

WELCOME!







NORTHEAST INDIANA -

Parkview Health Update

Jolynn Suko, Chief Innovation Officer



GETTING BACK TO BUSINESS

- The virus is in Community Spread
 - Not limited to one place or area
 - Source cannot be pinpointed
- Now part of our every day
 - Vaccine 12 18 months away
 - No herd immunity
 - Goal to keep surges low and as many people safe as possible
- Implementing and evolving safe practices will help our employees, customers and community

GETTING BACK TO BUSINESS

- We are here and ready to serve
- Safe practices to help our co-workers, patients and community
- Close monitoring
 - Restarting services gradually
 - Visitor restrictions remain in effect



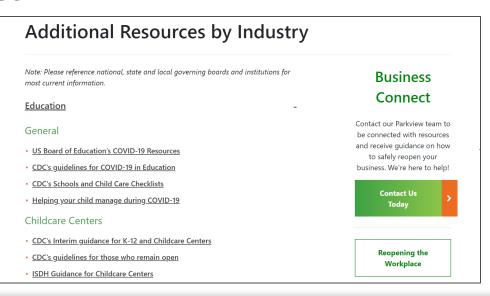
GETTING BACK TO BUSINESS

How can you re-open safely and wisely?

Parkview Business Connect

Sharing what have we learned; Sharing the best from others

- Living document
 - Workplace considerations
 - People considerations
 - Best practice Resources page





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BACK ON TRACK









GUIDING PRINCIPLES

The number of hospitalized COVID-19 patients statewide has decreased for 14 days

The state retains its surge capacity for critical care beds and ventilators

The state retains the ability to test all Hoosiers who are COVID-19 symptomatic, as well as healthcare workers, essential workers, first responders, and others as delineated on the ISDH website

Health officials have systems in place to contact all individuals who test positive for COVID-19 and complete contact tracing



BACK ON TRACK INDIANA PLAN EXPLAINED



	STAGE 1: March 24 - May 4	STAGE 2: May 4 - 23	STAGE 3: May 24 - June 13	STAGE 4: June 14 - July 3	STAGE 5: July 4 and Beyond
Social Gatherings	10 People or Fewer	25 People or Fewer	100 People or Fewer	250 People or Fewer	250+ People Permitted
Facial Coverings	Recommended	Recommended	Recommended	Optional	Optional
Government Offices	Closed to the Public	Limited Public Access	Limited Public Access		
Manufacturing, Industrial	D	J			
Office Settings	D	Remote Work Encouraged	Remote Work Encouraged		
Retail	D		9		
Restaurants	D	May 11th			
Bars and Clubs			J		
Gyms					
Personal Services	J	May 11th*	J	J	J
Entertainment and Tourism	J	J	J		
Religious Services		Services May Convene Following Guidelines Starting May 8th	Services May Convene Following Guidelines	Services May Convene Following Guidelines	





NORTHEAST INDIANA UPDATES







NORTHEAST INDIANA -

Industry	Date/Time	
Manufacturing/Warehousing	Thursday, April 30 at 9 a.m.	VIEW RECORDING DOWNLOAD SLIDES
Restaurants/Hospitality	Thursday, April 30 at 11 a.m.	VIEW RECORDING DOWNLOAD SLIDES
Retail	Thursday, April 30 at 1 p.m.	VIEW RECORDING DOWNLOAD SLIDES
Other/Small Business	Thursday, April 30 at 3 p.m.	VIEW RECORDING DOWNLOAD SLIDES
Professional Services/Office	Friday, May 1 at 9 a.m.	VIEW RECORDING DOWNLOAD SLIDES
Personal Services/Real Estate	Friday, May 1 at 11 a.m.	VIEW RECORDING DOWNLOAD SLIDES
Religious Institutions	Friday, May 1 at 1 p.m.	VIEW RECORDING DOWNLOAD SLIDES
Schools/Education	Monday, May 4 at 1 p.m.	VIEW RECORDING DOWNLOAD SLIDES

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Workplace & People Considerations

Dena Jacquay,

Chief Community & Human Resource Officer



WORKPLACE & PEOPLE

Preparedness Plan

- Identify a workplace coordinator
- Build flexibility & fluidity into plan
- What stays in your new normal?

WORKPLACE & PEOPLE

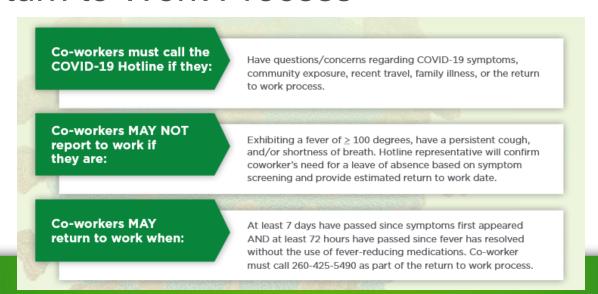
Preparedness Plan

- Phased return of people
- Communicate and Educate with co-workers, students, and families on how they can help reduce spread of COVID-19
- Consider policies & practices for the vulnerable
- Ask staff. What do they need?
- Ask families. What makes them feel safe in your school?

WORKPLACE & PEOPLE

What Parkview is Doing

Return to Work Process





Industry Specific Insights

Dr. Mike Knipp,

Parkview Total Health Chief Medical Officer



CHILD CARE PROGRAMS DURING THE COVID-19 PANDEMIC

ALL

YES



The purpose of this tool is to assist directors and administrators in making (re)opening decisions regarding child care programs during the COVID-19 pandemic. It is important to check with state and local health officials and other partners to determine the most appropriate actions while adjusting to meet the unique needs and circumstances of the local community.

Should you consider opening?

- √ Will reopening be consistent with applicable state and local orders?
- Are you ready to protect children and employees at <u>higher</u> <u>risk</u> for severe illness?

YES

Are you able to screen children and employees upon arrival for symptoms and history of exposure?



Are recommended health and safety actions in place?

- Promote healthy hygiene practices such as hand washing and employees wearing a cloth face covering, as feasible
- Intensify <u>cleaning</u>, <u>sanitization</u>, <u>disinfection</u>, and ventilation
- / Encourage social distancing through increased spacing, small groups and limited mixing between groups, if feasible. For family child care, monitor distance between children not playing together and maintain distance between children during nap time.
- ✓ Adjust activities and procedures to limit sharing of items such as toys, belongings, supplies, and equipment
- Train all employees on health and safety protocols



Is ongoing monitoring in place?

- Develop and implement procedures to check for signs and symptoms of children and employees daily upon arrival, as feasible
- If feasible, implement enhanced screening for children and employees who have recently been present in areas of high transmission, including temperature checks and symptom monitoring





- Regularly communicate and monitor developments with local authorities, employees, and families regarding cases, exposures, and updates to policies and procedures.
- Monitor child and employee absences and have a pool of trained substitutes and flexible leave policies and practices. For family child care, if feasible, have a plan for a substitute caregiver if provider or a family member in the home gets sick
- Be ready to consult with the local health authorities if there are cases in the facility or an increase in cases in the local area



- Identify your workplace coordinator
- Determine if you're ready to open
- July 4 is not the finish line.
 Think about long-view





OPEN

AND

MONITOR

ALL

YES

CDC GUIDANCE – May 20

	STEP 1	STEP 2	STEP 3
TRIGGER			
Scaling Up Operations	 Establish & maintain communication with State and Local officials Protect & support staff, children and families who are at higher risk Follow CDC's supplemental guidance for open child care programs Encourage users of shared buildings to follow guidance 		
	Only children of essential workers	All children w/enhanced social distancing measures	All children w/social distancing measures

CDC GUIDANCE – May 20

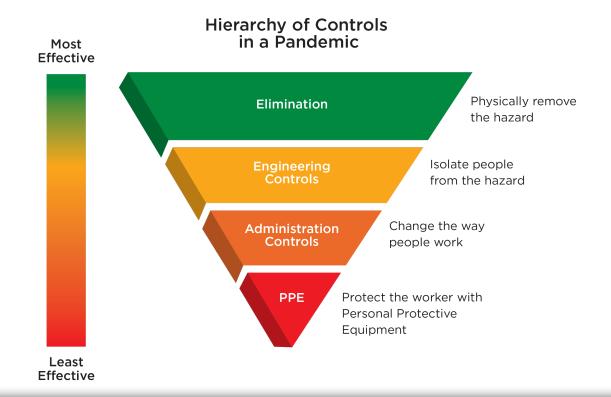
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		STEP 1	STEP 2	STEP 3
Safety Actions	Promote Healthy Hygiene Practices	 Teach & reinforce washing hands, covering coughs & sneezes Teach & reinforce proper use of cloth face coverings for all staff. Especially when social distancing is not possible. Have adequate supplies including soap, 60% alcohol hand sanitizer, paper towels, tissues Post signs on how to stop spread of COVID-19; hand washing; everyday protective measures; safe mask use 		
	Intensify Cleaning, Disinfection, Ventilation	 Clean, sanitize, & disinfect frequently touched surfaces multiple times per day and between use of shared objects Avoid using items that are not easily cleaned (like plush or soft toys) Ensure safe & correct application of disinfectants; and keep products away from children Ensure ventilation systems operate properly and increase circulation of outdoor air as much as possible Ensure all water systems and features (like drinking fountains) are safe after prolonged facility shutdown 		
	Promote Social Distancing	 Keep each child's belongs separated & individually labeled in storage containers, cubbies, etc. which are to be taken home and cleaned each day Ensure adequate supplies to minimize shared-use of high-touch items OR limit use by one group at a time, and clean & disinfect between use If food is offered, have pre-packaged boxes or bags for each person; no buffets or family-style meals Avoid sharing food and utensils; electronic devices; toys; books; other learning aids Avoid immediate contact (such ask shaking hands, hugging, etc.) Train all staff in all safety actions. Conduct training virtually or ensure social distance if in-person. 		
		 Space out seating & bedding (head- Close communal spaces like game r stagger and disinfect between uses 	, and extracurricular activities th social distancing & proper hand eers, and activities involving other groups o-toe positioning) to 6 ft apart if possible coms & dining halls if possible OR f cafeteria. Use a plate and limit shared R use other protocols to limit direct	 Consider keeping classes of same group of children & same providers each day; Allow minimal mixing between groups Limit gatherings & events to those with social distancing & proper hand hygiene Continue to space out seating & bedding (head-to-toe positioning) to 6 ft apart if possible Consider keeping communal spaces like game rooms & dining halls closed if possible OR stagger and disinfect between uses Consider continuing plated meals Consider limiting nonessential visitors, volunteers, & activities Consider staggering arrival and drop-off times OR use other protocols to limit close contact with parents as much as possible

CDC GUIDANCE – May 20

		STEP 1	STEP 2	STEP 3
Monitoring & Preparing	Check for signs & symptoms	 Screen children upon arrival as part of a routine, daily health check. Options for screening are in "Guidance for Childcare Programs that Remain Open" and "General Business FAQs" Implement health checks safely and respectfully with measures to ensure confidentiality and in accordance with any laws Encourage staff and children to stay home if they are sick 		
	Plan for when person becomes sick	 Identify area to separate anyone exhibiting COVID-19 symptoms during hours of operation. Children should be supervised. Establish procedures for safely transporting anyone sick to their home or healthcare facility if appropriate Notify local health officials, staff, and families immediately of any possible case of COVID-19 while maintaining confidentiality according to the ADA and other applicable privacy laws Close off areas used by any sick person and do not use them until they've been cleaned. Clean & disinfect 24 hours after closing to reduce risk to person cleaning OR wait as long as possible. Ensure safe and correct application of disinfectants. Advise sick staff or children to not return until they've met CDC criteria to discontinue home isolation Inform those who've had close contact (DEFINE) to person diagnosed with COVID-19 to stay home and self-monitor for symptoms and follow CDC guidance if symptoms develop. If person does not have symptoms, follow appropriate CDC guidance for home isolation. 		
	Maintain Healthy Operations	order to maintain sufficient staffing Designate a staff person responsib Create a communication system fo Support coping and resilience amo Check State and Local health depa If community is deemed in significa	r trends in staff or children absences due to illn levels. le for responding to COVID-19 concerns. Staff r staff and families for self-reporting of sympton ng employees and children interest daily about spread of COVID-19 nt mitigation, child care programs should close is determined to have been in building and possible.	should know who and how to contact them. ns, and notifications of exposures and closures in area and adjust operations accordingly except for those caring for essential workers



MORE THAN A MASK



MORE THAN A MASK

ELIMINATION	 Symptomatic staff and students asked to stay home Offer remote learning instead of in-person classroom education
ENGINEERING	 Desks and Chairs are removed to ensure safe social distancing for each space/size Lobby areas, Common spaces, and Gyms are marked to promote social distancing Remove self-service vending, common use items in breakrooms, and lunch rooms
ADMINISTRATION	 All staff and students asked to self-monitor for symptoms Stagger start times and bus arrivals to minimize # of people arriving at one time; lines Frequent and proper cleaning of high touch areas and items; in between all classes Place hand sanitizer in high-contact locations including entrances, lunchrooms, etc. Display signage throughout building on handwashing and other preventive measures Avoid handing out materials; consider paperless/digital sharing of information
PPE	All staff asked to wear a mask during day





Q&A SESSION







NORTHEAST INDIANA -

How can we communicate appropriately with our staff and families about expectations and precautions we will be taking?

- Follow guidelines from CDC, local health department, and The Office of Child Care and Out-of-School Learning (The Office) and cite your sources
- Provide updates in a timely manner
- Share on all channels phone, email, text, social media, mailing
- Post signs throughout building highlighting your extra steps (see CDC)
- Offer virtual training and parent meetings ahead of opening

How can we help parents be prepared for changes and possible closures due to illness within the school?

- Create a communication system to be used for self-reporting and notification of exposures and closures
- Ensure parents are aware of how messages will be shared
- Be transparent
- Share precautions ahead of time so that parents are prepared
- Share from the perspective of wanting to minimize the spread of virus

What does proper cleaning of a classroom and play area look like?

The Office recommends:

- Thoroughly clean before arrival of children using recommended products including cleaning the toys and other materials
- Repeat process at end of day
- During operations, classrooms and items are wiped down as needed, especially before snacks/lunch; and bedding/sheets are also laundered twice a day
- Ensure cleaning products are out of reach of children



How do we make cleaning and hand hygiene something kids want to do and can participate in?

- 20 second handwashing is singing "Happy Birthday" twice, so make a game of it
- Have children offer reminders to one another handwashing, covering coughs & sneezes
- Encourage parents to practice good handwashing at home so it becomes part of children's "norm"
- Reward good behavior

How do we open and operate while minimizing transmission of COVID-19 in our facility?

- Reference CDC decision tree for opening to determine if you're ready
- Reference CDC Interim Guidance for Child Care Programs
- Minimize transmission by implementing hierarchy of controls. Strategies could include:
 - Ask parents to symptom check their children; ill children must stay home
 - Parents not permitted past lobby; handover to classroom staff; stagger drop-off times
 - Staff to wear masks
 - Keep same groups of children & staff

- Ample handwashing and/or hand sanitizer
- No visitors allowed in center unless prearranged
- Consider payment options for families missing days
- Consider vulnerable staff members and children

Children of all ages want to be close to and interact with one another. Do we really need to keep them from playing closely or even hugging?

- You cannot prevent children from touching one another at young ages
 - Social and emotional development must still be a focus
- Consider modeling new approaches to interactions appropriate for young children
 - Creative approaches like "air hugs" can used
 Don't miss the good for the perfect



How can we safely offer childcare for children who would be considered vulnerable?

- Caring for vulnerable children requires consideration at all times, not just now
- Care should be consistent and offer routines including providing child with the same teacher
- Regular communication with parents is important
 - Are there any new or additional accommodations for the child?
 - How are you talking about the pandemic at home?

Several of our teachers are over 55 years old. How do they work one-on-one with children safely? Should teachers and kids be socially distant?

- Childcare centers cannot socially distance staff and children
- Governor Holcomb's orders mandates to accommodate those teachers who are at high risk, including those at 60+ of age and those with higher risk factors
- Childcare centers should determine how to respond to the accommodation including PTO access, virtual training, job functions, remote work, etc.

What do we need to know about multisystem inflammatory syndrome in children? We know that children aren't at high-risk to die from COVID-19 but do we need to be concerned about the new development?

- New child complications do not change course of action
- Childcare centers should expect to have children sent home and self-monitor

Should preschoolers be in masks?

- Children under 2 should not be in a mask
- Young children, over age two, can wear masks but it is not necessary and they should not be mandated

We cannot find the cleaning and sanitizing supplies we need. Can you help?

- Greater Fort Wayne Inc.'s COVID-19 Response Center
 - Covid19.gfwinc.com
 - Local Mask & Sanitizer Source spreadsheet
- State of Indiana's PPE Marketplace
 - BackOnTrack.in.gov/ppemarketplace.htm

What steps are taken if staff, student, or a family member tests positive?

- Anyone who tests positive is placed in isolation by the health department (away from others in household).
 - If they were symptomatic, they must remain in isolation until:
 - 10 days has passed since symptoms started
 - AND person is fever free for 72 hours without medicine
 - AND person shows overall improvement in symptoms
 - If they were asymptomatic (no symptoms), they must remain in isolation until 10 days has passed since date test was collected
- Close household contacts of positive case must:
 - Stay home and complete 14-day quarantine period (starts on last day of exposure to confirmed case, and they must remained separated from the case).
 - OR if no isolation from positive person in household is possible (such as for a parent caring for a child), the household member's quarantine starts when positive person's isolation period ends; could be 24 day period)



If a child's family member tests positive or is under quarantine for possible exposure, should the child be allowed in center?

- No, child is not allowed to attend school/childcare until they are released from quarantine
- The child must remain home in quarantine and self-monitor for symptoms throughout the family member's isolation period
- The quarantine & self-monitoring period is two weeks (unless they continue to have exposure to the adult family member)
- Childcare centers should consider sending learning opportunities home to children who are quarantining

If a staff member or student tests positive, do we need to close that classroom? The entire school? If yes, for how long?

- Everyone should continue to self-monitor for symptoms
- Contact your local health department
- "High-risk contacts" (being within 6 ft of person for more than 10 minutes without PPE MUST:
 - Individual should begin a 14-day quarantine unless they are an essential worker (special situation applies)
 - If an entire classroom/team/group meets that high risk criteria, the class/team/group should be closed or stopped for the 14-day period.
- If location is part of a larger facility and exposure is limited to one classroom, other areas MAY be able to stay open. *Individual situations may vary and certain situations may result in facility closure for safety.*

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