



## Developmental Disabilities Administration (DDA) Updates

**Bernard Simons, DDA Deputy Secretary** 

March 19, 2021



### Agenda



- Opening Remarks
- Deputy Secretary Update
- COVID-19 Regional Update
- Kenneth A Feder, PhD, Epidemic Intelligence Service
   Officer for the Center for Disease Control and
   Prevention, Maryland Department of Health Infectious
   Disease Epidemiology and Outbreak Response Bureau
- Jamie Rubin, MS RN; Infection Prevention and Control Senior Specialist, Office of Antibiotic Resistance & Healthcare Associated Infection Response Infectious Disease Epidemiology & Outbreak Response Bureau
- Questions

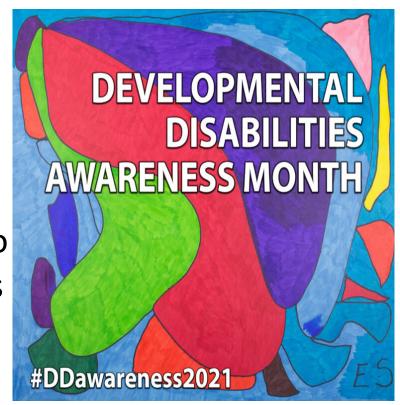


### **Deputy Secretary's Opening Remarks**

- The DDA's highest priority is the health, safety, and wellbeing of people with intellectual and developmental disabilities, their families, staff, and providers
- The DDA is committed to transparency with all of our stakeholders to ensure we are all working with the same information to support our shared missions
- Thank you for your continued support in joining me during these webcast so that we can stay in-touch and be able to provide you with the most current information

### **Deputy Secretary's Opening Remarks**

- The theme for this year's campaign is "Moving Towards Change," which speaks to the many ways in which the COVID-19 pandemic has changed our lives and communities
- #DDAwareness2021 is a great way for people to connect across all lines to share positive images about life with an intellectual and/or developmental disability. Thank you for sharing your stories with us!





- We believe in a Maryland which recognizes the unlimited potential for all our citizens, including those with developmental disabilities, to live, work, and thrive in our communities; and
- Developmental Disabilities Awareness Month is an opportunity to recognized the importance of ensuring inclusive environments with equal access to communication, education, employment, housing, transportation, and public accommodations; and
- Maryland supports those with developmental disabilities to make their own decisions, live where and with whomever they choose, and receive the support they need to be successful, productive, and independent community members; and

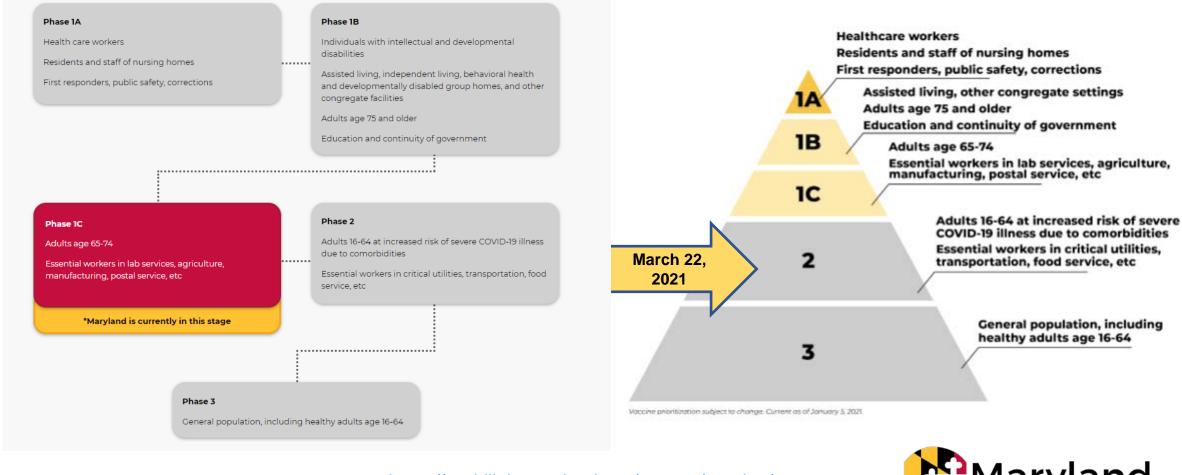


- Governor Larry Hogan this week announced that COVID-19 ICU levels in the State of Maryland have dropped below 200 for the first time since November 12
- Earlier this week, the Governor announced <u>steps to ease some COVID-19 mitigation measures</u>, while keeping in place masking and physical distancing protocols <u>Read the order</u>
- The Governor announced that the Western Maryland mass vaccination site in Hagerstown will open one week early on Thursday, March 25.
   This will give the state at least one mass vaccination site in each region



- LICENSING AND PERMITTING- The Governor's order authorizing the suspension of license and permitting expirations will sunset on June 30, 2021. Timeframe suspensions made before this order will remain in effect until June 30, though agencies may terminate them earlier. Agencies are explicitly authorized to conduct virtual hearings and meetings. Read the order
- This links provides you with the updated MDH directives







2A WHO: Marylanders age 60 and older WHEN: March 23

WHO: Marylanders age 16 and older with underlying medical conditions that increase the risk for severe COVID-19 illness WHEN: March 30

WHO: Marylanders age 55 and older, as well as essential workers in critical industries WHEN: April 13

WHO: All Marylanders age 16 and older

- Beginning on Tuesday, March 23, the state will make groups in Phase 2 eligible in waves based on risk factors, including age, essential occupations, and underlying health conditions, before opening it up to the general population in Phase 3
- All Marylanders 16 and older will be eligible for vaccines by Tuesday, April 27
- Individuals <u>currently eligible in Phase 1</u> will continue to be prioritized at the state's mass vaccination sites

Issued March 18, 2021. Timeline may accelerate depending upon vaccine supply.

WHEN: April 27

Pre-registration at mass vaccination sites is now open for Marylanders 60 and older at <u>covidvax.maryland.gov</u>.



- As you know The Arc Prince George's County was selected as a pilot to help more people with intellectual and/or developmental disabilities and their caregiver in Prince George's County access to the COVID vaccine in partnership with Giant Pharmacy starting February 24, 2021
- The Arc Prince George's County also extended their vaccine clinic to Montgomery County participants and their families



- The DDA continues to work with the Department's Public Health Services and Maryland Department of Disabilities to coordinate disability specific clinics as more vaccinations become available
- We still have people that only attend day programs, personal support, self direction, microboards, case managers, etc. that have not had the opportunity to sign up for a vaccine clinic or have had a difficult in getting an appointment





The DDA CMRO has 4 vaccine clinics set up within the next month. Nick Burton, CMRO Director is working with provider agencies to identify participants through the CCS agencies and communication

Scheduled Clinics	County
Itineris, Inc.	Baltimore City
Harford Center	Harford County
Abilities Network	Baltimore County
The League	Baltimore City



- The Baltimore City Health Department (BCHD) will be hosting a mass vaccination clinic for people with developmental disabilities later this month, we will share all the details and get the message as soon as possible with all the information
- To pre-register fill out the <u>I/DD vaccine interest form</u>. If you have any questions, please contact the Baltimore City Health Department at <u>covidvaccine@baltimorecity.gov</u> for further assistance



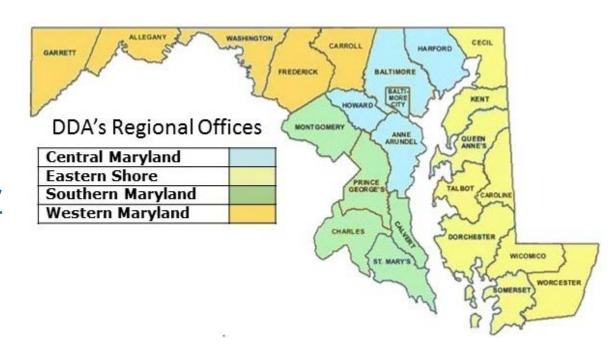
- It has come to our attention that there are some participants
  whose previously approved/utilized Personal Supports (PS) and
  Supported Living (SL) COVID-19 hours via Appendix K may not have been
  incorporated in the LTSSMaryland Person Centered Plan at the time
  those two services transitioned to LTSSMaryland based on the regional
  Electronic Visit Verification (EVV) transition
- Due to the extension of the COVID-19 federal state of emergency and DDA's approved <u>amendments to Appendix K</u>, previously approved/utilized additional Appendix K COVID-19 hours may need to be extended in LTSSMaryland beyond March 13, 2021

- To ensure a consistent and efficient approach to the above-mentioned concerns, the DDA has outlined a process to:
  - Capture missed previously authorized and utilized Appendix K COVID-19 hours in LTSSMaryland while also ensuring all providers are paid for the provision of those services during the transition from PCIS2 to LTSS
  - Extend Appendix K COVID-19 PS and SL hours beyond March 13, 2021 as applicable and needed
  - For additional information, please review the <u>DDA Appendix K # 12 -</u>
     COVID-19 Related Personal Supports and Supported Living Hours



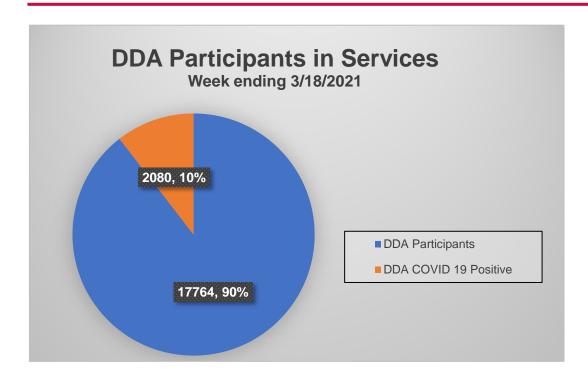
### **COVID-19 Regional Updates**

- SMRO- Onesta Duke onesta.duke@maryland.gov
- **ESRO** Kim Gscheidle <u>kimberly.gscheidle@maryland.gov</u>
- **CMRO** Nicholas Burton nicholas.burton@maryland.gov
- WMRO- Cathy Marshall cathy.marshall@maryland.gov





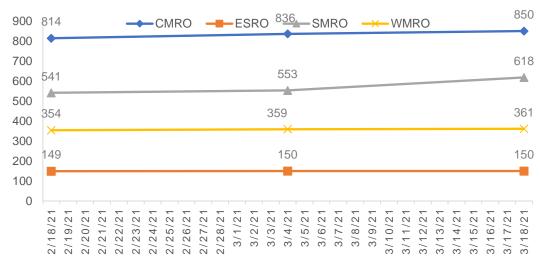
### **DDA Tracking**



There are 17,764 people supported in services by the DDA of which 10% (2,080) have tested positive for COVID-19.

### POSITIVE PARTICIPANTS BY REGION

**WEEK ENDING 3/18/2021** 

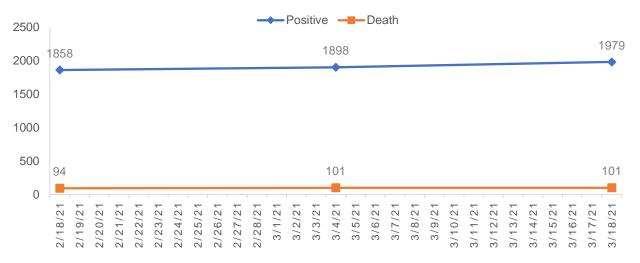


CMRO 850 Positive; Increase of 14 ESRO 150 Positive; Increase of 0 SMRO 618 Positive; Increase of 65 WMRO 361 Positive; Increase of 2

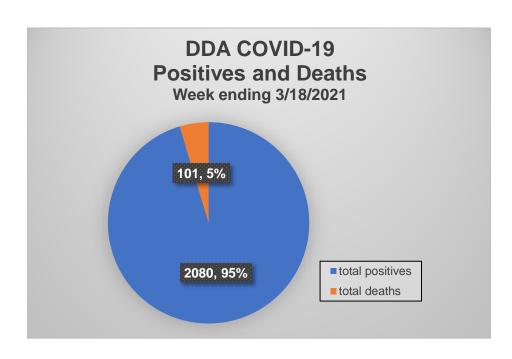


## **DDA Tracking**

### POSITIVE PARTICIPANTS STATEWIDE WEEK ENDING 03/18/2021



There have been 1,979 participants reported as having tested positive for COVID-19 of which there have been 101 deaths.



The 101 deaths represents approximately 5% of all (2,080) participants that tested positive.



## **DDA Tracking**

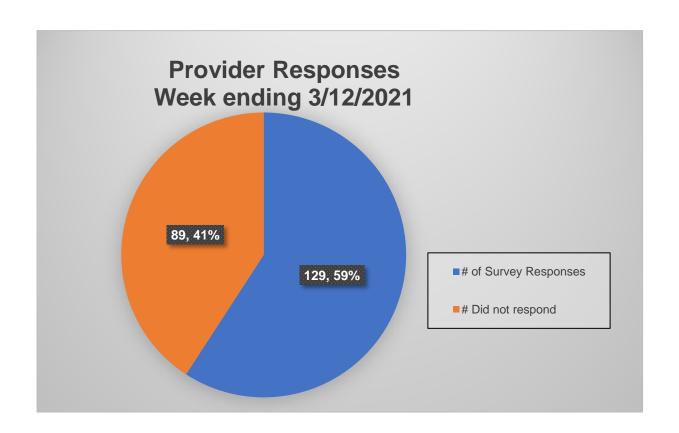
### PARTICIPANTS IN SELF-DIRECTION WEEK ENDING 03/18/2021



36 COVID-19 Positive0 Deaths



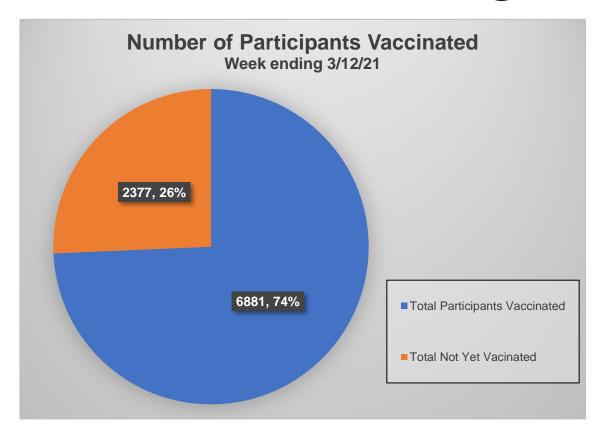
### **Vaccination Tracking**



Of the 218 surveys that were sent, 129 providers responded (59%), 89 (41%) did not



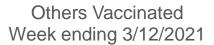
### **Vaccination Tracking**

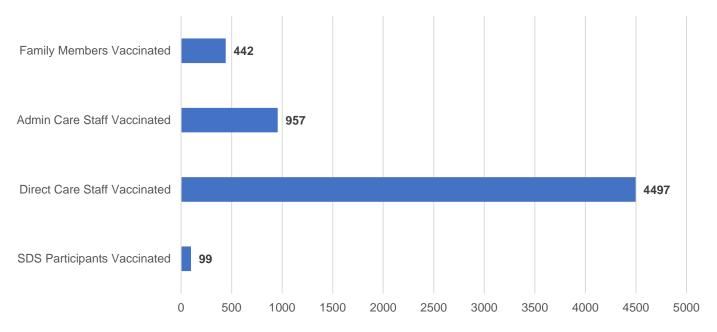


- Of the 9258 participants that the agencies reported intending to have vaccinated, 6881 (74%) have been vaccinated, 2377 (26%) have not received a vaccine
- There have been 87 vaccination clinics held by the provider agencies with 9 currently scheduled



### **Vaccination Tracking**





### Others vaccinated include:

- 442 Family Members
- 957 Administrative staff
- 4497 Direct Care Staff
- 99 Participants receive SDS





# Updates and Clarifications to Group Home COVID-19 Guidance

Kenneth A Feder, PhD, Epidemic Intelligence Service Officer for the Center for Disease Control and Prevention

**Maryland Department of Health** 

Infectious Disease Epidemiology and Outbreak Response Bureau

# Vaccination and Infection Control in Group Homes



### **Key Points**

- COVID-19 vaccine 

   safer for residents to resume some important activities
- Most important changes:
  - Expanded opportunities for visitation
  - No quarantine required for fully vaccinated staff following exposure
- Most important guidance not changing:
  - Continued use of face-coverings and personal protective equipment remains essential
  - Continued quarantine of homes following case of COVID-19 staff or residents

### **COVID-19 Vaccines in United States**

- Three emergency authorized COVID-19 vaccines in United States:
  - Pfizer/BioNTech: 2 dose series, 3 weeks apart
  - Moderna: 2 dose series, 4 weeks apart
  - Johnson & Johnson: 1 dose only
- All three vaccines:
  - Are effective at preventing hospitalization and death from COVID-19
  - Are effective at preventing symptoms of COVID-19
  - Are (most likely) effective at reducing transmission of COVID-19
- Fully vaccinated 
   two weeks have passed since receiving all required doses of a series

### How do we know vaccines are safe?

- COVID-19 vaccines are safe and effective. COVID-19 vaccines were evaluated in tens of thousands of participants in clinical trials. The vaccines met FDA's rigorous scientific standards for safety, effectiveness, and manufacturing quality needed to support emergency use authorization (EUA)
- Millions of people in the United States have received COVID-19 vaccines, and these vaccines will undergo the most intensive safety monitoring in U.S. history. This monitoring includes using both established and new safety monitoring systems to make sure that COVID-19 vaccines are safe

### Quarantine

### Current Guidance:

- Residents and staff must quarantine <u>and</u> be tested following exposure to COVID-19
- Residents must quarantine <u>and</u> be tested after visiting family or receiving non-COVID-19 medical care in a hospital

### • What's new:

- Fully vaccinated staff who are exposed to someone with COVID-19 do not need to quarantine, but should still be tested
- Fully vaccinated residents who visit family or receive medical care should be tested for COVID-19, but can leave quarantine as soon as they test negative

### What's the same:

- No change for residents and staff who are not fully vaccinated
- Group home residents must still quarantine if exposed to COVID-19

### Visiting family

### Current Guidance:

- Residents may visit family outside the home, so long as the family are not in isolation or quarantine
- Upon return to the group home, residents must be tested, and must quarantine two weeks

### • What's new:

• Fully vaccinated residents who visit family must be tested within 48 hours of returning to the group home or immediately after. If residents return before receiving the test result, they should remain in their rooms until they receive a negative test result

### What's the same:

No change for residents and staff who are not fully vaccinated

### Best practices during visitation

- Practice social distancing from anyone not in receiving household
- Wear a face covering
- Avoid crowds, poorly ventilated spaces, places where others do not wear face coverings

### **Receiving visitors**

### Current Guidance:

- Group homes may not have indoor visitors
- Group homes may have socially distant, outdoor visits

### • What's new:

- With precautions (next slide) indoor and outdoor visitation are permitted
- What's the same:
  - No visitation during COVID-19 outbreaks



### Receiving visitors: best practices

- Outdoor safer than indoor
- One resident having visitors at a time
- Cap the number of visitors in your home to make distancing easy
- Explain risks of visitation to visitors, residents
- Screen visitors for symptoms, recent COVID-19 exposure prior to arrival (same as staff)
- Visitors should wear face coverings
- Residents should wear face coverings if tolerated
- Safest approach: six feet of physical distance between resident and visitor
- Fully vaccinated residents may choose to have close contact (including touch) w/ visitor while wearing face covering

### Other guidelines not changing

- One case of COVID-19 in resident or staff of home → outbreak
  - All residents must quarantine
  - All residents and staff must be tested
  - All staff must stop serving other homes
- No change to PPE recommendations for staff (review forthcoming)
- No change to face covering recommendation for residents
- No change to advisory not to travel (but this is a recommendation – no quarantine is currently required in Maryland following travel)

### **Important References**

 https://www.cdc.gov/coronavirus/2019-ncov/hcp/infectioncontrol-after-vaccination.html





# PPE Donning and Doffing Refresher for DDA Staff

Infectious Disease Epidemiology and Outbreak Response Bureau

Maryland Department of Health

March 19, 2021

### Webinar Agenda

- Infection Control Basics
- What is Personal Protective Equipment (PPE)
- Why and when to use PPE
- How to safely use PPE
- Q&A



### **Hand Hygiene**

- Hand hygiene means either washing hands with soap and water
   OR using alcohol-based hand sanitizer.
- Unless hands are visibly soiled, hand sanitizer is preferred over soap and water in most healthcare situations. It is easier to access, and therefore easier to do!

https://www.cdc.gov/coronavirus/2019-ncov/hcp/hand-hygiene.html



## **Using Hand Sanitizer**

#### **RUB HANDS FOR HAND HYGIENE! WASH HANDS WHEN VISIBLY SOILED**

Duration of the entire procedure: 20-30 seconds



Apply a palmful of the product in a cupped hand, covering all surfaces;



Rub hands palm to palm;



Right palm over left dorsum with interlaced fingers and vice versa;



Palm to palm with fingers interlaced;



Backs of fingers to opposing palms with fingers interlocked;



Rotational rubbing of left thumb clasped in right palm and vice versa;



Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;



Once dry, your hands are safe.

## Soap and Water Hand Washing

Follow these five steps every time.

- 1. **Wet** your hands with clean, running water (warm or cold), turn off the tap, and apply soap.
- 2. Lather your hands by rubbing them together with the soap. Lather the backs of your hands, between your fingers, and under your nails.
- 3. Scrub your hands for at least 20 seconds.
- 4. Rinse your hands well under clean, running water.
- **5. Dry** your hands using a clean towel or air dry them.





### When to Wash Hands or use Hand Sanitizer During Visits

### **Use hand sanitizer:**

- Upon entering the facility
- Before and after direct contact with a resident or their environment
- Before and after adjusting or removing PPE

# Use soap and water hand washing:

- When hands are visibly soiled
- After using the restroom
- Before eating
- After caring for someone with diarrhea or vomiting



### **Cleaning & Disinfection**

 Wipe off eye protection each time it is removed and wipe off other supplies before leaving the facility or sooner if it is visibly soiled





## **Social Distancing**

- Stay at least 6 feet (about 2 arms' length) from other people, indoors and outdoors
- Remember that some people without symptoms may be able to spread COVID-19



# Masking

- Masking protects you and others
- Always wear a face covering within the facility and within 6 ft of others
- Do not remove your mask for pictures, to be easily heard, or to speak on the phone







Always cover your nose and mouth!



## **Stay Home When Sick!**

- If you have <u>symptoms of</u>
   <u>COVID-19</u> or have a sick
   family member at home,
   you should notify your
   supervisor and stay home
- Answer facility entry screening questions honestly and completely



### **Cover Coughs and Sneezes**



Cover your mouth and nose with a **tissue** when you sneeze or cough.



If you don't have a tissue, use your **elbow**.



Wash hands often, **especially** after coughing or sneezing.



# What is Personal Protective Equipment (PPE)

"Specialized clothing or equipment worn by an employee for protection against infectious materials" - OSHA





# WHY use PPE During COVID-19?





### WHEN to use PPE?







# What Personal Protective Equipment (PPE) Is used for COVID?







**Gloves** 



Gown



### WHEN to use PPE: Respiratory Protection

### **Procedure or Surgical Masks**



- a) Protect US from infections spread by respiratory droplets in sneezes & coughs
- b) Protect OTHERS from our respiratory droplets when we breathe, sneeze, or

### **Respirators**

Protect healthcare workers during special procedures and treatments where respiratory droplets could be converted to smaller particles



### WHEN to use PPE: Eye Protection

### **Face shields**



### **Goggles/Safety Glasses**



Prevent infectious droplets from entering eyes when close contact is expected



### WHEN to use PPE: Direct Contact



### Gowns

- Gowns prevent the spread of germs from direct contact by protecting clothes and exposed skin of direct caregivers
- Gowns are best used when splashes are expected, or prolonged direct care is required



### WHEN to use PPE: Gloves

### **Gloves**

Should ONLY be worn for direct contact with blood, body fluids or secretions





Gloves are NOT a replacement for good hand hygiene. They can also increase the risk of crosscontamination.

Wearing gloves and then touching personal objects or PPE can spread infection, not prevent it!



# **HOW** to Safely Use PPE



# **Correct Order for Putting on PPE**

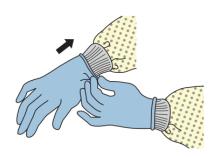


1. Mask

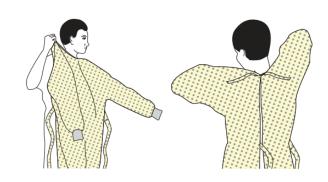
2. Goggles or Face Shield

3. Gown





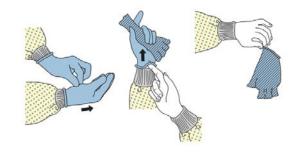




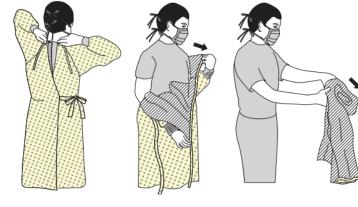


# **Correct Order for Removing PPE**

1. Gloves



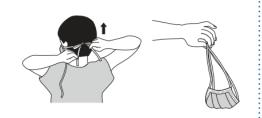
2. Gown



3. Eye protection



4. Mask







# **Well-fitting Mask**

https://www.cdc.gov/coronavirus/2019-ncov/your-health/effective-masks.html

Two important ways to make sure your mask works the best it can



Make sure your mask fits snugly against your face. Gaps can let air with respiratory droplets leak in and out around the edges of the mask



Pick a mask with layers to keep your respiratory droplets in and others' out. A mask with layers will stop more respiratory droplets getting inside your mask or escaping from your mask if you are sick.





• <a href="https://www.cdc.gov/coronavirus/2019-ncov/your-health/effective-masks.html">https://www.cdc.gov/coronavirus/2019-ncov/your-health/effective-masks.html</a>

Do

#### Choose a mask with a nose wire

- A nose wire is a metal strip along the top of the mask
- Nose wires prevent air from leaking out of the top of the mask.
- Bend the nose wire over your nose to fit close to your face.





https://www.cdc.gov/coronavirus/2019-ncov/your-health/effective-masks.html

#### Use a mask fitter or brace

• Use a mask fitter or brace over a disposable mask or a cloth mask to prevent air from leaking around the edges of the mask.





https://www.cdc.gov/coronavirus/2019-ncov/your-health/effective-masks.html

#### Check that it fits snugly over your nose, mouth, and chin

- Check for gaps by cupping your hands around the outside edges of the mask.
- Make sure no air is flowing from the area near your eyes or from the sides of the mask.
- If the mask has a good fit, you will feel warm air come through the front of the mask and may be able to see the mask material move in and out with each breath.





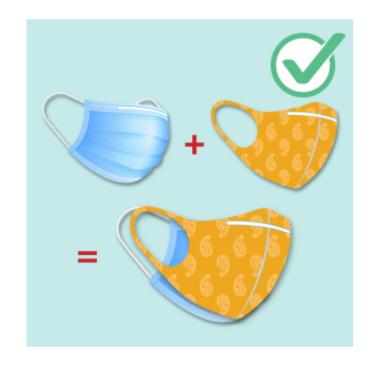
https://www.cdc.gov/coronavirus/2019-ncov/your-health/effective-masks.html

#### Add layers of material

2 ways to layer

- Use a cloth mask that has multiple layers of fabric.
- Wear a disposable mask underneath a cloth mask.
  - The cloth mask should push the edges of the disposable mask against your face.

Make sure you can see and breathe easily





https://www.cdc.gov/coronavirus/2019-ncov/your-health/effective-masks.html

#### Knot and tuck ear loops of a 3-ply mask

- Knot the ear loops of a 3-ply face mask where they join the edge of the mask
- Fold and tuck the unneeded material under the edges





https://www.cdc.gov/coronavirus/2019-ncov/your-health/effective-masks.html

#### Do NOT

#### Combine two disposable masks

 Disposable masks are not designed to fit tightly and wearing more than one will not improve fit.





• https://www.cdc.gov/coronavirus/2019-ncov/your-health/effective-masks.html

#### Do NOT

Combine a KN95 mask with any other mask.

• Only use one KN95 mask at a time.





### **Putting on Face Masks**

- Secure ties or elastic bands at middle of head and neck
- Fit flexible band to nose bridge
- Fit snug to face and below chin



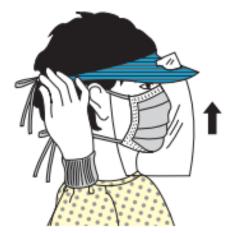




### **Putting on Goggles or Face Shield**

 Place over face and eye and adjust to fit



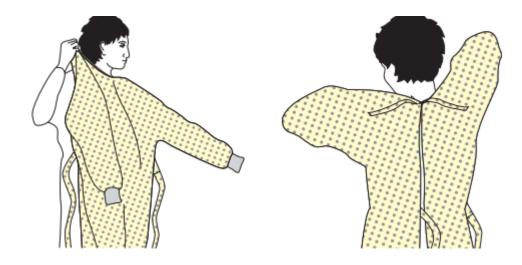






### **Putting on Gown**

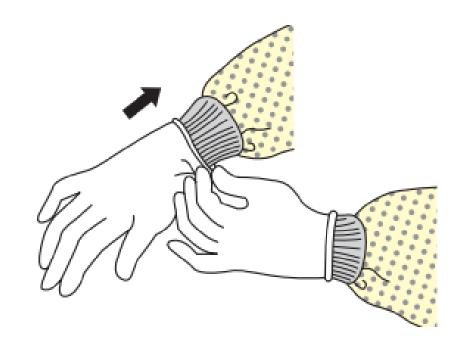
- Fully cover torso from neck to knees, arms to end of wrists, and wrap around the back
- Fasten behind the neck and waist





## **Putting on Gloves**

- Choose the best fit glove size
- Extend to cover wrist of isolation gown, if worn





# Avoid touching PPE!





### **Removing Gloves**

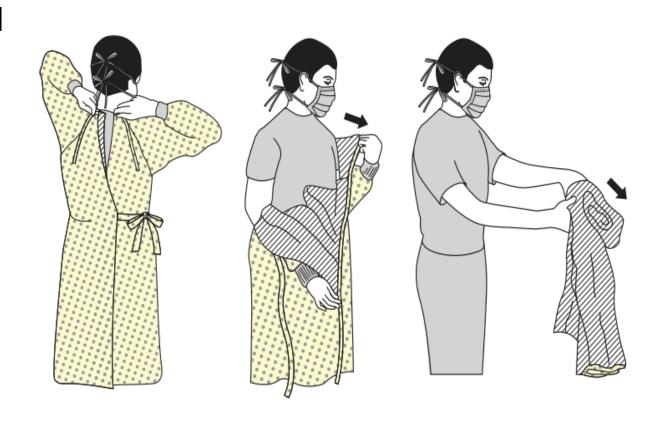






### **Removing Isolation Gowns**

- Wash hands after glove removal then unfasten gown ties
- Carefully pull gown away from neck and shoulders, touching only the inside of the gown
- Slowly turn gown inside out while leaning slightly forward to remove
- Holding it away from your body, fold or roll gown into a small bundle and discard in bin or trash container





### Removing Goggles or Face Shield



 Do not touch front of goggles or face shield

 Grasp strap or head piece and lift up & away from face



### Removing a Mask

- Do not touch the front of the mask.
   Wash your hands if you touch it accidentally
- If your mask has ties, until the bottom set first, then the top. Use the top set of ties to remove the mask and discard in the trash
- If your mask has ear loops, use the elastic to safely remove it and discard in the trash
- Please don't litter!







### **Key Take-Aways**

- Wearing a well-fitting mask and eye protection, staying home when you are sick, keeping your distance, and washing your hands are the BEST defense against spreading COVID-19
- Remove soiled PPE safely and wash your hands when you are done!





### Questions



Please join us for our 2021 Webinar Series:

- April 2, 16, and 30 at 1pm
- May 14 and 28 at 1pm

