

Action Request Transmittal Aging and People with Disabilities



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Number: APD-AR-21-035

Issue date: 6/28/2021

Topic: Other

Valid Through: 8/24/2021

Subject: Case Management, Adult Protective Services, Central Office, and Licensing resumption of in-person activities.

Applies to (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> All DHS employees | <input type="checkbox"/> County Mental Health Directors |
| <input checked="" type="checkbox"/> Area Agencies on Aging: Type A and B | <input type="checkbox"/> Health Services |
| <input checked="" type="checkbox"/> Aging and People with Disabilities | <input type="checkbox"/> Office of Developmental Disabilities Services (ODDS) |
| <input type="checkbox"/> Self Sufficiency Programs | <input type="checkbox"/> ODDS Children's Intensive In Home Services |
| <input type="checkbox"/> County DD program managers | <input type="checkbox"/> Stabilization and Crisis Unit (SACU) |
| <input type="checkbox"/> Support Service Brokerage Directors | <input type="checkbox"/> Other (<i>please specify</i>): |
| <input type="checkbox"/> ODDS Children's Residential Services | |
| <input type="checkbox"/> Child Welfare Programs | |

Action required:

Beginning July 6th, 2021 APD/AAA case management (CM), diversion and transition (DT) coordination, Adult Protective Services (APS) interviews and investigations, licensing actions (including those in Adult Foster Homes (AFH)), Compliance Specialist investigations, and central office (CO) activities such as specialized contract administration shall begin to resume in-person activities with Oregonians. Case Aides and other local office staff will also resume in person involvement with consumers when required by the duties assigned. We recognize there will be some extenuating circumstances and District/Program Managers will have flexibility to deviate from in person on a case by case basis, with the intent of fully being back to in-person activities by September 1, 2021. The following activities related to staff engagement with consumers should begin to be in place by July 6, 2021:

- APD/AAA local offices (LO) and central office units who perform direct services for providers and consumers should resume these services beginning on July 6, 2021. Staff should work with their direct supervisors or managers to implement the information outlined in this transmittal. Units should make plans to assist with concerns, coordinate supports and access to equipment, provide transportation

options for remote workers, and provide training and a transition plan for areas where on a case by case basis they cannot begin doing in person visits. Supervisors should be prepared to address concerns when staff are not comfortable doing in-person assessments for their own health and safety reasons. Supervisors should work with appropriate HR partners and staff to determine how they can comply with the expectations and policy of this transmittal when direct in-person contact is a requirement.

- Local Office Staff may ask questions to screen for COVID-19 symptoms when setting up an appointment with an Oregonian not in a long-term care facility. The purpose of the screening is to ensure you all understand if there are any risks to an in-person visit and can either adjust timing of the visit or offer alternative visitation opportunities allowable under this transmittal. Screening questions include:
 - In the last 14 days has anyone in the household had COVID-19 or been in direct contact with someone who has been diagnosed with COVID-19? Is anyone in the home currently experiencing fever or chills, or any other potentially related COVID-19 symptoms? Have you or anyone in your immediate household traveled outside of the state or internationally in the last 14 days? Local Office Staff may not, however, ask an Oregonian if they have had a COVID-19 vaccine.
 - Note: For long-term care facilities, if an Executive Orders (EO) is in place, that information should be used when determining the protocols of an in-person interview or assessment.
- Masks and personal protective equipment (PPE) will be provided following the guidance in this transmittal, any Collective Bargaining Agreements (CBA), and local Public Health and CDC guidelines. The type of masks are not defined by this transmittal and should follow local Public Health and CDC [guidelines](#). APD/AAA staff may utilize the same mask within a facility where they are doing multiple encounters with people, as long as they are not touching the mask and they have not been having a direct encounter with an individual who is symptomatic or COVID positive. If a worker needs to touch and adjust their mask during the engagement or engage with someone who is symptomatic or COVID-19 positive, they should change the mask between visits. Staff should change masks and PPE between visits at different homes or facilities. Staff should follow general practices such as washing hands, changing gloves (if applicable), and using hand sanitizer between visits.
- APD/AAA AFH licensing, orientations, and inspection activities should be conducted in-person regardless of county risk level. The only exception is when

the AFH is under an Executive Order (EO). In those cases, the licensor or supervisor should consult with Safety Oversight and Quality (SOQ) before entering the AFH to determine if there can be an exception to enter the building and have in-person contact.

- CBC and NF licensing and survey activities should be done in person regardless of current county COVID-19 risk level.
- Central Office staff who directly oversee contracts or work with providers or consumers and are required to do in-person assessments or work should resume doing this work in person. If an active Executive Order is in place, staff consult with SOQ to determine if the in-person visit can be conducted safely.
- All APD/AAA waived case management activities, risk-focused direct contacts, and annual assessments, including OPI, should be conducted in person, unless there is an active Executive Order on a facility or the individual informs staff or others they are currently experiencing symptoms, have tested positive or being tested for COVID. For facility cases, if the CM or local office is so informed, the case manager and supervisor should consult with SOQ to determine if there can be an exception to enter the building or work with the local supervisor to determine alternative ways to do case management or complete the assessment timely. During the federal public health emergency the State cannot close individuals based on their need of an in-person assessment, refusing in-person contact with staff, or are actively experiencing COVID-19 symptoms or recently exposed through alternative means such as telephonic, virtual, or review of documentation is allowed until the federal public health emergency is lifted.
- Diversion and Transition coordination activities including visits to facilities and hospitals, engaging with individuals in their home should be in person, unless there is an active Executive Order on a facility of the individual informs the Diversion and Transition coordinator they are currently experiencing symptoms, have tested positive, or are being tested for COVID-19. If the DT Coordinator or local office is so informed, the staff should consult for facility cases with SOQ to determine if there can be an exception to enter the building or work with the local supervisor to determine alternative ways to do the pre-admission screening, assessment, service option counseling, and other coordination activities until it is considered safe to engage in person.
- Case Aides may have activities that require in-person interaction. If the task requires in-person interaction to deliver needed services, they should follow similar guidance as Case Managers and Diversion and Transition coordinators.

- All APS interviews required by current policy should be conducted in-person unless a deviation is required for safety or other reasons unrelated to COVID-19. Interviews that are not required to be in-person under current APS policy and procedures do not need to be done in-person and are not affected by this transmittal. When an interview needs to occur in a facility with an Executive Order the APS investigator or supervisor should consult with SOQ before entering the facility to determine if there can be an exception to enter the building in order to do an in-person interview.
 - Note: Previous direction required checking with SOQ and Central Office APS prior to entering a facility with an Executive Order. APS staff no longer need to consult Central Office APS prior to entering a facility under Executive Order, APS workers must contact SOQ as outlined in this transmittal when looking to enter a facility with an Executive Order.
- APD/AAA staff should continue to wear masks and appropriate PPE when performing in-person activities. Local offices should provide appropriate PPE following their agency direction and collective bargaining agreements.
- If someone asks a staff member their vaccination status, staff should notify them that: “At this time the Department is following applicable guidelines from the Centers for Disease Control, Oregon Health Authority and our local Public Health. Within these guidelines’ employees are asked to not provide their own private health information, but we are following accepted guidelines in attempting to keep those we serve and our staff safe. If you have concerns with this direction or meeting in person with a staff individual without vaccination information, we can temporarily do a virtual assessment while the federal public health emergency is in place, and for other concerns around this policy direction we can connect you with the local supervisor.”
- Supervisors who are contacted with concerns around visitations or vaccinations should listen to the consumer, and assist with resolving concerns around in-person visitation and utilization of local Public Health and CDC practices, if possible. The agency as a third party cannot provide additional health information on our employees, and while we are not disclosing health information of employees we are following CDC and local Public Health practices to keep consumers safe. Information from this transmittal can be provided if there are questions on the direction and concerns where escalation is needed. Unresolved issues should be addressed by a District Manager or Administrator and if needed, sent to the appropriate APD email inbox listed below.

- If a consumer refuses to allow an in-person contact or assessment during the federal public health emergency declaration, we are not allowed to close services for the individual. Staff and Supervisors should attempt to resolve expressed concerns, ensuring PPE is available for the worker and social distance guidelines are practiced when discussing the in-person visit. If the consumer is not comfortable after attempting to resolve their concern, while the federal public health emergency is in place, a virtual visit can be approved. Individual's cases should not be closed during the federal public health emergency for not allowing in-person assessments. Case Managers should document when they are not doing in-person assessments in OACCESS(OA).
- This AR replaces previous ARs related to the Public Health Emergency that referred to in person contact. All other direction not covered in this transmittal, related to the Public Health Emergency, is still in force until further updates are provided. If an in-person interview or assessment was not required prior to the public health emergency by policy for the specific situation then it continues to not be required.
- Further information around additional guidance on in-person office interactions and eligibility work will be coming in future joint APD/SSP guidance.

Additional Guidelines:

The following guidelines are provided to assist with making decisions about conducting interviews. The guidelines attempt to balance the degree of danger presented by the reported abuse with the level of risk to vulnerable adults presented by potential COVID-19 exposure that may result from in-person contact.

Case Management:

Activities should continue to follow the practices and direction provided by LTSS policy when an Oregonian requires waived case management activities based on their service needs, risk monitoring concerns, and ongoing eligibility. Case Managers should update individual service plans in Oregon Access and narrate all activities including in-person, direct and indirect contacts. Any deviation to the information outlined in this AR should be done with local supervisor approval, LTSS policy consultation as needed, and narrated in Oregon Access.

Personal Protective Equipment including gloves and masks should be available to Case Managers. Case Managers should avoid unnecessary contact and observe appropriate social distancing rules. APD and AAA staff may utilize the same mask within a facility where they are doing multiple encounters as long as they are not touching the mask and they have not been having a direct encounter with an individual

who is symptomatic or COVID positive. If a worker needs to touch and adjust their mask or engage with someone who is symptomatic or COVID-19 positive they should change the mask between visits. Staff should change masks and PPE between visits at different homes or facilities. Staff should follow general practices such as washing hands and using hand sanitizer between visits.

Diversion and Transition Coordinators:

Diversion and Transition Coordinators should follow the same direction provided to Case Managers around utilization of PPE and documentation in Oregon Access noting how interactions were done, in-person, virtually, telephonically, etc.

AFH Licensors:

Licensors should conduct licensing and investigation activities in person with the licensee. This includes engaging with consumers as appropriate to perform the duties of the position. Licensors should utilize appropriate PPE (masks) when doing this work. Information should be updated in the appropriate licensing systems such as ASPEN for the visits.

APS workers:

When receiving intakes, conducting investigations and providing protective services, APS workers should revert to pre-COVID-19 practices, as described in APS rule and policy, with the addition of using appropriate PPE (masks, hand sanitizer) during all in-person contacts. In addition to using PPE, APS staff must follow standard physical distancing and universal precautions to the extent possible.

Supervisors:

Supervisors should work with employees to educate them on this AR and ensure that staff's concerns are addressed locally about reengaging with consumers directly. The safety of Oregonians and staff have been discussed across the public health and human service areas, and our ability to engage directly with Oregonians is critical for their safety and continued receipt of services. Staff should be working more regular hours and offices should be staffed in a way to allow these in-person visits to be done following this guidance. Questions on this guidance should go to the specific policy areas listed in the transmittal.

Reason for action:

This Action Request (AR) is intended to address questions about re-engagement of in-person involvement with Oregonians as the State continues to open up services. This AR is based on ODHS and OHA collaboration to determine the best way to re-engage with Oregonians while ensuring critical services and safety for individuals. This AR provides updated direction to previous ARs and Policy Transmittals issued during the Public Health Emergency Period.

This Action Request (AR) builds on APD Policy Transmittal 20-020, issued on March 10, 2020, which (among other things) allowed deviations from APS timelines and investigative practices in particular cases due to COVID-19 concerns. This AR provides additional guidelines for APS staff in screening and investigating reports of abuse.

The agency takes the health and safety of the individuals we serve and the staff performing this work seriously. This action is to ensure we have a transition to seeing individuals and ensuring Oregonians receive person-centered care, are safe, have accurate service plans, and providers are delivering appropriate services. While local Public Health, DAS, OSHA, CDC, and federal agencies will continue to provide guidance. When flexibility is allowed, we will direct staff with information and actions to keep themselves and those they serve safe, and to honor the direction and preferences of the consumer.

Field/stakeholder review: Yes No

If yes, reviewed by: APD/AAA Operations and District Leadership

If you have any questions about this action request, contact:

- *Contact(s):*
 - AFH questions to SOQ: APD.AFHteam@dhsoha.state.or.us
 - APS questions to Central APS Unit:
APS.TechAssistance@dhsoha.state.or.us
 - Case Management questions to LTSS Policy:
APD.MedicaidPolicy@dhsoha.state.or.us