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**GUIDANCE FOR REOPENING AND OPERATION OF ADULT DAY CARE & HEALTH CENTERS**

Prior to reopening, centers must clean and disinfect their facilities and [center-owned vehicles](#) for infection control, according to [Centers for Disease Control \(CDC\) guidance](#).

There are several important considerations centers must address prior to reopening including:

- **Evaluate staff to participant ratios** (Consider conducting an evaluation of participants' care needs and availability of caregiving staff to determine if staff can be dedicated to smaller groups of participants to limit exposure risk).
- **Plan for social distancing** (Calculate staff to participant ratios and reconfigure the center as necessary. Determine an appropriate number of participants staff can safely serve while maintaining social distancing).
- **Identify separate area for screening of staff and participants** (Determine appropriate screening measures for your facility, i.e.: screening staff and residents in their cars prior to entering the building).
- **Identify holding area for staff and residents who are symptomatic** (Used to separate symptomatic staff and/or participants from other program areas awaiting transport out of facility. Should be separate from screening area and may consist of a temporary wall or border).

**DAILY HEALTH CHECKS FOR STAFF AND PARTICIPANTS**

Centers should conduct daily health checks for all staff and participants prior to entering the center. These health checks can be conducted through email, in-person, or over the phone for participants and staff, using a written [screening checklist](#).

It's strongly recommended that centers take the temperature of **all participants and staff** upon arrival and record whether they have a fever (>100° F). No-touch methods are preferred to reduce contact.

Ensure that any staff or participants with temperatures of >100° F or other symptoms (i.e.: cough, runny nose, sore throat, shortness of breath, fast breathing, diarrhea, chills, muscle pain, headache, new loss of taste or smell) are excluded from program areas.

- Symptomatic staff should be sent home and be directed to follow up with their PCP for consultation.
  - These staff should self-monitor their symptoms while at home and report any changes to their supervisor.
- For any symptomatic participants, center staff should contact their family or caregiver and have the participant follow up with the PCP. PCP will provide guidance and written documentation of when participant may return to the center.

Once an individual with symptoms leaves the center, sanitize all areas of the center including program, holding and transportation (in accordance with [CDC guidelines](#)).

Documentation of all daily screenings performed as well as any identified ill participants and staff should be maintained by designated center staff member for tracking purposes in the event of an outbreak.

## **PROTECTION OF PARTICIPANTS WHILE AT CENTER**

There are several factors centers need to consider ensuring the safety of its participants during normal operations.

### **1. Point of Entry**

- Upon arrival, all participants and staff must perform hand hygiene (using hand sanitizer or soap and water).
- Face masks should always be worn while in the center (participants and staff).
  - Any direct caregiving staff should wear surgical masks per [CDC guidance](#).
  - Non-direct care staff (i.e.: administrative) and participants may wear cloth masks per CDC guidance.
- Limit any personal items from participants coming into the center and disinfect those items appropriately.

### **2. Location and Program Activities**

- Use social distancing (6 feet apart) per [CDC guidelines](#) within any program areas.
- Ensure groups are kept to a maximum of <10 participants per activity as well as for dining.
- Avoid activities that require close physical contact and limit item sharing.

### **3. Participant Care**

- Centers should update participants' care plans and identify high-risk individuals with underlying medical conditions that may need additional measures to reduce exposure risk. This can include the following:
  - *People with chronic lung disease or moderate to severe asthma.*
  - *People who have a serious heart condition.*
  - *People who are immunocompromised (i.e.: cancer treatment, organ transplantation, immune deficiencies, etc.).*
  - *People with severe obesity (BMI >40).*
  - *People with chronic kidney disease undergoing dialysis.*
  - *People with liver disease.*

#### 4. Infection Control

- Centers should always enforce strict [hand hygiene](#) measures (i.e.: upon entry and exit, before/after dining as well as before/after performing care activities).
- Ensure that hand sanitizer stations and hand sinks are available throughout the center. These areas must be accessible to participants per ADA guidance.
  - Hand sanitizer products should have an alcohol content between 60-95%.
- Strict respiratory etiquette must be maintained for all staff and participants (i.e.: coughing or sneezing into a tissue or your elbow).
  - Ensure that trash bins and tissues are readily available throughout the center.
- Daily or more frequent cleaning of high touched surfaces (i.e.: tables, doorknobs, light switches, handles, desks, toilets, faucets, sinks) should be completed.
  - Disinfectants used should be [EPA](#) registered to kill microorganisms like SARS-CoV-2 (COVID-19).
  - Centers should be aware of [contact time](#) for each disinfectant used.
- Centers should keep track of [PPE](#) issued and used by direct caregiving staff daily including surgical masks, gloves, face shields, gowns (if applicable).
- Any individuals identified as suspicious or confirmed for COVID-19 need to be reported to [DOH Disease Outbreak Control Division \(DOCD\)](#).
  - **Disease reporting line number: 808-586-4586**

#### 5. Training

- In-services should be provided to all staff specific to COVID-19 including transmission, symptoms, prevention, PPE use (if applicable).
- Sick leave policies should also be reviewed with all staff as well as reminders on not reporting to work when ill.
- Auditing of hand hygiene, PPE donning/doffing (if applicable) and environmental cleaning should be conducted on a routine basis.
  - Daily observations and spot checks with staff are helpful methods to ensure staff compliance.
- Information on the center's daily operations and protocols should be provided to all participants and their families/caregivers prior to reopening.
  - Updates to this information should be communicated on a timely basis.

#### RESOURCES

- Department of Health, Disease Outbreak Control Division (DOCD)
  - <https://health.hawaii.gov/coronavirusdisease2019/>
  - [https://health.hawaii.gov/docd/disease\\_listing/influenza-flu/](https://health.hawaii.gov/docd/disease_listing/influenza-flu/)
- Aloha United Way (AUW) 211 (assists with questions on COVID-19 as well as assistance with finding food, shelter, financial assistance, child-care, parenting support, elderly care, disability services, job training and much more.)
  - <https://www.auw211.org/>
  - Call or text: **211** or **877-275-6569**
  - Email: [info211@auw.org](mailto:info211@auw.org)
- CDC (<https://www.cdc.gov/coronavirus/2019-nCoV/index.html>)