



student
conservation
association

COVID-19 Management Plan

Abbreviated for SCA Members

1/27/2021

NOTICE: This document is not intended for use or application outside of SCA, and any distribution, use or adoption of this document by any third party is not authorized by SCA. Application of any COVID-19, risk management, or other safety protocols should be created by each organization only after their own careful consideration to match the uniqueness of that organization's situation, including population, staff, mission, training, resources, environment, risk tolerance, etc. SCA is not offering any such advice by virtue of this document. If you or your organization adopt or otherwise utilize some or all of these protocols or document, you do so without the consent of SCA and at your own risk.

Table of Contents

SCA’s COVID-19 Management Framework	4
Intent & Guiding Principles for COVID Management	4
Phased Structure to SCA COVID Management	5
Definitions	6
1. Signs & Symptoms of COVID-19	7
General symptoms	7
Escalated symptoms (seek medical care).....	7
2. General SCA COVID Management Policies	8
3. Communications Policies & Procedures	8
SCA Operational COVID-19 Policy Framework	10
4. COVID Mitigation Best Management Practices, Strategies and Techniques	10
Informational COVID Mitigation Techniques	10
Behavioral & Structural COVID Mitigation Techniques.....	10
Personal Protective Equipment (PPE) COVID Mitigation Techniques	10
Sanitation and Disinfection COVID Mitigation Techniques	10
Environmental COVID Mitigation Techniques.....	10
COVID-19 Vaccinations, Antibodies, Tests, and Proof of Recovery.....	11
Quick Reference for COVID Policy Timeframes	12
5. Pre-Program COVID Management	13
Pre-Program Policy for Members and Participants.....	13
Pre-Program Policy for Program Management.....	13
6. On Program COVID Management	15
On-Program COVID Protections Policy.....	15
On-Program ‘family unit’ or ‘self-contained’ Group Designation Policy	15
Visitor Policy.....	16
On-Program COVID Management Procedures.....	16
7. COVID Related Travel, Vehicle & Transportation Management	17
Travel Related Policy & Procedure.....	17
Vehicle Related Policy & Procedure	17
8. COVID Related Incident Response	18
Incident Response Decision-Tree	18
Isolation Policies and Procedures	19
Quarantine Policies and Procedures	20
COVID Related Incident Reporting	21
Workers Compensation Reporting.....	22
9. Leave, Return to Work/Service, & Time-off COVID Management	23
Prior to Departure for Holiday or Leave Policy	23
While on Holiday or Leave Procedures	23
Return to Work/Service & COVID Testing Policy.....	23

Return to Work/Service COVID Testing Procedure.....23

Appendices.....**24**

Appendix A: Pre-Program Participant COVID Agreement.....**25**

SCA's COVID-19 Management Framework

Intent & Guiding Principles for COVID Management

Since the onset of the COVID-19 pandemic in the United States, the safety of SCA staff and members has been paramount in the organization's response and decision-making. It is likely that the pandemic will continue to evolve throughout 2021. This document reflects an operational continuity plan under widespread COVID-19 conditions.

This management plan is designed to be implemented on a national level. The policies and procedures outlined within apply across all programs, work, service, and locations. National program leaders will set forth the standards and best practices for the application of these policies to suit the context of their program models and locations.

This COVID management plan will be implemented in addition to the larger SCA policy framework, including the policies and procedures described within the SCA Field Guide and Incident Response Handbook.

The SCA's COVID Management Plan was designed and is continually reviewed by utilizing a diverse range of perceptions and experiences from across the SCA. The goal of this approach is to create and maintain an effective and relevant COVID management policy framework. Please direct questions, observations, and feedback on this plan to your supervisor and/or the National Safety Officer, Stuart Slay sslay@thesca.org.

This plan is designed under several guiding principles:

- The safety of staff, members, and SCA partner personnel is paramount.
- Personnel are empowered to exercise personal agency (i.e., personnel have space to choose or request an alternate route to do work in the event personal assessment of safety cannot be met).
- This management plan is a working document and will be reviewed and revised on an on-going, regular basis.
- Clear communications and delegation of responsibilities are essential components of an effective plan. The policies outlined within this document are coded to enable clear and targeted communications and feedback.

Phased Structure to SCA COVID Management

As the COVID-19 situation is constant and evolving in the United States, the SCA strives to outline an adaptable and resilient management framework. These phases will be implemented at the local level and are dependent upon the State and county a program or work and service is conducted.

Decisions to change from one phased plan to another will be made with consultation from the local Program Manager, the National Program Manager, and the National Safety Manager.

This document reflects Phase 2 conditions and indications.

Phase 1	Phase 2	Phase 3
<p>Indications: Upward trajectory of transmission (e.g., widespread community transmission). Limited capacity of local healthcare resources. Local emergency orders are in place.</p> <p>SCA Management: Severe limitation of work and travel. Possible stay-at-home orders will be applied to the work and program context.</p>	<p>Indications: Fluid state of transmission. Local healthcare resources are available yet strained. Local emergency orders are not in place, yet standing restrictions and regulations are enforced.</p> <p>SCA Management: Emphasis on identifying potential infection and response. Limitation of travel, control program entry points and response to limit potential for infection and spread.</p>	<p>Indications: Downward trajectory of transmission (e.g., transmission rates are low and stable, vaccination may be widespread). Standing restrictions and regulations are lifted. Local healthcare resources are widely available.</p> <p>SCA Management: Toward pre-COVID management framework</p>

Definitions

Policy - a mandatory directive in place to ensure effective institutional risk management. Adherence to policy is required. Lack of adherence to policy may result in disciplinary action up to, and including, termination. The term will is used to communicate policy.

Procedure – a plan of action informed by, and consistent with, approved policies and preferred practices. Program managers determine the extent that national SCA procedures are applied and required to the local and program context. The term should is used to communicate procedure.

Quarantine – separation of an individual or group of people from others. Implemented to monitor for the development of COVID-19 sign(s) and symptom(s). Quarantine may occur under the direction and supervision of SCA personnel, site/partner agency personnel, or self-quarantine at home.

Isolation – separation of an individual from others to contain the spread of known COVID-19 sign(s) and symptom(s). Isolation may occur under the direction and supervision of SCA personnel, site/partner agency personnel, or self-isolation at home.

Staff – personnel employed SCA.

Members – crew leaders and participants of SCA programming.

Personnel – an umbrella term, referring to SCA staff, leaders, and members.

Direct Exposure – the potential that an individual(s) are or within 14 days have been in direct contact with a known or suspected case of COVID-19. For example, a person is considered to have one degree of separation, or contact, with a confirmed case or ‘person-under-suspicion’ of COVID-19.

COVID-19 Test – A viral diagnostic test used to confirm the presence of SARS-CoV-2, the virus that causes COVID-19 disease.

Proof of Recovery – Documentation of recovery from COVID-19 within the previous 90-day period.

1. Signs & Symptoms of COVID-19

Direct contact with airborne respiratory droplets is the primary vector of transmission. Limiting potential exposure to those fluids is essential for mitigating risks associated with contracting and spreading COVID-19.

General symptoms

(1.1) This list will be used to identify and communicate COVID related signs and symptoms.

People with COVID-19 report a wide range of symptoms. This range extends from mild symptoms to severe illness. Signs and symptoms may appear **2-14 days after exposure to the virus**. Individuals who present these signs or report these symptoms are suspected to have COVID-19 and pose risk to transmit the disease to others:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

This list does not include all possible symptoms. The CDC continues to update this list as more information is known about COVID-19. Link to CDC's [Link to CDC's COVID-19 Symptoms](#).

Escalated symptoms (seek medical care)

If an individual presents or reports any of these signs, immediate emergency medical care should be sought:

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion
- Inability to wake or stay awake
- Bluish lips or face
- *Other symptoms that are severe or concerning

Before seeking medical care the healthcare provider or emergency service should be notified that the patient is suspected to have COVID-19.

Reducing the spread of the virus is a priority for all communities. Although many COVID-19 patients fully recover, there is risk of long-lasting harm and fatality, especially for high-risk populations such as the very young, elderly, or people with compromised or weakened immune system.

2. General SCA COVID Management Policies

Policies

- (2.1) SCA staff and leaders will know and acknowledge understanding of SCA's COVID-19 management policies and procedures.
- (2.2) All SCA operations will comply to local, state, and national laws and regulations pertaining to COVID-19. In the rare event an SCA policy conflicts with a governmental regulation, the more conservative policy or regulation will be applied.
- (2.3) Circumstances in which an SCA policy is not followed will be reported in an incident report.
- (2.4) Member and staff medical information will be kept confidential, in accordance all applicable laws.
- (2.5) Staff working in an SCA office or facility will check-in with their supervisor about applying the appropriate, applicable, and relevant COVID management policies, specifically section 4 (COVID mitigation policies), section 7 (travel and visitor policies), and section 8 (incident response policies).
- (2.6) Single day programs or events will apply the appropriate and relevant COVID management policies, specifically section 4 (COVID mitigation policies) and section 7 (travel and visitor policies).
- (2.7) The design and planning for single day programs or events will be discussed with the Safety Department prior to implementation.

Procedures

1. SCA staff should work from home and avoid in-person meetings whenever possible.
2. SCA staff who are well but have a sick family member at home with COVID-19 should notify their supervisor.

3. Communications Policies & Procedures

Internal Communications

- (3.1) The SCA COVID Management Team will monitor Federal COVID management and response communications, recommendations, and regulations.
- (3.2) Program Managers, under the direction of their National Program leadership, will monitor State and local COVID management and response communications, recommendations, and regulations for the programs and positions of which they are responsible ([Link to State Health Departments](#) and [Link to Local Public Health Departments](#))
- (3.3) SCA will keep staff informed of new and updated directives and related developments through a combination of:
 - o Compass Point alerts,
 - o the twice-monthly Compass newsletter,
 - o posts to the COVID section of the intranet,
 - o memos to affected staff,
 - o presentations at program leadership meetings,
 - o and 'brown bag' sessions

External Communications

- (3.4) SCA will communicate new and updated policies and practices to external audiences, including but not limited to members, parents, partners, and funders, via email alerts,

MySCA posts, posts to the SCA website, and/or social media. When warranted, SCA will also reach out to individuals by telephone. Should the pandemic persist, related policies will be added to SCA's Member and Partner Handbooks.

SCA Operational COVID-19 Policy Framework

4. COVID Mitigation Best Management Practices, Strategies and Techniques

(4.1) These techniques make up the broader COVID management strategy employed by the SCA. These techniques will serve as best management practices for designing, planning, and conducting normal work/service. Where specifically noted within this management plan, these techniques are policy and will, at a minimum, be followed (see [definitions](#)). This framework applies to all SCA operations, including field-based programs and work at SCA offices and facilities.

Informational COVID Mitigation Techniques

- Informed of inherent risk and mitigation expectations prior to position and program commencement
- Briefing on strategies, techniques, policies, and procedures for mitigation and prevention
- Informational signage posted in common spaces
- COVID-19 viral diagnostic testing
- Contact tracing: informing personnel who may have been exposed to COVID-19
- Contact tracing: investigation to identify potential pathways to exposure

Behavioral & Structural COVID Mitigation Techniques

- Physical distancing from others (e.g., minimum of 6ft), including single occupancy accommodations
- Group size limitations, including the use of phased program starts and re-entry
- Designation of 'Self-contained' groups or 'family units' to prevent transmission and enable efficient work
- Minimization of non-essential travel
- Remote and/or independent work
- Cover coughs and sneezes with a barrier (e.g., tissue or mask), and into the elbow

Personal Protective Equipment (PPE) COVID Mitigation Techniques

- PPE standards for normal work/service remain relevant and in effect
- Regular sanitation of PPE
- Minimization of PPE sharing
- Face masks as recommended by the CDC (i.e., N-95, KF-94, or multi-layered and designed to be worn over the mouth and nose, required on federal property)
- Face shields for conducting technical and safety-critical work/service
- Eye protection
- Gloves such as work gloves used in normal practice, or medical gloves when handling potentially contaminated materials and assessing potential patients.

Sanitation and Disinfection COVID Mitigation Techniques

- Frequent handwashing with soap and running warm water for at least 20 seconds, and use of hand sanitizer when handwashing is unavailable
- Regular cleaning of surfaces utilizing bleach solutions and other recommended products by the CDC and EPA.

Environmental COVID Mitigation Techniques

- Direct and long exposure to sunlight to sanitize gear and equipment.
- Conducting work/service such as in-person meetings, events, and operations outdoors, and/or in well and regularly vented areas.

COVID-19 Vaccinations, Antibodies, Tests, and Proof of Recovery

Background

A viral diagnostic test is used to detect either the presence of the SARS-CoV-2 virus (i.e., a molecular test) or specific proteins made by the SARS-CoV-2 virus (i.e., an antigen test). SARS-CoV-2 is the virus that causes the COVID-19 disease. 40%-50% of positive test results are from asymptomatic patients (people without a sign or symptom but can transmit the virus to others). [CDC Information on tests](#) and [FDA Information on tests](#)

People who have recovered from COVID-19 may falsely test positive for 90 days.

At this time, the COVID-19 vaccine is not required to participate or work with the SCA. The SCA does, however, encourage members and staff to get vaccinated, when available. Both vaccines approved by the FDA require two doses. Each dose is administered in accordance with the drug manufacturer's time frame (21 or 28 days, respectively). Additionally, it is suggested that a two- or three-week period after the second dose is required for the vaccine to be considered fully effective. Vaccination does not reduce the risk of transmission, only illness. Vaccination alone will not cause a COVID test to be positive. [CDC Information on vaccination](#)

Policy

- (4.2) The following criteria will be used to determine the suitability of a COVID-19 test:
- A viral test (either a molecular or antigen test, including a Nucleic Acid Amplification (NAAT), or a Polymerase Chain Reaction (PCR) test), *and*
 - FDA approved, *and*
 - tested in a laboratory setting (including home specimen collection kits that are tested in a laboratory).
- (4.3) An antibody or serological test will not be used for the COVID-19 testing purposes outlined throughout this document.
- (4.4) Proof of recovery from COVID-19 will be required for personnel to forgo any testing policy or procedure. Documentation of recovery includes:
- a positive COVID-19 test result from the previous 90-day period, *and*
 - indication that SCA's criteria to end isolation has been met (*see* section 8), *and*
 - a letter from a healthcare provider or public health official that states clearance for travel.
- (4.5) Personnel who:
- have received one or both doses of the vaccine, *or*
 - tested positive for antibodies, *or*
 - previously recovered from COVID-19
- will follow all SCA COVID management policies, procedures, and best management mitigation strategies (*see* policy 4.1), including the testing and isolation/quarantine policies outlined throughout this document.

Procedure

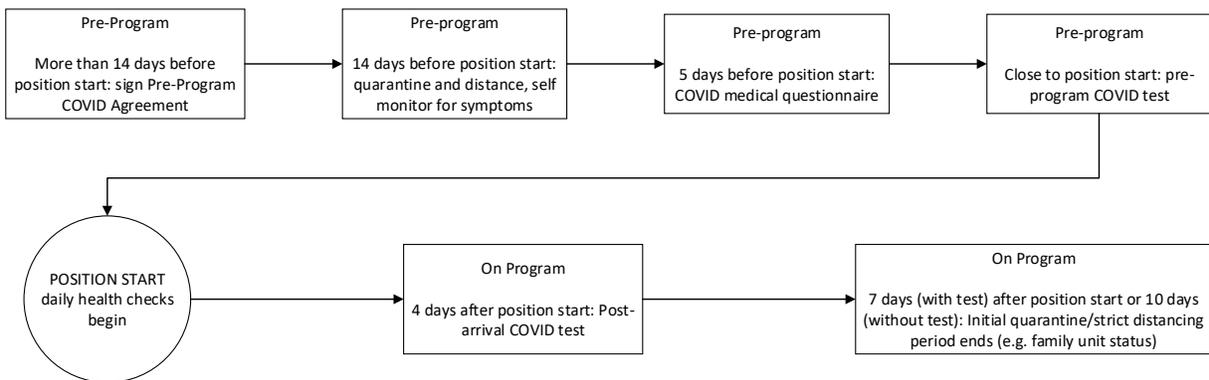
1. Personnel who anticipate travelling in order to receive either dose of the COVID vaccine should communicate in advance with their supervisor to research local vaccine distribution and access possibilities, and/or to consider travel arrangements.

Quick Reference for COVID Policy Timeframes

The following table is a reference guide for timelines related to testing and quarantining/isolation. The reference table reflects how various timelines are used throughout the policy framework. This quick reference is not a substitute for knowing and following the specific policies and procedures for the circumstances and purposes outlined throughout this document.

Reference Guide for SCA COVID Policies Timeframes	
72 hours	Minimum consecutive hours no signs or symptoms are present to discontinue isolation
4 days	Minimum number of days to wait after starting quarantine to get a COVID test. (Can get tested starting on fifth day)
7 days	Minimum duration of quarantine period when a COVID test is used to determine illness
10 days	Minimum duration of quarantine period when COVID test is not used to determine illness
14 days	Quarantine and distancing period before a program/position start (agreed to in the pre-program agreement form)
90 days	The period after recovery from COVID in which a test may be falsely positive. A COVID test should not be administered during this period

Timeline of Pre-Program and Program Start COVID Management Steps



5. Pre-Program COVID Management

Pre-Program Policy for Members and Participants

- (5.1) A member agreement specific to COVID-19 will be acknowledged within 14 days prior to travelling to or commencing a program or position (see [Appendix](#)).
- (5.2) Members will complete and submit a COVID-19 specific medical questionnaire within 5 days prior to travelling or beginning a program or position (see [Appendix](#)).
- (5.3) Members and field staff will conduct a COVID-19 test prior to a program or position's commencement and will report the results before travelling to or beginning a program or position.
- (5.4) Members who have recovered from COVID-19 within the previous 90 days will submit proof of recovery prior to the position's commencement (see section 4).
- (5.5) Members and field personnel will quarantine and physical distance for 14 days prior to travelling to a new program's start.
- (5.6) Members and field personnel will self-monitor for COVID-19 related symptoms 14 days prior to travelling to a new program's start.
- (5.7) In the event a member or staff report a sign(s) or symptom(s) of COVID-19 and/or reports a positive COVID-19 test result, will delay travelling to the program start and self-isolate for a minimum of a 10-day assessment period.
- (5.8) In the event travel the position/program's start is delayed due to the presence of COVID-19 signs/symptoms, program staff will check in and monitor for worsening sign/symptoms and clearance to travel throughout the isolation period.
- (5.9) Members and staff with COVID signs or symptoms will be symptom free for a minimum of 72 consecutive hours prior to travelling to or commencing a program/position start. Program managers may require additional documentation from a healthcare provider or public health official.

Pre-Program Policy for Program Management

- (5.10) Program design and planning COVID rubrics will be initiated by program managers or NPC/agency supervisor, and completed/reviewed with program staff and crew leaders prior a new program and/or position(s) commencement (see [Appendix](#)).
- (5.11) JHAs and ERPs will include COVID specific risks and plans for responding to illness, and preventing the spread of further transmission.
- (5.12) SCA COVID management policies, procedures, and protocols will be shared with partner agencies and site managers prior to a new program or position(s) commencement.
- (5.13) SCA personnel will discuss and collaborate with agency partners and site managers to discuss and implement modifications to work/service sites for additional protective measures, including: signage, physical distancing and traffic flow, and physical barriers.
- (5.14) COVID management and emergency planning will be conducted with partner agencies and site managers prior to a new program or position(s) commencement. Emergency COVID planning includes (see [Appendix](#) for template rubric):
 - o Quarantine and isolation locations, and medical and logistical support,
 - o Role clarity and protocols for emergency transport to a medical facility,
 - o Inclusion and notification of contact tracing measures, such as personnel exposures or potential exposures,

- Emergency contact information and information flow, and
- Standards, expectations, and roles between SCA personnel, agency personnel, site visitors, and public for physical distancing, masks and other PPE, sanitation and disinfection, testing, and return to work/service related COVID protections.

6. On Program COVID Management

On-Program COVID Protections Policy

- (6.2) An COVID-19 test will be conducted no earlier than day 4 after a new program or position's commencement. Individually placed positions will consult with SCA Program Managers and their site supervisor and may forgo this test in the event a post-arrival test is not possible or is irrelevant (i.e., an intern does telework),
- (6.3) In the event a post-arrival/position start COVID-19 test is not conducted because the member has recovered from COVID within the previous 90 days, all other personnel who may be sharing a room to sleep in will be consulted in advance.
- (6.4) Members and staff will conduct and record a daily health log, including screening for COVID-related signs and symptoms and temperature check.
- (6.5) Face masks will be available and ready to be worn at all times. Considerations and culture around wearing face masks will be taught and regularly monitored.
- (6.6) Face shields will be available to be worn for technical and safety-critical work/service
- (6.7) Frequent, regular, and proper handwashing and sanitation will be taught, practiced, and monitored.
- (6.8) Regular and frequent cleaning, sanitation, and disinfection of surfaces will be conducted.
- (6.9) Community contracts for shared commitment will be designed early in a program. Community contracts will, at minimum, include:
 - o Commitment to SCA's COVID [Mitigation Strategies and Techniques](#), and
 - o Living and behavior expectations for days off (e.g., living by CDC recommendations such as avoiding large gatherings, wearing a mask, hand washing, etc.)
- (6.10) Commitments made in a community contract will be re-iterated and revisited prior to days off, leave, and holidays.

On-Program 'family unit' or 'self-contained' Group Designation Policy

- (6.11) Intact (e.g., non-commuting) groups will be designated a 'family unit' or 'self-contained' after all the following conditions are met:
 - o A minimum 10-day period in which no signs or symptoms are observed or reported, *or*, a minimum 7-day period in which no signs/symptoms are observed with a negative COVID-19 test result (conducted no earlier than day 4 from program's start), *and*
 - o Community contracts are established, *and*
 - o Appropriate and adequate protective measures are observed to be utilized and apart of the group culture, *and*
 - o Knowledge and adherence to SCA's COVID Management policies and procedures are demonstrated.
- (6.12) Groups will return to "un-contained" status when:
 - o Group members observe or report COVID signs or symptoms, *or*
 - o Inappropriate and inadequate protective measures are observed or reported, *or*
 - o Lack of knowledge or adherence to SCA's COVID Management policies and procedures are observed or reported, *or*
 - o The community contract is broken, *or*

- Group members are exposed to external visitors/personnel less than 6ft for greater than 15 minutes, *or*
- Concern is raised by a member(s), SCA staff, or site/partner agency personnel.

Visitor Policy

- (6.13) External group visitors such as partner and site personnel, SCA managers, and trainers will be screened for symptoms and will delay or cancel their visit in the event they show or report a sign or symptom(s).
- (6.14) External visitors such as partner and site personnel, SCA managers, and trainers will follow SCA's COVID [Mitigation Strategies and Techniques](#) , and program procedures and group norms when visiting an SCA work site.

On-Program COVID Management Procedures

1. Physical distancing (e.g., 6ft/15 min), 'family unit' or 'self-contained' status, and potential for risks such as heat illness should be considered in regard to face masks.
2. Number of personnel in accommodations should be considered in the program design phase. Factors such as risk of transmission, 'family units' or 'self-contained' groups, program and site capacity and availability, and other hazards such as bears should be considered.
3. Each member should be issued a personal sanitation and protection kit. Contents should be refilled regularly. Contents may include, for example:
 - Hand sanitizer
 - EPA approved disinfectant (e.g., wipes or spray)
 - Masks
4. Providing personal supplies of food and water should be considered and prioritized over group/shared supplies.

7. COVID Related Travel, Vehicle & Transportation Management

Travel Related Policy & Procedure

Policy

- (7.1) Members and staff will be personally responsible for knowing and following current CDC guidelines and Federal, State, and local guidelines and mandates related to travel. [Link to CDC travel advice](#).

Procedure

1. Travel via public transportation (e.g., bus, train, plane) for non-essential work and business should be minimized when possible.
2. Members and staff should drive their personal vehicles to project sites when possible.
3. Members and staff travelling for work-related purposes should follow current Federal, state, and local guidelines and recommendations (e.g. [Link to State Health Departments](#) and [Link to Local Public Health Departments](#))

Vehicle Related Policy & Procedure

Policy

- (7.2) Program managers will report any modifications to SCA's driver training, including exemptions to in-person driver tests.
- (7.3) Masks will be worn in vehicles, until 'family unit' or 'self-contained' status is obtained (*see* section 6 for intact, non-commuting groups).
- (7.4) Number of passengers per vehicle will not exceed half the vehicle's usable seatbelt capacity, until 'family unit' or 'self-contained' status is obtained (*see* section 6).

Procedure

4. Program managers, under the direction of their national program leaders, should consider modifications and exceptions to the in-person driving test requirement, including to members who report to and receive in-person training from a partner.
5. Vehicles should be well-ventilated while in use.
6. Each vehicle should contain a designated hand-sanitizer and wipes for regular and frequent use.

8. COVID Related Incident Response

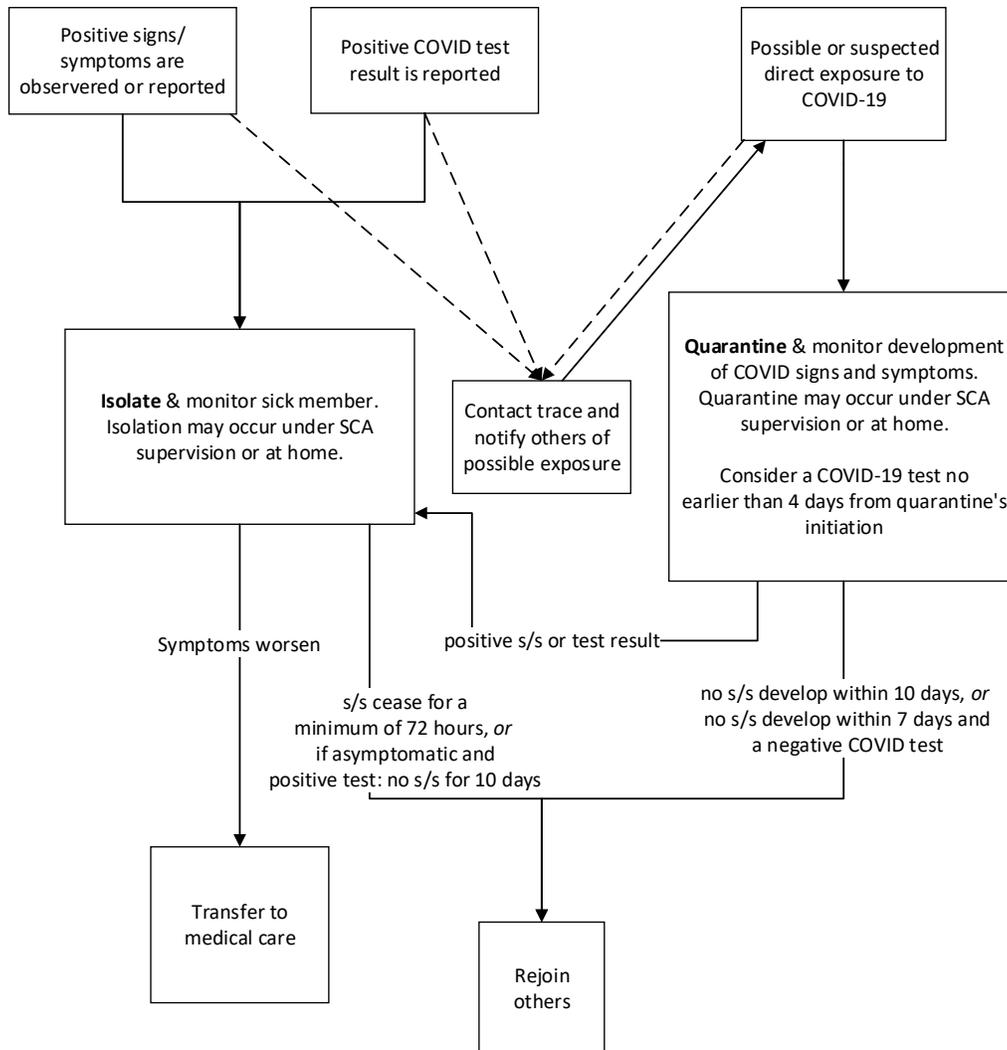
Definitions:

Quarantine – separation of an individual or group of people from others. Implemented to monitor for the development of COVID-19 sign(s) and symptom(s). Quarantine may occur under the direction and supervision of SCA personnel, site/partner agency personnel, or self-quarantine at home.

Isolation – separation of an individual from others to contain the spread of known COVID-19 sign(s) and symptom(s). Isolation may occur under the direction and supervision of SCA personnel, site/partner agency personnel, or self-isolation at home.

Supplies checklists for supporting personnel in isolation and quarantine are in [Appendix](#).

Incident Response Decision-Tree



Isolation Policies and Procedures

Isolation – separation of an individual from others to contain the spread of known COVID-19 sign(s) and symptom(s). Isolation may occur under the direction and supervision of SCA personnel, site/partner agency personnel, or self-isolation at home.

Example: A member reports COVID signs/symptoms or a positive test result. They are *isolated* to contain the further spread of illness.

Policy

- (8.1) A member or staff will isolate, including delaying travel/commuting to self-isolate, if:
 - the presence of a sign and/or symptom(s) are observed and/or reported, or
 - a positive COVID-19 test result is reported
- (8.2) In the event a member or staff observes or reports a COVID sign/symptom or a positive test result, a supervisor and/or YOSOGGY will be notified.
- (8.3) In the event of an exposure or suspected exposure, contact tracing will be conducted and personnel will be notified of their potential exposure.
- (8.4) Personnel in isolation will conduct and report a daily health log, including temperature checks.
- (8.5) Personnel in isolation will receive communications guidance while in isolation
- (8.6) Personnel in isolation will be monitored a minimum of once a day for increasing or worsening sign(s) and symptom(s) and psychological stress
- (8.7) Personnel will remain in isolation until sign(s) and symptom(s) cease for a minimum of 72 consecutive hours *or* care is transferred to professional medical care.
- (8.8) Personnel who test positive and are asymptomatic will remain in isolation for a minimum of 10 days, unless sign(s) or symptom(s) develop, in which case, see policy 8.7.
- (8.9) Personnel in isolation will not leave or be in physical contact with other individuals.
- (8.10) The decision to discontinue isolation and return to work/service will be considered on a case-by-case basis, with the consultation and direction from the medical community and local standards.

Procedure

1. Agency partners, site managers, and SCA personnel should communicate regarding procedures and practices for:
 - Communications and flow of information,
 - Maintaining isolation, including if transportation is required,
 - Decision making regarding transfer of care to a medical provider and/or transfer home,
 - Sanitation and disinfection of the isolation site and personal belongings, and
 - Contact tracing and possible exposure to other SCA and site personnel, public, etc.
2. Written clearance from a healthcare provider or public health official should be obtained for a member to discontinue isolation.
3. An COVID-19 test should be used to detect for an active COVID infection. If personnel have previously tested positive, an additional COVID test is not warranted.
4. Temperature should be measured by touchless thermometer.

Quarantine Policies and Procedures

Quarantine – separation of an individual or group of people from others. Implemented to monitor for the development of COVID-19 sign(s) and symptom(s). Quarantine may occur under the direction and supervision of SCA personnel, site/partner agency personnel, or self-quarantine at home.

Example: A member is exposed to a suspected infected person (e.g., another person who tested positive or showed signs/symptoms). The member is *quarantined* to monitor for the development of illness (e.g., a positive test result or the development of a sign/symptom).

Policy

- (8.11) Personnel who have had direct exposure to someone suspected with COVID-19 will quarantine, including delaying travel/commuting to self-quarantine.
- (8.12) Personnel in quarantine will conduct and report a daily health log, including temperature.
- (8.13) Members and personnel will not physically contact and remain physically distanced from others while in quarantine, including utilizing single room accommodations.
- (8.14) Personnel will remain in quarantine until either:
 - No signs and symptoms are observed or reported for 10 consecutive days, *or*
 - A negative COVID-19 test result is reported
- (8.15) A COVID-19 test used to discontinue quarantine will be administered no earlier than 4 days from the beginning of quarantine.
- (8.16) In the event a COVID-19 test is used to discontinue quarantine, quarantine will be a minimum of 7 days.
- (8.17) In the event a member in quarantine has recovered from COVID-19 within the previous 90 days, a COVID-19 test will not be required to leave quarantine. In this circumstance, personnel will quarantine for a minimum of 10 days.
- (8.18) In the event personnel in quarantine develops or reports a sign, symptom, or receives a positive test result, they will move to isolation or isolation status (see policies 8.7 and 8.8)

Procedure

- 5. Agency partners, site managers, and SCA personnel should communicate regarding procedures and practices for:
 - Communications and flow of information,
 - Maintaining isolation, including if transportation is required,
 - Decision making regarding transfer of care to a medical provider and/or transfer home,
 - Sanitation and disinfection of the quarantine site and personal belongings, and
 - Contact tracing and possible exposure to other SCA and site personnel, public, etc.

COVID Related Incident Reporting

SCA Incident Reporting Policy & COVID-related Thresholds

Policy

(8.19) All COVID related incidents will be reported and updated via an incident report in Salesforce. The “other” box under the Injury/Illness section can be used to signify “COVID-19 related.”

Reportable COVID-19 related incidents include:

- Member or staff reports a potential exposure,
- Policy not followed,
- Personnel are moved to isolation, including home isolation,
- Reporting a positive COVID-19 test result,
- Quarantine or isolation is broken before meeting the requirements for discontinuation,
- Signs and symptoms become worse, and/or patient is transferred to medical care,
- Partner and/or site personnel’s standards or practice of safety are perceived as inappropriate and/or inadequate, and
- A member or staff report that personal risk tolerance or safety is not met.

(8.20) The following incident threshold levels will be used for reporting COVID related incidents:

Level 0: (Near miss) Illness, infection, or transmission is narrowly avoided
Level 1: SCA COVID policies are not followed Anxiety or discomfort related to COVID (e.g. modifications and accommodations are required for work Member or leader participated in a large public or family gathering
Level 2: Member or leader has known exposure to someone with COVID symptoms, or COVID positive person Member or leader fails to follow SCA or Partner COVID protocols, including participant agreement Concern/anxiety over other crew members not following SCA or Partner COVID protocols
Level 3: Member, leader or staff tests positive for COVID
Level 4: Several crew members test positive for COVID COVID related hospitalization
Level 5: Fatality related to COVID

Workers Compensation Reporting

Policy

- (8.21) A workers compensation insurance claim will be filed for all COVID related illness and injury, including suspected exposures.
- (8.22) Workers compensation insurance claims will be submitted within 24 hours of the incident.

2020 Worker's Compensation Policy Information

Policy Number: WC2-Z11-253482-019

Liberty Mutual Address: PO Box 4205
London, KY 40742

Liberty Mutual Phone Number: 1-800-962-5157

SCA Contact: Human Resources at 603-504-3201 and workerscomp@thesca.org.

The Workers Compensation Insurance form is included in the online Incident Report Form on MySCA.

Please contact HR regarding questions related to filing Workers Comp claims.

9. Leave, Return to Work/Service, & Time-off COVID Management

These policies and procedures apply to holiday time-off and leave. Program managers, under the direction of their respective national program leaders, should determine the applicability and extent to which these policies are applied to weekend and days off. These decisions will be made in accordance with state and local regulations/recommendations and will consider the current status of community transmission. The [GA Tech COVID-19 Risk Assessment Planning Tool](#) and [COVID Tracking Project](#) can be utilized in understanding and monitoring community transmission at the county and state levels. *These return to work/service policies and procedures will not apply to intern or individually placed positions.* Interns will follow the guidance and protocols set forth by their agency partners and supervisors.

Prior to Departure for Holiday or Leave Policy

- (9.1) Prior to departure members and staff will review and acknowledge:
- Community agreement,
 - Current CDC guidelines and recommendations for protecting yourself and others,
 - Check-in and communications process and expectations while away, and
 - Return to work/service process, including applicable requirements for quarantining and COVID-19 testing.
- (9.2) In the event a member cannot agree to the policies and protocols for return to work/service, a Program Manager will be notified.

While on Holiday or Leave Procedures

1. Members and staff should self-monitor daily for COVID signs and symptom(s) while away.
2. In the event a member or staff presents with a COVID sign or symptom(s), a program leader or manager should be notified.
3. In the event a member or staff is directly exposed to COVID-19 while away, a program leader, manager, or supervisor should be notified.
4. Members and staff should report the results of their symptom check to program leaders or managers within the 4 days prior to traveling or commuting to return to work/service.

Return to Work/Service & COVID Testing Policy

- (9.3) While away, in the event a member or staff experiences a COVID sign or symptom(s) or a COVID-19 test result is positive, travel or commuting back to work/service will be delayed. Personnel will self-isolate until SCA's criteria to end isolation is met (*see section 8*)
- (9.4) While away, in the event a member or staff is directly exposed to someone suspected of having COVID-19 travelling or commuting back to work/service will be delayed. Personnel will self-isolate until SCA's criteria to end quarantine is met (*see section 8*).
- (9.5) For any COVID-19 test conducted as a part of the return to work/service process, results will be reported.

Return to Work/Service COVID Testing Procedure

5. Members and staff should conduct a COVID-19 test within the 4 days prior to returning to work/service, *and/or* no earlier than day 4 after returning to work/service.

Appendices

Appendix A: Pre-Program Participant COVID Agreement

Since the onset of the COVID-19 pandemic in the United States, the safety of SCA members and staff has been paramount in our organization's response and decision-making. It is likely that the pandemic will continue to evolve throughout 2021. Safety and steps to minimize the risk of transmission is a shared responsibility between the SCA and members in which we serve.

The SCA asks all members, leaders, and their guardians where applicable, to review and sign this agreement form prior to commencing your SCA program and/or position. The policies and procedures established in the SCA's COVID-19 Management Plan are minimum standards to be followed, in some circumstances including during travel and personal time-off. Failure to follow these standards may result in removal from the program or position.

Prior to program start:

- Self-monitor for COVID related symptoms and disclose any illness or contact with ill persons 14 days prior.
- Quarantine and strictly physical distance from others for 14 days.
- Conduct a COVID-19 antigen (diagnostic) test and report either positive or negative results via secure MySCA portal -OR- report proof of recovery from COVID-19 within the previous 90 days. Proof of recovery includes a documented positive test result, indication that SCA's criteria to end isolation is met, and a letter from a healthcare provider/public health official that states clearance for travel.
- Arrive well rested, nourished, and hydrated to be as resilient as possible.

Except where reasonable accommodations are in place, all SCA members, leaders, and staff agree to follow and live by SCA's COVID-19 Best Management Practices, including maintaining physical distance from others, wearing a face mask and other personal protective equipment (PPE) while conducting work/service including while travelling in vehicles, frequently washing and sanitizing hands, and conducting meetings and work/service outside or in well ventilated areas. Face masks and other PPE should be washed and frequently sanitized, and sharing should be prevented and minimized. Face masks will be designed to be worn around the nose and the mouth (a buff, bandana, or scarf will not suffice). Throughout all programs, leaders will maintain a daily health log for identifying and monitoring the development of COVID-19 symptoms.

A COVID-19 antigen test will be required within the first week of programming. Throughout a program additional COVID-19 tests, isolation, quarantine, and/or medical clearance may be required or encouraged to ensure group and individual safety. For example, in the event a member or leader reports or develops COVID-19 signs or symptoms, they will be required to undergo isolation or quarantine, and may be required to undergo additional COVID testing and/or clearance by a healthcare provider and/or public health official.

These policies and best practices are minimum standards to be followed. Additional program specific policies, procedures, or protocols may be applied in conjunction to local and federal laws, regulations, and guidelines.

By signing this form, you agree that the member will adhere to the safety measures outlined. Signing this form indicates that you and/or the member understand that failure to follow the safety precautions outlined by the SCA or SCA staff may result in removal from the program and/or position.

Leader/Member Name:

Guardian Name:

Leader/Member Signature:

Guardian Signature:

Date:

Date: