

# **Stakeholders Meeting on the Department's Response to COVID-19**

May 1, 2020

# Agenda

## Welcome

With Liesl Wendt

## Governor's Framework for Reopening Oregon

Q&A with Rosa Klein

## DHS Director's Report

Q&A with Fariborz Pakseresht

## Program Reports

Self-Sufficiency Programs

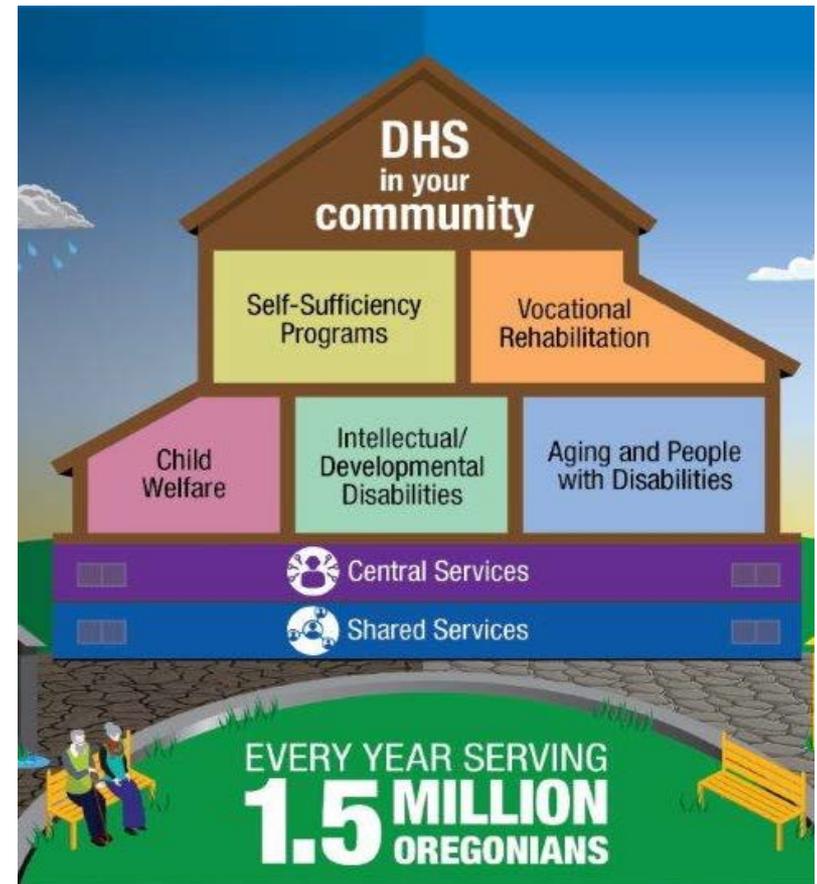
Aging and People with Disabilities

Developmental Disabilities Services

Vocational Rehabilitation

Child Welfare

Q&A with Program Directors





# Overview of state-level crisis response

## Strategic Intent

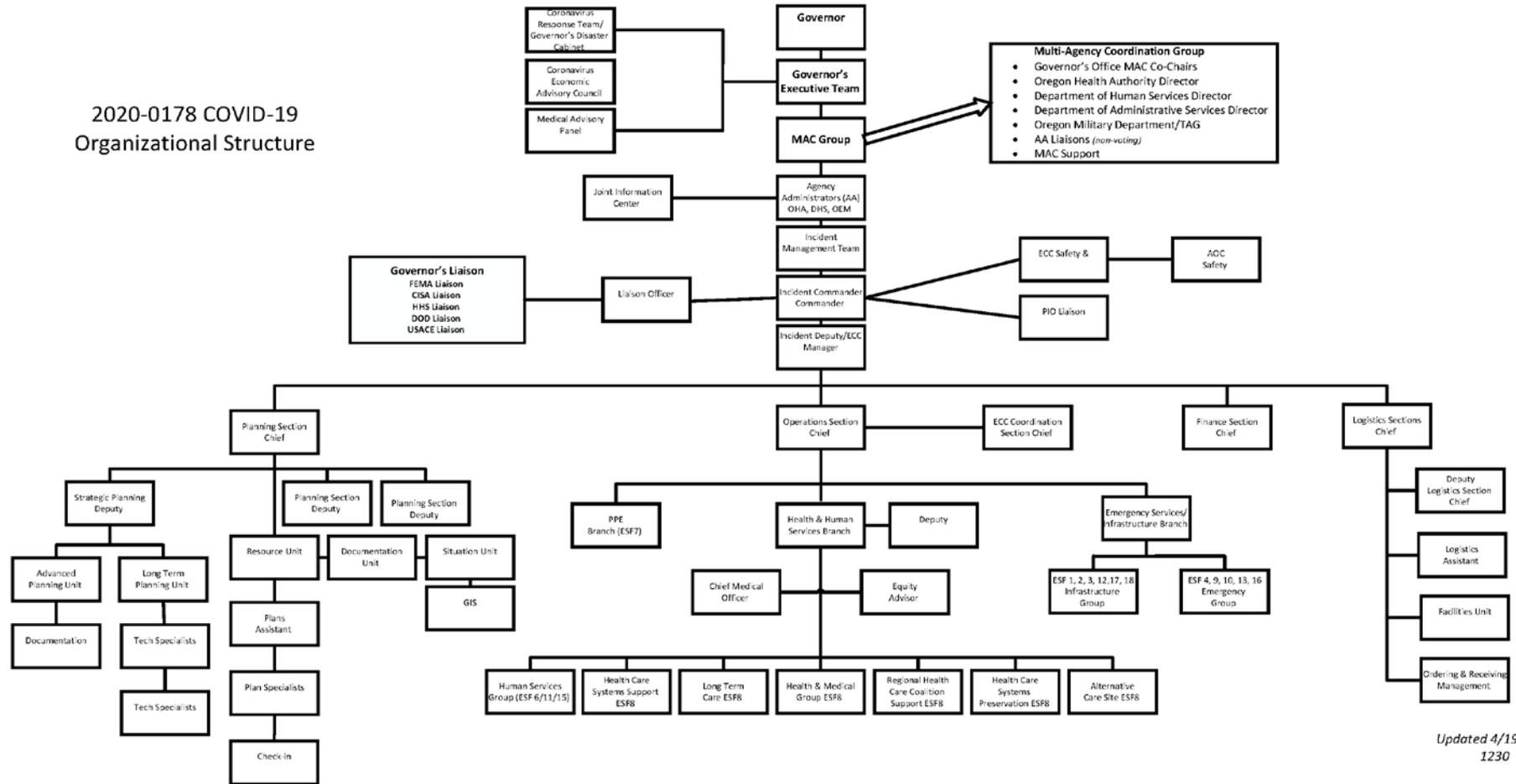
1. Provide for the safety of the public, vulnerable population, first responders and health care providers.
2. Ensure mass care and human services is prepared and has the capacity to care for the wellbeing of those impacted by COVID-19.
3. Minimize the impact and spread of COVID-19 to the people of Oregon while deliberately reopening Oregon.
4. Ensure Oregon's health care system is prepared and has the capacity to care for the wellbeing of those impacted by COVID-19.
5. Lead a coordinated, aligned and efficient emergency response to COVID-19 across all levels and sectors.
6. Ensure transparent, accurate and consistent culturally responsive communication to the people of Oregon.



Presenter  
Liesl Wendt  
Deputy Director, DHS

# State-level crisis response structure

2020-0178 COVID-19  
Organizational Structure



Updated 4/19/2020  
1230

# Reopening Oregon:

## A Public Health Framework for Restarting Public Life and Business

Governor Kate Brown

April 20, 2020

Version 4/20/2020 13:48



*You don't make the timeline.  
The virus makes the timeline.*

– Dr. Anthony Fauci

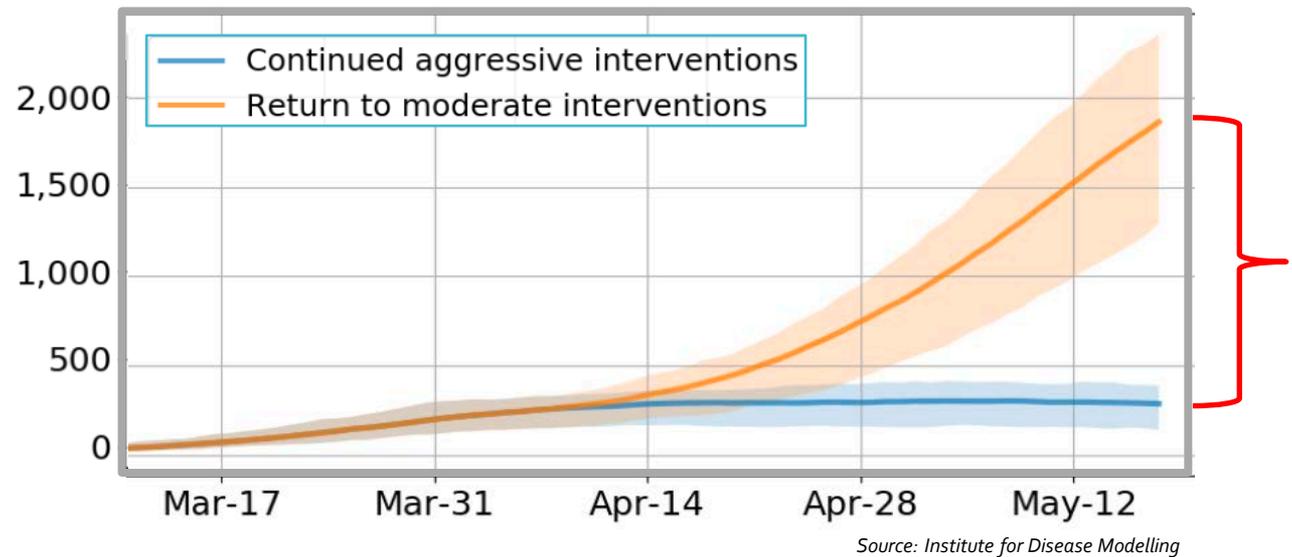
Our reality:

We will be living with the virus until there is immunity, which is many months off.



Goal: Keep  
the Curve  
Flattened

## COVID-19 hospitalizations



Experience in other countries and modelling says: reducing social distancing too quickly will create a spike in cases.



# Framework Overview

- 1. Gating Criteria: 3 components**
  - Symptoms – declining numbers
  - Cases – declining numbers
  - Hospital capacity – regular procedures and adequate testing
- 2. Core State Preparedness: 3 components**
  - Robust testing and contact tracing
  - Healthcare system capacity, including PPE and surge capacity
  - Plans for health and safety
- 3. Phased lifting of restrictions: 3 components**
  - Phase 1
  - Phase 2
  - Phase 3



## Core State Preparedness: I and II

### I. TESTING & CONTACT TRACING

- Screening and testing for symptomatic individuals
- Test syndromic/influenza-like illness-indicated persons
- Ensure sentinel surveillance sites are screening for asymptomatic cases (*sites operate at locations that serve older individuals, lower-income Americans, racial minorities, and Native Americans*)
- Contact tracing of all COVID+ cases

### II. HEALTHCARE SYSTEM CAPACITY

- Sufficient Personal Protective Equipment (PPE)
- Ability to surge ICU capacity



## Core State Preparedness: III

### III. PLANS

- Protect the health and safety of workers in critical industries
- Protect the health and safety of those living and working in high-risk facilities (e.g. senior care facilities)
- Protect employees and users of mass transit
- Advise citizens regarding protocols for social distancing and face coverings
- Monitor conditions and immediately take steps to limit and mitigate any rebounds or outbreaks by restarting a phase or returning to an earlier phase, depending on severity



# Phase One

Phase One begins at Governor's direction after all Gating Criteria and Core Preparedness items are met



## Phased Approach: Guidelines for all Phases

### Guidelines for Individuals

- Practice good hygiene
- Strongly consider wide use of face coverings in public
- Stay home if sick

### Guidelines for Employers

- Develop and implement appropriate policies: social distancing, protective equipment, sanitation.
- Monitor workforce for indicative symptoms
- Contact tracing policies for positives.



## Phase One: Individuals & Employers

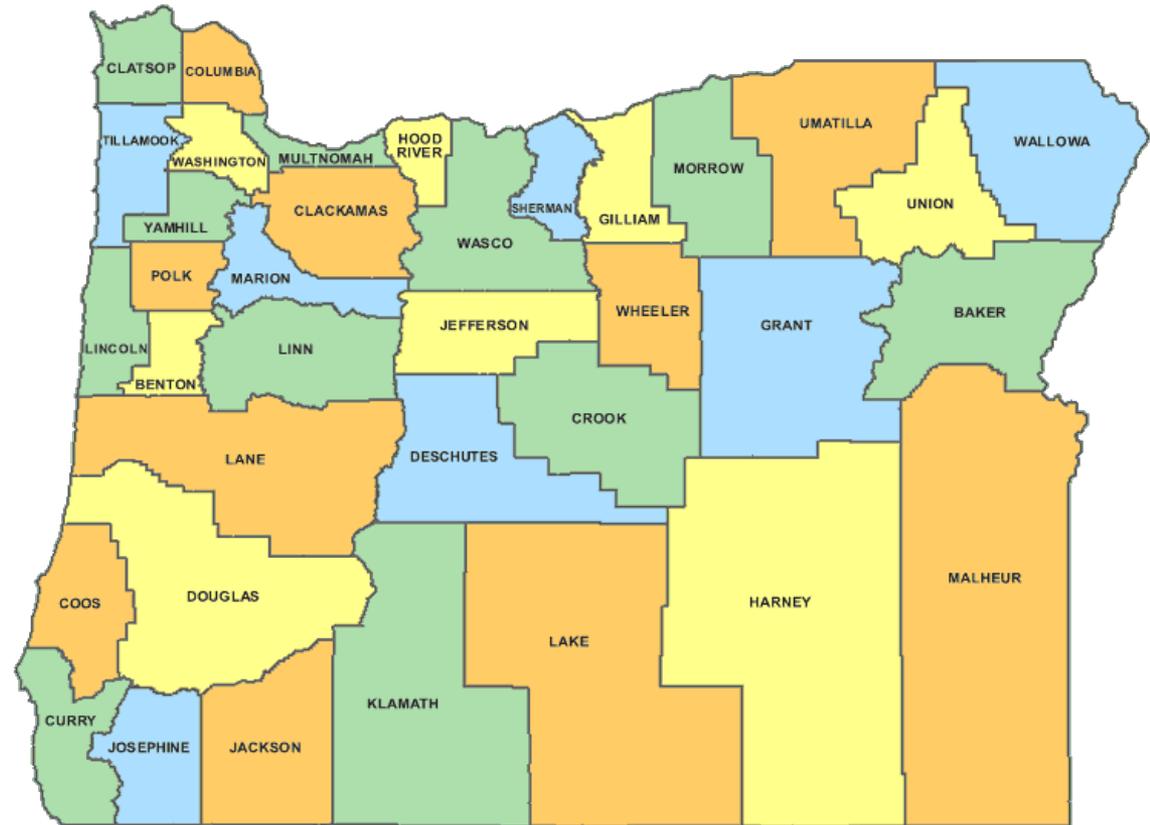
- **ALL VULNERABLE INDIVIDUALS** should continue to shelter in place.
- All individuals, **WHEN IN PUBLIC** (e.g., parks, outdoor recreation areas, shopping areas), should maximize physical distance from others.
- Avoid **SOCIALIZING** in groups of more than **10\*\*** people. Close **COMMON AREAS** where people are likely to congregate and interact.
- **MINIMIZE NON-ESSENTIAL TRAVEL**
- Continue **TELEWORK** whenever possible.

*\*\* NOTE: Needs review by Oregon Health Authority, Governor's Medical Advisory Panel and local public health.*



## Geographical considerations:

- Declining growth in symptoms/cases
- Regional testing capacity
- Regional hospital capacity
- Regional contact tracing capacity
- Regions work with OHA on plans



© 2017 WaterproofPaper.com



FOR  
DISCUSSION -  
UNDER  
CONSIDERATIO  
N

## Additional prerequisite for opening a county in Oregon: a formal request to the Governor:

- Letter from the CEOs and CMOs of hospitals within the county committing to daily PPE reporting to OHA, PPE supply chain reliability and hospital bed surge capacity.
- Recommendation letter from the County Public Health Officer.
- Vote of the County governing body certifying PPE for first responders is sufficient.



**\*\* NOTE:** Needs review by Oregon Health Authority, Governor's Medical Advisory Panel and local public health.

# Phases Two and Three

Wait 14 days, pass the gating criteria again, then move to the next phase.

Phase 2: **\*\*** Gatherings increase to 50, non-essential travel can resume, schools and gyms can open under physical distancing

Phase 3: **\*\*** Mass gatherings size increases, worksites have unrestricted staffing, visitors to nursing homes allowed, restaurants and bars can have more seating



# Questions?

Contact information:

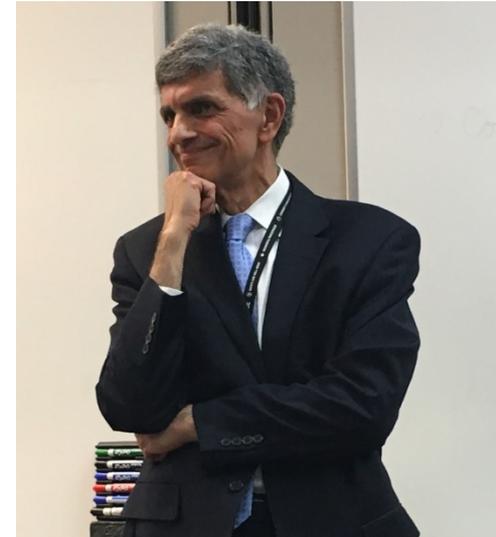
[rosa.klein@oregon.gov](mailto:rosa.klein@oregon.gov)

503-508-8099

# DHS Director's Report

Priorities for leading through the pandemic:

- Safely implement Governor's Executive Orders on physical distancing to protect the safety and wellbeing of our staff while maintaining services to Oregonians as demand grows.
- Protecting the health and well-being of the people we serve, particularly those in residential facilities.
- Expanding access to programs supporting people who have lost wages.
- Exploring options to support our providers.
- Asking the public to keep checking on children and adults at risk of neglect or abuse, and reporting concerns.

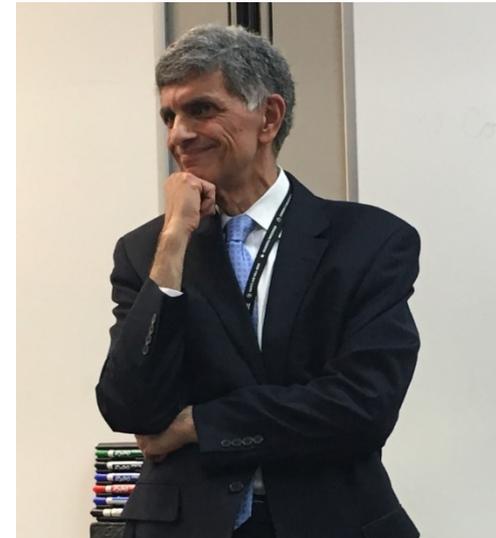


Presenter  
Fariborz Pakseresht  
Director, DHS

# DHS Director's Report

Updates:

- Budget impacts
- Federal CARES Act
- Approach to resuming normal Department operations



Presenter  
Fariborz Pakseresht  
Director, DHS



Submit your questions through Skype Q&A

# SELF-SUFFICIENCY PROGRAMS

Making benefits easier to get during the COVID-19 pandemic

The safety and well-being of staff and customers is critical. With the closure of schools and businesses, benefits and services continue to become even more important to those needing cash and food help.

## TEMPORARY POLICY CHANGES

### EMPLOYMENT RELATED DAY CARE

- Copays waived to \$0 for families
- Increased the initial income limit
- Expanded the number of absent days providers may bill DHS each month
- Providers can bill DHS for short-term closures through May 2020
- Waived the fingerprint requirement for new providers and providers needing re-evaluation (background checks continue)
- Increased timeframes for required CPR/First Aid trainings
- Health and safety visits are being done virtually in most cases

### SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM

- Interviews not required for SNAP applications with filing dates on or before May 31, 2020
- Suspended time limits for work requirements
- Households due to recertify in March, April, May or June will have their certification period extended 6 months automatically. No additional action is required.
- Do not need to complete interim change or mid-certification reviews in March, April or May.

### TEMPORARY ASSISTANCE FOR NEEDY FAMILIES

- Ended active JOBS disqualifications
- Ended active penalties for a person who is not cooperating with child support
- Personal Development Plans for JOBS activities can be updated based on the current situation
- The initial resource limit is now \$10,000 for new applicants (was \$2,500)
- JOBS Plus participants can suspend placements and still receive their TANF and SNAP benefit

### TEMPORARY ASSISTANCE FOR DOMESTIC VIOLENCE SURVIVORS

- Seeing walk-in applicants immediately for intake

### GENERAL

- Allowing the SNAP online application to be used for ERDC and TANF/Refugee
- Interviews are to be completed by phone
- A telephonic option is available to complete the application and signature process for TANF, ERDC and TA-DVS
- SNAP emergency allotments conditionally approved for the duration of the public health emergency ([press release](#))

New web page  
<https://govstatus.egov.com/or-dhs-benefits>

SNAP | ERDC | Medical | Refugee | TANF



Presenter  
Dan Haun, Director  
Self-Sufficiency  
Programs

# Aging and People with Disabilities

-----

Presenter

Mike McCormick

Interim Director



# Office of Developmental Disabilities Services

-----

Presenter  
Lilia Teninty  
Director



# Vocational Rehabilitation

-----

Presenter  
Keith Ozols  
Director



# Child Welfare

-----

Presenter

Rebecca Jones Gaston

Director





Submit your questions through Skype Q&A

# Thank you

A video recording of today's meeting and transcript will be posted to our website next week at [www.Oregon.gov/dhs](http://www.Oregon.gov/dhs) on the Quarterly External Stakeholders Meetings page.