

June 22, 2020

Dear Charles River Community,

I am pleased to inform you that we have no quarantined residential programs at this time. Additionally, we have zero positive cases of COVID-19 among persons-served or employees. We have officially made it through the worst part of this health crisis! Thankfully, we had no persons-served or employees that passed away as a result of the coronavirus. This is a testament to our extraordinary efforts and dedication of all the Charles River Center employees. We are so grateful for all your well wishes, assistance, and patience during this extraordinary time.

I want to let you know what we have been doing over the last month. In advance of re-opening our day programs, we have accelerated our virtual activities to 35-40 experiences per week and new classes are being added based on your feedback. We have cooking groups, Bingo games, geography groups, virtual tours of public attractions and historic sites, group instructions on hand washing and wearing a mask, dance groups, communication groups, music and art classes. The classes are fun, interesting, and provide much needed social time among friends.

We sent out new guidelines for visitation with loved one in our residences, based on the Department of Developmental Services (DDS) guidance and it is going well. Thank you to everyone who is adhering to those guidelines. It is important that we take the next phases of the "re-opening" slowly and safely. I know that for many, the guidance does not go far enough, and it is very hard not to be able to take your loved one home for overnight visits, as many have done for years. This will happen in due time, once we receive additional guidance from DDS. Our leadership team has begun to look at the next phase of our visitation policy, as the state enters another phase of its re-opening plan.

The next phase of our plan is to carefully and thoughtfully have persons-served access the community. Please review our [Charles River Center Community Access Guidelines](#). In addition to the guidelines, our clinical team developed a teaching tool for wearing masks. We have been helping our persons-served tolerate wearing mask for some time now. Overall, it's going well. But as we all know, it takes some time to get used to wearing them.

We are actively planning the gradual re-opening of our offices and day program locations, but we have no definitive guidelines or timelines from our funders. In the Governor's plan, congregate day programs were initially in Phase 3 of the plan, which begins July 6th. But in the absence of official guidance specific to congregate day programs, we will not be re-opening on that date. Once the guidance is announced, we anticipate we will need several weeks for staff training, facility modifications, and other considerations. State funded transportation will not be permitted until a later phase. DDS has communicated that they want providers to prioritize those persons-served living with their families in the first phase of day program re-opening. In many of these cases, family members been providing

care by themselves and may need to return to work. This makes sense, but I imagine there will be some consideration for those living in group residences on a case-by case basis in the earlier phases.

The Charles River Center leadership team has been actively engaged in developing our own re-opening plan. I participate in a statewide Coordinating Council and ADDP Day Service Committee, working with DDS and MassHealth on developing the guidance for day program reopening. Draft plans from these groups were submitted last week and we are awaiting feedback. Internally, we have several workgroups developing policies, procedures and trainings, enhancing our technology, planning facility modifications, and health monitoring protocols in preparation for our day program re-opening. In accordance with the Governor's plan, it will be done in phases with several weeks between each phase, to monitor the impact on the health of the persons-served and staff.

Recently, we sent out a survey to our families caring for their loved ones at home to understand their situations. The survey included questions concerning plans to send their loved one back to our day programs, availability to transport to/from the locations, health related concerns of the person-served or an immediate family member, ability to have modified schedules of attendance, and if permitted by funding sources, would they allow staff to come into their home to provide services. We will be working closely with families to determine the risk and benefit of their family member returning and to develop transition plans.

As you can imagine, there are more questions than answers while we wait for the state guidance. But I want you to know that our priorities remain the same. At the forefront of every decision is the health and safety of our persons served, employees, and families whom we support.

Be well,

Anne-Marie Bajwa
President and CEO