

## Staffing Shortages Contingency Plan for Staff Model Agency Operated Homes (AOHs)

### Step 1: Ongoing Prevention Strategies to Reduce Transmission of COVID-19

Activities	Individuals Responsible
<input type="checkbox"/> Follow evidence based preventative measures as directed in the <i>Pandemic Measures in the Workplace Protocol (COVID-19 Safety Plan)</i> and <i>Child Welfare Service Contingency Plan (Providing Services During the COVID-19 Pandemic)</i>	All individuals working or visiting in Staff Model AOHs
<input type="checkbox"/> In particular: <ul style="list-style-type: none"> <li>- Mandatory vaccination policy for staff members and offering residents access to a complete series of COVID-19 vaccine shots</li> <li>- Self-monitoring for signs and symptoms of COVID-19</li> <li>- Daily symptom assessment of residents to identify any new or worsening symptoms of COVID-19</li> <li>- Screening: completion of Daily Health Screening Questionnaire prior to each shift and not coming into work if there is a positive answer to any of the questions</li> <li>- Rapid Antigen Testing: three times per week and results emailed to agency contact prior to commencing scheduled shift. When test result is positive not coming into work</li> <li>- Casual relief workers complete a Rapid Antigen Test prior to beginning every shift and result is emailed to agency contact prior to commencing scheduled shift</li> <li>- Personal hygiene: regular hand washing</li> <li>- Social distancing</li> <li>- Masks: wearing a double 3- or 4-layer disposal mask or KN95 mask as provided by the agency during scheduled shift (both indoors and outdoors; regardless of one’s COVID-19 vaccination status); when 6 feet distance cannot be maintained from a resident or another staff member a face shield is worn as well</li> <li>- During breaks, to prevent staff-to-staff transmission of COVID-19, staff should be physically distanced before removing their mask for eating and drinking</li> </ul>	All individuals working in Staff Model AOHs and residents

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<ul style="list-style-type: none"> <li>- Consider whether to move the home to Step 3 while waiting for a test result (health and safety of staff members; impact on the health, safety, well-being and stability of residents)</li> <li>- Wearing appropriate PPE when providing direct care to a resident – double 3- or 4-layer disposal mask or KN95 respirator, isolation gown, gloves, eye protection (face shield or goggles)</li> <li>- Inform resident’s family, child care worker (Unit) and representatives of resident’s First Nation</li> <li>- Complete Serious Occurrence Reporting process</li> </ul>	<p>Supervisor, Service Manager, Director of Services</p> <p>All individuals working in the Staff Model AOH/visitors</p> <p>Supervisor, Staff Model AOH</p> <p>Supervisor, Staff Model AOH</p>
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### Step 2: Responding to Staffing Shortages in Agency Operated Homes

Activities	Individuals Responsible
<input type="checkbox"/> Contact and schedule staff who have not reached their maximum hours worked	Supervisors, Staff Model AOHs
<input type="checkbox"/> Contact and schedule casual relief and case aide workers	Supervisors, Staff Model AOHs
<input type="checkbox"/> Circulate email to agency employees requesting volunteers to cover shifts in Staff Model AOHs	Directors of Service
<input type="checkbox"/> Service Managers contact Supervisors to discuss staffing needs in Units and possible re-deployment of employees to cover shifts in Staff Model AOHs	Service Managers/Supervisors
<input type="checkbox"/> Consult with Human Resources and Finance Departments to confirm the details of work hours and payment for employees volunteering to cover shifts	Directors of Service
<input type="checkbox"/> Establish a list of volunteers willing and able to cover shifts and forward to Service Manager responsible for Staff Model AOHs	Directors of Service/Service Managers

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### Step 3: Responding to Staffing Requirements for COVID-19 Positive Residents

Activities	Individuals Responsible
<input type="checkbox"/> When a resident has COVID-19 a staff member isolates in the home for the isolation period of 5 days or longer if resident continues to demonstrate symptoms or test positive <ul style="list-style-type: none"> <li>- Groceries are delivered to the home</li> <li>- Cold fogging occurs for additional disinfection of the home</li> <li>- When there is another resident living in the home, he or she remains in the home</li> </ul>	All individuals working in the Staff Model AOH and residents in the home
<input type="checkbox"/> Consider whether to move the resident out of the Staff Model AOH into another agency residential placement <ul style="list-style-type: none"> <li>- Availability of alternate placements</li> <li>- Availability of staff to work long term shifts</li> <li>- Resident’s physical, emotional and behavioral needs</li> <li>- Consultation with resident’s child care worker and supervisor</li> </ul>	Supervisor and Service Manager, Staff Model AOH Director of Services

### Definitions

#### Close Contact of a COVID-19 Case

While factors health officials use to identify “Close Contacts” vary, for the purposes of this policy a staff person is a close contact if identified as a close contact by health or pandemic officials. If not contacted by health or pandemic officials, they may be a close contact if they become aware that someone has tested positive with whom:

- they live with in the same home
- they were closer than 6 feet from for 15 minutes or more (at one time or accumulated within a 24 hour period) with or without a mask
- they spent time with in a closed in space for a prolonged period of time (in a home, restaurant, office) with or without a mask.

Household contacts are at higher risk of getting sick with COVID-19 because of how much and what kind of contact they have with the person who has COVID-19.

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Household– refers to a group of individuals (e.g., residents) who live together AND are part of each other’s daily routine and therefore spend most of their time in close physical contact with one another. Physical distancing may not be possible or necessary among residents who reside in a small staff model AOH setting that is equivalent to a household. (Reference: *Covid-19 Guidance for MCCSS-funded and Licensed Congregate Living Settings January 2022*)

**Note: When a youth with probable or diagnosed COVID 19 is placed in a hotel room with an agency employee for the isolation period, the hotel room is considered a Place of Safety not a congregate care living situation.**

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