



Guidance to Providers – May 2020

The purpose of this document is to provide guidance to day service providers and residential providers about what they need to be thinking about as day services begin to open back up.

First and foremost, we recommend that there are clear lines of communication between residential and day services providers during this timeframe. Communication will be key to avoiding unnecessary redundancy, improving overall efficiency, avoiding confusion and managing expectations amongst all providers.

Below are recommendations for you to consider:

- Communicate clearly when day services will start to open up
 - Will there be a ramp up-period? What does that look like?
 - Will all services be offered? If so, what are they?
 - Will there be any changes in the schedule like shorter hours?
- What are the plans around transportation?
 - How will social distancing be achieved while transporting?
 - Are clients required to wear a mask during transport?
- How will temperatures be checked and recorded?
 - Should residential providers do temp checks before person leaves?
 - Should day providers do temp checks when individuals arrive at the facility?
 - How will temp checks happen at employer sites?
- How will you assess the person's overall health?
 - What screening tool are you using beyond temp checks?
 - What if you suspect someone is ill?
 - Who do you call?
 - Do you communicate your concern to other providers who support the individual?
 - Is there an agreement of when the client will be picked-up from the DT&H facility if they are displaying symptoms?
 - Is there a quarantine area at the site for staff and/or clients to go if they are displaying symptoms?
 - What if someone you support tests positive for COVID-19?
 - What is your communications plan?
 - Who do you need to communicate with across programs?

- What are the reporting requirements that you need to be aware of after someone tests positive?
 - What is your plan to reach out to MDH? Should staff members/guardians/residential providers call the MDH COVID-19 Hotline (651-201-3920) if a client/staff is displaying symptoms?
- What are the guidelines around using masks?
 - What do you do with those people who can't wear masks, or won't keep them on?
- How will social distancing requirements be met?
 - At the facility?
 - At the employer sites?
- What are the cleaning and disinfecting guidelines?
 - What will happen for disinfecting the site if there is a confirmed case? For example, will you use your cleaning vendor and have the site disinfected via the application of electrostatic spraying?
- How can residential providers and day programs share their experiences?
 - For example, day providers can increase communication with residential providers via notes in the client's daily program book, communication sent home, increase communication with the Designated Coordinator, etc.
- What specific information needs to be shared with staff? For example, leave policies for staff needing to stay home when they are sick, use of PTO as needed (will your organization pay out PTO), sick leave via the FCCRA, emergency FMLA, and when/how they will call staff back to programming.
 - What happens if the staff is experiencing issues with childcare?
 - What if the staff has committed to shifts at a residential provider or a different job?
 - Does each site have the needed FCCRA poster hanging in all breakrooms?
 - If you call a staff back and they refuse to work, are you counting that as a voluntary resignation?

Tools and Resources

[MDH guidelines for social distancing](#)

[MDH guidelines for masks](#)

[ARRM webpage to get COVID resources](#)

[MOHR webpage to get COVID resources](#)

[MN Symptom Screener](#)

[MDH Visitor and Employee Health Screening Tool:](#)