Updated January 28, 2022

Reopening Guidance for Prevention Services Programs:

OASAS funded and certified prevention agencies offering prevention services may allow, but not require, staff to resume operating in their office spaces, but must adhere to all business guidance for reopening, including developing specific policies and protocols including guidance specific to office spaces. These policies and protocols, to ensure infection control precautions in office spaces, should include, but not be limited to, staff screening (e.g., COVID-19 risk and symptom questions, temperatures, international travel questions: see CDC International Travel Guidance here and NYS DOH guidance here), visitor screenings, social/physical distancing among staff, staggered work schedules as needed, continued remote working when able, use of mandatory masks or face coverings for staff, clients, and visitors*, and disinfecting procedures. All masks or face coverings should fit snugly on the face and completely cover the nose and mouth. Eye protection (face shield and/or goggles) is recommended for staff if there is close physical contact with clients. Programs must adhere also to any and all procedures of facility hosts where they are tenants and are responsible for ensuring infection control precautions within the space they occupy. All services to the public may continue to be offered remotely rather than in-person. See NYS DOH guidance on recommended eye protection here and CDC guidance on eye protection here. See OASAS Masking Guidance here. *See the CDC updated mask guidance and recommendations here.

For funded and certified prevention programs conducting one-on-one prevention services (i.e., prevention counseling, Teen Intervene and Brief Alcohol Screening and Intervention for College Students [BASICS]):

- Telepractice should continue to be the preferred method to deliver individualized services, whenever possible. If face-to-face services are provided, the programs must follow all infection control guidance, including the 3/11/20 Guidance for NYS Behavioral Health Programs and its subsequent updates.
- Programs must have a plan to maintain adequate social/physical distancing amongst/between any staff and clients while on site. Furthermore, the plan must stipulate that all staff and clients must wear masks or face coverings* when on site unless otherwise documented by the individual’s medical provider as having a medical reason that they cannot do so. Eye protection (face shield and/or goggles) is recommended for staff if there is close physical contact with clients. *See the CDC updated mask guidance and recommendations here.
- In-person individual sessions may occur with staff wearing masks or face coverings* and recommended eye protection (face shield and/or goggles) if there is close physical contact with clients and clients wearing face coverings and while maintaining social/physical distancing, but providers should still consider the risks vs benefits of in-person visits (including risk to clients
during transport to/from the program) for each client in the context of continued COVID-19 infection risk. *See the CDC updated mask guidance and recommendations here.

- Any program that has a confirmed COVID-19 case among staff or clients on-site that results in contact tracing activity among anyone who was on-site must revert to working entirely through telepractice with most staff out of the office for at least 10 days.
- Please note that the LHD and the NYS DOH have the ability to place further temporary restrictions on program admissions as the result of outbreak investigation activities. If this occurs, programs should immediately notify the OASAS Regional Office. Please note that the LHD will no longer engage in contact tracing as per the 1/14/22 NYS DOH guidance (see here and here). Programs will be responsible for determining close and proximate contacts of cases identified in their programs to take necessary measures with respect to testing, quarantine, and isolation recommendations.

For programs conducting group prevention services:

- The delivery of prevention services and activities in an in-person group setting may resume so long as the following precautionary measures are met (see below). Distance learning platforms, however, should continue to be widely used for the delivery of prevention services, to reduce visits to office spaces and allow for the maintenance of social/physical distancing.
- When face-to-face services are provided, the program must adhere to any and all procedures of facility hosts where they are tenants and must also have their own infection control policies and protocols. They must adhere to social/physical distancing and require masks or face coverings for staff and clients*. Eye protection (face shield and/or goggles) is recommended for staff if there is close physical contact with clients. *See the CDC updated mask guidance and recommendations here.
- Activities outdoors should be encouraged whenever possible. One-on-one indoor activities (with social/physical distancing and masks or face coverings for staff and clients*) are safer than group activities. Eye protection (face shield and/or goggles) is recommended for staff if there is close physical contact with clients. However, any indoor group activities should be of limited size (depending on the size of the physical space and that allows for social/physical distancing) and duration (less than an hour). *See the CDC updated mask guidance and recommendations here.
- Please note that the LHD and the NYS DOH have the ability to place further temporary restrictions on program admissions as the result of outbreak investigation activities. If this occurs, programs should immediately notify the OASAS Regional Office. Please note that the LHD will no longer engage in contact tracing as per the 1/14/22 NYS DOH guidance (see here and here). Programs will be responsible for determining close and proximate contacts of cases identified in their programs to take necessary measures with respect to testing, quarantine, and isolation recommendations.

Questions regarding this guidance should be sent to Prevention@oasas.ny.gov.