# Behavioral Health Residential Providers/OHA COVID-19 Check-in

03/02/2021



## **Agenda**

- Welcome and Leadership Update (Steve/Kyleen)
- Introduce Behavioral Health Senior Health Advisory (SHA)
  Meg Cary (Kyleen)
- OHA Vaccine Conversation (Cissie)
- COVID-19 Exposure and Quarantine (Chris)
- Transitions from SUD facilities due to COVID-19 outbreaks (Simon)
- Is there helpful information that OHA epidemiologists can provide for you? – Group conversation (Cissie)



# Behavioral Health Senior Health Advisor Margaret (Meg) Cary

Meg Cary (she/her) is the behavioral health senior health advisor (SHA) for OHA's COVID Response and Recovery Unit. She is returning to Oregon after 3yrs with the King County, WA Dept of Community and Human Services where she worked on the Community Emotional Well-Being and Behavioral Health group of their COVID-19 response, the Best Starts for Kids and Zero Youth Detention initiatives. Previously she was faculty in OHSU's Child and Adolescent Psychiatry division. She continues to provide clinical care in a community health clinic in Eastern Oregon with whom she has worked since 2011.



# **Vaccine Update**

Behavioral Health Residential Facilities (including AFH)

- OHA contracted provider in response to HSD Survey re: gaps
  - Counties for first dose included: Multnomah, Clackamas, Columbia, Clatsop, Lane, Washington, Linn, Benton, Jackson, Wasco, Umatilla, and Coos
  - Second dose to begin week of 3/8/21 in the same order
- 16-17 year-olds
- Upcoming Survey



#### **Vaccine Resources**

Here is the link to a fact sheet about the vaccine:

https://sharedsystems.dhsoha.state.or.us/DHSForms/Served/le3528.pdf

**OHA Website address:** 

https://covidvaccine.oregon.gov

If you have questions, please send them to OHA at:

COVID19. Vaccine@dhsoha.state.or.us



# State Isolation/Quarantine Guidance (2/11/21)

- Close contact: Susceptible individual has had a substantial exposure to confirmed or presumptive COVID-19 case.
- Isolation: Physical separation and confinement because it is believed or known an individual has COVID-19.
- Quarantine: Physical separation and confinement because of a substantial exposure to COVID-19
- Susceptible individual: An individual who
  - Has not had a confirmed case of COVID-19 within the previous 90 days
  - Is not fully vaccinated (14 days past last dose)
  - Is a resident of: Long-term care facilities, adult foster homes, residential care settings, including behavioral health settlings, inpatient care settings.



# **Isolation Requirements**

- Confirmed and presumptive cases are required to:
  - Isolate for at least 10 days after illness onset and until 24 hours after fever is gone, without use of antipyretics, and COVID-19 symptoms (cough, shortness of breath, and diarrhea) are improving.
  - Isolate for at least 10 days after the collection date of the specimen that tested positive if asymptomatic or only with symptoms other than fever, cough, shortness of breath and diarrhea.
  - Isolate for at least 20 days if suffering from severe to critical illness related to COVID19, if hospitalized for COVID-19, or if the individual has a severely compromised immune system.
  - Stay in close communication with local or state public health authorities and cooperate with public health recommendations.



# **Quarantine Requirements**

- Quarantine for at least 14 days from date of last substantial exposure unless public health officials determine quarantine may be ended early for a close contact without symptoms:
  - After 10 days of quarantine without any testing; or
  - After 7 days, with a negative test result by an antigen or Nucleic Acid
    Amplification Test (NAAT) within 48 hours before ending quarantine.

**Note**: Shortened quarantine is not an option for residents or patients in these settings:

- Long-term care facilities
- Adult foster homes
- Residential healthcare settings (e.g., behavioral health residential treatment facilities, group homes for people with intellectual or developmental disabilities)
- Inpatient healthcare settings (e.g., hospitals, inpatient hospice)



# **COVID-19 Transfer Response for SUD**

Clarification on what's expected of providers, per the Oregon Administrative Rules, for Individuals receiving Residential and Outpatient SUD Services in the State of Oregon.



### 309-019-0105 Definitions

• (9) "ASAM Criteria" means the most current edition of the American Society of Addiction Medicine (ASAM) for the Treatment of Addictive, Substance-related, and Co-Occurring Conditions, which is a clinical guide to develop patient-centered service plans and make objective decisions about admission, continuing care, and transfer or discharge for individuals and is incorporated by reference in these rules.



# 309-019-0105 Definitions

 (117) "Transfer" means the process of assisting an individual to transition from the current services to the next appropriate setting or level of care.



## <u>309-019-0140</u>

#### Service Plan and Service Notes

- (4) Decisions to transfer individuals shall be documented including:
- (a) The reason for the transfer;
- (b) Referrals to follow up services and other behavioral health providers; and
- (c) Outreach efforts made, as defined in these rules.



# 309-019-0115 Individual Rights

- (1) In addition to all applicable statutory and constitutional rights, every individual receiving services has the right to:
- (j) Receive prior notice of transfer, <u>unless the circumstances</u> <u>necessitating transfer pose a threat to health and safety</u>;
- In this case regarding Covid-19 outbreaks within SUD facilities the rule would support transfer without prior notice due to the health and safety risk posed by an individual or individuals with positive Covid-19 diagnosis without the ability to safely quarantine any said individuals.



### 309-018-0155

# **Transfer and Continuity of Care**

- Specifically regarding residential transfers:
- (1) Prior to transfer, providers shall:
- (a) When applicable, coordinate and provide appropriate referrals for medical care and medication management. The transferring provider shall assist the individual to identify the medical provider who provides continuing care and to arrange an initial appointment with that provider;



# **COVID Response and Recovery Unit Epidemiology Team**

What information would be helpful?

- Infection Control
- Outbreak Management
- Other

