INFORMATION MEMORANDUM

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TO:  Subrecipients of the State Unit on Aging

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SUBJECT:  Disaster and Pandemic Reopening Guidance

The purpose of this document is to outline information, best practices and criteria which may be considered when planning services during the COVID-19 pandemic recovery in each Area Agency on Aging service area. Guidance from the CDC, Nebraska local public health departments, ACL, and NCOA were reviewed and incorporated into the following planning considerations.

Providers of all services must ensure the services and supports provided maintain safety, health, habilitation, and well-being for all individuals served.

If you have any questions, please contact Ben at 402-471-4555, Erik at 402-471-4732 or Brittany at 402-471-4797 or via email DHHS.Aging@Nebraska.gov.
Guiding Principles to Keep in Mind
Many people who visit senior centers are at higher risk for severe illness from COVID-19 because:

- Risk increases with age, and/or
- They may have underlying health conditions such as heart disease, diabetes, or lung disease.
- They also may be at higher risk of getting and spreading the virus because of senior center characteristics, such as frequent social activities, group dining facilities and other communal spaces, congregate meal settings, community activities, and shared transportation. The more people a visitor or worker interacts with, and the longer that interaction, the higher the risk of COVID-19 spread.

A Few Important Reminders about Coronavirus and Reducing the Risk of Exposure:
Coronaviruses on surfaces and objects naturally die within hours to days. Warmer temperatures and exposure to sunlight will reduce the time the virus survives on surfaces and objects.

Normal routine cleaning with soap and water removes germs and dirt from surfaces. It lowers the risk of spreading COVID-19 infection.

Disinfectants kill germs on surfaces. By killing germs on a surface after cleaning, you can further lower the risk of spreading infection. If disinfectants on this list are in short supply, alternative disinfectants can be used (for example, 1/3 cup of 5.25%–8.25% bleach added to 1 gallon of water, or 70% alcohol solutions). Bleach solutions will be effective for disinfection up to 24 hours.

- Always wear the appropriate gloves for the chemicals being used when you are cleaning and disinfecting.

Examples of frequently touched surfaces and objects that will need routine disinfection following reopening are:

<table>
<thead>
<tr>
<th><strong>Kitchen and Food Prep Areas</strong></th>
<th><strong>Restroom, Dining, &amp; Commons Areas</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Refrigerator Door Handles</td>
<td>Doorknobs, Entrance/Exit Handles</td>
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<td>Freezer Door Handles</td>
<td>Dining Room Tables</td>
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<tr>
<td>Counters</td>
<td>Light Switches</td>
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<tr>
<td>Dish Washer Handles</td>
<td>Cabinet Handles</td>
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<tr>
<td>Floors</td>
<td>Chairs</td>
</tr>
<tr>
<td>Thermometers</td>
<td>Computer Keyboards</td>
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<tr>
<td>Phones</td>
<td>Touch Screen Devices</td>
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<tr>
<td>Oven Mitts</td>
<td>Toilets, Toilet Handles, Stall Knobs</td>
</tr>
<tr>
<td>Writing Utensils</td>
<td>Faucets and Sinks</td>
</tr>
<tr>
<td>Cookbook Surfaces</td>
<td>Countertops</td>
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<tr>
<td>Tray Lines</td>
<td>Floors</td>
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Maintain safe behavioral practices
We have all made significant behavioral changes to reduce the spread of COVID-19. In safely reopening senior centers, we will need to continue these practices:

- social distancing (specifically, staying 6 feet away from others when you must go into a shared space)
- frequently washing hands or use alcohol-based (at least 60% alcohol) hand sanitizer when soap and water are not available
- wearing masks
- avoiding touching eyes, nose, and mouth
- staying home when sick
- cleaning and disinfecting frequently touched objects and surfaces

Promoting Behaviors that Reduce Spread
Staying Home or Self-Isolating when Appropriate
Workers, volunteers, and visitors should stay home when they have confirmed or suspected COVID-19. Those who have recently had close contact with a person with COVID-19 should also stay home and monitor their health.

Educate both facility-based workers (including ancillary staff such as dietary, recreational, and environmental services), consultant personnel (e.g., housekeeping, sitter, barber), and volunteers who provide care or services in the facility. Inclusion of consultants in all efforts is important, since they commonly provide care in multiple facilities and can be exposed to COVID-19 or serve as a source of transmission. It is essential for workers or volunteers who visit multiple locations to tell facilities if they have had exposure to other facilities with recognized COVID-19 cases.

Recognize Signs and Symptoms
Symptoms of COVID-19 can range from mild symptoms to severe illness and death. Symptoms may appear 2-14 days after exposure. Watch for fever, cough, shortness of breath, or other symptoms (chills, headache, muscle pain, sore throat, new loss of taste or smell, nausea, vomiting or diarrhea). These symptoms may not be the same in every person.

- In some cases, fever or other symptoms can take longer to develop in older adults and people of any age with underlying health conditions.
- In older adults, normal body temperature can be lower than in younger adults (closer to 97°F than 98.6°F). Fever temperatures can be lower in older adults.

Planning Considerations
The following should be considered for inclusion in an actual written COVID-19 plan that can be shared with workers, visitors, etc.
Communication Systems
Systems for:

- Having workers, volunteers, and visitors file a report to the facility if they have symptoms of COVID-19, a positive test for COVID-19, or were exposed to someone with COVID-19 within the last 14 days in accordance with health information sharing regulations for COVID-19.
- Notifying visitors if another visitor/staff reports COVID positivity.

Community Contacts
Contact your local public health department for the latest guidance on how to respond in your immediate area. Senior centers also can play an important role in sharing trusted information with older adults.

Designate Internal COVID-19 Point of Contact
Designate a staff member to be responsible for responding to COVID-19 concerns. All workers, volunteers, and visitors should know who this person is and how to contact them.

Increased Cleaning
Clean and disinfect bathrooms regularly (e.g., in the morning, evening, and after times of heavy use).

Modified Layouts
Alter schedules to reduce mixing and close contact, such as staggering meal and activity times and forming small groups that regularly participate at the same times and do not mix with individuals in other groups.

Arrange seating of chairs and tables to be least 6 feet apart during shared meals or other events. Minimize traffic in enclosed spaces, such as mailrooms, elevators, and stairwells. Consider limiting the number of individuals in an elevator at one time and designating one-directional stairwells, if possible.

Ensure that social distancing can be maintained in shared rooms, such as television, game, or exercise rooms, or rooms for shared worship services.

Create distance between residents in shared vehicles (e.g., skipping rows) when possible.

Physical Barriers and Guides
Install physical barriers, such as sneeze guards, partitions, plastic flexible screens, and/or Plexiglas/acrylic glass particularly in areas where it is difficult for individuals to remain at least 6 feet apart (e.g., reception areas, dining tables, bathroom sinks).

Provide physical guides, such as tape on floors or sidewalks and signs on walls to ensure that individuals remain at least 6 feet apart.

Signage
Post signs in highly visible locations (e.g., building entrances, restrooms, and dining areas) that promote everyday protection and describe how to stop the spread of germs (such as social distancing, by properly washing hands and properly wearing a mask). Please see signage attachments.
Trigger Points for Limiting Activities/Closing
Establish criteria limiting activities/closing. Examples of criteria include (but is not limited):

- 10%+ COVID infection rate within local health department district
  - Current positivity rates can be found on each local health departments’ COVID dashboard*
- Orange/red on local health department risk dial
  - Risk dial can be found on each health departments’ website*
- Visitor(s) are confirmed COVID positive
- Staff is confirmed positive

* You may call your local health department for assistance in determining this information if you are unable to locate on their website

Ventilation
Ensure ventilation systems operate properly and increase circulation of outdoor air as much as possible, for example by opening windows and doors. Do not open windows and doors if doing so poses a safety or health risk (e.g., risk of falling, triggering asthma symptoms) to workers, volunteers, and visitors using the facility.

Specific Activity Considerations

Shared kitchens and dining rooms
Do not share dishes, drinking glasses, cups, or eating utensils. Non-disposable food service items used should be handled with gloves and washed with dish soap and hot water or in a dishwasher. Wash hands after handling used food service items.

Use gloves when removing garbage bags and handling and disposing of trash. After removing gloves, wash hands.

Food Service
Minimize the number of people allowed in the kitchen, food prep area, or dining area to allow for social distancing of at least 6 feet.

Continue to provide or offer to-go meal options. If a cafeteria or a group dining room is typically used, it is highly recommended to serve plated meals to seated clients individually by staff or utilize counter service with shorter lines and social distancing in place. Food service styles not recommended upon immediate reopening include: buffet, self-service, family style, and tray-line or counter service (without social distancing).

Use disposable food service items (e.g., utensils, dishes). If disposable items are not feasible or desirable, ensure that all non-disposable food service items are handled with gloves and washed with dish soap and
hot water or in a dishwasher. Individuals should wash their hands after removing and discarding their gloves or after directly handling used food service items.

If food is offered at any event, have pre-packaged boxes or bags for each attendee instead of a buffet or family-style meal. Avoid sharing food and utensils.

Recreational areas such as activity rooms and exercise rooms
Consider closing activity rooms or restricting the number of people allowed in at one time to ensure everyone can stay at least 6 feet apart.

Hold organized activities outdoors, where possible. Consider closing exercise rooms; otherwise, stagger use, increase air flow by opening windows where possible, and clean and disinfect between uses.

Activities and sports (e.g., card games, pickle ball, chess) that require close contact are not recommended.
Senior Center Reopening Self-Assessment

Check the Yes or No column for each question.
Reopening is not recommended until the following criteria is evaluated:

<table>
<thead>
<tr>
<th>AAA:</th>
<th>Center:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Filled out by:</td>
<td>Position:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

1. Have you contacted your local health department regarding your reopening plans?

2. Is your facility within compliance with LHD reopening plans?

3. Do you have a back-up cook?

4. Do you have a back-up manager?

5. Do you have a local vendor as a back-up meal provider?

6. Do you have back up driver(s)?

7. Is the county’s positivity rate below 10%?

8. Do you have the ability to provide PPE to all on-site clients?

9. Do you have space for 6’ distancing?

10. Do you have client interest in reopening?

11. Do you have cleaning supplies and a source for more?

12. Do you have a plan for if/when a participant or staff member is confirmed positive?

13. Do you have a notification plan for if/when a participant or staff member is confirmed positive?

Totals: