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COVID-19 Contingency Planning

Updated 4/3/20

AGENCY-WIDE

- All CVRCC-hosted events through May 31st have been canceled.
- No business travel or home visits until at least June 1st
- Starting 3/13/20, we will suspend all NON-ESSENTIAL IN-PERSON SERVICE DELIVERY until further notice.
- Signs will be at the front door stating that victims can call in (preferred if safety concerns) or submit an online request for services.
 - [Online Requests for Victim Services](#) available; Cheryl, DDW, and SEB will check submissions and forward to the appropriate LT member, who will assign to staff
 - Access to submissions: <https://crimevictimscenter.shelbycountyttn.gov/user>
- All CVRCC staff are expected to work their full schedules, whether remotely or on-site, and communicate frequently with their supervisors and [submit the CVRCC Daily Activity Log](#) each day they work.
 - All direct service staff will field calls and online submissions from victims according to the schedule sent out by director each morning
 - LT will distribute online submissions among staff
- If staff choose to work remotely, they must submit a signed remote work/telecommuting policy (Shelby County's AWS agreement) and must ensure they have necessary resources for remote work: Google Voice, Log Me In, Remote email access: owa.shelbycountyttn.gov [see also Resources section below]

ESSENTIAL SERVICES

Effective 4/3/20: **Anyone** entering 1060 Madison when there is another person in the building shall wear protective masks or face coverings (bandanas, etc.). Victims, victim advocates, and support personnel will be provided reusable surgical masks. Nurses will be provided reusable N-95 masks.

Rape Crisis Services

- SANEs and RCS victim advocates will continue to respond to acute rape cases as usual, following a call to the nurse from Dispatch then calling the advocate.
- Should a nurse become sick, she will notify the Nursing Services Coordinator.
- The ailing nurse if able, or the Nursing Services Coordinator, will contact other part-time SANEs, asking if anyone is able to take the ailing nurse's shift(s).
- If no other part-time SANE is able to fill-in, the Nursing Services Coordinator or the full-time SANE/NP will cover the shift or case(s)
- Should an advocate become sick, she will notify the Program Manager (DDW: 901-240-7629) immediately.

Effective 3/27/20: Nursing staff, with assistance from Sexual Assault Advocates, will:

- **As much as possible, maintain a distance of at least 6 feet** from patients and all other visitors and staff.
- Effective 3/18/20, we are **limiting those entering the building with victims presenting for acute sexual assault forensic exams** to:
 - **Law Enforcement** Officers/Investigators/Detectives
 - **DCS** Investigators
 - the **Legal Guardian (for children 0-12)** who will provide informed consent for the child's exam
 - a **Conservator (for adults legally deemed incompetent/unable to consent for themselves)**
 - *This means that for adult/adolescent victims (who are able to consent for themselves), no accompanying visitors are to enter 1060 Madison with those victims.*
- **BEFORE any of the above people and the Advocate enter the building,** ask them the following:
 1. Have you traveled recently and where; or have you had contact with anyone who has done so?
 2. Have you had fever? What was it?
 3. Have you been in contact with a suspected OR laboratory-confirmed COVID-19 patient?
 4. Have you had symptoms of acute respiratory illness (e.g., cough, difficulty breathing)?
 5. Have you had symptoms of headache/diarrhea/abdominal pain/nausea (that are not associated with the assault)?
- **The NP/SANE will take the temperature of anyone entering the building BEFORE they enter the building.** This means doing so outside the Rape Crisis door, on the "porch" or in the parking lot.
- It includes checking the **patient/victim, LE officer(s)/investigator(s)/detective(s), DCS investigator(s), child's legal guardian, adult's conservator, and the Advocate.**
- **If** anyone has:
 - ✓ an affirmative answer to any of the above questions,
 - ✓ an elevated temperature 98.7F to 100.4F and headache/diarrhea/abdominal pain/nausea that is not associated with the assault (The novel coronavirus has been found in human feces.),
 - ✓ or a fever above 100.4F,
 - ✓ and/or Flu/Cold-like symptoms at any temperature,
- **Then:**
 - ✓ Require the victim to put on a surgical mask prior to entering the building.
 - ✓ If the affected person is someone other than the victim, ask them to remain outside the door, police especially should stay close-by on the "porch." The nurse or advocate may provide a chair for them outside, but be sure to wipe the chair down thoroughly with CaviWipes and return it inside to its previous location after use.
 - ✓ **Safety comes first**, of course, so if you assess that there is an unstable situation with a victim or family member, the Officer should remain inside the building, wearing a surgical mask.
 - ✓ The NP/SANE seeing the patient will wear an N-95 respirator, gloves, goggles/glasses, and face shield during the encounter.
 - ✓ The victim advocate will wear a surgical mask and gloves during the encounter.
 - ✓ With these symptoms present, surgical masks shall not be reused.

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- All surfaces, door handles, toilet flush handles are to be disinfected/sanitized when the patient leaves.

- **Regardless of whether anyone has symptoms, the following must occur at each visit:**
 - ✓ Anyone who enters 1060 Madison will be provided and required to put on a surgical mask prior to entering the building.
 - ✓ Regularly clean and disinfect counters, work surfaces, equipment, door handles, toilet flush handles, waiting areas, and other spaces where interaction occurs.
 - ✓ Wash your hands frequently and for at least 20 seconds.
 - ✓ Use alcohol-based hand sanitizer (that contains at least 60% alcohol).
 - ✓ CDC recommends healthcare workers conserve masks and may reuse their own personal N-95 respirator or surgical mask between patients.
 - ✓ Victim advocates shall also reuse masks between patients. *See also below section on Reusing Masks.*

Reference: 2020 CDC Coronavirus/COVID-19 Guidelines

Domestic Violence Team

- OP services – at least one advocate will remain on call to assist victims with filing orders of protection; On call rotation schedule created by Jasmine (located in [Contingency Planning](#) folder).

- **All Immediate Safety Concerns** – Contact Law Enforcement for assistance

Effective 3/27/20:

- ✓ Gloves have been provided at the front desk for use by advocates. Advocates will put new gloves on prior to an in person service and will remove gloves immediately after the client leaves the building.

- ✓ Each advocate will receive one face mask at this time. Masks can be reused as much as possible. *See also below section on Reusing Masks.*

- ✓ Advocates will wear face masks any time they are in 1060 Madison and there are other people also in the building.

- ✓ Providing OP Services (No walk-ins allowed!):
 - Security will now sit behind the front desk in order to better access call button to be able to speak to clients outside more clearly. This way doors will **NOT** have to be opened for any purposes.

 - Security will let client know they need to read sign and call 901-222-3950 from the parking lot.

 - Advocate will screen the client for safety risks and discuss pros and cons of filing for an OP during this time.

 - If it is determined that the client requires an in person visit to apply for an order of protection (i.e. this is a safety critical case), the advocate will ask following screening questions.

Screening Questions:

Have you traveled recently and where; or have you had contact with anyone who has done so?

Have you had fever? What was it?

Have you been in contact with a suspected OR laboratory-confirmed COVID-19 patient?

Have you had symptoms of acute respiratory illness (e.g., cough, difficulty breathing)?

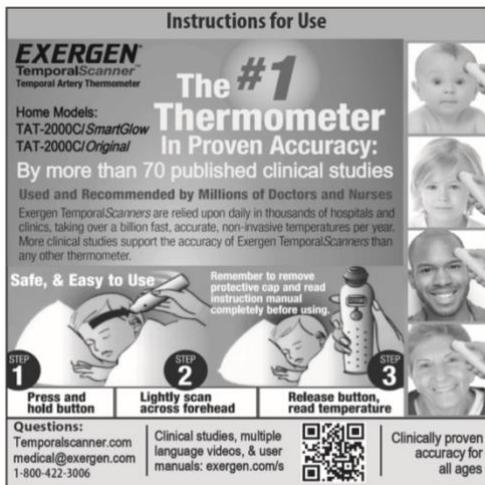
Have you had symptoms of headache/diarrhea/abdominal pain/nausea (that is not attributable to the assault)?

- Should client answer yes to any question, advocate will contact LT (Jasmine, DDW, or Sandy) for further guidance

- If client answers no to the questions, an appointment will be made for an in-person OP

✓ Steps to take prior to client entering 1060 Madison:

- Advocates will put on gloves and face mask prior to the client entering the building.
- Advocates may ask the client if they would be ok with us taking the temperature of their forehead prior to entry in order to confirm lack of fever.
 - Take temperature with forehead thermometer outside on the 'porch' – while using gloves and mask; sanitize thermometer thoroughly immediately after use. Discard gloves and use a second pair for client service.



✓ Steps to take after client has been seen:

- Once client has been seen and exits, advocate will dispose of gloves and disinfect reusable face mask (see note below).
- Advocate will then thoroughly sanitize work area (phone, desk, used pen, keyboard, computer screen, and any items that were touched by client)

REUSING MASKS:

- When a facemask is stored, the CDC recommends that it should be folded in half, with the outer, “dirty” side, folded inward toward itself, and placed in a clean paper bag.
- Paper bags should be thrown away after each use.
- Take care to ensure that you do not touch outer surfaces of the mask, and that mask removal and replacement is done carefully.
- Facemasks should be removed and discarded if soiled, wet, damaged, or hard to breathe through.
- It’s possible that the facemasks that fasten via ties may not be able to be undone without tearing. If tearing occurs, the mask should be discarded.