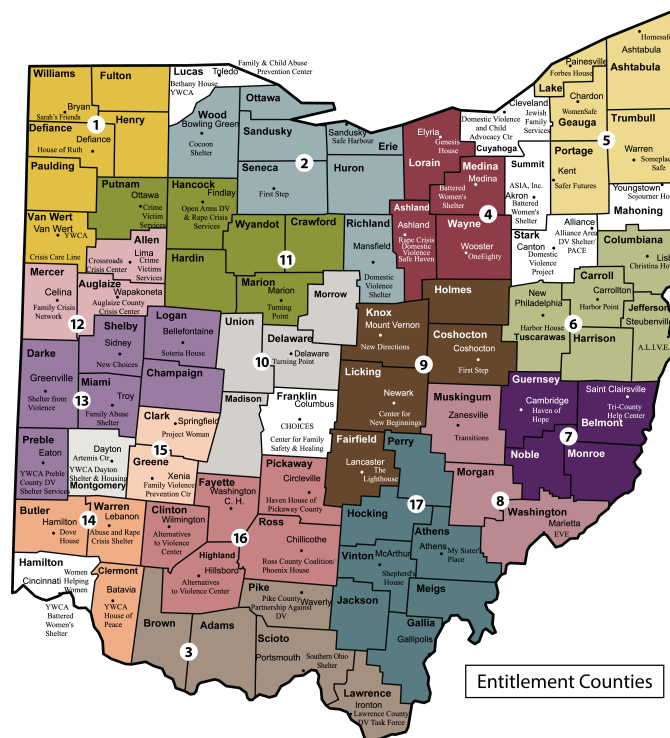


# COVID 19 TIP SHEETS

## UPDATED 2020/2021 Guidance for Ohio's Domestic Violence Programs

### OHIO DOMESTIC VIOLENCE NETWORK

December 1, 2020



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## Introduction

### Covid-19 Tip Sheets

A Resource for Ohio's Domestic Violence Shelter Programs

December 1, 2020

Updated COVID-19 prevention and response

Planning and response to COVID-19 transmission among people experiencing domestic violence requires a "whole community" approach. As the community of domestic violence shelter and service providers prepare for the upcoming colder months and anticipate an increase in cases of COVID-19, as well as influenza cases among those needing our services, ODVN offers programs the following updated set of Tip Sheets for the purpose of planning and preparedness.

This guidance is intended to facilitate planning and response to COVID-19 transmission for Ohio's domestic violence shelter programs. These Tip Sheets can be used together or individually and are meant to provide an easily accessed and utilized resource for busy residential program staff.

Our community of domestic violence advocates and service providers are challenged with the urgent need to provide shelter and services even—and especially—throughout the COVID-19 crisis, and has learned much in the past months about how to respond to this challenge while also attending to the needs of program staff and volunteers. We have learned that involving community partners in the development of our response planning is crucial so that everyone's roles and responsibilities are clear.

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Using a community-wide approach to prepare for COVID-19 among people experiencing domestic violence means connecting with key partners to make sure that you can all easily communicate with each other while preparing for and responding to cases. A community coalition focused on COVID-19 planning and response should include the following partners:

Local and state health department  
Allied victim services provider  
Homeless service providers and Continuum of Care leadership  
Coordinated Entry, if applicable  
Emergency management  
Law enforcement  
Healthcare providers  
Housing authorities  
Local government leadership  
Other support services like behavioral health



# TIP SHEET 1

## PHYSICAL DISTANCING, FACE COVERS, AND VENTILATION

- ☐ Practice the CDC's physical distancing recommendations by separating individuals or family units by at least 6 feet at all times.
- ☐ Post informational flyers to educate staff and clients about physical distancing and mask-wearing requirements.
- ☐ Use tape or chalk to mark 6-foot spaces (boxes or stripes on the floor) to encourage physical distancing in smoking areas, kitchens, lobbies, and other shared spaces.
- ☐ Use physical barriers to protect staff who interact with clients with unknown infection status (e.g., add extra tables or partitions between clients and check-in counters).
- ☐ Limit group meetings as much as possible or avoid them completely when physical distancing is impossible.
- ☐ If individual rooms are not available for people with COVID-19-like symptoms, consider using large, well-ventilated rooms and temporary barriers between beds.
- ☐ Consult with public health partners and follow CDC guidance to assess whether adaptations are necessary to improve airflow, air filtration, and ventilation systems within the facility.
- ☐ If ventilation improvements were previously made to reduce the potential transmission of Tuberculosis (TB)—such as the use of ultraviolet systems—consider whether these adaptations support the requirements for preventing COVID-19 transmission.



# TIP SHEET 2

## CLEANING AND DISINFECTION

- ☐ Create and maintain a cleaning schedule and frequently clean all high-touch surfaces such as doorknobs, handrails, bathroom fixtures (such as sink handles and toilets), countertops, workstations, phone stations, tables, chairs, and elevator buttons.
- ☐ Use products that specifically fight the virus.
- ☐ Frequently clean any partitions that were established to create barriers between people in the facility.
- ☐ Provide staff with disposable wipes so they can frequently wipe down commonly used surfaces.
- ☐ Clean bathrooms thoroughly each day (see next section).

# TIP SHEET 3

## BATHROOM PROTOCOLS

- ☐ Stock bathrooms with soap, disposable paper towels, and cleaning supplies; create a schedule for staff to stock essential bathroom supplies at regular intervals.
- ☐ Ensure that running water is available in all bathrooms and that toilets are in good working order.
- ☐ Clean and disinfect bathrooms at least once per day; leave cleaning supplies in the bathroom stalls and encourage clients to wipe down touchable surfaces after use.
- ☐ Limit the number of people allowed in the bathroom at any given time; instruct others to wait in a physically distanced line outside of the bathroom.
- ☐ If possible, designate separate bathrooms and showers for clients with suspected and confirmed cases of COVID-19.
- ☐ Give clients a clean bath towel upon entry to limit the sharing of potentially contaminated towels and wash towels once a week.
- ☐ Provide clients with appropriate sanitizer to clean touchable services in showers before and after use.
- ☐ Create a shower schedule to limit the number of people in the shower room at the same time.

# TIP SHEET 4

## SAFE SLEEP PROTOCOLS

- ☐ Separate individual's/family unit's beds/ mats by at least 6 feet.
- ☐ If 6 feet is not possible, maintain at least 3 feet between beds/mats and use a barrier, such as a screen or curtain, between beds/mats.
- ☐ Assign regular clients to a specific bed or mat.
- ☐ Label beds and mats "head" and "toe" in an alternating pattern.
- ☐ If beds are bunked, make sure the head-to-toe sleeping pattern is consistent across bunks
- ☐ Maintain records of client bed and room assignments to support contact tracing.
- ☐ Clean the sleeping areas and mats between each client.
- ☐ Provide new clients with clean sheets and bedding upon entry to the shelter.

# TIP SHEET 5

## MEAL MANAGEMENT

- ☐ Enable contactless meal distribution, if possible. For instance, picking up meals at entry or exit points, or leaving meals on beds in individual rooms.
- ☐ Consider plexiglass sneeze guards, to separate food servers and residents.
- ☐ Stagger mealtimes if using communal dining facility (e.g. create three dinner intervals thirty minutes apart and consider asking residents to sign up for mealtimes) and clean communal dining areas between meal intervals.
- ☐ Apply physical distancing techniques to assure that individuals sit at least 6 feet apart; remove chairs to limit seating at individual tables.
- ☐ Ensure face masks are worn by all during mealtimes. Allow removal only during actual eating/drinking.
- ☐ Set up outdoor eating areas (weather permitting) to encourage families to eat outside.
- ☐ Deliver meals to areas or rooms where clients with symptoms or confirmed infections reside; separate these individuals from communal dining rooms.
- ☐ Provide disposable disinfectant wipes, cleaners, or sprays so clients and staff can wipe down dining area surfaces before and after eating.
- ☐ Only use single serve condiments.
- ☐ Use disposable utensils and plates, etc.

# 6 Steps for Safe & Effective Disinfectant Use



## Step 1: Check that your product is EPA-approved

Find the EPA registration number on the product. Then, check to see if it is on EPA's list of approved disinfectants at: [epa.gov/listn](https://www.epa.gov/listn)



## Step 2: Read the directions

Follow the product's directions. Check "use sites" and "surface types" to see where you can use the product. Read the "precautionary statements."

## Step 3: Pre-clean the surface

Make sure to wash the surface with soap and water if the directions mention pre-cleaning or if the surface is visibly dirty.



## Step 4: Follow the contact time

You can find the contact time in the directions. The surface should remain wet the whole time to ensure the product is effective.

## Step 5: Wear gloves and wash your hands

For disposable gloves, discard them after each cleaning. For reusable gloves, dedicate a pair to disinfecting COVID-19. Wash your hands after removing the gloves.



## Step 6: Lock it up

Keep lids tightly closed and store out of reach of children.

[coronavirus.gov](https://www.coronavirus.gov)

# TIP SHEET 6

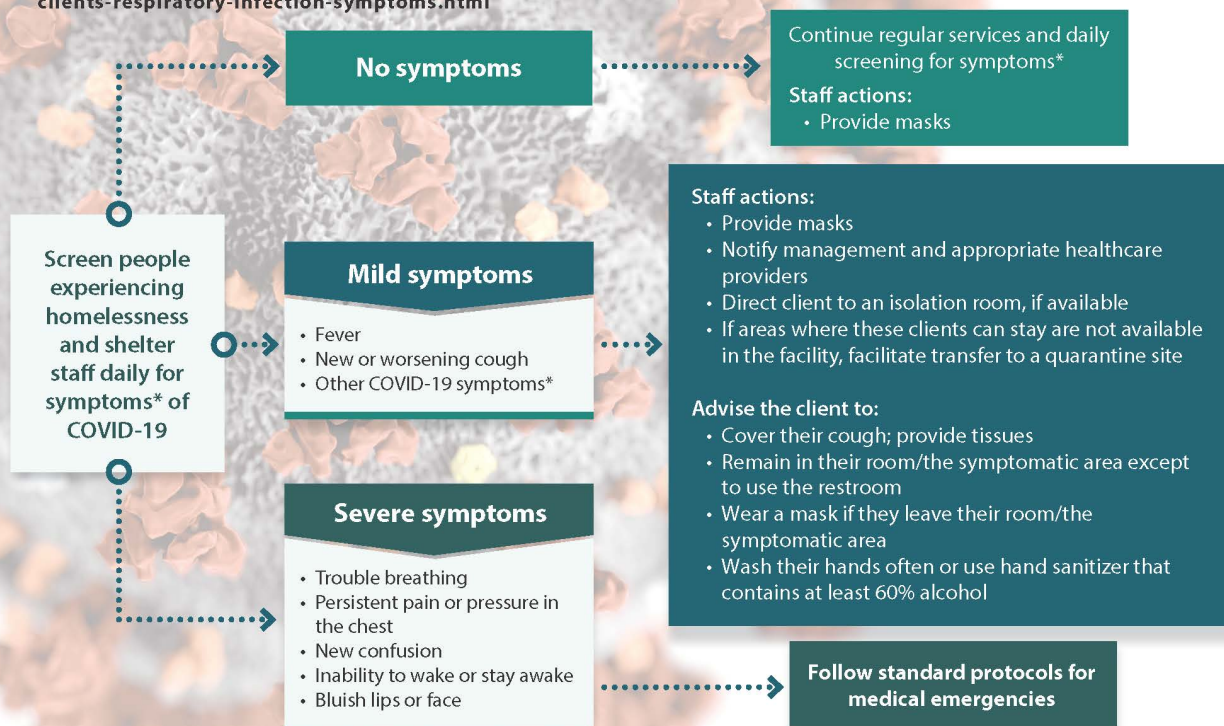
## SYMPTOM SCREENING FOR STAFF AND CLIENTS

- ☐ Consider screening clients upon entry into and while staying at your facility, as well as during outreach (See flow charts on next page)
- ☐ If a client screens positive for symptoms, follow standard procedures developed with your public health partners and CDC guidance, including the following:
  - ☐ Providing the client with a mask and advising them about cough etiquette.
  - ☐ Notifying appropriate public health authorities or healthcare providers and/or referring to testing, and
  - ☐ Directing the client to a designated isolation area within the facility at a location identified by your local public health partners
- ☐ Screen clients behind a physical barrier or stand 6 feet from a client and wear a face mask or N95 respirator, eye protection such as goggles or a face shield that fully covers the front and sides of the face, and a single pair of disposable gloves
- ☐ Ensure staff, outreach workers, and volunteers screen themselves for COVID-19 symptoms at the beginning of every shift; immediately send home staff/volunteers who have a fever greater than 100.4 or symptoms consistent with COVID-19.
- ☐ Work with public health partners to establish standard facility procedures for when to seek emergency attention and delivering CPR during the COVID-19 pandemic. Call 911 if someone is showing any of these signs (note that this is not an exhaustive list):
  - ☐ Trouble breathing,
  - ☐ Persistent pain or pressure in the chest,
  - ☐ New confusion,
  - ☐ Inability to wake or stay awake and/or
  - ☐ Bluish lips or face

\*Please Note: Symptom screening may provide an opportunity to engage with both staff and clients to understand how they are feeling and whether they need increased medical care. Depending on how comprehensive a symptom screening is, it could also be used to monitor increasing sickness in clients. However, it is important to remember that increased trauma, mobility and lack of consistent safe shelter may cause people experiencing homelessness to present with symptoms that are consistent with COVID-19 but also many other kinds of illness. If shelters choose to symptom screen, it is important to work with public health partners to develop a procedure for what to do if someone screens positive for COVID-like symptoms.

## Flow Chart For Screening Symptoms in Homeless Shelters

Accessible version available at: <https://www.cdc.gov/coronavirus/2019-ncov/community/homeless-shelters/screening-clients-respiratory-infection-symptoms.html>



\*Symptoms of COVID-19 may include: fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, diarrhea



Scan for more guidance

[cdc.gov/coronavirus](https://cdc.gov/coronavirus)



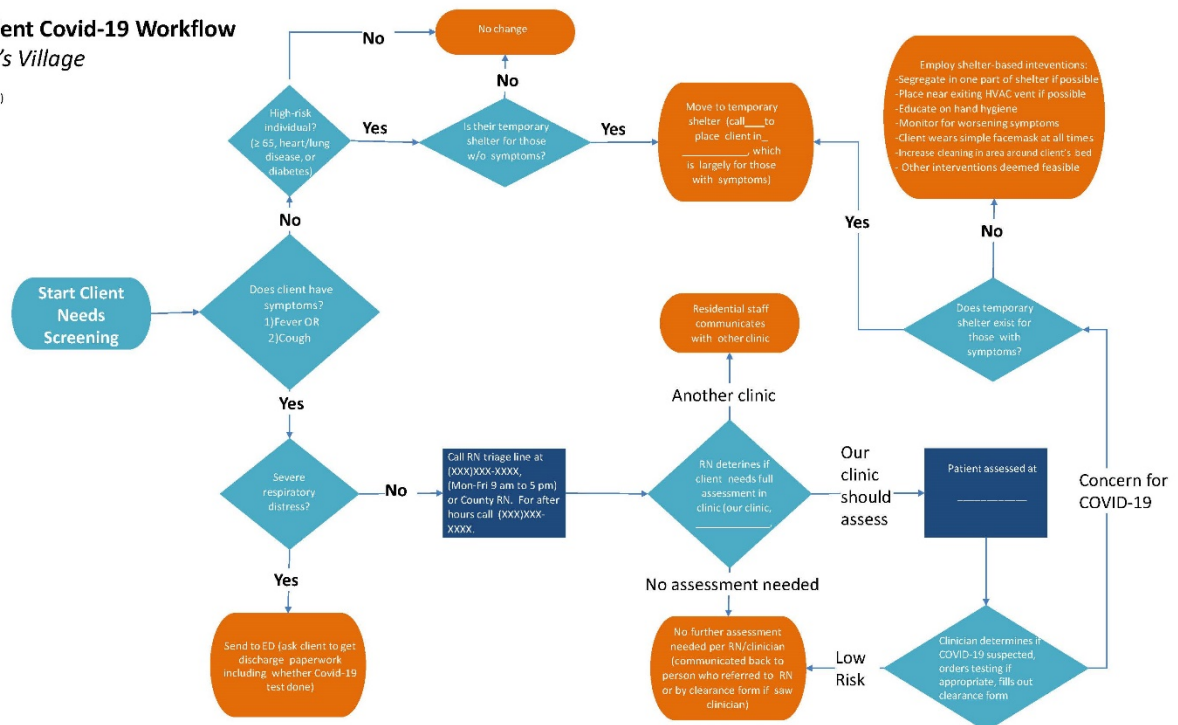
# TIP SHEET 7

## TESTING

- ☐ Work with public health departments to develop protocol for when clients should be referred for testing and create a referral pathway or workflow.
- ☐ Identify an appropriate space where clients can isolate while they await test results and safe transportation options to and from testing sites.
- ☐ Ensure that all program staff are trained in referral pathway/workflow,

### Shelter Client Covid-19 Workflow Father Joe's Village

(Update [Insert Date])





# TIP SHEET 8

## TRANSPORTING CLIENTS

As an Advocate who may drive clients to shelter and appointments, potential sources of exposure include having close contact with passengers with COVID-19, or touching surfaces touched or handled by a person with COVID-19.

### Stay home if you are sick

- ☐ If you develop a fever, or symptoms such as a cough or difficulty breathing, call your healthcare provider for medical advice and guidance before visiting their office.
- ☐ You should not return to work until the [criteria to discontinue home isolation](#) are met, after talking with your doctor or nurse.

### Wear a cloth face covering

- ☐ [CDC recommends wearing cloth face coverings](#) in public settings where other social distancing measures are difficult to maintain, especially in areas where there may be a lot of infected people.
- ☐ Cloth face coverings may prevent people who don't know they have the virus from transmitting it to others.
- ☐ These face coverings are not surgical masks or respirators and are not appropriate substitutes for them in workplaces where masks or respirators are recommended
  - ☐ Trouble breathing,
  - ☐ Persistent pain or pressure in the chest,
  - ☐ New confusion,
  - ☐ Inability to wake or stay awake and/or
  - ☐ Bluish lips or face
- ☐ Please Note: Symptom screening may provide an opportunity to engage with both staff and clients to understand how they are feeling and whether they

need increased medical care. Depending on how comprehensive a symptom screening is, it could also be used to monitor increasing sickness in clients. However, it is important to remember that increased trauma, mobility and lack of consistent safe shelter may cause people experiencing homelessness to present with symptoms that are consistent with COVID-19 but also many other kinds of illness. If shelters choose to symptom screen, it is important to work with public health partners to develop a procedure for what to do if someone screens positive for COVID-like symptoms.

# TIP SHEET 9

## HELPING CHILDREN COPE

It is very important to remember that children look to adults for guidance on how to react to stressful events. Acknowledging some level of concern, without panicking, is appropriate and can result in taking the necessary actions that reduce the risk of illness. Teaching children positive preventive measures, talking with them about their fears, and giving them a sense of some control over their risk of infection can help reduce anxiety.

This is also a tremendous opportunity for adults to model for children problem-solving, flexibility, and compassion as we all work through adjusting daily schedules, balancing work and other activities, getting creative about how we spend time, processing new information from authorities, and connecting and supporting friends and family members in new ways. The following tips can help.

### Stay calm, listen, and offer reassurance

- **Be a role model.** Children will react to and follow your reactions. They learn from your example.
- **Be aware of how you talk about COVID-19.** Your discussion about COVID-19 can increase or decrease your child's fear. If true, remind your child that your family is healthy, and you are going to do everything within your power to keep loved ones safe and well. Carefully listen or have them draw or write out their thoughts and feelings and respond with truth and reassurance.
- **Explain social distancing.** Children probably don't fully understand why parents/guardians aren't allowing them to be with friends. Tell your child that your family is following the guidelines of the Centers for Disease Control and Prevention (CDC), which include social distancing. Social distancing means staying away from others until the risk of contracting COVID-19 is under control. Showing older children the "flatten the curve" charts will help them grasp the significance of social distancing. Explain that while we don't know how long it will take to "flatten the curve" to reduce the number of those infected, we do know that this is a critical time—we must follow the guidelines of health experts to do our part.
- **Demonstrate deep breathing.** Deep breathing is a valuable tool for calming the nervous system. Do breathing exercises with your children.
- **Focus on the positive.** Celebrate having more time to spend as a family. Make it as fun as possible. Do family projects. Organize belongings, create masterpieces. Sing, laugh, and go outside, if possible, to connect with nature and get needed exercise. Allow older children to connect with their friends virtually.
- **Establish and maintain a daily routine.** Keeping a regular schedule provides a sense of control, predictability, calm, and well-being. It also helps children and other

family members respect others' need for quiet or uninterrupted time and when they can connect with friends virtually.

- **Identify projects that might help others.** This could include: writing letters to the neighbors or others who might be stuck at home alone or to healthcare workers; sending positive messages over social media; or reading a favorite children's book on a social media platform for younger children to hear.
- **Offer lots of love and affection.**

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## Monitor television viewing and social media

- Parents/guardians should monitor television, internet, and social media viewing—both for themselves and their children. Watching continual updates on COVID-19 may increase fear and anxiety. Developmentally inappropriate information, or information designed for adults, can also cause anxiety or confusion, particularly in young children.
- Dispel rumors and inaccurate information. Explain to your child that many stories about COVID-19 on the internet may include rumors and inaccurate information. Older children, in particular, may be accessing a great deal of information online and from friends that contains inaccuracies. Talk to your child about factual disease information.
- Provide alternatives. Engage your child in games or other exciting activities instead.

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## Take time to talk

- **Let your children's questions guide you.** Answer their questions truthfully, but don't offer unnecessary details or facts. Don't avoid giving them the information that experts indicate as crucial to your children's well-being. Often, children and youth do not talk about their concerns because they are confused or don't want to worry loved ones. Younger children absorb scary information in waves. They ask questions, listen, play, and then repeat the cycle. Children always feel empowered if they can control some aspects of their life. A sense of control reduces fear.

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## Be honest and accurate

- **Correct misinformation.** Children often imagine situations worse than reality; therefore, offering developmentally appropriate facts can reduce fears.
- **Explain simple safety steps.** Tell your child this disease spreads between people who are in close contact with one another, when an infected person coughs or sneezes, or when one touches infected objects or surfaces.
- **Stay up-to-date on the facts.** Go to <https://www.cdc.gov/coronavirus/2019-ncov/index.html> for additional factual information.

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## Keep explanations age-appropriate

- **Early elementary school children.** Provide brief, simple information that balances COVID-19 facts with appropriate reassurances that adults are there to help keep them

healthy and to take care of them if they do get sick. Give simple examples of the steps people make every day to stop germs and stay healthy, such as washing hands. Use language such as "adults are working hard to keep you safe."

- **Upper elementary and early middle school children.** This age group often is more vocal in asking questions about whether they indeed are safe and what will happen if COVID-19 spreads in their area. They may need assistance separating reality from rumor and fantasy. Discuss the efforts national, state, and community leaders are doing to prevent germs from spreading.
- **Upper middle and high school students.** Issues can be discussed in more depth. Refer them to appropriate sources of COVID-19 facts. Provide honest, accurate, and factual information about the current status of COVID-19. Engage them in decision-making about family plans, scheduling, and helping with chores at home.
- ***For all children, encourage them to verbalize their thoughts and feelings. Be a good listener!***

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## Stay connected to school

- **Locate learning resources.** Schools' capacity to conduct virtual learning experiences will vary greatly, but most schools are providing lessons and learning activities for children to do. Take advantage of the many companies and online platforms currently offering free learning opportunities.
- **Identify additional resources.** Know if your school or district is providing additional resources, such as meals, or technology, such as a laptop or tablet.
- **Stay in touch.** Find out how the school is communicating with families and students. Be sure to read any communications you receive. Check with your children, particularly older ones, as they may be receiving information directly that would be helpful for you to know.
- **Connect with school staff.** Reach out to your child's teacher and other relevant school staff if you have concerns about their coping and keeping up with assignments or activities.

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## Know the symptoms of covid-19

- According to the CDC, symptoms of fever, cough, and/or shortness of breath appear within 14 days after being exposed to the disease.
- For some people, the symptoms are similar to having a cold; for others, they are more severe or even life threatening.

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## Model basic hygiene and healthy lifestyle practices

- **Practice daily good hygiene.** Encourage your child to practice these simple steps to prevent spreading the virus.

- Wash your hands multiple times a day for 20 seconds. Singing “Twinkle, Twinkle Little Star” or “Happy Birthday” twice is about 20 seconds.
- Compliment your children when they use a Kleenex or sneeze or cough into the bend of their elbow. Teach them the importance of throwing away used tissues immediately after sneezing or coughing.
- Sadly, handshakes and hugs need to be limited to immediate family members, at least for now.
- **Foster a sense of control.** Offering guidance on what your child/children can do to prevent infection offers them a greater sense of control, which reduces anxiety.
- **Build the immune system.** Encourage your child to eat a balanced diet, get enough sleep, and exercise regularly; this will help them develop a robust immune system to fight off illness.

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## Be aware of your children’s mental health

Most children will manage well with the support of parents and other family members, even if showing signs of some anxiety or concerns, such as difficulty sleeping or concentrating. Some children, however, may have risk factors for more intense reactions, including severe anxiety, depression, and suicidal behaviors. Risk factors can include a pre-existing mental health problem, prior traumatic experiences or abuse, family instability, or the loss of a loved one. Parents and caregivers should contact a professional if children exhibit significant changes in behavior or any of the following symptoms for more than 2 weeks.

**Preschoolers**—thumb sucking, bedwetting, clinging to parents, sleep disturbances, loss of appetite, fear of the dark, regression in behavior, and withdrawal.

**Elementary school children**—irritability, aggressiveness, clinginess, nightmares, school avoidance, poor concentration, and withdrawal from activities and friends.

**Adolescents**—sleeping and eating disturbances, agitation, increase in conflicts, physical complaints, delinquent behavior, and poor concentration.