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March 9, 2020

Dear Mike,

Both Arms Acres and Conifer Park had meetings to discuss your requests.

NYS OASAS has already sent out guidance to all licensed facilities for us to follow and we are adhering to those protocols. Their guidance is:



ANDREW M. CUOMO Governor ARLENE GONZÁLEZ-SÁNCHEZ, M.S., L.M.S.W.

Dear Providers:

Infection control prevents or stops the spread of infections. NYS <u>OASAS Regulations</u> require providers to have infection control procedures. Please review this information including the links below with your program's leadership and staff and make any necessary adjustments to you program policies and protocols.

It is recommended that providers follow the Centers for Disease Control and Prevention's (CDC's) guidelines for infection control basics including hand hygiene.

- Infection Control Basics
- Hand Hygiene in Health Care Settings
- Handwashing: Clean Hands Save Lives

Providers are advised to provide and <u>post educational materials</u> to encourage and educate their patients and staff to:

- Wash hands with soap and water for at least 20 seconds or use hand sanitizer when soap and water are not available.
- Avoid close contact with sick people.
- Stay home if sick.
- Cover coughs or sneezes with a tissue, then discard into the trash.
- Use the appropriate <u>Personal Protective Equipment (PPE)</u> if indicated.
- Clean and disinfect frequently touched objects and surfaces.

Additional Resources:

 NYS Department of Health Key Infection Control Practices in Inpatient and Outpatient Medical Care Settings

NYS OASAS Clinical Guidance and Resources: Infection Control

The NYS Department of Health (NYS DOH) and the Centers for Disease Control and Prevention (CDC) continue to issue health advisories and interim guidance on the COVID-19 outbreak caused by the SARS-CoV-2 virus. It is expected that guidance, recommendations, and risk criteria will continue to evolve, and it is therefore important that providers stay updated with the most current information, as the clinical criteria for a person under investigation (PUI) and exposure risk levels for health care providers are subject to change.

It is recommended that all providers:

- Print and visibly post the <u>NYS DOH Attention all Patients and Attention all Visitors</u> Signs.
- Monitor for travel updates on the <u>CDC Evaluating and Reporting PUI Geographic</u> <u>Areas and Sustained Transmission</u> website.

Providers should use clinical judgement when evaluating patients for suspected COVID-19. Anyone who may meet COVID-19 risk criteria and may be a PUI should first be immediately isolated, in a room with a closed door if possible, and should have a mask placed over their nose and mouth in order to reduce respiratory droplet exposure. Before evaluating anyone with possible COVID-19, provider staff should use the appropriate personal protective equipment, including a respirator mask, eye protection, gloves, and a gown if available. Before referring patients to another location, providers should consult with their Local Health Department (LDOH) and referral source. However, if a provider evaluating a possible PUI is unable to immediately reach their LDOH or the NYS DOH for further guidance, they should have a low threshold for arranging transport to a local hospital for further evaluation.

Staff who fall into the high-or-medium risk exposure category for COVID-19 per CDC guidance, due to recent travel history to an affected geographic area and/or exposure to known COVID-19 cases, or who are exhibiting any symptoms of possible COVID-19, should not report to work in any healthcare setting until cleared to do so by the LDOH or NYS DOH, as they may need to undergo a period of self-isolation and monitoring. Please see the following guidance from the CDC:

• Interim U.S. Guidance for Risk Assessment and Public Health Management of Healthcare Personnel with Potential Exposure in a Healthcare Setting to Patients with Coronavirus Disease 2019 (COVID-19)

Providers who have questions about this information can contact their LDOH or the NYS DOH Bureau of Communicable Disease control at 518-473-4439 during business hours or 1-866-881-2809 evenings, weekends, and holidays.

Additional information and links can be found here:

- NYS DOH Health Advisory: Identification and Testing of COVID-19 Persons Under Investigation
- CDC Health Update 2.28.2020: Update and Interim Guidance on Outbreak of Coronavirus Disease 2019 (COVID-19)

Please share this with your staff.

The Office of the Chief Medical Officer

New York State Office of Addiction Services and Supports

From our meeting here are the responses: to your questions.

1. What are the Employer's protocols in place?

Arms Acres and Conifer Park will follow the guidelines as established by OASAS and the DOH. We will screen all potential patients prior to admission and prior to getting into our vans. Upon intake/admissions we will ask of recent travel, history of illness with themselves or family members, any symptoms of the flu (coughing, sneezing, fever). Dr. M sent memos to managers. (CBC Criteria). Signs will be posted throughout the facility sharing the information on prevention.

2. Are safety teams trained on these protocols?

All of the staff will be educated on protocols.

3. What specific safety measures are in place to prevent infection while at work?

Hand washing signs will be posted throughout both buildings and all OP sites. Hand sanitizers will be posted throughout building also, entering the building, mail room, time clocks, break rooms, admissions, nursing stations, med rooms etc. Masks, gloves, Lysol wipes will also be made available. RED DOT sanitizers will contain alcohol for appropriate staff members and be placed only where staff can access them.

4. Is there a contact tracing in place?

Finding out if a person has been exposed to or has the Corona Virus, will be determined by the DOH/CDC as they have the necessary kits for testing. They in turn will handle the contact tracing. We will provide whatever is necessary to assist.

5. Is there a symptom or exposure reporting protocol in process?

As symptoms and or exposure are reported, we will notify the appropriate authorities which is our standard protocol now.

6. Do you have a business/work contingency plan in case of a required shutdown?

Both IP Facilities are 365/24 hours a day. Neither will be required to shut down. If either program is quarantined we will follow the recommendation of the Dept of Health. If the DOH shuts down people from entering or leaving, we will work together to take care of staff and patients. Food / medical supplies will continue to be delivered. We will follow the same protocol as we do when we have been snowed in.

The OP programs may only require a short time for sanitizing if anything occurs there and time off will be utilized by staff if such an event occurs.

7. What safeguards are in place to protect public, patient, member facing employees?

As noted above we will follow universal precautions, which is part of our regular protocol when dealing with patients.

Public: we will apply Universal Protocol, Zoom calls, Inform Dept. of Health. Public will be asked the same questions as prospective patients.

Patient: any pt. displaying symptoms (fever) will need to be D/C to hosp.

Member: any staff displaying symptoms will be sent home.

Drivers: Our van drivers will be supplied with several sanitizers (Lysol, wipes, masks, gloves).

Vans will be cleaned daily and DEEP CLEANED monthly.

8. How will payment of employees be handled in case of shutdown?

Employees will be able to use their time off for shutdowns, if one occurs.

How will payment of employees be handled in case employees with positive tests, confirmed exposure or if quarantined? If the Employee's exposure comes because of his own experience and not associated with a work experience, Employees will be able to access Short Term Disability or Workers' Compensation (if virus contracted on-site). These benefits, including Long and Short term Sick will provide continuation of salary. Paid Family Leave (NY Based employees) will provide job protection and compensation if a family member contracts the virus and the employee is the caretaker. Family Medical Leave will run concurrently with Short Term Disability, Workers' Compensation and PFL to provide job protection for up to twelve weeks of absence.

9. How will attendance absences/occurrences be handled as a result of any of the incidents in #8 and # 9 above?

Attendance will be addressed according to the reason for the time off. If there is a quarantine will we have staff utilize their time. We will not be able to pay staff who do not come to work. However, there will be no restriction as to how the time will be used (personal, vacation, PTO, STS or LTS).

10. How has the above Information been communicated to the Union leadership?

The Chief Stewards will be informed of this process and two Union members participated in the discussion re: the answers submitted.

11. How has the above information been communicated to employees / members?

Communication has already been sent out to employees in both Programs via email, postings on the wall and communication with supervisors. Communication will be continuous and as the CDC makes changes, we will make change. There will be additional communication during the week of March 9th with updates submitted as necessary.

If you have any questions, please feel free to contact me (845) 704-6117 or Patti Wilcox (518) 952-8323,

Thank you,

Patrice Wallace-Moore, LCSW