



## **Conditions of Contact**

We need to establish how a 1:1 (face to face) service need is determined. Any support for FTF daily activities must be for absolutely necessary activity for life sustaining/indispensable needs

1. Rationale for consumer 1:1 contact by non-residential staff. What reasons are needed this.
  - a. Consumer is experiencing a high level of fear or anxiety and staff/supervisor consult supports making an outreach contact. Attempts should be made to talk with consumer by phone, make a telehealth outreach—using agency outreach equipment as needed, and only when these options are not considered useful should there be any face to face outreach.
2. For any consumer contact staff should be use the wellness check in process before making any face to face contact. (see attached)
3. Staff meeting consumers face to face or entering into a consumer living space.
  - a. In general, this should not be an option and all staff need supervisory permission to do provide 1:1 service or go into living space. Entering into a space should be considered only as a last resort. Staff should meet consumers at curbside or, if necessary, at the front door of consumer home.
  - b. Establish what precautions will be needed for them if they were to do so. Across the board staff should have access to a mask to do this type of outreach, as well as gloves, and contact should be very brief—15 minutes or less.
  - c. For consumers experiencing medical concerns usual protocol would be to contact supervisor, agency nurse, or primary care provider. In an emergency staff should contact EMT or Copley Hospital as needed
  - d. If a consumer is in emotional or psychiatric crisis as supervisor, program emergency staff or the MCT should be called for support and consult. Staff should observe absolute social distance—six feet or more.
4. When staff transport a consumer the following should be observed.
  - a. Only for medical appointments or urgent care as agreed to with supervisor. If staff do transport assume consumer in back passenger seat—social distance to the max. Wear a mask and ask client to do the same. Interior of vehicle should be wiped down with sanitizing solution at the end of the trip (including seat belt, door handles inside and out, seat and window). Thorough hand washing before and after transporting and ask client to do the same.

- b. Only those clients who are receiving medication oversight by the CPS team and with no greater frequency than one time per week. Consumer will be transported in the back seat. Wear a mask and ask the client to do the same. Interior of car should be wiped down with sanitizing solution at the end of the trip. Thorough hand washing before and after transporting and ask the client to do the same.
  - c. Shopping or other procurement should occur by consumer giving staff a list and staff obtaining items with consumer funds.
  - d. Items purchase should be given by consumer meeting staff curbside, or by staff leaving items at the front door of consumer home.
  - e. There should be no use of transport to "go for a ride"
5. Do staff attempt to help consumers with daily activities.
- a. First question should be can the help be provided by phone or other source if so then only telephonic or video should be used.
  - b. Any support for FTF daily activities must be for absolutely necessary activity for life sustaining/indispensable needs.