



COVID-19 CBS Protocol

Revised 12.15. 2020

Staff & Patient Arrival & Departure Protocols

- Operations Manager (or another CARD team member who is responsible for opening the Center) Arrival
 - OM and/or Administrative staff should be excluded from work if they are sick
 - If staff have tested positive for COVID-19, they should remain under home isolation precautions until at least 24 hours have passed since recovery defined as resolution of fever without the use of fever-reducing medications and improvement in respiratory symptoms (e.g., cough, shortness of breath); **and**, at least 10 days have passed since symptoms first appeared.
 - If staff have fever with cough or shortness of breath and have tested negative for COVID-19, they should stay home away from others until 72 hours after fever is gone without the assistance of fever-reducing medications (e.g., acetaminophen) and symptoms of acute infection resolve.
 - If staff have fever with cough or shortness of breath and have not been tested for COVID-19, they should stay home away from others until 72 hours after fever is gone without the assistance of fever-reducing medications (e.g., acetaminophen) and symptoms of acute infection resolve.
 - If staff have other non-compatible symptoms and have not been tested for COVID-19, they should stay home until 24 hours after all symptoms are gone without the use of medicine.
 - If OM is unable to open the center, they should arrange for a Clinical Supervisor or AC to complete the following steps
 - OM arrives to center prior to arrival of first Behavior Technician & patient with enough time to complete appropriate sanitation procedures.
 - OM must always wear face covering when in the center unless alone in their private office with the door closed and following proper private office sanitation procedures.
 - OM enters center wearing face covering and washes hands immediately.
 - OM puts on gloves and keeps them on throughout the center disinfectant protocol.
 - OM sprays & wipes down exterior center door handle and surrounding area with antibacterial cleaner.
 - OM stands at designated center drop off point outside center wearing face covering at time of patient arrival or when doorbell chimes.
 - Behavior Technician Arrival
 - Behavior Technician arrives at center with enough time to get to designated patient drop off point prior to the start of the first schedule block.
 - Behavior Technician should practice good hygiene prior to entering the center
 - Behavior Technician puts on face covering upon exiting vehicle.
 - Behavior Technician should meet OM at designated patient drop-off location maintaining a 6-foot distance other than temperature check.
 - OM completes temperature & health screen with Behavior Technician prior to Behavior Technician contact with patient and prior to entering center
 - Behavior Technicians should be excluded from work if they are sick.
 - If staff have tested positive for COVID-19, they should remain under home isolation precautions for 10 days from specimen collection OR until 72 hours after



- fever is gone without the assistance of fever-reducing medications (e.g., acetaminophen) and symptoms of acute infection resolve, whichever is longer.
- If staff have fever with cough or shortness of breath and have tested negative for COVID-19, they should stay home away from others until 72 hours after fever is gone without the assistance of fever-reducing medications (e.g., acetaminophen) and symptoms of acute infection resolve.
 - If staff have fever with cough or shortness of breath and have not been tested for COVID-19, they should stay home away from others until 72 hours after fever is gone without the assistance of fever-reducing medications (e.g., acetaminophen) and symptoms of acute infection resolve.
 - If staff have other non-compatible symptoms and have not been tested for COVID-19, they should stay home until 24 hours after all symptoms are gone without the use of medicine.
- If Behavior Technician has a temperature of 100.4 or higher or does not pass health screen, they should not enter the center or, have contact with patient or other staff and should immediately return home.
 - The OM should inform caregiver that session is cancelled, unless another BT is available.
 - Once Behavior Technician has passed health and temperature screen, OM informs Behavior Technician which workstation they are assigned to for first scheduling block.
 - When scheduled patient has arrived and OM notifies Behavior Technician their assigned patient is present and ready to be escorted into the center, Behavior Technician starts session on iPad, puts on face shield (in addition to face covering) and escorts patient to bathroom to wash hands (both Behavior Technician & patient)
 - The Behavior Technician should then escort the patient to the assigned workstation keeping a minimum of 6 feet distance between other patient & Behavior Technician teams
- Patient Arrival & Drop-off
 - Patient & Caregiver arrive to designated center drop-off site prior to scheduled session to account for patient check-in procedure.
 - Parking Lot Procedure
 - Temperature & health screen will occur prior to caregiver departure or clinic entry
 - Whenever possible, caregiver and patient should stay in their vehicle until approached by OM.
 - OM takes the patient's temperature completes health screen with caregiver.
 - Patient is required to have temperature below 100.4 to exit vehicle.
 - OM notifies assigned Behavior Technician that patient is cleared to enter center
 - If drop-off from patient vehicle is not feasible for the Center, the following drop-off modifications may be considered:
 - Drop off can occur outside of the main entry door of the center.
 - Caregiver and patient should park and exit the vehicle.
 - Face coverings are recommended or required, depending on state and/or local guidance.
 - Caregiver should escort the patient to the designated drop-off location.
 - Center should consider having markers designating 6-foot spacing between other caregivers and patients waiting to drop-off.



- When at the front of the line, the OM should perform the health screen as noted above prior to allowing ONLY the patient to enter the center.
- Behavior Technician escorts patient to the entry of the center and immediately proceeds to nearest hand washing station.
 - Patient and Behavior Technician should wash hands
- Following hand washing, patient is escorted to assigned work area by assigned Behavior Technician.
- All personal belongings of both Behavior Technician and patient should be kept at assigned workstation.
- Staff should monitor all patients for signs and symptoms of respiratory infections.
 - Each center should identify an area where staff or patients would be isolated if they become symptomatic and cannot immediately leave the center.
 - Patients or staff who are symptomatic with respiratory illness should be isolated immediately and be separated from well students and staff until sick patients and staff can be sent home

General Session Health & Safety Guidelines

- Face Shields & Face Coverings
 - A face covering must be worn at all times by clinical staff while at the center from the time they exit their personal vehicle until the time they re-enter their personal vehicle.
 - Face covering requirement does not apply if it is not clinically appropriate for the clinician to wear.
 - In these situations, staff must utilize a face shield
 - Face covering requirement does not apply to individuals who are unable to wear a face covering due to a medical condition
 - In these situations, staff must utilize a face shield
 - See below for specific considerations regarding face shields and face coverings
- Face Shields
 - Clinical Supervisor
 - Clinical Supervisors should wear face shields when interacting with a patient while at the center
 - Clinical Supervisors should sanitize face shields between patients
 - Behavior Technicians
 - Behavior Technicians should wear face shields when interacting with a patient while at the center
 - Behavior Technicians should sanitize face shields between each scheduling block and between patients
- Face Coverings
 - Clinical Supervisor
 - Clinical Supervisors should always wear face coverings. If face coverings are not feasible, face shields must be worn. Some examples include:
 - An individual is unable to wear a face covering due to a medical condition. In these situations, staff must utilize a face shield.
 - The face covering impedes interaction with the patient or BT
 - The face covering hinders learning opportunities
 - A teaching protocol requires the patient to see the Clinical Supervisor's mouth
 - Behavior Technician
 - Behavior Technicians should always wear face coverings. If face coverings are not feasible, face shields must be worn. Some examples include:



- An individual is unable to wear a face covering due to a medical condition. In these situations, staff must utilize a face shield.
- It impedes interaction with the patient
- It hinders learning opportunities
- A teaching protocol requires the patient to see the Behavior Technician's mouth
- Patient
 - Though not mandatory, it is recommended that patients wear face coverings while in the center.
 - If a patient is resistant to wearing face coverings, consider adding this skill to their treatment program
 - Patients 2 and under should not wear face coverings at any time as they have been identified as a suffocation hazard.
- Hand Washing Schedule for Staff & Patients (warm water with soap for at least 20 seconds)
 - Behavior Technicians & patients must wash hands upon entering the center
 - Behavior Technicians must wash their hands between patients
 - Behavior Technicians & patients should practice good hygiene which includes regular hand washing
 - Following coughs or sneezes
 - Prior to and after preparing or consuming food
 - Following toileting
- Hand sanitizer
 - May be used if patient or staff are unable to implement hand washing schedule as noted above
- Physical Distancing
 - A Behavior Technician and assigned patient team can be less than 6 feet away from each other if the Behavior Technician is always wearing a face covering and adheres to good hygiene procedures for both patient & Behavior Technician
 - Behavior Technicians should discourage any close physical contact such as hugging, tickling, blowing raspberries, providing sensory stimulation, etc.
 - A Behavior Technician and patient team should always remain at least 6 feet away from other staff members and other patients
 - All group activities should be discontinued, including:
 - Activity where anyone other than the patient Behavior Technician team (can include the Clinical Supervisor) are within 6 feet of the team
 - In-person social skills groups
 - In-person circle time activities
 - In-person meal and snack times
 - In-person break time activities
- Capacity & Room Dividers
 - To promote physical distancing and allow for adequate space for treatment, it is recommended that Staff allocate an 8'x8' space for each Clinician and Patient pairing
 - OM's must prioritize filling individual rooms before allocating multiple Patient and Staff pairings to one room
 - Based on the 8'x8' spacing guidance, center should identify areas/rooms which accommodate more than one Patient and Staff pairing
 - Based on patient load in a specific scheduling block, when a center will require multiple patient teams in one room at the same time, OM's should consider submitting a request to facilities for the purchase of physical



dividers to help identify clear boundaries between multiple Patient/Staff pairings who are working in the same room

- Dividers are available as a tool to promote physical distancing but are not mandatory, based on the above spacing guidance and the nature of your individual center and patient base, clinical and operations staff should use their best judgement in determining if dividers are required within their center

○ Items

▪ Patient Stimuli

- Electronic stimuli should be used whenever possible
- If patient requires physical stimuli, it should be kept in patient storage bin at center and should only consist of laminated (non-cardboard or paper) and hard surface items that can be safely cleaned with soap and water and/or antibacterial spray
 - If patient has both home and center-based services, stimuli should travel with the patient and be cleaned before and after use.
- Stimuli should not be shared between patients.

▪ Toys

- Only toys with low contamination risk and those that can be safely cleaned with soap and water and/or antibacterial spray are allowed in the center and will be sanitized daily by OM prior to staff and patient arrival.
 - The following items should not be available to patients at this time:
 - Stuffed animals
 - Dolls with hair, clothes, or non-plastic bodies
 - Cloth items such as dress up clothes, bean bag chairs, pillows, etc.
 - Toys that encourage mouthing, such as pretend food or utensils
 - Ball pits
- Following interaction with a toy, the Behavior Technician should have the patient help with proper sanitation procedures prior to putting it away
 - See cleaning toys protocol below

○ Physical locations

▪ Kitchen

- Follow appropriate social distancing rules so that Behavior Technician patient teams in the kitchen are always 6 feet or more from other patient and Behavior Technician teams.
- Have markers outside of kitchen to indicate where patient and staff should wait if room is occupied beyond safe capacity.

▪ Restroom

- Follow appropriate social distancing rules so that Behavior Technician patient teams in the bathroom are always at least 6 feet away from each other at all times.
- Have markers outside of bathroom to indicate where patient and staff should wait if room is occupied beyond safe capacity.

▪ Individual Workstations

- Patient and Behavior Technician should sanitize workstation upon entry and following initial hand washing.
 - Wipe down all hard surfaces.



- Only individual Behavior Technician patient teams are allowed in assigned workstation during scheduled therapy block.
- iMessage should be used to contact other staff as needed.
- Food & Mealtimes
 - Caregivers are advised to send patient meals in disposable bags.
 - Caregivers are advised to send patient meals that do not have to be cooked, heated, or refrigerated.
 - Caregivers are advised to package snack items in a container or bag that the patient can access and open independently.
 - If a patient has a meal that must be cooked or heated, it is advised that CARD staff stagger meal preparation times. The need to heat meals should be an exception, and caregivers should be reminded to send food that adheres to the guidelines.
 - Meals should be eaten in the assigned workstation.
 - Meals should not be eaten in groups.

General Session Structure

- Entry & hand washing
- Start of session sanitation
 - Clean stimuli
 - Clean hard surfaces of workstation
 - Gather and clean toys
- End of session sanitation
 - Clean stimuli
 - Clean hard surfaces of workstation
 - Gather and clean toys prior to putting away
- Hand Washing & Pick Up

Patient Pick Up

- Caregiver
 - Caregivers should be instructed to arrive for pick-up 10-15 minutes prior to the scheduled end of the session to account for parking, walking to the center, and waiting for other Patients to be picked-up.
 - If the Caregiver is late, they should call the center and inform the OM what time they will be arriving to pick up their child.
 - The OM should utilize iMessage to inform the Behavior Technician that the parent is running late and to extend their session to the specified time of arrival
 - Caregivers should wait outside of the center on designated physical distance markers to maintain a 6-foot distance from others.
 - Caregivers should not approach the Center entry door until the prior family has vacated the pick-up spot.
 - Caregiver should wait at the pick-up spot outside of the center until their child is brought out to them by the Behavior Technician.
 - Caregiver should sign for the session on Behavior Technician iPad and then may leave the Center with their child.
 - Caregiver should not enter the center during pick-up.
- Operations Manager



- At the end of every scheduling block, the OM should don their face covering and wait just outside the center door.
- The OM should call out the patient first name when their caregiver has arrived to pick them up so that the Behavior Technician can escort the patient to the caregiver waiting outside of the center at the door
 - iMessage can also be utilized to inform the Behavior Technician of the caregiver's arrival at the center for pick-up.
- Behavior Technician & Patient
 - When the scheduled session is complete and the patient has done the final hand-washing, the assigned Behavior Technician should have the patient take all of their belongings and exit the assigned workstation location.
 - Although each center may be different, there should be physical distancing markers on the center floor to show the Patient and Behavior Technician where to stand to wait for the arrival of the caregiver
 - Ensure 6-foot distance from other Behavior Technicians and Patients
 - While waiting for the Caregiver, the Behavior Technician should implement antecedent interventions and/or ensure that the patient is occupied with a preferred task to avoid the occurrence of any challenging behaviors while waiting
 - When Caregiver arrives outside of the center, the Behavior Technician should wait for the OM to iMessage or call out the Patient's first name and then walk the patient to the caregiver who is waiting outside of the center door.

Diapering/Toileting Accidents

When it becomes necessary to change a patient, staff will ensure they are wearing appropriate PPE which shall include a face covering and face shield and wash their hands and wash the patient's hands before they begin, and wear disposable gloves. Staff must follow safe diaper changing procedures as follows:

- Prepare (includes putting on disposable gloves)
- Clean the patient
- Place wet or soiled closed in a bag
- Remove trash (soiled diaper and wipes)
- Replace diaper
- Wash patient's hands
- Clean up diapering station
- Wash hands

After diapering, staff will wash their hands (even if they were wearing gloves) and disinfect the diapering area. If the surface is dirty, it will be cleaned with detergent or soap and water prior to disinfection.

***If staff are uncomfortable changing the patient, the patient's caregiver must be called immediately to change the patient.**