



**SCLARC VENDOR ADVISORY COMMITTEE
March 11, 2020 MEETING MINUTES—DRAFT**

IN ATTENDANCE: see below

I. Call to order

Meeting was called to order at 10:07am by Illona Hendrick

II. Welcome & Introductions

Illona Hendrick, Chair, welcomed everyone to the meeting.

III. Minutes

The minutes of the February 12, 2020 meeting were not approved due to time running out. They are tabled to next meeting.

IV. CENSUS 2020—YOU COUNT

Ms. Gibney provided a meeting on the Census. It takes place every ten years. Everyone counts regardless of conservatorship status. The numbers are used to make decisions that impact our communities such as work programs. The planning that goes into budgets comes from the census numbers. Tomorrow is the official start date of the census. We are hoping funding increases in our areas because we are the number 1 underreported community in the USA. Children are severely under-represented in the census. We need your help to make everyone count.

Starting March 12, people will start to receive census information. The 2020 Census can actually be filled out online. It can also be completed on your smart phone. If you fill out the census online, you will not get a knock on the door. There will be no question about immigration or legal status on the census.

Maura proceeded to show a sample of the census form and described the sections that must be completed. Individuals in group homes will be counted in the regular process or through “group quarters.” You may be contacted by a census worker (usually by mail) to let you know how you will be counted. Administrators should count everyone in their group home. They should not count staff unless the staff person actually lives there.

The Census will **NEVER** ask for your social security number, bank or credit card information, for money or political party affiliations. The data collected is only used for statistical purposes. It will not be shared with landlords or employers. Information will not be used to decide if a person is eligible for services or benefits. Federal law protects your information.

If you have any questions regarding the census, you can reach out to Maura Gibney at maurag@sclarc.org

v. COVID-19 (NOVEL CORONAVIRUS)

Ms. Illona Hendrick introduced Maricel Cruzat, the Director of Clinical Services at SCLARC. The topic is general information about coronavirus. Maricel introduced Ms. Gala Fair, MSN-ED, RN, PHN. She will go over the handouts. For anyone that was not able to get handouts, the VAC will email them to you by the end of the day.

Ms. Fair started with an overview as to how to respond regarding the coronavirus. It is important to protect yourself, staff and consumers.

Coronaviruses are part of a large family of viruses. Many of them infect animals, and some can be transferred from animal to human and then can spread from person-to-person. It is spread by droplets from coughing/sneezing, close contact with someone infected and touching objects the infected person has touched. The symptoms include: fever, cough, shortness of breath difficulty breathing, and severe illness. If you notice someone with these symptoms, it is important to contact the primary care physician to inform them of such.

There is no cure or treatment at the moment. There is no vaccine yet to treat coronavirus. Centers for Disease Control and Prevention (CDC) recommends people avoid nonessential travel to China, Italy, Iran, Japan and South Korea.

If you are sick, stay home. If you have a fever you want to at least wait 24 hours before returning to work. This means 24 hours after you last used medication to reduce fever or had a fever. It is important to wash your hands often. We are providing a variety of handouts on handwashing. It is important for our consumers to also wash their hands properly. If soap and water is not regularly available, use an alcohol-based sanitizer with at least 60% alcohol.

Wash your hands

- ✓ After coughing and sneezing
- ✓ When caring for the sick
- ✓ Before, during and after you prepare food
- ✓ After toilet use
- ✓ When hands are visibly dirty
- ✓ After handling animal waste

Protect others from getting sick. When coughing and sneezing cover your mouth and nose with flexed elbow or tissue. Tissue is to be thrown away immediately after use into a closed bin. Avoid close contact when you are experiencing cough and fever. Avoid spitting in public. Seek medical care early if you have fever, cough and difficulty breathing. CALL your primary care physician to get guidance as to what to do.

For updates, check reliable sources included in the packet. LACDPH, CDPH, CDC, WHO.

Q&A

1. How can we go about determining if someone is sick?
 - a. The guidance provided for facilities is to screen consumers and visitors. If there are visible symptoms, take precautions and monitor. Observe if they have symptoms.
2. What is the plan if a client has been exposed, how will RC let us know?
 - a. RC would communicate with the facility administrator. But normally, the administrator is the one notifying RC. Let us know if someone at your facility has been infected.

- b. RC is following guidance of public health. Within a 24-hour time frame, notify if someone is infected.
- 3. How long do the droplets remain active on surfaces?
 - a. Right now it is believed that droplets can survive for 14 days on a surface
 - b. Disinfect often in areas where consumers congregate
 - c. Take universal precautions
- 4. There is concern about cases where people do not have symptoms
 - a. Yes, you can be exposed and not display any symptoms within 14 days. Screening of consumer and visitors is important.
- 5. Brandi Brooks comment: Update policies regarding infection control and visitor policy was suggested at a meeting yesterday that some providers had. Make sure to have a written policy and update it if necessary.
- 6. There is a lot of guidance on the State websites to make sure that you are protecting health and safety. One of the recommendations regarding visitors is to use the screening process.

Maricel: _clinicalrequests@sclarc.org is the email you can send any new policies or current policies to if you want feedback in regards to your policies and how they should be affected by the coronavirus situation.

- 7. Parents are already cancelling visits and asking for no visitors to facilities. We are starting to get some clients that are refusing services. Can we utilize information you are providing to hand out to families to educate?
 - a. Yes you can. A lot of the info provided today is from agencies that have this information available to everyone on their websites.
- 8. Social distancing? How can we do that with limited space?
 - a. This is a case by case basis on your layout. Social distancing is ideal. It is important to utilize the screening tools to determine if someone is sick. Communicate with the program if there is a consumer that is being housed that has a suspected case. You may want to keep consumers home if there is potential for infection.
- 9. Everyone has colds from time to time. Are we to assume worst case scenario if someone has a fever? Someone sneezes once and we are all nervous about it.
 - a. Keep in mind that it is flu season right now. It is ok to make that call to the PCP if someone has symptoms. Err on the side of caution. Screen consumers and staff. The person may still need to be tested for influenza and may still need medication even if you don't suspect coronavirus you may still need to contact PCP.
- 10. Based on schools closing, what is the protocol or how are we going to be notified if our programs need to close?
 - a. Preventative measures should be made by each program based on what is best for their consumers. Screen consumers for potential illness. Everything is evolving right now. As we gain more knowledge, we will provide information. It is on a day by day basis right now.

- 11. PCP's have a specific test to decide if it is coronavirus?

- a. Yes, it is but it is not widely available as far as we know. Primary care physician will determine if the person needs to have the test done.
12. If there is a confirmed case, other than reporting to Public Health, are we also doing the SIR?
- a. Yes you still comply with the required SIR reporting to all necessary agencies.
13. Will the regional center send communication out to families?
- a. There is a letter for vendors dated March 10th included in your packet. There is a likelihood that a letter will be sent to families as well.
14. If a consumer is suspected of having coronavirus, will that facility be quarantined?
- a. This will be a decision of Community Care Licensing or Department of Public Health. They will let you know if your facility needs to close. The facility will need to be quarantined after a confirmed case for a certain amount of time. Licensing bodies will investigate and take action. Inform the regional center of any case as well.

Illona: The VAC will provide a packet of information online. Make sure your staff use hand sanitizer or wash with soap and water. Wash your hands. If you can, carry soap around because many places do not have soap. Sanitize the rooms and buses and everywhere that anyone touches. Buy supplies such as paper towels that will be used often in sanitizing.

Karina: there are some employment related things to consider. First, share your infection control/universal precaution policy and procedure with staff. Have them sign that they know and understand the policy. You can ask staff to stay off work if they have symptoms. Be careful about asking too deeply about medical conditions. We do not want to violate ADA guidelines so don't ask about what medical conditions they have or make them feel obligated to disclose medical conditions. Be aware that CDC is asking employers not to require MD notes for sick time as they are busy dealing with the current situation. They may not be able to provide a note to staff. If you have a policy in your employee handbook about requiring an MD note to return at 3 or more consecutive days out due to sickness you can continue using this policy. Lastly, be careful about stigmatizing employees if they are sick or become coronavirus positive. Employees should not be embarrassed, humiliated or harassed.

Kelli: coronavirus may be considered workers comp if they contract it at work. Protect your workers. Educate your employees. Perform routine cleaning. Take steps before employees travels overseas to make sure they protect themselves and protect yourself. The letter relating this will be sent via email.

Denise: how far will this go? Sports are being played without spectators. How much of life will this affect?

VI. SCLARC Executive Director

Mr. Dexter Henderson was introduced. He continued the conversation on coronavirus. We have to take universal precautions. Things we used to do, like hug a friend we haven't seen in a while, can no longer be done. We are in containment phase. We have to be safe and prudent. To the extent that we can reinforce the different ways of living and acting now, the before off we may be.

You can do things like develop games with the people you serve to get them to wash their hands. Practice with them, ask if they know how long to wash hands for and encourage hand washing in a fun way. When QA visits, you may be asked questions such as “is anyone sick right now” and “has anyone traveled recently”. You can ask that of visitors as well. Encourage staff to give honest information if they are feeling sick. Review your environmental health standards/precautions.

We do not have answers to all the questions. We do not know how long this will go on for. Throughout the country, they are reducing attending meetings. We should look into video conferences, webinars and telephone meetings. We are doing things proportionate to the circumstances. We do not have a lot of direction at this time from Department of Developmental Services as things are ever evolving. It is important to go to the material you have in your packets right now from the clinical services department. If there is a confirmed case of coronavirus, also report it to the state agencies. The state is making some masks available to regional centers to be used primarily for ICFs and medically-connected programs in the event that there are none at this point. This is for facilities with the medically-fragile. At some point, if necessary, regional centers will have the authority to make health and safety decisions so that there is no time delay.

In your facilities make the necessary prudent decisions. Assume there is no outside assistance, be ready to make necessary decisions. Stay on top of the information. Document as much as possible the actions that you take. All decisions should be documented with rationale for making that decision.

There was a question brought up about community integration. We do not have an answer to the question right now so we are not recommending to stop community integration but we don't suggest to take someone to a basketball game or large place of congregation. Chose community integration places that are not high volume. On the licensing side, you may be licensed for a number of people and the coverage is to go on community integration. You may want to avoid going to places that are crowded.

SCLARC is telling staff if they are sick, to stay home. SCLARC is being flexible with staff and we may change work schedules. SCLARC is also increasing the amount of cleaning that is going on. We have to take the disincentive out of people wanting/trying to come in to work when they are sick.

Question was brought up: If program has to close due to coronavirus, is there going to be funding for this?

The governor is working on a California emergency to help support the recovery of this emergency. We don't have a clear answer right now if there will be any funding if you do not provide the service. It is a question that is on everyone's mind and we will try to find out. In the past, for something like this (natural disaster) we had to provide meticulous information as to how much funding was lost in order to get some funding. At this time, it is not known if such will happen due to the coronavirus situation.

Illona asked about staffing ratios. If someone is sick and cannot come in and the ratios are now out of compliance what can we do? These things may happen. Have your documentation ready to

show why a staff member is out. Have a group of on-call people who you can call as replacement. Maybe you assist (program director/administrator) or other staff that are not usually in program can help (i.e. drivers). Have on call list of people that can come replace sick staff. These are all things you have to think about now.

Utilize the resources that are online such as the CDC and Department of Health. You may contact clinical department at SCLARC for questions.

For those that have to answer the HCBS questionnaire, do not base it on the current situation that the coronavirus is creating. Dr. Bowie commented that it is important to do the HCBS survey. If you do not do the survey, you will get a visit from Department of Developmental Services. SCLARC is now calling providers to remind them to do the survey. SCLARC has access to a list of providers that are required to do the survey but have not done so either. You have until March 31, 2020 to do the questionnaire.

VII. New/Old Business

Public Comments:

VIII. VAC Executive & Committee reports

Membership Committee: no report

Compliance Committee: no report

Legislative Committee: no report

Strategic Committee: no report

IX. Adjournment

Next meeting will be on April 8, 2020.

SIGN IN SHEET

March 11, 2020

In the interest of time, list will be provided at a later date.