Suspected and Confirmed Cases of COVID-19

Suspected Cases of COVID-19
Any staffed program serving a youth with suspected COVID-19 should immediately contact [INSERT POSITION TITLE]. The [INSERT POSITION TITLE] will also notify the [INSERT POSITION TITLE] and [INSERT POSITION TITLE].

The following control measures should be implemented:

- Place a medical/surgical face mask on the youth exhibiting symptoms of COVID-19.
- If the program has nursing, notify nursing immediately. Nursing will contact the person’s healthcare provider. If the program does not have nursing, [INSERT POSITION TITLE] should contact the person’s health care provider and follow their instructions regarding care and testing.
- Isolate the youth in a private room with the door closed if safe to do so. Youth should have access to a private bathroom.
  - Considerations may be necessary in order to provide effective communication access for youth with disabilities.
- If you are in the same room as the youth, wear a surgical/medical facemask and stand at least 6 feet away. If you have access to other PPE, you should also wear gloves, gown, and eye protection (goggles or face shield).
- Ask the youth about symptoms of COVID-19 from a distance to share with the healthcare provider. Symptoms can include: fever (subjective or documented) respiratory illness (including cough, sore throat, runny nose, shortness of breath), flu-like illness (fatigue, headache, muscle aches), and loss of taste and smell.
  - If the youth is unable to respond to the questions the adults who were responsible for the youth’s care should be asked about the symptoms.
- If the youth requires immediate medical care, call 911 for an ambulance and inform EMS of the youth’s symptoms and concern for COVID-19.

Confirmed Cases of COVID-19
Any staffed program serving an youth with a confirmed case of COVID-19 should immediately contact [INSERT POSITION TITLE], who will contact the Division of Public Health Services in Concord, 271-4496 (am) or 271-5300 (pm) to review the situation and control measures. Notification should also be made to the [INSERT POSITION TITLE] and [INSERT POSITION TITLE].

The following control measures should be implemented:

- The youth must be kept in their room at all times or within the isolation unit, and should have access to a private bathroom.
Youth Residential Treatment: Responding to COVID-19 Exposure

- Anybody who enters the person’s room should use appropriate PPE (surgical/medical facemask, gloves, gown, and eye protection) if available.
- Frequently wash your hands for 20 seconds with soap and water, or use a hand sanitizer if soap and water are not available.
  - Should the youth need support in hand washing staff should provide hand over hand assist to all individuals when it comes time for them to wash their own hands.
- Staff and youths’ hands should be washed upon entering a building, before and after eating, before and after toileting, after someone has touched their face, after coughing or sneezing, after glove removal and mask removal.
- Close off all areas used by the youth. If the exposed area(s) can be isolated, the remainder of the program may remain open.
- If a shared bathroom is necessary precautions must be put in place to assure there is no cross-contamination. The bathroom should be cleaned after use by the infected youth following applicable CDC guidance.
- Frequent cleaning and disinfection of the youth’s environment should occur.
- If the youth needs to come out of his/her room or the isolation unit at any time, they should wear a medical/surgical facemask.
- Before all food and drinks or other items are brought to the youth’s room or the isolation unit, the youth should wear a mask.
- If staff are assisting with baths or showers the youth needs to have a mask on and staff should wear appropriate PPE.
- If staff need to assist with the disposal of any bodily waste they will need to wear full PPE to dispose of waste material.
- If nursing is available, nursing will continue to instruct and direct care to all youth who have COVID-19.
- Persons with COVID-19 must stay in isolation until all of the following conditions are met:
  - At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications and improvement in respiratory symptoms (e.g., cough, shortness of breath); and,
  - At least 7 days have passed since symptoms first appeared

Close Contact with a Confirmed Case of COVID-19
An employee or Individual/youth may have had close contact with an individual who has tested positive for COVID-19 but has not tested positive themselves.

“Close contact” is defined as living in the same household as a person who has tested positive for COVID-19, caring for a person who has tested positive for COVID-19, being within 6 feet of a person who has tested positive for COVID-19 for >10 minutes, or has been in direct contact with secretions (e.g., sharing utensils, being coughed on) from a person who has tested positive for COVID-19, while that person was symptomatic or within 48 hours of becoming symptomatic.

Close contact which occurred prior to 48 hours before the development of symptoms is not considered to be an exposure. Decisions about who had close contact to a confirmed case of COVID-19 and implementation of quarantine are made by DPHS.

Other than essential personnel permitted to return to work as identified above:
- The employee or individual/youth should self-quarantine for 14 days and stay home from work.
- Monitor for symptoms of COVID-19 and take and record daily temperatures.
- Those in self-quarantine who have not developed symptoms and are not considered a high risk for transmission of the virus may return to the program once the 14-day quarantine period has ended.
- If the exposed employee or individual/youth subsequently develops symptoms and tests positive for COVID-19, follow the guidelines under Confirmed Cases.

Any person who is a close contact with a person confirmed with COVID-19 should be provided the NH DPHS Self-quarantine guide: [https://www.nh.gov/covid19/resources-guidance/documents/self-quarantine-covid.pdf](https://www.nh.gov/covid19/resources-guidance/documents/self-quarantine-covid.pdf).

**Confirmed Employee Case Outside the Staffed Program**

If an employee tests positive for COVID-19 but has not been to the staffed program while they were symptomatic or within 48 hours of becoming symptomatic, no deep cleaning is required.
Providing Care in staffed programs
Individual programs face unique considerations when a youth is confirmed to have COVID-19 or has had close contact with an ill person. Always follow the guidance of the youth’s healthcare provider and consult the related CDC guidance on caring for infected individuals here: https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/care-for-someone.html

Determine Location of Care
- The [INSERT POSITION TITLE] will consult DPHS, DCYF, and BCBH to assess whether the youth setting is appropriate or an alternative appropriate place to ensure the safety of the youth.
  - This includes whether the youth is stable enough to receive care at the program, appropriate staff is available, and there is a separate bedroom that the youth can recover in without sharing immediate space with others.
  - The youth and other peers must have access to appropriate, recommended personal protective equipment – at minimum, gloves and facemask – and must be capable of adhering to precautions such as hand hygiene.
  - If other household members are at increased risk of complications from COVID-19 infection (such as who are immunocompromised), care at the program may not be appropriate.

On-site Care
If the youth will be cared for within the program:

Limiting Further Spread
- Other residents should stay in another room or be separated from the youth as much as possible.
- When there is a need to care for the youth, staff will need to encourage the person to wear a mask, and wash their hands before you can assist them.
- Other residents should use a separate bedroom and bathroom. If a shared bathroom is necessary precautions must be put in place to assure there is no cross-contamination. The bathroom should be cleaned after use by the infected youth following applicable CDC guidance.
- Prohibit any visitors who do not have an essential need to be in the program.
- Clean all “high-touch” surfaces within the program every day.

Youth Care
- Make sure any assigned staff understand and can help the youth follow their healthcare provider’s instructions for medications and care. Update nursing, if available, or [INSERT POSITION TITLE] with any changes in health.
- Help the youth with basic needs and provide support, as needed.
- The youth should wear a facemask around other people.
- Avoid sharing household items with the youth. After the youth uses items, wash them thoroughly.
- Follow the guidelines in the Deep Cleaning section of this guidance regarding cleaning procedures of a youth’s space.
Deep Cleaning
A deep clean of a program may be required if an employee or Individual/youth is confirmed to have COVID-19 and was present in the program while they were symptomatic. Follow CDC cleaning and disinfecting guidance as applicable to the program setting:


Definitions
**Cleaning** refers to the removal of germs, dirt, and impurities from surfaces. Cleaning does not kill germs, but by removing them, it lowers their numbers and the risk of spreading infection.

**Disinfecting** refers to using chemicals to kill germs on surfaces. This process does not necessarily clean dirty surfaces or remove germs, but by killing germs on a surface after cleaning, it can further lower the risk of spreading infection.

Personal Protective Equipment
When performing cleaning or disinfecting of any area:

- **Cleaning staff should wear disposable gloves and gowns for all tasks in the cleaning process, including handling trash.**
- After cleaning a room or area occupied by ill persons, remove gloves and immediately clean hands.
- Cleaning staff and others should clean hand often – including after removing gloves and any contact with a sick person – by washing hands with soap and water for 20 seconds. If soap and water are not available and hands are not visibly dirty, an alcohol-based hand sanitizer that contains 60%-95% alcohol may be used.
- Cleaning staff should immediately report breaches in PPE (e.g., tear in gloves) or any potential exposures to their supervisor.

Programs are encouraged to re-educate personnel on proper use of personal protective equipment (PPE) and when to use different types of PPE.

Linens, Clothing, and Laundry Items

- Wash items as appropriate in accordance with the manufacturer’s instructions, using the warmest appropriate water setting, and then dry items completely.
- Clean and disinfect hampers or other carts for transporting laundry according to above guidance on cleaning hard or soft surfaces.

Cleaning while a youth is receiving care
There are additional deep clean considerations when a youth with a confirmed or presumed positive case of COVID-19 is being cared for within the program.

- In a program where an ill person is being housed in isolation, focus on cleaning and disinfecting common areas where staff and any other person providing services may come into contact with ill persons.
- Reduce cleaning and disinfection of bedrooms and bathrooms used by the ill persons to an **as needed** level to reduce contact.
• If a separate bathroom is not available, the bathroom should be cleaned and disinfected after each use by an ill person.
• In areas where ill persons have visited or used, continue cleaning and disinfection as provided in this guidance.