

|                             |  |
|-----------------------------|--|
| <b>Topic:</b>               | 24-Hour Residential and Foster Home Setting Provider COVID-19 Policy Guide                       |
| <b>Date Issued/Updated:</b> | 5/29/2020; Updated 6/9/2020; Updated 7/1/20; Updated 7/16/2020; Updated 8/19/20; Updated 9/14/20 |

---

## Overview

**Description:** Temporary policies related to the delivery of services in ODDS licensed or certified residential settings, including 24-hour residential programs and foster care settings, during the COVID-19 pandemic are contained in this guide. It will be updated as needed.

**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 begins to reopen through the phased process established by the Governor.

### **Introduction:**

This worker guide addresses 24-hour residential program and foster care settings.

As many counties enter Phase One of Oregon's plan for reopening, the Office of Developmental Disabilities Services (ODDS) remains committed to ensuring the health and safety of the individuals and families we serve. COVID-19 continues to spread in our communities and threatens older adults, those with underlying health conditions, and those with intellectual and developmental disabilities.

**Phase Two Updates:** As counties begin implementing approved Phase Two re-opening plans, there are some slight changes that will take place, particularly related to visitors to the home. All general guidance contained in the worker guide continues to apply to residential settings implementing or in Phase Two re-opening plans unless specifically stated otherwise.

### **Additional updates include:**

- Clarification that masks are required in 24-hour settings when staff are within six feet of the individual
- Additional of Child Protective Services as an essential person and clarification that essential persons include providers of nursing services
- Clarification that suspension of ongoing training and modified initial training requirements for DSPs in 24-hour settings will be in place until October 31, 2020.
- Licensing remote reviews for 24-hour residential settings will be implemented beginning July 1, 2020- regardless if a provider utilizes Therap. Notice will be provided the

morning of the review.

- Extension of COVID-19 related 24-hour residential and children's foster care exceptional funding authorizations

All updates are in **red** for quick reference.

### **Procedure(s) that apply:**

***ODDS asks people to continue to stay home and stay safe as much as possible even as Oregon begins the phased reopening county by county.*** Individuals receiving services from ODDS are considered at high risk of long-term adverse consequences from COVID-19. If individuals who use ODDS services choose to go out (for work, essential services, recreation etc.), they must have an opportunity to make an informed choice about the risk. Work with the individual's services coordinator as needed. Individuals must be given:

- Alternative options available to meet their needs and interests.
- Support to understand the benefit of staying home.
- Information about the risk posed by going out.
- Encouragement to wear a mask and maintain physical distancing if they can't be persuaded to stay home and to thoroughly wash their hands when they return. 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.

If the person has made an informed choice about participating in an activity that is permissible under federal, state, and local guidance, then precautions must continue to remain in place. Precautions include:

- Require all house members and staff to immediately wash hands when returning from an independent community activity.
- Encourage individuals to change and wash their clothing after returning from an independent community activity.

### **General Requirements for Providers, including DSPs and Caregivers:**

- Providers, employees, and volunteers who provide direct care 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 to or within six feet of individuals in 24-hour residential settings. This also applies to non-resident caregivers in an adult foster care home. A resident care giver in the foster home is encouraged to wear a face covering, but not required. Child foster home providers may choose to wear masks but are not required to do so.
    - When individuals are non-symptomatic, a cloth face mask is sufficient.
    - When an individual is symptomatic or confirmed positive, an N95 mask is recommended.
    - **Spit guards are not an acceptable face covering.**

- A provider, DSP, or caregiver who can document a medical need not to wear a mask is exempt. Providers need to consider potential risks of not wearing a face covering or mask when assigning work duties, including direct care tasks.
  - There is also additional mask guidance designed to help explain these requirements, which can be found here: [ODDS COVID-19 Mask Guidance](#).
  - If a mask triggers challenging behavior, mask wearing is not required.
  - If masks are unavailable, the agency must document on-going efforts to get them.
  - When utilizing an N95 respirator mask OSHA requires an initial respirator fit test to identify the right model, style and size of a respirator for each worker. Fit tests require a specific fit test kit. If an employer cannot obtain a fit test kit or provide fit testing for all workers who need an N95 respirator mask, OSHA should be contacted for additional guidance. OSHA resources can be found here: [https://www.osha.gov/video/respiratory\\_protection/fittesting\\_transcript.html](https://www.osha.gov/video/respiratory_protection/fittesting_transcript.html) and here: <https://osha.oregon.gov/Pages/re/covid-19.aspx>.
- Providers must ensure that individuals have access to a mask anytime they must leave their home (which should be discouraged). If an individual cannot or will not wear a mask, offer alternatives such as face shields, masks made of different material, and masks that have a screen and allow individuals to still see lips/mouths. Document efforts and outcomes in the individual's record.
  - Implement a policy for tracking the health of each employee and other essential persons before they begin a shift or enter the home. Do not allow any employee showing signs of COVID-19 to have contact with individuals until the employee's symptoms have subsided for 72 hours or they are released to work by their doctor. Providers that allow contact to happen are subject to sanctions.
  - The actions an agency must take when an individual or employee has or may have COVID-19 can be found in this [scenarios document](#).
  - Providers must consult with their Local Public Health Authority (LPHA) when there is a non-symptomatic staff who has been potentially exposed to COVID-19 through direct contact with a person who has tested positive to the virus (such as through contact with a co-worker working in the same home or an infected individual) for guidance on whether to allow the staff to work. Providers having exposed staff work may only do so with the guidance of the LPHA and the provider must document the rationale for utilizing the staff.
  - Continue limitations on visitors in adult foster home and 24-hour residential settings. Providers are expected to screen essential persons accessing the home upon entry and require handwashing and PPE as appropriate. Providers of child foster homes are expected to apply caution in allowing visitors in the home and limit potential exposure as much as reasonably possible. The list of allowable essential persons who may visit

the home has been expanded to include certain types of personal visitors in counties implementing an approved Phase 2 re-opening plan.

- Help individuals to understand the risk of being in public and encourage them to minimize time away from home. Provide support to individuals to minimize an individual's need to leave the home such as helping to arrange for delivery of desired food items or medications. Encourage individuals to wash their hands and to change and wash their clothing after returning from an independent community activity.
- ISPs and Service agreements do not need to be signed by any member of the ISP team in order to be valid, although written signatures are preferred. When signatures aren't being gathered, a provider may 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, COVID-19 Testing, and Notification:**

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](#).

**Reminder: All providers and their employees are mandatory reporters of abuse and must continue to report all suspected abuse.**

## **Home and Community-Based Services (HCBS) Requirements**

During the COVID-19 pandemic situation certain rule requirements specific to residential service settings, including foster care settings, may be waived. Providers are expected to continue to support individuals in the least restrictive, most appropriate manner possible and extend any and all freedoms and protections as reasonably possible in this crisis situation.

The following HCBS residential setting requirements may be waived without an IBL or variance when necessary to prevent the spread of coronavirus:

- Residency Agreements (for temporary housing arrangements only)
- Visitors
- Control of Schedule and Activities
- Access to Personal Food
- Furnishing and décor
- Choice in Roommate

Effective July 15, 2020, the Governor issued restrictions on social gatherings, prohibiting gatherings of more than 10 people indoors. Providers operating in accordance with the guidance specific to approved phase of reopening of the county where the home is located are considered to be in compliance with the Governor's social gathering limit. Providers, individuals, and teams are encouraged to explore alternatives to gathering in the home

setting, such as meeting with friends and family in an outdoor setting where social distancing may be more easily maintained.

Regarding access to the home setting, 24-hour and adult foster home providers are expected to implement the following protocol:

- Restrict entry of non-essential persons.
- An essential person is:
  - A DSP, caregiver, or other staff who provides care, including program coordinators, and prospective staff seeking employment;
  - Emergency Personnel;
  - Adult Protective Services and/or Child Protective Services;
  - Residential Facilities Ombudsman Deputies (not volunteers);
  - Office of State Guardian and other guardians when they have concerns about the health and safety of a protected person;
  - Licensing staff and case managers;
  - Friends or family members visiting during end-of-life stages;
  - Office of Training, Investigations, and Safety (OTIS) staff or CDDP delegates;
  - Outside medical and behavioral health personnel, including nursing services providers;
  - Behavior Professionals; when necessary for health and safety and telecommunication methods are insufficient;
  - Vendors for critical supplies.
- Phase Two Update: For homes in those counties that have entered Phase Two, the list of essential persons has been expanded to include a maximum of two essential visitors per household at any one time:
  - Family Members
  - Oregon Public Guardian (OPG) and other Guardians
  - Close, personal friends
- During Phase Two a home shall implement the following protocol for visitors:
  - Homes having visitors must be “COVID-free”, meaning that there are no persons who live in the home with or suspected to have COVID-19, including demonstrating symptoms associated with COVID-19 that are not attributed to other non-contagious causes. COVID-19 symptoms include:
    - Fever
    - New or worsening cough
    - Difficulty breathing
    - Chills or repeated shaking with chills
    - Muscle pain
    - Headache
    - Sore throat
    - New loss of taste or smell
    - Runny nose (not due to season allergies)
    - Nausea

- Diarrhea
  - Abdominal Pain
- Hospice staff will not count towards the two visitor limit in an end of life situation.
  - Visitors must be screened prior to entering the home (see screening questions below).
  - Visitors are expected to wear face coverings or masks and wash hands upon entry and as requested.
  - Visitors, individuals, providers, and staff are to maintain physical distancing (at least six feet) to the degree reasonably possible.
  - Any areas of the home where visitors spent time must be cleaned immediately afterwards.
  - Providers may request that visitation by personal visitors, behavior professionals and vendors is pre-arranged. This is only for the purpose of ensuring there are not more than two visitors at a time in the home and there is adequate time to clean between visitors.
- Screen all Essential Persons who are allowed to enter the home. Providers must ask the Essential Person the following questions:
    - Have you had signs or symptoms of a respiratory infection, such as fever, cough, shortness of breath, or sore throat unrelated to seasonal allergies? Have you had signs or symptoms abdominal pain including nausea or diarrhea?
    - Have you had contact in the last 14 days with someone with a confirmed diagnosis of COVID-19, or under investigation for COVID-19 outside of the providers agency or home?
    - Have you been quarantined by public health or been advised to self-isolate by a physician within the last 14 days?
    - Have you traveled internationally within the last 14 days to countries with sustained community transmission.? For updated information on affected countries visit: <https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>
  - Staff must be screened by using the screening questions prior to starting a work shift or having direct contact with individuals.

\*\*\*Essential persons and staff may enter the home if they respond 'no' to the screening criteria above\*\*\*

Providers allegedly not following visitation guidelines or screening procedures for essential persons are at risk of report and investigation by protective services, and/or citation, license or certificate conditions, or civil penalty.

- Maintain documentation of all screenings.

## Provider Operations:

### Criminal History Background Checks

- A new employee may work unsupervised on a preliminary basis while a final fitness determination from the Background Check Unit is pending for up to 90 days. The provider 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. Effective June 1, 2020, no new extensions will be granted.
- The need for fingerprint based background checks is postponed. They will be required later for those that were postponed.

### Provider Enrollment Agreements:

- PEAs expiring between March 1, 2020 and May 31, 2020 were extended by 90 days. Beginning June 1, 2020, no new extensions will be issued.

### Staffing Support Reporting & NCI Requirements: 24-Hour Residential Programs

- 24-Hour Residential Setting providers must continue to update the [Staffing Support Availability Workbook](#) weekly and send it to [ODDS.StaffingSupport@dhsosha.state.or.us](mailto:ODDS.StaffingSupport@dhsosha.state.or.us). Staff should be notified when they are included on the workbook.  
*NOTE: ODDS can NOT open any secure emails that originate from other entities using the general Staffing Support email box. The workbooks should not contain Protected Health Information (PHI). Those providers choosing to send the workbook by secure email must use the following procedure:*
  - Send an unsecure email to: [ODDS.StaffingSupport@dhsosha.state.or.us](mailto:ODDS.StaffingSupport@dhsosha.state.or.us) with the subject line "SEND SECURE EMAIL". ODDS will respond with a secure autoreply email. Open the secure email, click to reply, attach your completed workbook, and send the email to the address above.
- The deadline for 24-Hour Residential Setting providers to respond to the National Core Indicators Staff Stability Survey has been extended from May 31, 2020 to July 31, 2020. The Staff Stability Survey is an annual reporting required by statute and administrative rule for all 24-hour Residential Settings. The NCI Staff Stability Survey will meet the obligations of these organizations. All providers must report to HSRI no later than 7/31/2020.

### Training Requirements:

- 24-Hour Residential Program DSP Training (**through 10/31/2020**):
  - The requirement for 12 hours of annual training may be paused during the period of the state of emergency.

- CPR/First Aid renewals can be postponed until October 31, 2020.
- 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.
- A new hire who has worked in a 24 hour residential home or supported living program in Oregon within the past two years and who had completed the training to work unassisted may work unassisted at a specific site following the local training portions of the following core competencies, including the physical and oral demonstration (as applicable), at any site where they will work unassisted:
  - 107. Health: Medical Information
  - 108. Health: Understanding Common, Serious Health Risks
  - 109. Health: Adaptive Equipment
  - 110. Health: Required Infection Control Techniques
  - 111. Health: Medication Administration and Documentation
  - 116. Safety: Safety Equipment
  - 117. Safety: Safe Equipment Operation
  - 119. Safety: Responding to Emergency Situations
  - 121. Planning: Become Familiar with each ISP
  - 122. Planning: Support Documents
  - 124. Planning: Court Restrictions
  - 127. Organizational Mission and Policies: Incident Report Requirements
  - In addition:
    - Be given nursing delegation and OIS training required to implement a PBSP, when applicable.
    - Instruction on reporting requirements defined in OAR 411-323-0063.
- Before working unassisted, other new hires must complete, in addition to the requirements listed above, the local training portions of the following core competencies, including the physical and oral demonstration (as applicable):
  - 102. Rights: Mandatory Abuse Reporting
  - 104. Rights: Confidentiality Standards
  - 106. Value: Dignity, Respect, and Person-Centered Language
  - 118. Safety: Environmental Modifications For Safety
  - These new hires must also be:
    - Given information about rights for people who receive I/DD services (may be iLearn lesson 103 or in person by a supervisor)
    - Informed of the agency's policy on emergency physical restraint
    - Instructed on documentation requirements
- The remainder of tier 1 core competencies and the online portions of those listed above can occur on tier 2 timelines (within three months of the start date of work).

- **Adult Foster Home Training Requirements:**

New Staff:

- The Adult Foster Home Basic Test is temporarily suspended. New AFH Provider applicants should communicate with their local AFH Licensor to coordinate the remaining elements of their application process.
- Until further notice, all newly hired staff must read the AFH Training manual as part of any on-the-job training. Newly hired staff will have until October 31, 2020 to complete and pass the basic test.
- All newly hired staff who have previously worked in an I/DD 24-hour residential agency or Supported Living agency for a minimum of 6 months within the last two years and have read the AFH manual will have their testing requirement waived.
- Newly hired staff may work assisted and supervised without CPR/FA certification during the COVID-19 Emergency. Newly hired staff will have until October 31, 2020 to complete and pass CPR/FA training.

Mandatory Abuse Reporting:

- All providers and staff (current and newly hired) must continue to meet their Mandatory Abuse Reporting Training requirement which is available online.

Current Providers and Staff:

- CPR/FA renewal requirements due between March 1, 2020 and August 31, 2020 may be suspended. Providers and staff whose certification expired during this time will have until October 31, 2020 to complete and pass their renewal training.
- The 12-hour annual training requirement is suspended for staff and foster care providers who are renewing their license from March 1, 2020 through August 31, 2020. Providers and staff whose training requirements expired will have until October 31, 2020 to complete and pass their training requirements.

- **Child Foster Home Training Requirements**

- There are no changes to current practice. Child foster home providers and their alternate caregivers must continue to meet the training requirements (including Mandatory Abuse Reporting) in [OAR Chapter 411, Division 346](#).

**Licensing Activities-** *for more details related to licensing activities, please the COVID-19 Licensing Worker Guide.*

## 24-Hour Residential Settings:

With the exception of situations where there are urgent and immediate health concerns, reviews will be occurring remotely. Licensing has implemented the following guidance:

- Suspension of licensing new homes - unless these homes are currently vacant;
- Suspension 120 day reviews;
- Suspension of *in person* reviews (including *in person* follow up reviews) – unless there is an immediate health and safety concern present;
- Walk throughs will be considered on a case by case basis.

With few exceptions for urgent concerns, licensing/certification/endorsement reviews will be conducted remotely with notice provided on the morning of the review. The assigned licensor will contact the agency on the morning of their scheduled review to inform them that the remote review will be taking place. During this time, a secure email will be sent to the agency contact for submission of required agency documents (*outlined below*), as well as any communication that includes confidential or sensitive information.

Effective July 1, 2020 if an agency is not using Therap or has limited information available on Therap, provider agencies will be required to submit all review documentation electronically. The assigned licensor will contact them on the morning of the scheduled review via phone, as well as via secure email. Once provider agencies are notified of the review and the individuals that are being reviewed, the agency will have 24 hours to submit all documentation listed below (via secure email) to the assigned licensor:

- Medical protocols
- Identified risks
- Behavior protocols
- Functional Assessments
- PBSPs
- IBLs - *Some requirements may have been waived during the COVID 19 pandemic; restrictions may have been implemented without an IBL when it was necessary to prevent the spread of the coronavirus.*
  - Residency Agreements (for temporary housing arrangements only)
  - Visitors
  - Control of Schedule and Activities
  - Access to Personal Food
  - Furnishing and décor
  - Choice in Roommate
- Health Monitoring tracking
- Health care provider visits and documentation
- Medication management
- Medication Administration records

- Physician orders
- Nursing services
- Incident reports
- Staffing
- Progress Notes/t-logs

The following information will not be reviewed and does not need to be submitted currently:

- Individual Summary Sheet
- ISP – apart from the Risks and Career Development Plan (if applicable).
- ISP goal tracking
- Personal Property Record
- Financial Records

Within seven calendar days of review notification, provider agencies must submit the following documentation via secure email. The email must contain all documents listed below as well as all corresponding records (i.e pet records):

- Environmental Checklist
- Personnel – (Guidance on reviewing personnel is included further below)
- Fire drills
- Emergency Plan
- Medications Checklist

If there are extenuating circumstances that prevent an agency from submitting records electronically, the agency must email the assigned licensor and Barb Southard to discuss alternative solutions.

The licensing unit will work with the eXPRS Unit to grant needed extensions to ensure that licenses do not lapse during this time. The assigned licensor will need to reschedule this review when in person visits restrictions are lifted.

All previously postponed reviews will be prioritized when restrictions are lifted.

### Foster Care Settings:

The following on-site (in-person) reviews continue to be suspended with the exception of urgent health and safety concerns that warrant an on-site review:

- Initial licensing or certifying reviews for new foster homes for children and adults;
- Renewal licensing and certification reviews for foster homes for children and adults; and
- Follow-up reviews.

While licensing activities are suspended, ODDS will be issuing 90-day license or certification extensions for providers affected by the State of Emergency for homes that expire 3/18/2020 until the suspension of reviews is lifted. In-person follow-up is required by the licensor or certifier after the State of Emergency is lifted. Extensions will continue to be issued for licenses expiring on or before August 31, 2020. For those expiring licenses or certificates that have been issued a 90-day extension that will lapse during this period, additional extensions will be issued.

Providers affected by the state of emergency include:

- Providers with licenses, or certifications expiring during the State of Emergency.
- Providers who started the licensing or certification process prior to the suspension of the licensing process effective 3/18/2020 but were unable complete the process due to outstanding issues that could not be resolved through documentation submitted electronically.

Providers who meet the criteria for a license or certificate extension are required to do the following:

Renewal Process:

- Complete the Licensing or Certification Application and Provider Enrollment Agreement (PEAA) and submit to the licensor or certifier prior to the expiration of the license or certificate. The rest of the application packet documents should be returned as well, however will not affect the extension process if not completed.
- PEAA's that expire between 3/1/2020 and 5/31/2020 will be extended 90 days but does not negate the requirement of sending in the PEAA.
- Pay the renewal fees for AFH's on-line prior to the expiration date. This is required for the extension to be granted.

Follow-Up Process: (reviews started prior to the suspension but required corrections)

- All violations must be corrected regardless of the licensor or certifier's ability to verify correction. Documentation of correction must be sent to the licensor or certifier. An in-person follow-up will be conducted as needed after the suspension is lifted.

A letter from the State I/DD Licensing Unit will be sent to providers who qualify for an extension. The letter will include the reason for the extension and the extension date

- At the discretion of the CDDP, local CDDP licensors and certifiers may elect to conduct on-site reviews to license new homes that do not yet have residents.

Capacity Changes:

Residential setting providers, including 24-hour residential and adult and child foster homes, may request temporary capacity changes to homes in response to the COVID-19 pandemic emergency. Temporary capacity changes will authorize a provider to serve additional individuals in a residential setting and, for 24-hour residential settings, may allow for existing tier funding rates to temporarily remain at their current level reflecting the lower capacity tier.

Provider desiring to change their residential setting capacity must request the change from ODDS licensing by completing and submitting the "ODDS Change in Licensed/Certified Capacity Request" form found on the ODDS COVID-19 Information webpage:

<https://www.oregon.gov/DHS/SENIORS/ODDS/ODDS%20Resource%20Library/OD>

ODDS (rev. 7/2/2019)

- Facility Requirements:
  - 24-hour homes requesting a temporary increase in capacity that result in 6 or more individuals simultaneously supported in the home must meet the fire safety regulation requirement of an operating 13D residential sprinkler system as defined in the National Fire Protection Association standard in accordance with [OAR 411-325-0270\(1\)\(a\)\(B\)](#). No variances waiving this requirement will be granted by ODDS.
  - Adult foster care settings may not exceed a capacity of five individuals requiring care. Capacity includes consideration of all individuals receiving services as well children under 10 and other care-dependent persons of any age.
  - ODDS-certified child foster care settings may not exceed the capacity limitations as identified in [OAR 411-346-0180\(3\)](#).

Regardless of setting type, each individual must have access to their own bed, and capacity increases may not result in any household member using common areas of the home for their designated sleeping space.

- Impacts to Service Rates:
  - In 24-hour residential settings, temporary capacity changes to accommodate relief care or to support temporarily displaced individuals will not result in a rate change for the current residents of the home, even when under normal circumstances the change in capacity would result in a different SIS payment category.

24-hour residential setting changes in capacity that become long term placements continuing beyond the COVID-19 pandemic emergency situation will result in the rates for residents being adjusted to the new SIS payment categories based on capacity.

- Changes to capacity in foster homes (child or adult) do not result in service rate changes.
- Individual Rights:

When a private room is being converted to a shared room in order to increase capacity, efforts should be made to get consent of the individuals involved, to the extent possible.

## **Provider Payment and Billing:**

- Suspension of rate reductions:

Current residential setting rates may be extended for up to 12 months in the following situations:

  - The individual has a new assessment completed that would normally result in the reduction of a service rate; or
  - A current exceptional service rate approved by ODDS is due to expire and would

normally require a renewal request submission.

- Exceptional service rate authorizations that are time-limited and specific to the COVID-19 pandemic situation are not included in this suspension or rate reduction and will end upon their expiration date, unless specifically extended by ODDS.
- **Temporary Rate Increase for 24-Hour Residential Program Settings:**  
Residential Program Settings Providers were granted a legislatively-approved temporary 10% rate increase from April 1, 2020 through June 30, 2020 to assist with additional costs tied to expectations that include:
  - Maintaining the critical Direct Support Professional workforce;
  - Enhanced and required visitor screenings and restrictions;
  - Purchasing additional infection control materials and implementing expanded prevention protocols; and
  - Working to acquire needed Personal Protective Equipment (PPE).This temporary rate increase is time-limited and will not be extended beyond June 30, 2020.

- **Sustainability Support for Child Foster Homes:**  
An I/DD CFH provider is eligible to receive Sustainability Payments for up to 21 days when a child is absent from the foster home overnight due to one of the following conditions:
  - The child's parent chooses to bring the child home to visit and shelter-in-place with child's family and the visitation is agreed upon between the I/DD CFH provider and the child's parent; or
  - The child is admitted to the hospital and is hospitalized overnight due to being exposed to or contracting COVID-19.

To receive a Sustainability Payment per one of the conditions above, the I/DD Child Foster Home provider and the Community Developmental Disability Program (CDDP) must follow the appropriate steps as outlined below:

- Step 1: Prior to creating and submitting a Service Delivered (SD) Billing in eXPRS for a Sustainability Payment, the I/DD CFH provider must notify the child's CDDP Services Coordinator of the absence. Notification may be via phone or email.
- Step 2: Upon receiving the notification of absence from the I/DD CFH provider as described above, the CDDP must authorize the Sustainability Payment in eXPRS Plan of Care (POC). Instructions for this step can be found in the eXPRS How to Guide entitled "How to Authorize DD Foster Care COVID Daily Sustainability Payments in eXPRS Plan of Care."
- Step 3: The I/DD CFH provider must create and submit a Service Delivered (SD) Billing in eXPRS for a Sustainability Payment for the absence period (not to exceed 21 days). Instructions for this step can be found in the eXPRS How to Guide entitled "How to Create & Submit Service Delivered (SD) Billing for COVID Daily Sustainability Payments."

- **Exceptional Rate/Funding Requests:**  
24-Hour Residential Program Setting Providers and Child Foster Home Providers may request exceptional time-limited rate increases or funding specifically related to the COVID-

19 pandemic situation. In order for a temporary exception request to be approved, the exception request must:

- Be based on an imminent health and safety risk of an individual or individuals in a 24-hour residential or child foster care setting; and
- The provider must be able to provide the additional staffing resources requested.

Exceptional requests include funding for:

- Increased challenging behavior: Additional DSP or Caregiver 1:1 or 2:1 hours to address increase in exclusive focus support needed to support challenging behavior related to COVID-19
- Loss of DSA/Employment Services: Additional 1:1 or 2:1 hours are necessary to provide adequate care and maintain safety for individuals who have lost access to their Day Support Activities or Employment services and received 1:1 or 2:1 staffing when participating in DSA or Employment services
- Additional shared staffing due to unavailable DSA or Employment Services: Additional shared staffing in the home during times individuals normally would have been participating in DSA or employment services is needed to maintain basic health and safety in the home
- Quarantine/Distancing-related exceptional expenses: Funding to address required support of an individual in a individualized quarantine or physically-distanced environment separate from housemates. Funding may include increase staffing hours to provide continuous support to the individual, as well as costs associated with accessing a separate temporary living environment.

All residential exceptional requests must be submitted to ODDS for approval using the ["COVID-19 Related Temporary Residential Setting Rate Exception Request"](#) form and submitting the form via email to: [ODDS.FundingReview@dhsosha.state.or.us](mailto:ODDS.FundingReview@dhsosha.state.or.us).

Approved Exceptional Funding Requests specific to COVID-19 may continue to be extended until further notice when all of the following conditions apply:

- The condition or situation requiring the exceptional funding continues to apply to the individual;
- The individual continues to need an exceptional level of support, consistent with the amount of additional support as approved in the original exception request approved by the Department; AND
- The provider continues to provide the level of exceptional support as indicated in the exceptional funding request

For those individuals who no longer need exceptional supports, the end date of the exceptional funding should coincide with the date the support was no longer needed and/or the provider no longer provided the level of exceptional support, whichever is earlier.

ODDS reserves the right to end COVID-related exceptional funding at its discretion, with appropriate notice. Reasons ODDS may terminate exceptional approval include: change in situation, availability of alternate resources, lack of demonstration that exceptional supports are or were being provided, budgetary constraints, or end of pandemic state of emergency.

- Residential setting providers may bill for services when supporting an individual away from the home setting when the conditions of [OAR 411-325-0490](#) (for 24-Hour Residential Settings) or [OAR 411-360-0200\(2\)](#) (for Adult Foster Homes). A minimum threshold of service delivery must be met, services provided must be consistent with the individual's ISP, and limitations apply.

## **Limitations on Notice of Exit:**

During the COVID-19 emergency state, providers are limited in issuing a Notice of Exit except in the case of an emergency medical or behavior situation that "poses an imminent risk of harm to the individual or others and undue delay in moving the individual increases the risk of harm". It is the expectation of ODDS that providers will not issue a notice of exit to individuals unless there is an imminent danger.

A provider shall not provide a notice of exit to an individual on the basis of the individual contracting a communicable disease, such as the COVID-19 virus. The medical emergency must be such that the individual's medical care needs are unable to be safely met in a community living setting.

For clarification, a provider may not issue a notice of exit to an individual due to challenges the provider is facing or the provider's decision to change operational practices, including the following situations:

- Provider has limited staffing resources
- Provider desire to self-quarantine
- Provider has limited supplies or supplies are difficult to obtain
- Individuals no longer have alternate community activities to go to during the day such as employment or day services activities
- Provider desire to temporarily relocate

Even in the event of an emergency medical or behavior situation posing imminent danger, the provider shall make every effort to explore alternatives to safely support the individual and allow for the maximum amount of time possible for notification and identification of another living situation for the individual.

Individuals who do receive notification of exit from a provider due to an emergency medical or behavior situation that poses imminent danger retain the right to dispute the notice and request a hearing in accordance with [ORS chapter 183](#) and [OAR 411-318-0030](#).

These emergency declaration limitations on notice of exit conditions are temporary and are specific to COVID-19. ODDS will revert to rule conditions and practices as stated in Oregon Administrative Rules [411-325-0390](#); [411-346-0240](#); and [411-360-0190](#) relating to notification of involuntary exit when it is determined that the emergency declaration is no longer necessary.

## Resources:

### PPE (Personal Protective Equipment)

- Foster Care Providers needing assistance in obtaining PPE when it is required in a Child or Adult Foster Home to safely provide services and prevent the spread of COVID-19, should work with their local county emergency managers to obtain supplies. Use the following link to identify and contact the appropriate emergency manager in your respective counties: [https://www.oregon.gov/oem/Documents/locals\\_list.pdf](https://www.oregon.gov/oem/Documents/locals_list.pdf)

For guidance on when PPE is required, please refer to the [COVID-19 Scenarios Tool](#).

### Scenarios Tool:

ODDS has developed a COVID-19 Scenarios Tool that outlines various responses and scenarios related to presumptive positive and suspected cases of COVID-19. The tool is available on the ODDS COVID-19 Information webpage at the following link: <https://www.oregon.gov/DHS/SENIORSDISABILITIES/DD/ODDS%20Resource%20Library/Scenarios-ODDS-Services-RelatedCOVID-19.pdf>

### Staffing Support

The Office of Developmental Disabilities Services (ODDS) is coordinating a staffing support team to provide technical assistance and information about available Relief Care and about available Direct Support Professionals (DSPs) to work in residential sites and in the homes of individuals. To request technical assistance or staffing, please following the instructions contained in ODDS transmittal [APD-AR-20-037 "ODDS COVID-19 Staffing Support"](#).

### Contact(s):

**Name:**

Rose Herrera (24-Hour Residential Settings)  
[Rose.K.Herrera@dhsosha.state.or.us](mailto:Rose.K.Herrera@dhsosha.state.or.us)

**Phone:**

(503) 508-5144

Ken Ralph (Adult Foster Homes)  
[Ken.J.Ralph@dhsosha.state.or.us](mailto:Ken.J.Ralph@dhsosha.state.or.us)

(503) 947-5191

Julie VanNette (Child Foster Homes)  
[Julie.L.Vannette@dhsosha.state.or.us](mailto:Julie.L.Vannette@dhsosha.state.or.us)

(503) 378-5001