrival and prior to admission, the individual completes and signs a COVID-19 informational sheet verifying they are aware of the symptoms as well as a screening tool acknowledging they are not experiencing any symptoms. If they do report symptoms or deny symptoms but are displaying known symptoms, the individual will not be allowed to access services at that time and will be provided testing information.

Clients who are participating in treatment onsite who report or displays symptoms will be referred for testing. If they do not have transportation, Park staff will offer transportation. The client will not be allowed to return to treatment until they receive the results of the test and they are negative. Clients experiencing symptoms who reside in our lodging will be expected to return home while waiting for test results and/or until they meet the requirements for returning to treatment. For clients who are without a safe place to live, Park staff will work with them to find housing until they are able to return to participate in services. For clients with means, telemedicine options will be made available as additional support while they are unable to attend in-person services.

Any client experiencing symptoms is not able to participate in onsite services until they are tested for COVID-19 and provide the results of the test. Clients who test positive may not return to on site services until they have 3 days with a temperature of <100.0 degrees and 10 days since symptoms first appeared and any respiratory symptoms have improved (and/or any new recommendations released by the CDC). If a client tested positive but did not have symptoms, they can return to in-person programming 10 days after the test. Any client who has been exposed to another person known to have tested positive or be presumed positive for COVID-19 and is not experiencing symptoms will have their temperature taken twice daily for 14-days after the last known exposure. Park staff will isolate clients who have been exposed from other clients and staff for 14 days including not admitting clients into the same living quarters or primary treatment groups.

HYGIENE AND SOURCE CONTROLS

Staff at Park Avenue Center have been educated in basic infection prevention measures via email education, posting and sharing of instructional materials provided by the CDC, use of screening tools, and email updates and reminders. Staff and clients have been instructed to wash their hands for at least 20 seconds with soap and water frequently throughout the day. Signs have been placed in bathrooms as reminders and bathrooms are checked twice daily to ensure soap remains available. While individual employees have hand sanitizers and a limited number of hand sanitizer stations are placed throughout the facilities, we provide services for clients suffering from alcoholism. Due to the high alcohol content of the most effective sanitizers, they pose a significant risk for relapse so placement has been limited to areas where it can be monitored by staff (i.e. reception desks). Paper towels and tissue are available for staff and clients as well as foot door openers have been attached when applicable.

Following the CDC recommendations and the City of Minneapolis' requirements, Park has and continues to require staff and clients to wear facemasks while in public areas and during all interactions with others. Information regarding the wearing of masks including reducing touching of the face, the proper way to put masks on and off, as well as the proper way to wear the masks has been communicated. Park provides regular reminders of the importance of wearing masks. Mask options including KN95 masks and cloth masks are available for staff as well as bandanas for clients and disposable surgical masks are available for all who come onsite. Staff and clients are also able to wear their own facemask if they would prefer. Sneeze guards have been placed at high contact areas on the reception desks as well as in the medication distribution areas. Staff remains informed as to any changes and updates regarding COVID-19 including public and agency policies and procedures.

Source controls include utilizing the electronic health records system to trace client interaction with staff and client interaction with other clients in programming. Staff source controls include segregation from each other and from clients that are not within their building.

WORKPLACE CLEANING AND DISINFECTING PROTOCOLS

Park Avenue Center has added, in addition to the nightly and weekly janitorial cleaning of each facility, a surface sanitization process. Staff has been designated to spray a sanitizing compound on all commonly touched surfaces at least twice daily (door handles, conference room furniture, vending machine panels,

elevator panels, etc.). Designated staff is also completing the twice daily (minimum) surface sanitizing at the houses in which staff is providing programming. Additionally, multiple sanitizing stations have been set up in each facility so staff can sanitize their own workstations at the beginning of each shift, or as necessary throughout each day. Vans utilized for transporting staff and clients are included in our sanitizing practices. Drivers are wiping hard surfaces with disinfectant wipes between each transport and are spraying soft surface with the sanitizing solution twice daily. House Managers responsible for lodging compliance have been trained and provided with the necessary cleaning products to ensure surface sanitization protocols are followed consistently.

ENSURE SOCIAL DISTANCING DURING ARRIVALS, DEPARTURES AND THROUGHOUT THE DAY

Park Avenue Center has received a variance from MN DHS to provide substance use treatment for clients in buildings/residences that are non-licensed. This has allowed us to spread clients in up to eleven different locations, rather than just our two licensed buildings. Intensive Outpatient Clients (IOP) living in Park Avenue Center lodging is structured to limit contact between groups. Smaller groups of clients are in our buildings for programming while others are staying in their lodging and staff comes to them for programming. Vans transporting clients have reduced the number of individuals in each van not allowing individuals to sit next to each other.

Clients who are participating in Outpatient programming (OP) and are not residing in our lodging, have also been segregated and are not in programming with IOP clients. Additionally, OP clients and clients participating in mental health programming who have the means are offered to receive services via telemedicine, eliminating their comingling with clients and staff all together.

Certain Park Avenue Center staff whose position does not require direct client interaction, and who have the means, have transitioned to full or part-time work from home. Staff providing treatment services to segregated clients in lodging also work from home part-time to reduce co-mingling with other staff. Staff who provides treatment to segregated clients in other buildings have moved to those buildings.

Persons not yet engaged in services at Park who schedule a chemical health assessment have the option to complete the interview via telehealth, provided they have the means.

All non-essential large-group meetings have been eliminated. Small groups meetings are only taking place virtually or in instances where social distancing can be achieved. Areas where clients normally congregate in que have been marked to identify a 6' social distance.

WORKPLACE BUILDING AND VENTILATION PROTOCOLS

Park has three primary workplace locations in Minneapolis; 2430 Nicollet Avenue, 2649 Park Avenue and 2318 Park Avenue. Each of the systems are of a different design and period of code regulations. HVAC systems are supported by several split zone type systems with forced air for heating and cooling at 2430 Nicollet Avenue. The system is designed to have a minimum of 10% outside air intake up to a

maximum of 25% depending on the outside ambient air temperature. There also a free cooling option under 45 degrees. HVAC is also supported by several split type zoned systems with forced air for heating and cooling at 2649 Park Avenue. These units all share one outside air intake designed to have a minimum of 10% outside air intake up to maximum of 25% depending on the outside ambient air temperature. HVAC has two separate systems at 2318 Park Avenue, one for heat and one for cooling. The heat function is a boiler controlled radiant heat system. The cooling system is an independent system from the heating system using several split systems designed to have a minimum of 10% outside air intake up to a maximum of 25%, depending on the outside ambient air temperature.

All HVAC systems in our primary workplace buildings are maintained on our preventative maintenance program for filter changes, cleaning and inspection to insure they are all in proper working order. We also use Edina Heating and Cooling for proper seasonal startups/shutdowns and repairs.

All but one of our residential housing facilities are controlled by a boiler controlled radiant heat system. None of the eight facilities have a central air-conditioning (A/C) unit or forced air and are cooled by window A/C units. As a result, we are unable to change the airflow within these facilities. One of the residential housing facilities has three separate forced air HVAC split units and we have installed MERV 13 filters to reduce risk. This facility is serviced and maintained on our preventive maintenance schedule.

COMMUNICATIONS AND TRAINING PRACTICES AND PROTOCOLS

Park Avenue Center's management has attempted to maintain regular communication with staff regarding policies and procedures in addition to Governor Walz's recommendations / requirements, MDH and the CDC symptom identification and recommendations. We have also communicated resources for staff recognizing the importance of self-care. The typical communication tools used has been and will continue to be via email, SharePoint, and direct communication in supervision. We have communicated new processes and procedures as well as communication with those who have had exposure to individuals who have tested positive for COVID-19. Although we are deeply aware that an organization cannot overcommunicate, we have sincerely attempted to keep staff informed regarding steps taken to protect them and clients as well as potential changes that may come. Finally, we have regularly sought feedback and suggestions from staff regarding ways to improve our process living our core value of Get Better.