

## BEST PRACTICES FOR RE-OPENING AND THE PROVISION OF IN-PERSON CLIENT SERVICES

This document contains *best practices* designed to assist AIDS Institute-funded contractors in resuming office, mobile (van), and field-based services. Unless otherwise noted, these are best practices that have been submitted by AIDS Institute-funded contractors and other health care providers.

We encourage providers to consult with their agency's governance and legal counsel and adopt practices as applicable.

In addition, please see the following link for New York State Department of Health (NYSDOH)-issued [interim guidance for office-based work](#) during COVID-19. This guidance may apply to your agency. While some of the concepts are similar, the AIDS Institute best practices are intended to supplement the general NYSDOH guidance.

Follow the recommendations that apply to your geographic location's phase of reopening in accordance with the [Reopening New York website](#). [Phases](#) may change if a region has reopened and there is an increase or spike in COVID-19 cases. Having progressed to an advanced phase does not guarantee that the area will remain in that phase or progress automatically to the next phase.

This document does not address every potential scenario AIDS Institute-funded contractors may encounter during the course of service delivery. ***Contractors with questions about service delivery specific to their agency or workplan deliverables should contact their NYSDOH AIDS Institute contract manager.*** Since public health guidance is evolving daily, contractors are strongly encouraged to monitor [NYS DOH](#) and [Centers for Disease Prevention and Control \(CDC\) guidance](#) on a regular basis:

As a pre-requisite for returning to the office and/or to return to in-person service delivery, agencies should develop internal controls and mandatory safety training, and require staff to complete and sign off on the completion of training.

## BEST PRACTICES FOR RE-OPENING AND THE PROVISION OF IN-PERSON CLIENT SERVICES

### Reopening Safety Planning and Practices

- Communicate and enforce the requirement that staff and clients who have [COVID-19 related symptoms](#) stay home.
- Provide services virtually whenever possible and appropriate (e.g., phone, FaceTime, Zoom, etc.).
- Develop a plan for how to respond when a client or staff presents or reports symptoms of COVID-19, and/or tests positive for COVID-19.
- Reconfigure cubicles and other common spaces so that staff are at least 6 feet apart in all directions.
- Adjust work hours and client services to reduce density (e.g., alternate workdays or weeks, adjust schedules). Allow staff to continue to work remotely based on job function.
- Install plexiglass and other barriers as appropriate in common areas and where services are provided (e.g., near reception desks, in intake rooms, in counseling and testing rooms, on mobile vans, etc.). The plexiglass can be adapted with flaps, Velcro, or via other means to be able to conduct services.
- All staff should have a computer and workstation assigned to them. Computers and workstations should not be shared. If they must be shared, staff should rotate on a daily or preferably weekly schedule so [cleaning](#) can be done when different staff use the equipment.
- Waiting rooms and drop-in spaces should be redesigned to permit social distancing. Extra furniture should be removed so that clients are seated at least six feet apart.
- Develop protocols for use and cleaning of office equipment and supplies.
- Clean supplies and supply areas more frequently. Shared surfaces, equipment, and gear should be [cleaned, disinfected](#), and dried before and after use.
- Provide personal protective equipment (PPE) to staff/clients. Anticipate needs to maintain an adequate supply in stock.
- Require clients and staff to wear masks and other PPE as appropriate for the service being delivered. For most non-clinical services, cloth and/or surgical masks are adequate.
- Prominently display [signs](#) showing how COVID-19 is transmitted and how staff and clients can reduce transmission risk in offices and common areas. Mark 6 feet distance circles around workstations in offices and other common stationary work areas.
- Develop protocols for screening clients and staff prior to service delivery, including temperature checks and COVID-19 symptom screening. Consider requesting contact numbers/information for anyone who enters the space to facilitate future contact tracing efforts should someone later report being diagnosed with COVID-19.

## BEST PRACTICES FOR RE-OPENING AND THE PROVISION OF IN-PERSON CLIENT SERVICES

- Share prevention methods and resources with all clients.
- Whenever possible for personal safety and according to fire safety regulations, doors should be propped open to avoid having multiple people touching the doorknob. Weather permitting, windows should be open to allow air flow and ventilation.
- [Proper ventilation](#) in enclosed spaces may reduce the potential of [airborne transmission](#) of COVID-19.
- If possible, provide client services outdoors.

### Agency protocol for meeting staff and clients at the entrance of the facility

- Designate a person to screen staff or clients upon entry to the facility.
  - Staff and clients should be asked if they have taken their temperature that morning and what it was; or take the person's temperature with a digital device.
  - Staff and clients should be asked if, (1) they currently have tested positive for COVID-19 through a diagnostic test in the past 14 days; (2) are experiencing or have experienced any COVID-19 symptoms<sup>1</sup> in the past 14 days; (3) they have had any known close contact<sup>2</sup> with a person confirmed or suspected to have COVID-19 in the past 14 days; (4) traveled within [any state](#) where there is significant community spread of COVID-19 for longer than 24 hours within the past 14 days.
    - If they answer yes to any of the questions, or if they have a temperature  $\geq 100$  degrees (Fahrenheit), they should be denied entry and directed to a NYS or NYCDOHMH COVID testing site and their primary care provider.
    - If they answer no to all questions and their temperature is below  $\leq 100$  degrees (Fahrenheit), they should be permitted entry.
    - All responses should be recorded in a log in a "pass/fail" or "cleared/not cleared" format. Contact information for each client should be elicited at the time of entry for purposes of contact tracing if needed.
- Anyone who passes the screening should always be told to wear a mask. They should be given a mask if they do not have one. This is especially important when staff are meeting in-person with clients.
- Anyone who enters the facility should be instructed to immediately wash their hands or use hand sanitizer.

---

<sup>1</sup> Such as (new or worsening) cough, shortness of breath, troubled breathing, fever, chills, muscle pain, headache, sore throat, new loss of taste, new loss of smell.

<sup>2</sup> Close contact does not include individuals who work in a healthcare setting wearing appropriate, required personal protective equipment.

## BEST PRACTICES FOR RE-OPENING AND THE PROVISION OF IN-PERSON CLIENT SERVICES

### Client entry after screening

Decisions on when and how to resume office, mobile (van), and field work is ultimately an agency decision based on protocols that are in place. Prevention precautions and field safety build upon personal and workplace best practices.

- If waiting for testing, an in-person meeting or counseling session, for a SEP transaction, etc., clients must stay in the designated waiting area for their appointment. Limit the number of clients allowed in waiting areas. Consider having clients wait outside for appointments/services and call them in when you are ready to provide services. Seats should be spaced so they are 6 ft. apart. They should be wiped down at a minimum every morning before opening, midday, and after all clients leave after the close of business, ideally after each client leaves the waiting area for services.
- Clients should be greeted verbally. They should be given assurances that the agency still cares about them and has implemented new procedures for their well-being, and that of other clients and staff. No hand shaking, hugging, kissing, fist-bumping or touching should occur. If there is accidental touching, both parties should either wash their hands or use hand sanitizer.

### In-person meetings or counseling sessions

- All offices being used for in-person meetings or counseling sessions should be large enough to allow staff and clients to remain at least 6 ft. apart.
- A plexiglass partition may be erected between the staff and client with a Velcro flap if objects need to be handed between the staff and client. Any shared objects (e.g., pens) should be wiped down after use.
- For HIV/STI and HCV counseling and testing, staff should follow all current HIV/STI and HCV screening policies and procedures. Consider providing client information and counseling virtually, prior to appointments. If providing counseling and information face-to-face, maintain physical distancing (at least 6 feet) for as much of the testing session as possible. Consider alternatives, for example, providing HIV self-test kits (HIV home tests), having the client self-collect an oral specimen, have specimen collection performed through a partition, etc.
- Appropriate face covering and eye protection/face shields are encouraged during specimen collection; gowns and N-95 masks are not required if clients are asymptomatic for COVID-19.
- Latex gloves should be changed after every client encounter that involves touch (e.g., to conduct a test, to do an opioid overdose reversal).
- If possible, referrals, linkages, and follow-up appointments should be done by telephone to limit the number of interactions clients have while in the facility.
- After service delivery, clients should be discouraged from lingering unnecessarily. Clients may be escorted to the exit and encouraged to leave promptly.

## BEST PRACTICES FOR RE-OPENING AND THE PROVISION OF IN-PERSON CLIENT SERVICES

- After each client leaves, the chair and any adjacent surfaces should be sanitized before the next client is permitted to enter the office.
- When staff leave an office to use the restroom, go to lunch, or take a break, proper techniques for removal of PPE need to be followed. Changing of PPE should adhere to the agency, NYSDOH, or CDC guidelines for use while considering the stock of items that may be available or what may be in short supply.

### Home/Field visits

- To reduce density, request that clients ensure other household members are not present in the meeting space during the home visit.
- Ask the client to open windows/doors as much as possible to improve ventilation and air quality.
- Weather permitting, consider meeting outside in a space that promotes confidentiality and safety from COVID-19 transmission.
- Encourage staff not to bring personal belongings to home/field visits other than what is essential for service delivery. Avoid touching and placing belongings on surfaces.
- When preparing or scheduling home visits/field visits or before entering the premises, staff should screen clients and anyone in the household/immediate contact for the following:
  1. Travel to a country for which the CDC has issued a [Level 2 or 3 travel designation](#) within the last 14 days;
  2. Travel to a state that is on the [New York State travel advisory list](#);
  3. Contact with any [Persons Under Investigation \(PUIs\) for COVID-19](#) within the last 14 days, OR with anyone with known COVID-19; and
  4. Symptoms of a respiratory infection (e.g., cough, sore throat, fever, or shortness of breath).
    - If a client answers yes to any of these, staff should discuss next steps with their supervisor.

### Mobile Van Services

- Consider meeting clients outside the van; use an awning or tent outside of the vehicle.
- Ensure van is equipped with appropriate cleaning supplies and surfaces are cleaned on a regular basis.
- Whenever possible provide services through a window of the van (similar to an ice cream truck).
- If it is essential that clients enter the van, only allow one client in the van at a time.

### Appointment Accompaniment

- Have staff meet the client at the appointment instead of providing transportation. Provide a method of transportation for the client to get to the appointment (Uber, Lyft, MTA card,

## BEST PRACTICES FOR RE-OPENING AND THE PROVISION OF IN-PERSON CLIENT SERVICES

bus fare, etc.). Alternately, meet the client at their home/residence and provide an Uber/Lyft or taxi ride and follow the client to the appointment. If it is essential to transport the client, have the client sit in the back seat and open windows.

### Street Outreach

- Shorten message delivery to reduce the amount of face-to-face-contact with clients.
- Consider not distributing literature or brochures.
- Staff should wash hands and/or use hand sanitizer frequently (refer to Personal Safety best practices above).

### Resources

General Information and updates about Novel Coronavirus (COVID-19) can be found at the following links:

<https://www.health.ny.gov/diseases/communicable/coronavirus/>

<https://forward.ny.gov/>

<https://www.cdc.gov/coronavirus/2019-ncov/>

<https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/index.html>

<https://www.cdc.gov/coronavirus/2019-ncov/community/resuming-business-toolkit.html>

<https://www.osha.gov/Publications/OSHA3990.pdf>

New York State Department of Health Novel Coronavirus (COVID-19) Hotline: 1-888-364-3065.

## BEST PRACTICES FOR RE-OPENING AND THE PROVISION OF IN-PERSON CLIENT SERVICES

### How to Prevent the Spread

Taken from <https://forward.ny.gov/protect-yourself-and-your-family-coronavirus-covid-19>

While there is currently no vaccine to prevent this virus, these simple steps can help stop the spread of this and other respiratory viruses:

- Wash your hands often with soap and water for at least 20 seconds, especially before you eat.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Avoid close contact with people; do not shake hands.
- Keep a distance of at least 6 feet from others.
- Wear a face mask or cloth face covering that covers your nose and mouth when in public and/or when 6 feet of social distancing cannot be maintained.
- Cover your cough and sneezes with a tissue and discard it in a closed container.
- Clean frequently touched surfaces and objects.

For people who are sick:

- Stay home.
- If you have a fever, stay home for at least 24 hours after your fever is gone without the use of fever-reducing medicines, such as acetaminophen.
- Keep sick household members away from others. If you have a separate room, that is best.
- Use soap and water, a bleach and water solution, or EPA-approved household products. You can make your own cleanser with a mixture of 1 cup of liquid unscented chlorine bleach in 5 gallons of water.
- Avoid sharing personal items.
- Anyone at high risk for complications should talk to their healthcare provider for more information.

### **Important Information About How COVID-19 Spreads**

*Taken from New York State Department of Health Home and Community-Based Services Regarding COVID-19 Update, June 18, 2020*

- The virus is thought to spread mainly from person to person.
  - Between people who are in close contact with one another (within 6 feet).
  - Through respiratory droplets produced when an infected person coughs or sneezes.
  - Respiratory droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.
- It may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes. However, this is not thought to be the main way the virus spreads.
- People are thought to be most contagious when they are most symptomatic.

Spread of the virus is possible 48 hours before people show symptoms; some individuals with COVID-19 may not show any symptoms.