As Essential Infrastructure Workers, we operate in the US and function in a Mental Healthcare Role in the response and recovery ensuring continuity of functions imperative to the public health and mental and physical safety of individuals during the COVID-19 situation.

Right Direction Crisis Intervention works under, and is designated:

Essential Infrastructure Workers under the sector profile
HEALTHCARE/PUBLIC HEALTH


Re: Behavioral and Mental health workers (including mental and substance use disorder) responsible for coordination, outreach, engagement, and treatment of individuals in need of mental health and/or substance use disorder services.

(see below)
Q&A: Questions and Answers for Program and Parents about RDCI Best Practices while adapting to the COVID-19 situation:

(Is Essential Infrastructure Workers Citation and Documentation for Reference of parents, our Intervention and Transport Teams while out on the road, see below, at the bottom of the document)

Is Right Direction Crisis Intervention still transporting through the COVID-19 situation?

Yes. However, we are looking at each case individually to make sure that we are doing our due diligence with respect for safety and cost for: Families, Client, Referring professionals, Programs, and our Field Staff Teams out in the field.

We are implementing higher standards for our level of communication so that all parties are on the same page and operating as safe as possible.

Is your RDCI Staff healthy from COVID-19?

We will continually monitor our Field Staff’s health and wellness with each case and before being assigned to a case. If anything changes with Staff health, known contact with a positive COVID-19 individual or suspected symptoms, we will remove that Staff immediately.

Staff will NOT accept cases if they have any symptoms and will always emphasize strict hygiene practices while refraining and keeping their hands away from their face.
Can your RDCI Staff get tested for COVID-19?

When accessible testing is available for Staff, we will be testing them, based on Essential Critical Workers within the Health Care and Mental Health clause listed in the memo below.

What precautions and risk mitigation steps are RDCI Staff taking?

All Staff shower immediately before and after each case to keep themselves as purely sanitized as possible going into a case, and returning home to their own families.

All Staff are traveling with sanitizer and other sanitizing wipe products to wipe down all areas of travel with a Client: (i.e., rental car surroundings, airplane seating and eating areas, hands after gas station refuel and gas station stops, etc.)

All Staff refrain from handshakes with everyone and avoid body contact unless it is directly related to the safety of a Client. Our goal is to have a contactless Intervention and transport.

Covering a cough or sneeze with a mask, disposable cloth, under a shirt, or into a sleeved elbow followed by sanitization is mandatory.

Can your RDCI Staff wear gloves and masks inside my home, or facility when entering home/area?

Pending availability, our Field Staff will wear masks throughout their travel to home or facility as well as AFTER Introductions are made.

*Staff will NOT HAVE a mask on when first meeting Client, as this could be viewed unsettling to Client when building trust, introductions, guidelines and safety protocols.

Wearing gloves is okay for one-time usage; however, gloves that are continuously worn can become contaminated similar to bare skin and may do more harm than good. We believe that sanitizing areas and washing hands with soap and water, not touching face with hands, are the most effective practices.

Can Parents pack items (mask and gloves) for the Client to wear during travel?

Absolutely.

Parents may procure items for our Staff to use for Clients if they wish. Staff cannot be responsible for purchasing or finding masks and other things for each Client. If at a hospital facility, we will ask the
hospital for any extra supplies they may have for the Client to use while traveling. If the Client has any sensitivities to hand sanitizers, please make sure to pack these particular items for the Client to be passed along with medications to our Staff.

Staff will do their best to urge a Client to follow good health practices while on the road educating the Client to understand how important it is to be a part of keeping the community safe and doing “our part” to flatten the curve. However, if the Client is obstinate about wearing precautions, it is hard for our Staff to force the issue. We will do our part to keep the area clean around the Client and have the Client wash hands with soap and water when possible.

**Can RDCI Staff purchase hygiene items for Client before Transport Date?**

Parents may procure items for our Staff to use for the Client. Due to a nationwide limited availability, our Staff cannot be responsible for purchasing or finding masks and other things for each Client.

Our Staff’s products will be used to help clean surrounding areas, but parents should procure Client masks and gloves.

*If at a hospital facility, we will ask the hospital for any extra supplies they may have for Client to use while traveling. If the Client has any sensitivities to hand sanitizers, please make sure to pack particular items for Client and to be passed along with medications to our Staff.*

**Can RDCI avoid using airports and drive Clients to the Program?**

Absolutely.

Our Staff is trained to drive long distances safely. We advise group communication with RDCI, referring professionals, Parents, and Programs to be on the same page vis a vis quarantine precautions that are in place for Client admittance to a program. (i.e., if a designated program only currently takes Clients driven to their facility…etc…)

We will continually check in with programs daily, as their protocols for safety with hygiene may change.

**Can RDCI still use flight travel with our Child for their transit?**

We advise group communication with RDCI, referring professionals, parents, and programs to be on the same page as their quarantine precautions are in place for Client admittance to their Program.
Yes, if airports are still operating outside of ‘annexed areas’, we will fly with the Client and use our good clean practices while flying.

Several articles are supporting the safe practice of airplane travel. Airports are the cleanest they have ever been; airports are less crowded, people are more hygienically conscious than ever on the care of themselves and the area around them, airplane filters are replaced for cleaner air.

**Are airport shuttles safe to have my Child and RDCI Team ride?**

Airport shuttles are clearing out the majority of seats to lessen surfaces for contamination. Shuttle operators are avidly cleaning shuttles throughout their routes. Shuttles are not crowded, and often less habituated than your local grocery market. We will focus on sanitization after riding as well and as always reinforce Client to keep their hands away from their face.

**Is RDCI still able to help Families inside of the “travel advisory areas” of high COVID populations?**

These areas are being avoided other than extreme emergencies, and are using Staff local to that area and would isolate to driving only.

We have designated “special COVID-19 teams” available for helping families in “hot spot” areas to move Clients with high mental health needs. These teams are saved and reserved only for specific areas where COVID-19 is in high concentration. Typically, these teams are local. So it is rare that we will fly our other Field Staff into these areas.

**How available is your RDCI Field Staff?**

We are trying to be fully available and responsive. However, with program admissions protocols, flights, driving cases, and our own RDCI Staff availability, “flexibility” with dates and details have been a necessity as everyone works together to accommodate a family’s need.

**What if someone else in the Client's family is feeling ill?**

Please inform RDCI Staff and RDCI Office if it is something different from the normal:
- Seasonal cold
- Allergies
- Sinus infections
- PMS symptoms
- Client anxiety

**ANYONE SHOWING SIGNS OF:**

888-592-8400  WWW.RDAS.NET  info@rdas.net
Fever
- Shortness of Breath
- Coughing
- Tightness in chest
- Sore throat
- Loss of the sense of smell or taste

Should be considerate and update all involved parties: RDCI office, RDCI Field Staff, Family of Client, referring professional, Program contact.

**Can Client travel with their phone during COVID-19 times?**

For safety, liability, and confidentially of all parties involved, we will continue with our policy of NO PHONE USE of Client while in our care.

RDCI Field Staff will continue to do updates to Parents and our Office and pass along needed information to designated program staff and referring professionals.

**What if my Child escalates in the "intervention space" during introduction dialogue, will your Staff go hands-on to help?**

For safety reasons, yes. Our job is to create a consistent 'safe space' for Clients throughout all settings of our transport. This means that if Client tries to run, hurt themselves, harm parents or property, we will do our best to support Client hands on, deescalate, and keep everyone as safe as possible.

**If all parties are doing their part preparing and keeping our transports healthy, with hygiene practices and wellness check: we will do our best to keep a Client physically and emotionally safe throughout the transport. If we need to go hands-on with the Client to support their safety, we will, in the most respectful way possible.**

**What if my Child tells an "untruth" while on transport to avoid getting admitted into the Program?**

For safety reasons, our Staff will advise the RDCI office and Program. It will most likely take Client to the Health clinic near the Program to do necessary health testing verification to see if we can still proceed healthily.
Will this new COVID-19 precaution increase costs to the Intervention and Transport?

Our RDCI Office’s and company goal is to be as cost effective as possible while maintaining safety and security of Client throughout a family’s experience. We will not inflate our costs, and choose to be helpful and not take advantage of times while our country is in need and world is adapting.

While flying is the most cost and time efficient way to travel, with driving cases we will try and be as prudent and conservative to cover our costs while meeting a families’ need for Intervention and Transport.

At RDCI, we are constantly monitoring changes in the COVID-19 and how it affects our areas of travel, and safety working with our Field Staff, Client, their families, and Programs.

We are also open to suggestions and whatever personalized specifications to your family's needs during this time, to give you peace of mind.

Please call our toll free 888-592-8400 or email us at: info@rdas.net

Sincerely,

Brian Shepherd
President/Owner
Right Direction Crisis Intervention

(CISA memorandum see below)
March 31, 2020

Skezics Corporation
Right Direction Crisis Intervention
PO Box 712024
Salt Lake City, UT 84171

To Whom It May Concern:

The holder of this letter is a critical infrastructure worker serving an essential business.

Skezics Corporation, dba Right Direction Crisis Intervention (the “Company”) is a critical infrastructure supplier to ensure ESSENTIAL FUNCTION, as designated by the Director of the Cybersecurity and Infrastructure Security Agency (CISA) of the Department of Homeland Security’s March 19, 2020 Memorandum on Identification of Essential Critical Infrastructure Workers During Covid-19 Response.

This document certifies that this person is engaged in “supporting personal and commercial transportation services” and “facilitate[ing] access to mental/behavioral health services to the family members, responders, and survivors of an incident” which is an operation of an essential critical infrastructure business within a sector that has been designated as critical infrastructure, the continued operation of which is vital for security, national economic security, national public health or safety, or any combination thereof.

This letter further certifies that the individual in possession of this letter is a “critical infrastructure industry employee” of the both the “Healthcare / Public Health” and “Transportation and Logistics” industries should be considered exempt from local restrictions such as curfews, shelter-in-place orders, and other mobility restrictions when reporting to, returning from, or performing his or her work functions.

Pursuant to the above, this individual is authorized to travel to and from their workplace and travel to and from their workplace to locations designated as critical infrastructure pursuant to their job duties.

Should you have any questions concerning this letter, please call me at 801-859-1478.

Certified by: 

[Signature]

PAUL W. JONES
Direct (801) 998-8471
pajones@halewoodlaw.com
MEMORANDUM ON IDENTIFICATION OF ESSENTIAL CRITICAL INFRASTRUCTURE WORKERS DURING COVID-19 RESPONSE

FROM: Christopher C. Krebs
Director
Cybersecurity and Infrastructure Security Agency (CISA)

As the Nation comes together to slow the spread of COVID-19, on March 16, the President issued updated Coronavirus Guidance for America. This guidance states that:

“If you work in a critical infrastructure industry, as defined by the Department of Homeland Security, such as healthcare services and pharmaceutical and food supply, you have a special responsibility to maintain your normal work schedule.”

The Cybersecurity and Infrastructure Security Agency (CISA) executes the Secretary of Homeland Security’s responsibilities as assigned under the Homeland Security Act of 2002 to provide strategic guidance, promote a national unity of effort, and coordinate the overall federal effort to ensure the security and resilience of the Nation's critical infrastructure. CISA uses trusted partnerships with both the public and private sectors to deliver infrastructure resilience assistance and guidance to a broad range of partners.
In accordance with this mandate, and in collaboration with other federal agencies and the private sector, CISA developed an initial list of “Essential Critical Infrastructure Workers” to help State and local officials as they work to protect their communities, while ensuring continuity of functions critical to public health and safety, as well as economic and national security. The list can also inform critical infrastructure community decision-making to determine the sectors, sub-sectors, segments, or critical functions that should continue normal operations, appropriately modified to account for Centers for Disease Control (CDC) workforce and customer protection guidance.

The attached list identifies workers who conduct a range of operations and services that are essential to continued critical infrastructure viability, including staffing operations centers, maintaining and repairing critical infrastructure, operating call centers, working construction, and performing management functions, among others. The industries they support represent, but are not necessarily limited to, medical and healthcare, telecommunications, information technology systems, defense, food and agriculture, transportation and logistics, energy, water and wastewater, law enforcement, and public work. We recognize that State, local, tribal, and territorial governments are ultimately in charge of implementing and executing response activities in communities under their jurisdiction, while the Federal Government is in a supporting role. As State and local communities consider COVID-19-related restrictions, CISA is offering this list to assist prioritizing activities related to continuity of operations and incident response, including the appropriate movement of critical infrastructure workers within and between jurisdictions.

Accordingly, this list is advisory in nature. It is not, nor should it be considered to be, a federal directive or standard in and of itself.

In addition, these identified sectors and workers are not intended to be the authoritative or exhaustive list of critical infrastructure sectors and functions that should continue during the COVID-19 response. Instead, State and local officials should use their own judgment in using their authorities and issuing implementation directives and guidance. Similarly, critical infrastructure industry partners will use their own judgment, informed by this list, to ensure continued operations of critical infrastructure services and functions. All decisions should appropriately balance public safety while ensuring the continued delivery of critical infrastructure services and functions.

CISA will continue to work with you and our partners in the critical infrastructure community to update this list as the Nation’s response to COVID-19 evolves. We also encourage you to submit how you might use this list so that we can develop a repository of use cases for broad sharing across the country.

Should you have questions about this list, please contact CISA at CISA.CAT@LSA.dhs.gov.

Essential Critical Infrastructure Workforce

HEALTHCARE / PUBLIC HEALTH

- Workers providing COVID-19 testing; Workers that perform critical clinical research needed for COVID-19 response
- Caregivers (e.g., physicians, dentists, psychologists, mid-level practitioners, nurses and assistants, infection control and quality assurance personnel, pharmacists, physical and occupational therapists and assistants, social workers, speech pathologists and diagnostic and therapeutic technicians and technologists)
- Hospital and laboratory personnel (including accounting, administrative, admitting and discharge, engineering, epidemiological, source plasma and blood donation, food service, housekeeping, medical records, information technology and operational technology, nutritionists, sanitarians, respiratory therapists, etc.)
- Workers in other medical facilities (including Ambulatory Health and Surgical, Blood Banks, Clinics, Community Mental Health, Comprehensive Outpatient rehabilitation, End Stage Renal Disease, Health Departments, Home Health care, Hospices, Hospitals, Long Term Care, Organ Pharmacies, Procurement Organizations, Psychiatric Residential, Rural Health Clinics and Federally Qualified Health Centers)
- Manufacturers, technicians, logistics and warehouse operators, and distributors of medical equipment, personal protective equipment (PPE), medical gases, pharmaceuticals (including materials used in radioactive drugs), blood and blood products, vaccines, testing materials, laboratory supplies, cleaning, sanitizing, disinfecting or sterilization supplies, and tissue and paper towel products
- Public health / community health workers, including those who compile, model, analyze and communicate public health information
- Blood and plasma donors and the employees of the organizations that operate and manage related activities • Workers that manage health plans, billing, and health information, who cannot practically work remotely
- Workers who conduct community-based public health functions, conducting epidemiological surveillance, compiling, analyzing and communicating public health information, who cannot practically work remotely
- Workers performing cybersecurity functions at healthcare and public health facilities, who cannot practically work remotely
- Workers conducting research critical to COVID-19 response
- Workers performing security, incident management, and emergency operations functions at or on behalf of healthcare entities including healthcare coalitions, who cannot practically work remotely
- Workers who support food, shelter, and social services, and other necessities of life for economically disadvantaged or otherwise needy individuals, such as those residing in shelters
- Pharmacy employees necessary for filling prescriptions.
- Workers performing mortuary services, including funeral homes, crematoriums, and cemetery workers
- Workers who coordinate with other organizations to ensure the proper recovery, handling, identification, transportation, tracking, storage, and disposal of human remains and personal effects; certify cause of death; and facilitate access to mental/behavioral health services to the family members, responders, and survivors of an incident