NASHOBA LEARNING GROUP, INC.

PANDEMIC PREPAREDNESS PLAN

COVID-19

MARCH 12th 2020
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Objective: Nashoba Learning Group, Inc. (NLG) serves individuals with autism and related disorders with a mission to enable them to function with the greatest possible productivity and independence in the community, home and workplace throughout their lives. Many in NLG’s student and member population are immunocompromised and/or lack the ability to accurately identify the onset of symptomatic indicators resulting from an illness leaving them more susceptible to communicable diseases. With the Coronavirus referred to as COVID-19 continuing to spread internationally, the World Health Organization (WHO) and Center for Disease Control and Prevention (CDC) have communicated this will likely become a world-wide pandemic. The continued transmission internationally of COVID-19 and the fact that there is currently no cure or medication for symptom relief poses a significant risk to the health and wellbeing of NLG’s students, members, and staff. The purpose of this Plan is to mitigate that risk by providing education, guidance, resources and procedures to manage through an outbreak of COVID-19 if/when it impacts our organization.

Background

The CDC is responding to a new respiratory disease – coronavirus disease 2019 (COVID-19). COVID-19 is spreading globally and there have been instances of COVID-19 community spread in the United States. COVID-19 is a highly contagious respiratory virus. On January 30, 2020, the International Health Regulations Emergency Committee of the World Health Organization declared the outbreak a “public health emergency of international concern” (PHEIC). On January 31, 2020, Health and Human Services Secretary Alex M. Azar II declared a public health emergency (PHE) for the United States to aid the nation’s healthcare community in responding to COVID-19.

Early on, many of the patients at the epicenter of the outbreak in Wuhan, Hubei Province, China had some link to a large seafood and live animal market, suggesting animal-to-person spread. Later, a growing number of patients reportedly did not have exposure to animal markets, indicating person-to-person spread. Person-to-person spread was subsequently reported outside Hubei and in countries outside China, including in the United States. Some international destinations also have apparent community spread with the virus that causes COVID-19, as do some parts of the United States. Community spread means some people have been infected and it is not known how or where they became exposed.

Keeping this Pandemic in Perspective: It is important to recognize that the CDC estimates that so far this season there have been at least 34 million flu illnesses, 350,000 hospitalizations and 20,000 deaths from flu in the U.S. Globally, the World Health Organization (WHO) estimates that the flu kills 290,000 to 650,000 people each year, and per the CDC, up to 61,000 of those deaths occurred in the US annually since 2010.
Assumptions
Predicted spread and severity: The virus is thought to spread mainly from person-to-person.

- Between people who are in close contact with one another (within about 6 feet).
- Through respiratory droplets produced when an infected person coughs or sneezes.

These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.

- People are thought to be most contagious when they are most symptomatic (the sickest).
- Some spread might be possible before people show symptoms; there have been reports of this occurring with this new coronavirus, but this is not thought to be the main way the virus spreads.

It may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the main way the virus spreads.

How easily a virus spreads from person-to-person can vary. Some viruses are highly contagious (spread easily), like measles, while other viruses do not spread as easily. Another factor is whether the spread is sustained, spreading continually without stopping.

The virus that causes COVID-19 seems to be spreading easily and sustainably in the community (“community spread”) in some affected geographic areas.

Plan
Purpose & Objectives
A pandemic has the potential of being devastating to the mission and operations of NLG without proper planning to address the threat proactively and, when needed, respond to potential and real occurrences immediately and decisively. Therefore, this plan has been developed specific to the needs of NLG’s staff, students, members and operations.

The plan has been developed in service of the following two objectives:

1. Reduce the spread of the virus within NLG facilities.
2. Sustain student/member programming and general operations.
1. Reduce the Spread of the Virus within NLG Facilities

Activities related to reducing the spread of the virus will include consistent communication to the NLG community, education to staff, students/members and families and a plan developed to adapt to potential business challenges (programming and operational) and threats resulting from the pandemic.

Communication

Upon notification by the State Health Department that a potential outbreak of a pandemic coronavirus is occurring within our service area, NLG will follow recommendations from external sources (listed in Appendix A) regarding the pandemic virus and will ensure that internal communications within NLG occur to reduce the risk of infection throughout the organization as recommended by those external sources.

- Reducing risk of infected persons (students, members, staff, visitors) by ensuring those who have signs and symptoms of illness are informed not to enter the facility to prevent exposure and transmission of disease.
- Communication to NLG staff and parents/guardians regarding procedural and/or policy changes resulting from travel restrictions communicated by the CDC and/or U.S. State Department (see Appendix B for CDC Travel Alert Threat Levels)
- Disseminate information about the pandemic preparedness and response plan.
- Anticipate the potential fear and anxiety of students, members, and staff as a result of rumors and misinformation, and plan rapid and accurate communications accordingly.
- Disseminate information for students, members and staff who have families and dependents about the potential impact a pandemic outbreak can have and how to prepare their families to respond to program and community service interruptions.
- Consult with and prepare NLG Administration and Maintenance to function with a significantly reduced workforce due to excessive absenteeism resulting from the illness;
- Consult with, and prepare NLG Administration to implement policies and procedures for containment measures (canceling committee meetings, travel, events and other community gatherings, holding meetings by teleconference, excluding visitors from the building).
- Consult with and prepare NLG Administration as a result of information received by local and state public health officials, and dependent upon the significance of the outbreak, considering if and/or when NLG will close.
- Communicate with NLG’s Board of Directors to share plans and consult on implementation of safety measures and plans to reduce costs if revenue declines significantly as a result of the pandemic.
Closures, Delays, Dismissals: Communications to NLG staff, parents/guardians, residences, constituent agencies and transportation companies regarding program and/or location closures, delays or early dismissals shall continue to be communicated utilizing the following mediums:

- Rave Alerts System: those who have registered and signed up will receive text notifications via this system [https://www.getrave.com/login/nashobalearninggroup](https://www.getrave.com/login/nashobalearninggroup). It is the responsibility of those who sign up to receive alerts through this system, to update their Rave Alerts settings if their email address or phone number changes. For those who have not yet done so but would like to, we have attached instructions to sign up to this plan.
- NLG’s website at [www.nashobalearninggroup.org](http://www.nashobalearninggroup.org);
- NLG’s official facebook page;
- The following media outlets:
  - WCVB Channel 5 and on their website at [www.thebostonchannel.com](http://www.thebostonchannel.com);
  - WBZ Channel 4, news radio 1030AM and their website at [www.cbsboston.com](http://www.cbsboston.com);
  - WHDH Channel 7 (NBC) and Channel 56 (CW) and on their website at [www.whdh.com](http://www.whdh.com);
  - FOX25 and their website at [www.myfoxboston.com](http://www.myfoxboston.com) (this news outlet only posts information specific to NLG’s School Program).

In the event that school and/or adult program must be dismissed early, in addition to providing notification via the above mediums, each parent/guardian or residence of students/members who are in attendance on that day will be called as soon as the decision is made to dismiss. If a child/adult must be picked up, we will request that the parent/guardian or residence pick up the child/adult as quickly as possible (or the transportation company if that arrangement is made). If they cannot and/or we are unable to reach the parent/guardian, we will contact the other names provided on the emergency information card.

Provision of Student/Member services during a Program closure: For the safety of all involved as well as due to the nature of the programming provided by NLG and how hands on much of the programming being provided is, we are unable to provide these services in the home or virtually to any student/member.

COVID-19 in a Staff or Student/Member Home or Residential Setting

Notifying NLG: NLG will communicate to all staff, parents/guardians and residences, that they are to notify NLG if it is determined that there is a suspected or positive case of COVID-19 in the house, apartment or residence where they live. NLG staff are to notify NLG’s HR Administrator, and the parents/guardians or residential staff are to notify the Program Director for the NLG program their child/adult attends.

Quarantine Requirement in Family Home or Apartment: For a suspected case of COVID-19, that staff or student/member must self-quarantine where they live until the 14 day quarantine period is over or when the individual who was suspected to have contracted COVID-19 has test results proving conclusively that he/she is not infected with the COVID-19 virus if that is sooner than the full 14 day period. For a presumptive positive or positive case of COVID-19, NLG requires that the staff, student, or member remain quarantined at home for the full 14 days from the date of notification to NLG.
Quarantine Requirement in a Residential setting: As residential settings are subject to Massachusetts regulatory requirements, including DPH, in the case of a or multiple suspected or positive case(s) of COVID-19 in the residential setting, NLG will require a notice of clearance from DPH prior to the student/member being allowed to return to NLG’s program.

Provision of Student/Member services during Quarantine: Unfortunately, due to the nature of the programming provided by NLG and how hands on much of the programming being provided is, we are unable to provide these services virtually to any student/member while in quarantine.

Education
Education to students and staff addressing concerns on how to properly prevent and treat the spread of the disease will be ongoing through email communications as well as through routine staff meetings. Educational communications will be provided to encourage employees to acquire and maintain personal, regular healthcare services. Educational communications will be provided regarding NLG policies for employee’s compensation and sick leave absences that may be unique to a pandemic. Education will include the following:

- Education of, and appropriate communication to, employees and students/members and parent/guardians as well as adult residences.
- As more information becomes available, provide timely updates to employees, students, members and families.
- As needed, communicate with local resources and local public health services the need to provide access to available support mechanisms, (for example: mental health, social services and faith based resources).
- Proper handwashing and universal precaution strategies. Wash your hands often with soap and water for at least 20 seconds, especially after going to the bathroom; before eating; and after blowing your nose, coughing or sneezing.
  - If soap and water are not readily available, use an alcohol-based hand sanitizer with at least 60% alcohol. Always wash hands with soap and water if hands are visibly dirty.
- Adequate cleaning and disinfecting of facilities in between working with students/members.
- Avoid close contact with people who are sick.
- Avoid touching your eyes, nose and mouth.
- Educate staff, students/members (as appropriate), residences, and parents/guardians regarding standard guidelines for staying home and when they may return to the program.
- Cover your cough or sneeze with a tissue, then throw the tissue in the trash.
- Clean and disinfect frequently touched objects and surfaces using a regular household cleaning spray or wipe.
- Follow CDC’s recommendations for using a facemask.
  - CDC does not recommend that people who are well wear a facemask to protect themselves from respiratory diseases, including COVID-19.
  - Facemasks should be used by people who show symptoms of COVID-19 to help prevent the spread of the disease to others. The use of facemasks is also crucial
for healthcare providers and those taking care of others in a close contact setting, such as, at home or in a health care facility.

Provide updated information as available regarding the status of a vaccine and/or the identification of medications appropriate and effective for symptom relief. As of March 2020, there is no vaccine to prevent coronavirus disease 2019 (COVID-19). The best way to prevent illness is to avoid being exposed to this virus. However, as a reminder, CDC always recommends everyday preventive actions to help prevent the spread of respiratory diseases.

**Additional Plan Requirements**

While ongoing increases in transmission occur and continue to be an area of concern to the general public, NLG will implement an enhancement for after-hours cleaning services specific to pandemic response in order to ensure proactive enhanced cleaning occurs. This cleaning enhancement is in addition to the routine cleaning services contracted with NLG which includes all common area floors, basic disinfecting as requested (i.e. safe rooms) and bathrooms. Areas of daily enhancement cleaning will include door handles/push bars, shared counters/tables, badge readers, phones, arms of chairs, buttons, keyboards, sinks/faucets and microwaves in the following areas:

- Reception
- General and Private Offices
- Conference Rooms
- Kitchenettes/Vending Areas
- Entrances/Stairwells/vestibules

Where possible, student and member workspaces will be spaced at least three feet apart. Student and member spacing will be specific to our population but will allow for areas of increased gathering to be limited to students/members and staff by closing off the following areas as needed:

- Discourage prolonged congregation in hallways, cafeteria, etc.
- Closure of TV, gym, exercise and computer rooms.
- Closure of cafeteria and food cooking areas.
- Limit or eliminate group activities and interaction.
- Cancel school/adult program activities that place individuals in close proximity.

Handling students/members and employees who become ill at their program and those who may have been exposed to the virus at their program will be managed by nursing. If an event occurs where a student/member, staff or visitor exhibits symptoms of COVID-19, NLG’s nursing department will ensure that areas of exposure are immediately disinfected appropriately and any visitors, including parents/guardians demonstrating signs and symptoms will be directed to exit the building as soon as possible. In the event a student or member is awaiting dismissal due to showing signs and symptoms, a mask will be provided to prevent exposure to surrounding staff or students/members. That student or member will remain in a space separate from others as appropriate for that student/member. Nursing will immediately call the DPH Epidemiology
Department for guidance and then communicate information to the CMT (described in the next section) on how to plan for quarantining.

**NLG Crisis Management Personnel:** NLG has named a Pandemic Response Coordinator (PRC) and formed a Crisis Management Team (CMT) to efficiently and effectively coordinate all NLG activities, communications and actions relating to a pandemic emergency. The CMT reports to NLG’s President.

**Pandemic Response Coordinator (PRC):** NLG’s Nursing Coordinator, Shelli Silverberg, is NLG’s Pandemic Response Coordinator (PRC) The PRC’s role is to stay informed, review, assess and disseminate information regarding COVID-19 as it evolves. The PRC is also responsible for working with NLG management to ensure the organization has an appropriate and effective Crisis Management Team (CMT) in place (see CMT description below) and to coordinate all CMT activities and requirements. The PRC collaborates with local emergency response and public health planners and works with the CMT on the establishment and maintenance of an appropriate Pandemic Plan for NLG and to insure coordination of response and communication with these representative agencies.

**Crisis Management Team (CMT):** NLG has formed a CMT consisting of executive, administrative, clinical and direct staff to work with the PRC to ensure that preparedness and pandemic response planning addresses the needs and concerns of NLG staff in all positions. Additionally, the CMT has recruited a parent/guardian liaison from each program to ensure the plan appropriately addresses the needs of the students and members NLG serves. The CMT works with the PRC on the collection of up to date information both internally (staff, student, member related) and externally (various constituents such as regulatory agencies, employers, and emergency resources), determination, development and dissemination of appropriate information, policies, procedures and/or changes resulting from the onset or ongoing occurrence of a pandemic. The CMT reviews the Pandemic Plan at least semi-annually to ensure the response planning and program information is current and applicable. The CMT will ensure the following actions are completed in order to safely prevent and plan in the event of disease outbreak: Identification of essential staff and functions.

- Planning for absenteeism of direct care staff and support services staff (maintenance, HR, housekeeping etc.)
- Planning for absenteeism of students/members.
- Planning for absenteeism of supervisory and administration staff.
- Identification of essential staff and functions.
- Ordering and stocking of essential supplies and support services.
- Planning for absenteeism of support service providers and contractors.
- Planning for interruption and failure of critical equipment operation.
- Communication with parents/guardians, residences and employees.
- Pandemic education for employees.
- Prevention of risk and exposure procedures and planning.
Below you will find the positions at NLG that make up the CMT and the role each position fulfills on the CMT:

- **Nurse Coordinator:** Is the Pandemic Response Coordinator (PRC) for the organization. Is the primary contact within the PRC and coordinates and disseminates medical/health information from emergency resources (such as DPH, CDC, etc.). Coordinates with Program Nurses regarding staff and student illness data over time to identify trends and ensure appropriate communications with the necessary agencies. Coordinates activities, including meetings, of the CMT. (role is currently held by Shelli Silverberg)

- **Executive Director:** Review of data collected by, and recommendations made by, the CMT to ensure consistency with NLG’s mission and consideration of all programs and functions within NLG. (role is currently held by Maureen Vibert)

- **IT & Facilities Director:** Identifies and manages threats resulting from crisis to NLG’s computer systems and capital assets inclusive of the facilities. Coordinates facilities related activities/securities required as a result of the crisis. (role is currently held by Steve Vibert)

- **CFO (or Controller):** Ensures the availability of needed financial resources. Budgets for and tracks additional costs and revenue impact resulting from crisis. (role is currently held by Maureen Vibert)

- **Employment & Vocation Director:** Collects and maintains requirements and information from student and member employment and volunteer sites related to the crisis including when/if any other employees or volunteers at a site are suspected of or have been diagnosed with COVID-19 or if there are any new or changing requirements at these sites as a result of the crisis. (role is currently held by Steph Daniels)

- **HR Administrator:** Ensures any policy and/or benefit related changes, whether temporary or permanent, resulting from the crisis are appropriate, legal and can be applied consistently across the organization. Coordinates with NLG’s Program Directors and Nurses to maintain statistics of unplanned and planned PTO information with specific attention to changes in unplanned PTO due to illness to identify trends and potential communications required as a result. (role is currently held by Alyss Taylor)

- **Recruiting Coordinator:** Stays knowledgeable about concerns of new and recent recruits and identifies information or data resulting from staff concerns and anxiety regarding the crisis. Maintains and reviews turnover data for same. Coordinates with Program Directors, Training Director & Coordinator, and Staffing and Allocations Coordinator to identify and recommend changes to orientation, training and employee supports. (role is currently held by Lauren DePetris)

- **Program Director-School Program:** Is the primary contact with DESE to collect, review and disseminate appropriate data as it is provided by DESE. Ensures NLG is meeting new or changing requirements of DESE as a result of the crisis and keeps relevant NLG personnel informed regarding same. Works with the CMT-School Program liaisons to coordinate, stay informed and identify concerns and issues resulting from the crisis and consolidates these concerns for discussion with the rest of the CMT to make recommendations to assist and support staff through the crisis. (role is currently held by Lori Steers)
✓ **Program Director-Adult Program:** Is the primary contact with MassHealth and DDS to collect, review and disseminate appropriate data as it is provided by these agencies. Ensures NLG is meeting new or changing requirements of these agencies as a result of the crisis and keeps relevant NLG personnel informed regarding same. Works with the CMT-Adult Program liaisons to coordinate, stay informed and identify concerns and issues resulting from the crisis and consolidates these concerns for discussion with the rest of the CMT to make recommendations to assist and support staff through the crisis. *(role is currently held by Lauren Savioli)*

See *Appendix C* for contact information of the current members of the CMT.

The Program Director for each NLG program will appoint a representative from each of the groups identified below as their CMT liaisons who will represent the needs and concerns of each program’s program staff, students/members and their families, and residences. These are as follows:

**School Program:**
- **A Clinical Staff employee (10 Oak Park):** to provide information regarding the needs and concerns of the clinical staff in the program at the 10 Oak Park location.
- **A Clinical Staff employee (170 Lexington):** to provide information regarding the needs and concerns of the clinical staff in the program at the 170 Lexington location.
- **A Direct Staff employee (10 Oak Park):** to provide information regarding the needs and concerns of staff working directly with students in the program at the 10 Oak Park location.
- **A Direct Staff employee (170 Lexington):** to provide information regarding the needs and concerns of staff working directly with students in the program at the 170 Lexington location.
- **The Scheduling and Allocations Coordinator (for both locations):** to provide information relating to the challenges and issues resulting with team assignments and daily scheduling.
- **A Parent/Guardian (10 Oak Park):** to provide information regarding the needs and concerns of students and their families for those students located at 10 Oak Park.
- **A Parent/Guardian (170 Lexington):** to provide information regarding the needs and concerns of students and their families for those students located at 170 Lexington.

**Adult Program:**
- **A Clinical Staff employee:** to provide information regarding the needs and concerns of the clinical staff in the adult program.
- **A Direct Staff employee:** to provide information regarding the needs and concerns of staff working directly with members in the adult program.
- **The Program Administrator:** to provide information relating to the challenges and issues resulting from capacity issues and daily scheduling.
- **A Parent/Guardian:** to provide information regarding the needs and concerns of members and their families.
- **A Residential Service Provider:** to provide information regarding the needs and concerns of members in a residence and their staff.
2. Sustaining Student/Member Programming and General Ops

NLG’s priority during any crisis is to ensure the safety of its students, members and staff. During a pandemic, any or all of the following situations may occur resulting in the need to make changes to some or all of the programming being delivered:

1. NLG becomes aware of suspected or positive diagnosis of COVID-19 in any of the employment and/or volunteer sites attended by students/members.
2. NLG becomes aware of increased incidences of COVID-19 in locations within the communities where students/members travel for community programming.
3. NLG becomes aware of exposure of any student/member to COVID-19.
4. Extremely high levels of staff absenteeism resulting in any or all of the following:
   a. All staff who service particular student teams and/or member groups are absent due to the illness;
   b. The number of direct and clinical staff available to work with students/members is not sufficient to meet the required staff to student/member ratios to appropriately or safely administer the student(s)/member(s) required programming;
   c. Sufficient medical supports are not available at one or both locations due to a high level of nursing staff absences.

Employment and Volunteer sites

Communications: NLG’s Employment and Vocation staff under the direction of the Employment and Vocation Director will provide its contact at each Employment and Volunteer site notification of communication requirements between NLG and each agency relating to COVID-19. This will include notice of who the representative from that employment or volunteer site is to notify at NLG, and the required mode of communication, if there is a suspected or positive diagnosis of COVID-19 at the site. This communication will also include information regarding who NLG will communicate to at that site regarding suspected or positive diagnosis of COVID-19 at NLG. Employment and volunteer sites will be contacted by the Employment and Vocation Director if there is a decision to suspend all employment and volunteer activities as a result of COVID-19.

Additional Supports: Staff who support students/members at employment or volunteer sites are encouraged to contact their vocation department contact or their Program Director with any questions or concerns regarding supporting students/members at employment and/or volunteer sites. Staff are to remove themselves and their student/member(s) from the site in situations where they are observing an increased or unusually high level of coughing with apparent difficulties breathing with signs of fever such as flushed cheeks and sweating and notify their Program Director of this before their return so precautions can be implemented at the site before they enter.

Suspending and Reactivating Programming: In the scenario of a positive diagnosis of COVID-19 at an employment or volunteer site, or the determination that all employment and volunteer activities should be suspended due to COVID-19, all students/members will be removed from that site (or sites) until such time as it is determined by the DPH that the environment no longer poses a potential threat. If an NLG student/member and/or staff were exposed, they will be required to stay away from NLG’s facilities for a 14 day period.
Community Programming

Communications: The PRC is in contact daily with the DPH in communities frequented by students/members for programming regarding potential outbreak and quarantine data in those communities. The PRC will keep the CMT informed of changes in community status, make recommendation for removing that location from community programming, and communicate removals or changes of community locations to all NLG staff.

Additional Supports: Staff who support students/members programming at locations in the community are encouraged to contact their Clinical Director/Clinical-Team Leader or their Program Director with any questions or concerns regarding supporting students/members in the community. Staff are to remove themselves and their student/member(s) from community sites where they are observing an increased or unusually high level of coughing with apparent difficulties breathing with signs of fever such as flushed cheeks and sweating and notify their Program Director of this before their return so precautions can be put in place at the site before they enter.

Suspending and Reactivating Programming: Each site, town, city and/or county removed from community programming will continue to be unavailable to staff and students/members until such time as the PRC has determined the environment no longer poses a potential threat based on data received from the local DPH.

High Levels of Program Staff Absenteeism

Procedures to be implemented when clinical and direct staff levels are not sufficient for the required student/member ratios. NLG will employ any or all of the following procedures to support its students and/or members on days or during extended periods of high levels of program staff absences resulting from an outbreak of COVID-19. Which, and how many, of the following procedures to be implemented will be dependent on a combination of the number of and make-up of staff absent (such as position and team/group impact) and the number of and make-up of the students and/or members in attendance:

- Cancellation of meetings and trainings: Clinics(internal and external), committee meetings, organizational meetings, and trainings;
- Cancellation of community outings, volunteer and/or employment sites;
- Cancellation of scheduled staff work from home days for some period of time;
- Identifying students/members in attendance who can administer programming in groups (either similar programming or maintenance programming) that can be supported by fewer direct staff;
- Identifying students/members who for behavioral or medical reasons are unable to be supported in reduced staff ratios;
- Where possible, cancellation of IEP/ISP meetings and/or School District/Agency student/member observations (these would be a last resort and we would likely be unable to cancel IEP/ISP meetings for IEPs/ISPs that would be ending within the following few weeks);

Continuity of Operations: NLG’s Administration will ensure that core functions, people and skills have been identified and that strategies are in place to manage and maintain these (including budget, payroll, and ongoing communications with employees and families) during a pandemic.
Appendix A: Information Resources Available

For Pandemic Coronavirus information click on the following links:  https://www.cdc.gov/coronavirus/2019-ncov/index.html


DPH has created a website updated constantly with the latest guidance, including printable fact sheets in multiple languages. Visit: www.mass.gov/2019coronavirus.

The DPH Epidemiology Line at 24 hours a day/7 days a week at 617-983-6800.

Massachusetts Department for Public Health: http://www.mass.gov

Red Cross: http://www.redcross.org

U.S. Center for Disease Control: http://www.cdc.gov; 1-800-CDC-INFO (1888-232-6348)

The U.S. Department of Health & Human Services (HHS); https://www.hhs.gov/


Federal, State and Local Planning for Pandemic: Pandemic viruses will take federal, state and local resources to respond. Roles vary at each level, with general guidance provided at the federal level with detailed operational plans at the state and local levels. The federal government provides general guidance and laboratory support to states, supports vaccine research and conducts national and international disease surveillance activities. In March, 2020 the CDC released its latest pandemic plan which can be found at: https://www.cdc.gov/coronavirus/2019-ncov/php/pandemic-preparedness-resources.html. These resources were created for pandemic influenza but has been recommended by the CDC to follow these guidelines as we learn more about the Coronavirus. MA reviews federal guidance and develops plans for statewide implementation.

<table>
<thead>
<tr>
<th>Agency / Individual</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bedford Public Health</td>
<td>(781) 275-6507</td>
</tr>
<tr>
<td>Billerica Public Health</td>
<td>(978) 671-0931</td>
</tr>
<tr>
<td>Ambulance, Fire or Police Emergencies</td>
<td>911</td>
</tr>
<tr>
<td>Billerica Fire Department</td>
<td>1(978)671-0941</td>
</tr>
<tr>
<td>Bedford Fire Business</td>
<td>1(781) 275-7262</td>
</tr>
<tr>
<td>Bedford Police Business</td>
<td>1(781) 275-1212</td>
</tr>
<tr>
<td>Shelli Silverberg BSN, RN – Nurse Coordinator</td>
<td>1(781) 275-2500 X3270</td>
</tr>
<tr>
<td>School Physician: Dr. Kerry Ann Williams</td>
<td>1(978) 831-3880 (office)</td>
</tr>
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86 Baker Avenue Extension, Suite 301, Concord, MA. 01742
Appendix B: CDC Travel Alert Threat Levels

<table>
<thead>
<tr>
<th>Threat Level</th>
<th>Category</th>
<th>Travel Recommendation Resulting from COVID-19</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Risk of Limited Community Transmission</td>
<td>Travelers should practice usual precautions when traveling to the identified location(s)</td>
</tr>
<tr>
<td>2</td>
<td>Sustained (ongoing) Community Transmission</td>
<td>CDC recommends older adults or those who have chronic medical conditions consider postponing travel to the identified location(s)</td>
</tr>
<tr>
<td>3</td>
<td>Widespread Sustained (ongoing) Transmission (may or may not include restrictions on entry into the U.S.)</td>
<td>CDC recommends that travelers avoid all nonessential travel to the identified location(s) (for some countries this also includes suspending foreign travelers admission into the U.S.)</td>
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</table>

Appendix C: CMT Contact List

<table>
<thead>
<tr>
<th>CONTACT NAME</th>
<th>POSITION</th>
<th>PHONE</th>
<th>EMAIL</th>
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</thead>
<tbody>
<tr>
<td>Maureen Vibert</td>
<td>Executive Director</td>
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