

Best Practices for Re-Opening Rape Crisis Centers



PCAR's priority with these suggestions is the well-being of our center staffs and community members. These steps are intended to reflect the best interests and greatest safeness of survivors of sexual harassment, abuse, and assault, and of center staff. Not only do these measures help to protect ourselves, they are also the best recommendations at this time to prevent transmitting the virus to or exposing the people around us, particularly those we serve and who are in our care.

All of our communities will continue to be at risk to COVID-19 until there is reliable testing, effective treatment, and a vaccine or cure. Our ongoing routines should include continued precaution practices, such as physical distancing, protective devices, and prevention hygiene, as the commonwealth and government encourage returning to social commerce.

It is important that we understand and help others under our influence to understand the medical science and data-driven support for commonwealth and CDC recommendations.

How the virus is spread: <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/index.html>

Process to reopen Pennsylvania: <https://www.governor.pa.gov/process-to-reopen-pennsylvania/>

Some CDC and Commonwealth recommendations may exacerbate the anxiety and stress of survivors and clients because the effects of trauma are individual and unfixed. In these cases working with the client to provide alternative and innovative services, including telecounseling or other resources, will be necessary to ensure that the clients' needs are met in the safest way for all concerned.

Balancing the provision of necessary services to survivors with routine precaution and innovation must continue in order to protect the health of survivors, staff, and communities. The following material outlines a number of considerations to include in plans to reopen your center.

This information and any additional procedures must be discussed thoroughly with all staff, clients, residents, necessary contractors, and other relevant community members, and provided in all needed languages.

See the Appendix at the end of this resource for example surveys, communications, and other helpful materials related to staff returning to work.

Staff Accountability & Care

- Ask staff to speak directly and immediately to noncompliant co-workers and remind them to follow required practices.
- Ask staff to speak to supervisors if they are uniquely susceptible to the impact of exposure.
- Ask staff to speak to supervisors if staying away from/coming into the office creates a unique hardship or strain.

Main Office Access

- Staff may be asked to continue working from home.
- Clients may be offered telecounseling and other virtual services options, even as office activity resumes.
- In-office staff may be asked to work an alternating time schedule.
- Building use may be restricted to staff, clients/visitors, and necessary contractors; entry may be contingent upon wearing a mask.
- Meeting with clients/visitors/necessary contractors may be scheduled so as to avoid entry and exit congestion.
- Building use may be restricted to certain rooms to reduce cleaning time and resources.
- Deliveries may be dropped outside and, after being retrieved and brought inside, left unopened for 24 hours.
- A single restroom may be designated for clients/visitors.
- Staff and clients may be asked to answer a health screening questionnaire for COVID-19 exposure and infection before access to shared building space, though not for access to services.
- Ask staff who are *100+F to stay home until the fever is gone for *24 hours (*this is information may change rapidly; current CDC recommendations can be found here, <https://www.cdc.gov/flu/business/stay-home-when-sick.htm>)

Personal Behavior

Maintain physical distance

- Maintain six feet physical distance from other people.
- Use telephones and email for meetings and correspondence as much as possible.

Mask usage

<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html>

- Wear a mask at all times (unless working alone inside your own office).
- Remove/handle the mask only by the ear loops or ties.
- Wash your hands immediately after removing a mask.
- You may need to change your mask several times during the workday.
- Wash every mask after any single use.
- This link provides recommendations from the CDC on care of reusable cloth masks. <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/how-to-wash-cloth-face-coverings.html>

Hand washing

- Wash hands upon entering the building.
- Wash hands after interacting with a client/visitor.
- Wash hands after touching high-traffic surfaces.

- *Use soap and the warmest tolerable water for 20 seconds, or hand sanitizer containing *60% ethanol or 70% isopropanol (*this information may change rapidly; current CDC recommendations can be found here, <https://www.cdc.gov/coronavirus/2019-ncov/hcp/hand-hygiene.html>).

Touching things

- Consider whether you need to touch a surface or material at all.
- Wipe the surface before and after touching it.
- Wash hands after touching high-traffic surfaces.
- Don't use other people's phones, other equipment, or supplies.
- Disinfect your own living/workspace at the end of each day. <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/disinfecting-your-home.html>

Stay home if you're sick.

<https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html>

Shared Rooms & Shared Items

https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cleaning-disinfection.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fprepare%2Fcleaning-disinfection.html

- Trash cans should be lidless or touchless only and should be emptied early and often.

Restroom usage

- Sanitize high-traffic surfaces after use (flush handle/faucet handle/door handle).

Meeting rooms

- Meet virtually if possible; if not, limit to necessary participants.
- Cap meeting room capacity based on the size of each room, not to exceed 10 people.
- Cap office rooms at no more than two people in an office.
- Maintain six feet physical distance in all directions, and don't face each other when at tables.
- Sanitize meeting room before and after use. <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/disinfecting-your-home.html>
- Sanitize door handles on exit.

Break room & kitchen usage

- Staff at the office may be asked to use the break room/kitchen on a rotating schedule. (Different procedures may be needed for shared shelter spaces.)
- All hand towels may be removed and only disposable towels be used.
- Maintain six feet physical distance in all directions, and don't face each other when at tables.
- Wipe down the water cooler before and after each use, or wash hands before and after using the water cooler each time.
- Wipe down the coffee maker and supplies after each use, or wash hands before and after using the coffee maker each time.
- Do not use disinfectants on items used by children, especially those items children may put in their mouths.

Food (Different procedures may be needed for shared shelter spaces.)

- Staff may be asked to carry in and carry out all food each day; no storage of food at the office.
 - If food must be stored in shared office space,
 - Sanitize all containers; or
 - Sanitize food and place into clear zip-log bags, and
 - Write a name and date on the bag (not with a common marker)
- Staff should bring only food from home into the office. Food from carryout- or curbside-only restaurants may be considered.
- Staff may be asked to carry in and carry out all dishes and flatware each day; no storage of dishes or flatware at the office.
 - If dishes and flatware are washed on-site,
 - Wash all dishware and silverware in the dishwasher, and
 - Add a teaspoon (tsp) of bleach to the dishwasher.

Travel

<https://www.cdc.gov/coronavirus/2019-ncov/travelers/travel-in-the-us.html>

- Eliminate unnecessary travel.
- Necessary travel will be determined on a case-by-case basis.
- Travel on public transportation and hotel stays increase chances of getting and spreading the virus.
- Practice physical distancing, wearing masks, hand washing and other hygiene during necessary travel. Staff may be asked to isolate upon return.

Confirmed & Probable Exposure

<https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine-isolation.html>

- Conduct temperature screenings (*100°F threshold). (*this is information may change rapidly; current CDC recommendations can be found here, <https://www.cdc.gov/flu/business/stay-home-when-sick.htm>)
- Sick employees must follow CDC guidelines. (Current CDC guidelines can be found here, <https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html>)
- Prompt identification and isolation of potentially infectious individuals is a critical first step in protecting workers, visitors, and others at the work site.
 - Wherever feasible, immediately isolate individuals suspected of having COVID-19. For example, move potentially infectious individuals to isolation rooms.
 - Take steps to limit the spread of the individual's infectious respiratory secretions, including by providing them a facemask and asking them to wear it, if they can tolerate doing so.
 - Isolated individuals should leave the work site as soon as possible. Depending on the severity of the isolated individual's illness, they might be able to return home or seek medical care on their own, but some individuals may need emergency medical services.
- Identify and notify anyone in close contact with that individual (within 6 feet for 10 minutes).
- Close off and ventilate areas visited by that individual.
- Wait 24 hours if possible, then clean and disinfect all spaces.

Disinfecting & Sanitizing

- Establish a Cleaning/Disinfecting Plan: https://www.cdc.gov/coronavirus/2019-ncov/community/pdf/ReOpening_America_Cleaning_Disinfection_Decision_Tool.pdf
- Evaluate the Area
 - Frequently-touched surfaces should be disinfected as well as cleaned.
 - Most surfaces just need routine cleaning with soap and water.
 - Consider what items can be re/moved, what doors and windows left open to reduce frequent contact.
 - Consider what windows can be left open for ventilation.
 - Soft, porous materials are harder to clean/disinfect and should be cleaned or laundered per label directions on the warmest appropriate setting.
 - Remove soft, porous items (rugs, seating) to reduce cleaning challenges.
- CDC instructions for cleaning/disinfection of non-healthcare facilities: <https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html>
- To disinfect surfaces, use EPA-approved disinfectants (<https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2>) or alternates (1/3 cup bleach in a gallon of water; 70% alcohol solutions).
- Do not use disinfectants on items used by children, especially those items children may put in their mouths.
- Disinfectants
 - Wear appropriate hand/eye gear for the product.
 - Store according to the label.
 - Don't mix bleach with other products (dangerous fumes).
 - Don't overuse/stockpile supplies.

Personal Protective Equipment (PPE)

<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/index.html>

- Don't touch the front of your mask; put them on and take them off by the ears only.
- After removing PPE, always wash hands with soap and water for at least 20 seconds, or clean hands with sanitizer.
- Launder PPE appropriately after each use
 - Try not to shake dirty laundry to minimize dispersing the virus.
 - Launder using the warmest appropriate water setting.
 - Dry items completely.
 - Wear disposable gloves when handling laundry from an ill person, discard after each use, and wash hands after discarding the gloves.
 - Dirty laundry from an ill person can be washed with other people's items.

Helpful Reading

Bromage, Erin. "The Risks - Know Them - Avoid Them."

<https://www.erinbromage.com/post/the-risks-know-them-avoid-them>

CDC Reopening Guidance

<https://www.cdc.gov/coronavirus/2019-ncov/community/reopen-guidance.html>

MCADSV Guidance Post-COVID 19

Occupational Safety and Health Administration, COVID-19

<https://www.osha.gov/SLTC/covid-19/controlprevention.html>

Responding to COVID-19 in Pennsylvania

<https://www.pa.gov/guides/responding-to-covid-19/>

Appendix

- Return to Office Staff Survey
- STTARS Return to Office Operations - Phase 1
- STTARS Return to Office Operations - Phase 2
- STTARS COVID Screening Tool
- Mask Encouragement Script
- STTARS Disinfecting Log
- Know the Symptoms Infographic
- Social Distancing Posters

Return to Office Staff Survey

Example provided by SPHS CARES Center STTARS Program

Hi,

I'm surveying all of our staff to get input on opinions and concerns so that we can formulate a plan to get us safely back to the office. Please answer the questions below the best that you can and be as honest and detailed as possible:

- What have been the positives of working from home? What have been the negatives?
- How do you feel about returning to work in the office setting? What would be the positives for you? What are your concerns?
- Do you have a mask(s) that you could wear or would you need to have these supplied for you?
- If we were to institute a split work week, with some office days and some at home days, what would be a preferred schedule?
- How do you feel about resuming attendance at presentations or interviews/court hearings if and when that is allowed?
- Do you have suggestions that you have about resuming in person services in a safe way?
- Do you have any factors that place you at higher risk for complications from COVID 19 and are you comfortable sharing what those are?
- Please list anything additional that you would like us to take into consideration

I want you to know that I'm going to be taking everyone's input into consideration when making a continued services plan and things will probably change over time depending on agency, state, and local government inputs and requirements. Everyone's requests won't be able to be accommodated completely, but I will try to ensure a balance between staff and client safety and continued provision of quality services. Please have responses back to me by the end of the week.

Return to Office Operations (Phase 1)

Example provided by SPHS CARES Center STTARS Program

- Everyone was given a schedule for June and the days that they will be working in the office. Staff has been split into teams and will be in the office on a rotational basis for the purpose of limiting exposure to other staff. Counseling staff has been grouped together by team so that any clients that will be returning to office services will be coming in on certain days of the week and again limiting staff exposure. On the days that staff works from home, they will still be expected to check in with supervisory staff at regular intervals as they have been and adhere to all of the procedures that were put in place for at home work in late March.
- Services will continue to be suspended at the satellite office in Charleroi at this time because of the need to further investigate social distancing procedures.
- We have a supply of disinfectant wipes, spray, and masks for use in both Washington and Waynesburg. Each staff has been given 2 cloth re-useable masks. The disposable masks can be worn if needed, but are also for any clients that may come in that don't have one as we are requesting that they be masked at all times while in the facility.

In Washington, since we will be working in teams, one teammate will be responsible for disinfecting once mid-morning, and one will be responsible to disinfect before closing. Schedules are left up to team members to decide. There is a schedule that will be hung on the bulletin board by the front desk. It is to be completed each day. Here is a list of things that must be cleaned each day:

1. Door knobs for both entrance doors
2. Light switches in main areas
3. Kitchen and bathroom (staff and client) door knobs, handles, sink, etc
4. Copier must be wiped down after each use
5. Each staff is responsible for cleaning their own workspace each day
6. It is important to let the supervisor know as soon as a supply item gets down to around half way. There are different wait times to obtain certain items and at first we won't know how much of each item we will go through, so we need to make sure we're ordering in time so that we don't run out of anything.

In the Waynesburg office, staff will be on established rotation with SPHS behavioral health staff at that facility and will pitch in where needed. The main requirement is to keep your STTARS office clean and disinfected.

- Social distancing is required between all staff and any clients who may be in the office. There is signage that stresses the 6 foot separation.
- All staff is requested to be masked at all times except when eating lunch. You may take your mask off if you are alone in your office with your door closed. Office doors should remain closed when possible.
- All staff is to do a self-temperature check before coming into work. This will be on the honor system. If you have a temperature or any symptoms of illness, you are not to come to work. You must be screened by your supervisor and SPHS Human Resources and it will be determined when return to work is appropriate. Anyone coming to work and exhibiting any signs of illness will be sent home immediately.

- Likewise, if any household member of a staff person is suspected of having or is confirmed positive for COVID 19, the staff person is to inform the Supervisor immediately and must be cleared by HR to return to work.
- **Counseling:** For the first week or so that we are back in the office we will continue to conduct telephone and doxy services with counseling clients. Clients will be encouraged to continue tele-counseling services for both staff and client safety. However, we will begin to identify which clients may be struggling with tele-health and be in need of in person services, and would be appropriate to bring back into the office safely. For clients who are identified to receive office services, here is how that will be handled:
 1. Offices or group rooms have been set up to encourage appropriate distancing. Extra chairs have been removed so that there will be no option but to sit at least the required 6 feet apart.
 2. Clients will be pre-screened by phone the day before their scheduled appointment using the COVID screening form. If a client answers yes to questions 1, 2, or 3, they will need to be encouraged to have a telephone or doxy service for their scheduled appointment. If the answer to number 4 is a yes, it will depend on the location of travel. The only locations that we are particularly concerned about are those with high infection rates. I doubt that any of our clients will be traveling to those areas so I'm not overly concerned. Documentation of the screening should be included in the file.
 3. Clients should remain in their car until the time of their appointment and will call in at the time of their arrival. They will then be rescreened at this time asking if there has been any change in their status. They will not be allowed to enter until the time of their appointment. There will be no lingering in the waiting room. No one other than the client will be allowed into the office. If the client is a child, one parent/ guardian will be allowed to remain in the waiting area. No other adults or children will be permitted to wait in the office. Clients who may utilize public transportation or walk to the office will be evaluated on a case by case basis regarding waiting procedures.
 4. Client will have a temperature check when they come into the office. We will have hands free thermometer that can be used by the counselor in Washington to complete this with the client's permission. Any client who exhibits a temperature of 100 or above should be rechecked for accuracy of reading. If the temperature is still 100 or above, they will be sent home and appointment will be rescheduled. Supervisor should be notified immediately. In Waynesburg, the front desk staff will complete temperature checks.
 5. Clients and parents/guardians should be masked at all times while in the building, unless there is a health condition that deems it unsafe to do so. Any client who comes in unmasked will be given a disposable mask to wear during the session. If they refuse, reasons should be discussed. Please utilize the suggested conversation starters on the SPS directive on how to address clients who are resistant to wearing masks or following other safety precautions.
 6. At the completion of the session. Any office and waiting room chairs, table, toys, writing utensils, etc. that were used in the course of service must be wiped down as well as door handles to entrance and office. Cleaning time should be worked into your schedule so that there is adequate time for this between clients.
 7. All clients identified for office services must be made fully aware of screening and office procedures before an office visit is scheduled to ensure that they understand and signal willingness to comply with requirements. This conversation should be documented in the call where it is discussed. Following safety procedures is important for our ability to provide consistent services and for staff to feel safe and comfortable. We want all staff to feel empowered to set clear boundaries with clients who may question these procedures.
- **Legal Advocacy:** The CAC is still seriously limiting outside agencies to their interviews and because of technical difficulties at the Washington site, doing most interviews at their other locations. We will continue to conduct follow up with CAC clients that are referred as we have been. Because of space limitations at

the locations where adult interviews are conducted, and various hearings or proceedings are held, we will decide on a case by case basis if an advocate will be in attendance, do phone advocacy, prep, follow up, or a combination of these things. We will continue to be in contact with the District Attorney's Office, law enforcement, and the crime victims' advocates to assist in determining what is the best course of action. For any legal proceeding that must be attended in person, the advocate will be permitted to return home after the proceeding has concluded and can work from home for the remainder of the day.

- **Medical Advocacy:** Our facilities have indicated that we should continue to offer tele-advocacy at this time, unless there is a situation that absolutely necessitates an advocate on-sight. If a victim declines tele-advocacy, the hospitals will be encouraged to continue utilizing the referral form that was sent to them so that we can follow up the next day. In the event that an on-sight medical advocacy occurs during the day, the advocate will be permitted to return home after the exam has concluded and can work from home for the remainder of the day.
- **Hotline:** Will continue as usual.
- **Prevention:** Selected prevention programs have been prioritized to be adapted to online delivery and this will continue to plan for the possibility that all of our prevention and outreach services will be virtual through the fall and beyond.
- **Volunteer Services:** We are attempting to solicit some interest in an online volunteer training. Fingers crossed!
- All staff will be assigned additional projects and online trainings by me with deadlines for completion.
- You may wear jeans to the office at this time as long as you are still office appropriate. Professional dress must be worn to any outside meeting, hearing, etc.

We are really proud of how all of you have adjusted to our current circumstances. We know that everyone has their own concerns and responsibilities at this time, but it is important that we remember that a lot of our clients really depend on us and we perform an essential service that needs to be consistent and supportive.

Things will continue to evolve into July and we will be touching base with you as a group and individually to assess how we will proceed as we need to integrate more into resuming community services.

Return to Office Operations (Phase 2)

Example provided by SPHS CARES Center STTARS Program

Based on new input from a variety of sources, here are some updates on how we are going to move forward with operations in the coming weeks:

- A schedule will be put together for July, with staff in the office more days/week. Please send a preferred schedule of days that would be best for you to be in the office based on the days of the week that you are most busy with clients, trainings, hearings, etc. Know that all requests will not be able to be honored.
- Staff will continue to be expected to share disinfecting duties and sign off on the log as was explained in Phase 1 instructions. Remember to let Supervisor know when we get down to half of any cleaning supply so that we can get a reorder request in.
- **Counselors:** If you haven't already done so, please contact each of your clients and discuss that we are gathering information of the option to return to the office for services. You need to explain all of the procedures for office appointments that was detailed in the Phase 1 email and document the discussion and acknowledgement and understanding of safety procedures by the client. During these initial conversations, do not schedule an office visit, just gather the information. You are welcome to utilize some of the tips outlined in the mask script that was sent out previously. Please complete this process by June 20.

Based on these client contacts, please make a list of your clients that indicates clients who:

1. Need (because of difficulty with telehealth) or want to return to office visits and who indicate willingness to follow safety precautions.
2. Those who would like to return to office visits but who are questioning the necessity of safety precautions or who you are concerned about returning to the office.
3. Those who would like to continue telehealth services.

It is my intention to permanently offer tele-counseling services to clients with transportation, childcare, or other obstacles, however in person services are preferable when possible and we will not deny in person counseling for those clients that are requesting it.

Please email your lists to supervisory staff by June 22, so we can work to address any concerns that you have with particular clients.

Pending review of the lists that you turn in, you should anticipate scheduling some in person sessions by the second week of July.

- **Legal Advocacy:** We are approving return to attendance at any legal proceeding at the courthouses beginning June 20. Supervisory staff have been at these sites and are comfortable with the screening and safety measures they have in place as well as the ability to social distance. For anyone who may cover advocacy at the Washington County Courthouse here is what you need to know:
 1. You must enter through the Family Court entrance on the side of the building. There is a type of barricade that is set up so you must walk one way for entrance and one way to exit. You will have to stop at a tent and be screened which includes a hands free temperature check and verbal screening. You will be given a sticker to put on that indicates you have been screened.

2. You will still need to go through security as usual.
3. There are stickers on the floors indicating direction of traffic flow and social distancing. Seating is also limited so that social distancing occurs.
4. Masks must be worn at all times.

CAC interviews have not resumed at the Washington site. We will continue to take victim interviews at the SVIPU and police stations, as well as magistrate hearings on a case by case basis depending on ability to social distance, and what the referral agency is requesting. For any on site legal advocacy that occurs, once the staff person attends the advocacy, they will be permitted to work from home for the remainder of the day. We will do tele-advocacy when necessary.

- **Medical Advocacy:** We will continue to offer tele-advocacy at this time, unless there is a situation that absolutely necessitates an advocate on-sight. If a victim declines tele-advocacy, the hospitals will be encouraged to continue utilizing the referral form that was sent to them so that we can follow up the next day. In the event that an on-sight medical advocacy occurs during the day, the advocate will be permitted to return home after the exam has concluded and can work from home for the remainder of the day.

Supervisor will be reaching out to the hospitals with some questions about their willingness to have us on-site and what precautions they have in place for us, should we opt to return to all in person advocacy at some point.

What questions do you have that you would like to be included?

We know that some staff have concerns about increased in person contacts and we understand those concerns. We are going to proceed cautiously with lots of precautions in place.

One thing to keep in mind is that our infection rate in Washington and Greene Counties has remained low. In Washington we have 149 confirmed cases. There are 206,000 people in Washington County. Even if actual cases were 10 times higher than reported due to lack of testing or medical care, that would still only be 1490 out of 206,000, so that has given some perspective.

For Greene, it's 27 cases in a county of 36,000 people, so again rates are low.

If we see an uptick in cases, we will reevaluate operations again.

COVID Screening Tool

Example provided by SPHS CARES Center STTARS Program

Have you experienced a **fever, cough, tiredness, trouble breathing, or loss of taste or smell** in the last week?

☐ Yes ☐ No

Recently, have you been around anyone who has exhibited the above symptoms or who has been diagnosed or suspected of having COVID-19?

☐ Yes ☐ No

Have you been in close contact with a crowd of people within the last month?

☐ Yes ☐ No

Have you travelled out of the country within the last month?

☐ Yes ☐ No

Mask Encouragement Script

Example provided by SPHS CARES Center STTARS Program

Tips for encouraging someone to wear a face covering:

Remember that sometimes it's not what you say, but how you say it:

Check your...

- Open body language (uncrossed, relaxed limbs), respectfully facing towards the person
- Bright facial cues (smile with your eyes)
- Voice volume (reducing volume is perceived as less threatening)
- Tone (kindness is a gift everyone can afford to give more of)
- Speech speed (talking slower helps to bring out a more relaxed response)

What do I actually say?

Try getting their attention in a positive way for starters.

- Genuine compliments can be flattering and can immediately set the conversation up for success.
- Ex: "I really like your... shirt! Where did you get it?"
- If a pleasant conversation follows, you already have an advantage! Roll with it.

Relate to the emotional experience.

- Ex: "It can be uncomfortable wearing a mask."

Communicate the expectation in a non-criticizing manner.

- Refrain from words like: You, We, Us, Must, Should, Have To, Let's
- Instead say: "Masks help keep this area safe."
 - or "Face coverings preserve health during times like these."
 - or "Mask wearing grants access to face-to-face support."
- Optional: Remind that bandanas, scarves, and clothing can be used as long as it covers the nose and mouth.

If the person still refuses to put on a face covering, politely ask

- "Would you mind waiting in the lobby/here while I get a Supervisor to work with you?"

****Note: Staff are instructed NOT to bring up medical conditions. In the event the individual brings up medical conditions, staff are advised NOT to question or explore any further.*

Disinfecting Log

Example provided by SPHS CARES Center STTARS Program

Date: _____

TIME	STAFF INITIALS
Morning:	
Afternoon:	

Date: _____

TIME	STAFF INITIALS
Morning:	
Afternoon:	

Date: _____

TIME	STAFF INITIALS
Morning:	
Afternoon:	

Date: _____

TIME	STAFF INITIALS
Morning:	
Afternoon:	

Date: _____

TIME	STAFF INITIALS
Morning:	
Afternoon:	

KNOW THE SYMPTOMS OF COVID-19



FEVER



COUGH



SHORTNESS OF BREATH

[spreads through close contact]

TAKE EVERYDAY PRECAUTIONS



WASH YOUR HANDS



DON'T TOUCH FACE



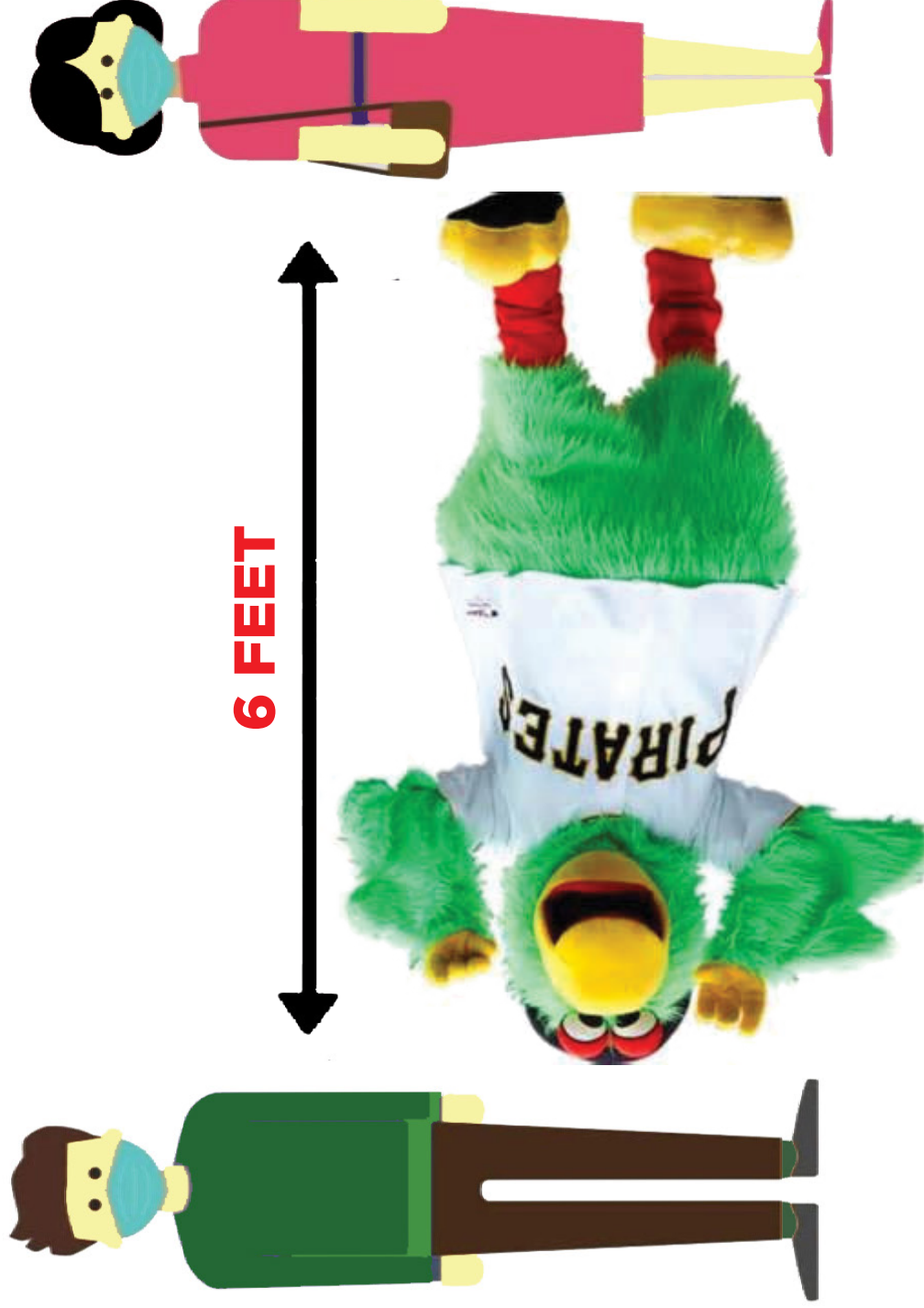
AVOID SICK PEOPLE

INFORMATION + UPDATES:
HEALTH.PA.GOV

 **pennsylvania**
DEPARTMENT OF HEALTH
Created 02/25/2020

**PLEASE DO YOUR PART,
STAY ONE PIRATES PARROT APART.**

Six feet to be exact.



**PLEASE DO YOUR PART,
STAY ONE ALLIGATOR APART.**

Six feet to be exact.

