

Covid-19 Positive Youth or Staff Protocol

Draft as of 4/21/20

SUSPECTED OR CONFIRMED POSITIVE COVID PROTOCOL

The Information below is to provide guidance in the event that you have a suspected or actual COVID-19 Positive Client or Staff member.

INTRODUCTION

This document is not intended to supersede the existing COVID19 Service Protocol. This document is an evolving study, and preparation for, a worst-case scenario of one or more COVID19 Positive clients who are not able to be discharged, leaving the facility responsible for their well-being until a successful discharge can occur, if possible. The recommendations contained in this document are not a mandate, but a guide for practice in the event a program has no option but to serve clients infected with the Corona virus. Agencies that are applying protocol that falls outside of the scope of this document should provide that information to the Florida Network.

With the uncertainty of being able to maintain safe shelters, free of COVID-19, this protocol is developed to serve as a guide for those working on the frontlines ensuring youth in your care receive the best service under the safest conditions. In order to maintain services, we must approach each day not wondering if we will receive confirmed positive cases in shelter, but when. When a staff or youth does test positive, follow the steps below to assist you in arranging care, deploying resources, and notifying those that need information to continue to guide you through this process.

The information contained in this protocol is based on the best information available to the Florida Network at the time of publication and is intended to provide guidance and assistance to youth shelters in the event of a positive or suspected positive cases of COVID-19. This protocol is not intended to replace guidance provided by local health officials, government officials, or other public health experts.

In the event we learn a youth or staff person tests positive, or displays symptoms of COVID-19, **or is tested for COVID-19**, proceed with the following steps.

1. Immediately establish a timeline
 - a. When was last time the person was in shelter? Or at work if Non-res.
 - b. Was there prolonged contact with the youth or staff within 6 feet?
 - c. Who specifically was in the shelter/non-residential program at the time?
 - d. Was there any indication of symptoms at the time?
2. If it was a staff member, they are not to be back at work until they been symptom free for 14 days after last COVID-19 contact. If the staff member become symptomatic during that time, they need to stay out for at least seven days and be fever free for at least three consecutive days without medication. Staff must pass all COVID-19 screening questions prior to re-entering the milieu.

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3. Contact the Florida Network. The Network will notify Department of Juvenile Justice (DJJ) leadership and request assistance in working through the protocol of the above if there are positive test results. You will also be asked for census information.
4. Contact your local health department when you receive information of a suspected positive case for youth/staff. The shelter will need to follow their guidance. The program should ensure that the health department understands that the youth/staff works/resides in a residential program.
5. Contact DJJ's CCC within the required 2-hour time frame.
6. Any information updates should occur as soon as possible to the Florida Network and DJJ's CCC.
7. **The CCC must be notified within 2 hours of gaining knowledge that a staff person or youth is being tested. They must also again be notified of the test results within 2 hours of gaining that knowledge.**
8. Notify all parents and legal guardians of all youth in shelter with, or who came in contact with the infected individual of confirmation of a COVID-19 positive case in the program. The identity of the child, children, or staff diagnosed positive will be kept strictly confidential. Parents or guardians will be encouraged to discharge their child if a safe exit option is available, and advised to follow the CDC guidelines for monitoring and quarantine found [here](#).
9. Notify all staff that another staff member or youth has tested positive.

TERMS

Use the following terms to identify the status of clients in the milieu suspected or confirmed to be infected with COVID-19 or at likely risk of exposure.

Universal Precaution- for new intakes with no known exposure to COVID-19 and no symptoms upon screening. All persons in the milieu will wear masks in all common areas and during all group activities. Meals should be served according to social distancing guidelines. Staff should perform regular rounds to check temperatures (at least three times per day) and ask questions about COVID-19 symptoms; practice social distancing, restrict activity, and maintain hygiene precautions. In the absence of testing, Universal Precaution status assumes everyone in the milieu is infected with COVID-19 and practicing all possible measures to prevent or mitigate transmission.

*The CDC refers to this as "routine quarantining" for new intakes in their guidance for correctional facilities (separate from quarantining defined below). *

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OBSERVATION - Youth displays symptoms, but has no confirmed COVID19 test results. Individual with COVID-19 symptoms is to wear face a mask at all times they are outside of their room. Youth is to be housed in a single room setting, to include a converted office for this purpose for dormitory-style facilities. All staff and other youth should wear PPE "as local supply and scope of duties allow" and staff performing temperature checks and other medical care should wear full PPE (face mask, eye protection, gloves, gown). Staff should evaluate symptomatic youth to determine whether COVID-19 testing is indicated. Halt all further intakes, referring to the nearest operating Florida Network partner agency. Contact the Florida Network staff to facilitate if needed.

ISOLATION - youth with a laboratory-confirmed COVID-19 diagnosis who do not require hospitalization; supporting a youth with the COVID19 disease in a congregate shelter setting is not advised by the Florida Network, but multiple factors could put a program in this position regardless of preferable options. The first consideration is for the safety and well-being of all staff and youth in the facility. Staff interacting with the infected youth must be advised of the risks, and document their willingness to perform essential duties to maintain basic needs and safety for the infected youth. The many unknown qualities of the virus prohibit us from assuring the safety of anyone in contact with the youth, but according to the best information available staff working directly with infected youth should not meet any of the following conditions.

- Have no underlying, compromising health issues:
- Be over 65
- People with chronic lung disease or moderate to severe asthma
- People who have serious heart conditions
- People who are immunocompromised
 - Many conditions can cause a person to be immunocompromised, including cancer treatment, smoking, bone marrow or organ transplantation, immune deficiencies, poorly controlled HIV or AIDS, and prolonged use of corticosteroids and other immune weakening medications
- People with severe obesity (body mass index [BMI] of 40 or higher)
- People with diabetes
- People with chronic kidney disease undergoing dialysis
- People with liver disease

Supervisory staff should wear recommended PPE as appropriate for their level of contact with the individual under medical isolation and should limit their own movement between different parts of the facility to the extent possible. There should be a plan in place to safely transfer persons with severe illness from COVID-19 to a local hospital if they require care beyond what the facility is able to provide.

NORMALCY

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For normalcy the youth should be offered the ability to alternatively participate in all activities other youth are offered in shelter. This can include: TV in room, separate time outside for physical activity, board games, participation in educational activities, ability to contact family via phone/face time, participation in group activities via technology. Issue youth a tablet and establish contact permissions with parent or guardian.

YOUTH PROTECTIVE FACTORS

1. Youth should wear a facemask if around other people, or traversing the milieu.
If this is not possible due to breathing difficulty staff should wear a mask when sharing space with the youth.
2. Youth will not share dishes, drinking glasses, cups, eating utensils, towels, bedding, or other items with anyone in shelter. All items touched by the youth during meals must be washed at a temperature of 150 degrees for a minimum of 30 minutes.
3. Youth can use paper goods for eating but must ensure they are disposed of immediately after use, sealed in a plastic bag, and disposed of in the outside garbage container.
4. Youth will maintain separated from other youth and staff. The six-foot minimum social distancing does not apply to confirmed positive cases. Establish absolute minimum contact between ill youth and others.
5. Youth will also use a separate bedroom and bathroom.

SYMPTOM CHECK

- Symptoms and temperature for all persons in shelter should be checked at the start of each shift totaling at minimum 3 times per day.
- Youth should be checked 3 times per day to gain a normal reading (morning, after activity, and before bed time).
- Check should include a self-report by all staff and youth and a review of symptoms by Registered Nurse (or other staff if a nurse is not available).

FACILITY SANITATION

An enhanced daily sanitation plan should be implemented in accordance with the recommendations from the local health department using product labeled by the EPA as effective against coronavirus. This will assist in reducing further risk of spreading or contamination from the virus. All rooms, day areas and offices should be wiped down with disinfectant spray, wipes or bleach at a minimum of two times per day. Additionally, areas that are most frequently traveled within the facility as well as door handles should be wiped down twice per shift.

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PERSONAL PROTECTIVE EQUIPMENT

Any of the following would be helpful PPE while in shelter with a COVID-19 positive case: medical face shield, goggles, mask, latex gloves, Tyvek suit, or gown.

Staff and youth should be wearing face masks at all times (to the extent that they are available) to curb or prohibit transmission regardless of whether there has been a positive or symptomatic staff or youth in the program.

When removing PPE, remove and dispose of gloves. Clean your hands with soap and water or alcohol-based hand sanitizer. Next, remove and dispose of facemask, and immediately clean hands again with soap and water or alcohol-based hand sanitizer.

When putting on or removing PPE, establish a buddy system to confirm each necessary step to maintain universal precaution and disinfecting standards. [Strictly follow this sequence provided by the Center for Disease Control for donning and doffing PPE.](#)

Any reusable PPE must be properly cleaned, decontaminated, and maintained after and between uses.