



**CABINET FOR HEALTH AND FAMILY SERVICES**  
**Office of the Secretary**

**Andy Beshear**  
Governor

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**Eric C. Friedlander**  
Secretary

**Provider Guidance: Adult Day Training In-Person Services**

**June 23, 2020**

On March 6, 2020, Governor Andy Beshear signed Executive Order 2020-215 declaring a state of emergency in the Commonwealth due to the outbreak of the novel coronavirus (COVID-19). On March 16, Inspector General Adam Mather issued an “Interim Guidance Regarding Statewide Closure of Licensed Adult Day Centers.” The current public health emergency has resulted in a rapidly changing environment. The Cabinet for Health and Family Services will continue to provide information and updates to providers of Adult Day Training.

There is an inherent risk of exposure to COVID-19 in any place where people are present. Participants in Adult Day Training In-Person Services are at high risk of becoming seriously ill with COVID-19. The recommended visitation guidelines are based on what is currently known about the transmission and severity of COVID-19. Compliance with these guidelines will reduce the risk of transmission of COVID-19 but *will not eliminate* the risk to the program’s participants, staff or visitors. By entering the Center, visitors are acknowledging the inherent risk of exposure to COVID-19 to themselves and to Center’s participants and staff.

This guidance provides clarifying information to Adult Day Training Medicaid Waiver Providers (Centers) concerning the resumption of in-person services, beginning June 29, 2020, when the following conditions are met.

**DEFINITIONS**

CDC Guidelines: Reference materials available from the [Centers for Disease Control and Prevention website](https://www.cdc.gov) and specific extension sites listed at the end of this guidance.

Cleaning: The removal of dirt and impurities, including germs, from surfaces. Cleaning alone does not kill germs, but it decreases their number and therefore the risk of spreading infection.

Disinfecting: Cleaning with an EPA-registered disinfectant chemical according to the manufacturer’s directions for use. This process does not necessarily clean dirty surfaces, but killing germs remaining on a surface after cleaning further reduces the risk of spreading infection.

Donning and Doffing: Putting on and taking off PPE.

Essential Visitor: A participant's case manager, health professional engaged in a participant's care, vendors or contractors delivering goods or services, public agency or emergency personnel conducting official duties.

Fever: Registering a body temperature of at least 100° F.

Guidance: Recommended course of action; not a regulation or directive.

PPE: Personal protective equipment, including but not limited to disposable gloves, gowns, face masks, shields or goggles.

## PEOPLE

### ALL - Screening

- **Re-Opening:** Any person entering the Center for the first time since its re-opening should:
  - Provide evidence of having received a negative result from a COVID-19 test administered within the 120 hours prior to entry;  
and
  - Demonstrate lack of fever, confirmed by an infrared thermometer;  
and
  - Respond “No” to at least the following verbal screening questions (posed in the most relevant language for the person to understand):
    - 1) Have you had any of the following symptoms since your last day at work or the last time you were here?
      - a) Feeling of fever
      - b) Cough
      - c) Shortness of breath
      - d) Sore throat
      - e) Muscle aches
      - f) Change in sense of smell or taste
      - g) Any gastrointestinal symptoms (i.e. diarrhea, vomiting, etc.)
    - 2) Is there anyone in your household who is ill or has been diagnosed with COVID-19?
    - 3) Have you been in contact with anyone who is ill or has been diagnosed with COVID-19?
  - Inability to complete all three conditions should result in the person consulting with his/her primary care Center or a medical Center/facility for direction regarding recovery at home or the need for healthcare Center assessment.
- **Ongoing:** Any person entering the building after clearing the Re-Opening conditions described immediately above should:
  - Demonstrate lack of fever, confirmed by an infrared thermometer;  
and
  - Respond “No” to at least the following verbal screening questions (posed in the most relevant language for the person to understand):
    - 1) Have you had any of the following symptoms since your last day at work or the last time you were here?
      - a) Feeling of fever
      - b) Cough

- c) Shortness of breath
    - d) Sore throat
    - e) Muscle aches
    - f) Change in sense of smell or taste
    - g) Any gastrointestinal symptoms (i.e. diarrhea, vomiting, etc.)
  - 2) Is there anyone in your household who is ill or has been diagnosed with COVID-19?
  - 3) Have you been in contact with anyone who is ill or has been diagnosed with COVID-19?
- Either a body temperature exceeding the stated threshold or a negative response to any of the screening questions should result in the person consulting with his/her primary care Center or a medical Center/facility for direction regarding recovery at home or the need for healthcare Center assessment.

## **Training**

- The Center should deliver training and information about COVID-19 for participants, their caregiver and families, and employees, including at least:
  - Recognizing the signs and symptoms of COVID-19, how it spreads, risks of exposure and self-protection;
  - Proper handwashing practices and use of hand sanitizer stations;
  - Donning and doffing PPE;
  - Other relevant infection control precautions (i.e., CDC Guidelines and social distancing measures).
- Training communication should be:
  - Provided at an effective literacy level; and
  - Conveyed in the preferred language spoken or read by trainee.
    - Consider utilizing the participation of an employee, participant’s caregiver or community resource proficient in the non-English language desired.
  - Consider seeking grief support services for participants, their caregivers and employees in response to COVID-19 disruptions.
    - The Kentucky Community Crisis Response Board (KCCRB) can assist the Center with finding local resources or providing direct support via [their website](#) or by calling toll free 24/7: (888) 522-7228

## **PARTICIPANTS**

- Each participant’s admission/return should be based on the Person Centered Team assessment and plan for meeting the:
  - Participant’s needs, health risk factors and ability to follow social distancing guidelines; and
  - Caregiver’s or other household members’ needs.

- Each participant should:
  - Adhere to state-mandated social distancing guidelines;
  - Wear an approved mask;
  - Wash hands after toileting;
  - Wash or sanitize hands before and after each meal or snack, and when changing any activity;
  - Have personal items labeled with participant's name; and
  - Be discouraged from bringing any non-essential personal items into the Center.
- If a participant develops a fever or illness symptoms consistent with suspected COVID-19 while on site:
  - He/she should be isolated from the other participants, per the Center's protocol for illness response.
  - Staff should ensure the participant wears a mask.
  - The Caregiver should be notified to coordinate care and transportation for the participant to return home and seek consultation from a qualified health care professional.

## **EMPLOYEES**

- Each employee should:
  - Complete orientation that includes the Center's "COVID-19 Healthy-at-Work" plan and topics listed in "Training," herein.
  - Wear an approved mask, gloves and other applicable Personal Protective Equipment (PPE);
    - Limit the use of filtering face piece respirators (such as N95) by following other COVID-19 exposure control strategies and use of other facial coverings.
    - Follow CDC guidelines for properly donning, doffing and disposing/storing PPE.
  - Be encouraged to bring additional clothes to change into before leaving for home;
    - Work clothing should be bagged and washed immediately after returning home.
  - Wash and/or sanitize hands frequently, according to CDC guidelines, including:
    - arrival and departure from the workplace;
    - after touching any surface suspected of contamination;
    - before and after using the restroom, eating, drinking or smoking;
  - Follow CDC Guidelines for infection control precautions; and
  - Understand that he/she should not report to work if experiencing either a fever or symptoms of illness.
- If an employee develops a fever or illness symptoms consistent with suspected COVID-19 while on-site:
  - He/she should be separated per the Center's protocol for illness response, and immediately referred to his/her primary care Center or a medical Center for direction regarding recovery at home or the need for healthcare Center assessment.
  - His/her work area must be cleaned and disinfected immediately before employees may be assigned to that work area.
- If an employee develops symptoms consistent with COVID-19 or receives a laboratory-confirmed positive test result for COVID-19, he/she should remain in self-isolation until he/she has met the current CDC guidelines for health care workers returning to work.

## VISITORS

- Until further notice, only *essential* visitors should enter the Center. (see Definitions)
- Each essential visitor should follow the precautions procedures applicable to employees.

## OPERATIONS

### CONGREGATE INTERACTIONS

- **Social Distancing** - Until further notice, at least a 6-foot separation should be maintained between participants at all times.
- **Dining Program** - Until further notice, the Center should:
  - Configure seating to comply with social distancing guideline;
    - Disinfect each table and frequently touched surfaces before and after each meal or snack served, as well as at the end of each day;
    - Use only disposable plates and utensils except for participant-specific adaptable equipment.
    - Permit only employees and approved essential visitors in the kitchen;
    - Disinfect kitchen at least twice daily.
- **Recreational Activities** - Until further notice, the Center should:
  - Configure seating to comply with social distancing guideline;
  - Offer only limited face-to-face group interactions;
  - Discourage use of high-touch items (playing cards, ball toss, etc.)
  - Disinfect supplies and equipment immediately after use and at the end of each day;

### INFECTION CONTROL

- **Cleaning and Disinfecting** - Until further notice, the Center should
  - Clean and disinfect work area equipment and common areas at least daily, and at each shift change, if applicable;
  - Use Environmental Protection Agency (EPA) registered disinfectants to sanitize surfaces.
  - Devote attention to high touch areas, such as countertops, hall and stair railings, tools, door hardware, computers, etc.
  - Assess the environment to identify opportunities for reducing the number of high-touch surfaces.
  - Refer to the CDC's guidance, [Cleaning and Disinfecting Your Facility](#)
- **Environment** - The Center should (if achievable):
  - Designate one-way entrances and exits to foster social distancing compliance;
  - Designate an area for isolating any person who develops symptoms consistent with a COVID-19 infection or fever;
  - Space lockers to foster social distancing compliance;
  - Mark a 6-foot line in front of staff desks;
  - Observe social distancing and precaution guidelines for all in-person meetings;

- **Support Logistics:** The Center should ensure:
  - Handwashing stations are readily available and accessible without employees congregating in groups;
  - An ample supply of soap, hand sanitizer, and hand towels;
  - PPE distribution to participants, employees, and visitors;
  - Infection control and best practice posters are posted in highly visible areas;
- **For manufacturing and supply chain work:** The Center should:
  - Follow any additional [Healthy at Work](#) requirements for manufacturing, distribution, and supply chain businesses.
- **Additional assurances when services are provided away from the building, provider shall have:**
  - A plan to ensure all CDC and KDPH guidelines are followed in all community settings,
  - A plan to address proper sanitation in public restrooms,
  - A plan to address proper hygiene in public restrooms,
  - A plan for sanitizing provider vans between uses,
  - A plan for social distancing in vehicles,
  - Adherence to team decisions about types of activities participants choose to access during day training services, i.e. shopping, restaurants, bowling, galleries, libraries, etc.

## TRANSPORTATION

- **Center-Operated (or Contracted Service) Vehicle**
  - Non-Emergency Medical Transportation: Participants should access the vehicle in numbers and sequence that optimally foster social distancing compliance.
  - Health Checks Prior to Boarding: The Center should follow the same guidance for “Screening – ALL,” herein.
  - Frequently touched surfaces in each vehicle should be disinfected between trips with Environmental Protection Agency (EPA) registered disinfectants.
  - Recommended Resource: [CDC Guidelines for Disinfecting Transport Vehicles](#)
- **Private Vehicle**
  - Health Checks: The Center should follow the same guidance for “Screening – ALL,” herein, when the participant arrives at the Center.

## COMMUNICATION

Prior to opening, the Center should:

- Communicate in writing with each participant and his/her caregiver about the Center’s new policies, protocols and procedures regarding COVID-19;
  - Consider having the participant (or guardian) sign an acknowledgement form concerning:
    - receipt of this communication and agreement to abide by the new policies and procedures described; and

- acceptance of the risks associated with entering the Center, such as:
 

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  - Communicate in writing with each employee about the Center’s new policies, protocols and procedures regarding COVID-19;
    - The CDC has developed several [free posters](#) in a variety of languages

## RE-OPENING PLAN

The Center should develop in advance a plan for resuming on-site services that addresses each of the issues presented in this guideline memo.

- Technical Assistance for building the plan is available from the following Departments:
  - **SCL and MPW waivers – DBHDID, Division of Developmental and Intellectual Disabilities, contact your assigned Quality Administrator**
  - **HCB and ABI – Department for Medicaid Services [1915c Waiver Email](#) or call the 1915(c) Waiver Help Desk at (844) 784-5614.**
- Additional Resources:
  - OSHA Guidance on [Preparing Workplaces for COVID-19](#)
  - CDC [General COVID-19 Resources for Businesses and Employers](#)
  - CDC [Risk-Assessment Guidance](#)
  - KY [COVID-19 Updates](#)
  - Re-Opening Plan Sample Checklist: Attached to this Guidance Memo



Eric Friedlander  
Secretary



Adam Mather  
Inspector General



Victoria L. Elridge  
DAIL Commissioner



Lisa Lee  
Medicaid Commissioner

## **Attachments**

- A. Sample Re-Opening Provider Assurance Plan – Adult Day Training Services
- B. SCL COVID-19 Risk-Benefit Discussion Guide
- C. Team Acknowledgement Form – Adult Day Training Services

**A. SAMPLE RE-OPENING PROVIDER ASSURANCE PLAN**  
**ADULT DAY TRAINING SERVICES**

In order to ensure safety:

- divide service locations into smaller areas in order to serve smaller groups with limited contact with one another,
- all areas accommodate public health guidelines for social distancing,
- assign dedicated staff for each separate group in each space,
- limit visitors provider staff, and medical personnel,
- provide a designated isolation space for anyone who presents with symptoms during service delivery.

Ensure the Center:

- requires face coverings for all staff except when outdoors alone, with reasonable assurance that six (6) feet of separation is possible from others,
- have see-through masks for those needing to read lips,
- has the personal protective equipment (PPE) capacity and training to support compliance with recommended precautions,
- has easily accessible hand sanitizing stations throughout the building,
- follows team decisions regarding face coverings for each person no matter the provider or service payment type (consult the Risk/Benefit Discussion Guide),
- gives attention to minimizing touching of face and face coverings,
- has the resources and ability to provide daily symptom monitoring and documentation of personnel and participants upon arrival and before leaving,
- develop a system for documenting staff assignments and contacts throughout the day.
- reliably follows infection control personal care standards including handwashing before and after contact with persons served,
- plan to limit personal items brought into a location,
- plan to handle and store items brought to day training locations, i.e. backpacks
- plan to sanitize communication devices and other personal equipment brought to the location,
- plan to handle and store personal care items and changes of clothing brought to the location,
- requires personnel, who are helping a person with eating or other personal care activities, to use gloves and a face covering,
- has the resources to clean and sanitize the location and associated vehicles throughout the day and between shifts/events (EPA-registered disinfectants)
- has the resources to clean and sanitize restroom(s) after each use,
- has the resources to clean and sanitize all surfaces, including vending machines, doors, counter tops, table tops, chairs, handrails, sinks, elevators, materials used, computers, electronics, outdoor furniture, cabinets, refrigerators, other appliances, washers and dryers, etc.
- has the resources and ability to offer activities that will not require handling shared items, for example board games, books, balls, markers, art supplies, etc.
- plans activities that include limited food consumption (to avoid the need to remove masks),
- thorough hand washing must be done before and after the safe removal, storage, and replacing of masks;
- the minimum of six (6) feet of distance needs to be maintained while eating,
- surfaces need to be cleaned and disinfected before and after eating,
- plan for placing lunches and food brought from home in communal refrigerators,
- plan for use of communal microwave, refrigerator, etc.

- plan for washing hands between handling food packaging for different people,
- arrange for transportation if anyone presents with symptoms during service delivery and ensures that individuals are isolated from others while waiting for transportation,
- is willing and able to contact the local health department to determine the best next steps of service delivery if any personnel or participant tests positive for COVID-19,
- is willing to participate in all efforts related to contact tracing and any subsequent testing and quarantines,
- assesses and plans for how to administer medication safely, including avoiding aerosolizing procedures if possible, and having a private place for the use of inhalers and nebulizers

Ensure all people receiving in-person day training services:

- have had a conversation with their person-centered team to determine the appropriateness of resuming in-person services (Provider must receive confirmation of completed Team Acknowledgment Form before resuming services),
- have a desire to attend day training in-person,
- have the ability to decide the days and times they wish to receive in-person day training services,
- are willing and able to comply with health screenings before all transportation, upon arrival, and otherwise as needed,
- have discussed with their team regarding face coverings and whether one will be required for them, what type of face covering will be needed, i.e. mask, see through mask, or face shield.
- are willing and able to comply with face coverings, handwashing, and social distancing as required,
- have documentation of medical, functional, or practical reason for the exception if not willing,
- are willing and able to comply with decontamination practices when returning home by washing hands and changing clothing at a minimum,

Additional assurances when services are provided away from the building, provider shall have:

- plan to ensure all CDC and DPH guidelines are followed in all community settings
- plan to address proper sanitation in public restrooms,
- plan to address proper hygiene in public restrooms,
- plan for sanitizing provider vans between uses,
- plan for social distancing in vehicles,
- adherence to team decisions about types of activities participants participate in during day training services, i.e. shopping, restaurants, bowling, galleries, libraries, etc.

## B. Adult Day Training Centers COVID-19 Risk/Benefit Discussion Guide

Name of Person: \_\_\_\_\_

Situational Risks	Circle if Present
The person is able to follow the social distancing protocol with 6 feet of distance (1); with minimal prompting/assistance (2)	1    2
The person is able to use personal protective equipment (PPE) for extended periods of time (1); or with minimal prompting/assistance (2)	1    2
The person has Homemaker/Personal Care or other paid support personnel at home	1
The person requires physical prompting/assistance to complete ADLs, such as toileting, eating, or mobility (Requires close contact with staff)	2

**Total Number of Situational Risks above:** \_\_\_\_\_

Health Related Risks	Circle if Present
The person has diabetes	2
The person is severely obese (BMI of 40)	2
The person is older than 40 years old (1); 60 years old or older (2)	1    2
The person has known respiratory issues	2
The person has known cardiac disease, including hypertension	2
The person has immunocompromising conditions ( <i>ex: HIV, cancer, post-transplant, prednisone treatment, sickle cell, phalacemia, etc.</i> )	2
The person has a renal disease	2
The person has any other underlying health problems	1

**Total Number of Health Risks above:** \_\_\_\_\_

<b>Home Related Risks</b> <i>(Risks to others who live with the person: family, caregivers, roommates)</i>	<b>Circle if Present</b>
Lives with individuals with Diabetes	2
Lives with individuals with obesity	2
Lives with individuals older than 40 years old (1); 60 years old (2)	1    2
Lives with individuals with respiratory issues	2
Lives with individuals who have known cardiac disease (including hypertension)	2
Lives with individuals who have any immunocompromising conditions ( <i>ex: HIV, cancer, post-transplant, prednisone treatment, sickle cell anemia, thalassemia, etc.</i> )	2
Lives with individuals with renal disease	2
Lives with individuals with any other underlying health problems	2

**Total Number of Home Risks above:** \_\_\_\_\_

Sum of Situational Related Risks: \_\_\_\_\_

Sum of Health-Related Risks: \_\_\_\_\_

Sum of Home Related Risks: \_\_\_\_\_

Situational + Health + Home = **TOTAL RISK** \_\_\_\_\_

If Total Risk is **greater than 8:** **HIGH RISK** to return to Adult Day Services

If Total Risk is **between 3-7:** **MODERATE RISK** to return to Adult Day Services

If Total Risk is **less than 3:** **LOW RISK** to return to Adult Day Services

**Risk Level:** \_\_\_\_\_

Benefits to Person	Circle if Present
Socialization is important to the person (1); Lack of socialization has known serious risks to known health conditions. (2)	1    2
A sense of normalcy/routine is important to the person (1); lack of routine has known serious risks to know mental health conditions. (2)	1    2
Daily activity outside the home is likely to reduce the frequency of behavioral issues.	2
Income	2
Parent(s) are employed, and supervision is needed.	1
No other supervision is available	2
If not in a structured program, the person may wander in the community or engage in risky, non-social distancing activities.	3
Other Benefit:	1

**Total Number of Benefits above:** \_\_\_\_\_

- If Benefits are **5 or greater:** **HIGH BENEFIT** from returning to Adult Day Health Care
- If Benefits are **3-4:** **MODERATE BENEFIT** from returning to Adult Day Health Care
- If Benefits are **0-2:** **LOW BENEFIT** from returning to Adult Day Health Care Services

**Benefit Level:** \_\_\_\_\_

Other Considerations:

If any member of the participant’s person-centered team (including all providers: day training, transportation, and residential) and the participant’s team disagree about a return to in-person day training services, recommend not returning to in-person day training services at this time and reassess at a later time (for example, in one week). The team should consider, any time in the process, alternative in-person day training services options for service delivery, including virtual or in-home services. Higher total scores indicate a greater risk of poor health outcomes from COVID-19 infection. There is not a specifically designated score that qualifies or excludes a person. The score here is to gain data for planning purposes. Please consult with the person’s primary health care providers for specific health care considerations related to person-centered planning. Discuss with a health care professional to determine if there any potential mitigation of risks if a person has had COVID-19 and recovered.

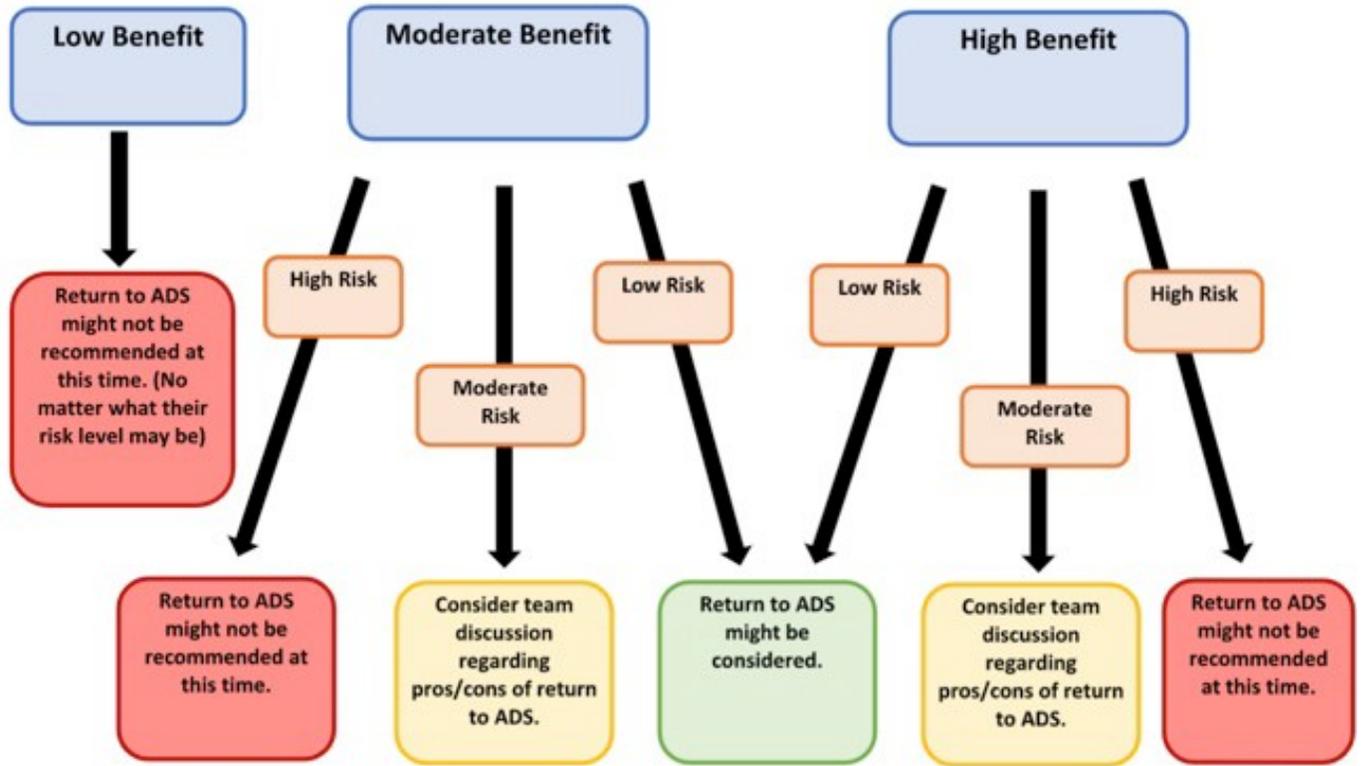
Note: This is not a validated tool. The total score may be reported to facility/agency personnel for the estimation of stratified patient risk.

Completed By (*Typed Name*): \_\_\_\_\_ Date: \_\_\_\_\_

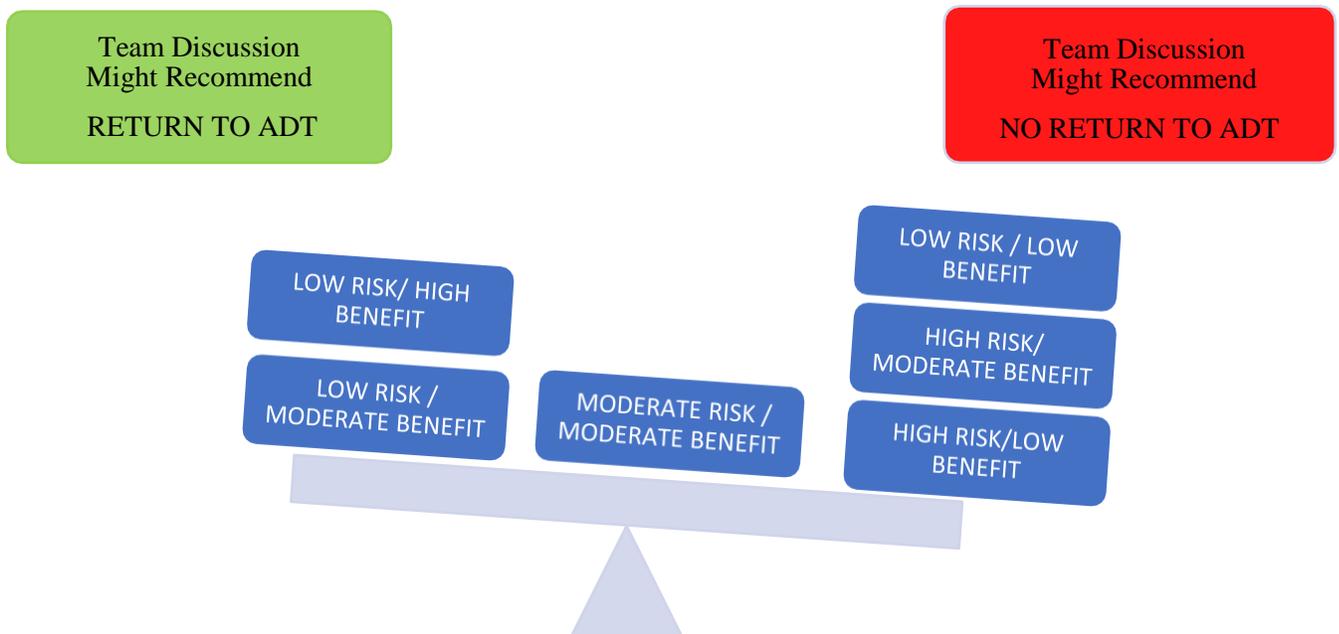
Signature: \_\_\_\_\_

\*\*\* This tool is adapted from the Ohio Department for Developmental Disabilities.

**Interpretation of RISK/BENEFIT Levels:**



**Another way to look at it:**



## C. TEAM ACKNOWLEDGEMENT FORM

### Instructions

At the time the Case Manager (CM) receives a request from the person, parent, guardian, or provider that someone would like to begin Adult Day Training (ADT) or Day Training (DT), the CM is encouraged to reach out to the day services provider to request a copy of their COVID-19 Provider Assurance Plan to discuss with the team.

The CM shall discuss with the person's team, the Risk/benefit discussion guide, risks and benefits of resuming in-person day training services and outline the plan for resuming services, if the person is a good candidate to attend.

Once completed and signed, the CM should send this form to the Day services provider.

### Acknowledgment

Using a team process and review of your COVID-19 assurance plan and discussion of risks vs. benefits of resuming in-person day services, the team has agreed that\_(person's name):

- has been provided information related to coronavirus (COVID-19), including what to expect, potential risks, what's expected of him/her, and other applicable information that allows him/her to make an informed decision to resume in person Day Training services;
- has discussed with the team regarding his/her important to/unimportant for information and how these may look different in the current service environment.
- has a desire to attend scheduled services.
- is willing and able to comply with health screening before all transportation, upon arrival, before leaving, and otherwise as needed.
- has discussed with the team regarding face coverings and whether one will be required for him/her.
- is willing and able to comply with masking, handwashing, social distancing, and all other CDC guidelines;
- or, if not willing, was provided documentation of medical, functional, or practical reason for the exception.
- is willing and able to comply with decontamination practices when returning home by washing hands and changing clothing at a minimum.

### OR

- has tested positive for COVID-19 and has met the criteria for Discontinuing Transmission Based Precautions.

**Additional person-centered information** (examples: any considerations for safety, or individual limitations)

Day Program Provider Agency

Name: \_\_\_\_\_

\_\_\_\_\_

Setting this form is relevant to:

\_\_\_\_\_

\_\_\_\_\_

Transportation Provider: \_\_\_\_\_

County or counties this form is relevant to:

\_\_\_\_\_

Contact Information for the CM (Name/phone number/email address):

\_\_\_\_\_

Acknowledgment of and attestation to the above statements (written, verbal, or electronic):

\_\_\_\_\_  
Person and/or Guardian Printed Name

\_\_\_\_\_  
Person and/or Guardian Signature/Date

\_\_\_\_\_  
CM Printed Name

\_\_\_\_\_  
CM Signature/Date