

## Guidance for Illinois Department of Human Services Staff & Providers

Dear IDHS Providers:

The following guidance is based on the most current Centers for Disease Control and Prevention (CDC) and Illinois Department of Public Health (IDPH) recommendations for prevention of the spread the novel coronavirus of 2019 (COVID-19).

Please review this information, including the links below, with your program's leadership and staff and adjust policies and protocols if needed. This guidance is not intended to address every potential scenario that may arise as this situation evolves and may change as circumstances change.

IDHS encourages you to also monitor Local Health Department guidance and keep in close contact with the IDHS program staff who understand your programs and/or services best. Together, we can elevate and address priority issues of concern.

### **A. Guidance for programs funded, licensed, or regulated by IDHS when making home visits:**

When preparing or scheduling appointments for home-based visits, be sure to ask all clients or applicable family members the following 3 questions:

1. Within the last 14 days, have you traveled to a country for which the CDC has issued a [Level 2 or 3 travel designation?](#) [\(These countries now include China, Iran, South Korea, Italy, and Japan.\)](#)
  2. Have you had contact with any person who is showing symptoms for COVID- 19 within the last 14 days, OR with anyone with known COVID-19?; and
  3. Do you have any symptoms of a respiratory infection (e.g., cough, fever, or shortness of breath)?
- If the client or family member responds "Yes" to questions 1 OR 2, but "No" to question 3 (i.e., reports no symptoms of a respiratory infection), immediately consult the provider supervisor and/or treatment team to assess whether there are any potentially urgent safety risks or behavioral health needs (e.g., medications, suicide or violence risk, etc.).

- If there are urgent needs, the provider supervisor/treatment team should assess whether those needs can be safely met remotely (e.g., e- prescribing, telephone assessment, telehealth visit, etc.). If the client must be seen to meet urgent needs, including behavioral health needs, the provider supervisor/treatment team should instruct the client to remain at home and to contact their medical professional immediately.
  - Instruct the symptomatic client or family member to use a mask, if available, place themselves in a separate room with the door closed if possible, and get assessed by a medical professional immediately before any visitation arrangements are made. If possible, the client or family member should use a separate bathroom. Please contact your local IDHS office to discuss urgent scenarios so they can provide guidance on a case by case basis.
  - If the client does not have urgent needs or those needs can be met remotely, please instruct the family/client to stay home and to contact the IDPH for further guidance, which may include a recommendation for a self-isolation for 14 days. The provider supervisor/caseworker and/or supervisor/treatment team should also contact IDPH directly to relay the information from question 1 and 2.
- If the client or family member responds “Yes” to questions 1 OR 2, AND to question 3, (i.e., reports having symptoms):
    - Instruct the symptomatic client or family member to use a mask, if available, place themselves in a separate room with the door closed if possible, and get assessed by a medical professional immediately before any visitation arrangements are made. If possible, the client or family member should use a separate bathroom. Alternatively, the client may be referred to the nearest emergency room for immediate attention.
    - In all circumstances above, please instruct the client or family member to notify the receiving medical provider and transporter in advance of potential concern for COVID-19.
    - Please contact your IDHS program staff to discuss urgent service needs so they can provide guidance on a case-by-case basis.

**B. Guidance for screening visitors/members of the public to IDHS facilities and to residential and non-residential programs funded, licensed, or regulated by IDHS:**

The below protocol is applicable to any facility or program that receives visitors or members of the public as a part of its daily operations. This includes people who attend in-person administrative hearings in IDHS offices.

- All facilities, programs, and offices receiving regular in-person contact with members of the public should develop policies to schedule and pre-screen over the telephone all visits by non-client/resident/staff entities, including families, attorneys, case managers, and social workers, using the three questions above.
  - Upon screening, if a potential visitor answers “Yes” to any of the three questions above, please politely instruct them not to visit the facility, program, or office until the specific scenario can be further assessed. If a member of the public is scheduled to appear before an administrative law judge for an administrative hearing, IDHS will entertain requests for continuance and will implement telephonic hearings to the extent possible.
    - For potential visitors who answer “Yes” to questions 1 OR 2, but “No” to question 3 (i.e., reports no symptoms of a respiratory infection), please also instruct them to contact IDPH for further direction.
    - For potential visitors who answer “Yes” to questions 1 OR 2, AND also “Yes” to question 3, (i.e., reports having symptoms) please also instruct them to immediately contact their medical provider and Local Health Department, and to call 911 if they are experiencing serious symptoms (e.g., difficulty breathing).
    - Please also instruct the screened individual to notify the receiving medical provider and transporter in advance of potential concern for COVID-19.
- If facilities/program providers receive unscheduled visitors, either politely instruct them to leave and call to schedule a visit, or screen them appropriately before allowing entrance into the facility/program.

- If upon screening, the unscheduled visitor answers “Yes” to any of the questions above, request that they postpone their visit for 14 days and/or complete their request online or by telephone. If the visitor is requesting an application for benefits, allow him or her to complete the minimum requirements of an application.
- Alternatively, they may be referred to the nearest emergency room for immediate attention.
- In all circumstances above, please also instruct the screened individual to notify the receiving medical provider and transporter in advance of potential concern for COVID-19.
- Community Day Services should send a letter to partner agencies requesting that external staff not visit or complete observations during day program hours.
- No attendance at a Community Day Service provider where a positive case has been found for 14 days.

**C. Guidance for current and potential incoming residents at IDHS facilities or other residential programs funded, licensed, or regulated by IDHS (including homeless shelters, domestic violence shelters, and food pantries):**

Current Recipients of Services/Residents: All IDHS facilities and residential facilities funded, licensed, or regulated by IDHS should consider screening current recipients of services/residents using the guidance above on an ongoing basis, and should respond accordingly if a recipient of services/resident is experiencing symptoms and responds “Yes” to questions 1 AND 2 above. If a current recipient of services/resident can answer “Yes” to questions 1, 2, AND 3:

- Provide a mask for the recipient of services/resident if available;
- Isolate the recipient of services/resident in a private room with the door closed if possible and ensure that they are kept separate from other residents.
- If the recipient of services/resident is a minor, implement protocol to notify the parent or guardian of the identified youth’s potential medical situation.

A program medical provider should then immediately assess the individual using appropriate PPE if possible, or if no qualified program medical provider is available, the person should be asked to contact their own medical professional immediately. The programs should also contact IDPH for further recommendations including transport to their recommended medical facility if necessary. Please also instruct the program to notify the receiving medical provider and transporter in advance of potential concern for COVID-19. All IDHS facilities and residential facilities funded, licensed, or regulated by IDHS should continue to review their own emergency preparedness plans and assess for continued operation in case of an emergency.

This will include a policy to notify parents/guardians of the identified youth's potential medical situation.

- All facilities and programs should assess both their facility and workforce capacity to accommodate the potential need for an increased number of isolations rooms and the potential decrease in staffing availability.
- As a result of the above assessment, programs may need to prioritize service provision and planning.
- If the needs of the facility/program exceed current capacity or ability, please contact the relevant IDHS program for further assistance.

Limit access to CILA homes

- Consider discouraging family visits. Arrange FaceTime or Skype, as able.
- Consider limiting visits to family members' homes unless a person served can stay with them for an extended period of time (up to 14 days).

Potential Incoming Recipients of Services/Residents: All IDHS facilities and residential facilities funded, licensed, or regulated by IDHS should consider screening potential incoming recipients of services/residents using the guidance above. If a potential incoming recipient of services/resident responds "Yes" to question 1, 2, OR 3, do not bring in for services or residency and instruct them to seek assessment by a medical provider and to notify the receiving medical provider and transporter in advance of potential concern for COVID-19.

**D. Guidance for visitors to any childcare setting, including specialist and monitors:**

When preparing to visit or inspect a childcare setting, all childcare specialists/monitors should immediately implement policies to schedule and pre- screen over the telephone all visits using the three questions above.

- If specialists/monitors receive “Yes” answer to any of the questions, they should not visit the program until the specific scenario can be further assessed. If a health and safety issue necessitated the need to visit the provider, please contact your IDHS program staff for guidance on a case by case basis.
- If specialists/monitors receive “Yes” to questions 1 OR 2, but “No” to question 3 (i.e., reports no symptoms of a respiratory infection), they should additionally instruct the provider to contact the IDPH, their local health department or their healthcare provider for further direction.
- If specialist/monitors receive “Yes” answers to questions 1 or 2, AND also “Yes” to question 3, (i.e., reports having symptoms), the specialists/monitors should instruct the provider to immediately contact their medical provider and Local Health Department, and to call 911 if they are experiencing serious symptoms (e.g., difficulty breathing). Please instruct the provider to notify the medical provider and transporter in advance and inform them of potential concern for COVID-19
- In the event there is a serious health and safety need that requires an unannounced visit, specialists/monitors should screen the provider before entering the program and instruct the provider as above if answering “Yes” to any questions.
- The above protocol should be used when parents or family members request to visit a childcare program, and childcare providers should review with program leadership and staff to make any necessary adjustments to program policies and protocols.

Additionally, all the above facilities/programs/providers should contact any entities that have staff regularly visiting their programs (e.g., contracted/per diem staffing agencies, service delivery organizations, itinerant provider staff, cleaning agencies, etc.) to review and approve their screening protocols. If the protocols of outside entities do not meet these standards, providers should take responsibility for screening these visitors.

Finally, as a reminder, all Staff/Providers should follow the CDC's guidelines for infection control basics including hand hygiene:

- [Infection Control Basics](#)
- [Hand Hygiene in Health Care Settings](#)
- [Handwashing: Clean Hands Save Lives](#)