



MSA Society for Community Living

"Supporting People – Enhancing Lives"

MSA Society COVID-19 January 2022 Plan

COVID-19 Revisions and Updates

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Organizational Recovery Part One

Introduction:

This COVID-19 Revised and Updated Safety Plan is based on current information available from the BC Centre for Disease Control and Prevention (BCCDC), BC Public Health Officer (PHO), WorkSafe BC and other Provincial and Federal Government Authorities. This plan is subject to change based on the evolution of the COVID-19 virus, additional information from relevant authorities (noted above) or the Executive Director. Many of the practices outlined in this plan are not new practices however, they have been revised and updated to reflect current and evolving provincial orders, practices and recommendations to ensure continued high-quality levels of protection, communication and health and safety of persons served, employees, caregivers, families and the community.

There are no official timelines implemented into the Safety Plan – the movement between steps will be based on the safety of persons served, employees and family members/care providers. If the safety risk increases at any time the plan allows for a quick response and movement back into pre-reopening protocols. As well adaptations may be introduced to daily routines, for example daily health check-in may include additional questions/monitoring reflecting the ever-changing symptoms associated with current variant(s).

Due to highly transmittable variants, increased numbers of COVID-19 cases, shortage of staff or PHO directive and restrictions, MSA may be required to temporarily suspend visitation or close programming until the situation has been resolved. Should this be necessary, notice will be provided for all care providers and or family members.

In response to the Omicron variant, a staff illness call-in procedure has been put in place:

1. Employee who experiences cold, flu or COVID-19 symptoms will notify Team Leader or designate
2. Team Leader or designate will instruct employee to call 811 and follow their instructions, (employee will identify themselves as a healthcare worker).
3. Employee will report the recommendations from 811 to the HR Manager
4. HR Manager will provide employee with the next steps and will notify the Team Leader. Employee will continue to communicate daily with HR Manager.

At the beginning of the pandemic, MSA Society formed a Pandemic Response and Recovery Team (PRT) consisting of the Executive Director, Program Director & Managers, Finance Director and Human Resource Manager. This team will remain in place until the pandemic is declared over by the PHO.

General Information About COVID-19:

There are a number of symptoms associated with the COVID-19 virus, ranging from mild symptoms to severe illness. Each variant may have its own unique symptoms however, the primary symptoms for COVID-19 are:

- Fever
- Chills
- Cough
- Headache
- Muscle aches
- Fatigue
- Shortness of breath
- Runny nose and sore throat
- Sneezing
- Loss of appetite
- Loss / reduced sense of taste and smell
- Nausea or vomiting

Responsibility:

Due to the seriousness of the virus, MSA expects everyone to share in the responsibility of preventing the transmission and spread of the COVID-19 virus and COVID-19 variants.

All employees are responsible for:

- Familiarizing themselves with and adhering to MSA's current COVID-19 January 2022 Plan
- COVID-19 Policies & Procedures; understanding and complying with all changes as they occur
- Completing all COVID-19 training

These requirements are intended to reduce the risk of spreading COVID-19 in the workplace, in our homes and in our communities.

Joint Health & Safety Committee (HSC) Monitoring & Modifications:

The PRT will share any new and/or modified policies, procedures, documents and plans with the Health & Safety Committee for feedback and input. The Health & Safety Committee will continue to work collaboratively with the PRT to ensure that the COVID-19 changes, restrictions, procedures and policies are being adhered to by all employees.

Employees are invited to bring forward any concerns about COVID-19 safety practices in the workplace and the issue is not resolved at a management/employee level, the issue will be brought forward to the Health & Safety Committee for resolution. All concerns brought forward will also be brought to the attention of the Executive Director.

Communication & Training

Regular updated communication between the PRT and employees is critical to ensuring awareness and smooth implementation of new procedures and practices. Consistent communication and messaging will be conducted as follows: email; in-person; small groups; staff meetings; training sessions; on-line training; memos and announcements distributed in hardcopy to each work site and by email.

This COVID-19 January 2022 Plan will be posted on the employee bulletin board at each site, be available electronically to employees, and forwarded to CLBC and other relevant authorities as requested. Program Director, Managers and Team Leaders will communicate specific and relevant portions of the plan with persons served, Home Share providers, caregivers and families. External stakeholders will be provided with an electronic PDF copy upon request. Portions of the plan will be accessible on the website.

New employees will be closely monitored and supported by Team Leaders and mentored by Health & Safety Committee members and peers, to ensure they fully understand and are able to consistently implement MSA's COVID-19 policies, procedures & practices. The COVID-19 training checklist will be part of the Employee Orientation package provided by the Human Resources Department upon hire.

If employees are moving to a new position that has program specific guidelines – the Program Manager will be responsible to provide COVID-19 specific training. The monitoring and support of this training will be done by the Team Leader and mentoring employee.

In addition to formal training it is expected that employees will support each other to comply with safe practices to prevent the transmission of COVID-19.

The Health & Safety Committee will participate in ongoing monitoring, mentoring and suggest re-training when required. MSA believes in personal responsibility and taking a positive approach to accountability.

Ongoing and Updated Prevention Measures:

Prevention Measures

Preventive measures established for use by all employees include, among other things:

- Regular updates regarding changes to safety practices, policies and the workplace
- Modifications to existing business practices. For example:
 - Rotation of employees able to work from home
 - Posting maximum room capacity at all MSA sites based on WorkSafe BC recommendations
 - Avoiding large gatherings by attending meetings via online platforms such as Zoom and Microsoft Teams

- Facility and equipment disinfection i.e., high traffic areas, handrails, chairs, tables, washrooms etc.
- Hygiene practices – hand-washing and disinfecting washrooms after each use.
- Facial masks – minimum three layer as recommended by PHO (MSA will provide nonmedical disposable masks to be worn under thinner cloth masks). Employees are encouraged to purchase filters to be placed inside their cloth masks or purchase three-layer (minimum) cloth masks. Cloth mask hygiene requires regular cleaning to prevent transmission of virus and harmful germs.
- Daily health check-ins including temperature monitoring and declaration of being symptom free, recent travel outside of Canada and confirmation of not having contact with someone who has tested positive with COVID-19.
- Social distancing and, other interventions as recommended.

These measures are aimed at preventing the spread of COVID-19 in connection with day-to-day operations, implementing BCCDC and PHO guidance, and complying with applicable laws, rules, and regulations.

On November 18, 2021, the BC Provincial Health Officer (PHO) added Community Living BC (CLBC) and its funded programs and care locations to its mandatory vaccination status requiring staff of all CLBC funded service providers to confirm that they have been fully vaccinated against COVID-19 by January 14, 2022. MSA Society fully supports the PHO order regarding vaccination and encourages all persons served, families and care providers to do the same.

Employee & Persons Served Health Screening & Travel:

All employees and persons served will complete a daily health check prior to entering any MSA facility, acknowledging they have no symptoms (without a known cause). Each work site has a screening procedure that fits for the specific location and a procedure if the screening indicates the person has flu, cold or COVID-19 symptoms (without a known cause).

Should an employee and/or person served, have symptoms associated with flu, cold or COVID-19, they will be sent home and encouraged to request a COVID-19 test. They must be symptom free before returning to the workplace and may be asked to wear additional Personal Protective Equipment (PPE) for 72 hrs. after their return to work, (according to BCCDC a persistent but non-contagious cough may still be present for some time).

In line with MSA's expectation of personal responsibility, both employees and persons served (caregivers) are expected to communicate with the Team Leader and/or Program Manager if they are planning to travel, have travelled and/or have been in close contact with another person who has travelled outside of Canada.

Employees reporting illness or having travelled outside of Canada are required to contact 811 and report recommendations to HR Manager or designate.

Personal Protective Equipment (PPE):

In addition to following Universal Precautions, (hand washing, social distancing, mask and glove wearing) MSA has acquired medical grade equipment should an outbreak take place, providing additional protection for persons served, employees and others. All visitors are required to wear masks on-site as per visitor's policy & procedure.

- Various items of PPE, available to all MSA employees are listed and described below:
 - Non-medical grade masks
 - Medical grade – N-95 masks
 - Face Shields
 - Gowns/smocks
 - Gloves

Employee Self-Care - Employees are encouraged to wear and utilized additional PPE at any time, if they are uncomfortable and/or if they wish to increase their own personal safety.

Employees will dispose of PPE according to the disposal procedure.

Standard Personnel & Community Practices:

COVID-19 Policy, procedures and training protocols across the agency include:

- Stay home when you are sick and/or experiencing flu, cold or COVID-19 symptoms;
- Adhere to updated Federal and Provincial requirements when traveling;
- Request COVID-19 testing when symptoms are consistent with COVID-19 (MSA employees are encouraged to identify themselves as healthcare workers);
- Return to work from illness when symptoms have been completely resolved;
- Isolation practice for anyone who becomes ill at work/program includes, isolation room - made available at all sites, donning of PPE; leaving the facility as soon as possible, contacting Public Health (811); deep cleaning and disinfecting;
- Hand washing for 20 seconds or using hand sanitizer with at least 70% alcohol when soap and water are not available;
- Coughing and sneezing etiquette and strategies to reduce face touching;
- Social distancing of 6 feet and using PPE protocol's if it is not possible to social distance;
- Kitchen, dishes, utensils and food cleaning protocols and procedures;
- Cleaning and disinfecting procedures;
- Occupancy and washroom cleaning and use practices;
- Site entry procedures (daily health checks);
- Visitor's policy and procedures;
- Transportation for agency business protocols for agency owned vehicles; and
- Community activities risk assessment and safety plan to ensure safe and healthy outdoor activities. Due to COVID-19 restrictions and safety practices community activities are limited/on-hold.

Facilities Modifications:

- Room and building occupancy numbers based on WorkSafe BC recommendations of 5 square meters (approximately 7x 7 square feet) of unencumbered floor space per person.
- Occupancy numbers are there for guidance, lower numbers may be prudent for persons served who struggle to social distance and a variety of other circumstances.
- Occupancy numbers are posted on the outside of each program space door.
- Room occupancy numbers will be expanded and altered as recommended by WorkSafe BC in response to PHO pandemic restrictions and precautions.

Transportation Modifications:

COVID-19 has created some additional challenges when transporting persons served in a way that ensures safety for those who are unable to socially distance and/or wear PPE. The only method of transportation currently available for persons served includes:

- MSA owned vehicles – a transportation program has been implemented to maximize the number of persons served able to safely attend the Community Inclusion program. To this end, a new ten (10) passenger van has been added to the list of MSA owned vehicles.
- A select number of persons served have been invited to use HandyDart services. MSA continues to monitor this situation and will look to expand the number of persons served accessing HandyDart once it is deemed safe to do so.
- Caregivers/family members are welcome to provide daily transportation for their supported individual/family member.

Those living in MSA Community Housing programs will continue to be transported to and from community activities, appointments etc. via agency owned vehicles.

Agency Owned Vehicles

All COVID-19 practices expected on-site are also expected before, during and after transporting anyone in an agency owned vehicle which includes:

- Social distancing while in the vehicle, employees will wear a 3-ply mask
- Disinfecting the vehicle after each trip
- Hand washing prior to and after leaving the vehicle
- Cough and sneezing etiquette will be adhered to

COVID-19 Exposure and Testing:

All incidents of possible exposure will include a request to contact 811 and report recommendations to HR Manager. Positive COVID-19 cases amongst employees and persons served will be reported to Public Health (811), Licensing (if applicable), and CLBC.

If MSA has a confirmed case of COVID-19 – if applicable affected employees will be contacted by health authorities. The Executive Director will oversee all communications related to an outbreak and will follow the directions of Public Health.

Cleaning and Disinfecting:

Cleaning and disinfecting practices are in place to protect employee, persons served, volunteers, visitors and anyone else using MSA sites. Each department has developed site specific cleaning and disinfecting procedures however, the following guidelines are agency wide:

- Full site disinfecting will be done minimally before shift & after each shift;
- If a room is used for 2 different persons served in one day, full room disinfecting will be done between individuals;
- Disposable products will be used for cleaning and disinfecting;
- High touch areas will be disinfected, this includes (but is not limited) – light switches, door knobs, tables, chairs, counters, equipment, etc.;
- Employees will be responsible to wipe down computers, keyboards and phones prior to leaving shared office space;
- Protocols have been developed for the cleaning of equipment used by persons served, which includes washing, wiping, separating into bags and other methods which are outlined in program specific procedures;
- All bathrooms will be cleaned after each use. There will be cleaning and disinfecting products and equipment in each washroom; and
- It is essential that employees clean washrooms after person served use to ensure compliance with the Covid- 19 Plan.

Visitors and Deliveries:

There are agency guidelines in place for visitors and deliveries however, there may be additional expectations and/or variations in the Community Housing programs due to the nature of family relationships for persons served who reside in these locations.

MSA considers essential visitors as medical personnel, CLBC Employee, Fraser Health, repair people, and/or other people designated as essential by the Executive Director for specific purposes related to service. Family members are considered essential visitors in all Community Housing locations however, they must comply with visitor's policies and procedures.

Visitors are required (whenever possible) to set up a visitation time prior to coming on-site. If the visitor is unable to comply with the policy, alternate arrangements will be made for visitation.

All visitors and deliveries are required to comply with the following at all MSA sites:

- Prior to entering the building MSA employees will conduct a health check-in/screening which includes a temperature reading and the following questions:
 - Do you have any cold or flu-like symptoms?
 - Have you been exposed to anyone who has tested positive for COVID-19?
 - Have you been tested for COVID-19 in the past 5 days?
- Follow hand hygiene and sign-in protocols;
- Social distancing at all times;
- All visitors must wear a three-ply mask; and
- Gloves provided by MSA may be required in certain circumstances.

Monitoring & Modifying:

MSA is a learning organization and monitoring not only keeps people safe but also allows for learning and improving practices, policies and procedures. Monitoring and responding to new information, COVID-19 updates, changes, increased risks and analysis of best practices is critical to ensuring the health and safety of everyone until the Public Health Officer declares the pandemic over. Monitoring will take various forms and will be the responsibility of the Leadership Team (LT), Health & Safety Committee, and all employees with the intent of learning, teaching, supporting and encouraging new behaviors and practices. Various forms of monitoring will include:

- Documented weekly check-ins with Leadership Team to assess the effectiveness of current practices and adjusting plans/policy and protocols as required;
- Program Manager checks in regularly with Team Leaders and employees to assess the effectiveness of practice and bring any changes to policy and/or procedures forward to the LT team for discussion and revision;
- Personal responsibility is stressed in the workplace with the intent of employees supporting each other to remain healthy and safe;
- Health & Safety Committee will acknowledge the effort conscientious work being done to maintain health and safety of individuals; and
- All concerns and/or issues raised by persons served, employees, caregivers and families will be brought forward for discussion at the LT meetings.

Organizational Recovery Part Two

Community Inclusion Guidelines:

Recovery Process:

The introduction of additional on-site persons served and increase in group numbers will be done slowly and thoughtfully. There will not be any set timelines understanding that COVID-19 is constantly evolving and may require very fluid adaptations along the way. Remaining attuned to PHO and BCCDC updates to ensure awareness of new protocols, recommendations and information to assist us in determining safe practices.

Plans for programming are developed with the ability to be decreased and/or stopped if there is an increased safety risk or a new variant of COVID-19. All persons served and caregivers will be made aware that this is a possibility and they will be notified by email and/or phone should our services change. Notifications may also be placed on our website.

Program Guidelines:

Recognizing that COVID-19 conditions and expectations vary throughout the Province and the Social Services Sector, MSA developed their guidelines based on persons served, employees, volunteers and program needs.

These guidelines are meant to mitigate risk and provide recommendations for the implementation of a number of different preventative and responsive safety measures including but not limited to; facility modifications and alterations to practices, COVID-19 specific policies and procedures, employee training, modifications in how services to persons served are offered. Risk assessments and safety measures are monitored, managed and modified as information emerges, instructions and recommendations change and lessons are learned.

Persons served will be required to follow the same illness policy and guidelines as employees. As changes occur, updates will be sent home and discussed with the caregivers and families. If persons served arrive to the program showing signs of any flu-like symptoms or do not pass the health screening, their family members/caregiver will be required to take them home. Furthermore, if persons served become ill at program they will follow the same Illness at Work policy and guidelines as employees, and will be required to pick the person served up immediately. Team Leaders will discuss with all family members/caregivers, that if they do not answer their phone, do not have an emergency back up and/or do not come and pick up the person served as soon as possible, this may have an impact on our ability to provide service on-site.

Re-Opening Processes and Program Modifications:

Service Expansion:

Currently the Community Inclusion Program will not have group activities with more than a 5 :1 ratio. Any 5:1 ratio activities would require a risk assessment, safety plan and persons served would need to demonstrate their ability to socially distance for a period to time and through activities with limited support.

Should the PHO indicate a lifting of restrictions MSA leadership will monitor, review and make changes based on BCCDC, WorkSafe BC, Fraser Health and PHO office recommendations. The expansion of larger group activities will require additional planning and risk assessments to ensure the health and safety of all. Increasing to a large group event or expansion of services to include an increase of persons served would require the Executive Director and Director of Programs' approval and signature on the safety plan.

Supporting Return of Persons Served:

Each persons served return to on-site Community Inclusion programming will be unique and require thoughtful consideration to ensure COVID-19 prevention protocols and safety measures can be maintained. Part of the risk assessment will include a discussion on their current stressors, which may include additional support needs and mental health or behavioural concerns. Part of the safety plan will include strategies to address the identified challenges. For some individuals this may require a new or revised Support Plan.

Employees will work with all new and returning persons served to practice universal precautions such as social distancing, hand-washing, coughing etiquette and use of facial masks. They will be engaging with caregivers to try and implement consistent strategies in both the home and during program. In addition, the goal will be to expand the persons served connections in the community.

Organizational Recovery Part Three

Community Housing Guidelines:

Mill Lake, Mt. Waddington and the Life Skills and Resource Home Recovery Home Plan

This document will provide guidance to employees during the COVID-19 pandemic reopening and ongoing. In addition to program specific plans all employees are expected to comply with the organizational plan in Part One of this document. This plan contains information specific to COVID-19 and will evolve as more information and guidelines become available. Persons served, family members and MSA employees will be given prior notification regarding changes in practice, policy or procedure, whenever possible, that may pertain specifically to them. The details of this plan will be reviewed by the Program Director and Manager. Team Leaders will be included in the review and monitoring process to ensure that they are fully aware of and engaged in the process.

Measures to Reduce Risk:

- Daily signed employee health check-ins. All Community Housing employees will continue to conduct Daily Health check-ins regarding the following symptoms (without a known cause):
 - fever
 - new cough
 - shortness of breath
 - diarrhea
- Maintaining physical distancing
 - 2 metres (6 feet) between persons served and employees will be practiced whenever possible (masks will be worn when physical distancing is not possible)
 - occupancy limits will be posted in all rooms based on the WorkSafe BC 7'x7' per person recommendations, an occupancy chart has been completed for the entire agency.
 - While out on walks in the community physical distancing between persons served and the public will be maintained at all times
- Cleaning Hygiene
 - All MSA Community Housing sites are stocked with the following supplies:
 - disinfecting wipes
 - disinfecting cleaner
 - bleach and water solutions (1-part bleach to 9-parts water)
 - hand sanitizer (at least 60% alcohol)
 - PPE – all MSA Community Housing employees have been provided the following PPE
 - masks – (N-95 surgical available in case of outbreak and non-medical cloth masks)
 - face shields
 - gowns
 - smocks
 - gloves

- Universal Precautions (not mentioned above):
 - handwashing (20 secs in length)
 - upon entering the home;
 - before and after food prep;
 - before and after handling common equipment;
 - before and after providing personal care; and
 - frequently throughout the day.
 - coughing and sneezing into tissue or flexed elbow
 - discarding all contaminated materials, following MSA procedures for disposal

Outings into the Community

- Risk assessments will be conducted for each outing i.e. going to the bank, park, café...
- COVID-19 kits supplied with all necessary PPE will be taken on all outings (gloves, masks, face shields, gowns, hand-sanitizer)

Visitation to Mill Lake, Mt. Waddington and The Life Skills and Resource Home

- All medical professionals will be provided with the visitor's policy
- All medical professionals will be asked to wash their hands upon entry and wear a mask throughout their visit
- Family members will be given copies of the visitor's policy and all applicable policies and procedures to ensure safety.
- All visitors (per visit) to all MSA sites will be required to complete a health check-in with the assistance of a MSA employee. This assessment will include the following (without a known cause):
 - fever
 - new cough
 - shortness of breath
 - diarrhea
 - and any flu-like symptoms and/or other less common symptoms of COVID-19
- Family Visit Protocols:
 - Family members will be asked to wash their hands upon arrival and wear a mask throughout their visit
 - Family members will practice social distancing
 - Family members will wear PPE as directed by employee
 - no homemade food will be permitted
 - no meals will be provided to the family member
- Employee will casually monitor and observe the COVID-19 practices of the family member and give gentle reminders if needed.
- Disinfecting will be done by employees at the end of each visit

Monitoring Workplace and Modifying Plans as Needed (See Part 1 for Agency Wide Plan)

- Responding to employee input and in consultation with Work Safe BC, Health and Safety Committee, BC Public Health, BCCDC, CLBC and Fraser Valley Health MSA Society is committed to conducting regular reviews to assess ongoing practices, risks and information that has been updated or may have changed during the COVID-19 reopening period.
- Employees will be encouraged to raise safety concerns – this can be done through conversations with Program Team Leaders, Manager, Director, or Health & Safety Representative.

Respite Services Recovery Plan:

Respite services are provided in the Mt. Waddington location and therefore all of the Community Housing policies, procedures and practices apply to respite services. In addition, there are respite specific protocols outlined below. Should the number of cases increase in the community (another COVID-19 wave) and/or the recommendations of the Public Health Officer, MSA will respond accordingly to ensure the safety of persons served and employees. This may mean a change in how services are offered and/or a temporary suspension of respite until it is safe to resume services.

Persons Served Risk Assessments & Safety Plans:

Health Assessments/Check-ins:

- Prior to each respite service the employee will inquire and document as to whether there have been any changes in the family's COVID-19 practices, travel, and/or exposure. Families will be encouraged to communicate openly about any changes to their social practices to ensure the employee can implement a safety plan for the person served and the employees.
- If there have been changes that increase the risk to employee and/or persons served since the last respite visit the Team Leader will contact the Program Manager to discuss options.
- Each time the individual accesses MSA Respite Services they will be required to complete a health check-in with the assistance of an employee. In addition, the caregiver or family member will also be asked to complete a health screening checklist to ensure others in the family or social circle do not have symptoms. This assessment will include the following and any other flu-like symptoms:
 - fever
 - new cough
 - shortness of breath
 - diarrhea
 - Loss of or reduced sense of taste and smell
 - headache
 - muscle aches
 - fatigue
 - loss of appetite

Each family will be asked to disclose whether they have a family member who has had contact with anyone who may have recently travelled internationally. If the family answers “yes” to any of the questions, a new safety plan will be required to mitigate any new risks prior to the respite visit.

Risk Assessments:

As persons served are able to access more community opportunities and services, a risk assessment will be completed to explore challenges that may occur during specific outings into the community during a pandemic. Several risk assessments have already been completed but as the province continues to reopen and expand entrance into community venues MSA Community Housing employees will develop risk assessments for all new outings.

Persons Served or Family Illness:

Persons served who have been ill prior to receiving respite services, must be symptom free before Respite Services can be provided. Respite Services may not be approved for a short period if the family and/or person served has been ill, traveled internationally or been exposed to COVID-19.

Home Share Recovery Plan

This document will provide guidance to Home Share Manager, Director and Home Share Providers. This plan is meant to accompany MSA Society Pandemic Recovery Plan and may be revised as more information and guidelines become available. Persons served, family members and/or care providers will be given prior notification regarding changes in practice, policy or procedure that may pertain specifically to them.

In a pandemic outbreak, there will be defined phases and the responses will be specific to each phase.

Phase 1: Prevention

Phase 1 is focused on steps that can be taken to prevent the possible spread of COVID-19 and will identify who will take the lead in each section. The following recommendations will be made to all Home Share Providers:

- Ensure that all home shares increase their emergency preparedness supplies to a 2-week supply. It will include cleaning supplies, particularly disinfectants, and food on-site, access to gowns, gloves and masks, thermometers, waste containers with plastic liners.
- Avoid large in-person community activities especially where others congregate.
- Limit outings to open spaces such as parks and other nature type settings.
- Practice social distancing ensuring 6 feet or two arm's lengths space from another person. Home Share Providers will ensure they are engaging in hand hygiene and respiratory hygiene and to support persons served to do the same.

- In keeping with the Provincial guidelines, Home Share Providers and persons served will wear facial masks when entering all public buildings.
- Home Share Providers, persons served or someone living in their household who have been out of country will need to follow the orders of the BC Health Minister and must inform their Home Share Program Manager.
- Observe recommendations of recognized health officials, such as BCCDC, Fraser Health, PHO, Federal and Provincial Gov't communication or Health Canada.

Phase Two: Preparation and Response to Increased Risk of Transmission

During times when the risk of exposure is heightened due to rapid transmission of COVID-19 variants or significant increase of COVID-19 cases, home visits will discontinue. Distanced options, such as Microsoft Teams, Zoom and conference calling will be implemented. Home Share Manager will continue to do 6 month and 1 yr. assessments via email and delivering documents directly to the Home Share Provider's residence as required.

- The Executive Director, in conjunction with the Home Share Manager and Director will ensure contingency plans are in place for all Home Shares in the event a supported individual, Home Share Provider or person living in the home should contract COVID-19. Contingency plans will outline things such as isolation procedures, back-up plans generated by the Home Share Providers to indicate how supported individuals will continue to receive safe and consistent care and additional training that may be needed.

The Home Share Manager and Director will create additional back-up plans that will address scenarios in which the Home Share Provider and back-up care provider are too sick to provide ongoing care to the supported individual

Phase 3: Implementation

Phase 3 will be implemented when there is evidence of a supported individual living in an MSA Society Home Share having contracted COVID-19.

- Contingency plans will be implemented.
- Supported Individuals who display new or worsening respiratory symptoms, should be immediately isolated from others in the home. Contact BC Public Health (811) immediately for advice on next steps.
- Home Share Provider will call 911 if the supported individual's breathing becomes difficult including shortness of breath.
- Supported Individuals who contracted COVID-19 will be either quarantined in their rooms or supported to be admitted to hospital.

- Home Share Providers who support a person served who needs to be quarantined will be provided with, and trained on, the appropriate use of Personal Protection Equipment (PPE), including how to put on, remove and dispose of PPE. This may include disposable gloves to protect hands, and clean non-sterile long-sleeve gowns or smocks to protect clothes from contamination, medical masks to protect nose and mouth, and eye protection (e.g., goggles, face shield).
- Home Share Providers will be required to complete a set of questions outlining their quarantine plan should COVID-19 enter the home. Appropriate quarantine procedures, will include:
 - Limiting movement to contain a person in their bedroom
 - If the person does need to utilize other areas of the house, ensure a minimum of 6 feet distance between them and other people is observed
 - Daily temperature assessments
 - Continue to follow universal precautions for hand hygiene, laundry procedures and any other guidelines given by health authorities.
 - Thoroughly clean frequently touched surfaces – follow cleaning procedure.
 - Where possible use separate bathroom for the infected person.
- Home Share Providers who are supporting an individual with confirmed COVID-19, will self-monitor and report any symptoms to their Program Manager or delegate immediately.

Phase 4: Respite Care

Phase 4 will be implemented when the Home Share Provider can no longer support the individual in the home due to COVID-19.

- Contingency plan for respite/alternative care will be put in place
- Home Share Provider will notify MSA Home Share Manager that supported person will be moved into alternative provider's home temporarily while Home Share Provider recovers.

Phase 5: Additional Response

Phase 5 will be implemented when supported individual cannot be safely cared for by Home Share Provider or alternative provider (i.e., Home Share Provider, alternative provider has both tested positive for COVID-19)

- Supported individual will be moved to Mt Waddington Apt. 108
- Individual living in Apt. 108 will be asked to move to Apt. 112 (if safe to do so, otherwise alternative location will be considered i.e., Crescent Way or McCallum sites)
- MSA Employee will provide 24-7 care for the supported Home Share individual.
- If there is a large outbreak requiring a community response, Crescent Way Building will be converted into a short-term living space for Supported Individuals.

Phase 6: Recovery Plan

Phase 6 has been implemented if the PHO has lifted some of the COVID-19 restrictions. MSA has submitted a COVID-19 Recovery Plan to guide MSA until the Pandemic is deemed over by the PHO.

Stage One:

- Until notice of lifting restrictions is given, Home Share Manager will conduct all check-ins (6 month and annual), as well as all face to face connections with supported Individuals outside of home allowing for physically distancing
- Home Share Manager will offer to connect regularly via email, text, phone, Facetime and Zoom
- A health check will be conducted before meeting with Individuals and Home Share Providers
- Home Share Manager will practice universal precautions (handwashing, respiratory hygiene, proper discarding and disposal of all PPE, physical distancing)
- When conducting a home inspection during the initial vetting of the home share candidates' home, the Home Share Manager will wear the appropriate PPE (mask, gloves, gown) and conduct a health assessment (self-assessment and assessment of all occupants in the home) before entering the home. The following questions will be asked, "Do you have a new cough, sore throat, fever or shortness of breath?"

Stage Two:

- When deemed safe to do so, Home Share Manager will offer options to conduct 6-month check-ins inside or outside of the home.
- The Home Share Manager will practice all precautions outlined in Part 1 of the Plan.
- Annual check-ins that include health and safety inspection will be conducted inside of the home (check-in can be moved outside following health and safety inspection)
- Home Share Manager will offer to connect regularly via email, text, phone, facetime and zoom
- Whenever the Home Share Manager enters a home a routine health assessment will be conducted, and the following questions will be asked:
 - Have you had any flu like symptoms: cough, sore throat, fever or shortness of breath from an unknown cause?
- Universal precautions and physical distancing will continue to be practiced at all times.
- Whenever entering the home, the Home Share Manager will wear a mask.
- Individuals and Home Share Manager can begin to meet within the community (maintaining physical distancing and universal precautions) but will always be given the option to meet outside or via zoom, facetime or phone call.