

# Office of Developmental Disabilities Services

## COVID-19 Frequently Asked Questions (FAQ) for Providers

The Oregon Health Authority (OHA) has identified presumptive positive cases of the virus that causes COVID-19. COVID-19 is spread from person-to-person through droplets in the air and on surfaces that people touch.

This guidance is developed for the Office of Developmental Disabilities Services' Providers and will be updated on a regular basis with additional answers to questions that are submitted. Separate FAQs for [Case Management Entities](#) and on [Day Support Activities/employment](#) are online. We encourage you to refer to these FAQs as well for additional guidance.

For providers, or individuals and family members of someone living in a residential setting, questions can be submitted to [ODDS.Questions@dhsosha.state.or.us](mailto:ODDS.Questions@dhsosha.state.or.us)

### **Accommodation for webinar:**

**Question:** Will there be ASL accommodations made for the webinars?

**Answer:** Please send all request for accommodations to the organizer of the webinar. Please visit the [ODDS COVID-19 website](#) for the FAQs from the webinars.

### **Agency policies and procedures:**

**Question:** What other emergencies should we create policies and procedures for?

**Answer:** It is required that providers include responses for all natural and man-made disasters that could potentially arise. Some examples include but are not limited to: fires, earthquakes, pandemics, etc.

**Question:** Besides standard precautions infection control and prevention and hand hygiene, what are we as providers and staff required to provide besides gloves for handling soiled linens, and or tissues, and infected garbage?

**Answer:** ODDS encourages providers to use their best judgement. If you are able to increase precautionary methods and practices that is encouraged.

**Question:** Can we write one letter that designates the employee in possession of a copy as essential, or do we have to send a letter with each support worker's name?

**Answer:** The Governor's Executive Order 20-12 that was issued March 23, 2020 stated that travel must be limited to essential travel and to and from the workplace. This includes the care of individuals with disabilities. There is no requirement for a letter that is designating the employee as essential. This may be an employer requirement but is not an ODDS requirement.

**Question:** If residents leave the group home or foster care home for an extended time and come back sick and with fever and cough, should the provider allow the resident to re-enter the home? Are there precautions providers are required to take other than general precautions? Do we let them go wherever they want in the house? I understand with visitors we can protect the vulnerable in care houses by refusing entrance.

**Answer:** Individuals must be allowed to return home unless re-entry is restricted by Public Health due to a positive presumptive COVID-19 test result. Providers must take all precautions necessary to keep individual and other residents safe in the event it is suspected that the returning individual may have come into contact with someone who has or had the virus.

### **New questions as of April 1, 2020**

**Question:** Are we allowed to take some or all the residents to employee homes as long as everyone in the home is healthy?

**Answer:** This is not an option that should be explored, there are several risks attached to this option. There is no way to confirm the overall health and safety of the home of the employee and that the home can meet the needs of the individual. Additionally there is no way to ensure that those living in the employee's home have not been exposed to the COVID-19 virus.

### **Criminal History Checks and Fingerprints:**

#### **New questions as of April 1, 2020**

**Question:** If someone already has an appointment scheduled for fingerprints, should they still complete this and will they be reimbursed? Should we disregard emails requesting fingerprints?


**Answer:** At this point there are no fingerprint locations open. All requirements for fingerprints are temporarily suspended. Subject Individuals will need to submit a new background check, including fingerprints once the state of emergency ends.

**Question:** In regards to APD-PT-20-038, what is required to ensure we are in compliance with not doing fingerprints?

**Answer:** All other processes related to the Criminal History Check need to be followed. All appropriate OARs still need to be followed for record keeping of employees. The only change will be foregoing the fingerprinting for the duration of the state of emergency. Once the state of emergency is ended, individuals hired during this time will need a new background check to be submitted to the BCU, including fingerprinting.

**Question:** Will the Background Check Unit automatically process the applications that have already been flagged and notified the individual needs fingerprinted? Or is there something we need to do to expedite the process?

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**Answer:** The Background Check Unit is processing all applications that have been flagged as needing fingerprints.

**Crisis or exceptional funding:**

**Question:** Will there be additional funding to Providers to compensate those employees who are not allowed back to the programs due to a quarantine, without requiring them to use sick time or if they do not have sick time to use?

**Answer:** Please consult with your agency's Human Resources department or the foster homes own policy and procedures around sick time.

**Question:** Will there be additional funding to providers who need to implement a quarantine in order to compensate staff the unexpected overtime that will be a result?

**Answer:** If additional funding is needed, the agency provider will need to work with the services coordinator to ask for a rate exception. ODDS is prioritizing rate exception reviews related to COVID-19.

**Question:** Will exceptions be made for capacity limits in residential settings if an agency needs to move someone?

**Answer:** Capacity changes need be submitted to [DD.Licensing@dhsosha.state.or.us](mailto:DD.Licensing@dhsosha.state.or.us) prior to any moves. DD licensing will be considering fire codes and other safety factors prior to any capacity change approvals.

**Question:** For residential providers in supported living and 24-hour, would an option to have remote services be an option as long as supports are being provided?

**Answer:** At this time providers must continue to deliver services as outlined in the ISPs.

**New questions April 1, 2020:**

**Question:** If a resident goes home with their family, and the provider agency has staff available as "stand by staffing" can the provider bill for the day of service?

**Answer:** there are no changes to the rule criteria around billing for service when an individual is home with family. This is generally referred to as 'Day of Service'. Providers may bill for a day of service when a minimum of 8 hours of service was delivered. If a staff person is available as 'stand by staffing' they must deliver a minimum of 8 hours of support in order to be eligible to bill for the day.

**Question:** Beyond the standard actions given to take when someone has COVID-19, would it be reasonable to have all other residents leave the home for a 24-hour period while the house is sanitized?

**Answer:** This seems like a practical response to take, which should be include within the provider emergency plan. As long as all individuals could have their needs

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supported fully in an alternate setting and this is explained to them. The individuals' case managers must be notified in these situations.

### **Governor Executive Order 20-12**

**Question:** Will I need to provide a letter for my agency's Direct Support Professionals stating that they are an essential employee and include their position description?

**Answer:** No, this is not required. Some agencies have chosen to create a letter describing why their staff are essential, but this is not a requirement at this time. The Superintendent of the State Police has given guidance to local law enforcement agencies on how to support our communities in response the Governor's executive order. Employees do not need to carry any formal documentation indicating they are an "essential worker." If you have an employee who was asked to provide proof of being an "essential worker" please reach out to [ODDS.QUESTIONS@dhsosha.state.or.us](mailto:ODDS.QUESTIONS@dhsosha.state.or.us)

### **Indirect and Virtual Supports:**

#### **New questions April 1, 2020:**

**Question:** Can ODDS give further guidance around the delivery and use of indirect and virtual supports? Does the provider need direct approval, verbally or via an ISP/SA, from the case manager in order to provide indirect supports to individuals? What are the limits to the types and amounts of indirect support?

Some examples:

- Video chats and supports for indirectly assisting with cooking, exercising, de-stressing, helping with current updates, and socialization necessary to avoid social isolation.
- Maintaining overall health, shopping, medication support, meal prep

**Answer:** Indirect supports include attendant care delivered remotely. If attendant care, including DSA, is authorized on an ISP and the specific desired outcome can be met remotely, remote delivery is appropriate and requires no additional authorization. If a service had been appropriate to deliver in person, and the individual chooses to have it delivered remotely at this time, then this would be okay - assuming the support is effective. Individuals, providers and case managers will have to work creatively to find effective ways to provide support in ways that maximize physical separation.

**Question:** Should providers be providing direct and indirect supports if the individual lives with their family or should their natural supports be providing such supports at this time?

**Answer:** In-home staff are essential staff and should continue to provide support to individuals. This should be done in collaboration with the individual and their family, finding the appropriate ways to support the individual in achieving their ADL and IADL related goals and tasks. Services and supports should continue as unhindered as possible within the guidelines from government and public health officials. Natural supports cannot be compelled if paid supports are available.

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### **Medicaid and SNAP benefits:**

**Question:** How will people's Oregon Health Plan (OHP), SNAP be affected by the money that federal government will be sending out to households?

**Answer:** ODDS is following the policies that are being created by the Medicaid financial team. This question has not been clarified at this time.

**Question:** What future changes might be in store for people who get SNAP or TANF to allow staff to use this on their behalf, without the person present?

**Updated April 1, 2020 Answer:** SNAP benefits may be used online

### **Nurses:**

**Question:** Any guidance for agency nurses who typically travel to multiple residential programs each day? Is it advised to limit travel between programs, i.e. visit only one site per day to minimize spreading germs? Any insight on managing nurse delegations?

**Answer:** While recognizing that nurses are considered essential personnel for entry into a home, communication should guide conversations between the nurses, supervisors and the homes on how visits should proceed. Clearly minimizing contacts, or rearranging schedules where possible can reduce the risk of transmission. The Oregon State Board of Nursing has recently updated its guidance to Nurses regarding delegation during the Covid-19 Pandemic. It now allows for the use of electronic modalities to assess and supervise delegation based on the RN's own assessment and the RN's continuing appropriate documentation. Nurses should follow the guidance being given by the Oregon Board of Nursing. ODDS encourages agencies to use their best judgment and ensure PPE is available and used.

\*For additional information for nurses please see OSBN's COVID-19 page

[https://www.oregon.gov/osbn/Pages/Crisis\\_Nursing.aspx](https://www.oregon.gov/osbn/Pages/Crisis_Nursing.aspx)

**Question:** Given the complexity of hands-on nursing delegation for new staff and alternate personnel, could we consider a prerecorded video-based training in cases of extreme emergency?

**Answer:** The Oregon State Board of Nursing has recently updated its guidance to nurses regarding delegation during the Covid-19 pandemic. It now allows for the use of electronic modalities to assess and supervise delegation based on the RN's own assessment and the RN's continuing appropriate documentation. The RNs should follow the guidance being given by the Oregon Board of Nursing.

**Question:** Can you speak to RN delegations for people served? Is there the ability to defer when a delegation may expire? This would reduce the amount of essential personnel in the home.

**Answer:** See above. Discuss the options with the nurse whether agency or LTCCN.

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### **ODDS Licensing:**

**Question:** How can we obtain a 30 day supply of medication?

**Answer:** Please work with current physicians and pharmacies. ODDS does not have regulation over this.

**Question:** Are there any state specific trainings created for agencies to train staff about infectious disease protocols and prevention methods?

**Answer:** ODDS requires that staff complete mandatory core competency trainings, first aid and CPR. Agencies may require that staff take additional trainings as outlined in agency policy and procedures.

**Question:** If providers have two homes, one being the foster and the other one family home, can the second home be added as relocation resource?

**Answer:** ODDS encourages providers to work with Public Health and medical physicians if people need to be isolated apart from others. All on-site licensing reviews have been suspended at this time. If an emergency situation arises, please contact your licensor to discuss the situation.

**Question:** Should we continue to send in Medicaid Agency Endorsement Applications?

**Answer:** At this time there are no restrictions on these submissions. Licensing has suspending opening new homes at this time, unless a health and safety concern arises. You may continue to submit applications during this time.

**Question:** When the home's capacity is increased, will that adversely affect the person's funding?

**Answer:** ODDS had determined that should the capacity of a home be increased due to a COVID-19 related situation, the smaller capacity rates will be honored for up to 30 days/one month. This will be handled on a case by case basis working with both the DD licensing team and the provider enrollment unit within ODDS.

**Question:** Regarding the recent transmittal on licensing reviews, can you send out the required forms?

**Answer:** The DD Lead Licensor will contact your agency on the morning of your review, and will be sending you the forms at that time for you to complete. Please work with your licensor on any accommodations needed at that time.

**Question:** As a provider agency which submitted licensing renewal documents prior to the pandemic, how will we be notified of our standing and follow-up expectations?

**Answer:** DD Licensing has suspended all on site reviews during this pandemic, this includes follow-up reviews. Remote reviews will continue to take place via Therap; if your agency does not use Therap the review will be postponed. If there are immediate health and safety concerns please contact your assigned licensor.

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**Question:** Are licensing reviews going to be postponed?

**Answer:** Licensing has suspended the following activities during this time: licensing new homes (unless specific action is needed to follow quarantine direction from a medical professional or public health), 120-day reviews and follow-up reviews unless there are significant concerns with health and safety. Walk-throughs will be considered on a case-by-case basis.

**Question:** Are potential new adult foster care staff able to take the required test for certificate to even become an employee at this time?

**Answer:** ODDS understand the needs of providers to hire additional staff at this time. ODDS is considering changes to new employee training requirements. Additional guidance is forthcoming.

**Question:** If an agency license is expiring, will extensions be granted?

**Answer:** If the review can be conducted remotely, the assigned lead licensor will contact you to discuss this process. In the event the review is not able to be complete remotely, or the agency license requires an extension, the licensing unit will coordinate with the appropriate units to work on license extensions as they arise.

**Question:** With staffing hardships, can we combine staffing and homes?

**Answer:** Providers need to make sure individuals are safe. Keep in mind that some people will have increased behaviors so moving them may not make sense. It might not make sense to have staff go from one home to another and use precautions. Use your best judgement.


**Question:** Regarding HIPAA and required forms that need to be kept on sight for screening people, are there changes we need to be aware of?

**Answer:** Currently there are no changes in terms of agencies keeping papers on site, and HIPAA requirements still need to be maintained.

**Question:** If I am able to get additional medication for my residents and “stockpile” them, will I later run the risk of a licensing citation?

**Answer:** If a physician is willing to write a prescription for more than 30 days of medication and a pharmacy is willing to provide the medication, this will not be a licensing citation especially during the COVID-19 pandemic.

**Question:** For someone whose ISP goal is community visits, should we document why the person cannot go into the community or complete this ISP goal in order to remain in compliance?



**Answer:** Document activities and supports provided in the home. ODDS recognizes that no one should be leaving their homes at this time. Staying in the home will not be considered non-compliance with an ISP.

**Personal Protective Equipment (PPE):**

**Question:** Will there be any N95 masks available for care providers if a client who needs support services is COVID19 positive?

**Answer:** ODDS encourages providers to notify the medical provider that they are an essential person who provides direct care to high risk individuals. Please work with medical distribution companies for PPE requests.

**Question:** Can case managers help providers obtain personal protective equipment (PPE) such as face masks and hand sanitizer when they are not available in stores or online?

**Answer:** ODDS understands the demand for PPE has drastically increased. Please work with medical supply distribution companies for the latest updates on PPE shipments.

**New questions April 1, 2020:**

**Question:** Are providers being required to follow OSHA's requirements, specifically their respiratory protection plan and mask fit testing requirement, for training when the staff use masks?

**Answer:** We are asking that providers be proactive and follow guidelines from government and public health entities, including OSHA to protect individuals and staff.

**Restrictions on visitor policy:**

**Question:** What is the time frame we are asking staff to consider if they have had a sore throat, cough, fever, etc.?

**Answer:** This will be up to your agency. Continue to follow any advice from medical professionals or public health.


**Question:** What is the guidance for providers to protect staff who are primary caregivers of their own family members or have other characteristics of life that would make it impossible for them to stay at a program that is under quarantine?

**Answer:** ODDS encourages providers to use their best judgement at this time. We are asking that screenings and extra precautions take place, and if needed please consult with a medical professional.

**Question:** When screening staff, many have experienced symptoms related to allergies. How should we proceed if they are experiencing mild symptoms of a cough, sore throat, and watery eyes related to allergies?

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**Answer:** ODDS encourages providers to use their best judgement and to consult with medical professionals if necessary.

**Question:** How do we balance the rights of the individual with community time and the need to protect the other individuals in the home?

**Answer:** ODDS understands that at this time there are restrictions being implemented to ensure health and safety of the individuals we support. We encourage providers to think creatively when supporting individuals with their daily routine, and still offering choice in activities.

**Question:** Should there be an order to shelter in place, are one-to-one sight and sound ISP requirements of our clients considered to be reasonable and determined as essential duty for our staff to continue work?

**Answer:** Each agency must identify the essential duty staff. ISP staffing guidelines that are in place for health and safety needs still need to be maintained. Please consult with your Services Coordinator on specific ISP staffing questions.

**Question:** Are Behavior Professionals considered an essential person?

**Answer:** Yes, the original transmittal is amended to include Behavior Professionals.

**Question:** In a children's foster home are the visiting restrictions applicable? We are limiting visitors and family, but is this ok?

**Answer:** ODDS is not issuing any policies for child foster homes at this time, but we are asking that they use precautions and if the foster provider chooses to restrict visitors, ODDS supports the decision.

**Question:** In adult foster homes do we need to screen staff coming in daily? For any outing?


**Answer:** You can screen your staff at any point. Make sure to use precautions when you come in from outside. Use your professional judgement and any public health guidance provided.

**Question:** Can children be in the group home if staff need to bring them to their shift?

**Answer:** Children under 12 are not allowed to be in the home. Kids that are over the age of 12 should still not come to work with a parent, especially if they need support themselves. However, ODDS suggests that agencies rely on their own policies and procedures about children in the workplace and encourages the agency to use their best judgement. We need to ensure health and safety of the individuals we support.

**Question:** For adults who are independent in the community and don't want to follow guidelines issued – what do we do?

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**Answer:** We encourage you to communicate the importance of the information and educate the people who live in your home. Help them make choices about where they go and using the precautions when they come home.

**Question:** For foster providers who have children under 12 themselves that live in the home with them, can they be in the home?

**Answer:** Yes, if children live in the home then the policy does not apply to that situation.

**Question:** What are we to do when staff are out sick and return to work after 15 days – does a doctor have to release them?

**Answer:** There are no requirements currently in place. Providers can issue their own policies and we encourage you work with Human Resources if you have.

**Question:** Can maintenance staff work in the home and are they considered an essential person?

**Answer:** They need to be screened and if they pass then they can come into the home. If they are there to complete maintenance, and it is not an emergency it may be beneficial to reschedule the maintenance. If they are going to fill in as a staff, they will need to be trained on the individuals they will be supporting.

**Question:** Can you give any guidance on safe visits with families?

**Answer:** Help the family to know signs and symptoms and how to take precautions. The restrictions are not permanent and will be lifted as soon as we are able to safely do so. Use video chat or other virtual ways to stay in contact. Reassure the individual and family that they will see each other soon.

**Question:** If an individual refuses to comply with policy and invites people into the home, what can we do?

**Answer:** ODDS has issued a policy to all providers that requires screening of all essential persons. Visitors are not essential persons. ODDS has giving agencies the permission to limit visitors. You do not need to report this to us.


**Question:** What if essential person has a negative COVID-19 test but they can't answer no to all screening questions?

**Answer:** Continue to use your best judgement and increase precautionary methods.

**Question:** In terms of transitioning an individual from one home to another home, is there any guidance on this?

**Answer:** We know moves were/are planned and will need still to happen. ODDS has not restricted moves at this point. New entries to group homes and foster homes are still permitted.

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**Question:** We have some parents with children in voluntary placements (along with Child Welfare involvement) demanding visits within the child foster home. Will there be any official guidance similar to APD-PT-20-027?

**Answer:** At this time, children's foster care should be treated essentially the same as a family home with respect to visitors. Please review the [In home guidance](#) posted on the [ODDS COVID-19 website](#) on March 17, 2020. Child welfare guardians will be following guidance from their office and DD providers should cooperate with them.

**Question:** Many providers want to bring their kids with them to work; however, an ODDS transmittal came out requiring strict visitor limitations. Can providers and caregivers bring their children to work in the foster/group home settings?

**Answer:** No, children of employees of residential provider agencies or adult foster care homes may not enter a residential setting. Children who are residents of the foster home may continue to live in the home.

**Question:** A children's foster provider has a job outside the home that puts him in contact with many people every day. Even with attempts to be cautious, maintaining physical distance between him and the child is nearly impossible. What do you recommend? Should he refrain from going to work?


**Answer:** All people who enter the home each day should practice heightened precautions each day, maintain distance, wash hands, clean surfaces, etc. Whether this person and home should self-isolate should be a decision made by the providers. Discussions with case managers, individuals, families and guardians could also be a strategy for decision making.

**Question:** Should I be restricting or not honor a resident's request to leave the facility, aka restrict preferred activities in the community, and whether an IBL is needed for restricting access to the community?

**Answer:** On March 23, 2020, Governor Brown issued a "Stay at Home" Executive Order 20-12. Providers may use this as guidance for their approach to supporting individuals at this time until such order is lifted. Providers should use proactive strategies in helping individuals to understand and follow the orders. Providers are expected to support people to stay in the home. Individuals need to be supported to understand that the order applies to all people in Oregon and failure to follow the Governor's order can result in law enforcement action and may include up to a misdemeanor charge.

**Question:** When a child is voluntarily placed in a Child Foster Home by the parent, and the parent wants to bring the child home to visit with family during spring break or while schools are closed, who makes the decision on a child visiting family/friends outside of the Child Foster Home? What if the foster provider is concerned about controlling

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COVID-19 exposure and wonders whether he/she may restrict the child from returning to the foster home if the child is exhibiting signs of COVID-19 or has potentially been exposed while visiting family?

**Answer:** If parents want to visit with their children, visitation via video chat or other forms of technology should be recommended and encouraged. However, a parent may choose to have their child visit in the family home. In accordance with Oregon Administrative Rule 41-346-0180(4)(a) & (b), the foster provider must support the child's relationship with their family members and assist the Community Developmental Disability Program (CDDP) staff in planning visits with child and the child's family members.

When a child will be visiting with family in the family home, ODDS recommends the following to ensure precautions are taken to prevent the spread of COVID-19:

- Prior to arranging the family visit, the provider, parent and the child's CDDP Services Coordinator should have a conversation about the following:
- Precautions the child's family will be taking, such as whether family members have been assessed for symptoms, whether there will be other family members or friends visiting the family home, whether those visitors will be screened for symptoms of COVID-19, what social distancing practices will be followed, and plans to address illness or suspected illness in the family home.
- Anticipated duration of the child's visit with family and plans for the provider and parent to routinely check-in during the child's visit.
- Plan for the child to return to the foster home, including a back-up plan if the child becomes ill while in the family home.


ODDS does not allow providers to restrict an individual from returning to the foster home after a family visit. If a provider has concerns about potential exposure to COVID-19, the provider should share their concerns with the parent.

The provider may request the parent delay the child's return and extend the child's stay in the family home; however, if the parent declines the request, the provider must support the child's return to the foster home. Upon return to the foster home, if the child has symptoms of COVID-19 (fever, cough, shortness of breath, sore throat), the provider should immediately contact the child's healthcare provider and the local health department and follow their guidance.

### **New question April 1, 2020**

**Question:** For adult clients who refuse to follow the "stay at home" order, what can providers do to protect themselves? What will be the protocol if a client starts to show symptoms or tests positive and refuses to follow quarantine or to avoid other household members?

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**Answer:** Providers may not refuse re-entry for a person and must make best efforts to be responsive to the potential health risks. The provider needs to make efforts to help everyone in the house be safe, including support to others to avoid contact with the person who is not practicing socially and health acceptable practices.

**Question:** Are legal guardians no long considered essential visitors?

**Answer:** Except for during end-of-life stage situation, this is true. It is encouraged that providers and families find alternative methods to facilitate visits electronically.

**Self-isolation or quarantines:**

**Question:** In the event of outbreak in home, could staff choose to stay in home under quarantine with clients? Or will healthy staff need to be rotated?

**Answer:** ODDS encourages providers to use your best judgement and consult with public health. Follow any guidance given by public health.

**Question:** What do we do if the home is quarantined – does this mean staff have to stay for 14 days?

**Answer:** If someone is quarantined you will have to follow the guidance given by public health. They will tell you who can stay in the home and who cannot.

**Staff or resident COVID-19 tested:**

**Question:** What is the most expedient way to get a staff tested (who has developed a cough and fever) so that we know whether or not the residents have been exposed to COVID-19?

**Answer:** ODDS does not have a process to expedite the testing completed by medical professionals. It is encouraged to notify the medical provider that you are an essential person who provides direct care to high risk individuals.

**Question:** If one client has confirmed COVID 19 and the rest not.

- Who do we have to evacuate from the house the healthy client or the sick client and how long does the relocation need to happen?
- What strategies do we have to follow if staff and client are sick at the same time?
- After cleaning and disinfecting the sick person's bathroom, how long do you have to wait to use it?

**Answer:** ODDS encourages providers to use their best judgement and follow the guidance given from public health officials. Use of screenings and increased precautionary methods (handwashing, sanitizing, cleaning, etc.) are encouraged.

**Question:** What should we do if an employee is exposed to someone they provide services to who has a pending or confirmed COVID-19 test? How do we staff a person within the home or program without exposing residents or other employees?

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**Answer:** Please continue to use your best judgment, consult with a medical professional and follow and guidance given by public health.

**Question:** When following notification policies for COVID-19 and sending a message to odds.fieldliaison@dhsosha.state.or.us what should a provider expect in return?

**Answer:** ODDS is sharing the information with the Department's Agency Operations Center and tracking outcomes of providers and individuals who are having testing completed. At this time, ODDS appreciates the reporting and just requires providers to report outcomes. No additional follow up is needed. We appreciate your patience during this time.

**Question:** When will providers get formal guidance on how to quarantine individuals at home and do we need to look at IBLs?

**Answer:** If an individual must be quarantined at home, the guidance for this will be coming from Public Health or the individual's physician.

#### **Staffing Support (ODDS COVID-19):**

**Question:** Is there anything in place for providers to communicate needs, share resources or to share success stories?

**Answer:** At this time ODDS has not set up a provider communicate line. If providers would like to communicate and setup a network, this is encouraged. If there is a contact or meeting location this can be added to the [ODDS COVID-19 website](#). ODDS has a Staffing Support team set up as outlined in [AR-20-036](#) and [AR-20-037](#).

**Question:** Is there a way to share openings at homes with vocational staff being laid off?

**Answer:** ODDS has a COVID-19 Staffing Support team where providers may identify additional DSPs who may be available to other agencies or to provide services in people's own homes. If the staff member is trained accordingly, staff can be reassigned as needed to help with staffing shortages. See [AR-20-036](#) and [AR-20-037](#).

**Question:** Can a DSP work as PSW?

**Answer:** DSA agencies are endorsed the same as in-home agencies so could they provide in home services. Agencies DSP's are not restricted at this time from also being a PSW if they are enrolled as a PSW through ODDS.

#### **New questions as of April 1, 2020**

**Question:** Is the information of employees going to be shared with all other agencies in my area or across Oregon?

**Answer:** Information will be shared with requesting agencies within your area as well as across Oregon depending on the preference shared in the workbooks. We are matching by zip codes where support is needed and zip codes where workers say they  
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will go to work in. It will be up to each requesting agency and the DSA provider agency to discuss DSPs who will be available to work for the requesting agency.

### **Workbook for DSA and Employment Provider Agencies Only**

<https://www.oregon.gov/DHS/SENIORSDISABILITIES/DD/ODDS%20Resource%20Library/Staffing-Support-AvailabilityWorkbook-DSA-Employment-Providers.xlsx>

### **Workbook for DD residential programs and homes**

<https://www.oregon.gov/DHS/SENIORSDISABILITIES/DD/ODDS%20Resource%20Library/Staffing-Support-AvailabilityWorkbook-Residential.xlsx>

**Question:** Whose payroll would staff be on if they agreed to work in the residential services?

**Answer:** This is up to each agency to discuss and agree upon. ODDS is not offering suggestions on how payroll should be made.

**Question:** If a staff states that they are not available to work, should I still put them in the staffing support spreadsheet?

**Answer:** No, please only put staff that are available on the spreadsheet. However, Employment and DSA agencies receiving contingency will need to report the activities of ALL employees on the second tab. Information regarding available staff are reported on the first tab of their workbook.

**Question:** Is this a resource for our in-home comp people needing staff?


**Answer:** Yes, this is available across residential settings looking for DSPs. For PSWs, individuals and providers can refer to the SEIU web page and the OHCC webpage for leads. If someone chooses to hire a PSW as a PSW, they need to follow the usual process. If an agency chooses to hire a PSW as a DSP, they need to be sure the employee is not working for the same individual in both those roles.

**Question:** If a staff member says they are available to work, are they then required to work for whoever requests them to work and in whatever capacity they have stated they can work?

**Answer:** It is important that both sides – the provider (including the staff) and the individual and/or their team – make sure that it is a good match, including appropriateness and readiness for the job. The DSA provider may determine whether the DSP is required to work or not.

**Question:** If the DSP agrees to work for another person/company, are they free to work as many hours as they can get? What if they work more than 40 hours combined with our company and the other company, will they receive overtime?

Wednesday, April 1, 2020



**Answer:** The individual is able to work the hours they are able. It is imperative that the staff member, as well as providers, be aware of the hours to avoid burnout and fatigue to ensure quality care of individuals. If an individual is working for two different agencies than they can work 40 hours for each. The paying provider entity sets the wage. Wage and hour law apply.

**Staffing Training:**

**New questions as of April 1, 2020**

**Question:** Has there been any changes to required staff training besides OIS? It's hard to teach First Aid/CPR without being in someone's personal space.

**Answer:** During the state of emergency, First Aid and CPR renewals are being postponed as are the requirement for new hires to have this training. Further guidance regarding changes to staff training requirements can be found in [PT-20-049](#)