ASP takes your safety very seriously and strives to minimize the risk of infection of COVID-19 to volunteers, families, staff and community members. To this end, we have devised the following protocols to be utilized during volunteer hosting activities. However, all risks cannot be eliminated, and individuals understand they are participating at their own risk.

**COMMON SYMPTOMS OF COVID-19**
- Fever or chills
- Cough
- Shortness of or difficulty breathing
- Headache
- Fatigue, muscle/body aches
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea, vomiting or diarrhea

**PRESCREENING & PARTICIPATION PREP**
- Volunteers, staff, and homeowners who are sick, exhibiting symptoms, currently diagnosed, or have not fully recovered from diagnosis cannot participate with ASP and should remain isolated from others.

**VOLUNTEERS:**
- The ASP environment presents a risk for the spread of infectious disease. Please plan accordingly. **ASP highly recommends that every eligible person be up to date with vaccination before participation.**
- ASP will follow CDC definitions for vaccination. "Fully Vaccinated" means an individual has completed a primary series of the COVID-19 vaccine. "Up to Date" means an individual has received all doses in the primary series and at least ONE booster when eligible. Getting a second booster is not necessary to be considered up to date at this time. CDC reference: [https://www.cdc.gov/coronavirus/2019-ncov/vaccines/stay-up-to-date.html](https://www.cdc.gov/coronavirus/2019-ncov/vaccines/stay-up-to-date.html)
- All volunteers must submit a [COVID-19 Self-Screening and Verification Form](https://asphome.org/COVID/) to their Trip Coordinator on the day of departure for ASP. The Trip Coordinator will ensure all participants are cleared for travel and verify results verbally with the staff.
  - Volunteers are asked to track symptoms and contacts for at least 10 days prior to departure.
  - All volunteers must verify a negative CDC approved rapid test result on the DAY OF departure (within 24 hours).
  - Those over the age of 65 and/or determined as higher risk by the CDC are REQUIRED to be up to date to the extent recommended by the CDC for your risk level at least 14 days prior to departure.

**STAFF:**
- All ASP staff will be tested upon arrival for training and before deployment to county placements.
- ASP staff will be vaccinated unless given valid exemption. Those in high-risk categories are REQUIRED to be vaccinated.
- ASP field staff who are unable to be vaccinated will be tested for COVID-19 regularly and anytime symptoms/exposure are suspected.

**HOMEOWNERS/FAMILIES:**
- Homeowners are asked to continually self-screen using ASP’s self-screening tool. If any resident shows a result dictating delaying participation, ASP will delay work on the home until all residents are recovered and the worksite is safe for visitors.
- Homeowners are asked to disclose any health changes or concerns with staff immediately and work may be suspended until that homeowner has fully recovered and is symptom free.
TRIP COORDINATOR RESPONSIBILITIES

- Communicate these guidelines in detail to volunteers and reach out to ASP if you have any questions.
- Know the travel restrictions to and from your location.
- Know the CDC “Community levels” for your group’s county of origin. (see “MASKS” section)
- The Trip Coordinator is responsible for verifying EACH volunteer’s suitability for participation by collecting signed COVID-19 Self Screening and Verification Forms from EACH volunteer on your day of travel. Confirmation will be submitted by the Trip Coordinator online through the “Pre-Trip Communication Form” and/or verbally during check-in upon arrival at the center. You will not need to submit the signed verification forms to ASP, just maintain them for your own records.

HAVE A CONTINGENCY PLAN!

- Create a plan of action if a member of your group needs to quarantine or isolate due to exposure or diagnosis. It will be the responsibility of each group to safely transport and care for an affected individual. ASP is unable to take responsibility for volunteers who need to be transported off campus.
- Consider:
  - Where would you stay if needing to vacate an ASP center?
  - Who would be responsible for those that need to return home and those that continue with ASP?
  - Who can safely travel with the affected individual if needed?
  - What transportation is available?
- Decisions about isolation, quarantining and contact tracing will be made based on the matrix included on the last page of these procedures.

PREVENTION

- ASP staff will be trained on the prevention protocols outlined in this document and will provide education about safety procedures to volunteers through training, printed materials, and/or signage.
- Volunteer delegated chores will include additional disinfection procedures with EPA approved disinfectants to prevent the spread of infection.
- ASP will provide supplies at the center: disinfectants, antibacterial hand soap, alcohol-based hand sanitizer, paper towels, and digital touch-free thermometers.
- Volunteers and staff should work together to ensure hand-washing soaps and sanitizers are replenished as needed.
- Volunteers should plan to equip their first-aid kits with thermometers, antibacterial wipes, hand sanitizer and N-95 face masks to supplement ASP’s inventory while on site. Consider adding an oximeter to your first aid kit in case anyone needs to be monitored. EACH volunteer should bring plenty of CDC approved cloth or disposable masks to wear.
- All volunteers, staff, and homeowners should communicate IMMEDIATELY if they are experiencing any symptoms.
- All volunteers will sign a COVID-19 disclosure and liability release (included in the Trip Agreement) before participation with ASP.
- ASP will adhere to state and local mandates for gatherings.
- Center hosting capacity will be limited to allow for social distancing guidelines.

PERSON-TO PERSON INTERACTION AT ASP

MASKS

- ASP will follow CDC recommendations for masking indoors based on the “Community Levels” of the county being served as well as the counties of volunteer group(s’) origin. The highest threat level of the aforementioned counties will dictate the procedures for ALL volunteers that week.
- Staff will track community levels for all groups and communicate to volunteers upon arrival and during pre-trip calls. Trip Coordinators can access information on the other groups scheduled their same week through the Trip Hub, or by calling the Volunteer Department at ASP (423-854-4405).
- ASP masking procedures based on community level:

<table>
<thead>
<tr>
<th>Community Level</th>
<th>Masking Procedures</th>
</tr>
</thead>
<tbody>
<tr>
<td>LOW</td>
<td>Masks optional for all ASP participants.</td>
</tr>
<tr>
<td>MEDIUM</td>
<td>Masks optional, but HIGHLY recommended for those who are immunocompromised or at high risk for severe disease.</td>
</tr>
<tr>
<td>HIGH</td>
<td>Well-fitting mask required for all ASP participants while indoors and in the community, except when eating, sleeping, or showering.</td>
</tr>
</tbody>
</table>

- Volunteers should be prepared to provide their own CDC approved cloth masks or daily disposable masks for use while participating at ASP.
- For the protection of the families we serve, other volunteers, and our staff, volunteers who are unable or unwilling to follow masking protocols when indicated (for any reason) MUST delay their participation with ASP until it is safe to gather without a mask.

For more information on guidelines for gatherings visit cdc.org
PERSONAL SPACE
- Remain aware that individual comfort levels may vary regarding personal boundaries. Please be respectful and limit close contact with others.
- ALWAYS obtain permission for physical touch or hugging.

SLEEPING AND SHOWERING ARRANGEMENTS
- Sleeping rooms will be arranged to allow for CDC and American Camp Association (ACA) recommended distance between participants (at least 6’ distance between the faces of sleeping volunteers). Volunteers are asked to arrange beds to sleep individuals head to toe AND provide at least 4’ between beds.
- Showering times and facilities may be arranged to limit the number of users. Disinfectants will be available for volunteer use on showering facilities.
- Volunteers are encouraged to bring box-fans to assist with air circulation in sleeping rooms. Fans should be arranged to blow air out a door or window if possible.
- Sleep and rest are important for health- please take time for rest and respect “lights out” time for others.

BEHAVIOR GUIDELINES
- Monitor and enforce healthy hygiene habits: Wash hands frequently and properly, Use alcohol-based hand sanitizer often, shower daily, etc.
- If needed, cough or sneeze into a tissue or the sleeve of your arm.
- Do not share food, utensils, drinks, etc.
- Minimize touching your face or other people.
- While in the community, maintain social distancing and mask guidelines observed by the county (or indicated by CDC “Community Levels”) and limit the number of people inside a local business.
- ASP volunteers will abide by state and local mandates for mask wearing and social distancing. Staff will inform volunteers of local guidelines upon arrival.
- Remember, ASP volunteers are often guests in a community- please show extra sensitivity to limit the likelihood and perception of spreading COVID-19.
- If placed at a center with volunteers from other groups, limit interaction with those groups.
- Singing and Evening Gatherings should be conducted outside if possible.

FOOD SERVICE
- Food procedures will comply with ServSafe guidelines and state/local health department regulations.
- All participants should wash their hands and/or use hand sanitizer before entering the dining area.
- All kitchen surfaces should be disinfected before and after food service.
- Additional kitchen chores include disinfection of all touched surfaced: counter tops, equipment, cabinet and fridge handles, dishwashing controls/handles, plumbing fixtures, door handles, etc.
- Industrial dishwashers will utilize approved bleach-based detergents. Centers without an industrial dishwasher will utilize the health-department approved 3-sink method and bleach-based detergents for sanitizing dishes.
- Mealtimes may be staggered to limit the number of people eating in a cafeteria at one time to allow for 6’ distancing.

ON SITE/PROJECT PLANNING
- Staff will communicate COVID-19 protocols, expectations, and procedures to homeowners. Homeowners will sign a COVID-19 disclosure and liability release and agree to comply with all protocols before work commences.
- Interaction with all homeowners should minimize the risk of spread of infection. Homes will receive a classification based on vaccination status, risk level and/or comfort level of the homeowner. A sticker indicating the classification of the home will be placed on the Family File. Volunteers must follow the procedures below based on the classification given to their assigned home:
- This household is fully vaccinated, and the family is comfortable with volunteers entering their home. Masks are optional inside this home and when interacting with family members.
- Some or all in this household are unvaccinated, however ALL high-risk members are vaccinated OR the family has requested masks be worn in the home. Masks must be worn indoors and whenever 6’ distance cannot be maintained with family members.
- This family is at high risk for infection OR has requested volunteers do not enter the home. Volunteers may NOT enter this home, should maintain 6’ distance from family members, and socialize outside.
- Work scopes should be planned to have a “good stopping point” EACH DAY in case a group is unable to return for any reason.

For more information on guidelines for gatherings visit cdc.org
IN CASE OF EXPOSURE, SYMPTOMS, OR INFECTION

- Staff should be notified right away if any individual is exhibiting symptoms or suspects they have been exposed to COVID-19.
- Staff will follow the decision-making matrix (attached) for any potential or confirmed case.
- Staff will have a dedicated area on campus for isolating sick individuals from others until off-campus arrangements can be made.
- If the patient is under 18, a parent or guardian must be notified of their condition and updated on response procedures.
- When in doubt, ASP will assume a positive COVID-19 diagnosis and follow the appropriate protocols.
- ASP will conduct contact tracing with other ASP participants, as necessary.

DISINFECT:
AFTER ANY CONFIRMED OR SUSPECTED CASE

- Close off areas used by a sick person and do not use until the area has been cleaned and disinfected with EPA approved disinfectant by a person wearing appropriate PPE. Wait as long as possible (preferably more than 24 hours) before cleaning and disinfecting exposed areas and surfaces.

COMMUNICATION

- The Volunteer department will communicate guidelines and procedures to volunteers via the ASP website, phone and/or email communication prior to a scheduled trip.
- ASP’s COVID-19 webpage:
  https://asphome.org/COVID/
- Guidelines and answers to frequently asked questions will be posted on the site listed above.
- Field staff will communicate with Trip Coordinators via phone and/or email about any additional or unique procedures/considerations for their specific center.
- Staff will provide an orientation for volunteers upon arrival that will review basic COVID-19 protocols and address any Center specific procedures.
- These Volunteer Hosting Protocols will be a part of the family folder information.
- Opportunities for feedback are available. Please bring any concerns to the staff so we can address issues quickly and maximize safety.

OTHER

- Due to the evolving nature of this virus, regional impact, and ever-changing recommendations, these procedures are subject to change depending on the individual circumstances at each center or among changing recommendations from the CDC and/or local or state Health officials. If needed, additional specific field guidelines will be given closer to your time of service.
- These guidelines are the minimum for participation with ASP. An individual or group is always welcome to abide by more strict procedures if desired.
- We know that participation in ASP at this time is an individual and personal choice. We will work with volunteers to provide options should they choose to cancel or delay their volunteer experience to a later date.

REFERENCES

- ASP has engaged an advisory council of medical professionals for advice and recommendations on protocols for prevention and response. Qualifications include: a medical doctor, epidemiologist, professor of public health, department chair of biostatistics and epidemiology, and professor of health policy and management.

For more information on guidelines for gatherings visit cdc.org
# ASP Isolation and Quarantine Decision Making Matrix—2022

<table>
<thead>
<tr>
<th>Exposure³ and any Symptoms²</th>
<th>Exposure³ with NO symptoms</th>
<th>Exposure³ with 1 low-risk symptom²</th>
<th>Exposure³ with ≥ 2 low-risk symptoms² OR at least 1 high-risk symptom¹</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quarantine³ immediately and while awaiting results.</td>
<td>Notify staff. Quarantine⁴ and obtain a rapid test. If negative result, return to ASP, wear mask around others until symptoms have disappeared. If positive result, follow “Positive Test” procedures.</td>
<td>Notify staff. Obtain testing and/or evaluation by healthcare provider. Quarantine⁴ immediately and while awaiting results.</td>
<td>No medical evaluation, no testing⁶, or no alternative diagnosis⁶.</td>
</tr>
</tbody>
</table>

### Decision Making Matrix

<table>
<thead>
<tr>
<th>Negative Test⁵</th>
<th>Medical evaluation without testing⁶, with alternative diagnosis⁶.</th>
<th>No medical evaluation, no testing⁶, or no alternative diagnosis⁶.</th>
<th>Positive Test⁴</th>
</tr>
</thead>
<tbody>
<tr>
<td>Molecular/PCR/NAAT Test</td>
<td>Return to ASP activity when ≥ 24hr fever free AND symptoms improved.</td>
<td>Isolate⁴ off campus. Notify staff, identify close contacts and consult CDC guidance⁷. Return to ASP only after ≥5 days isolation from symptom onset AND ≥ 24hr fever free AND symptoms improving. Wear mask indoors and around others at least through day 10.</td>
<td>Isolate⁴ off campus. Notify staff, identify close contacts and consult CDC guidance⁷. Return to ASP only after ≥5 days isolation from symptom onset AND ≥ 24hr fever free AND symptoms improving. Wear mask indoors and around others at least through day 10.</td>
</tr>
<tr>
<td>Antigen Test</td>
<td>Return to ASP activity when ≥ 24hr fever free AND symptoms Improved AND with medical provider note reflecting acceptable diagnosis⁶.</td>
<td>Isolate⁴ off campus. Should remain isolated 5 days from symptom onset AND ≥ 24hr fever free AND symptoms improving. Wear mask indoors and around others at least through day 10.</td>
<td>Probable Case</td>
</tr>
</tbody>
</table>

### Quarantine

- **High Risk Symptoms** of COVID-19: new cough, difficulty breathing, loss of taste or smell, and/or fever (>100°F).
- **Low Risk Symptoms**: (not due to chronic conditions such as allergies, migraines, etc.) chills, congestion/runny nose, sore throat, headache, nausea/vomiting, diarrhea, muscle pain, and/or fatigue.
- **Exposure** defined as within 6’ of a case for a cumulative total of ≥15 minutes over a 24hr period.
- **Quarantine** refers to temporarily separating an individual from others while assessment or other arrangements are made (this can be done at the center if space allows). **Isolation** refers to completely separating an individual from others and should be done off ASP Center campus as soon as possible (an individual may isolate temporarily on campus if space allows, but efforts should be made to move off campus when feasible to protect others at the Center).
- **Test** refers to CDC approved diagnostic test (such as PCR or antigen) performed at home or by a healthcare provider/lab. Antibody tests are not approved for ASP.
- **Examples of acceptable alternative diagnoses** would include those that are not easily infectious for others, such as urinary tract infection, rash from poison ivy, heat exhaustion, etc. Diagnosis of infectious respiratory and viral conditions may not rule out COVID-19 infection and should be treated as symptomatic.
- **Consult CDC for up to date isolation recommendation and for guidance on treatment, especially if severely ill or immunocompromised.**
- **To be on campus if space allows**.
- **People are not recommended to quarantine if both they and the case wore well-fitting masks throughout exposure. Testing is recommended after day 5.**

### Additional Notes

1. High Risk Symptoms of COVID-19: new cough, difficulty breathing, loss of taste or smell, and/or fever (>100°F).
2. Low Risk Symptoms: (not due to chronic conditions such as allergies, migraines, etc.) chills, congestion/runny nose, sore throat, headache, nausea/vomiting, diarrhea, muscle pain, and/or fatigue.
3. Exposure defined as within 6’ of a case for a cumulative total of ≥15 minutes over a 24hr period.
4. Quarantine refers to temporarily separating an individual from others while assessment or other arrangements are made (this can be done at the center if space allows). Isolation refers to completely separating an individual from others and should be done off ASP Center campus as soon as possible (an individual may isolate temporarily on campus if space allows, but efforts should be made to move off campus when feasible to protect others at the Center).
5. Test refers to CDC approved diagnostic test (such as PCR or antigen) performed at home or by a healthcare provider/lab. Antibody tests are not approved for ASP.
6. Examples of acceptable alternative diagnoses would include those that are not easily infectious for others, such as urinary tract infection, rash from poison ivy, heat exhaustion, etc. Diagnosis of infectious respiratory and viral conditions may not rule out COVID-19 infection and should be treated as symptomatic.
7. Consult CDC for up to date isolation recommendation and for guidance on treatment, especially if severely ill or immunocompromised.
8. People are not recommended to quarantine if both they and the case wore well-fitting masks throughout exposure. Testing is recommended after day 5.
9. Exposed individuals are not recommended to quarantine if both they and the case wore well-fitting masks throughout exposure. Testing is recommended after day 5.

### Updates

- Up to date⁸ on COVID-19 vaccination AND not experiencing symptoms OR Positive COVID-19 viral test within last 90 days AND not experiencing symptoms. OR Both case and contact wore masks⁹

Any exposed person should wear a mask when indoors and around others for 10 days following exposure. If symptoms arise, follow appropriate procedures listed to the left.

### Additional Resources