Developmental Disabilities Administration (DDA) Updates

Bernard Simons, DDA Deputy Secretary

May 15, 2020

Deputy Secretary's Agenda

- Opening Remarks
- DDA Regional Office Update
- Kenneth A Feder, PhD, Epidemic Intelligence Service Officer for the Centers for Disease Control and Prevention
- Questions

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Deputy Secretary's Opening Remarks

- The DDA's highest priority is the health, safety, and wellbeing of people with intellectual and developmental disabilities, their families, staff, and providers

- This coming Tuesday we will be hosting a webcast to review self-directed services Appendix K provisions from the perspective of participants and their supports

- You can register at https://register.gotowebinar.com/register/6359027005634657552

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Deputy Secretary's Opening Remarks

- **Personal Protective Equipment (PPE)**
  - The DDA has made additional progress on the distribution of PPE. This week we received a third round of PPEs and the Regions will continue to of distribution coordinate with our providers, people in self-direction and microboards based on need

- **Recovery Plan**
  - The DDA has initiated internal discussions concerning guidance for recovery plans for service providers
  - We are also working with the DD Coalition and getting their recommendations and information from their national partners
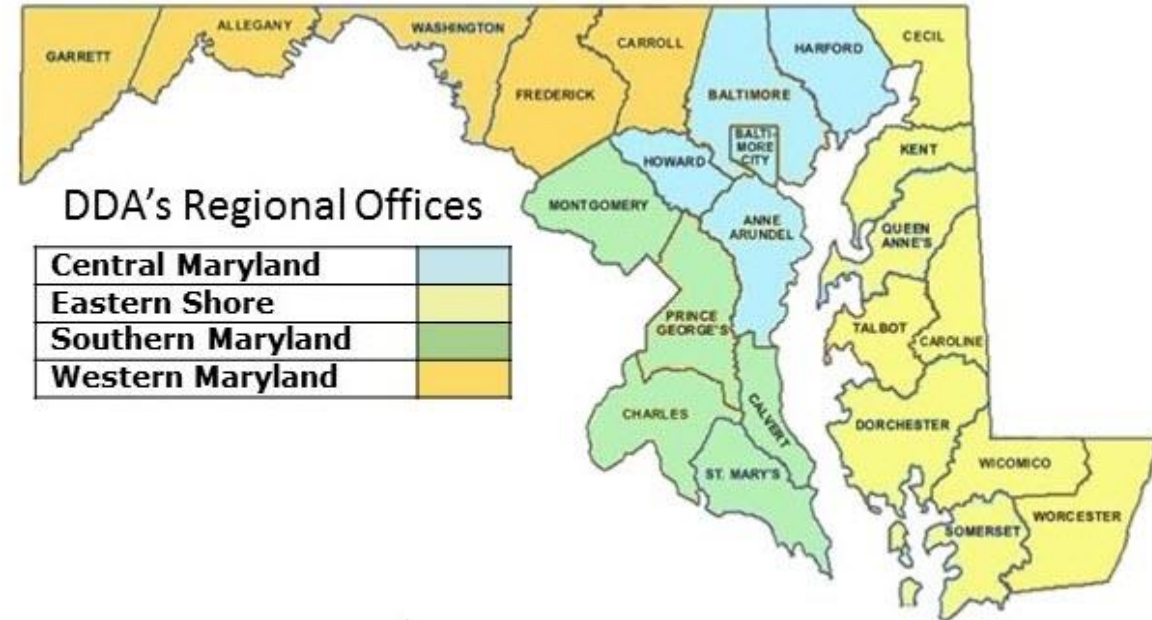
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Deputy Secretary's Opening Remarks

- **Recovery Plan**
    - The DDA is also working with other state directors from the National Association of State Directors of Developmental Disabilities Services (NASDDDS) on Re-Opening Day Services "Guiding Principles" in four major themes:

        1. Day Services- prevocational, employment and transportation

        2. Financial Considerations

        3. Health and Safety Strategies

        4. "Sun Rise" Phase- Introducing New Possibilities

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Regional Updates

- **SMRO**- Onesta Duke
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- **ESRO**- Kim Gscheidle
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- **CMRO**- Nicholas Burton
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- **WMRO**- Cathy Marshall
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DDA's Regional Offices

Central Maryland	
Eastern Shore	
Southern Maryland	
Western Maryland	

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The DDA Commitment

- We will continue to share information and resources
- We will continue to collaborate and advocate on behalf of the people you support, their families, and staff
- We will help Marylanders with intellectual and developmental disabilities thrive
- We will continue to keep you updated

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Preventing Outbreaks of COVID-19 in Group Homes for Persons with Developmental Disabilities

Kenneth Feder, PhD

CDC Epidemic Intelligence Service Officer

MDH Infectious Disease Epidemiology and Outbreak Response Bureau

May 15, 2020

Background

- Different playbook required for persons with developmental disabilities than elderly adults:
  - Different needs of population
  - Different program design
  - Fewer medical resources, less medical expertise onsite
  - Less familiarity with infection control
- New tools (coming soon):
  - Checklist for preparing and responding to outbreaks
  - New guidance for local health departments
  - New symptom screening tool

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Preparing and Preventing

- Limit entry to essential personnel
- Staff wear masks at all times
- Residents wear masks whenever they can
- Frequent hand hygiene. Practice hand hygiene routines with residents.
- Limit recreation to physically distant activities
- Clean frequently with EPA approved cleaner
- Train staff on PPE use (donning, doffing)

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Have a Plan

- As much as possible, dedicate your staff to specific homes – moving between homes can spread the virus before you know it is spreading

- Know where your residents will live if they test positive or get sick
  - Consider setting up a designated home or space that clients can move to and live in while they recover

- Have an emergency staffing plan if many staff become ill or will not work

- If you do not employ a healthcare provider, identify a provider in the community to partner with who can assist with test specimen collection

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Identifying an Outbreak

- Screen everyone who enters a home for symptoms.
  - Exclude all symptomatic persons
  - Recommend testing for symptomatic staff
- Screen residents every 8 hours. Immediately isolate residents with any symptoms:
  - Stay in room as much as possible
  - Meals in the room
  - Private bathroom or toilet if possible
  - Staff use full personal protective equipment

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Identifying an Outbreak: Testing

- As soon as a resident develops symptoms, should test for COVID-19 ASAP
- If your program employs a nurse or other healthcare provider, it is that person's responsibility to physically collect the specimen:
  - Request and pick up a specimen collection kit from the local health department
  - Return the collected specimen collection kit to the local health department, who will send it to a lab for testing
- If your program employs no health professionals:
  - Take ill resident to health care provider or testing site in the community (have a plan)
  - Discuss alternative testing options with your local health department

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Reporting an Outbreak

- An outbreak: 1 resident or staff person tests positive for COVID-19

- Within 12 hours:
  - Call the local health department to report
  - Call DDA regional director to report

- Health department will assign outbreak number
  - If number is not assigned, your report was not received

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Completing a Line List

- Daily list of names sent to local health department:
  - Persons with symptom of COVID-19 (should be tested)
  - Persons tested for COVID-19
- For each person indicate:
  - Test results
  - Date of test
  - Date of symptom onset
  - Date of hospitalization (if ever)
  - Date of death (if ever)
- Names never taken off list

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Controlling the Spread (1/2)

- Full personal protective equipment for all staff in all homes in the network

- Continue symptom screening, testing anyone with symptoms

- Implement isolation plan for positive, ill residents

- Discuss with the local health department whether other residents or staff in the home with a known case should be tested

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Controlling the Spread (2/2)

- Off-site isolation for positive residents if possible

- Shelter-in place model for homes that had positives
  - Dedicated staff onsite for homes with a single positive 24/7 for duration of outbreak

- Do <u>not</u> transfer negative residents in an affected home out to other homes

- Cohort staff:
  - Staff serving homes that have had <u>at least one positive</u> serve only those homes
  - Staff serving homes that have had <u>no positives to date</u> serve only those homes

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Recovery from COVID-19

- Governs when staff may return to work

- Governs when residents may end isolation

- For persons with symptoms:
  - 10 days past symptom onset
  - 3 days past resolution of fever
  - 3 days of other symptoms mostly better

- For persons with no symptoms ever
  - 10 days past specimen collection

Ending the Outbreak

- The outbreak ends:
  - No new positive residents or staff for 14 days in any home
  - No COVID-19 tests are pending
- Confirm with local health department outbreak is over
- Stop reporting daily line lists
- Return to "preventing and preparing" strategies

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Role of Local Health Departments

- Help track outbreak

- Ensuring essential information (infections, deaths) reported in timely manner

- Make infection control recommendations

- Facilitate access to PPE when available

- Provide specimen collection kits whenever possible

- Facilitate access to Go Teams when needed

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Questions