

Topic:	In Home agency COVID-19 policy guide	
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Overview

Description: Temporary policies related to the delivery of in home services (hourly attendant care) by an agency provider during the COVID-19 pandemic are contained in this guide. It will be updated as needed. **Updates from the previous version appear in red.**

Purpose/Rationale: ODDS responded rapidly to the COVID-19 pandemic and state of emergency by releasing a series of transmittals related to case management practices. This guide replaces many of those transmittals and consolidates the information. This guide will be updated as Oregon reopens.

Updates include:

For 8/25/21

- **Masks must be always worn by agency staff who do not share a residence with the individual, while supporting an individual, regardless of the distance from the individual, indoors and outdoors, and regardless of vaccination status of the staff member or individual.**
- **DSP training requirements have been returned to their pre-July 2021 status.**

Procedure(s) that apply:

Section updated August 25, 2021. Updates are in bold text below.

Individuals getting services from ODDS are considered at high risk of long term adverse consequences from COVID-19. If individuals who use ODDS services go out (for work, recreation etc.), they must have an opportunity to make an

informed choice about the risk. Work with the individual's services coordinator or personal agent as needed. Individuals must be given:

- Alternative options available to meet their needs and interests.
- The benefit of staying home.
- Encouragement to wear a mask and maintain physical distancing **if they aren't vaccinated**. The individual's case management entity can get masks for them.
- An opportunity to develop a plan to reduce related risks for both themselves and others.
- **Support in accessing the COVID-19 vaccine if the individual chooses to get one.**

It is still strongly recommended that ~~unvaccinated~~ individuals and vulnerable people continue to wear masks. Providers are expected to support individuals in knowing this recommendation and assisting the individual to have access to clean masks for going out into the community, as necessary and appropriate.

End of section update August 25, 2021.

Agency Service Requirements:

Section updated August 25, 2021.

- **Staff (including non-resident providers, caregivers, volunteers, etc.)** who provide direct care **and who do not live with the individual** must:
 - Use good infection control practices: upon entering the home wash hands with soap and water for 20 seconds, or clean hands with alcohol-based hand sanitizer, avoid touching face.
 - Use good respiratory etiquette: cover cough or sneeze into elbow.
 - Wear masks when delivering any in-person care, **indoors or outside within six feet of the individual**.
 - **High-quality single-use N95, Kn95, or 3-layer surgical masks are strongly recommended.**
 - **Spit guards are not an acceptable face covering and are not considered masks. Using masks made of materials containing holes or permeable space such as mesh, lace, or crocheted masks are not permitted.**
 - **Masks must cover the mouth and nose.**
 - **There is also additional mask guidance designed to help explain these requirements, which can be found here: ODDS COVID-19 Mask Guidance. A direct support professional**

(DSP) who can document a medical need not to wear a mask is exempt.

- **Do not allow employees who appear sick to work in an in-home setting that they do not live in.**
- **Ensure that staff are trained on standard precautions, infection control, and hand-washing.**
- Providers of in-home services are permitted to deliver services indirectly (i.e. without the person present) when an individual cannot or chooses not to enter the community. When cues are the only type of support necessary for an individual to complete an ADL/IADL task, they may be given over the phone or text if it will be effective.
- ~~Implement a policy for tracking the health of each employee and other essential personnel before they begin a shift or enter the home.~~
Inform all individuals and families of safety precautions. Encourage individuals to wash their hands and to change and wash their clothing after returning from an independent community activity.

End of section update August 25, 2021.

- The actions an agency must take when an individual or employee has or may have COVID-19 can be found in this [scenarios document](#).
- If an individual has symptoms of COVID-19, [this letter](#) can be given to the health care provider so expedited testing will be considered.
- Written signatures are preferred. However, ISPs and Service agreements do not need to be signed by any member of the ISP team in order to be valid. When signatures aren't being gathered, an agency should expect to give prior verbal agreement to deliver services based on information given by the case manager that includes effective dates, service limits and relevant known risks.

Reporting Requirements:

- If an individual or staff member may have been exposed by someone with a known suspected case or positive test for COVID-19, provider agencies must follow the COVID-19 Exposure notification process as outlined in the [scenarios document](#).

- When an individual is known to be ill or demonstrating symptoms of illness, the provider should communicate with other service providers supporting the individual, when they are known, including employment or other community living supports providers. Communication must occur when there are:
 - Concerns of persons in the household or caregivers displaying symptoms of COVID;
 - Outbreaks in the household or among staff supporting the household;
 - Medical or health department-directed quarantine;
 - Positive COVID testing; or
 - Pending COVID testing results.
- Please note: *Providers are expected to utilize use the exposure notification letter when there is a known outbreak, but calling and other communication is recommended as an additional precaution.*
- All employees of the agency are mandatory reporters of abuse and must continue to report all suspected abuse.

Governor-Directed Travel Advisory

The Governor issued a travel advisory effective November 13, 2020, asking people to limit travel whenever possible and only travel for essential business such as school or work. People who travel from out-of-state or are returning to Oregon from out-of-state travel are asked to quarantine. The travel advisory may be found at the following link:

<https://www.oregon.gov/newsroom/Pages/NewsDetail.aspx?newsid=37700>

Providers need to be aware of the travel advisory and consider it when making decisions about staffing and assigning tasks to staff. If providers have questions about how to follow the guidance or whether it is advisable for a staff to work with individuals following travel, they may consult their local public health authority.

Providers are asked to support individuals in taking precautionary measures to the extent possible following travel, suggestions include:

- Physical distancing whenever possible and limiting contact between the individual and other household members for the quarantine period;
- Staggering mealtimes and other activities in the home to allow for separate times for activities to occur, limiting exposure among household members;
- Frequent handwashing; and

- Monitoring closely for symptoms of illness.

Agency Operations:

Section updated August 25, 2021.

- A new employee may work unsupervised on a preliminary basis pending a final fitness determination from BCU for up to 90 days. The agency should determine if working unsupervised is appropriate on a case by case basis.
 - Between March 1, 2020 and May 31, 2020 expiring Criminal History Checks were extended by 90 days. As of June 1, 2020 no new extensions are being granted.
 - OAR 411-450-0080(26) has been amended to allow an agency provider to assign an employee of the agency (typically a “DSP”) who is the parent of a child in in-home services (SE 151 or SE 145) to the child under limited circumstances. The provider must confirm the child’s eligibility with the services coordinator prior to the assignment. The child must meet the eligibility criteria for a CIIS program or have a summer service level of at least 240 hours. An agency is not required to hire the parent or assign a parent to their child.

A parent hired and assigned as a DSP must have all the qualifications, required training and orientation that any other DSP would require, with the exception of nursing delegation. Family members, even while acting as a DSP, do not require delegation. They are required to maintain MARs, write progress notes, use EVV, and meet every other requirement of a DSP.

This is a TEMPORARY option. A provider who assigns a parent to a child who is not eligible for this option, or who fails to end a parent’s assignment to their minor child at the end of the federal public health emergency, is subject to civil penalties and administrative sanctions on their endorsement or certificate as described in OAR 411-323-0030 and OAR 411-323-0035, up to and including revocation of the provider’s certificate.

- DSP Training (valid until further notice):
 - **The requirement for 12 hours of annual training may be paused.**
 - **CPR/First Aid renewals can be postponed.**
 - **New hires may work, assisted by a fully trained DSP, without CPR/First Aid certification.**

- **New hires may work, assisted by a fully trained DSP, without six hours of pre-service training. The six hours may occur as on-the-job training.**
- Beginning March 1, 2020, expiring criminal history checks have been extended for one year. The need for fingerprint based background checks is postponed. They will be required later for those that were postponed.
- Any service, including camps, which congregate two or more individuals with intellectual and developmental disabilities (who do not already reside together) must have a reopening plan. This is applicable even if the service being utilized for a Camp is Respite Care. The service may only be delivered in a congregate setting if the county is in Phase 2, to individuals who reside in the same or nearby county that is also in Phase 2. A reopening plan is required to be approved before congregate services may begin. See the [Employment and DSA reopening guide](#) for additional information.
- When an employee who has contact with individuals reports symptoms of COVID-19, [this letter](#) may be used to alert a health care provider or local public health authority to consider prioritized testing for the employee.

End of section update June 29, 2021.

Oregon OSHA Regulations

Oregon OSHA issued a new set of regulations which take effect on November 16, 2020. These regulations include requirements for workplace settings to address employee safety.

The new Oregon OSHA COVID rules apply to nearly all workplaces, including in-home settings where services are delivered by a provider agency and other sites where DD services may be delivered. The employers that are subject to OSHA rules include agency providers and businesses where there are employees with worker's compensation coverage.

OSHA is a separate regulatory authority not affiliated with ODDS. For questions related to the new OSHA regulations, providers are encouraged to contact OSHA directly or utilize provider community resources available to them, including provider organizations for further support in this area.

Providers are responsible to know if OSHA rules apply to them as an employer

and are expected to be aware of and follow the OSHA requirements. ODDS COVID policies continue to apply.

The new OSHA rules may be found at the following link:
<https://osha.oregon.gov/OSHARules/div1/437-001-0744.pdf>

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