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 recognize 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
Deputy Secretary’s Update

• 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 steps to ease some COVID-19 mitigation measures, while keeping in place masking and physical distancing protocols Read the order

• 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
Deputy Secretary’s Update

• **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](#).
Deputy Secretary’s Update

Phase 1A
Health care workers
Residents and staff of nursing homes
First responders, public safety, corrections

Phase 1B
Individuals with intellectual and developmental disabilities
Assisted living, independent living, behavioral health and developmentally disabled group homes, and other congregate facilities
Adults age 75 and older
Education and continuity of government

Phase 1C
Adults age 65-74
Essential workers in lab services, agriculture, manufacturing, postal service, etc

Phase 2
Adults 16-64 at increased risk of severe COVID-19 illness due to comorbidities
Essential workers in critical utilities, transportation, food service, etc

Phase 3
General population, including healthy adults age 16-64

*Maryland is currently in this stage

March 22, 2021

https://covidlink.maryland.gov/content/vaccine/
Deputy Secretary’s Update

- 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 currently eligible in Phase 1 will continue to be prioritized at the state’s mass vaccination sites.

Pre-registration at mass vaccination sites is now open for Marylanders 60 and older at covidvax.maryland.gov.
Deputy Secretary’s Update

- 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
Deputy Secretary’s Update

• 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
Deputy Secretary’s Update

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.

<table>
<thead>
<tr>
<th>Scheduled Clinics</th>
<th>County</th>
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<tbody>
<tr>
<td>Itineris, Inc.</td>
<td>Baltimore City</td>
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<td>Harford Center</td>
<td>Harford County</td>
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<td>Abilities Network</td>
<td>Baltimore County</td>
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<td>The League</td>
<td>Baltimore City</td>
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Deputy Secretary’s Update

• 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 I/DD vaccine interest form. If you have any questions, please contact the Baltimore City Health Department at covidvaccine@baltimorecity.gov for further assistance
Deputy Secretary’s Update

• 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 amendments to Appendix K, previously approved/utilized additional Appendix K COVID-19 hours may need to be extended in LTSSMaryland beyond March 13, 2021.
Deputy Secretary’s Update

• 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 DDA Appendix K # 12 - COVID-19 Related Personal Supports and Supported Living Hours
COVID-19 Regional Updates

• **SMRO**- Onesta Duke
  onesta.duke@maryland.gov

• **ESRO**- Kim Gscheidle
  kimberly.gscheidle@maryland.gov

• **CMRO**- Nicholas Burton
  nicholas.burton@maryland.gov

• **WMRO**- Cathy Marshall
  cathy.marshall@maryland.gov
There are 17,764 people supported in services by the DDA of which 10% (2,080) have tested positive for COVID-19.

CMRO 850 Positive; Increase of 14
ESRO 150 Positive; Increase of 0
SMRO 618 Positive; Increase of 65
WMRO 361 Positive; Increase of 2
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.
36 COVID-19 Positive
0  Deaths
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.
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 **and** be tested following exposure to COVID-19
  • Residents must quarantine **and** 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

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!

Using Hand Sanitizer

1a. Apply a palmful of the product in a cupped hand, covering all surfaces;

1b. Rub hands palm to palm;

2. Rub hands palm to palm;

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

4. Palm to palm with fingers interlaced;

5. Backs of fingers to opposing palms with fingers interlocked;

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

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

8. Once dry, your hands are safe.

Duration of the entire procedure: 20-30 seconds

https://www.who.int/gpsc/5may/Hand_Hygiene_Why_How_and_When_Brochure.pdf
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 symptoms of COVID-19 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?

- Mask with eye protection
- 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 cough

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 cross-contamination.

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
4. Gloves
Correct Order for Removing PPE

1. Gloves
2. Gown
3. Eye protection
4. Mask
Well-fitting Mask


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

1. 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.

2. 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.
Choose a well-fitting mask


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.
Choose a well-fitting mask


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.
Choose a well-fitting mask


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.
Choose a well-fitting mask


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
Choose a well-fitting mask


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
• For video instructions, see: [https://youtu.be/UANi8Cc71A0](https://youtu.be/UANi8Cc71A0) .
Choose a well-fitting mask


Do NOT

Combine two disposable masks
- Disposable masks are not designed to fit tightly and wearing more than one will not improve fit.
Choose a well-fitting mask


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

1. Pinch and hold the outside of the glove near the wrist area.

2. Peel downwards, away from the wrist, turning the glove inside-out.

3. Pull the glove away until it is removed from the hand, holding the inside-out glove with the gloved hand.

4. With your un-gloved hand, slide your finger(s) under the wrist of the remaining glove. Do not touch the outer surface of the glove.

5. Peel downwards, away from the wrist, turning the glove inside-out.

6. Continue to pull the glove down and over the inside-out glove being held in your gloved hand.

Hand Hygiene!
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, untie 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