



NASHOBA LEARNING GROUP, INC.
PROGRAM OPERATIONS AND FACILITIES PLANS
TO MITIGATE COVID-19 INFECTION
2021/2022 Program Year
Adult Program Plan

(as of November 1 2021)

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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 of NLG’s student and adult 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. The Coronavirus referred to as COVID-19 is a highly contagious respiratory virus that has spread globally and has been characterized as a pandemic by the Center for Disease Control and Prevention (CDC) and the World Health Organization (WHO). While new vaccines are currently being manufactured, distributed and administered, not all of our population has yet received their dose, and there also continue to be new variants of COVID-19 developing and spreading internationally. As a result, COVID-19 will continue to pose a significant risk to the health and wellbeing of NLG’s students, adult members, and staff. This increased risk to health and safety has impacted, and will continue to impact, the way in which NLG operates in the implementation of its mission. The purpose of this Plan, and ongoing updates to this plan, is to document the impact of the COVID-19 pandemic on NLG’s operations in order to mitigate the spread of infection and NLG’s response to an infection if/when it occurs.

What We Know About COVID-19

Definition: In 2019, a new coronavirus was identified as the cause of a disease outbreak that originated in China. This new coronavirus, known as COVID-19, has spread globally and is a highly contagious respiratory virus. In March of 2020 the WHO declared COVID-19 a pandemic. You can find a COVID-19 fact sheet by clicking on the following link: <https://www.cdc.gov/coronavirus/2019-ncov/downloads/2019-ncov-factsheet.pdf>

Spread and severity: The virus spreads 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 talks, 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).
- Spread is also possible before people show symptoms or through asymptomatic carriers (those who never show symptoms or feel ill).

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.

The virus that causes COVID-19 is considered highly contagious in that it has been spreading easily and sustainably in the community (“community spread”).

Symptoms: The virus has a broad range of symptoms that may show up between 2 and 14 days after exposure. These symptoms can range from mild to severe and a person with COVID-19 may show a few or many of the symptoms listed below:

- Fever (usually a temperature of 100.0 F or above), felt feverish, and/or had chills
- Cough
- Sore throat
- Shortness of breath and/or difficulty breathing
- Gastrointestinal symptoms (diarrhea, nausea, vomiting)
- Fatigue
- Muscle or body aches
- Headache
- New loss of smell and/or taste
- Any other signs of illness

The fact that this virus can be asymptomatic, mild or severe in individuals, or cause so few or so many symptoms, and is highly contagious makes this a formidable challenge.

Protecting Yourself and Others from COVID-19: The best way to protect yourself is to get vaccinated. Until vaccination is available to you the next best way is to avoid exposure to the virus. There are numerous recommendations made by the CDC to help protect us from contracting the virus. These do not provide certainty that you will not contract the virus, as we said above, it is formidable, but, these steps will help mitigate the spread of the virus. At this time, it is also recommended that those who have been vaccinated continue to practice these measures while in public spaces as further longevity studies are required to identify any potential for spread of the virus from a vaccinated individual to an individual who has not yet been vaccinated. You will see as you read further into this plan that NLG has implemented procedures that address all of these recommendations by the CDC and MA DPH.

- *“Wash your hands often with soap and water”*: this must be done for at least 20 seconds each time you wash your hands.
- *“Use an alcohol-based hand sanitizer”*: when soap and water are not readily available. The hand sanitizer must contain at least 60% alcohol.
- *“Clean and disinfect frequently touched surfaces”*
- *“Practice social distancing”*: when you need to go into the community, shopping or to visit others, always maintain at least 6 feet of distance between yourself and others.
- *“Wear a cloth or other protective mask when in public settings”*: make sure that it covers your nose and your mouth and fits snugly.
- *“Stay home if you are sick”*: if you feel unwell and certainly if you experience any symptoms described above, be sure to stay home. Do not mask symptoms with medications.
- *“Call your doctor if your symptoms persist”*: at a minimum you would need to self-isolate for up to 14 days however, your doctor may recommend you get tested for the virus which could decrease your period of isolation.
- *“Seek medical help immediately if you begin to experience severe symptoms”*: such as high fever, extreme difficulty breathing, bluish lips or face, persistent pain or pressure in the chest, severe persistent dizziness or lightheadedness, new confusions or inability to rouse, and/or new seizures or seizures that will not stop, to name a few.

Plan Purpose & Objectives

Purpose: This plan has been developed to address the specific health and safety needs of NLG's staff, students, and adult members as well as effective continuation of NLG's operations during the COVID-19 pandemic and will continue to be amended and updated as new information is available and conditions change. This plan provides the model for how NLG currently provides services to its' adult members in various public health and safety scenarios during the 2021/2022 program year. Currently NLG is providing full-day on-site services to our members.

Objectives: This plan combines what we have learned regarding how to most effectively provide our adult members and students with remote instruction, with what we know about the virus, to implement what is necessary to operate safely while on-site. The models developed and described on the following pages have been developed with input and feedback provided by staff in various positions across the organization and parent/guardian and state agency feedback obtained throughout this crisis. The guiding principles of this plan are as follows:

- The health, safety and well-being of NLG's community inclusive of staff, students, adult members, families, and external constituents, are paramount and inform every aspect of these plans;
- We have/are all experiencing various challenges throughout this crisis and our students and adult members benefit most when we all work together with patience, respect and understanding in managing those challenges;
- Utilize what we have learned since mid-March 2020 at the on-set of the crisis to develop models that can meet the unique needs of NLG's students and adult members and continue to make improvements based on ongoing learnings and changing conditions;
- The structure of each plan must be flexible enough to accommodate the individualized needs of those served by NLG while also providing the fluidity needed to quickly and easily transition from one model to another with very short notice;

It is important that all parents/guardians understand the contagious nature of COVID-19, the risks inherent in sending their child to a program, and the possibility that the program model may change with little or no notice, should public health data or NLG specific data warrant it.

Adapting NLG's Facilities to Minimize Transmission

NLG has implemented a number of changes to its facilities and on-site processes to maximize staff and student/adult member safety while on-site.

Facility: NLG's physical spaces have undergone a number of changes since the onset of the crisis to accommodate a number of health and safety procedures to assist with minimizing transmission of the virus while also being able to provide services to our students and adult members. To decrease the number of individuals each person can come into contact with and minimize the possible transmission and spread of the virus, members are currently receiving all programming within their current classroom setting and transitions are limited to the bathrooms, exercise and outdoor spaces. Due to the requirement that all staff to student/adult member pairings or small groups must operate within a space that has a radius of 3 feet, we are continuing to practice social distancing and have continued to have our desk spaces be 6 feet apart.

Any classroom not previously fitted with a wall dispenser for hand sanitizer now has one. Holders have been affixed to the walls immediately outside of each program room to hold a container of disinfecting wipes and non-latex gloves. Additional disposable face masks are being kept in the First Aid supply basket within the nursing office.

Exercise locations and the outside space continue to be the only common areas. We have increased our exercise spacing to include a second exercise room to give more frequent opportunities for our members to receive movement. Specific times are assigned for use of the equipment and there is a requirement that the equipment be wiped down in between uses.

Daily Staff and Student/Member Screenings and Reminders: Parents/Guardians, Residences and Staff are required to complete a daily form they are able to access from their mobile phone through an application called *MyMedBot* attesting to various daily health and safety screening requirements prior to being admitted to NLG's facilities. If, upon completion of this electronic form, it is determined that there is a potential risk, the individual must then obtain approval or instructions from NLG's nursing staff before returning to the facility.

Facility Front Door Signage: There is a sign posted on the front door of each NLG facility to inform staff or any other visitors (for example, emergency personnel, delivery personnel, etc.) conditions under which they are not to enter the facility. (see *Entry Screening* sign (starts with STOP) attached)

Temperature Checks: Staff and member temperatures are checked each morning when they arrive in their program room. . Should a staff or member have a temperature that registers 100.0 F or above, the staff will report to, or member will be taken by his/her direct staff to, an isolation room near the front entrance of the facility to be more fully assessed by one of NLG's nurses. (see *Identifying and Handling a Symptomatic or Exposed Member or Staff* section below)

Internal Communication Protocols:

Walkie Talkies: Every staff member in each facility is assigned their own walkie talkie. Each walkie talkie has been labeled with each staff member's name and is kept either on charging stations in one of the classrooms they work in or on their desks if they have one.

Signage in Classrooms and Hallways: Signage has been placed throughout the building to remind staff and members about social distancing, PPE use, handwashing, hand sanitizing, and cleaning and disinfecting procedures. With the exception of restrooms, as use is based on need, schedules have been posted in any rooms used by members from multiple program rooms to ensure staff:member pairings/small groups are not crossing in the hallways and that specific time is allocated for required cleaning and disinfection of these items/areas between uses (such as treadmill use, for example).

Storage of Staff and Member items:

File Cabinets and Plastic Storage totes: Each staff and member has either their own file cabinet drawer or individual plastic storage tote to keep their belongings in within their classroom where they are allocated. Staff members who have designated desks will keep their items secured in their desk area.

Staff Fanny packs: NLG provides each staff member with a fanny pack to carry items they will/may need regularly throughout each day to avoid the need to retrieve and/or share certain items. These fanny packs are sufficiently sized to store, at a minimum, a travel size hand sanitizer, 2 or more pairs of plastic gloves, 2 or more disposable surgical masks, 2 or more lens wipes, preferred writing implement(s), building key fob, mints, and, if needed goggles.

Personal Protective Equipment (PPE) and Cleaning/Disinfecting Supplies: Below you will find a list of the materials NLG has on hand for these purposes. With the exception of scrubs (explained below), it is NLG's intent to keep an inventory level of 3 months of these supplies on hand at all times.

PPE Materials:

- ***Face Masks:*** All staff are required to wear a face mask. All members who are able to tolerate wearing a face mask will also be required to do so. Those who cannot will continue to work on mask toleration unless there is a medical reason why this is not appropriate.
 - KN95 masks (reusable) - aka. Filtering Facepiece Respirators or FFR – Staff working directly with members will be provided with these masks as the work they perform requires they be within 6 feet of the member(s) they are working with. Unless there is another device provided by a staff member's doctor that is a more appropriate option for them for medical reasons, this will be **mandatory** for any direct staff working with members who has not been fully vaccinated. FFR masks are provided to staff by the nursing staff. Fully vaccinated staff can choose to wear a surgical mask or cloth mask (as described below) if they choose to.
 - Masks with Face Shields (reusable) – For use by staff who need to escort and/or physically restrain a member. These will also be available to staff who work directly with members as needed.
 - Surgical masks (disposable) – These will be available in bins within each program room for immediate use by anyone who has their mask removed by a member or a mask they are wearing is somehow destroyed. These will also be available for any members who wear masks but forget to bring one to the program that day.

- Cloth masks (reusable) – NLG will not specifically keep cloth masks in inventory but will allow staff who are not working directly with members to bring in and wear their own cloth masks from home as long as they commit to regularly cleaning and disinfecting their masks and the mask does not have any offensive wording or visuals. Otherwise, non-direct staff will be provided with the disposable surgical masks or KN-95 masks if they would prefer those.
- *Goggles (reusable)*: to be used primarily by nurses for eye protection. May also be used by direct staff if desired or if assessed as a need by an NLG nurse (for example, to wear while working with a member who frequently spits).
- *Gloves (disposable)*: to be used by staff involved in any kind of physical management, toileting and the performance of other ADLs. Gloves are available in receptacles outside of classrooms, in all bathrooms, and in kitchenettes. Gloves are also available in all nursing suites.
 - Nitrile Powder Free – sizes small, medium large and extra large
 - Non-Latex Powder Free (Vinyl) – sizes small, medium, large and extra large
- *Surgical Gowns (disposable)*: to be used by staff who are required to stay with members in isolation rooms. Also by nurses as required and available in all nursing suites. May also be used by direct staff in situations that are determined to require the additional protection.
- *Shoe Covers (disposable)*: to be used by staff who are required to stay with members in isolation rooms. Also by nurses as required and available in all nursing suites.
- *Surgical Scrubs (reusable after laundering)*: NLG has contracted with a vendor to provide surgical scrubs bottoms and long sleeve tops to staff who wish to use them. This allows those staff who work very closely with members on things like toileting and other ADLs as well as those who work with members who require physical management to arrive at work in the morning in their personal clothes, change into the scrubs and at the end of the day change back into their personal clothes before leaving. Scrubs for that day are then put in laundry bins and laundered by a service. New sets of scrubs are provided by this service each week.
- Cleaning/Disinfecting Supplies: All cleaning and disinfecting agents are approved by the Environmental Protection Agency (EPA).
- *Hand Sanitizer*:
 - Travel Size – all staff are provided with a travel size bottle when hired to keep with them at all times and refill as needed.
 - 8 oz. Bottles – for desktops (not member desks) and common areas where there is not a wall hung Purell dispenser.
 - Gallon Refill Bottles – to refill travel size and 8 oz. bottles as needed. These are kept in the nursing suites.
 - Purell bags – for wall hung dispensers located in each program room. These will be checked each day by the staff person who is assigned to complete the cleaning/disinfection schedule in that pod that day (see **Functions Allowed to Access Multiple Pods** below). These are also checked each night by the nighttime janitorial crew.

- *Lens Wipes*: For disinfecting copy machines, AAC devices, Behavior Management devices, and reinforcement devices.
- *Disinfecting Wipes*:
 - Clorox and/or generic disinfecting wipes – containers will be kept in receptacles on the wall outside of each classroom for quick access by staff.
 - Bleach wipes (Sanicloth-Germicidal) – to be kept in the nursing office and used when assessed by nursing that it is necessary such as to clean up after bodily fluids are spilled (vomiting or diarrhea as examples).
- *Disinfecting Spray*:
 - EPA certified germicidal spray/disinfectant - disinfectant dispersed via a spray bottle used on general surfaces, **with a designated wait time** and the surface is disinfected. This can only be done when members (or staff not wearing appropriate PPE) are not present in the area where the spraying is taking place.
 - Electrostatic Sprayer - Clorox Total 360 system for use in disinfecting larger surfaces to disinfect against COVID-19. This can only be done when members and other staff are not present and requires full PPE coverage on the person who is utilizing the tool (mask, gloves, gown, booties).

Team members that regularly work across all facility sites:

Nursing staff: NLG has 6 nurses and one CNA across both facilities and both programs. Nurses are well trained in the strict requirements of communicable disease prevention. It is necessary for NLG’s nurses to have the flexibility to enter into, and engage staff and students/members assigned to, multiple pods for the following purposes:

1. Ongoing staff and student/member training and prevention requirements;
2. Student/Member medication administration;
3. Response to staff and/or student/member emergencies;
4. Ability to cover work assignments in all NLG facilities and programs in cases of nurse absence and/or illness.

IT & Facilities staff: NLG’s IT & Facilities staff consists of 3 individuals who work across both sites and programs. It is necessary for these staff to have the flexibility to enter into, and engage staff and students/members assigned to, multiple pods for the following purposes:

1. They require access to all building management systems and functions to address equipment, electrical, or other life safety systems outages, service needs, and/or breakage;
2. They require the ability to retrieve or, if possible, fix in place, reinforcement or operations equipment (tablets, computers, copy machines, telecom, etc.);
3. They require the ability to address building repair issues that may be a health and/or safety hazard.

Staff Assigned Ongoing Cleaning/Disinfection responsibilities at each facility: NLG has 2 staff members, 1 at each building, assigned to a schedule throughout each day who is responsible for disinfecting general areas that are frequently accessed/touched by staff and students/members such as door handles, kitchenettes, bathrooms, as examples. Nursing has created a schedule of the times throughout each day that each of these locations is to be cleaned and disinfected.

Additional staff are permitted to access other sites related to role needs under the following conditions:

- *The individual must be fully vaccinated for COVID-19. This is defined as having received both the 1st and 2nd dose of a sufficient vaccine, or just the 1st if it is a single dose vaccine, AND having received the last dose no less than 2 weeks prior to entering a pod other than that which they are assigned to.*

Cleaning and Disinfecting: The CDC provides guidelines for the cleaning and disinfecting of schools, daycare settings, businesses and other settings available to the general public. Cleaning and disinfecting are defined as follows:

Cleaning: refers to the removal of dirt and impurities, including germs, from surfaces. Cleaning alone does not kill germs. But by removing the germs, it decreases their number and therefore risk of spreading infection.

Disinfecting: works by using chemicals to kill germs on surfaces. This process does not necessarily clean dirty surfaces or remove germs. But killing germs remaining on a surface after cleaning further reduces any risk of spreading infection.

NLG has implemented enhanced cleaning and disinfecting procedures throughout each day and after hours. NLG has hired new staff and repurposed existing staff to carry out specific cleaning and disinfection protocols throughout each day in each of its' facilities. Additionally, NLG has contracted the cleaning service it uses for overnight cleaning to provide enhanced services in addition to the routine cleaning services already provided. Areas of enhanced cleaning throughout each day and overnight include cleaning door handles/push bars, shared counters/tables, and other shared surfaces in the following areas.

- Reception
- Kitchenettes
- Restrooms
- Entrances/Stairwells/vestibules

Additionally, the enhanced cleaning throughout the day includes additional cleaning and disinfecting of phones, treadmills, and safe rooms.

Deep Cleaning: A deep cleaning of a NLG facility, pod, or classroom/program room within a facility (if the only area of exposure) will be required if a staff, student or member tests positive for COVID-19 and was present at an NLG facility while symptomatic. The procedure for a deep cleaning is as follows:

- *Wait 24 hours:* from the last time the COVID-19 positive case was in the building before completing the deep cleaning. During this time the area requiring deep cleaning (facility or pod within the facility) is to remain unpopulated. If during the program week, the students/members in that facility or pod within the facility will revert to remote learning for 2 to 3 days.
- *Janitorial Contractor completes Deep Cleaning:* After the 24 hours is up, the deep cleaning is completed at a time when no one else is in the facility (even if only doing a pod). Staff, students and members should be able to return to the facility or pod the following program day.

Program Model

As you will see in the information below, the structure of our program model's schedule and curriculum allows for the facilitation of individual adult member ISP and DHSP goals and objectives, although it is possible that some of those goals and objectives may require revision or reprioritization resulting from the impact of COVID-19 (such as employment and community outings). Programming and, where and when required, parent/caregiver instruction are provided by highly trained teaching staff utilizing the scientifically validated principles of Applied Behavior Analysis (ABA) under the direction of skilled and credentialed Clinical staff.

NLG groups its programming under the following categories:

- Language and communication;
- Appropriate behavior;
- Social skills;
- Functional life skills;
- Sensorimotor skills;
- Daily living skills
- Community*
- Vocational and Employment* skills

**Community and Employment programming is usually provided in the community. However, during the COVID-19 health crisis alternative programming is being provided within the program's environment and/or remotely to address skills in these categories. The determination as to when to reintroduce this programming back to the community and at job sites will be made based on vaccination data, local health and safety data available, current staffing numbers in order to safely train and access the community, and the member's ability to independently maintain health and safety requirements within these environments – such as consistently wearing a mask.*

With what we have learned since mid-March 2020, NLG was able to provide appropriate programming to address skills within the above categories. All other Health and Safety Requirements and Infection Control issues are addressed elsewhere in other sections within this manual.

On-Site Learning Model: This model assumes most, if not all adult members, will be receiving in person instruction at NLG's facility in Billerica. This is the model we strive to maintain on an ongoing basis. .

The On-Site Learning Model consists of 6 hours of on-site services each day customized to each adult member's needs. All instruction is delivered via teaching programs developed utilizing the principles of ABA, during which data are collected, summarized and analyzed to assess and measure progress toward the member's ISP and DHSP goals and objectives. While the allocations of time and specific teaching methods utilized for each category are dependent on the individual member's needs, the range of activities could include:

- Individualized instruction provided to the adult member by highly trained staff at the member's desk or in other designated areas (such as at the treadmill or in a restroom for ADLs) in a 1:1, 1:2, 1:3 or 1:4 staff to member ratio;
- Small Group instruction to work on a variety of skills including social groups, cooking lessons (for food prep, vocational, as well as functional math and vocabulary), nature groups (science, math, vocabulary), movement groups (stretching and strengthening, sports groups, yoga), and language groups (vocabulary, AAC, calendar), job exploration and vocation groups. Depending on where other members attending these groups are within NLG's facility, these groups could be conducted in person or remotely within each member's program room (via zoom);
- Specialist consultation and training (if applicable) supported by Team Instructions and/or Clinical staff for members who require OT, PT, and/or Speech/AAC.

With NLG's facilities being carved into smaller classrooms to minimize transmission of infection, there are fewer program rooms and programming spaces for members to access. Members have still been provided with the materials and equipment required to access their programming, but may require that programming be done within their program room rather than in another part of the building, or the new space located within their pod for that programming may be much smaller, further limiting the number of members who can access those spaces at any given time and requiring more precise scheduling across members within the pod. Additionally, as noted above, until such time as vaccine distribution and local health and safety data, as well as individual member behavior/tolerance and staffing numbers warrant it, programming in the community and at employment sites will be on hold. This also limits the environments members have available to use for reinforcement and generalization of skills in external environments. This can be challenging for many of those served by NLG as they require frequent breaks and movement to assist with self-regulation.

Daily attendance will be taken for on-site services and invoiced monthly per the guidance provided by MassHealth and DDS.

NLG's Adult Program Calendar for the current year (2021-2022) is included in the Appendices of this plan.

Limiting Infection Risk During Other Close Contact Procedures

Physical Intervention & Restraint Protocols: These guidelines are to be used in conjunction with Massachusetts regulations outlined in 603 CMR 46.00 and local procedures. Please be mindful that seeing staff putting on PPE and/or being approached by staff in PPE may create anxiety in students/members. Please use the individualized approach appropriate to reassure your student/member through the physical intervention:

Prior to Physical Intervention/Restraint:

- DO NOT use surgical gowns as they can be easily ripped or torn.
- All staff involved have the option of wearing scrubs;
- If not already wearing them, the following PPE are to be put on;
 - Disposable gloves
 - Face shield over mask or goggles, if desired or required for an individual known to spit or bite
- As always, the minimum number of staff required to safely manage the intervention should be involved.
- One additional staff member needs to be available to monitor the physical intervention as well as address any PPE needs for the staff directly involved in the procedure.

During the Physical Intervention/Restraint:

- Staff must be sure to keep hands clear of eyes, mouth and nose of others.
- Any first responder involved in the intervention who is not wearing the minimally required PPE must be relieved to put on the required PPE before returning to the intervention.

After the Physical Intervention/Restraint:

- Remove and dispose of and/or disinfect PPE immediately as trained to do so to avoid potential infection.
- Avoid touching face and limit contact with hard surfaces before immediately washing hands and any other exposed areas, such as arms and legs, if not wearing scrubs, long pants and/or long sleeves.
- Change into a new set of scrubs should clothes or existing scrubs become contaminated/soiled.

Toileting and Changing Students/Members Protocols: These protocols are to be adhered to when staff are required to physically engage in an act of assisting a student/member with sanitary products, and/or helping them change out of soiled clothing, and/or washing up after soiling.

Prior to Changing and/or Toileting:

- All staff involved have the option of wearing scrubs;
- Minimum number of staff required to safely toilet and/or change student/member are to be involved.
- The following PPE is also to be put on;
 - Disposable surgical gown
 - Face shield over mask
 - Disposable gloves (see next step before donning gloves)
- Wash hands prior to donning gloves

During Changing and/or Toileting:

- Staff to be sure to keep hands clear of eyes, mouth and nose of others.
- Dispose of soiled items into designated bag to be thrown away/washed immediately following the procedure.

After Changing and/or Toileting:

- Remove and dispose of and/or disinfect PPE immediately as trained to do so to avoid potential infection.
- Avoid touching face and limit contact with hard surfaces before immediately washing hands and any other exposed areas, such as arms and legs, if not wearing scrubs, long pants and/or long sleeves.
- Put on new disposable gloves to clean and disinfect all surfaces utilized prior to, during and after the procedure.
- Remove disposable gloves and dispose of them immediately as trained to do so to avoid potential infection.
- Again wash hands once the gloves have been removed.
- Member is to also wash his/her hands following the toileting and/or changing.
- The disposable surgical gown was worn to protect the staff member's scrubs or clothing from being soiled, however, if any part of the staff member's scrubs or clothing had been soiled during the procedure, new scrubs will be available to change into.

Suspending/Modifying Member Programming

During a public health crisis such as COVID-19 there are certain teaching programs and external environments that have or will be put on hold or for which alternative programming will be provided within the program's environment and/or remotely to address these skills. These primarily relate to Community, and Employment and Volunteer sites. The determination as to when to reintroduce these programs during the program day and reengage at community and job site/volunteer sites will be made based on local health and safety data available, including vaccine availability and percent of population fully vaccinated, and the member's ability to independently maintain health, safety requirements within these environments – such as consistently and appropriately wearing a mask, and current staffing numbers to be able to safety access and train within the community setting.

Employment and Volunteer sites: At times when NLG is not bringing members to employment or volunteer sites, alternative vocational programming will be provided on-site, primarily in the member's program room or remotely while at home, to maintain and increase the skills already developed and necessary for continued success in these sites. NLG's Vocational staff are continuing to maintain the relationships they have developed over the years with employment and volunteer sites. They are working closely with NLG's nursing staff and the local DPHs in the communities where these businesses exist to stay informed of, and assess the data available regarding health, safety, transmission, and vaccine distribution to determine when returning to each site may be appropriate.

Community Sites: At times when NLG is not bringing members into the community to practice the community skills they are learning, NLG will continue to work on these skills while on-site in the program room and/or remotely. Most of the locations frequented by staff and members of NLG are within the towns where our programs reside and, therefore, nursing is in touch with the local DPH offices and well informed regarding local transmission rates, vaccine distribution, and limitations. They will continue to stay up to date for us to be able to make decisions as to when returning to various community locations would be appropriate.

Health & Safety Requirements Specific to COVID-19

NLG has implemented numerous additional health and safety requirements, policies and procedures to address a number of issues resulting from the COVID-19 pandemic. Some of these policies, procedures and requirements have been mandated by the agencies to which NLG's programs report, and some have been determined by NLG's Crisis Management Team (CMT) and others who have been consulted to be in the best interest of the health and safety of all NLG staff, students and members. Regardless of where each of these new requirements have originated, all are considered **MANDATORY**, unless an exception or alternative has been specifically provided in this manual or by a doctor's order, and are consistent with what we believe is necessary to mitigate the spread of the virus within NLG's facilities. ***Willful disregard of any of these policies or procedures by an employee and/or a parent/guardian or residence designee of a member of NLG will result in disciplinary action up to and including termination or discharge.***

Identifying and Handling Symptomatic or Exposed Adult Member or Staff Member: Staff must maintain awareness of their own health throughout each day, particularly the onset of potential symptoms of COVID-19 as well as continually assessing the member(s) they are working with for the signs and symptoms identified on page 2 of this manual throughout the day.

Symptomatic Adult Member: If a member presents with symptoms at the start of the day or during the day, the staff working with that member is to immediately contact the nurse and tell her to meet them in the isolation room. If the member is not wearing a mask, the staff will try to have the member put a mask on or hold a cloth over his/her mouth while they proceed to the isolation room. At the isolation room the staff member will immediately put on full PPE including gloves, gown, shoe covers, and face shield while the nurse, who is also in full PPE, assesses the member. Upon determination that the member should leave the premises, the nurse will call the parent/guardian or residence to pick up that member immediately. If unable to reach a parent/guardian or residence staff, the nurse will begin calling the member's other emergency contacts. The staff member will wait with the member in the isolation room until his/her parent/guardian or residential staff arrives, at which time the staff will bring the member to the parent's/guardian's or residences vehicle. The staff will then remove the gloves, gown, shoe covers, and face shield and safely dispose of them as has been trained then follow with hand washing.

Symptomatic Staff: If a staff member presents with symptoms during the day, he/she will contact the nurse to meet him/her in the isolation room and immediately proceed to the isolation room. If that staff member is working directly with a member(s) at the time, he/she will first be sure the member(s) is(are) taken care of before proceeding to the isolation room by; 1. If the member(s) is(are) reasonably independent and/or not behaviorally aggressive or a bolter, the staff not feeling well will ask another staff in the room to assume responsibility for the member(s) in addition to their own member(s) so that the staff member can quickly proceed to isolation, or 2. If there is a Clinical/Team Leader or Team Coordinator in the room or in a connecting office who is not currently with a member(S) the ill staff member would call for that person to attend to their member(s), or 3. In absence of anyone being available the ill staff would walkie the Program Director, Program Administrator, or other administrative personnel to quickly find someone to

relieve the staff member. If the nurse's assessment determines the staff needs to leave the premises, the staff will be sent home.

Isolation Requirements: Members and/or staff, vaccinated or unvaccinated, who have been sent home due to being symptomatic, are required to remain in isolation for:

1. *10 days from the start of symptoms:* If not tested of which the final 24 hours must have been without the presence of symptoms without the use of medications.
2. *10 days from the positive test date:* If the individual gets tested and tests positive, isolation may be discontinued if at least 10 days have passed since the first symptom(s) appeared, **and** 24 hours have passed since the presence of symptoms without the use medications and there has been improvement in any respiratory symptoms (e.g. cough, shortness of breath).
3. *If negative test result:* The individual may return to work/school the day after receiving a negative test result following approval from nursing with proof of date of test and negative result as long as the individual has been symptom free for a full 24 hours without medication.

Quarantine Requirements: In May 2020, the U.S. Center for Disease Control (CDC) defined a close contact of COVID-19 for the purpose of contact tracing and when/if a person should be tested and/or quarantined as:

“For COVID-19, a close contact is defined as any individual who was within 6 feet of an infected person for at least 15 minutes starting from 2 days before illness onset (or, for asymptomatic patients, 2 days prior to positive specimen collection) until the patient is isolated.”

The CDC also adds the following definition for Health Care Personnel (HCP) that, if not wearing appropriate PPE at the time, could apply to a direct staff member at NLG who is working 1:1 with an infected person:

“Having unprotected [not wearing appropriate PPE] direct contact with infectious secretions [e.g., being coughed on] and excretions [such as urine, sweat, etc.] of the person with confirmed COVID-19.”

For NLG's purposes, these definitions help us determine who would require testing and quarantine given a positive case of COVID-19 within NLG's facilities. Given the contagious nature of COVID-19, symptom screenings are being done as an abundance of caution. We expect that in most cases when a staff, student or member have a symptom or symptoms that require them to be sent home from NLG, they will be the result of some other illness and not COVID-19. Decisions regarding whether to quarantine staff and/or members is as follows:

Staff Quarantine resulting from known or potential direct contact: The staff PPE requirements are designed to keep staff safe in the event a member with whom they are working with more closely than 6ft apart develops COVID-19, whether that member is symptomatic or asymptomatic. Adhering to the appropriate procedures for putting on, wearing, and taking off the required PPE is designed to minimize the potential for transmission even with exposure. If a staff member has close contact, as defined above, with a member who has potential symptoms of COVID-19 the following procedures are activated:

1. Staff who have been fully vaccinated as defined in this document, who are not exhibiting any symptoms, do not need to quarantine if directly in contact with a member or staff known to have, or to potentially have, COVID-19.
2. For those who have not been vaccinated or been fully vaccinated as defined in this document, during the period of time between when the potentially infected member became symptomatic, and when the member's test results are received, that staff member would need to be actively taking their temperature a minimum of twice per day and closely monitoring themselves for potential COVID-19 symptoms, but would not be required to quarantine, unless he/she became symptomatic. (Unless there was defective PPE or PPE was not kept on appropriately – for example, if the member tore the staff member's mask off and then sneezed while close to him/her – in this case the staff would begin quarantine that day).
3. If the results of the member's test come back negative, the staff is not required to do any further additional daily screening for symptoms, other than that which is done when he/she arrives at work and those required throughout each day once the results of the test have been received.
4. If the parent/guardian elects not to have their member tested, or the member will not tolerate the test, the staff will continue to actively take their temperature a minimum of twice per day and closely monitor themselves for potential COVID-19 symptoms for 14 days, but would not be required to quarantine, unless he/she became symptomatic.
5. If the results of the member's test come back positive, that staff member would be required to quarantine at home for 10 days from the initial date of contact, which is determined by nursing, with the infected person.

Member Quarantine resulting from known or potential direct contact: Although staff:member pairings/groupings are separated by at least a 6ft radius of all other staff:member pairings/groupings in the program room, we may require other members within a class, who have not been fully vaccinated, where there is a positive test result to quarantine for 10 days. The reasons for this, and why it differs from the staff requirements, is that some members may not have been wearing masks or may not have been wearing masks consistently. Members are also less likely to be able to closely monitor and communicate relevant symptoms they may have and are less likely to be able to maintain the strict increased hygiene requirements needed to keep them safe. While there will be additional air circulation throughout the building, staff and members will be in the same program room more often than not throughout each program day and, without consistently wearing PPE, or being fully vaccinated, would be more susceptible to infection transmission. If NLG is providing remote services at the time this occurs the individual would be welcome to join. If a member has been a known close contact to a COVID positive individual, is able to consistently wear a mask and is fully vaccinated, the member may continue to come to the program but must monitor for symptoms and continue temperature screenings at least twice daily for 14 days from the date of exposure.

Decisions made based on the above infection protocols are subject to change or revision if, upon communicating with the DPH, NLG is informed of additional or different requirements for treatment of a particular situation.

NLG also reserves the right to make a decision to quarantine a pod where there is more than 1 infection if there is a concern of a potential for a cluster.

When to Stay Home from the Program: Additional guidance regarding when to stay home and steps to take in this COVID-19 climate:

- Stay home if experiencing active vomiting or diarrhea related to/not related to COVID-19
- Fever/chills/generalized body aches
 - Fever threshold is 100.4 F or higher
- Extreme lethargy and/or fatigue

If presenting with COVID-19 known symptoms such as fever, cough, or shortness of breath immediately follow up with your medical provider.

- Parent/Guardian should call the DPH hotline for guidance regarding presenting with COVID-19 symptoms to determine if testing is warranted and must follow these stay-at-home isolation requirements:
 - If test result is positive or test is not completed the student must remain home for 10 days after the symptoms first appeared; **and**
 - At least 24 hours must have passed since recovery of symptoms which includes having no fever for 24 hours without the use of any fever reducing medications and improvement in respiratory symptoms (coughing and shortness of breath)

If a member, who has not been fully vaccinated, has had direct contact, as defined in the “*Quarantine Requirements*” section above, with an individual diagnosed with COVID-19 he/she is to follow these requirements:

- Quarantine at home for 7 days after the date of exposure to the COVID-19 positive individual and complete a PCR test on day 5 with a negative result. The individual may return to work on day 8 as long as a negative test is received and the individual remains symptom free for 24 hours without medication;
 - Track temperature and monitor for symptoms at least twice daily for up to 14 days
 - Contact NLG nursing and your medical provider should you begin experiencing symptoms.

Nursing Responsibilities to be Performed outside of the Nurse’s Suite: Nurse’s will be conducting “house calls” to program rooms to perform the activities listed below until such time as restrictions are relaxed based on local and internal public health data. Those required to occur at a specific time will be scheduled:

- ***Medication Administration:*** The nurse’s will bring a member’s required medications scheduled throughout the day to the member’s program room when the medication is due. For medications that require preparation prior to ingestion, the nurse will complete the preparation in the nurse’s suite before bringing the medication to the member.
- ***Basic First Aid needs:*** Cuts and scrapes or other general first aid response. Staff member will call nursing to respond to location where incident occurred.
- ***Tolerance Programming:*** All medical tolerance programming will be conducted in the member’s program rooms based on a set schedule developed in advance. The dental clinic is on hold during this time period. Of course, medication administration, general emergencies and first aid requirements will be prioritized above tolerance programming for which a nurse is involved so it is possible that some, or all, of this programming may not take place on a particular day, week, or for a period of time.

- Medical Emergencies: Such as seizures or other more serious accidents are always responded to where they occur and this will continue to be the case.

Visitor Access to NLG's Facilities: As of September 2021 NLG is allowing visitors in our building. Visitors must wear a mask, fill out an attestation, and take a temperature read before entering the building.

Travel Policy and Required Procedures

For the safety of NLG staff, students and adult members, NLG has implemented the following travel policies during this time as a result of the COVID-19 pandemic. All NLG staff and adult members are subject to these policy requirements.

Fully vaccinated staff and adult members are not subject to the following notification and testing/quarantine requirements *UNLESS* they are symptomatic upon return from traveling. Staff and adult members who have not been fully vaccinated are required to:

Notification: Notify NLG of any plans to travel outside of Massachusetts. This notification must include the leave and return dates of travel, where traveling to, mode of transportation (airplane, bus, train, personal vehicle, boat), and lodging venue (hotel, rented home or apartment, personally owned home at that destination, etc.). Parents/Guardians are to notify their adult member's Clinical/Team Leader in writing.

Travel Requiring Testing or Quarantine: Travel out of Massachusetts (MA), currently to any destination not deemed a "safe" state by the state of MA (see link provided below), will require testing or quarantine upon return to MA. Travel to any destination outside of MA to a state considered "safe" by MA at the time of traveling, only if traveling by personal vehicle would not require testing or quarantine upon returning to MA. However, NLG requires that even travel to a state identified as a "safe" state by MA via any mode of travel other than personal vehicle (such as airplane, train, bus, cruise ship) would require testing or quarantine upon returning to MA.

Testing Requirements: Proof of a negative COVID-19 PCR test no less than 72 hours after the staff, student or adult member has **returned** to MA. Due to the presumed timing of potential COVID-19 infection after exposure, the CDC specifies that testing a person within the first 72 hours of their return from traveling is not sufficient. Therefore, NLG would require the test be administered no less than 72 hours after the individual has returned home from their destination and that the test not only reflect proof of negative COVID-19 testing but must also document the date the test was completed.

Quarantine Requirements: If upon return the staff or parent/guardian of the member has elected not to complete the COVID-19 testing requirements implemented as part of this policy, that staff or member would be required to quarantine at home for 10 days from the date of return, during which he/she does not show any symptoms, before returning to NLG's program. If at any time during this quarantine period symptoms develop further quarantining will be required and a designated timeline will be provided by our NLG nursing team.

Given the rapidity with which conditions can change in this pandemic, this policy, including approved states and modes of transportation, can change at any time. Be sure to check MA current list of lower risk states at the following link: <https://www.mass.gov/info-details/covid-19-travel-order#massachusetts-travel-form->

On-Site Program Procedures

Program Arrival Procedures:

Staff Arrival: Staff will arrive at their NLG facility no later than 30 minutes prior to the start of that day's session. They will enter the back door and follow the same temperature reading procedures as are followed by the students and adult members. If utilizing the fanny pack, they will ensure it is stocked with their materials for the day, and then secure it to their waist. They will then proceed to their desk or, for direct staff, to the classroom/program room where their walkie talkie is to retrieve it. They can then proceed to getting their adult members area ready for the day, and wait for the adult member transportation arrival process to begin. Staff will switch their masks to either a surgical or KN95 masks immediately upon arrival, or can wait to make the change before busses begin to be called.

Vehicle Arrival: The procedure for vehicles transporting students and adult members pulling into NLG's facilities and lining up will be exactly the same as before at the 10 Oak Park Drive facility, and the only difference at the 170 Lexington Road facility is that the first vehicle will pull all the way up to the front door and all other vehicles will line up behind that vehicle. During any time when only staff, students and adult members are being allowed in the building, any students and adult members who are transported by their parents/guardians who had walked them into the building will remain in their vehicle in the drop off line. If a student or adult member arrives after all others have arrived, the parent/guardian or driver will need to call NLG's Receptionist to inform her of that student's/adult member's arrival. The remainder of this process would then be the same.

Disembarking: Approximately 15 minutes prior to the session start time, NLG Staff facilitating the arrival process will use their walkie talkies to call each student's or adult member's name as each vehicle arrives. Direct staff will remain in their classroom until they hear the name of their student/adult member(s) and will then proceed to retrieve them.

Entering the Building: When in the building the staff and student/member(s) will use the hand sanitizer provided before proceeding to their classroom/program room.

Program Room Procedures:

Member Teams and Scheduling: As noted in the “*Facility Pods*” section above, each member is allocated to a specific group/classroom within their facility.

Program Room: Before entering the program room, if the member has anything to leave in his/her storage bin (or file cabinet drawer if using one of those), the member and the staff will stop there first and then proceed into the program room. Lens wipes and other sanitary wipes and sprays are available in each program room for staff and members to wipe down AAC devices and daily log binders as needed and shared materials between uses. As has always been the case, each member’s program book is kept within their program room. As there will be fewer options for reinforcement during this period of time, and so that members will not have to wait for extended periods of time to access electronic reinforcement due to sharing and the need for disinfecting between each use, there will be a reinforcement device in each member’s area for use by that member only that will remain in his/her area and at NLG at all times. This device will also have a dedicated charging plug so that it can be charged at the same location in the member’s area.

Lunch and Snacks: Lunch and any snacks required by the member must be sent in by the family/residence and must not require refrigeration. Members will need to eat lunch and snacks in their program room. Staff will wash their hands, put on non-latex gloves when removing or assisting with food items from their containers, remove the gloves and complete a second hand wash upon the member’s completion of the snack.

Restrooms: Signage has been placed on each restroom door indicating availability. Red (In Use) and Green (Available) signs have been affixed to the hall facing side of the bathroom door as an easy visual to inform other staff and members if it is in use or available.

Exercise and Movement: A schedule is displayed in the area where each treadmill resides so that each staff knows when his/her member is, or small group of members are, assigned to use the treadmill. Time has been left in between uses of the treadmill so that they may be wiped down before the next member, or group of member(s) use them. Members will either wash their hands or, at a minimum, access hand sanitizer before and after utilizing the treadmill.

Outdoor Space: Each classroom in each facility has been assigned times during which they are able to access that facility’s outdoor space when the weather is appropriate to do so.

Program Departure Procedures:

Member Transition out of the Building and into Vehicles: All vehicles will arrive by the end of the day’s session and line up outside of the facility in the same way they did upon arrival in the morning. All end of day member routines will be done no later than 5 minutes prior to the end of the day so that when the staff member facilitating the exit process calls that member or members name(s), he/she/they and their staff member are ready to exit their program room and proceed immediately to the vehicle. The staff will then ensure the member(s) is/are settled in his/her/their vehicle before leaving the member(s) vehicle(s).

Staff Departure: Once their member(s) vehicle(s) has/have left NLG’s property, the direct staff member will go back to the member(s) area to put things away (if not already done) and clean and disinfect it and the materials/high touch surfaces used that had not already been wiped down.

He/she will then disinfect their walkie talkie and place it back on the charger and put his/her fanny pack (if used) and KN95 mask (if switching to a personal mask).

Closures, Delays, and Dismissals

Program or Facility: 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>. 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;
- NLG's official Facebook page;
- The following media outlets:
 - WCVB Channel 5 and on their website at www.thebostonchannel.com ;
 - WBZ Channel 4, news radio 1030AM and their website at www.cbsboston.com ;
 - WHDH Channel 7 (NBC) and Channel 56 (CW) and on their website at www.whdh.com ;
 - FOX25 and their website at 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.

Classrooms only: There may also be a requirement to close a classroom within a NLG facility due to infection rate, deep cleaning requirement, and/or staffing limitations. If this occurs, the Program Director and/or her designee(s) will contact each parent/guardian and/or residence by telephone to inform them of this requirement. This will target communications to those in a specific pod rather than causing potential confusion by communicating more broadly across the organization.

Education and Training

Staff: Online Trainings and Visual Reminders: Education has been, and will continue to be, provided to staff regarding how to properly prevent and treat the spread of the disease. These trainings will be conducted on-line through Paycom and will include a knowledge based test at the conclusion. Additional trainings as required will be ongoing through email communications, routine staff meetings, and individual or team/group specific trainings through nursing. Posters and notices are affixed throughout NLG's facilities to provide instruction and reminders to staff of critical procedures and requirements. Education will include the following:

- Facemasks are required. Instruction will be provided on how to appropriately put on (donning) and take off (doffing) a facemask as well as when it may need to be changed.
- 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.
- Proper donning and doffing of other required or potentially required PPE such as surgical gowns, shoe coverings, gloves, goggles, and face shields.
- Adequate cleaning and disinfecting of facilities in between working with students/members.
- Additional cleaning and disinfecting that will occur throughout each day.
- Avoiding close contact with people who are sick and isolation requirements when symptoms present.
- Avoiding touching eyes, nose and mouth.
- Assessment and screening requirements for staff, students and members prior to entering NLG's facilities.
- Screening and hygiene requirements upon entering the building.
- Social distancing requirements.
- Additional health and safety requirements when assisting in the physical management of a student or member.
- Additional health and safety requirements when assisting with toileting or changing a student or member.

Staff: On-Site Trainings: Each staff member has also been required to attend a health and safety training on-site prior to being allowed to return to working at one of NLG's facilities. This training provided an additional overview of the on-line trainings and provided the opportunity to walk staff through the process required when entering the facility, within their assigned pod and when exiting the facility. At this time staff were also provided with their initial PPE, including their first month's supply of KN95 masks and their fanny packs stocked with extra surgical masks, gloves and wipes. Each staff was also provided with instruction for retrieving and returning their daily scrubs.

The nursing staff is in constant communication with the local DPH in each town where NLG has facilities to ensure NLG is up to date with new or changing requirements.

Students and Members: All of the above trainings are also provided to students through their individualized programming as appropriate for their development and abilities. Posters and notices are affixed throughout NLG's facilities to provide instruction and reminders to students of critical procedures and requirements.

NLG's Crisis Management Team (CMT)

NLG has formed a Crisis Management Team (CMT) and named a Pandemic Response Coordinator (PRC) to efficiently and effectively coordinate all NLG activities, communications and actions relating to the COVID-19 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 ensure coordination of response and communication with these representative agencies.

Crisis Management Team Members: NLG has a CMT consisting of executive, administrative, clinical, specialist and direct staff of which the PRC is a part, 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 Pandemic Plan will be reviewed at least monthly during the pandemic 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 throughout the period of the 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.
- Pandemic education for students and members.
- Prevention of risk and exposure procedures and planning.
- Planning for changes to facilities required for health and safety.
- Planning for re-engagement of community and employment programming.

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, MSN, RN)
- ✓ **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. Oversees the coordination and development of the written plan and resulting operational procedures. (role is currently held by Lori Steers)
- ✓ **IT & Facilities Director:** Identifies and manages threats resulting from crises to NLG's computer systems and capital assets inclusive of the facilities. Coordinates facilities related activities/securities required as a result of the crisis. Coordinates and facilitates facility and equipment changes and needs resulting from the pandemic (role is currently held by Chuck Morin)
- ✓ **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 Kim Borgen)
- ✓ **Director of Clinical Practice:** Incorporates and the clinical needs of the students/members and how services can be effectively delivered (role is currently held by Lauren Savioli)
- ✓ **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. During a crisis requiring a temporary reduction or termination of employment and volunteer sites, continues to maintain these external relationships and provides input regarding when it may be safe to begin services again and implementation of same (role is currently held by Steph Daniels)
- ✓ **Director of Clinical Operations and Admissions:** Stays knowledgeable about the impact of ongoing admissions (role is currently held by Robyn Stewart)
- ✓ **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 Doreen Swadel)
- ✓ **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, BCBA)
- ✓ **Program Director-School Program:** This is also the primary *COVID-19 Response Leader* for DESE. This individual is responsible 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)

- ✓ **School Program Education Administrator:** Stays informed regarding DESE regulatory changes impacting student programming and education supports. (role is currently held by Maureen Lacerte, BCBA, Professional SPED)
- ✓ **School Program Scheduling and Allocations Coordinator:** Provides information relating to the challenges and issues resulting with team assignments and daily scheduling. Coordinates, communicates, and implements required changes. (role is currently held by Heather Angus)
- ✓ **School Program Clinical Staff:** Representing the needs and concerns of the clinical staff at the 10 Oak Park Drive location. Assists with coordination requirements, communications, data gathering and implementation of changes. (role is currently held by Maureen Lacerte, BCBA, Professional SPED)
- ✓ **School Program Clinical Staff:** Representing the needs and concerns of the clinical staff at the 170 Lexington Road location. Assists with coordination requirements, communications, data gathering and implementation of changes. (role is currently held by Karen Abruzzi, BCBA, Professional SPED)
- ✓ **School Program Direct Staff:** Case Mgr, Lead Therapist, Understudy or Therapist from the 10 Oak Park Drive location. Represents the needs and concerns of the staff working directly with students. Assists with coordination requirements, communications, data gathering and implementation of changes related to this group of employees. (role is currently held by Courtney Hinds)
- ✓ **School Program Direct Staff:** Case Mgr, Lead Therapist, Understudy or Therapist from the 170 Lexington Road location. Represents the needs and concerns of the staff working directly with students. Assists with coordination requirements, communications, data gathering and implementation of changes related to this group of employees. (role is currently held by Chelsey King)
- ✓ **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 Sam Carroll, BCBA)
- ✓ **Adult Program Supervising Clinician:** Represents the needs and concerns of Clinical/Team Leaders, Team Coordinators and Team Instructors. Assists Adult Program Director with coordination requirements, communications, data gathering and implementation of changes. (role is currently held by Spencer Yacino, BCBA)
- ✓ **Adult Program Administrator:** Provides information relating to the challenges and issues resulting from capacity issues and daily scheduling. Keeps up to date with regulatory issues resulting from the pandemic. Assists Adult Program Director with coordination, communications and implementation of operational needs and changes. (role is currently held by Patrick King)

See attached *CMT Contact List* for contact information of the current members of the CMT.

The Program Director for each NLG program appoints a representative from each of the groups identified below as their CMT liaisons who will represent the needs and concerns of each program's parents/guardians and residences:











- **A School Program 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 School Program Parent/Guardian (170 Lexington):** to provide information regarding the needs and concerns of students and their families for those students located at 170 Lexington.
- **An Adult Program Parent/Guardian:** to provide information regarding the needs and concerns of members and their families.
- **An Adult Program Residential Service Provider:** to provide information regarding the needs and concerns of members in a residence and their staff.

Appendices

STOP

EMPLOYEES & VISITORS MUST ANSWER THE FOLLOWING QUESTIONS BEFORE ENTERING THIS FACILITY.

1. Have you taken any fever reducing medication today?
2. Have you been in close contact with a person known to be infected with COVID-19?
3. In the past 24 hours have you or any other household members had any of the following symptoms:

-  Fever (temp of 100.0 F or above)
-  Felt feverish or had chills
-  Cough
-  Sore Throat
-  Difficulty Breathing
-  Gastrointestinal Symptoms
(diarrhea, nausea, vomiting)
-  Fatigue
-  Headache
-  New loss of smell and/or taste
-  New muscle aches

**IF YOU ANSWERED YES TO ANY OF THE ABOVE
DO NOT ENTER!!
(STAFF ARE TO CALL THE NURSE FOR INSTRUCTIONS)**

NLG On-Line RESOURCE LIST

BY CATEGORY

English Language Arts (ELA)

Boom Cards
Reading/Learning A-Z (includes Headsprout and Raz Kids)
iXL.com
Hear Builder
Brain Pop (videos that allow you to assign quizzes and games)
News2You
Epic Reading
Scholastic News
Tumble Book Library
Kto5 Learning
Education.com
Liveworksheets.com
Various Individualized Powerpoint Presentations
Various YouTube Videos

Math

iXL.com
prodigy.com

Science

iXL.com
MysteryScience.com

SLP

Realize Language

Breaks

Hidden Picture Daily Challenge (hiddenpictures.highlights.com)
Word Searches (thewordsearch.com and api.razzlepuzzles.com/wordsearch)
Puzzles (jigsawplanet.com and Edpuzzle.com)
Virtual Field Trip (virtuelschoolactivities.com)
Games (cbc.ca/kidscbc2/games)

Exercise

NLG PT, OT and Yoga videos (OT videos require Theraband, Weighted Ball and Dumbell)
Special Olympics Exercise Videos (specialolympics.org/health/fitness/fit-5-page)
Go Noodle (gonoodle.com)

Typing

ASDReading.com
Typingclub.com

Behavior

Connect – ACT Curriculum to help kids cope with anxiety
JABA onlinelibrary.wiley.com
Everyday Speech (teaches social skills and behavior management through videos)

Nashoba Learning Group

2021-2022 Adult Program Calendar

July 2021						
Su	M	Tu	W	Th	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

In session: 19

August 2021						
Su	M	Tu	W	Th	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

In session: 22

September 2021						
Su	M	Tu	W	Th	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

In session: 20.5

October 2021						
Su	M	Tu	W	Th	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

In session: 20

November 2021						
Su	M	Tu	W	Th	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

In session: 18.5

December 2021						
Su	M	Tu	W	Th	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

In session: 17

January 2022						
Su	M	Tu	W	Th	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

In session: 20

February 2022						
Su	M	Tu	W	Th	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28					

In session: 18.5

March 2022						
Su	M	Tu	W	Th	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

In session: 23

April 2022						
Su	M	Tu	W	Th	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

In session: 20

May 2022						
Su	M	Tu	W	Th	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

In session: 20.5

June 2022						
Su	M	Tu	W	Th	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

In session: 21



Program Closed/ Holidays



1/2 Day of Program for members (therapist Professional Day)



First and Last Day of Program year

Program Closed/Holidays	2021-2022
July Vacation (includes Independence Day)	Mon., July 5 – Wed., Jul. 7
Labor Day	Sept. 6
Columbus Day	Mon., Oct. 11
Thanksgiving Break	Wed., Nov. 24 – Fri., Nov. 26
Winter Vacation	Fri., Dec. 24 – Fri., Dec 31
Martin Luther King, Jr. Day	Mon., Jan. 17
President's Day	Mon., Feb. 21
Patriots' Day	Mon., April 18
Memorial Day	Mon., May 30
Juneteenth Day	Mon., June 20

CMT Contact List

**10 Oak Park Drive, Bedford telephone number (781) 275-2500
170 Lexington Road, Billerica telephone number (978) 528-5210**

CONTACT NAME	POSITION	OFFICE LOCATION	EMAIL
Shelli Silverberg	Nurse Coordinator	Bedford	Shelli.Silverberg@nashobalearninggroup.org
Maureen Vibert	Executive Director	Bedford	Maureen.Vibert@nashobalearninggroup.org
Chuck Morin	IT and Facilities Director	Bedford	Chuck.Morin@nashobalearninggroup.org
Linda Wright	Controller	Bedford	Linda.Wright@nashobalearninggroup.org
Stephanie Daniels	Employment and Vocational Director	Bedford	Steph.Daniels@nashobalearninggroup.org
Robyn Stewart	Clinical Ops & Admissions Dir	Bedford	Robyn.Stewart@nashobalearninggroup.org
Doreen Swadel	Human Resource Administrator	Bedford	Doreen.Swadel@nashobalearninggroup.org
Lauren DePetris	Recruiting Coordinator	Bedford	Lauren.Howson@NashobaLearningGroup.org
Lori Steers	Program Director, DS	Bedford	Lori.Steers@nashobalearninggroup.org
Maureen Lacerte	Education Administrator, DS	Bedford	Maureen.Lacerte@nashobalearninggroup.org
Heather Angus	Scheduling & Allocations Coordinator, DS	Bedford	Heather.Angus@nashobalearninggroup.org
Karen Abruzi	Clinical Director, DS	Billerica	Karen.Abruzi@nashobalearninggroup.org
Courtney Hinds	Case Manager, DS	Bedford	Courtney.Hinds@nashobalearninggroup.org
Chelsey King	Case Manager, DS	Billerica	Chelsey.King@nashobalearninggroup.org
Lauren Savioli	Director of Clinical Practice	Billerica	Lauren.Savioli@nashobalearninggroup.org
Samantha Carroll	Adult Program Director, AS	Billerica	Sam.Carroll@nashobalearninggroup.org
Patrick King	Program Administrator, AS	Billerica	Patrick.King@nashobalearninggroup.org

Information Resources Available

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

<https://www.mass.gov/resource/information-on-the-outbreak-of-coronavirus-disease-2019-covid-19>

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/>

U.S. Department of Homeland Security: <http://www.ready.gov> ; 1-800-BE-READY (1-800-237-3239)

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.

Local and NLG Specific Emergency Contacts	
Agency / Individual	Phone Number
Bedford Public Health	(781) 275-6507
Billerica Public Health	(978) 671-0931
Ambulance, Fire or Police <i>Emergencies</i>	911
Billerica Fire Department	1(978)671-0941
Bedford Fire Business	1(781) 275-7262
Bedford Police Business	1(781) 275-1212
Shelli Silverberg BSN, RN – Nurse Coordinator	1(781) 275-2500 X3270

CDC Travel Alert Threat Levels

Threat Level	Category	Travel Recommendation Resulting from COVID-19
1	Risk of Limited Community Transmission	Travelers should practice usual precautions when traveling to the identified location(s)
2	Sustained (ongoing) Community Transmission	CDC recommends older adults or those who have chronic medical conditions consider postponing travel to the identified location(s)
3	Widespread Sustained (ongoing) Transmission (may or may not include restrictions on entry into the U.S.)	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.)