

Early information on coronavirus disease 2019 (COVID-19) suggests that older adults and people with health conditions have a heightened risk of getting very sick. An important step in preventing the spread of COVID-19 is to eliminate large groups of people coming together and to minimize the number of people congregating in close settings.

As a result, on Friday, March 13, 2020, the **New Jersey Division of Developmental Disabilities (Division) made the difficult decision to close all Division-funded, facility-based day program settings. Operators of these programs were directed to close the sites no later than Tuesday, March 17, 2020.** Additionally, the Division directed that community outings facilitated by any Division provider should be discontinued immediately, apart from trips necessary for the health and safety of an individual. You can read this directive at the following link:

<https://nj.gov/humanservices/ddd/documents/division-update-COVID19-03132020.pdf>

Division Updates

Also, if you were unable to view the March 9th webinar, “COVID-19 Update for Families and Providers,” you can access it at the following link, along with the companion guidance documents: <https://nj.gov/humanservices/ddd/news/news/index.html#2>

As always, the Division will periodically update its website, send out information in emails, and schedule webinars as needed. If you are not already subscribed to DDD News, email DDD.Communications@dhs.nj.gov and include "Division Update Subscribe" in the subject line.

NJ Department of Health COVID-19 Hotline

People who want additional guidance on how to manage the risks posed by COVID-19 can also contact the Department of Health at 1-800-222-1222 or via email at NCOV@doh.nj.gov. If you are calling from out-of-state, please call 1-800-962-1253. Trained healthcare professionals are standing by to answer questions about COVID-19. Calling the hotline is the best way to get answers to your questions about COVID-19. By email, please allow up to 48 hours for a response.

- *Please be aware that the hotline is for general questions and is not able to assist with locating testing, getting test results, or providing medical advice.*

Additional resources for up-to-date information

- NJ Department of Health COVID-19: www.nj.gov/health/cd/topics/ncov.shtml
24-Hour Hotline: 1-800-222-1222
- Contact Information for all local health departments in NJ: <http://localhealth.nj.gov>
- U.S. Centers for Disease Control & Prevention: www.cdc.gov/COVID19
- Subscribe to the CDC's COVID-19 newsletter: <https://tools.cdc.gov/campaignproxyservice/subscriptions.aspx>

Questions & Answers for Providers

How do I know if my facility-based day program setting is required to close?

For the purposes of this public health emergency, a Division-funded facility-based day service is defined as **any non-residential** congregate setting. Providers may not transport or gather individuals from multiple residences to a single location for shared service delivery. The services delivered in the setting do not matter because the focus is to eliminate groups of individuals from congregating together.

How do I know if the community outings I facilitate are no longer able to take place?

As with the day program setting requirements, providers may not transport or gather individuals from multiple residences to a single location for community outings, regardless of the services delivered at that location. Residential providers, however, may continue to plan home and community activities for individuals who live together, much as other households are doing during this time. Activities should be tailored to the interests of individuals and be based on their health and safety needs. These activities must also be consistent with the advice of public health authorities to avoid large gatherings or areas where groups of people congregate.

Please keep in mind that public health authorities may be restricting certain activities.

Can I continue to provide one-on-one services to individuals in their homes or communities (e.g. supported employment, therapies)?

Individuals who use in-home supports or a self-directed employee (SDE) can continue to do so unless the planning team (i.e., individual, family, guardian, and provider) determines that the services should not continue.

How long will facility-based day programs be closed?

Our first priority is the safety of our communities and the people we serve. Programs will be closed until directed by the Division after federal and state authorities advise that it is safe for individuals to congregate in large groups. The steps we are taking together are intended to keep individuals healthy and safe, slow the spread of COVID-19, and minimize the time that our communities need to employ social distancing.

As a residential provider, what services do I provide while day programs are closed?

Residential providers will need to ensure appropriate staffing and supervision during this time. You should continue to bill the authorized daily individual supports rate. If you also operate a closed day program, you may redeploy the day program staff to your residential programs – however, these staff must complete training on the following items for each home they will be working in, before their first shift:

- Emergency Evacuation Plan;
- Special needs of the individuals residing in the home (e.g., diet, positioning, devices, transfers, seizure protocol, health needs);
- On call system including information related to who is in charge and who is called if there is a problem;
- Fire alarm systems; and

- The Provider must also give the staff member a copy of the agency's Policy and Procedure Manual.

Is there a way to expedite the hiring additional staff to work in a residential setting?

Yes. Please see the relevant question in the *Information on Division and Licensing Operations* section of this document.

Will closed day providers be paid while they are unable to operate?

The financial sustainability of our program providers and the wellbeing of our workforce, especially our direct support professionals, is incredibly important to the Division. With this guidance, we are confirming that the Division will provide two weeks of funding to **holders of current day habilitation certifications** while we are awaiting information on additional federal funding and flexibility for payments beyond this period. Guidance on the amount and payment for these weeks will be provided as soon as possible.

Will residential providers be paid for additional staffing costs incurred because day programs are closed?

The financial sustainability of our program providers and the wellbeing of our workforce, especially our direct support professionals, is incredibly important to the Division. With this guidance, we are confirming that the Division will provide two weeks of funding to **residential providers billing the individual supports daily rate** while we are awaiting information on additional federal funding and flexibility for payments beyond this period. Providers should be able to demonstrate that they have arranged for additional staffing during the hours when day programs are closed and are meeting all licensing and program requirements. Guidance on the amount and payment for these hours will be provided as soon as possible.

As a residential provider, will I continue to be paid if an individual leaves the setting for treatment or because a family member would prefer they live at home?

The Division will continue to pay rental subsidies for individuals that intend to return to their residential settings. If the individual intends to return to their residential setting, the resident remains responsible for their contribution to the rent.

Reimbursement is not available for vacancies, for example if a client is discharged or chooses to move to a different community location.

Questions & Answers for Individuals and Their Families

If I live in a group home or supervised apartment, what are my options when my day program closes?

Your residential provider will arrange for in-home activities appropriate to your needs and interests. As with the day program setting requirements, providers may not transport or gather individuals from multiple residences to a single location for community outings, regardless of the services delivered at that location.

Residential providers, however, may continue to plan home and community activities for individuals who live together, much as other households are doing during this time. These activities must be consistent with the advice of public health authorities to avoid large gatherings or areas where groups of people congregate.

Please keep in mind that public health authorities may be restricting certain activities.

If I live in a private or family home, what are my options when my day program closes?

If you already have authorized hours for in-home providers and self-directed employee (SDE) services that meet your needs, you do not need to take any action. Your providers and SDEs will continue to be reimbursed as usual.

You may also contact your Support Coordinator to arrange for in-home services or hiring an SDE. Due to the circumstances, your Support Coordinator may not be able to approve an updated service plan before the service is provided. In order to ensure payment to the service providers, you will need to document the hours worked and services provided. Please work with your Support Coordinator to update your service plan as soon as possible, and no later than May 1, 2020.

With my day program closed, will in-home providers and self-directed employees (SDEs) be permitted to provide more hours than authorized in my service plan?

Yes, during this period, in-home providers and SDEs may work more than the hours approved in your service plan, as long the hours do not exceed your overall budget. Due to the circumstances, your Support Coordinator may not be able to approve an updated service plan before the service is provided. Therefore, please work with your Support Coordinator to update your service plan as soon as possible, and no later than May 1, 2020.

In order to ensure payment to the SDE, you will need to document the hours worked and services provided. Guidance on timesheet submission and payment for these hours will be provided as soon as possible.

Your in-home provider should track the additional hours worked and document the services provided. They will be able to submit these claims for reimbursement after your Support Coordinator updates the service plan.

With my day program closed, will self-directed employees be permitted to work over 40 hours per week in order to provide authorized or additional hours?

Yes, during this period, self-directed employees may temporarily work over 40 hours a week if needed to cover the hours authorized in your service plan. For example, if you are authorized for 50 hours, a single employee may work for all of them, if needed.

In order to ensure payment to the SDE, you will need to document the hours worked and services provided. Guidance on timesheet submission and payment for these hours will be provided as soon as possible.

If an SDE is going to provide more hours than authorized in your service plan, please refer to the question above for actions required by the Support Coordinator. For example, if you are authorized for 40 hours and a single employee works 50 hours in order to meet your needs, the additional hours are permitted and the employee is permitted to work overtime, as long the hours do not exceed your overall budget.

Can I hire a parent, spouse, or guardian as a self-directed employee?

Yes, the Division is temporarily lifting the restriction on a parent, spouse or guardian becoming an SDE. However, the regular hiring process must be followed. Contact your Support Coordinator for information on how to enroll with the fiscal intermediary. Individuals and families are encouraged to develop a backup plan in case an SDE or a provider is unable to provide care. Talk to family and friends about how they might help.

Is there a way to expedite the hiring of additional SDEs?

Yes. Please see the relevant question and answer in the *Information on Division and Licensing Operations* section of this document.

Information for Families of Individuals Living in Residential Settings

Can I visit my loved one who resides in a residential setting?

Yes, however, some providers are establishing screening protocols to ensure the health and safety of all individuals living and working in the home. You should contact the residence manager ahead of your visit to see what those protocols may be and what you need to do before visiting.

Can I take my loved one home from their residential setting for a visit or until this situation passes?

Yes, however, the residential provider may restrict an individual from returning if they pose a risk to other household members due to COVID-19 exposure or symptoms. Therefore, it is important that you are ready and able to care for your loved one for an extended period of time at your home, including a backup plan if they become sick. A discussion and planning session with the individual's residential provider is strongly encouraged. Also, please review the COVID-19 guidance documents provided by the Division: <https://nj.gov/humanservices/ddd/news/news/index.html#2>

Can my residential provider refuse to take my loved one back into the group home?

A provider cannot refuse services unless the Division's discharge process is followed. However, providers may establish screening protocols to ensure the health and safety of all individuals living and working in the home. This may include things like medical clearance or a screening by provider staff.

Information on Division and Licensing Operations

Are Division and Licensing offices still open?

Division and Licensing offices are operating as usual. Although working conditions may change in the future based on direction from the federal or state officials, all critical functions will continue to be performed. The Division On-Call and other phone lines will still be answered as usual. The Division On-Call number is 1-800-832-9173.

Will enforcement of licensing and other program guidelines change, such as those related to Komninos' Law and Tara's Law?

All licensing and program guidelines remain in effect. Investigations of abuse, neglect and exploitation will continue unchanged. Failure to meet guidance for hygiene, cleaning/disinfection, sanitation, and other aspects of client safety will result in both immediate and prospective negative licensing action.

The Department and the Division are required to enforce the statutory protections created by these laws, as follows:

- Department staff will continue to perform the incident verification and site visits required by Komninos' Law.
- Provider staff must continue to call 911 in situations where a prudent person could reasonably believe that a life-threatening emergency exists.
- Monthly case management contact for community care residences will continue.

Will Support Coordinators continue to meet with individuals in person?

Effective March 13, 2020, the Division directed Support Coordinators and Division staff to begin conducting meetings by video or phone and to meet in-person only if necessary for health and safety of the individual. Routine quarterly and annual visits will be conducted electronically or by telephone until further notice.

If there are service or billing changes, how will this be updated in iRecord?

Support Coordinators will eventually need to document all plan changes but services should be modified by providers now to ensure the health and safety of the individuals we serve. Please document all services provided and hours worked. Individuals will work with their Support Coordinators to update service plans as soon as possible, and no later than May 1, 2020.

Is there a way to expedite the hiring of staff, including SDEs, to provide additional services or hours?

Providers are encouraged to develop innovative staffing models to meet critical short-term and backup needs. This may include things like extending offers to family members of individuals who are willing and able to work with their loved ones.

The Department of Human Services (DHS) will provide expedited approval of emergency hiring requests. This includes SDEs. The provider or fiscal intermediary will follow the below process:

- Check the Central Registry of Offenders (<https://cro.dhs.state.nj.us>) before offering emergency applicants a position. If the applicant is not listed on the Central Registry, you may offer them a position and begin onboarding. The employee can begin training but may not have client contact until the background check has been

completed. DHS will determine if the person was previously cleared for hire and advise the agency promptly.

- Email requests to hire to DHS.ECCU@dhs.nj.gov with the subject line “REQUEST TO HIRE” – in the body of your email, including the following applicant or employee information:
 - Full first and last name;
 - Date of birth;
 - Last four digits of the person’s social security number.

DHS will determine if the person has already cleared the federal and state background check. If so, the employee may work without restriction. If not, the employee may work alongside another employee with at least one-year of direct care experience until the background information can be completed. Once the updated or initial background check is complete and clear, the employee may work without restriction.

The following timelines have been modified to accommodate expedited provider hiring:

- Pre-employment drug testing must be completed within the first 120 days of employment.
- Child Abuse Registry Information but must be completed within the first 120 days of employment.
- Training requirements for newly hired staff or day program staff working at a residential site.
 - The following training must be completed prior to first shift:
 - Emergency Evacuation Plan;
 - Special needs of the individuals residing in the home (e.g, diet, positioning, devices, transfers, seizure protocol, health needs);
 - On call system including information related to who is in charge and who is called if there is a problem;
 - Fire alarm systems; and
 - The Provider must also give the staff member a copy of the agency’s Policy and Procedure Manual.

Questions about COVID-19

Is there a way to purchase or obtain hand sanitizer, personal protective equipment (PPE), or similar supplies?

At this time, these items are only available through the normal retail channels. The Division will advise if federal, state or local partners are able to make them available in the future. Please be aware that use of PPE without proper training can increase the risk of infection and transmission.

What if someone develops COVID-19 signs or symptoms?

Contact a health care professional if you, an employee, or an individual in your care develops COVID signs or symptoms, including fever, cough and shortness of breath. Your healthcare provider will determine if they need to be seen and if they meet the criteria for certain tests, such as those for the flu, COVID-19 or other infections. More information about COVID 19 signs and symptoms is available at: www.cdc.gov/coronavirus/2019-ncov/downloads/COVID19-symptoms.pdf

Please refer to your local public health authority for COVID-19 reporting requirements and recommendations for what to do if someone in a home or program is diagnosed: <http://localhealth.nj.gov>

How can an individual get tested for COVID-19?

Contact your healthcare professional to discuss your symptoms. They will determine if testing is needed. Testing is not indicated for all circumstances. COVID-19 presents with signs and symptoms that may be indistinguishable from much more common respiratory viruses. At this time, respiratory illnesses are still more likely to be due to common viruses (e.g., influenza, common cold) than COVID-19. If a community has cases of COVID-19, local health officials will help identify those individuals and will follow up on next steps.

How do I care for someone with COVID-19?

A medical professional will provide advice on the care of someone with COVID-19. If possible, identify a room or area of the household that can be used to separate someone who is sick. A health care provider may make this recommendation based on the person's diagnosis.

Make sure you have a backup plan in place in case an individual's primary caregivers or support staff are unable to provide care. Talk to family, relatives, and friends about how they can help.

Will the Division be able to care for a sick individual if a family or provider cannot?

The Division is not able to offer medical care to sick individuals. However, if an individual is too sick to be cared for at home or is required to quarantine and cannot do so in their current living arrangement please contact the Division to see if we can be of assistance.