Weekly BDDS Meeting for Case Managers and Providers
April 15, 2020
Welcome and Today’s Agenda

• Introductions
• DDRS Goals for COVID-19 Efforts
• Updates on Policy Changes
• Scenarios
• Additional System Updates
• Next Steps
DDRS Goals for COVID-19 Efforts

Help prevent the spread of COVID-19 and keep people alive

Operationalize flexibilities

Provider network maintained

Empower person-centered decision-making for self-advocates, families, case managers, and providers
DDRS Goals for COVID-19 Efforts

• How we, as a system, are working to accomplish these goals
  – Being person-centered and reinforcing person-centered thinking in all that we do
  – Balancing what is Important To and Important For people with disabilities, their families, case managers, and providers - working to develop a sense of normalcy by minimizing change, promoting routine, and encouraging individualized responses.
  – Collecting meaningful data that will help us respond to immediate needs, as well as address future needs
  – Operating within Executive Orders and other relevant regulations
  – Maintaining on-going, active communication with stakeholders
  – Promoting the use of integrated support options that address the holistic needs of individuals and families
BDDS Temporary Measures to Monitor Closures & Site Restrictions

• Providers should continue to notify us of:
  – Service or Site Closure / Suspensions
  – Visitor restriction
  – Any significant change in service delivery

• What to Report:
  – Services impacted
  – **Number of individuals impacted**
  – Estimated closure duration and reason - if unknown, plan to evaluate need to reopen
  – Reason for Closure - Preventative or Confirmed Case
  – Alternate Planning, if any
  – How individuals and families are / will be notified

• How/Where to Report:
  – E-mail Your Local District Manager or BQIS.Help@fssa.in.gov
Policy Guidance Updates: COVID-19 Reporting

• ISDH Issued an Order Requiring COVID-19 Reporting for individuals in congregate residential settings, effective 04/10/20
• Impacts BDDS supported congregate residential settings, including:
  – HCBS Waiver settings serving two or more individuals
  – Community Residential Facilities for individuals with I/DD (ICFs/IDD and SGL)
• Requires the following to be reported within 24 hours:
  – Any resident who tests positive for COVID-19;
  – Any employee who tests positive for COVID-19;
  – Any confirmed positive COVID-19 related death OR suspected COVID-19 related death of a resident
  – Any confirmed positive COVID-19 related death OR suspected COVID-19 related death of an employee
Policy Guidance Updates: COVID-19 Reporting

- Process for Reporting Information Regarding Individuals Receiving BDDS Services:
  - Provider submits report through BDDS’s Incident Management System
  - BDDS will import collected information into the ISDH online form daily
Policy Guidance Updates: COVID-19 Reporting

- Process for Reporting Information Regarding Employees
  - Provider submits the following information to our online form
    - Provider’s name, address, county.
    - Reporter’s first and last name, phone number, and email address:
      - Reason for reporting:
        » a confirmed positive COVID-19 employee,
        » a suspected COVID-19 related employee death, or
        » a confirmed positive COVID-19 related employee death.
    - Employee’s first and last name, gender, date of birth, race and ethnicity.
    - Address and county of residential setting(s) where the employee worked
    - Any additional information you would want us to know.
Policy Guidance Updates: COVID-19 Reporting

COVID-19 (coronavirus) guidance for DDRS stakeholders

The Division of Disability and Rehabilitative Services is actively working to develop and share ongoing guidance to assist in the delivery of DDRS services in response to the COVID-19 outbreak. Listed below are the guidances released to date by DDRS, and all FSSA COVID-19 announcements can be found here, and to receive all DDRS updates please click here.

Division of Disability and Rehabilitative Services

- DDRS Advisory Council April meeting canceled: Provider and case manager webinar scheduled (April 9, 2020)
- COVID-19 multilanguage resource available from Luna (April 1, 2020)
- HANDS in Autism resources for COVID (March 31, 2020)
- Family as paid caregivers, COVID-19 and Appendix K (March 30, 2020)
- FSSA launches Hoosiers Serving Hoosiers service to connect job seekers with ways to support Hoosiers needing direct support services and child care (March 30, 2020)
- Division of Disability and Rehabilitative Services offices to close to the public to protect the health and safety of clients and staff (March 20, 2020)
- Provider webinar – COVID-19 updates and guidance (March 19, 2020)
  - Click here to watch the webinar recording
  - PowerPoint

Bureau of Developmental Disabilities

- COVID-19 reporting in congregate residential settings supported by BDDS (April 10, 2020)
  - COVID-19 employee reporting

- Webinar: Managing Life During the Pandemic Part 2 (April 7, 2020)
- BDDS COVID-19 updates and activities (April 6, 2020)
- Managing Life During the Pandemic: information for families (April 3, 2020)
- Updated guidance for individuals, families, case managers and providers (April 3, 2020)
Policy Guidance Updates: COVID-19 Reporting

COVID-19 Employee Reporting

* Required

1. Provider's name *
   Enter your answer

2. Provider's address *
   Enter your answer

3. Provider's county *
   Enter your answer

4. Reporter's first and last name *
   Enter your answer

5. Reporter's phone number *
   Enter your answer
Policy Guidance Updates: COVID-19 Reporting

Clarifications and Additional Information

- Individuals in Nursing Home on Long-Term Stay — Nursing home would file through ISDH website

- Individuals in Nursing Home on Respite Stay — waiver provider is responsible for filing IR and we would file in ISDH system.

- When submitting employee positive info please clarify what setting an employee was working in (SGL or waiver site). BDDS/ISDH doesn't need employee’s home address, just the location they were working
Updates on Policy Guidance: Residential Provider Check-Ins

• Pro-active strategy to provide support and address specific and/or immediate needs
• Weekly opportunity to “check-in” with residential providers to understand:
  – Current Planning
  – Challenges
  – Successes
  – Whether flexibilities are working as intended
• BDDS will e-mail the agency Executive Director/CEO to identify the preferred point of contact. If we do not receive a preferred point of contact, we will use the Executive Director/CEO as the point of contact
• These calls are anticipated to begin next week
• The calls should be brief and focused on being supportive, pro-active and collaborative.
Policy Guidance Updates: Scenario Review

An adult on the FSW lives in her family home and currently has Respite on her plan. The family has chosen to not allow any staff into their home during the pandemic therefore they are unable to use their current Respite hours. The individual’s siblings are under 18 years of age and therefore cannot be paid staff to help their parents during this time. The mother would like to be the paid staff and the individual has communicated that they would like that as well. Parents of adults, age 18 and over, who are receiving services have always had the option to serve as paid staff within several different waiver service definitions. The COVID-19 guidance and flexibilities provided through Appendix K have not impacted or changed those previous allowable activities. Just as before, the mother will need to become employed with their chosen waiver service provider and follow their employment conditions and requirements. In addition, the mother must meet the background and training requirements of the provider as well as those of BDDS/BQIS. Since the mother is the unpaid caregiver, she cannot provide Respite because the service definition states that respite is to relieve the unpaid caregiver. However, the individual can request that the case manager add PAC to her plan or replace Respite with PAC because this was an allowable activity prior to COVID-19. Because the individual is an adult, PAC was and continues to be a service that the mother can provide as a paid caregiver. The mother can provide up to 40 hours a week of PAC to her daughter. The mother may not exceed 40hrs a week because PAC it would not meet the criteria of a COVID-19 related need that allows for an excess of 40hr for a paid family caregiver in certain circumstances.
Policy Guidance Updates: Scenario Review

Key Issues:

• The individual is an adult
• The guidance related to services on CCBs as of March 1st doesn’t apply because the person is an adult
• Parents of adults can be paid caregivers
• The individual wants her mother to be her staff
• Mother cannot provide Respite because she is an unpaid caregiver
• The individual's CCB can be updated to include PAC since this was allowable prior to COVID-19
• The mother cannot exceed 40 hrs/wk of PAC because the situation is not related to a COVID-19 specific concern
An adult receiving supports through the CIH lives with his parents. The current services on the individuals plan are prevocational services, community habilitation and respite. The individuals’ day program has temporarily closed due to COVID-19 and the respite staff are unable to come to the home due to being exposed. Therefore the parents are now taking care of the adult individuals support need in the home. Because the temporary flexibilities allow for community habilitation to be provided in the home mom would like to be hired by their current provider and become the paid staff. The COVID-19 temporary guidance and Appendix K flexibilities do not place restrictions to the past service definition allowable activities. Because of this there are no restrictions that would prevent mom from becoming the paid direct support professional for community habilitation therefore she begins the hiring procedures of the provider.
Policy Guidance Updates: Scenario Review

Key Issues:

• The individual is an adult
• The guidance related to services on CCBs as of March 1\textsuperscript{st} doesn’t apply because the person is an adult
• Mother can provide Community Habilitation \textit{in the home} under Appendix K
• Mother cannot provide Respite because she is the unpaid caregiver
• Mother must work for a provider
• Flexibilities regarding training of DSPs afforded under Appendix K apply
Policy Guidance Updates: Scenario Review

An adult receiving support through the CIH resides with his father in their family home. The father works for a provider and is his son’s Direct Support Professional. The father consistently works 40 hours per week providing RHS as his son’s DSP. While the individual has 50 hours a week of RHS on his plan, due to staffing challenges, the individual has only been receiving 40 hours a week since December of 2019. The case manager contacted the father to advise him of the temporary flexibilities due to COVID-19 and suggested that he contact the provider to increase his hours to 50 hours a week. The father cannot provide more than 40 hours a week of RHS under the temporary flexibilities because the staffing challenges have existed since December of 2019 and are not due to a COVID-19 related need.
Policy Guidance Updates: Scenario Review

Key Issues:

• The individual is an adult
• Father cannot work more than 40 hrs/wk because the staffing challenges existed before COVID-19; therefore the 40 hour limitation on paid family caregivers is still applicable.
Policy Guidance Updates: Scenario Review

An individual resides in an SGL and goes home with his family to ride out the COVID-19 pandemic. His family would like him to remain with them at least through May. Because the length of therapeutic leave has been extended to 120 days, the individual can remain with his family without fear of losing his placement in the SGL.
Policy Guidance Updates: Scenario Review

An individual resides in SGL and is hospitalized for more than 15 days due to pneumonia and suspected COVID-19. The SGL did not discharge because an exception has been made to prevent discharges after 15 days in the hospital. He returned home on Day 18.
Additional Updates

• Working on How Guidance Applies to New Individuals
• Finalizing Guidance on Service Specific Telemedicine Examples
• Weekly Provider and CM Webinars:
  – Starting April 22\textsuperscript{nd} thru May 20\textsuperscript{th}
    • Registration to be sent today
    • Every Wednesday - 3:30 pm - 4:30 pm
• BDDS / BQIS Questions:
  BQIS.Help@fssa.in.gov