

# Westside Regional Center

COVID-19 Information for Providers



# COVID-19 Background Information

- COVID-19, also referred to as Coronavirus, is a virus easily spread through close contact with someone who is infected.
- Symptoms include
  - Fever
  - Cough
  - Shortness of Breath
- Based upon available information to date, those at high-risk for severe illness from COVID-19 include:
  - People aged 65 years and older
  - People who live in a nursing home or long-term care facility
  - Other high-risk conditions could include:
    - People with chronic lung disease or moderate to severe asthma
    - People who have heart disease with complications
    - People who are immunocompromised including cancer treatment
    - People of any age with severe obesity (body mass index [(BMI)] $\geq 40$ ) or certain underlying medical conditions, particularly if not well controlled, such as those with diabetes, renal failure, or liver disease might also be at risk
    - People who are pregnant should be monitored since they are known to be at risk with severe viral illness, however, to date data on COVID-19 has not shown increased risk
- Many conditions can cause a person to be immunocompromised, including cancer treatment, bone marrow or organ transplantation, immune deficiencies, poorly controlled HIV or AIDS, and prolonged use of corticosteroids and other immune weakening medications

# COVID-19 Background Information

Take Everyday Precautions

**Avoid close contact with people who are sick.**

Take everyday preventive actions:

- Clean your hands often
- Wash your hands often with soap and water for at least 20 seconds, especially after blowing your nose, coughing, or sneezing, or having been in a public place.
- If soap and water are not available, use a hand sanitizer that contains at least 60% alcohol.
- To the extent possible, avoid touching high-touch surfaces in public places – elevator buttons, door handles, handrails, handshaking with people, etc. Use a tissue or your sleeve to cover your hand or finger if you must touch something.
- Wash your hands after touching surfaces in public places.
- Avoid touching your face, nose, eyes, etc.
- Clean and disinfect your home to remove germs: practice routine cleaning of frequently touched surfaces (for example: tables, doorknobs, light switches, handles, desks, toilets, faucets, sinks & cell phones)
- Avoid crowds, especially in poorly ventilated spaces. Your risk of exposure to respiratory viruses like COVID-19 may increase in crowded, closed-in settings with little air circulation if there are people in the crowd who are sick.
- Avoid all non-essential travel including plane trips, and especially avoid embarking on cruise ships.

# COVID-19 Background Information

- The State of California has implemented a “Safer at Home” order requiring citizens to remain at home, except for essential business activities including
  - Gas stations
  - Pharmacies
  - Food: Grocery stores, farmers markets, food banks, convenience stores, take-out and delivery restaurants
  - Banks
  - Laundromats/laundry services
  - Essential state and local government functions will also remain open, including law enforcement and offices that provide government programs and services.
- Group activities are restricted by the “Safer at Home” order. People should limit interaction with individuals who do not reside in their home. All public and private gatherings of any size have been eliminated at this time.
- Los Angeles County and Mountains Recreation and Conservation Authority have closed all parks, beaches, hiking trails, and parking lots due to COVID-19.
- Information regarding the virus is ever-changing. It is suggested that providers check information regularly that is sent by Department of Social Services Community Care Licensing, Department of Developmental Services, LA County and California State Department of Public Health, the Centers for Disease Control, and all other local agencies managing the COVID-19 situation.

# What does this mean for WRC Providers?

- Services and supports for people served by Westside Regional Center are deemed “essential business”, therefore, must continue without interruption to the best of our ability
- Westside Regional Center staff remain available to support providers, individuals, and families Monday-Friday 8:30AM-5:30PM. Many staff are working remotely, however will continue to be available during this time. After hours emergency relay service for SIRs remains in effect by calling main WRC phone line.
- Providers will need to develop creative means to continue services for individuals who they support
  - Video-chat/Virtual Service Delivery - Use Available Technology
  - Creation of individualized plans based on preferences and strengths
  - No-contact distribution of supplies for activities
  - Continued support and planning regarding Activities of Daily Living - meal prep and activity schedules, support to obtain groceries/medicine/hygiene supplies
  - Employment supports for individuals working in essential businesses

# What does this mean for WRC Providers?

- Day services impacted by absences due to COVID-19 have been permitted to bill in alignment with the regular attendance of an individual in a 23-day period. However, providers are expected to develop to the best of their ability opportunities for training of staff, virtual services and supports for the individuals they serve during this time.
- Day and Tailored Services providers who have staff who are able and willing to work with residential or supported living services providers during the COVID-19 emergency can submit their information to their WRC QA Contact. Please provide the staff's first and last name, phone number, email address, and schedule of availability.

# How Can WRC Providers Support Individuals?

- Develop a plan for how you will support someone you serve if they get sick.
  - Do they have adequate food, medicine, incontinence supplies, and any other durable medical supplies they may need if they need to quarantine?
  - If there are other residents in the place where they live, prepare a plan with all residents to ensure if a resident becomes sick that they can be quarantined in their bedroom alone. Follow CDC guidelines for quarantine measures
  - If needing to enter a quarantine room, the individual who is ill should be wearing a N-95 mask as well as the person providing support. The person providing support should wash their hands thoroughly with soap and water before entering and when leaving .
  - Have staff been trained on COVID-19, universal precautions as it relates to COVID-19, and how they can continue to provide supports to someone in their home safely?
  - Does your program have a protocol for reporting and monitoring when someone becomes sick with COVID-like symptoms? Follow CDC guidelines - contact primary physician, Department of Public Health. Quarantine and refrain from visiting physician or hospital unless symptoms are severe and potentially life threatening. Contact COVID-19 hotline for medical advice.

# How Can WRC Providers Support Individuals?

- Consider the mental and emotional impact of COVID-19
  - Encourage individuals to seek out mental health resources
  - Arrange social activities with friends and family through video chat/virtual technology
  - Create a social story with a person explaining the change in routine
  - Encourage exercise and spending some time outdoors while maintaining social distancing of at least 6 feet from people who do not reside in your home.
  - Get creative! Find out what's important to a person and create opportunities to explore - virtual concerts, art, learning



# Residential and Supported Living Service Providers

- Licensed providers should remain up to date on all CCLD guidance regarding COVID-19
- Individuals should not be quarantined in their rooms if no one is sick or has not been knowingly exposed to COVID-19 (with the exception of ARFPSHNs and ICFDD-CNs whereas DDS guidance requires these measures). Social distancing of 6 feet applies to people who do not reside or support you in your home. Continue to utilize universal precautions during the “Stay at Home” order but allow individuals free access to their entire home if no one is sick.
- Westside Regional Center will contact providers as emergency supplies become available - N95 Masks, Hand Sanitizer, Gloves, etc.. These supplies to not prevent illness from occurring but can reduce possibility of spread and will be prioritized to those residences serving individuals with underlying health conditions.

# Residential and Supported Living Service Providers

- Westside Regional Center is working with the Department of Developmental Services to identify available support staff who are willing and able to work with Residential and Supported Living Providers in light of COVID-19. WRC will continue to keep providers up to date with staffing planning as developments are made.
- Visits shall be limited to individuals who need entry, as necessary for prevention, containment, and mitigation of COVID-19, such as medical personnel, and government agencies responsible for protecting the health, safety, and welfare of consumers, including Department and regional center staff. Friends, family, and other visitors should be prohibited at this time from entering licensed facilities as directed by the Department of Developmental Services.
- WRC staff will work with residential providers to conduct regular visits with residents via videoconference and in-person when necessary to ensure adequate supports and services are available to all.

# Providers and Vendors Reporting

- The Department of Developmental Services (DDS) is requiring regional centers to report any known or suspected incidence of COVID-19 among consumers and any employee who they may have been exposed to DDS
- This information will assist regional centers in planning and allocating resources. The documents to report each group can be located at [www.westsiderc.org](http://www.westsiderc.org) under Provider page. For consumers the form must be submitted with the SIR to report illness and the Employee form submitted separately. Note all Protected Health Information (PHI) is de-identified for the employee.

Submit to Special Incident Report and **COVID-19** Reporting form for Consumers and affected staff by email: [SIR@Westsiderc.org](mailto:SIR@Westsiderc.org)

### WRC COVID-19 FORM FOR CONSUMER

TO BE COMPLETED IN WORD FORMAT AND E-MAILED TO THE WESTSIDE REGIONAL CENTER DESIGNATED SIR EMAIL ADDRESS

Send the SIR and COVID 19 Form to Westside Regional Center SIR email: [SIR@westsiderc.org](mailto:SIR@westsiderc.org)

Your assistance is needed and appreciated. The Department of Developmental Services (DDS) has requested that vendors and Long term Care Providers (ICF DD- H/N/ CN) report any Consumer who is symptomatic (fever, cough, shortness of breath) or have been tested for COVID-19.

Written by: \_\_\_\_\_ Date of Report: \_\_\_\_\_ Updated On: \_\_\_\_\_

Reporting Agency Name: \_\_\_\_\_ Reporting Agency Vendor # \_\_\_\_\_

1. Consumer Name:	2. UCI:								
3. DOB:	4. AGE:								
5. Where Consumer was Exposed: <table style="width: 100%; margin-top: 5px;"> <tr> <td><input type="checkbox"/> Family Home</td> <td><input type="checkbox"/> Residence (name of provider/type): _____</td> </tr> <tr> <td><input type="checkbox"/> Consumer Residence</td> <td><input type="checkbox"/> Day Program (name of provider): _____</td> </tr> <tr> <td><input type="checkbox"/> Unknown</td> <td><input type="checkbox"/> Job Site (name of provider): _____</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Other (location, if known): _____</td> </tr> </table>		<input type="checkbox"/> Family Home	<input type="checkbox"/> Residence (name of provider/type): _____	<input type="checkbox"/> Consumer Residence	<input type="checkbox"/> Day Program (name of provider): _____	<input type="checkbox"/> Unknown	<input type="checkbox"/> Job Site (name of provider): _____		<input type="checkbox"/> Other (location, if known): _____
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<input type="checkbox"/> Consumer Residence	<input type="checkbox"/> Day Program (name of provider): _____								
<input type="checkbox"/> Unknown	<input type="checkbox"/> Job Site (name of provider): _____								
	<input type="checkbox"/> Other (location, if known): _____								
6. What is the individual's living arrangement, e.g. Family home, RCF, ICF, ARFPPSHN, CCH, EBSH, supported living, independent living)?									
7. Where does the individual live? Please provide residential provider or other home support (ILS/SLS) vendor name and vendor number:	8. Number of consumers/employees at Home: #C ____ / #E ____								
9. What is the individual's day program or employment program? Please provide day program's vendor name and vendor number.	10. Number of consumers/employees at Worksite/Day Program: #C ____ / #E ____								
11. Date Reported To County Public Health:	12. Which County Reported To:								
13. Date Symptoms Noted:	14. Isolation: <input type="checkbox"/> Y/ <input type="checkbox"/> N If Yes, Date:								
15. Tested: <input type="checkbox"/> Y / <input type="checkbox"/> N	16. If Yes, Date Conducted:								
	17. Test Results: <input type="checkbox"/> Positive <input type="checkbox"/> Negative								

3-23-20

*Committed To Providing Support And Services To People With Developmental Disabilities*

5901 Green Valley Circle, Suite 320, Culver City, CA 90230-6953 [SIR@westsiderc.org](mailto:SIR@westsiderc.org) www.westsiderc.org

8. Management Plan – Document how you are addressing the concern (e.g., isolation room, home isolation, hospitalized, etc.) – Additional detail should be added in the SIR:

All FIELDS ARE REQUIRED UNLESS OTHERWISE INDICATED.

3.23.20

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**WRC COVID-19 FORM FOR VENDOR/PROVIDER's EMPLOYEE/STAFF**

**TO BE COMPLETED IN WORD FORMAT AND E-MAILED TO THE WESTSIDE REGIONAL CENTER DESIGNATED SIR EMAIL ADDRESS**

Send the SIR and COVID 19 Form [SIR@westsiderc.org](mailto:SIR@westsiderc.org)

Your assistance is needed and appreciated. The Department of Developmental Services (DDS) has requested that vendors and Long term Care Providers (ICF DD- H/N/ CN) report any Employee/Staff who are symptomatic (fever, cough, shortness of breath) or have been tested for COVID-19.

Date Written: \_\_\_\_\_ Form Updated On: \_\_\_\_\_

Written by: \_\_\_\_\_ Position: \_\_\_\_\_

Vendor/Provider Name: \_\_\_\_\_ Vendor # \_\_\_\_\_

All FIELDS ARE REQUIRED UNLESS OTHERWISE INDICATED.

1. Date Reported To County Public Health:		2. Which County Reported To:	
3. EMPLOYEE'S WORK SITE (Include the vendor's name and the location where the employee works):			
4. Number of consumers/employees at employee's worksite: #C ____ / #E ____			
5. Date Symptoms Noted:		6. Isolation: <input type="checkbox"/> Y/ <input type="checkbox"/> N	7. If Yes, Date:
8. Tested: <input type="checkbox"/> Y / <input type="checkbox"/> N	9. If Yes, Date:	10. Test Results:	11. <input type="checkbox"/> Positive <input type="checkbox"/> Negative
12. Comments:			

3.23.20

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Submit as attachment in addition to the existing SIR form your agency currently uses for any known or suspected case of COVID

Consumer and Employee Suspected COVID Attachment Forms can be found at:  
<https://westsiderc.org/service-providers/special-incident-reporting/#forms>

# For Additional Information Visit

- Westside Regional Center COVID-19 Resource Page  
<https://westsiderc.org/helpful-resources-to-prepare-for-the-coronavirus-covid-19/>
- Department of Developmental Services Coronavirus Information and Resource Page  
<https://www.dds.ca.gov/corona-virus-information-and-resources/>
- Centers for Disease Control COVID-19 Resource Page  
<https://www.cdc.gov/coronavirus/2019-ncov/index.html>
- California Department of Public Health  
<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/ncov2019.aspx>
- California Department of Social Services - Community Care Licensing  
<https://www.cdss.ca.gov/inforesources/community-care-licensing>

# Connect with us on Social Media



Facebook : <https://www.facebook.com/westsideregionalcenter/>



Instagram: <https://www.instagram.com/westsideregionalcenter/>



Youtube: [https://www.youtube.com/channel/UClICRuulosO8EsNTWCBwK1A?view\\_as=subscriber](https://www.youtube.com/channel/UClICRuulosO8EsNTWCBwK1A?view_as=subscriber)

# Thank You!

If you would like a copy of these slides sent to you directly please email  
[traininginfo@westsiderc.org](mailto:traininginfo@westsiderc.org)

