

Home Visit Protocol

Individuals may resume participation in home and family visits with all appropriate risk mitigation strategies in place. These include safe social distancing, use of masks or other face coverings when tolerated, meticulous attention to hand washing and proper cleaning and disinfection.

Families are reminded that during any off-site visit, exposure to members of different households and to public places, in general, should be done with caution and on a limited basis. Good hygiene must be practiced and safe social distancing should be maintained, whenever possible. Consistent with Executive Order 202.17, masks must be worn in public whenever social distancing cannot be maintained, to the extent they can be medically tolerated.

Individuals may participate in home or family visits **only** if all of the following circumstances are met:

- 1. The individual is not suspected or confirmed to have COVID-19, and is not under any quarantine or isolation requirements;
- 2. The individual passes a health screen and temperature check immediately prior to leaving the certified residence;
- 3. The individual washes their hands immediately prior to their departure from and return to the residence;
- 4. The location(s) of the visit does not include: (a) any household member suspected or confirmed to have COVID-19; (b) any household member who has been exposed to COVID-19 in the prior 14 days; or (c) any household member displays any symptoms of COVID-19 in the preceding 14 days; AND
- 5. Families ensure that individuals are washing and/or sanitizing hands throughout the day, implementing social distancing whenever possible, and wearing face coverings whenever social distancing cannot be maintained in public.

In order to be able to sufficiently trace and track any potential COVID-19 exposure, Head Injury Association is required to maintain a daily log of all home visits and other visits off site from the certified residence. Daily logs must include the following information:

- The names of any individuals who participated in a home visit, including the address of the home visit, and the dates and times such visit started and ended;
- Confirmation that person(s) picking up or receiving an individual for a home Confirmation that person(s) picking up or receiving an individual for a home visit denied that anyone in the housing had any known exposure to COVID-19 in the prior 14 days;
- Confirmation that person(s) picking up or receiving an individual for a home visit denied that anyone in the household has exhibited any of the following symptoms within the last 14 days:

- Cough;
- Fever of 100.0 degrees or greater;
- Sore Throat;
- Shortness of breath;
- Headache;
- Chills;
- Muscle Pain; and/or
- New loss of taste or smell.

Confirmation that the individual participating in the visit passed their health screen immediately prior to participating in the home visit;

Addresses of any and all places the individual spent time during the home visit, including the names of other people spending time in close contact (within 6 feet) or proximate contact; AND

Confirmation that the individual passed their health screen upon return from the home visit.