

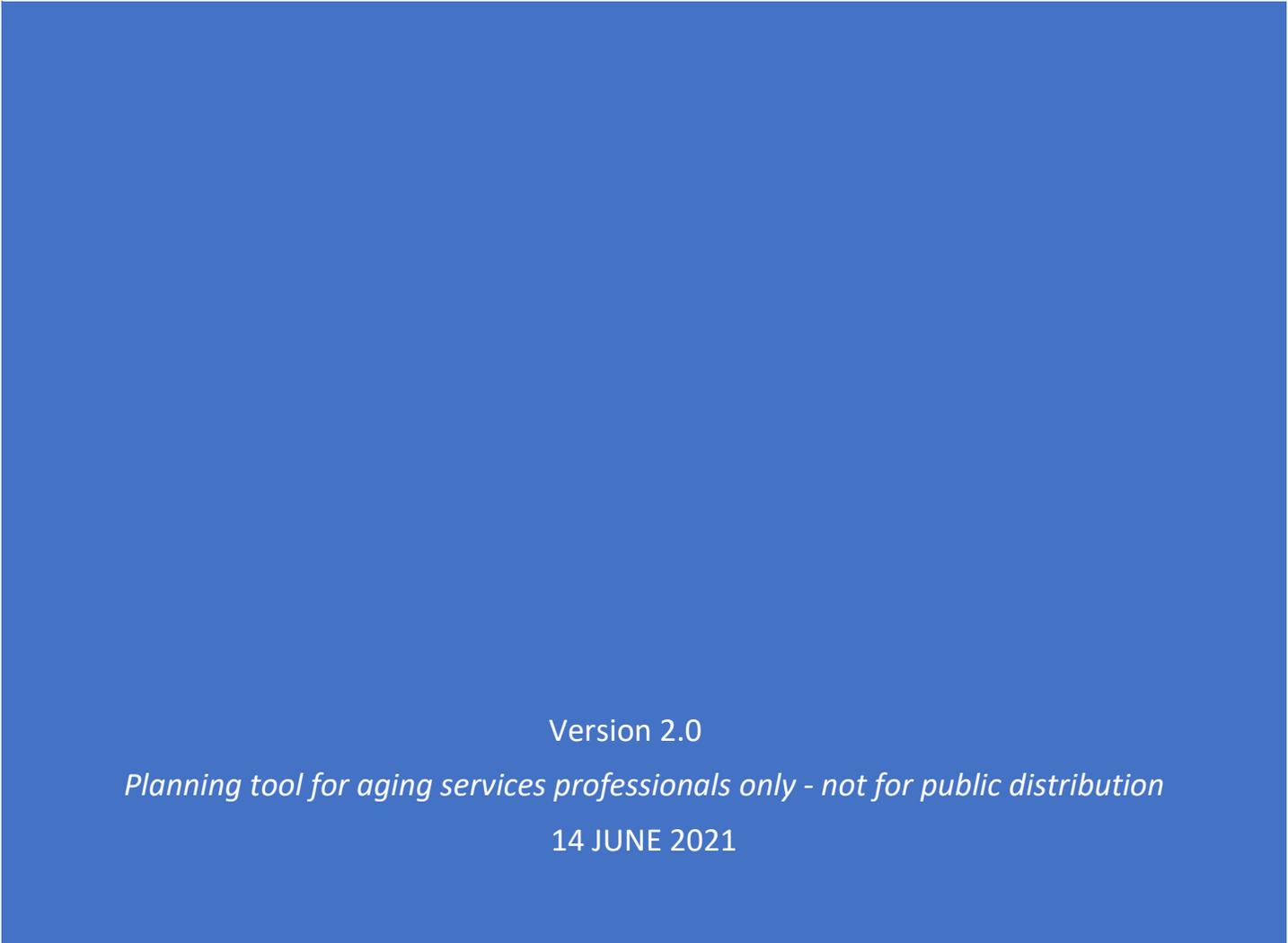


# PLANNING TOOL FOR AGING SERVICES NETWORK: NEW NORMAL AND REOPENING

Version 2.0

*Planning tool for aging services professionals only - not for public distribution*

14 JUNE 2021



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*Updated 14 June 2021*

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## Section 1: Important Updates for Planning Tool Version 2.0

On May 17<sup>th</sup>, [Governor Baker announced](#) that the Commonwealth is on track to meet the goal of vaccinating 4.1 million residents in June, and all remaining COVID-19 restrictions were lifted effective May 29<sup>th</sup>. The announcement summarized:

- **Industry Restrictions & Capacity Limits:** All industries may be open. With the exception of remaining face-covering requirements for public and private transportation systems and facilities housing vulnerable populations, all industry restrictions have been lifted, and capacity has increased to 100% for all industries. There are no longer any restrictions or limitations to gathering.
- **Face Covering Order & Advisory:** In line with updated CDC face covering guidance, the Administration rescinded the current face covering order and issued a new face covering advisory effective May 29<sup>th</sup>. Not yet fully vaccinated individuals are advised to continue wearing face masks and to continue distancing in most settings. The advisory states that fully vaccinated individuals no longer need to wear a face covering or social distance indoors or outdoors except for in certain situations. Face coverings will still be required for all individuals on public and private transportation (including rideshares, livery, taxi, ferries, MBTA, Commuter Rail and transportation stations), and in certain settings including healthcare facilities and providers, congregate care settings and health and rehabilitative day services.
- **State of Emergency:** The State of Emergency will end on June 15, 2021, and the Administration will work with legislative and municipal partners during this period in order to manage an orderly transition from emergency measures adopted by executive order and special legislation during the period of the State of Emergency.

**While this is incredible progress, we are still very much working towards a “new normal”, and it may take time to transition. The past 15 months have been traumatic, isolating, and stressful, and it is important to acknowledge this context as we move closer to the end of the COVID-19 pandemic.**

**This planning tool has been updated in an effort to aid the aging services network and other community-based organizations serving older adults. Significant changes include:**

- **Updated general information** to reflect the latest federal and state guidance with reminders and topics to consider when crafting or modifying reopening plans.
- **Removal of the four in-person scenarios and sector-specific guidance** as there is no longer a distinction between the scenarios.
- **A new section of FAQs** that may inform organizational and local-level planning.

We recognize that this is an exciting time and one that inspires hope. However, it is important to remember that we are still living in a global pandemic, and there are people who are not yet vaccinated. **As places and programs reopen, we must take things one step at a time to ensure equitable, data-driven, and trauma-informed approaches.**

## Section 2: Introduction

When we shut down in March 2020, it was quickly and urgently, **but working towards a new normal does not have a single on/off switch**. This presents an opportunity to think and plan for what a new normal means to each of us – to be thoughtful, gradual, and use all the data we have and lessons we have learned from the past year. This process is intended to be iterative, there is not one opportunity to “reopen”, and we will continue to learn as we take steps towards a new normal. The aging services network has been incredibly innovative during this time, and we encourage you to think about what has worked and what should be carried forward as we redefine what it means to grow up and grow older in Massachusetts. **Consultation with leadership, including municipal leaders, local boards of health, boards of directors, as well as any relevant trade associations in all aspects of this work is encouraged.**

Additionally, all organizations are also encouraged to develop and review their reopening plans with a lens toward equity. **Organizations should strive to ensure all programs and activities have equal access and opportunity for all members of the community, including individuals living with dementia.** The [Massachusetts Department of Public Health \(DPH\) Office of Health Equity](#) offers resources and tools to help Public Health programs address health inequities, and [the Center for Disease Control and Prevention’s \(CDC\) National Center for Chronic Disease Prevention and Health Promotion](#) offers tools and resources to help achieve health equity by eliminating health disparities. The [Massachusetts Healthy Aging Collaborative’s Healthy Aging for All Guide](#) may also be helpful to communities as they plan to start or expand in-person activities.

### Using Data to Inform Planning: COVID-19 DPH Data Sources

The Commonwealth and CDC regularly publish data on COVID-19 metrics and vaccination rates to help communities assess readiness and approach planning for reopening. We encourage you to use this data and engage municipal leaders and other community partners to understand and interpret the data and information.

- [MA DPH COVID-19 Response Reporting](#)
- [MA DPH COVID-19 Vaccination Data and Updates](#)
- [CDC COVID-19 Data Tracker](#)

## Section 3. How to Use This Planning Tool

This planning tool was created to help aging services professionals identify information that may be useful as they think about their individual organization's approach to scaling up. **The tool curates and centralizes existing information and includes a section on frequently asked questions**, which may inform reopening plans. This is not a set of instructions that articulates how to reopen.

We recognize that many organizations and communities have already started to plan for scaling up operations. This planning tool is **intended to complement and not supplant the creative thinking** and planning already underway. Our hope is that this tool supports you as you continue to plan for reopening. **Please continue to consult with local boards of health and your relevant trade associations prior to finalizing any plans.**

We encourage you to visit <https://www.mass.gov/info-details/reopening-massachusetts> to stay up to date on the latest guidance and information.

## Section 4. General Information

The following section includes general information that may be helpful as you plan to scale up operations.

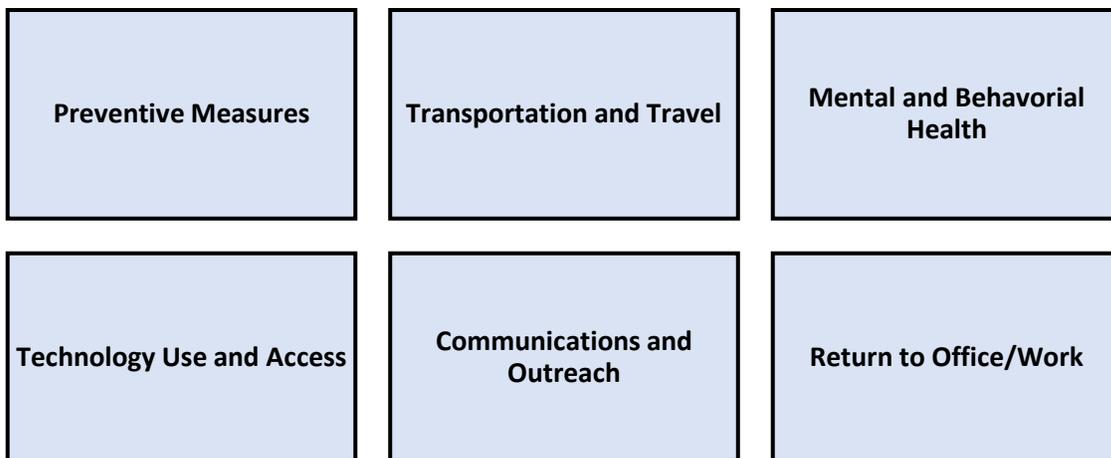
It is important to acknowledge that it will take time to adjust to the reality as we move away from set mandates and restrictions to advisories where personal responsibility is emphasized. The aging services network is encouraged to enter this “new normal” without judgment of others and an understanding that each person has had a unique experience over the past year. For example, some organizations are sending out communications regarding a “mask-friendly” policy with the goal of reducing judgment and potentially harmful conversations related to face coverings.

In addition to reviewing this information, it may also be useful to reference:

- [Reopening Massachusetts website](#)
- [COVID-19 Information for Local Boards of Health](#)
- [Centers for Disease Control and Prevention \(CDC\) website with considerations for community-based organizations](#)

**For all planning, there are six general categories to consider** (see pages 6-7 for details).

*Please note that in Version 1.0 of the planning tool, “Vaccination Status” was listed as a category. This category has been eliminated here, but more information can be found in the FAQs on pages 8-11.*



General Considerations	Additional Information
Preventive Measures	<ul style="list-style-type: none"> <li>• Effective May 29<sup>th</sup>, the Commonwealth’s face-covering order was rescinded. The Department of Public Health has issued a <a href="#">new face-covering advisory</a> consistent with the Centers for Disease Control and Prevention’s updated guidance. All unvaccinated residents are advised to continue to wear face-coverings in indoor settings and when they cannot socially distance.</li> <li>• Effective May 29<sup>th</sup>, face coverings are still mandatory for all individuals (vaccinated and unvaccinated) in <a href="#">certain locations</a>. This includes on public and private transportation systems (including rideshares, livery, taxi, ferries, MBTA, Commuter Rail and transportation stations), in healthcare facilities and in other settings hosting vulnerable populations, such as congregate care settings.</li> <li>• Residents are still advised to <a href="#">isolate</a> if feeling sick, <a href="#">quarantine</a> if not yet fully vaccinated and exposed to COVID-19 indoors, and pursue COVID-19 <a href="#">testing</a>, as needed.</li> <li>• All industries will be encouraged to follow CDC guidance for cleaning and hygiene protocols.</li> <li>• It is important to continue to educate residents about the importance of being vaccinated and the efficacy of the vaccines. The state has published public awareness and education materials as part of the <a href="#">Trust the Facts, Get the Vax</a> campaign.</li> <li>• To review current vaccination rate in your community, visit the <a href="#">Department of Public Health dashboard</a>.</li> </ul>
Transportation and Travel	<ul style="list-style-type: none"> <li>• The <a href="#">new mask advisory</a> requires face coverings for both vaccinated and unvaccinated individuals on public and private transportation systems (including rideshares, livery, taxi, ferries, MBTA, Commuter Rail and transportation stations).</li> <li>• Effective March 22<sup>nd</sup>, the Massachusetts Travel Order was updated to a <a href="#">Travel Advisory</a>. Please note that visitors and returning residents are still encouraged to quarantine for 10 days upon their arrival unless they meet exemption criteria. Travelers are also encouraged to consult the <a href="#">CDC’s guidelines and requirements for travel</a>. The CDC guidelines have been updated as of May 19<sup>th</sup> for domestic travel recommendations for people who are fully vaccinated and unvaccinated.</li> </ul>
Mental and Behavioral Health	<ul style="list-style-type: none"> <li>• The past year has been incredibly difficult and many of us have experienced loss – of loved ones, financial security, important milestones, and social connection. It is important to <a href="#">take care of our emotional health</a> and continue to build resiliency.</li> <li>• It is critical that we adopt <a href="#">trauma-informed approaches</a> for reopening and consider the impact of this past year on the physical and emotional health of consumers, their families and caregivers, and staff.</li> </ul>

	<ul style="list-style-type: none"> <li>• For individuals who may need help with substance use, please visit the Commonwealth’s website for <a href="#">Treatment and Recovery Services</a>.</li> <li>• If you know an older adult who may benefit from mental health services, please encourage them to call their local <a href="#">Aging Services Access Point (ASAP)</a> or <a href="#">Council on Aging (COA)</a> for more information about community-based supports. Many offer mental health programs for older people.</li> <li>• If you know of an individual who may be subject to abuse, neglect, or fraud please report to <a href="#">the Adult Protective Services Program</a>.</li> <li>• Anyone who could benefit from free COVID-19 counseling for coping and support can call <a href="#">MassSupport</a> at 1-888-215-4920. Phones are answered from Monday to Friday 9:00 AM to 6:00 PM. MassSupport is operated by Riverside Community Care. MassSupport frequently offers supports specific to family caregivers, including resiliency workshops.</li> </ul>
<p>Technology Use and Access</p>	<ul style="list-style-type: none"> <li>• Many aging services providers and community organizations transitioned programming from in-person to virtual or telephonic. As we consider the new normal, it will be important to think about these new modalities and how to sustain them or build them into hybrid models.</li> <li>• As we have learned over the past year, access to both technology and reliable internet is not universal and organizations should continue to think creativity about addressing the digital divide for their community members.</li> <li>• Unfortunately, COVID-19 scams still exist. It is important to protect yourself and educate others about the warning signs. The <a href="#">Massachusetts Enterprise Security Office</a> and the <a href="#">Massachusetts Attorney General’s Office</a> have more information and tips to avoid scams.</li> </ul>
<p>Communications and Outreach</p>	<ul style="list-style-type: none"> <li>• Effective communication with older adults has been a critically important component of emergency response. As we shift to the “new normal,” consider the many communication strategies and channels available in your community and how to best share information with older adults. This will be especially important when communicating information about scaling up operations, access to programs and activities, and reopening of physical buildings and facilities.</li> <li>• Communication channels may include but are not limited to: telephone, mail, newsletter, local cable access, radio, pairing printouts with grab-and-go or home-delivered meals.</li> <li>• Messages about reopening may be paired with continued information about COVID-19 prevention and encouraging individuals to get a vaccine. See the state’s <a href="#">Trust the Facts, Get the Vax campaign materials</a>.</li> </ul>
<p>Return to Office/Work</p>	<ul style="list-style-type: none"> <li>• Many of us are planning to return to office buildings. It is important to think about the above topics (e.g., technology use/hybrid model) with respect to workforce and define a “new normal” that aligns with employees’ vision, values, and expectations.</li> <li>• Providing clear and consistent information with respect to reopening protocols is important for staff, volunteers, and consumers. Consider updating existing guides or handbooks and hosting training sessions for staff and volunteers.</li> </ul>

## Section 5. Frequently Asked Questions

*The following FAQs provide information that may inform organizational and local-level planning. If you have questions, consultation with municipal leaders, local boards of health, boards of directors, legal counsel, as well as any relevant trade associations is encouraged.*

### 1) What settings continue to require face covering?

The [current mask advisory](#) effective May 29, 2021 advises unvaccinated individuals to continue to wear masks in indoor settings and when they can't socially distance.

**Additionally, there are specific settings that require face-coverings regardless of vaccination status.**

- On Public and Private Transportation, including on the MBTA, commuter rail, buses, ferries, and airplanes, and while in rideshares (Uber and Lyft), taxis, and livery vehicles, as required by the Centers for Disease Control January 29, 2021 Order. Face coverings are also required at all times in transportation hubs, including train stations, bus stops, and airports. The requirement applies to riders and workers. ***For the aging services network, this includes Council on Aging vans, volunteer driver programs, and any other modes of transportation.***
- Inside K-12 public schools, collaboratives, approved special education schools and as otherwise required by the Department of Elementary and Secondary Education (DESE). The requirement applies to students, teachers, and staff.
- Healthcare facilities licensed or operated by the Commonwealth and healthcare practice locations of any provider licensed by a professional board which sits within the Department of Public Health or the Division of Professional Licensure. These settings include **nursing homes, rest homes**, emergency medical services, hospitals, physician and other medical and dental offices, urgent care settings, community health centers, vaccination sites, behavioral health clinics, and Bureau of Substance and Addiction Services (BSAS) facilities. This requirement applies to patients, residents, staff, vendors and visitors.
- Congregate care facilities or programs operated, licensed, certified, regulated, authorized, or funded by the Commonwealth. These settings include the common areas of assisted living residences, group homes, residential treatment programs, and facilities operated, licensed, certified, regulated, authorized, or funded by the Department of Children and Families (DCF), the Department of Youth Services (DYS), the Department of Mental Health (DMH), the Department of Public Health (DPH), the Department of Developmental Services (DDS), the Department of Veterans' Services (DVS), the Massachusetts Commission for the Blind (MCB), the Executive Office of Elder Affairs (EOEA) and the Massachusetts Rehabilitation Commission (MRC). This requirement applies to clients, residents, staff, vendors, and visitors. ***For the aging services network, this requirement does not include Councils on Aging or Congregate Housing environments. If an individual organization would like to require face coverings, consultation with organization leadership, including legal counsel and any relevant trade associations is***

***recommended.***

- Emergency shelter programs, including individual and family homeless shelters, domestic violence and sexual assault shelters, veterans' shelters, and shelters funded by the Department of Housing and Community Development. This requirement applies to guests, staff, vendors and visitors.
- Houses of Correction, Department of Correction prisons, jails, and other correctional facilities. This requirement applies to people who are detained or incarcerated, staff, vendors and visitors.
- Health Care and Day Services and Programs operated, licensed, certified, regulated, or funded by the Commonwealth including the Executive Office of Health and Human Services or one of its agencies. These settings include **adult day health, day habilitation, Program of All-Inclusive Care for the Elderly (PACE)**, psychosocial rehabilitation club houses, brain injury centers and clubhouses, day treatment, partial hospitalization and intensive outpatient programs, recovery support centers and center-based day support programs. This requirement applies to staff, visitors, vendors and consumers. ***For the aging services network, this includes day programs authorized under the aegis of the Executive Office of Health and Human Services Commonwealth; it does not include Councils on Aging or social day programs. If an individual organization would like to require face coverings, consultation with organization leadership, including legal counsel and any relevant trade associations is recommended.***
- **Home health care workers, including Personal Care Attendants (PCAs) and Home Health Aides in community and home-based settings where they are providing patient-facing care;** provided, however, the requirement **shall only apply to the worker providing care. *For the aging services network, this includes any direct consumer-facing care provided in the home. If a consumer requests an employee wear a face covering while in the home, it is encouraged that the employee comply regardless of vaccination status. If an individual organization would like to require face coverings, consultation with organization leadership, including legal counsel and any relevant trade associations is recommended.***

The following persons are exempt from the face coverings requirement:

- Children under 5 years old.
- Persons for whom a face mask or covering creates a health risk or is not safe because of any of the following conditions or circumstances:
  - the face mask or covering affects the person's ability to breathe safely;
  - the person has a mental health or other medical diagnosis that advises against wearing a face mask or covering;
  - the person has a disability that prevents them from wearing a face mask or covering; or
  - the person depends on supplemental oxygen to breathe.

## 2) Can an organization ask for vaccination status or require that staff and/or consumers be vaccinated?

**All organizations are encouraged to create programs and services that are inclusive of all members of their community or organization regardless of vaccination status.**

**Public entities that serve the members of the public may not restrict access to programs and services based on vaccination status and are encouraged to determine a process to safely provide services regardless of vaccination status of consumers or staff.** Public entities include both state and municipal agencies.

Prior to implementing any restrictions or limitations related to vaccination status, consultation with organization leadership, including boards of directors, legal counsel, and relevant trade associations is recommended.

**If staff are asked about their vaccination status by participants or consumers, they may consider responding with the following statement: “I am working in accordance with all safety measures required by both my employer and the Commonwealth of Massachusetts.”**

## 3) Can an organization require that everyone wear a face covering indoors?

**Yes, if an organization wishes to establish its own policies related to face coverings it may do so.** Consultation with organization leadership, including boards of directors, legal counsel, and relevant trade associations is recommended.

Organizations may be interested in “mask-friendly” communication to reduce judgment related to the wearing of face-coverings.

## 4) Are there capacity restrictions or space limitations?

**All industries may open and all capacity limits have been lifted.** With the exception of remaining face-covering requirements for public and private transportation systems and facilities housing vulnerable populations, all industry restrictions have been lifted, **and capacity has increased to 100% for all industries.** There are no longer any limits or restrictions to gatherings.

Organizations may set their own individual capacity limits. Consultation with organization leadership, including boards of directors, legal counsel, and relevant trade associations is recommended.

## 5) Are there any restrictions for indoor or congregate dining?

**There are no limits or restrictions on indoor or congregate dining.** All industries are encouraged to follow CDC guidance for cleaning and hygiene protocols.

Organizations may set their own policies related to indoor or congregate dining. Consultation with organization leadership, including boards of directors, legal counsel, and relevant trade associations is recommended.