

# **PANDEMIC CRISIS PLANNING FOR SECOND SURGE**

---

**OACB/DODD**

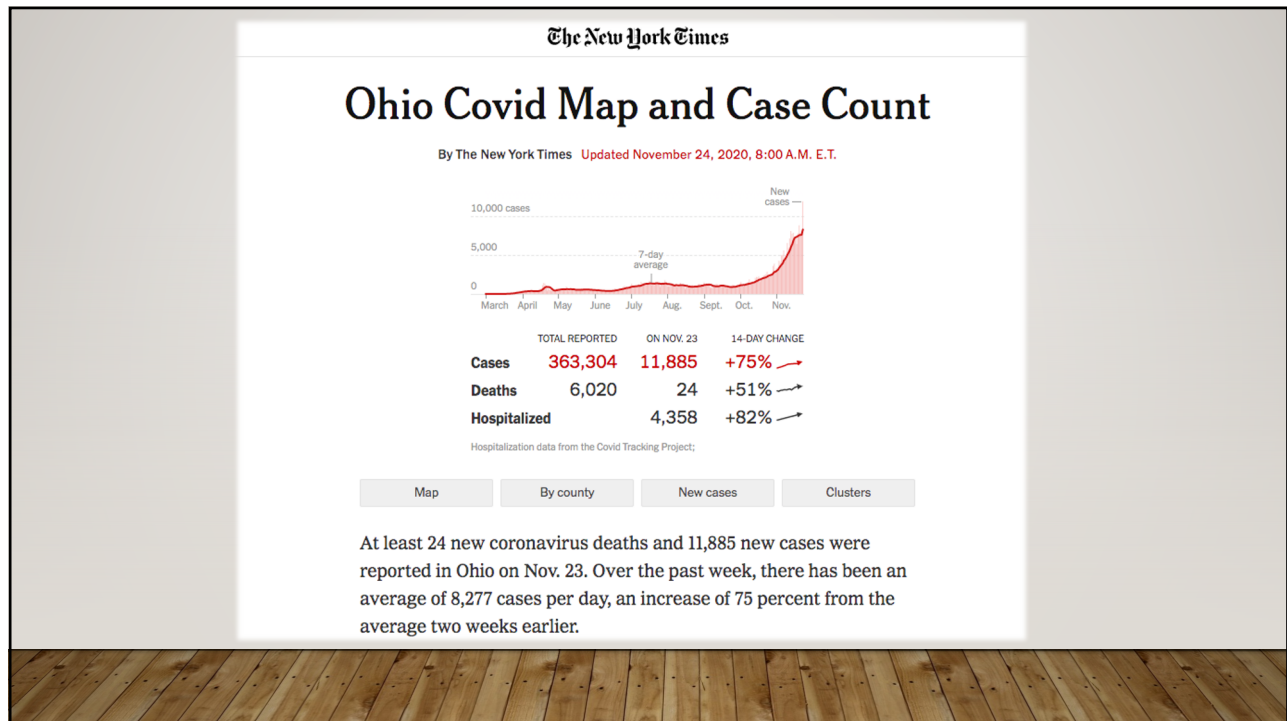
1

## **AGENDA NOVEMBER 24, 2020**

---

- Welcome/Introductions- Lori Stanfa, OACB
- Goals/Purpose- Director Jeff Davis, Sara Lawson and Kelly Mosely- Miller, DODD
- DODD county board survey results- Ann Weisant, DODD
- Creative crisis planning- Angel Morgan, DODD
- SSA and team priorities NOW- Lisa Comes, OACB
- Best Practices- Willie Jones and Panel of County Board reps Emily Martinez, Nancy Richards, Kamarr Gage/ Mitch Snyder, Drew Williams and Angie Finck

2



3

## CONNECTING WITH COUNTY BOARDS

**DODD Regional Support Teams reached out to all 88 County Boards to survey them on the following questions:**

### Relocation

- Are you aware of Providers in your county who have relocation sites set up?
- Does the County Board have a relocation plan site set up?

### Independent Providers

- Do you have the list of certified Independent Providers for your county?
- Have you reached out to them to determine if they are willing to help with the staffing crisis?

4

# CONNECTING WITH COUNTY BOARDS

DODD Regional Support Teams reached out to all 88 County Boards to survey them on the following questions:

## Provider Recruitment

- What is the CB doing to help recruit providers DSPs?

## Provider Concerns

- What concerns are you hearing from providers about dealing with COVID emergencies?

5

# SURVEY OUTCOMES

## 81 COUNTY BOARDS COMPLETED THE SURVEY

- 34 County Boards answered No
- Most of the answers were related to relocation due to illness
- Found that many hadn't discussed plans for relocation due to staffing issues

## Independent Providers

- 10 County Boards answered No
- Independent Provider List sent to Provider Support Liaison staff by DODD

## Provider Recruitment

- 23 County Boards answered No
- Not just DSPs – Nursing need also

6

# **SURVEY OUTCOMES**

## **81 COUNTY BOARDS COMPLETED THE SURVEY**

---

### **Provider Concerns**

- 33 counties reported that they either didn't know what their providers were concerned about or that providers had no concerns.
- 48 counties reported the following concerns;
  - Availability of Staff
  - PPE
  - Coordination with local health department
  - Contact Tracing
  - Funding

7

# **ACTION STEPS**

---

- Strengthen relationship with ALL providers
  - Know their needs
  - Assess current workforce challenges
  - Prepare for crisis – conversations with providers to identify creative workforce solutions, including options for relocation\*
- Survey all providers to assess where vacancies exist
- IP Teams need to discuss back-up plans, especially for Shared Living and Independent Provider Situations
- Talk to Individual/Guardian about willingness, in waiver settings, to allow others to utilize available bedroom space
- Assess family situations to identify where families may be able to support individuals temporarily in the family home
- Identify options for appropriate remote supports for individuals to release staffing pressures\*
- Assess family situations for youth with complex needs to ensure the ability to provide adequate supports
- Work with providers to address staff recruitment and retention needs and actively work together to recruit DSPs and Nurses

8

# POSITIVE STRATEGIES AND COLLABORATION

---

## • County Board Efforts

- Providing Meals to agency's who are experiencing COVID outbreaks
- Contacting independent providers in your county and developing an ongoing list of providers who are willing to work with facilities experiencing issues pertaining to COVID-19
- Contacting waiver nursing providers and state-plan nursing providers and developing an ongoing list of providers who are willing to work with facilities experiencing issues pertaining to COVID-19
- Connecting with local hotels/college dormitories/use of CB buildings for purposes of both quarantine/isolation space (this was our initial priority) and also for congregating people to deal with staffing crisis (new priority)
- Providing PPE to providers

9

# POSITIVE STRATEGIES AND COLLABORATION

---

## • Provider Efforts

- Contracting with Independent Providers
- Contracting with Independent Nurses (either DODD Waiver Nurses or State-Plan Nurses)
- Providing HERO Bonuses to staff for not missing time at work
- Evaluating where there are multi-lines of business that would allow staff to be reallocated to areas of direct need
  - Assessing if there are areas in their Adult Day programs that are under-utilized and reallocating those staff
  - Pulling staff from Home Health Agencies
  - Moving staff from other areas where they may not be experiencing crisis levels or COVID outbreaks

10



## POSITIVE STRATEGIES AND COLLABORATION

---

- **DODD Efforts**

- Waiving Provider Certification Fees for new independent providers for a period of time
- Completing BCII checks at the DCs for new independent providers
- Allowing agencies to hire independent providers and onboard based on DODD already approving that employee.
- Allowing online First Aid and CPR
- When requested, issuing waivers to assist with provider onboarding and COVID related issues.
- Allowing a statement from other provider agency when sharing staff so that the new hiring agency does not need to do all of the onboarding requirements.

11

## NEW EFFORTS FOR STAFFING CRISIS

---

- **Independent Certification Applications**

- Waiving independent certification fees for applicants applying now through the blackout.
- Current turn-around time if we have a complete application that does not require any additional review is approximately 3 weeks
- Certification is reevaluating how to expedite new incoming independent certification applications

- **Background Checks**

- DODD will be conducting BCII's at DCs by appointment at no cost to the providers
- We strongly encourage County Boards to conduct BCII's using webcheck on behalf of these new independent provider applications

12

## NEW EFFORTS FOR STAFFING CRISIS

---

- **First Aid/CPR**

- DODD continues to accept online First Aid/CPR. It is strongly recommended that county boards provide resources to the new independent provider applicants to do complete the training at no cost.

- **UI/MUI**

- County Boards may be able to provide relief to providers by assisting with UI/MUIs

- **Relocation Plans**

- It is important for county boards to reach out to providers and ensure they are developing a relocation plan that addresses both what happens if someone is ill and also addresses what happens if there are simply not enough staff.

13

## NEW EFFORTS FOR STAFFING CRISIS

---

- **Recruitment**

- Virtual Job Fair – Not just ran by county boards (i.e. Steve Stivers)
- Connection with colleges – employment for students who are going to be on break soon
- Newspapers; radios; Indeed; Ohio Means Jobs – How do we get the information in front of other industries where people have lost jobs

- **Ask for Volunteers from CB staff**

- Some county board staff are willing to volunteer their free time to work for agencies to provide direct supports and/or HR services

14

## NEW EFFORTS FOR STAFFING CRISIS

---

- **Offering HERO Grants**

- County Boards can provide financial assistance to providers to assist with the additional costs incurred during COVID-19

- **Assisting with CARES Act Grants**

- Some providers don't know where to start; county boards could provide a resource to assist providers so they can use this money to offset costs of the provider

15

## WHAT CAN SSA'S BE DOING?

---



- ✓ Does the person NEED HPC for HEALTH AND SAFETY?
- ✓ Can this person stay with FAMILY temporarily?
- ✓ Does the person have FAMILY that can step in?
- ✓ Does this person have Friends/Neighbors that check in?
- ✓ Does the person have a relationship with other AGENCIES/INDEPENDENT PROVIDERS (what about ADS Providers)?

16



## WHAT CAN SSA'S BE DOING?



- ✓ What are MINIMAL SUPERVISION LEVELS?
- ✓ In Congregate settings... What are MINIMUM STAFFING LEVELS to Keep?
- ✓ REMOTE SUPPORT – Could it help?
- ✓ In an emergency is there a staff person at the agency that would be willing to do OHIO SHARED LIVING for the person?

**If ANY of these are different than what is written in the ISP...  
Let Independent/Agency Provider KNOW ASAP**

17

## LESSONS LEARNED & POSITIVE PRACTICES

**Clearwater COG: Nancy Richards**

**Montgomery CB: Mitch Snyder & Kamarr Gage**

**Summit CB: Drew Williams**

**Licking CB: Angie Finck**

**Mahoning CB: Emily Martinez**

18

## **CLEARWATER COG PANDEMIC RESPONSE – WE ARE THERE TO HELP**

---

- Supplies and PPE – COG STAFF – County contact –supply organizer
- Cant find it? We will and deliver it to you/anyone who needs
- mask makers –any shape and all unique designs-our community came together (staff, vendors, friends, etc)
- Coordinate large and small orders –better pricing
- Communications

19

## **CLEARWATER COG PANDEMIC RESPONSE – WE ARE THERE TO HELP**

---

- Provider virtual meetings, social media , provider blasts, resource lists, 24/7
- Training support
- All On-line free training (pandemic period) and specialized (Twindemic), videos
- Nursing support/training (Blessed with retired infection control nurse)
- Other on-going support

20

## CLEARWATER COG PANDEMIC RESPONSE – WE ARE THERE TO HELP

---

- Reimburse IP certification costs
- Gift cards for emergencies and food  
(Kroger, Walmart, door dash, speedway, etc)
- Flu shots at home by cog nurses
- DSP and agency appreciation the month of September and on-going

21

## CLEARWATER COG PANDEMIC RESPONSE – WE ARE THERE TO HELP

---

Goggles 298

Faceshields 1097

Gloves 243 boxes

Gowns 3446

Masks all types 8753

Bottle hand sanitizer all sizes 3446

ITEMS AVAILABLE : 175 different items

Disinfectants 576

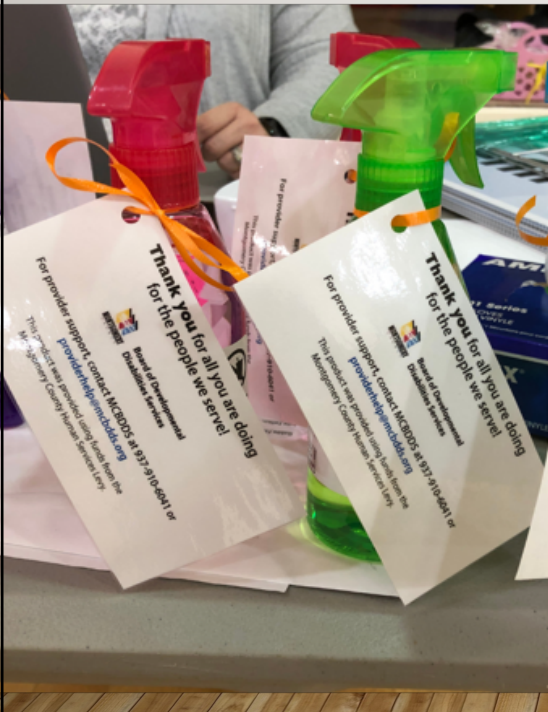
Shoe covers 860

Thermometers 514

Toilet paper 784

Hair nets 460

22



## MONTGOMERY CO BOARD OF DD

**Staffing Contingency Plan**

- Independent Provider pool and negotiated relationship with agency providers who have locations and staff ready to support people with COVID

**Pandemic PPE and Meal Support**

- All PPE resources are available free to eligible individuals, agency and independent providers. Resource Center also provides free daily meals for pick-up or delivery; providing more than 2,400 catered meals per week

**Mass Quarantine Response**

- Provider has agreed to staff COVID+ support locations and embed staff with individuals during initial quarantine; provides all resources needed so they do not need to leave location. County Board is paying provider \$250 weekly PPE incentive per employee working with positive individuals

**COVID Communication Plans**

- Weekly communications via email and video, supplemented by collaborative agency and independent provider meetings and support of DSP recruitment

**Local Health Department Cooperation**

- County board and Public Health Department are a part of combined Human Services Levy, which collaborates on low and high priority projects. Relationship with health department allowed us to lobby for first-round vaccinations for DSPs as essential workers

23

## SUMMIT DD COVID RESPONSE

### PPE

- Providers request using a google form. Team of staff receive request, reach out to provider, determine PPE quantities and arrange delivery. This process will continue throughout 2021.

### Technical Assistance/Response Plan

- Summit DD's Quality Assurance Nurses provide TA and recommendations on how to handle COVID related situations.
- Conduct contact tracing and administer testing as needed.
- Meet with the health department on a regular basis. This relationship has been critical as we have refined our COVID response.
- Host regular provider conference calls, all provider emails, individual discussions with providers occur daily.

24



## SUMMIT DD COVID RESPONSE

---

### Staffing

- SSA's have identified backup plans for individuals.
- Identified Ind. Providers willing to provide emergency respite even if the person has been diagnosed with COVID-19 or exposed.
- Adult and youth respite homes and open bedrooms within Summit Housing Homes can be used, if relocation had to occur.

25

## LICKING COUNTY BOARD FOUNDATION OF COLLABORATION

---

### Staffing Shortages

- Shift staff to essential services & create face sheets/emergency plans for each
- Staff sharing
- ADS Stipend up to \$1,000/month
- DSP Employment Connections program
- Continued DSP recruitment, retention, and culture trainings
- LCBDD DSP recognition efforts
- Coordinated DSP marketing campaign

### PPE

- LCBDD collected/delivered PPE and COVID+ kits
- Initial PPE Stipend \$30/FTE
- Weekly Stipend \$50/FTE, additional \$25/COVID+ site

26



## LICKING COUNTY BOARD FOUNDATION OF COLLABORATION

---

### **Mass Quarantine Response Plans**

- ADS sites, community sites, and hotels identified for possible COVID respite

### **Communication**

- Electronic newsletters, weekly conference calls, monthly zoom meetings
- CB staff - Provider points of contact

### **Local Health Department**

- Initial Protocol
- Ongoing collaboration
- Member of LC COVID Defense Team

27

## MAHONING COUNTY BOARD OF DEVELOPMENTAL DISABILITIES

---

### **Have a plan for-**

- PPE : PPE-know resources that providers can order from, Batelle, EMA, DODD, other supply chains that may be a possibility (restaurants or other vendors-have a team to work on this)
- Communication: Have excellent communication with EMA and health department
- Continue regular provider meetings, have focus groups to work on issues
- Send providers information they can use, check in with your providers it changes day to day
- Quarantine Location: Develop a quarantine location-hotel, other facility, we worked an agreement with a provider with an empty home
- DSP shortages

28

## **DSP SHORTAGES: MAHONING COUNTY BOARD PLAN**

---

- Flow chart of potentials for staff if short
- COVID team
  - DSP shortage worksheet
  - Work with nursing and SSA to develop a plan (start planning now, do not wait). Plan can include sending folks home to family if needed, natural supports to fill shifts if needed, independent providers, sub-contract with other providers that have staff, available county board staff, remote supports, moving people to maximize staff, think about who has the most needs and keep those folks together with the staff the provider has left, other folks that need less may be able to use alternate staff and/or remote supports for services.
  - County board-help with Ipads, be flexible with day program services, concentrate on what is needed to maintain safety

29

## **REFERENCE MATERIAL COURTESY MAHONING COUNTY BOARD**

30


<b>COVID Staff Shortages Worksheet</b> DSP Shortage (limited to no staff available by any other means) coordination of safety services worksheet Provider Name: *The COVID team will help provider administration plan for open shifts and help to assure individual safety during this crisis. Discussion to include sharing service locations, sharing staff amongst locations, immediate use of technology to provide supervision, etc.	
1. How many individuals need services?	
1. How many staff do you have available to serve them (count everyone possible including administrators, county board staff, sub—contracted staff, and family doing natural supports)	1. Fill in name and supervision for each person
1. What shifts are not covered by the above?	1. Is nursing needed?
1. Can any of the individuals attend day program?	1. Do any individuals take medications? If so, ensure med certified staff or natural support fill in shift when meds are needed.
1. Fill in location	1. Can any individuals utilize remote supports for services?
	1. Are there any other locations where individuals can safely be moved to share services if there are immediate needs not covered?

31

## PERSONAL PROTECTIVE EQUIPMENT

---

1. When low on equipment contact Provider Relations (Tony Rinaldi)
2. Remember if working in an exposed environment full PPE is required
3. PPE training-ensure all staff are trained on proper use and removal of PPE
4. Mask wearing



32

## DSP SHORTAGES

---

1. Remember hiring requirements have been adjusted to help providers hire more quickly
2. If you are short staff notify county board immediately. County board has contacted all providers not currently serving folks, with laid off staff, interested in expansion, and independent providers. We have a grid of staff you can use immediately through sub-contracting
3. If this is depleted contact the county board immediately and the board has a list of staff including SSAs that could be hired and work immediate shifts
4. If we are in a dire situation we have a team that will assist you in reviewing service needs in the home and help coordinate sharing of services by location, through technology, and parental/natural supports that is available (see worksheet)

33

## QUARANTINE LOCATION

---

1. Recommend those infected shelter together and those not sick shelter separately to minimize exposure and help conserve staff
2. If an alternate location is needed, contact the county board immediately, we do have a location we can utilize. If more than one person needs this location coordination amongst SSAs and providers will occur to assure individuals get the services needed from trained staff.

34

# COMMUNICATION

---

1. Active communication is essential
2. Let applicable SSA know immediately of COVID exposure, and positive cases for individuals and staff.
3. SSAs are checking on individuals and families to assure they have sought medical attention, understand their situation, link them to testing sites if needed, check on PPE, assure services for safety are in place, and ensure they have necessary food and supplies.