

Action Request Transmittal Developmental Disabilities Services



APD-AR-20-099

Lilia Teninty

Authorized signature

Number: UPDATED

Issue date: 2/18/2021

Topic: Developmental Disabilities

Due date: 2/22/2021

Subject: COVID-19 Scenarios Update and Required Reporting Form

Applies to (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> All DHS employees | <input type="checkbox"/> County Mental Health Directors |
| <input type="checkbox"/> Area Agencies on Aging: {Select type} | <input type="checkbox"/> Health Services |
| <input type="checkbox"/> Aging and People with Disabilities | <input checked="" type="checkbox"/> Office of Developmental Disabilities Services (ODDS) |
| <input type="checkbox"/> Self Sufficiency Programs | <input checked="" type="checkbox"/> ODDS Children's Intensive In Home Services |
| <input checked="" type="checkbox"/> County DD Program Managers | <input checked="" type="checkbox"/> Stabilization and Crisis Unit (SACU) |
| <input checked="" type="checkbox"/> Support Service Brokerage Directors | <input checked="" type="checkbox"/> Other (<i>please specify</i>): DD Medicaid Agencies, Personal Support Workers |
| <input checked="" type="checkbox"/> ODDS Children's Residential Services | |
| <input type="checkbox"/> Child Welfare Programs | |

Reason for Action:

This Action Request updates the 11/17/2020 AR-20-099 and replaces IM-20-070 which is now obsolete.

As the COVID-19 pandemic continues, ODDS acknowledges that maintaining records and reporting for individuals eligible for ODDS services and providers delivering service is challenging for all providers and case management entities. For that reason, ODDS has updated information and requirements in the **COVID-19 Scenarios document and the COVID-19 Reporting Form**, both of which can be found [here](#).

Notifications are required to be submitted to ODDS and CMEs on the February 17, 2021 updated version of the [ODDS COVID-19 Reporting Form](#) effective February, 22, 2021.

Updates to the COVID-19 Scenarios document include:

1. Additional definitions for clarification.
2. Changes in formatting and wording to enhance clarity.

3. Elimination of requirement to report to ODDS on negative COVID test results for individuals.
4. If an individual who attends an employment or Day Support Activities setting tests positive for COVID-19 or experiences symptoms of COVID-19 or is determined suspected or presumptive, the following must occur:
 - Residential providers must notify the Employment/DSA program, if the individual attended 2 days prior to onset of COVID-like symptoms onset. If the residential provider is unsure when symptom onset occurred, notify the Employment or DSA program if the individual attended in past 14 days, that they may have been exposed to COVID-19.
 - Residential providers must not send an individual to work if they have been exposed to COVID-19. If the individual leaves the home to attend work or DSA, despite being asked not to, residential providers must notify the Employment/DSA program so they can redirect the individual back home.
5. Addition of Tribal health programs to all references to the local public health authorities (LPHAs).
6. If an individual or staff at a Children's 24-Hour group home experiences a COVID-19 scenario that must be reported, the provider's requirement to notify CDDPs is exclusive to only the CDDP in the county where the home is located. The provider must also notify the State Children's Residential Specialist assigned to the home. That Children's Residential Specialist will notify the other CDDPs that provide case management to the residents.
7. Addition of nursing and behavior professionals as examples of provider types that must be notified of possible COVID-19 exposures.

Updates to the COVID-19 Scenarios Reporting Form include:

1. Changes in formatting and wording to enhance clarity.
2. Addition of hyperlinks to allow the form user to skip sections of the form that are not relevant to the scenario being reported.
3. Addition of an open text field for the user to add more information if desired.
4. Questions regarding the offer of COVID-19 vaccine to individuals, agency staff, and PSWs who are the subjects of the report.

Required Action:

- Effective immediately, follow the requirements in the updated [Scenarios document](#).
- Effective February 22, 2021, use the [ODDS COVID-19 Reporting Form](#) to make

COVID-19 reports to ODDS, Children’s Residential Specialists, and relevant CMEs.

- To report a COVID-19 Scenario, send an email to: ODDS.COVID-19ScenarioReport@dhsoha.state.or.us and cc the Case Management staff who need to be informed, requesting a secure email. Do not add content to the non-secure email. Once a secure email is returned to all necessary parties by ODDS, using the REQUIRED [reporting form](#), submit the required data to ODDS.COVID-19ScenarioReport@dhsoha.state.or.us. In the same email, add email addresses for any other case management entity required, and if desired; email may also include the LPHA contact and home licensor or certifier.

Communication/Training:

This transmittal will be discussed during the next Monthly Transmittal Review. These meetings are held the second Wednesday of every month at 2 pm using the TEAMS platform. The link to participate is here: [Join Microsoft Teams Meeting](#), or you can call [971-277-2343](tel:971-277-2343) using conference ID: 403 980 561# to hear only the audio portion of the meeting. Please send questions in advance to ODDS.INFO@state.or.us.

Field/stakeholder review: Yes No

If yes, reviewed by:

If you have any questions about this action request, contact:

Contact(s): ODDS COVID-19 Team	
Phone:	Fax:
Email: ODDS COVID-19 Scenario Report ODDS.COVID-19ScenarioReport@dhsoha.state.or.us	