



## Special Event Volunteer Contact Sheet — *For Groups*

Event/Activity: \_\_\_\_\_

Location: \_\_\_\_\_ Date: \_\_\_\_\_

Associated Program: \_\_\_\_\_

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

Affiliated Business / School / Group / Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Number of Volunteers in Group: \_\_\_\_\_

Please check here if you would like to be notified of future volunteering opportunities!

In my child's work as a volunteer, I hereby consent to and authorize the use of my child's image (Name) \_\_\_\_\_ by Catholic Charities Maine, its offices, programs and services or anyone authorized by that agency, for the positive promotion of Catholic Charities Maine, its mission, development and social services, through various media, including, but not limited to, the internet, web sites, telecommunications, electronic and printed material. All negatives and positives, together with prints, videos, disks and film shall constitute the property of Catholic Charities Maine, solely and completely.

I also authorize the use of my name and/or my child's name and statements made by me or my child this day in connection with the photography/filming done and/or interview conducted.

As the representative for the group, I have received a copy of, read and had questions answered regarding Catholic Charities Maine Volunteer Handbook. The group members and I will act in accordance with the policies and procedures outline in this document while volunteering at Catholic Charities Maine.

Name of Representative of Group (print): \_\_\_\_\_

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

Date: \_\_\_\_\_



# CATHOLIC CHARITIES MAINE

P. O. Box 10660

Portland, ME 04104

## CONFIDENTIALITY AGREEMENT

I recognize and acknowledge that the services that Catholic Charities Maine performs for its consumers are confidential. I, \_\_\_\_\_, by reason of my work or volunteer activities or by my presence at Catholic Charities Maine, may come into possession of protected health information (PHI) concerning the services performed by Catholic Charities Maine for its consumers, even though I do not take any direct part in or furnish the services performed for those consumers. I agree that I will not at any time during or after becoming aware of the nature of any treatment services provided to consumers (i.e. via access to these medical records containing PHI or knowledge gained by my presence at the program), disclose (which could mean giving someone records, or talking with someone) any such provided services or PHI to any person or entity whatsoever, or other privileged information prepared that is not needed for consumer treatment, payment, or health care operations for Catholic Charities Maine. I understand that the use or disclosure of such information may give rise to injury to the consumer or to Catholic Charities Maine, and may violate state and federal confidentiality provisions.

I recognize and acknowledge that although the information contained in the medical record (PHI) can only be disclosed by the consumer or his/her legal guardian, that the medical record (PHI) is the property of Catholic Charities Maine; that no original medical records or portions of a medical record, shall be removed from Catholic Charities Maine for any reason, and that I will keep no negatives, use no microfilm, or keep or sell any photocopies or computer disks to any second parties.

I acknowledge that in receiving, storing, processing or otherwise dealing with any consumer medical records or treatment information (PHI) from Catholic Charities Maine, I am fully bound by HIPAA federal regulations (45 CFR Sections 160 and 164); by 42 CFR Part 2 et seq., "Confidentiality of Alcohol and Drug Abuse Patient Records"; and by Maine State law and any other applicable federal law.

I, \_\_\_\_\_, employed or working or volunteering as a

\_\_\_\_\_ have read all of the above sections of this

Agreement, and I fully understand and shall comply with them. I understand that failure to

comply may lead to sanctions.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
Staff Witness

\_\_\_\_\_  
Date

# Catholic Charities Maine

## INFECTIOUS DISEASE PREPAREDNESS AND RESPONSE PLAN

### I. Company Policy

Catholic Charities Maine is committed to maintaining a workplace that promotes the health and safety of all employees and volunteers. The World Health Organization has declared a pandemic in connection with the respiratory disease, COVID-19, which is caused by the novel coronavirus (SARS-CoV-2). The virus that causes COVID-19 has been found to be easily transmitted from person to person and, therefore, creates a risk of exposure in the workplace. To address this potential hazard in the workplace, in compliance with Occupational Safety & Health Administration (OSHA), Catholic Charities Maine has developed an Infectious Disease Preparedness and Response Plan (the "Plan"). The Plan addresses all aspects of potential exposure and summarizes the steps Catholic Charities Maine is taking to reduce such potential exposure. All employees and volunteers are required to review and comply with the Plan. Failure to do so will lead to disciplinary action up to and including termination of employment or volunteerism.

We are confident that by working together to reduce potential exposure to the coronavirus, we will protect our employee/volunteers and volunteers and our business from the potentially devastating effects of this pandemic.

Questions about the Plan or the coronavirus should be directed to Quality & Compliance.

### II. Analysis of Exposure Risk-Risk is assessed for each job description and assigned accordingly. Factors considered in the risk level assignment include but are not limited to geography, workplace configuration, public facing positions/roles, and exposure to visitors.

- A. Very High Exposure Risk Positions/Roles and locations
- B. High Exposure Risk Position/Roles and locations
- C. Medium Exposure Risk Positions/Roles and locations
- D. Low Exposure Risk Positions/Roles and locations

For the purpose of supporting workplaces and practices to mitigate the risk of and opportunity for transmission in a conservative and balanced manner, CCM has generated a framework (Appendix A) that crosswalks and groups job descriptions to affiliated locations for risk assignment. To this end, exposure risk for each location and subsequent infection prevention controls are based on the highest exposure risk level assigned at the employee/volunteer level. (See Appendix A for the Risk Exposure Assignment Grid)

### III. Minimum Specific Infection Prevention Controls Applicable Based on Risk Level

#### A. VERY HIGH EXPOSURE RISK – JESSE ALBERT DENTAL & ORTHODONTIC CENTER

- i. Engineering
  - 1. Plexiglass partition at reception
  - 2. Air purifying machines installed and running in designated areas.

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3. Staggering of appointments to allow for distancing of operatories in use
  4. Limit seating of patients/clients in the waiting room to that which can accommodate for at least a six (6) foot distance between chairs.
  5. Prevent unmonitored entry to the building.
  6. Post and enforce use of masking for all staff/volunteers, essential visitors and patients.
  7. Post directions for deliveries to be left outside entry/designated area.
  8. Staff meetings may be conducted virtually or in a manner that supports distancing.
- ii. Administrative
1. Triage client calls to prioritize procedures.
  2. Respiratory Protection Plan implemented.
  3. Self-Monitoring & Self-Certification-Staff/volunteers are required to monitor for symptoms and attest to being symptom free prior to permitted access to the building. Include temperature taking and reporting on standard log. This will be completed prior to entry into the building. If there are any affirmative answers to the symptom screening questions, staff/volunteer will not be permitted to work.
  4. Staff/volunteers are educated on symptoms and transmission of COVID-19 via readily available postings at sites.
  5. Postings alerting of common symptoms and prohibiting entry for staff/volunteer and visitors/patients will be located at all entry doors.
  6. Screening questions for all patients and essential visitors prior to entry in the building.
- iii. PPE required
1. Respirators - Respiratory Protection Plan implemented for personnel performing or assisting in aerosol generating procedures.
  2. Level 3 masks or higher will be worn by those performing or assisting in non-aerosol generating procedures.
  3. Gowns, face shields and gloves will be always worn when performing dental and/or orthodontic procedures.
  4. Donning and doffing of all PPE will be performed as directed/trained.
  5. Masking will be worn by personnel and essential visitors at all other times while working and for patients when not receiving direct care.
- iv. Safe Work Practices-Location specific infection control protocols, by program designated staff, in addition to routine safety & hygiene practices and those cited by the CDC for COVID-19, including but not limited to the use of EPA registered agents:
1. Sanitize after each exchange of materials between personnel and client/patients such as clipboards, pens, paper materials.
  2. Limit items that can be handled or touched by patients including removal of toys, framed announcements, etc. Use postings
  3. Limit congregating in kitchen/break room.
  4. Disinfecting schedule (with at minimum masking and gloves) of community, high touch areas such as:
    - i. Waiting area-Chairs and any high touch areas (chairs, door handles, etc.)- after any patient is admitted to clinical area.
    - ii. Bathrooms-door handles, sink, assistive rails, at least daily (after operational hours) disinfection
    - iii. Break room/Kitchen at set increments
    - iv. Punch clock & any pin required access point

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5. Any site-specific health & safety protocols, in addition to the listing in the Plan, will be reviewed for approval by Operations (Executive) and Quality & Compliance.

B. HIGH EXPOSURE RISK –SFRC

i. Engineering

1. Plexiglass partition at locations that have a reception/check in
2. Prevent unmonitored entry to the building.
3. Limit seating of patients/clients in the waiting room
4. Limit sharing of workspaces, where feasible (desks).
5. No congregating in kitchen/breakroom.
6. Post masking/face covering recommendation for all staff, visitors and clients.
7. Post directions for deliveries to be left outside entry/designated area.
8. Staff/volunteer meetings may be held virtually

ii. Administrative

1. Respiratory Protection Plan implemented, if interaction with a COVID 19 + individual is necessary. (Follow site specific protocols)
1. Use of telehealth where possible and when quality is comparable to in person support/service. If in person meetings are necessary, allow for distancing.
2. Self-Monitoring & Certification (Screening)-Staff/volunteer are required to monitor for symptoms and attest to being symptom free, at minimum, prior to shift. This will be completed prior to entry into the building. If there are any affirmative answers to the symptoms related screening questions, staff/volunteer will not be permitted to work.
3. Staff/volunteers educated on symptoms and transmission of COVID-19 via readily available postings at sites.
4. Client/Essential visitor screening questions prior to entry in building/office meetings and prior to staff/volunteer contact. -Script & documented at minimum.

iii. PPE required

1. General- Masks/face coverings are recommended for clients, staff, volunteers, and I visitors. This recommendation includes masks/face coverings being worn in common areas such as reception areas, shared office/workspace with more than one staff/volunteer in each room, hallways, stairways, elevators, shared bathrooms, shared printer spaces, conference, and meeting rooms. Masks/face coverings are also recommended to be worn outside of CCM office buildings, such as in vehicles with clients or other staff, indoor meetings, or client homes, while acting in a CCM capacity and when interacting on behalf of clients/customers, regardless of social distance. Open air/outdoor spaces are not included in the face covering recommendation.
2. Medical Services (NP or MD)- If interacting with a COVID 19 + case is required, implement Respiratory Protection Plan, and interact at contained and designated location.
3. Educational postings on proper glove and mask donning and doffing will be posted in staff/volunteer only areas.

iv. Safe work practices-Using EPA registered agents by program/site designated individual(s):

1. Sanitize or use “unused/used designation system” after each exchange of materials between staff/volunteer and client/patients such as clipboards, pens, paper materials with sanitization occurring routinely

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2. Limit items that can be handled or touched by clients/visitors while waiting or present including framed announcements, etc. Use postings
3. Limit congregating in kitchen/break room.
4. Disinfecting schedule (with at minimum masking and gloves) of community, high touch areas such as:
  - i. Waiting area-Chairs and any high touch areas (chairs, doors handles, etc.)- after any patient is admitted to clinical area.
  - ii. Bathrooms-door handles, sink, assistive rails, at least daily (after operational hours) disinfection
  - iii. Break room/Kitchen at set increments
  - iv. Punch clock & any pin required access point
5. Medical/Institutional/Congregate Settings-Staff/volunteers who are providing services to clients in medical, education, or public facilities will follow entity protocols for safety and infection control, when said protocol is more stringent than CCM protocol.
6. Any site-specific health & safety protocols, in addition to the listing in the Plan, will be reviewed for approval by Operations (Executive) and Quality & Compliance.

C. MEDIUM EXPOSURE RISK –420 CUMBERLAND AVE, PORTLAND (MULTI PROGRAM SITE-BHN, OMRS, ISS), ST ELIZABETH'S CHILD DEVELOPMENT CENTER, ST LOUIS CHILD DEVELOPMENT CENTER, SHERMAN ST., LEWISTON, MINOT AVE & OUTPATIENT SERVICES-DUNN ST., AUBURN, FAIRFIELD, ST MICHAEL'S CENTER-INCLUDED ARE STAFF/VOLUNTEER ASSOCIATED WITH THESE SITES BUT THAT ARE HIGHLY MOBILE – ESBVIC, ISS, LANGUAGE PARTNERS, SEARCH, CENTRAL SERVICES/OFFICE, SANFORD TOH, NORTHERN THIRFT STORES, RECYCLING & FOOD BANK

i. Engineering

1. Control unmonitored entry to the building, where feasible.
2. Wherever possible, keep visitors in contained areas.
3. Post face covering/masking status as informed by community COVID levels at entry to building (green or yellow = optional & red = recommended)
4. Limit sharing of workspaces (desks), where necessary/feasible
5. Limit congregating in kitchen/breakroom.
6. Staff/volunteers educated on symptoms and transmission of COVID-19 via readily available postings at sites.
7. Post directions for deliveries to be left outside entry/designated area, as possible

ii. Administrative

1. Staff/Volunteers of Non-CDC Programs-Self-Monitoring Staff/volunteers should continue to monitor for symptoms prior to any daily work at a CCM site and/or in a CCM capacity in the community. Self-Monitoring will continue throughout the workday. If there are any concerning symptoms, staff/volunteer will not be permitted to work.
2. Staff/Volunteers of CDC Licensed Programs- Self-Monitoring & Certification (Screening)-Staff/volunteer are required to monitor for symptoms and attest to being symptom free, at minimum, prior to shift. This will be completed prior to entry into the building and prior to working offsite in a CCM capacity. If there are

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any affirmative answers to the symptoms related screening questions, staff/volunteer will not be permitted to work.

3. Allow optional use of teleconferencing as a means for meetings, when deemed necessary

4. Client/Essential visitor screening questions prior to entry in building/office meetings -Script & documented at minimum.

iii. PPE

1. Masks/face coverings use is optional when onsite and community COVID levels (as monitored and posted by the CDC) are green or yellow. Masks/face coverings are recommended when community COVID levels are red. If and when masking/face coverings become recommended, this includes in common areas such as reception areas, shared office/workspace with more than one staff/volunteer in each room, hallways, stairways, elevators, shared bathrooms, shared printer spaces, conference, and meeting rooms. The same carries over outside of CCM office buildings, while acting in a CCM capacity. CCM staff/volunteers will respectfully adhere to the protocol of other off-site organizations when representing CCM.

iv. Safe work practice-Using EPA registered agent by programs/site designated individuals(s):

1. Sanitize or use “unused/used designation system” after each exchange of materials between personnel and between visitors such as clipboards, pens, paper materials.
2. Limit items that can be handled or touched by clients/visitors/customers while waiting or present including framed announcements, etc. Use postings
3. Limit congregating in kitchen/break room.
4. Disinfecting schedule (with at minimum masking and gloves) of community, high touch areas such as:
  - i. Waiting area-Chairs and any high touch areas (chairs, door handles, etc.)- after any patient is admitted to clinical area.
  - ii. Bathrooms-door handles, sink, assistive rails, at least daily (after operational hours) disinfection
  - iii. Break room/Kitchen at set increments
  - iv. Punch clock & any pin required access point.
5. Medical/Institutional/Congregate Settings-Staff/volunteers who are providing services to clients in medical, education, or public facilities will follow entity protocols for safety and infection control, when/if said protocol is more stringent than CCM protocol.
6. Any site-specific health & safety protocols, in addition to the listing in the Plan, will be reviewed for approval by Operations (Executive) and Quality & Compliance.

IV. General Infection Prevention Measures Applicable to All Positions and Locations  
For sites governed by Licensing or another regulatory/governing authority the applicable regulatory body's guidelines supersede the general guidance.

A. HANDWASHING

- i. Frequent and thorough hand washing by staff/volunteers and when handwashing is not readily possible, alcohol-based sanitizing products with at least 60% alcohol are available and may be used until handwashing can be performed.
  - ii. Examples of specific time and events that prompt handwashing, include but are not limited to upon entering or reentering work area, before/after eating, after bathroom use, before using shared coffee machine or refrigerator and after handling materials provided by vendors.
- B. PPE
  - i. See additional risk specific protocols above. For programs governed by Licensing or another regulatory/governing authority, the applicable regulatory body's guidelines supersede the general guidance.
- C. STAYING HOME WHEN SICK
  - i. Employee/volunteers to stay home if they are sick, including but not limited to a fever of 100.4 or higher.
  - ii. Employee/volunteers who test positive for COVID-19 are to stay home and report diagnosis to Supervisor.
- D. REPORTING - Employee/volunteers are to report to HR if they receive an order from a state, local public health agency or testing facility directing them to self-quarantine or isolate.
- E. RESPIRATORY ETIQUETTE –When coughing or sneezing, employee/volunteers are to cover the cough or sneeze, such as through coughing or sneezing into their elbow. If coughing or sneezing into hands occurs, employee/volunteers should wash hands immediately and without touching any surfaces with soiled hands.
- F. SHARING EQUIPMENT – Limit sharing workspaces. If it is necessary, disinfect surfaces and items requiring touch prior to and after use.
- G. DISTANCING
  - i. Avoid close contact
  - ii. Maintain distancing in elevators and stairwells, when possible.
  - iii. Signage is hung throughout all locations as reminders
- H. HANDSHAKING – Not recommended
- I. EXTEND WORK FROM HOME/SEGMENT WORKFORCE/COHORTING
  - i. Where feasible with job duties and where quality client services can be ensured, work from home (WFH) practices may continue to be leveraged. This will be assessed for appropriateness ongoing and on a case-by-case basis. Assessment and authorization will be the responsibility of program management.
- J. MEETINGS
  - i. Teleconference (video/audio or audio only) is an optional method for meetings
  - ii. In person meetings should allow distance from others. If more individuals must be involved, a mix of in person and call in (video and/or audio) may be used.
  - iii. Meeting rooms are to be configured to allow distancing. DISINFECTING – Using EPA Registered Agents by program/site designated individual(s)
  - iv. Housekeeping practices in shared work areas are organized, scripted, scheduled, and implemented.
  - v. Any reception or transaction areas where a pen, clipboard, paperwork, or touch pad is used or exchanged with a visitor, patient, client, or customer will be routinely disinfected using disinfecting wipes. A minimum of gloves will be worn by the employee/volunteer performing the procedure.

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K. IDENTIFICATION AND ISOLATION OF SICK PEOPLE

- i. Self-Monitoring Staff/volunteers are required to monitor for symptoms prior to any daily work at a CCM site and/or in a CCM capacity in the community. Self-Monitoring will continue throughout workday. If there are any concerning symptoms, staff/volunteer will not be permitted to work.

L. VISITOR SCREENING

- i. Visitors to the workplace are limited and screening procedures, where noted in risk specific categories, are in place.
- ii. Refuse entry to anyone exhibiting symptoms including but not limited to a fever

M. SYMPTOMATIC EMPLOYEE/VOLUNTEERS

- i. Employee/volunteers with one or more COVID symptoms (fever included) have a responsibility to report to supervisor & to leave the workplace. Keep health information confidential.
- ii. If employee/volunteer is experiencing symptoms and is tested, quarantining, pending results, at a minimum, is warranted. Employee/volunteer must notify Supervisor.
- iii. If it is determined, based on COVID testing results, that the symptoms are not COVID related, staff/volunteers are encouraged to remain out of the office and not seeing clients, at minimum, until:
  1. Fever free, without medication, for at least 24 hours (if fever was present) and
  2. 4-5 days have passed since symptom(s) onset.

N. IF EMPLOYEE/VOLUNTEER IS A CLOSE CONTACT AND/OR BECOMES INFECTED

- i. Seek consult – CCM will reference/contact & follow CDC guidance.
- ii. Determine timeline of when infected individual was in the workplace
- iii. Determine close contacts of infected individual when in workplace
- iv. While not always required for employee/volunteers in essential/healthcare positions, deferral to CDC guidance will be used and guidance will be operationalized on a case-by-case basis. In general,
  1. Non-Behavioral Health and Non-Dental/Ortho Staff/Volunteers-If you have received your CDC-recommended COVID-19 booster OR completed the primary series of Pfizer/Moderna vaccine within the last 6 months OR completed the primary series of Johnson & Johnson vaccine within the last 2 months:
    - i. You do not need to quarantine after a COVID-19 exposure as long as you do not develop symptoms.
    - ii. You are required to wear a face covering anytime you are around other people, in a CCM capacity, for 10 days.
    - iii. You should take a COVID-19 test on day 5 after your last exposure.
    - iv. If you develop symptoms, get a COVID-19 test and isolate at home while awaiting results.

2. Non-Behavioral Health and Non-Dental/Ortho Staff/Volunteers - If you are unvaccinated OR completed the primary series of Pfizer/Moderna vaccine more than 6 months ago and are not boosted OR completed the primary series of Johnson & Johnson vaccine more than 2 months ago and are not boosted:
  - i. You need to quarantine.
  - ii. After a minimum of 5 days, no symptoms and a negative test taken on day 5, you may return to work with CCM in a community or office setting and are required continue to wear a face covering around other people for an additional 5 days.
  - iii. You should take a COVID-19 test on day 5 after your last exposure.
  
3. Healthcare Staff/Volunteers (BHN & Dental/Ortho)-If you have received your CDC-recommended COVID-19 booster OR completed the primary series of Pfizer/Moderna vaccine within the last 6 months OR completed the primary series of Johnson & Johnson vaccine within the last 2 months:
  - i. You do not need to quarantine after a COVID-19 exposure as long as you do not develop symptoms.
  - ii. You are required to wear a face covering anytime you are around other people, in a CCM capacity for 10 days or defer to Program Specific masking/PPE protocol for duration, if more stringent (ie: SUD Res. & Dental/Ortho)
  - iii. You should take a COVID-19 test on day 2 and 5-7 days after your last exposure. If positive, isolate and report.
  - iv. If you develop symptoms, get a COVID-19 test and isolate at home while awaiting results.
  
4. Healthcare Staff/Volunteers (BHN and Dental/Ortho)- If you are unvaccinated OR completed the primary series of Pfizer/Moderna vaccine more than 6 months ago and are not boosted OR completed the primary series of Johnson & Johnson vaccine more than 2 months ago and are not boosted:
  - i. You need to quarantine.
  - ii. After 7 days and a negative COVID test or 10 days without a test, you may return to work with CCM in a community or office setting.
  - iii. Defer to Program Specific masking/PPE protocol.
  
5. Given flu and cold season and the risk associated with spread of these conditions, individuals with negative COVID test results, but remaining symptomatic are encouraged to remain out of the office and not seeing clients, at a minimum, until:
  - i. Fever free, without medication, for at least 24 hours (if fever was present) and
  - ii. 4-5 days have passed since symptom(s) onset.

#### O. RETURNING TO WORK FOLLOWING A POSITIVE COVID-19 TEST

- i. FOLLOW CDC GUIDANCE regarding discontinuing home isolation

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In general, the employee/volunteer may return to workplace only after:

1. No fever for at least 24 hours (at least one (1) full day of no fever without the use of medicine), and
2. Other symptoms are improving, and
3. At least 5 days have passed\* since symptoms first appeared.
4. If asymptomatic throughout – isolate a minimum of 5 full days\*\* after the positive test.
5. Wear a face covering for a minimum of 5 days after isolation release.

BHN and JADOC staff/volunteers may return to the workplace/interacting with clients/patients after:

1. At least 10 days\* have passed or 7 days\* have passed and a negative test. (\*\*If asymptomatic)
2. If symptomatic, symptoms are improving.
3. Defer to Program Specific Masking/PPE protocol

\*Date of symptom onset is day 0

\*\*Date of test is Day 0

DOCTOR'S NOTE – The EEOC permits employers to request a doctor's note certifying fitness for duty following positive COVID-19 diagnosis.

P. TRAVEL RESTRICTIONS APPLICABLE TO EMPLOYEE/VOLUNTEERS  
LIMIT TRAVEL

- i. Executive level approval is required for attendance at conferences

HONOR TRAVEL RESTRICTIONS

- i. Compliance with any current State quarantine parameters following out of state and international travel is required.

Q. VISITORS IN THE WORKPLACE

- i. NON-ESSENTIAL VISITORS (FRIENDS, FAMILY MEMBERS) – Site specific
- ii. SCREEN ESSENTIAL VISITORS-Visitors at High and Very High-risk office locations (script questionnaire, at minimum) prior to permitting entrance.
- iii. Entry/Interaction will be refused to anyone exhibiting symptoms including but not limited to a fever.
- iv. CHANGE LOCATION OF VISITS (e.g., redirect delivery drivers to leave packages where access to office is not necessary)
- v. CREATE BARRIERS
  1. Plexiglass barrier or other barriers between visitor and reception check in/check out will be present at designated locations.
  2. Safe distance for standing in front of reception desk will be marked

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R. RECONFIGURE CONFERENCE SPACE

- i. Reduce number of chairs in conference room to support additional distancing
- ii. Specific conference space for meetings with essential visitors will be identified at all locations where essential visitors continue to present.
- iii. Disinfection is required after all visitor meetings

S. REPORTING-POSITIVE COVID-19 TESTS

- i. Employee/volunteers who test positive for COVID-19 are required to report the diagnosis to Supervisor, immediately.
- ii. Employee/volunteers are expected to cooperate with the CCM in determining timeline of presence in the office and assessing close contacts.
- iii. All records regarding the diagnosis and report to HR will be maintained as a confidential medical record.

If you have any questions about the Plan, please contact Quality & Compliance.

If you have questions regarding employee/volunteer issues, contact HR.

If you see anything in the workplace that causes you concern or if you believe the Plan should be modified in any way, please contact HR.

Enforcement

Catholic Charities Maine is committed to reducing exposure to the coronavirus in the workplace. The Infectious Disease Preparedness and Response Plan is designed to reduce exposure for all employee/volunteers and, therefore, all employee/volunteers are required to comply with the Plan at all times. Failure to do so may result in disciplinary action up to and including immediate termination of employment.

\* \* \* \* \*

I acknowledge receipt of Catholic Charities Maine’s Infectious Disease Preparedness and Response Plan (the “Plan”). I understand that I am required to review the Plan and consult with Quality & Compliance if there is anything that I do not understand or cannot comply with. I further understand that my failure to comply with the Plan may lead to disciplinary action up to and including termination of employment. Nothing in this Plan alters the at-will nature of my employment.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Please print name

