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
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
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 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.
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
Regional Updates

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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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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
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
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)
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
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
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
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
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
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
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 not transfer negative residents in an affected home out to other homes
• Cohort staff:
  • Staff serving homes that have had at least one positive serve only those homes
  • Staff serving homes that have had no positives to date serve only those homes
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
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
Questions