

DRAFT PLAN TO PROTECT HIGH-RISK POPULATIONS

The State of Utah values preserving the health of vulnerable Utahns who are at a higher risk of severe illness and death from COVID-19. Protecting them will also protect the state's hospital ICU capacity and economic well-being moving forward.

GOAL

To help protect high-risk people from COVID-19.

AMBITIOUS TARGET

Zero outbreaks in high-risk populations.

DRAFT PLAN TO PROTECT HIGH-RISK POPULATIONS

The state will focus on protecting five categories of high-risk populations:

1) High-risk people in state custody or who receive in-person government services. The state will improve communication and regulatory oversight in accordance with CDC and public health guidelines.

The Department of Corrections has taken key actions to prevent infection in the Draper and Gunnison prisons. So far they have zero positive cases within the prison facilities.

2) High-risk people living in nursing homes and long-term care facilities (LTCF). The state will begin proactive tracing of asymptomatic individuals to help screen and mitigate spread of the virus. Metrics on testing, visitors, staff movements, PPE availability, hospitalization, and deaths will be reported. The Department of Health (DOH) the COVID-19 Long-term Care Subcommittee, and local partners will provide support and oversight to ensure protection and infection control through:

- *Primary Prevention.* Strict visitation policies to prevent non-essential visitors from entering facilities will be implemented. Essential staff and those who do enter will be screened. All staff will use PPE for every contact with a

patient or resident in a LTCF. Staff will not be permitted to work in more than one facility to minimize the potential of carrying the virus from facility to facility. Movement of residents at highest risk will be reduced.

- *Secondary Prevention.* A DOH mobile team will go to a LTCF where infection is spreading and rapidly assess the situation and help the facility control the spread of the virus. 500 tests a day will be dedicated to LTCFs and high risk populations. The DOH will also have the capability to test all individuals in a LTCF, including residents and staff, to determine who has the virus. Those who test positive will be continuously monitored and separated from those who test negative. Contact tracing will also be implemented within the facility if anyone tests positive.
- *Mitigation and Recovery.* When a COVID-19 infection occurs in a LTCF, the DOH will continue to provide support once the infection concludes by helping the facility to acquire staff, obtain PPE, train workers on the use of PPE, etc. The DOH will help with recovery activities so the facility can begin to admit new patients again.

A quarantine facility in Salt Lake City will be provided where COVID-positive patients/residents can be temporarily isolated. Hospital discharge and treatment planners will inform patients of their high-risk status, how to protect themselves, and how to access assistance.

- 3) High-risk people at work.** The Labor Commission and a team of experts from the Workers Compensation Fund developed [recommendations](#) to help protect high-risk individuals in the workplace from COVID-19. The recommendations were sent out to employers in various industries and were also posted to the [coronavirus](#) and [Labor Commission](#) websites.

- 4) Those working with high-risk people.** All of the actions protecting the three categories above will also serve to protect this category in various settings.

5) High-risk people living at home who may need, but do not have help meeting their basic needs. The state will provide both broad and targeted communication to ensure they and those around them know their risk status, how to protect themselves, and how to access help.

The Department of Human Services (DHS), its Division of Aging and Adult Services (DAAS), in partnership with the 12 Area Agencies on Aging (commonly referred to as the Triple A's), will lead the approach to increase scope, capacity, and resources so they can help all high-risk adults who need it—not just those 60 and older. This expanded scope is also in line with the federal CARES Act. It will leverage and expand existing infrastructure, processes, and resources more quickly and organically.

High-risk communication materials will direct people to call DAAS' current number (877) 424-4640. DAAS currently has limited staff who answer calls and will add more if needed to initially assess callers' needs and connect them to one of the 12 Triple A's for immediate assistance.

The Triple A's. The Triple A's will continue to deliver their existing set of services to their target population of 60+ years old. If needed, they will expand their services to help all high-risk populations avoid COVID-19.

Benefits to utilizing the Triple A's include:

- Relationships and familiarity with many from the high-risk population.
- Close connections with local health departments and mental health authorities.
- Foundational infrastructure and trust in place within a network of local non-profits, businesses, and other stakeholders. The Triple A's can leverage these groups to grow services and create safe opportunities for high-risk people to access, like Meals on Wheels, transportation assistance, etc.
- The following assets are already in place, and with comparatively minimal additional investment, the Triple A's can scale up quickly as driven by demand:

- Financial mechanisms and processes.
- Current employees and volunteers have existing capacity due to inability to work in senior centers. More can be recruited if needed.
- A data system to track clients and measure performance.

Communications. DAAS and the COVID-19 Communications Team will spread and prioritize key messages and guidance for high-risk populations such as what they should and shouldn't do, when senior centers may open again, and the number to call for help. Such communications will be made via:

- TV and radio news and media using a trusted community spokesperson
- A mailed letter from the Governor using a mailing list
- Faith-based organizations
- Other key community partners

Entities that work with vulnerable populations, including minority populations, will be supported. In collaboration with the DOH Office of Health Disparities and the COVID-19 Multicultural Subcommittee, key materials will be translated into 19 of Utah's most common languages to help reach vulnerable populations.

Additional Details. Over the next few weeks, the Governor's Office of Economic Development (GOED) is using a small, state-employee workforce to pack and ship masks for the "A Mask for Every Utahn" effort. Key information for high-risk populations, like the DAAS phone number mentioned above will be included in the mailings.

An expert medical panel will be formed to stratify the high-risk populations to better understand and focus resources and efforts on those who are at highest risk for severe illness, hospitalization, and death.