

Transcript from June 6, 2020 DDDS Family Zoom Town Hall regarding COVID-19

Cory Nourie: Alright, so, good morning, everyone. I'm Cory Nourie, the Director of Community Services for DDDS. And then we have my esteemed colleagues with us this morning. From DDDS we have Jennifer Tozer the Manager of Family Engagement and then from the Columbus organization, the Executive Director for State of Delaware, Shenika Kirby. Let me give some housekeeping things. So first off, if you have a question that you have not had a chance to email in advance, we ask that you type it into the Q & A box and we can be monitoring that and trying to respond to those questions as time permits, and as the conversation goes on.

One of the things I just wanted to acknowledge is one we're recording this session, so that way it will be able to be shared on Facebook and on our website. We will be putting together the transcript of the conversation. And then also the questions and answers that come out. We will be sending that out as well. So that way we have lots of different ways for people to get access to the information that's shared this morning.

Just as an overall statement- we're not going to address any individual issues. If you sent an email about something that's personal, related to your loved one or your child, we are trying to work with you offline about that, but we're going to try to answer some of the questions in kind of a more general format. That's obviously because of HIPAA protected health information and that kind of stuff. We're going to try to make sure that we have a chance to address things very broadly. But again, offline if you have reached out to us, we have people who either have already reached out to you are working on it right now to address the other questions and more specific cases.

So this morning our purpose for this webinar is to kind of give a state of the state of what's going on right now regarding DDDS services in the context of COVID-19. So obviously, you know, now we're 14 weeks into this pandemic in Delaware and we've had a lot of opportunities to learn along the way. And as you were all well aware, hopefully from the communications that have gone out and then both internally from DDDS but also from the Columbus Organization and through the providers that your loved ones are supported by- you know there's been a lot of changes and you know a lot of, I keep using the term pivoting, because we think we're going one direction with information and then we get something new from the Governor or from public health that is kind of made us have this change direction or course of action.

So today we're hoping to just kind of give you a current update of where we are and what we know about for the future. I wanted to first start out by saying congratulations to everyone who is graduating. I know this past week and this in this coming week, there's a lot of graduations being held, and obviously you know, this is a monumental occasion for a lot of people. And granted, it's very unusual and we recognize that it's not ever been done this way before. It doesn't take away any of the pride that you should feel for your loved one, and your loved one's view of themselves and then all the hard work that went into getting to this point in life. So I just want to take a moment to say congratulations and let you know that you know we're proud of you and all the work and the tireless nights and you know all the years of effort. So just want to start by acknowledging that. I'm going to give an overview of kind of where DDDS is right now from a service delivery perspective and then we're just going to talk about some of the opportunities we have going on to kind of help with education and keeping people connected and then Shenika is going to talk about how things are going from the Columbus Organization and again from the questions that were sent in. We're going to try to kind of answer those questions in the context of the conversation.

One of the first things I want to do is to talk about DDDS services, we are supporting almost 5000 people in the state of Delaware with intellectual developmental disabilities. So it's a very broad diverse population. And so I'm going to kind of gear my comments to one situation for people who were living in what we call provider manage setting. And then the other conversations for people who are living at home, staying at home with their families or independently and then you'll hear about the day services kind of interspersed between there.

Amongst the service population who is living in a provider managed setting, we still do have active cases of popping up on a not everyday basis now but you know still fairly regularly. So we're closely monitoring that. And one of the things that happened on June 1 when the governor's started phase one in the state of Delaware, one of the changes that I made from the DDDS side of things was to start to allow the visitor restrictions that were in place for people living provided manage settings to start to be released a little bit. And so we're in phase one of that visitor restriction access happening, which means that if your loved one lives in a provider managed setting, you should be working with that provider to set up an opportunity for visit, which I know it's been a

long time coming, but outside in an outside open air environment. And I've had conversations with several of families and then also with the providers of the past couple weeks about planning for this. And so I know I think this is obviously the first weekend since June 1 effective and so I know a lot of visits are planned for this weekend. So I'm really hoping that everyone has a great opportunity to you know get that hug in and then try to practice social distancing as much as possible and a chance to reconnect because I know it's been really difficult. So that's phase one of where we are right now with the visitor access, because we're still having active cases of COVID-19 in the DDDS population as well as in the general community. We are going to keep that phase one, in effect for a little while to then be able to look at the data about the numbers that come in. My hope is that everybody has been able to practice the social distancing, the hand hygiene, the face mask wearing all those things happening which will allow us to say, "look in this controlled situation, the numbers have stayed relatively stable and so we can then start to move into this second phase of visitor access" which would hopefully eventually be a time where, you know, a loved one can maybe come home for a visit or go someplace else, as opposed to having to be an outside interaction.

I'm still very, very strongly advocating and my intention, just to be very clear, is I do not expect to have anybody be going into provider managed settings for the time being, unless that person is essential; is performing an essential function to the individuals who live in a provider managed setting. Obviously, they're going to be able to come back in. Some of them are still going to work through supported employment- that's been an ongoing thing during COVID. The direct support staff obviously are going in every day and providing the direct care and then any other kind of essential service- if somebody has private duty nursing, nurses are still coming and going. But for any other function-that's the support coordinators, it's a behavior analyst- anybody who is not performing an essential direct service function that needs to be in person. They're going to continue to do that job remotely for the time being, again, with the goal being we're trying to be very mindful about the access into the homes and being able to control kind of the exposure and spread and again, we're monitoring all the numbers and that kind of stuff. And as we get new information and new data, I'll be able to update that. You know, we're not doing visits or tours for new placements, or any of that kind of stuff right now because, again, we still have active cases of COVID-19 and we also are trying to limit the exposure for the individuals who live in provider managed settings.

For those of you have a loved one living at home with you the Columbus Organization is following that same order from DDDS so therefore community navigators are still going to continue to be operating from a remote standpoint, and virtually with connecting with you and your loved one via video conferencing the telephone via emails and all those kinds of things. Again, my goal is to try to reduce the number of people exposed unnecessarily.

That's both for the service recipient's sake, but also for family's sake and you know, I think it makes sense to have people not have unnecessary accesses, so to speak. So that is going to continue for the time being based on the Governor's orders with phase two, which from his perspective goes into effect on June 15 which honestly from me, made me very nervous because we don't have the data yet about how the impact from phase one has happened.

But for phase two, we still have vulnerable population sheltering in place, which again, we've had conversations about you know who's vulnerable who's not vulnerable. We're still having the expectation during phase two that the larger especially congregate day services settings are going to continue to be suspended right now. During phase two there's all kinds of restrictions that we have to consider in the reopening of day services. So that means we have to pay attention to the square footage of the location. And so we're working with providers right now to figure out their actual space they have and it's not really necessarily about the fire marshals capacity as far as, you know, being at 50% or 30% it's about being able to maintain the social distance between program participant, in conjunction with the hand hygiene and the face masks and having access to transportation and all these kinds of things. So we are working right now and trying to put together the plan for what the eventual reopening will look like, but it has not been solidified at all yet and there's still so many moving pieces to it that my intention, just to be very clear with everyone is my expectation is that we will still have the larger day services suspended for quite some time.

For providers who have smaller number of people ,if they have a smaller what we call a roster of participants if they have enough space, then we have the flexibility from the appendix K amendment, which is through the waiver to have those providers potentially modify services, some to be able to offer some services. We're not

there yet. We have some providers who have reached out to say they're interested in doing that. If we start to have that happen there are considerations, both for the DSPs who work in that location, but also for the individuals and where they're coming from. So if we have you know a provider who has a mixture of individuals coming from provider manage settings and people who are coming from home, I have to weigh the health consequences so to speak of somebody coming and going from the provider manage setting and bringing the germs back where, again, if you're out you know, you're going to the grocery store, you have control over who how close you are to people and who you're exposed to and that kind of stuff. If we have people congregating together, then it's a different consideration. So these are all things are wading through right now, but as it stands, the shelter in place order is still going to continue for days services through phase two. Thank you to those of you who completed the family survey that went out a couple weeks ago, it is still open. I was trying to get the good data, but we still have it open in case people want to answer those questions. And that's available the link is available online on our Facebook page and also in the communication that went out to families. It's a survey monkey. The average time it takes to fill it out, less than three minutes. It says we've got about 290 responses so far. And it's really helping me understand the kind of the considerations that families are weighing with thinking about going back to day services. One of the things I want to highlight this morning, and that'll stop talking is there's been a lot of concern from families who say I'm worried that if my loved one doesn't go back to the program, they're going to lose their spot. And so I want to be really clear about this. Okay, so we have through the lifespan waiver, The Center for Medicaid Services CMS, we had to apply for this thing called the appendix K amendment, which is basically permission to modify services as they typically have been offered. Usually with Medicaid Services, you can't get paid for something that's not provided. Providers can't get paid for something unless they deliver the service-in a kind of unprecedented situation as COVID-19 has been, CMS has actually allowed providers to be able to get what's called retention payments/retainer payments and what that is is basically is holding your spot for that provider. So that way there's they're still getting paid a percentage of their rate. They're still getting paid a percentage of the rate, but your loved ones not going to services because either you're concerned about the exposure, they're vulnerable, you want to wait for a vaccine, whatever the reason may be so. If your concern is, "oh, I feel like I might just send them back and I'm not really ready to do that," I want you to feel confident that they have a spot there, we have the appendix K amendment for approval through January of 2021. So my hope, right, is that by that point, everything is back to the new normal we're kind of in this routine of things. But if something if you're concerned and there's an uptick in COVID-19 exposure again in the fall as they're predicting then, you know, that's another thing to consider. So if you're hesitant about, "oh, I don't know if I wanted to go back to these services," know that their spot is preserved.

Okay, so I'm going to stop talking and we're headed over to Jen and she's going to talk about some of the issues around transition because I know it's a hot topic and some of the ways we're trying to keep people connected. So I'm going to stop, Jen.

Jennifer.Tozer: Hi, good morning. So transition has been on my mind. I love transition such an exciting time for our folks and having to experience it during coven is just something that we're all navigating as we learn each day. So we are planning another event, similar to this, where we are inviting many of our day habitation providers and day service providers that provide services through the lifespan waiver to talk about what it is that they do. One of the functions that the division has done to help families with informed choices always have these provider fairs, where you come in person, you get to ask your questions. And because of COVID, we have to do something different. So that date will be coming out very soon, I'm looking at the second week of July. So after the first after the holidays over that information will be coming soon Shenika, Dan and myself, Dan Gudice from the Columbus organization are we're hosting a family meeting on July 16 and the topic is going to be charting the life course these are these are tools in that we use in our person centered planning, there is a framework to supporting families that I'm very excited to share and talk with you all about. And really what I want to be able to do is take advantage of what COVID has done, which is created channels of communication with the division and the family so that we can hear your concerns know how we're doing and then be able to continue to address things as they come. There was a question about medical appointments: So for a while, hospitals and doctors were only allowing individuals to come with one person and that person was typically the house staff so I would encourage individuals to reach out to their, their house staffs and if you're able to have conversations about whether or not you could safely attend or if it's even being permitted

depending on where the appointment is. You should have those conversations because there's going to be factors that might be specific to that setting. If somebody in the house might be vulnerable and it is increasing exposure. So I just want to encourage everyone to make most of the announcements through our Facebook page. We also share things through the Columbus organization as well as support coordinators. So knowing who you can reach out to to get the information that you need. Please continue to do that and you're always welcome to email me and I will make sure that I put that in the chat box and thank you very much for joining us this morning.

Shenika Kirby: Okay. So hi, I'm Shenika Kirby. I'm the Executive state director for the Columbus organization. Good morning, everyone. So I want to tail off of what Jen was speaking about as far as transition is concerned. Normally our individuals will be graduating and they will be selecting their day service provider and due to the day service providers being suspended, they are unable to do so at this time. So, now is the time to begin working on that lifespan waiver for those individuals so they can access those services and I wanted to speak to what I'm a new process that we put into place.

We have hired five waivers processors, we call them waiver admin processors. We have heard your voices and we understand and with the Columbus organization in the community navigators that it was very difficult navigating that lifespan waiver and providing targeted case management. We went to the state. We all discussed it and we decided that we did need to have individuals who were specialized and understood the waiver and the application process. They are going to be reaching out to those that are in transition. If you do have an individual who's in transition in your community navigator, and you have not had that conversation, please reach out to them. Jennifer Tozer does on post the contact list and I am always available as well, to make sure that you are added to that list. So we can begin that lifespan waiver. The processor will reach out to you once they know that you're one of those transitions students and we have been processing waivers between 15 and 30 days from the date of the initial contact so they will contact you. They will schedule a meeting. At that meeting, they will go over all of the services covered under the lifespan waiver, they will let you know what documents you need to provide. Once you provide all of those documents, it will be completed submitted to DDDS go to the DMMA, and we've been getting approvals between one to 15 days from the time that it is processed so a 15 to 30 day turnaround. We can begin scheduling virtual tours with a service program. So you can start selecting those programs. And then when we're post COVID and we're past this, they're able to just move towards going to that day service program. So we definitely want to make sure that the communication is open. We do not want to wait to the last minute. We want to help you navigate those services.

As well as our community navigators are working every day Monday through Friday eight to five. They are available, the supervisors are available. We want to make sure that you have access to those respite services personal care services, if you're covered under the lifespan waiver, as well as helping you navigate the resources that are available to you out there right now, so please feel free to reach out to your community navigator, the supervisors or myself directly. We are available to you.

Cory Nourie: Great, thanks Shenika. And I think that that substantial change from the Columbus organization in hiring those five processors has made tremendous gains for us in having people get access to services into the waiver. So we heard the feedback is what I acknowledge that, again, we heard the feedback from families and the frustration and Columbus has these five processes in place now and the turnaround time has been very, very, very helpful and positive for families. And so that's great.

I just want to address for a second. So obviously, mentioning with transition you know, you can't go and actually tour day programs right now. And the day services, though, are accepting new referrals and so I don't have a crystal ball, obviously. And so it's difficult to try to say when the possibility to go into visit a program will be and or once you select somebody who when your loved one will have a chance to actually begin resuming or begun attending services through them. But it's all happening in the context of the COVID situation. And so my hope is that as we get more information will be able to share it with you and be able to address it proactively so people have a chance to you know, the supports and services they need.

So one of the questions just came through was regarding the accessibility for sign language interpreting during these sessions. So thank you for that comment. One of the things that we're trying to do is so we are offering in the transcript afterwards and but that's something that we can try to add into the mix for the next conversation we've had some difficulty with technology. We just did a webinar on deaf culture webinar for direct support

professionals and providers and lots of technology glitches. But that's doesn't make it okay it's just the reality. So we can work on trying to have that for the next time as well. So thanks for that.

Shenika Kirby: And I will let you know that that is on Cory's radar.

Cory Nourie: Yes, I've reached out about it. It's a very important topic right now so I appreciate people thinking about it. So the other things I want to talk about our issues around transportation. So this is something that, again, there are so many complex factors and looking at the way services are delivered for everybody, whether they've been a provider managed setting or living at home with your family. Transportation, if you think about paratransit services, right, people are kind of really contained together in a very close situation so one of the questions on that family survey was asking about if your loved one lives at home with you-do they have a way for private transportation to get to or from their program. One other question I've made to providers who again for people in provider manage settings. So that's in residential debilitation services I've asked that when services resume that the provider become responsible for providing that transportation to those days services.

And that's so that way we can reduce the number of people who need to use paratransit to keep the paratransit availability open to people who don't have any other way to get to her from the program. Paratransit right now, a couple weeks ago they were down to only allowing two people per bus at a time and now they're up to four [THIS HAS NOT TAKEN EFFECT YET; PARATRANSIT IS ALLOWING THREE PEOPLE TOGETHER EFFECTIVE JUNE 15th]. I think based on the social distancing order I don't expect there to be more than four people probably on a para transit bus at one time. So that greatly obviously reduces the number of people who can get to and from appointments and, you know, services and going to the grocery store and all the things that people you use paratransit to utilize their community. But I just want to make it clear that the transportation is a really big issue. And so if anyone has any creative ideas or suggestions we're all open to it.

There's been conversations and questions about having, you know, Uber or Lyft or something like that, again, from a social distancing perspective, it's a little bit tricky. And we want to make sure that people are being supported and the way they need to be supported.

The other thing I want to just highlight is if your loved one is at home with you right now- provider manage settings are already working on this, but if they're at home with you right now- I would really encourage you to work on trying to have them get comfortable as much as possible with the idea of wearing a face mask. I know for some people, logistically, it is never going to happen, that there are concerns from a safety or medical perspective. I understand that. But the face mask thing, I don't think is going away and it's one of the ways that we, again, if the general population are wearing face masks as much as possible, we can help reduce the exposure and the rest of other people. So we have some people who have been working with her day services provider remotely on using kind of behavior techniques to help support them wearing the facemask but again if you're at home. I really encourage you to try to work on it, even if it's, you know, for 30 seconds at a time. I will take that small victory and say, "woohoo." Let's work on that. The goal is that people try to get used to it as much as possible.

One of the challenges and trying to reopen days services, especially from a larger setting perspective is the concern about people, you know, not being able to maintain social distancing because it's hard to understand the concept and then actually be able to, you know, figure out how far six feet is from each other. But also to have, you know, people wear the facemask as much as possible to reduce this spread. So I would just encourage families if you haven't been working on it to try to do that.

Jennifer Tozer: Hi. So a question came in asking for some definition around Transition. Transition actually starts at the age of 12 in Delaware, but what I was specifically referring to is this very important functions that happened in that final year of education, which would include identifying and applying for any of the adult services that the individual might need so that we can have a seamless as seamless as possible exit from school into work or program or some other type of community setting that works for that individual. And the event that we're planning in July is going to give families and individual an opportunity to ask some very important and relevant questions around the services that the agencies provide their model, you know, supported employment is supported employment but agencies have different models and we want to help families build those connections and relationships and as a precursor to that.

The session that we're having in June is to help families learn how to structure those monthly calls with their targeted case management so they are getting something out of that service. So where we hear you. We are getting feedback that not all parents are getting the letters in a timely manner and something that I wanted to continue to speak about just like Columbus has made some changes within their organization, DDDS and Columbus continue to meet weekly and DDDS is also on our end looking at those internal processes to help closed loop specifically around respite so that we can get things in place quickly. A lot of these services are new. So there has been some growing pains, but we are committed to working through them. And that feedback is vital. So in response to the Columbus organization not sending out the letters -we haven't always given them any notice, so it will just be here. Let's send it out. And if a community navigator has a full schedule for a day or two or maybe they're off there could be a delay, which is why when we have these sessions we want to continue to reinforce all of the the communication channels.

And Shenika and I've spoken about different strategies on how we can make sure that communication is getting out info in a reliable way so that you know it's coming. So thank you for that.

Shenika Kirby: In reference to the DART paratransit applications, your community navigator can assist you with that application. So if you're interested in DART para transit in your individual is not certified please reach out to your community navigator if you are under the Columbus organization. So we can assist you with that in reference to the timeline for applying for that lifespan waiver for that for the individual that is graduating in July or August we definitely want to start that waiver in January.

Cory Nourie: And then Shenika, a question about if somebody had applied for the waiver in the past, and it looks like maybe they got their part of the backlog, would they be given priority to have somebody the processor work with them.

Shenika Kirby: Absolutely, yes. I actually responded to them private

Cory Nourie: Okay. So just want to make it generically.

And then we have another question that came in about somebody where their loved one live in a provider manage setting and they are allowing visits for some other roommates. The housemates and being uncomfortable with that. So this is again part of the complications in trying to weigh all the factors from the health and safety perspective. So if there is a situation where somebody is having outside visitors, it could be for a variety of factors, it could be for somebody receiving essential services that you know that you don't know about present, potentially, but also you know if anybody is coming back into the home. So sometimes we've had, I've had people reach out to me saying, you know, my loved one has a housemate who's been going to work. They have supported employment, they've been essential the entire time during COVID some of those individuals, which is awesome had been working overtime during COVID because they were such an essential functions. So anybody who is coming, leaving the home and then coming back into the home the providers are being very stringent about making sure the hand hygiene protocols in place. The same way that when a direct support professional comes into the home each day to start working. They're following the hand hygiene and making sure that you know the they're washing their hands that they're wearing their mask and that kind of stuff. So for concerns around safety for housemates who are coming and going, when people are coming back into the home the providers again are encouraging and practicing the hand hygiene. This is where again as we start to have the visits, you know, restrictions lifted a little bit. We're going to be really really monitoring the numbers to see whether or not we need to slow our roll and just stop it and say we need to go back to it or if we can continue. So if you have specific questions you can reach out to your support coordinator and we can have a conversation about it. But I feel like I have to give an acknowledgement to the providers to in a very difficult situation have done a great job of trying to keep the health and safety of everybody at the forefront and then also being able to help people still try to live their best lives and make the best of the situation that has been you know, in many other states totally unmanageable. And yet in Delaware, I think we've really done a tremendous job. So I want to give acknowledgement to the providers and to the families for your understanding during these difficult times, you know, the restrictions and that sort of stuff. We really are all in it together. I tried to usually sign my letters that way. But really, you know, everybody has been coming in recognizing that this is really difficult and I feel I appreciate the patience everybody has demonstrated and will continue to demonstrate as we kind of work through this together.

So another question about paratransit, their son takes paratransit as a central worker will that change, it should not so I hope that you were notified that paratransit services started they went to a totally contactless payment

system. So if somebody has been using paratransit tickets and now they won't accept the tickets, because everything is contactless paratransit I had communication with them and they did say that, you know, they'll bill you and that billing can be that you can just mail your paratransit ticket in as your payment for that that service. Something paratransit also weighing the issues about vulnerability and social distancing and that kind of stuff. But I think your situation, probably your, your son's okay in his current situation is being an essential employee.

Right. So we're actually right at 1031 now, which maybe is actually 1030 for some people, depending on what you're watching this so we're going to wrap up here. Jen Tozer has been lovely and putting her contact information into the chat box there. So Jennifer Tozer and Shenika has shared her information on the screen there for all of the Columbus organizations community navigators and supervisors and as they said earlier, everyone is still working. So everyone from DDDS is still working, everyone from the Columbus organization is still working. We are still doing our jobs from different settings.

If you should have a gap in care as far as getting access to information or responsiveness and if there is any to any challenges to that, please reach out to Jen or Shenika so we can make sure it gets addressed.

Again, I had been really impressed by how well everybody has handled this and I hope that everyone continues to be well and you know we'll look to schedule another one of these webinars, maybe in a month after we kind of have better data about how things are going from COVID and what phase one looks like in the general community. And then as phase two opens in the state, the numbers because that's that's the numbers are going to be what helps me decide whether we can start to say, yes, we can start to have more access to services or it's not safe yet.

So thank you all for your time this morning. I hope it was valuable to you. Jen and Shenika, thanks so much obviously for participating as well. And I hope everyone continues to be well again, we'll put the transcript out was that sure the video and hopefully, you know, any questions, you just reach out to us and we can get back to you. Alright, bye everyone. Take care.

Thank you.

Jennifer.Tozer: Bye.