Pandemic Planning and Response Guidelines

Novel Coronavirus Disease 2019 (COVID-19)

11.05.2020 Edition

Information about COVID-19 continuously evolves as health professionals and researchers learn more about the disease, its prevention, and its impact. This document is considered a "living" document and will change to reflect the current guidance from medical experts.

Introduction

Tangram has created this COVID-19 Planning and Response Plan to help guide the organization through the coronavirus pandemic and ensure that our employees have the information and resources they need to protect themselves and the health and safety of the individuals we serve. Tangram's services are essential to our clients, many of whom are at increased risk for contracting COVID-19. Tangram will rely on state, regional, and county data, as well as guidelines from authorities such as the Indiana State Department of Health and the Centers for Disease Control and Prevention, among others, to inform this plan and our organizational procedures.

About COVID-19: Signs and Symptoms*

COVID-19 is a contagious respiratory illness caused by a new coronavirus (called SARS-CoV-2). Though the symptoms of COVID-19 seem to be similar to influenza (flu), there are some key differences. COVID-19 seems to spread more easily than flu and causes more serious illnesses in some people. It can also take longer before people show symptoms and people can be contagious for longer. While more is learned every day, there is still a lot that is unknown about COVID-19 and the virus that causes it. People with COVID-19 have had a wide range of symptoms reported, ranging from mild symptoms to severe illness. Symptoms may appear 2-14 days after the exposure to the virus.

People with these symptoms may have COVID-19:
- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

This list is not intended to be exhaustive.

*information cited is from the Centers for Disease Control and Prevention

Definitions

High-Risk Individuals:
- people who are 65 years of age or older
- those who have moderate to severe lung disease or asthma
- people who have serious heart conditions
- people who are immunocompromised (including those who having cancer treatment, smokers, those who have had a bone marrow or organ transplant, immune deficiencies, poorly controlled HIV or AIDS, or prolonged use of corticosteroids and other immune weakening medications)
- people with severe obesity (BMI over 40)
- people with diabetes
- people with chronic kidney or liver disease

Personal Protective Equipment (PPE): this refers to those items that clients and employees may be required to wear to prevent the spread of COVID-19. Examples of PPE include masks, goggles, surgical gowns, shoe covers, face shields, gloves, etc.

Individual Support Team (IST): Those individuals who help make decisions for clients. This may include family members, Tangram employees, case managers, advocates, medical professionals, etc.

Operations: applies to employees providing services and those receiving services through Tangram's Community Exploration Program, Community Residential Program, Behavior Consultation and Training, and Employment Services.

Office/Administration: applies to the office building and/or those accessing or working in the Pennwood office building

Phases

Tangram uses a "phase" approach to define different protocols and responses to COVID-19. While Tangram hopes to move through the phases progressively, it may be necessary to revert to previous phases to protect health and safety.

The phases are defined below.

ALL PHASES (1-3):
- Any employee displaying symptoms of COVID-19 or with a fever of 100.4 or higher should NOT report to work. (Operations and Office/Admin)

- Anyone providing services in homes are required to wear masks and disinfect high-touch surfaces. Client and employee temperatures will be taken and recorded. (Operations and Office/Admin)
- Clients and employees should practice social distancing of six (6) feet, whenever possible. When this is not possible, employees should practice proper hand hygiene and wear personal protective equipment (PPE). (Operations and Office/Admin)
- Individual ISTs will determine the when the right time is for each person/site to get back to a new "normal." This timeline will be different for everyone. We encourage each team to consider risk factors of everyone in the household. (Operations)
- In the event of a medical mask shortage, staff will be asked to wear cloth facemasks and maintain social distancing when possible when providing care. (Operations)
- All employees entering the office will be required to take their temperature upon entry. A fever of 100.4 or higher will require them to leave the building and call HR. (Office/Admin)
- All employees must sign a Responsibility Pledge stating that they are fever-free, do not have signs or symptoms of COVID-19, and that they will stay home from work if they have a fever or are sick. (Office/Admin)
- All employees and visitors in the building will be required to wear either a cloth face mask or a company-supplied surgical mask during working hours (when outside of their own office) and maintain at least a six (6) foot distance from one another. (Office/Admin)
- The building will be professionally disinfected twice per week. The VP of Human Resources will be responsible for ensuring that a schedule is in place for employees in the building to follow for disinfecting high-touch surfaces at least three (3) times daily. (Office/Admin)
- Hand sanitizer will be placed at strategic locations in the building. (Office/Admin)
- Signage will be placed around the office to indicate room capacity, social distancing, and sanitizing procedures. (Office/Admin)
- Sanitizing supply inventory will be monitored by the VP of Operations and supplies will be placed in meeting rooms and common areas by the Properties Manager. If supplies in a meeting room are low, those using the room will be responsible for notifying the Properties Manager. (Office/Admin)

PHASE 1:
- Visitor restrictions are in place for all clients and sites. (Operations and Office/Admin)
- Client temperatures are to be taken twice daily or as ordered by a physician/nurse, and recorded.

- Behavior consultants and employment consultants are encouraged to provide tele-services during this phase. Before providing services face-to-face, the employee is to complete the COVID-19 monitoring form for him/herself, and the person with whom they are working. If in-person services are required, masks should be worn and hands should be washed or disinfected with hand sanitizer frequently. Thermometers, masks, and hand sanitizer will be supplied. (Operations)
- All employees are required to document temperature/symptom screening before entering worksite (Office/Admin and Operations)
- Virtual meetings encouraged for all operations during this time. (Operations)
- Nursing services will be provided via telehealth, unless in-person visits are necessary. (Operations)
- Key card access is limited and remote work is required for most office-based employees, with the exception of HR and Finance departments, which will create a rotating schedule. President/CEO, VPs, and Directors retain key-card access, but are encouraged to work remotely. IT and Nursing staff will also be allowed into the office to work 1-2 days per week. (Office/Admin)
- Deliveries are to be dropped off outside of individual residences (Operations) and at the designated area for the Pennwood office building (Admin/Office).

PHASE 2:
- Visitors restrictions for Community Residential sites are recommended for high-risk individuals, but driven by IST decisions. (Operations)
- Client temperatures are to be taken twice daily, or as ordered by a physician/nurse, and recorded.
- Behavior consultants and employment consultants are encouraged to provide tele-services during this phase. Before providing services face-to-face, the employee is to complete the COVID-19 monitoring form for him/herself, and the person with whom they are working. If in-person services are required, masks should be worn and hands should be washed or disinfected with hand sanitizer frequently. Thermometers, masks, and hand sanitizer will be supplied. (Operations)
- All employees are required to document temperature/symptom screening before entering worksite (Office/Admin and Operations)
- Virtual meetings encouraged for all operations during this time. (Operations)
- Remote work encouraged for office-based employees. VPs and Directors can set up a rotating schedule for their departments with no more than two (2) employees from each department in the office at one time. While all employees have key card access, they may only enter the building when scheduled. (Office/Admin)
- Deliveries are to be dropped off outside of individual residences (Operations) and at the designated area for the Pennwood office building (Admin/Office).

PHASE 2.5:

- All employees are required to document temperature/symptom screening before entering worksite (Office/Admin and Operations)
- Client temperatures are to be taken twice daily, or as ordered by a physician/nurse, and recorded.
- Team meetings will be allowed to take place at the Tangram office, but ONLY at the scheduled time and in groups no larger than the room will allow. (Office/Admin)
- The patio will be made available as a "meeting room" in Outlook and can be used for meetings as long as the weather cooperates. (Office/Admin)
- All meetings must be scheduled using the Microsoft Outlook Calendar. Employees will not be able to use meeting rooms if they have not signed them out by inviting the rooms to the meeting through Outlook. (Office/Admin)
- Employees must keep their allotted meeting time and leave the building after the meeting time to help us conform with social distancing guidelines. (Office/Admin)
- Meetings in Tangram meeting rooms are required to have a 30-minute buffer between them so that there is time for people to leave the building between meetings. (Office/Admin)
- Tangram employees who host meetings in Tangram meeting spaces are responsible for disinfecting the meeting room after the meeting. This is required. Disinfection guidelines will be placed in each meeting room by the VP of Human Resources and Quality Assurance (Office/Admin)
- All social distancing and other COVID-19 prevention requirements will be expected to be followed by all participants. (Office/Admin)
- Deliveries are to be dropped off outside of individual residences (Operations) and at the designated area for the Pennwood office building (Office/Admin).

PHASE 3:

- Behavior, Nursing, and Employment Services employees have the option of providing tele-services during the phase, if still available through Appendix K. Before providing services face-to-face, the employee is to complete the COVID-19 monitoring form for him/herself and the person with whom they are working.
- Masks should be worn and hands should be washed or disinfected with hand sanitizer frequently. Thermometers, masks, and hand sanitizer will be supplied. (Operations)
- Client temperatures are to be taken twice daily, or as ordered by a physician/nurse, and recorded.
- All employees are required to document temperature/symptom screening before entering worksite. (Office/Admin and Operations)

- Virtual meetings will continue to be an option. (Operations and Office/Admin)
- Remote work is optional and key card access is reinstated for all office employees who had prior access. (Operations and Office/Admin)
- Team meetings will be allowed to take place at the Tangram office, but only at the scheduled time and in groups no larger than the room will allow.
- Deliveries are to be dropped off outside of individual residences (Operations) and at the designated area for the Pennwood office building (Office/Admin).

Tangram recognizes that there may be a need to add phases beyond Phase 3. Any further phases will be informed by evolving guidelines from health officials and will be developed and implemented as necessary.

A member of Tangram's Preparedness Team will notify employees about which phase the organization is in on a monthly basis. Since the dates for each phase may change, they are not included in this plan.

Prevention Protocols

Because there is no cure or vaccine for COVID-19, prevention is the best way to slow the spread of COVID-19 and protect the health of our clients and employees. Employees should consider these prevention protocols a requirement for their work. If employees do not comply with these protocols, they will receive written disciplinary action.

Employees and clients should **wash their hands** often with soap and water for at least 20 seconds especially during these key times:

- Before, during, and after food preparation
- Before eating food
- Before and after caring for someone who is sick
- Before or after providing first aid
- After using the toilet
- After changing a diaper/depend or helping someone use the toilet
- After blowing your nose, coughing, or sneezing
- After touching an animal, animal feed, or animal waste
- After handling pet food or pet treats
- After touching garbage
- After you have been in a public place and touched an item or surface that may be frequently touched by other people, such as door handles, tables, gas pumps, shopping carts, or electronic casher registers/screens, etc.
- Before touching your eyes, nose, or mouth because that's how germs enter our bodies

If handwashing is not a viable option, a 60% or more alcohol-based hand sanitizer is a suitable substitute until staff can wash their hands. Gloves are discouraged, unless staff are cleaning and disinfecting surfaces or providing personal care to an individual.

All staff are required to wear a surgical type mask when reporting to work to slow the spread of COVID-19. Whenever possible, staff should maintain a 6-foot distance between themselves and others in the home. Because this is not always a possibility, staff and individuals served should monitor for signs and symptoms of COVID-19 on a daily basis.

COVID-19 tracking forms are to be kept at each site. Twice a day, each individual served is to have their temperature taken and recorded. Any signs and symptoms of COVID-19 are to be documented. Report any new symptoms to the Tangram nurse. Further instructions will be given at this point. At the start of each shift, DSPs are to take their temperature and record any signs and symptoms of COVID-19. Any staff who has a fever will be sent home and asked to report to Human Resources for further instructions.

All visitors to any site will be required to have their temperature taken and asked to wear a mask prior to entering a home. Track temperatures on Tangram's electronic visitor form found on MyHub. Social distancing of 6-feet is asked of all visitors.

Cleaning and disinfecting frequently touch surfaces should be done at the beginning and ending of each shift. This includes tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilets, faucets and sinks. The CDC has recommended that if a surface is dirty, clean it before disinfecting it – use soap and water prior to disinfectant. A bleach mixture of one part bleach and 10 parts water, mixed every 24 hours, is a suitable disinfectant for COVID-19.

Home cleaning and disinfectant guidance can be found at:

https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cleaning-disinfection.html

Tangram has provided employees with needed PPE, including, but not limited to surgical masks, gloves, N95 respirator masks (in the event of possible exposure), gowns, face shields, and goggles. Hand sanitizers and thermometers have also been provided. In the event of a shortage or increased need, Tangram will continue to do due diligence in procuring PPE for employees. A link to how to use PPE properly is below:

https://www.cdc.gov/coronavirus/2019-ncov/hcp/using-ppe.html

Procedures for Exposure/Potential Exposure of COVID-19

From April 1, 2020 to December 31, 2020, all employees who have been employed with Tangram for at least 30 days are protected under the Families First Coronavirus Response Act. Tangram's existing FMLA policy still applies to all other reasons for leave outside of this policy. Tangram's Coronavirus FMLA Leave Expansion and Paid Emergency Sick Leave Policy can be found on MyHub, the organization's intranet, on the Policies and Procedures page, under Human Resources. Tangram's Family and Medical Leave Policy (HR407) can also be found here.

In Indiana, direct support professionals have been designated as essential and, for many COVID-19 designations, healthcare workers. The following procedures takes this into account. The Centers for Disease Control has issued strategies for healthcare workers to mitigate staffing shortages. In the event of COVID-19 causes staffing shortages, changes to these procedures may be updated. *It is now believed that people are contagious 2 days prior to symptoms developing. Exposures can happen in these two days.

Employee has no known exposure to COVID-19 and is displaying symptoms:
- Employee should not report to work.
- Employee should report to supervisor and Human Resources that they are experiencing symptoms of COVID-19.
- Employee should be tested for COVID-19.
- **If the test results are negative**, the employee will be allowed to return to work, only in the sites they were working in prior to testing. Employee will be required to wear an N95 mask, face shield, or goggles, and gown and gloves while providing patient care for 10 days from the onset of symptoms, until at least 24 hours have passed since a fever was experienced without fever reduction medication, and symptoms have improved.
- **If the employee tests positive,** the employee will be required to quarantine at home for 10 days from the onset of symptoms, be fever free for at least 24 hours without fever reducing mediation, and have improved symptoms before returning to work.

Employee has suspected exposure to COVID-19 with no symptoms:
- Employee should report suspected exposure to supervisor and Human Resources.
- Employee is able to report to work with increased PPE usage (N95, face shield or goggles, and gown and gloves) for 14 days from exposure. Employee will not

be allowed to work at any other sites other than where they were working prior to suspected exposure during these 14 days. **Disclaimer: If employee chooses to be tested, a negative COVID-19 test will suffice for the employee to return to work at the same site they were working prior to the exposure for 14 days with PPE usage. If employee tests positive, the employee will be required to quarantine at home for 10 days from the onset of symptoms, be fever free for at 24 hours without fever reducing medication, and have improved symptoms before returning to work.**

Employee has suspected exposure to COVID-19 with symptoms:
- Employee should not report to work.
- Employee should report suspected exposure to supervisor and Human Resources.
- Employee should be tested for COVID-19.
- **If the test results are negative**, the employee will be allowed to return to work at the sites they were working in when they were exposed. Employee will be required to wear to N95 mask, face shield, gown, and gloves while providing patient care for 10 days from the onset of symptoms, until at least 24 hours have passed since a fever was experienced without fever reduction medication, and symptoms have improved.
- **If the employee tests positive,** the employee will be required to isolate at home for 10 days from the onset of symptoms, be fever free for at least 24 hours without fever reducing mediation, and have symptoms improving before returning to work.

Employee has known exposure to COVID-19 with or without symptoms (exposure outside of work setting)
- Employee should report exposure to supervisor and Human Resources.
- Employee should be tested for COVID-19.
- Employee should not report to work until test results have been received.
- **If the test results are negative, e**mployee is able to report to work with increased PPE usage (N95, face shield or goggles, and gown and gloves) for 14 days from exposure. Employee will not be allowed to work at any other sites other than where they were working prior to suspected exposure during these 14 days. **If employee tests positive, the employee will be required to quarantine at home for 10 days from the onset of symptoms, be fever free for at least 24 hours without fever reducing medication, and have improved symptoms before returning to work.**

Employee has known exposure to COVID-19 with or without symptoms (work exposure)
- Employee should report exposure to supervisor and Human Resources.

- Employee should be tested for COVID-19.
- Employee is able to report to work at site of exposure with increased PPE usage.
- All employees and clients at the site will be tested for COVID-19.

Employee tests positive for COVID-19
- Human Resources should be notified of positive test result.
- Employee should not report to work for 10 days from the onset of symptoms, be fever free for at least 24 hours without fever reducing medication, and have improved symptoms before returning to work.

Client has no known exposure to COVID-19 and is displaying symptoms
- Notify Program Manager and Individual Support Team.
- Client should be tested for COVID-19.
- At onset of symptoms, employees should increase PPE usage (including N95, face shields or goggles, and gowns and gloves). As much as possible, the individual with symptoms should be isolated from others living in the home (isolate individual to their bedroom for 72 hours or until test result comes back negative).
- Minimal contact should be had with the client when providing personal care.
- If possible, serve meals in the bedroom.
- Increase temperature monitoring to every two hours.
- Seek emergency help for respiratory distress, changes in consciousness, or a fever that does not respond to fever-reducing medication.
- If the test results are negative, staff should continue with increased PPE usage for 10 days from the onset of symptoms, until the client is fever-free for 24 hours without the assistance of fever-reducing medications, and symptoms have improved. Individuals living in the home should follow social distancing guidelines.
- If test results are positive, staff should follow protocols for isolating and caring for an individual positive for COVID-19 (see FORMS and LINKS).

Client has suspected or known exposure to COVID-19 with or without symptoms
- Notify the Program Manager and the Individual Support Team.
- Client should be tested for COVID-19 (as the team determines).
- If symptoms are present, the client should be isolated from other individuals in the home and protocols for caring with an individual with COVID-19 or suspected COVID-19 should be followed (isolate individual to their bedroom for 72 hours or until test results come back negative). Regardless of whether symptoms are present or not, all social distancing and prevention protocols should be followed.

- Minimal contact should be had with the client when providing personal care.
- If possible, serve meals in the bedroom.
- Increase temperature monitoring to every two hours.
- Seek emergency help for respiratory distress, changes in consciousness, or a fever that does not respond to fever-reducing medication.
- If no symptoms are present, staff should increase PPE usage for 14 days from the suspected exposure. This includes the use of N95 masks, face shields or goggles, and gowns and gloves.
- If symptoms are present, staff should increase PPE usage, as above, for 10 days from the onset of symptoms, and the client is fever-free for 24 hours without fever-reducing medication, and symptoms have improved.
- If the test is negative, regardless of whether there are symptoms or not, staff should increase PPE usage, as above, for 14 days.
- If the test is positive and there are symptoms, staff should increase PPE usage, as above, for at least 10 days from the onset of symptoms. If there are no symptoms, staff should increase PPE usage for 14 days.

Client tests positive for COVID-19
- Call 911 if the client has any of the following symptoms (tell the dispatcher the client has tested positive for COVID-19):
    - Severe Shortness of Breath – Difficult Breathing
    - Persistent Pain or Shortness of Breath
    - New Confusion or Inability to Arouse
    - Blue Lips or Face
- If non-threatening symptoms, move client to their bedroom, if they are not already there.
- Take a full set of vitals and document.
- Notify Tangram Nurse and Program Manager. The Program Manager must complete an IR within 24 hours.
- The Program Manager or Nurse will contact the client's physician.
- All employees in the home have been exposed/suspected of exposure.
- Follow instructions from the physician and Tangram Nurse on client care.
- Set up a cleaning station outside of the client's bedroom. The station should include the following:
    - Trash can
    - Personal Protective Equipment (PPE)
    - Disinfectant

- Immediately wash hands when leaving the client's room. PPE should be changed before working with other individuals in the home.
- Employees working with COVID-19 positive individuals will not work with individuals who are not COVID-19 positive.

PPE Usage and Conservation

Tangram has been fortunate to secure a large inventory of PPE, but it is important to plan for the long-term and use best practices for smart usage and conservation of PPE. Experts and our suppliers have indicated that the PPE pipeline may experience shortages as the pandemic continues, which is why we must be responsible PPE consumers. The following are guidelines for when to use certain PPE items and how to conserve or reuse these items.

GOWNS:

Gowns are to be worn when completing tasks with splashes and sprays such as g-tube, nebulizer treatments or when completing high contact care (dressing, bathing, transfer, changing briefs) on a client with symptoms, presumed positive or tested positive for Covid-19, or as directed by hospital or County Health Department. A gown may not be indicated if there is minimal risk of coming into direct contact with linens or body fluids such as an ambulatory client who requires minimal hands on care. Staff involved in providing care as described above will label and reuse gown until soiled or damaged.

1. Label the inside of the gown with staff name. This identifies the clean side of the gown.
2. Follow On/Off guidelines, except after removal, then hang on designated hook.
   a. To put a gown on:
      i. With the opening in the back, secure the gown at the neck and waist.
      ii. If the gown is too small for full coverage, use two; the first with the opening in the front, and the second placed over it with the opening in the back.
      iii. When a gown or full PPE is worn, PPE should be removed at the doorway to a patient room or in an anteroom. Respirators should always be taken off outside a patient room, once the door is closed.
   b. To remove a gown:
      i. Unfasten the ties.

      ii. Peel the gown away from the neck and shoulder.
     iii. Turn the contaminated side (the outside) toward the inside.
     iv. Fold or roll the gown into a bundle.
      v. Discard in designated receptacle.

Option if gowns are not available: disposable/washable aprons, raincoat, change of clothing.

N95 FACE MASKS:

When to use: for the care of known or suspected COVID-19 clients when supplies are available.
1. Use 1 mask per staff
2. Wear all shift
3. Store in a paper bag labeled with staff name for reuse
4. Dispose when mask is obviously damaged or hard to breathe through
5. Discard bag when soiled, torn, or when replacing respirator
6. If available, use face shield over respirator to reduce surface contamination

SURGICAL MASKS:

When to use: to be used by symptomatic client if they can tolerate. By staff, if within six (6) feet while caring for symptomatic or positive client or if splashes or sprays are anticipated during treatment (nebulizer, g-tube). Use when instructed to by hospital or County Health Department.
1. Use 1 mask per staff per day
2. Throw away at the end of the shift
3. Surgical masks may be utilized when N95 masks are not available for presumed or positive COVID-19 clients
4. If available, use face shield over the mask to reduce surface contamination

If a mask was worn by a client during care to minimize exposure and as directed by the nurse, the mask should be removed, folded with the inside or contaminated part of the mask touching and place in a paper bag labeled with the client's name that is kept in the client's bedroom.

FACE SHIELD:

When to use: Use with face or N95 mask when completing tasks with splashes and sprays such as g-tube, nebulizer treatments on a client with symptoms, presumed positive or tested positive for COVID-19, or as directed by hospital or County Health Department.

1. If available, use one (1) face shield for each staff. When possible use face shield for nebulizer treatments and g-tube feeding
2. The outside of the shield is considered dirty. Wash hands if outside of shield is touched or adjusted. Discard when broken or no longer able to see through shield.

Cleaning and Disinfection:
1. Wear clean gloves
2. Wipe the inside then outside of the mask with cleaning wipe or paper towel with soap and water
3. Change gloves
4. Disinfect the inside then outside with disinfecting wipe or paper towel and disinfecting spray
5. Wipe outside with clean water or alcohol to remove residue
6. Hang by strap to air dry on designated hook
7. Remove gloves and wash hands.

Cleaning and disinfection procedures also applies to goggles and safety glasses.

Pulmonary Protection Plan
OSHA Pulmonary Protection Standard issues guidance on protecting employees from the dangers of COVID-19. Guidance classifies employees into risk categories.

1. Low Risk – No contact with people known to be, or suspected of being, infected with COVID-19.
2. Medium Risk – Frequent/close contact with people who may be infected, but are not known to have or are not suspected to have COVID-19.
3. High Risk – High potential for exposure to known or suspected sources of SARS-COV-2 (COVID_-19).
4. Very High Risk – Certain Procedures on COVID patients.

To be in compliance with this standard, Tangram has worked to secure different sizes and types of N95 masks for our employees and put procedures in place to protect our employees from contracting COVID-19 while in the workplace.
Tangram will provide training on proper use of PPE. Employees can refer to the protocols in this document and can also reach out to Tangram's nursing team with questions or training needs. Furthermore, training videos will also be added to MyHub, the organization's intranet.

Appendices (Forms and Website Links)

CDC: Interim Guidance for Public Health Professionals Managing People With COVID-19 in Home Care and Isolation Who Have Pets or Other Animals: https://www.cdc.gov/coronavirus/2019-ncov/php/interim-guidance-managing-people-in-home-care-and-isolation-who-have-pets.html

OSHA: COVID-19 Control and Prevention: https://www.osha.gov/SLTC/covid-19/controlprevention.html#health

CDC: Recommended Guidance for Extended Use and Limited Reuse of N95 Filtering Facepiece Respirators in Healthcare Settings: https://www.cdc.gov/niosh/topics/hcwcontrols/recommendedguidanceextuse.html

Bureau of Developmental Disability Services: COVID-19 Policy Changes: https://www.in.gov/fssa/ddrs/files/UPDATED_FAQ_COVID-19_Policy_Changes.pdf