



COVID-19 Day Services Risk/Benefit Discussion Guide

This guide is intended for use by interdisciplinary teams, supervisory and agency administrative staff to assist with identifying risks and benefits to individual for attending day support activities during the COVID-19 pandemic.

The team should consider the risks and benefits to the individual to determine when/how an individual should return to a congregate day setting as it relates to the overall reopening plan.

Each agency should determine how best to utilize this tool. It is not intended to offer any specific advice.

Section 1: Benefit to the Individual

Benefits to Person	Check the Box for Y or N
Socialization is import to the person	Y or N
Lack of socialization has serious risks to known mental health conditions	Y or N
A sense of routine is important to the person	Y or N
A lack of routine has serious risks to known mental health conditions	Y or N
Daily activity is likely to reduce the frequency of behavioral issues	Y or N
Income is important to the person	Y or N
Parents are employed and supervision is needed	Y or N
No other supervision is available	Y or N
Need the medical support of the staff (i.e., med admin, medical check-in)	Y or N
If not in a structured day setting, the person may be wondering in the community or engaging in risky, non-social distancing activities	Y or N
Other benefit:	Y or N



Section 2: Risk to the individual

Situational Risks	Check the Box for Y or N
The person <i>is able</i> to follow the social distancing protocol maintaining 6 feet of distance	Y or N
The person <i>is able</i> to follow the social distancing protocol maintaining 6 feet of distance <u>with minimal prompting</u>	Y or N
The person needs <u>direct supervision</u> to follow the social distancing protocol	Y or N
The person <i>is able</i> to use personal protective equipment (PPE) for extended periods of time	Y or N
The person is able to use personal protective equipment (PPE) for extended periods of time <u>with minimal prompting</u>	Y or N
The person needs <u>direct supervision</u> to use personal protective equipment (PPE) for extended periods of time	Y or N
The person requires physical prompting/assistant to complete ADL's, such as toileting, eating, or mobility (requires close contact with a DSP)	Y or N
The person is not able to keep hands away from face or maintain hygienic practices	Y or N

Health Related Risks	Check the Box for Y or N
The person has diabetes	Y or N
The person is severely obese	Y or N
The person is older than– 59 years	Y or N
The person has known respiratory issues	Y or N
The person has known immunocompromising conditions (ex: HIV, cancer, post-transplant, Prednisone treatment, etc.)	Y or N
The person has known cardiac disease, including hypertension	Y or N
The person has a renal disease	Y or N
The person has any other underlying health problems	Y or N



Home and Other Environmental Risks	Check the Box for Y or N
The individual lives in a congregate setting	Y or N
There is a higher risk to others living in the home	Y or N
A family member or another individual living in the home has an underlying health conditional as listed above	Y or N
The person typically travels with several other people living in various locations to the program	Y or N
The individual does not require staff at all times and independently moves about the program/building	Y or N
The individual <u>is able to</u> follow directional indicators for traffic flow within the building	Y or N
The individual <u>is able to</u> follow directional indicators for traffic flow within the building <u>with minimal supervision</u>	Y or N
The individual <u>needs direct supervision</u> to follow directional indicators for traffic flow within the building	Y or N
There is a virtual option for the activity	Y or N

Other Considerations:

Person Conducting Review: _____

Signature: _____ **Date:** _____

Team Review:

Date: _____