



TRANSCRIPT
COMMUNITY FORUM: COVID-19
June 12, 2020 ▪ 12:00 pm via WebEx

WEBVTT

1

00:01:11.155 --> 00:01:17.185 **Director Reese:**
Good morning everyone this is Andy Reese with Department on Disability Services.
Welcome.

2

00:01:18.984 --> 00:01:26.635
I see that we have 134 people with us today.

3

00:01:28.105 --> 00:01:41.965
I will just start with giving an update as people know the data for DDA is
available on the Mayor's

4

00:01:41.965 --> 00:01:43.165
coronavirus@dc.gov

5

00:01:43.165 --> 00:01:56.424
website. What you may have noticed is for the past week, that data for the most
part has not changed. The only thing that has changed is the number of people who
have been classified as recovered has gone up.

6

00:01:57.534 --> 00:02:10.705
We continue to have 193 people who have tested positive, which has been the same
since last week, of those 193

7

00:02:11.305 --> 00:02:20.215
unfortunately, we have lost 25 people to COVID-19, currently in the hospital is
six people.

8

00:02:22.044 --> 00:02:25.194
This is the data as of the end of the day yesterday.

9

00:02:26.275 --> 00:02:40.705
People who received inpatient care and had been discharged from the hospital is 59
people and people who have been diagnosed and have not required inpatient care for
COVID-19

10



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00:02:40.705 --> 00:02:43.254
is 103 people.

11
00:02:43.884 --> 00:02:53.215
And I know that people have asked about and want me to provide the kinds of placements that those folks are in.

12
00:02:55.104 --> 00:03:08.574
So, host homes is two people. ICF is 70, people who live in their own homes is 13 with two people who lived in nursing homes,

13
00:03:10.224 --> 00:03:18.655
26 people who were in residential rehabilitation placements and 79 people in supported living placements.

14
00:03:21.145 --> 00:03:30.205
We have also had 230 provider staff who have tested positive of those

15
00:03:30.205 --> 00:03:38.905
there are still currently 92 who are out because of that positive result, 111 of them have returned to work,

16
00:03:40.164 --> 00:03:48.145
31 are not returning and six of the provider staff have died related to COVID-19.

17
00:03:52.705 --> 00:03:55.254
I wanted to provide a brief update for people, as

18
00:03:55.254 --> 00:03:55.914
you know

19
00:03:55.944 --> 00:03:57.625
we are currently in stage

20
00:03:57.625 --> 00:03:59.245
one of reopening,



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21

00:04:00.534 --> 00:04:15.145

and the mayor provided some information last week and some update this week regarding what the metrics are for moving to stage two. For our purposes

22

00:04:15.444 --> 00:04:20.605

What stage one had meant is that there is no longer a stay at home order

23

00:04:23.125 --> 00:04:23.904

however,

24

00:04:25.524 --> 00:04:26.785

you can leave your home,

25

00:04:26.785 --> 00:04:32.425

but there is not a lot of places you can go because during stage one,

26

00:04:32.754 --> 00:04:33.925

for example,

27

00:04:35.095 --> 00:04:35.605

you know,

28

00:04:35.785 --> 00:04:38.634

libraries are not open yet.

29

00:04:39.564 --> 00:04:48.985

However, there are select libraries that provide curbside service. Restaurants are open to provide service

30

00:04:49.074 --> 00:04:54.805

if they have outdoor dining with appropriate social distancing.

31

00:05:00.115 --> 00:05:04.495

Places of worship can provide in person services,

32



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00:05:04.644 --> 00:05:07.165
but only for up to ten people

33
00:05:07.884 --> 00:05:11.365
total. Parks are open,

34
00:05:11.574 --> 00:05:19.194
but not for any kind of group sports and playgrounds remain closed.

35
00:05:20.875 --> 00:05:32.425
And so, it is true that things are, you know, retail stores you can make arrangements to purchase something online and go pick it up at curbside from the store.

36
00:05:34.495 --> 00:05:42.865
You can now go get your haircut by appointment only and there are limitations on how many people can be in there at a time that kind of space requirements

37
00:05:42.865 --> 00:05:52.225
there are, so the next phase, phase two things will open a little bit more.

38
00:05:52.680 --> 00:05:57.925
And, as I said, the mayor shared this week or late last week what the

39
00:05:59.245 --> 00:06:02.605
metrics are that they are looking for

40
00:06:03.144 --> 00:06:17.995
in order to move to phase two and I think you can see that if you are participating via WebEx, I have shared my screen so that you can see what

41
00:06:17.995 --> 00:06:19.045
those metrics are.

42
00:06:19.045 --> 00:06:28.045
There is several different things that we are looking at first is that we continue to see this sustain decrease in community spread.



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43

00:06:29.334 --> 00:06:44.004

We have to see a sustained decrease for fourteen days and as you know, on the mayor's website, they share every day the number of new positive cases and so we need to keep seeing those numbers go down.

44

00:06:45.295 --> 00:06:59.214

And we need to see a transmission rate that remains below one for five days. Currently, the transmission rate in DC is at point nine.

45

00:06:59.425 --> 00:07:11.964

So, we are meeting that metric at this point in time, we have at this time nine days of sustaining decrease. So, five more days to go in terms of that metric.

46

00:07:13.404 --> 00:07:26.245

We have to see a low rate of positive test results for people who test for coronavirus and that result has to be less than 15 percent for seven days.

47

00:07:26.964 --> 00:07:33.985

The current positive rate in DC is 7.5 percent.

48

00:07:35.785 --> 00:07:48.925

We have to continue to see adequate health care system capacity, which means that we have to be using less than eighty percent of our hospital and healthcare capacity.

49

00:07:49.165 --> 00:07:57.685

So that we could manage any surge in the need for healthcare. We have been at seventy-five percent.

50

00:07:57.714 --> 00:08:06.384

We have been under the eighty percent, we are currently at seventy-five, we have been under eighty percent for ten days and we have to be under eighty percent for fourteen days.

51

00:08:07.524 --> 00:08:12.564

The last two metrics relate to contact tracing,



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52

00:08:14.425 --> 00:08:29.394

and this is where the district has really engaged and quite an effort to increase its capacity for contact tracing hiring literally hundreds of people between the district government and

53

00:08:30.355 --> 00:08:32.004

some contract agencies.

54

00:08:32.004 --> 00:08:33.325

And in addition to that,

55

00:08:33.804 --> 00:08:42.955

detailing a number of staff throughout the district government to work for a period of time, with DC health on getting our capacity for contact tracing up.

56

00:08:43.585 --> 00:08:58.105

And there are two metrics that they will be looking at, the first one is looking at ensuring that we make our first contact with someone who is a newly tested positive for COVID-19 within one day of learning of that positive test results

57

00:08:58.495 --> 00:09:01.254

and that needs to occur over ninety percent of the time.

58

00:09:02.245 --> 00:09:16.404

And the second is ensuring that we are making the first contact with all close contacts of people who test positive within two days of identifying who those people are, and that also needs to be over ninety percent.

59

00:09:19.884 --> 00:09:32.274

The district is just now standing up its full capacity for contact tracing and so there is not data to report on that yet, but that both of those have to be at over ninety percent.

60

00:09:32.934 --> 00:09:35.455

And once we achieve those,

61

00:09:35.754 --> 00:09:42.475



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then we will be able to move to stage three. Just so

62

00:09:42.475 --> 00:09:48.384

people are aware we are working with a group that includes stakeholders, providers, and

63

00:09:48.924 --> 00:09:56.245

DDS staff on helping us to define what all of our services really,

64

00:09:56.304 --> 00:09:56.634

you know,

65

00:09:57.745 --> 00:09:58.914

helping to

66

00:10:00.325 --> 00:10:05.875

develop and publish some guidance that will show exactly what services will look like,

67

00:10:05.875 --> 00:10:07.914

as we move through each of these stages,

68

00:10:09.414 --> 00:10:09.684

you know,

69

00:10:09.684 --> 00:10:11.125

a particular interest of course,

70

00:10:11.125 --> 00:10:12.235

is day services,

71

00:10:12.504 --> 00:10:13.674

but across the board,

72

00:10:13.674 --> 00:10:15.355

making sure that people are aware,



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73

00:10:15.625 --> 00:10:15.865
you know,

74

00:10:15.865 --> 00:10:17.245
what it is going to look like,

75

00:10:17.245 --> 00:10:21.115
in terms of service coordination through each of the stages.

76

00:10:21.985 --> 00:10:26.065
I will give you some previews of that,

77

00:10:26.845 --> 00:10:34.465
which are that even when we get to stage two at that point in time.

78

00:10:36.264 --> 00:10:50.455
The recommendation regarding visitation for people are that they can then once again, have visitors in their home, but we also want to continue to move cautiously.

79

00:10:50.455 --> 00:10:58.825
COVID-19 will still be with us at that point and remote work during stage

80

00:10:58.825 --> 00:11:09.384
two is still strongly encouraged and so even once we get to stage two, we will continue to provide service coordination remotely.

81

00:11:09.384 --> 00:11:20.274
We will continue to do monitoring remotely, any provider certification reviews that are done will still be remote. None of those face-to-face contacts

82

00:11:20.274 --> 00:11:25.105
will happen until we get to stage three and just so,

83

00:11:25.105 --> 00:11:25.945



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people are aware,

84

00:11:26.904 --> 00:11:41.575

the general definition for stage two is only localized transmissions and that the metrics for demonstrating only localized transmission are those that I provided to you before stage three is

85

00:11:41.575 --> 00:11:44.215

defined as sporadic transmission.

86

00:11:44.274 --> 00:11:56.845

And we have not yet seen how DC health in the mayor's office will define sporadic transmission. Stage four is already defined, stage

87

00:11:56.845 --> 00:12:01.674

four is when we reach that new normal and it is, at that point

88

00:12:03.235 --> 00:12:16.465

is when we have either a cure for COVID-19 or an effective vaccine and so until we are at stage four, we are not at a point. Really

89

00:12:16.465 --> 00:12:21.985

that is sort of a new normal in DC and up until that point.

90

00:12:22.014 --> 00:12:22.315

Just,

91

00:12:22.315 --> 00:12:23.154

as a reminder,

92

00:12:23.154 --> 00:12:25.284

as I like to do with these calls all the time,

93

00:12:25.524 --> 00:12:34.404

it is essential that we continue to practice all of those safe habits that are necessary to keep the risk of transmission low for everyone,



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94
00:12:34.674 --> 00:12:35.424
which includes,

95
00:12:35.424 --> 00:12:35.904
of course,

96
00:12:36.205 --> 00:12:37.404
social distancing,

97
00:12:37.434 --> 00:12:41.125
making sure you are standing at least six feet away from anyone else,

98
00:12:41.934 --> 00:12:56.754
using face coverings for those times that you may not be able to maintain that social distance, making sure that you are washing your hands for at least twenty seconds regularly throughout the day and doing

99
00:12:56.754 --> 00:13:03.745
your best not to touch your face. I think that is everything I had to share.

100
00:13:03.955 --> 00:13:13.585
We actually in advance had only gotten one question and so people can certainly feel free to ask questions.

101
00:13:18.684 --> 00:13:19.794
The

102
00:13:22.075 --> 00:13:23.065
Chat box.

103
00:13:32.784 --> 00:13:34.075 **Question:**
The question is,

104
00:13:34.134 --> 00:13:48.565
I was informed my provider received an increase because of COVID-19 was I supposed to get a raise? **Andrew Reese:** So, I have not seen a



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105

00:13:48.565 --> 00:13:50.875

question in the chat box about this yet,

106

00:13:50.875 --> 00:13:56.095

but I am going to assume and provide a response to sort of follow-up question to this

107

00:13:56.784 --> 00:13:58.225

as people may be aware,

108

00:13:58.495 --> 00:14:02.634

we publish the appendix K,

109

00:14:02.664 --> 00:14:12.745

which was it allowed us to make some changes in our payments for waiver providers

110

00:14:17.605 --> 00:14:18.924

as that was published.

111

00:14:18.924 --> 00:14:28.644

We identified some areas where we felt that we needed to make some amendments. We still do not have an answer on the status of those amendments.

112

00:14:33.924 --> 00:14:36.715

The appendix K

113

00:14:37.014 --> 00:14:39.894

which we have reviewed a couple of times in these meetings,

114

00:14:40.105 --> 00:14:42.924

establish new rates for providers,

115

00:14:44.245 --> 00:14:48.384

including adjustment to daily rates



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116
00:14:48.445 --> 00:14:53.784
in residential placement in the appendix K

117
00:14:53.784 --> 00:14:57.654
it was described as to account for the possibility of increased over time.

118
00:14:58.855 --> 00:15:03.264
We also establish a modified rate

119
00:15:04.404 --> 00:15:09.534
what we were calling a quarantine rate for people who were working in instances where,

120
00:15:12.835 --> 00:15:15.054
where there was a person who had tested positive,

121
00:15:15.054 --> 00:15:27.294
or where there had been exposure and a person was self-quarantining for two weeks because of the expectation that it could cost more to pay someone to work in that circumstance.

122
00:15:27.294 --> 00:15:36.414
And so, we enhance the rate in that instance, each of those changes to the rates, however, or changes to the rates that we pay providers.

123
00:15:36.414 --> 00:15:40.825
So specific questions about what the provider paid

124
00:15:40.855 --> 00:15:53.965
their individual staff really need to be addressed within each provider agency there are provider agencies that had already enhanced the rate on their own and were working out how they were going to pay for that and our,

125
00:15:54.024 --> 00:15:54.414
you know,

126



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00:15:54.924 --> 00:15:58.945
working with us on what the appendix includes so that they can cover those costs.

127
00:16:00.149 --> 00:16:14.754
In addition to the changes that we have made, DHCF also made changes in their payment to providers to address cost shift that were there in the

128
00:16:14.754 --> 00:16:16.254
intermediate care facility.

129
00:16:17.544 --> 00:16:29.965
All of those are changes in payments that we made to providers. So, people should really ask at the individual provider level when they have questions about how the payment is calculated for them.

130
00:16:32.184 --> 00:16:39.924 **Question:**
I also happened to see a related question about. We have done the necessary posting for the July one rate?

131
00:16:39.955 --> 00:16:48.174 **Andrew Reese:**
We are ready for the July one rate, which is when the new minimum wage goes into effect and things will be adjusted accordingly at that time.

132
00:16:50.875 --> 00:17:04.105 **Question:**
Is there a modify rate for in home support other than the overtime and quarantine rate and all hourly services have been modified

133
00:17:05.694 --> 00:17:15.384
in the appendix case submission that has yet to be approved? **Andrew Reese:** In other words, we do not know.

134
00:17:15.744 --> 00:17:28.434
So, one of the things that we recognized is that we have modified the rate for all the daily rates and the original appendix K included an overtime rate,

135
00:17:28.855 --> 00:17:42.025



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but it did not include an enhanced rate for the hourly rate for six services, and we have pending an amendment to our appendix K that will address that and unfortunately it is still pending.

136

00:17:46.075 --> 00:17:48.775

So, at this time the answer to that question is no.

137

00:17:52.375 --> 00:18:01.285 **Question:**

Dr. Brown indicated on the call last week that he is not able to get into hospitals now. Why is that?

138

00:18:01.704 --> 00:18:10.644

How many people who were hospitalized with COVID has he been involved with?

Winslow Woodland: This question has been answered in

139

00:18:13.734 --> 00:18:28.134

three different ways, and I just do not feel that we should be sharing individual's hospitalization data on our contractor on this call. **Andrew Reese:** So, one of the, I just want to say a couple of things.

140

00:18:28.134 --> 00:18:41.575

One is Dr Brown consults, he does not treat and so we can work with the DC Hospital Association regarding challenges with access to direct care for patients,

141

00:18:41.970 --> 00:18:52.494

but Dr. Brown has been able to consult with treating physicians for people who are hospitalized. So, I do not want to mislead people in that regard.

142

00:18:52.494 --> 00:19:01.974

It is not that he is not available once someone goes into the hospital. Dr. Brown people who know him would know that,

143

00:19:01.974 --> 00:19:11.664

I think he is much more comfortable being able to lay eyes on a person when he is consulting, which historically had not been the way our consulting physician had done things.

144

00:19:11.664 --> 00:19:23.545



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They had done much more sort of, they were very much prepared for our COVID-19 of doing things remotely and being able to consult with doctors over the phone or view the medical records remotely.

145

00:19:26.934 --> 00:19:39.805

We had published, I believe our guidance about when the consulting physician gets involved, as I said before we currently have six people in the hospital. I do not know the specifics of how many of those he is consulting with.

146

00:20:20.275 --> 00:20:21.924

I think the sound is cutting out.

147

00:20:47.664 --> 00:21:02.454 **Question:**

Good afternoon everyone. Are providers permitted to sign auto or hand for any people that they are working with pending verbal consent on file in writing from people?

148

00:21:06.684 --> 00:21:18.684 **Andrew Reese:**

So, I really do not understand that question. Frankly, I mean maybe you have a guest at it Winslow, but I do not understand. **Winslow Woodland:** Yeah, could that person clarify.

149

00:21:20.275 --> 00:21:27.625

Well, they text their question because there is some, you know, not everyone uses the WebEx and that question came in via text.

150

00:21:30.265 --> 00:21:32.575

So, that question needs to be clarified.

151

00:21:37.315 --> 00:21:38.125

152

00:21:56.694 --> 00:22:05.934 **Question:**

Are providers permitted to sign for any consumers that they are working with pending verbal consent on file from consumers?

153

00:22:06.359 --> 00:22:18.714



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Winslow Woodland: No. **Andrew Reese:** That whole question, frankly, has me confused about verbal consent. I mean, even consent generally in that

154

00:22:19.285 --> 00:22:25.045

I do not even know what this person is supposedly consenting for because in most instances,

155

00:22:25.674 --> 00:22:26.994

if we are talking about Telehealth

156

00:22:26.994 --> 00:22:29.335

and how consent work when you are doing

157

00:22:29.335 --> 00:22:35.934

Telehealth that is a question for the doctor who is providing the service, right.

158

00:22:35.934 --> 00:22:38.785

Whatever clinician is providing that particular service.

159

00:22:42.535 --> 00:22:56.545 **Question:**

So, we have a request that next week can we have MTM present and let us know what steps they are taking to keep people safe and how they anticipate operating as we move forward.

160

00:22:56.545 --> 00:23:00.355 **Winslow Woodland:**

And that is an excellent idea, we will reach out to MTM

161

00:23:00.809 --> 00:23:03.055

today and see if they will be available.

162

00:23:10.075 --> 00:23:10.315

163

00:23:11.095 --> 00:23:11.785

164



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00:23:24.174 --> 00:23:25.555
Are there any other questions?

165
00:23:45.984 --> 00:23:50.664 **Question:**
How many residents are currently considered under quarantine?

166
00:23:51.924 --> 00:24:03.444
Excellent question. **Andrew Reese:** So, with the homes that are being monitored, because there has been an exposure there is just four homes with ten people.

167
00:24:10.464 --> 00:24:20.785 **Question: Winslow Woodland:**
And the next question is, and I do apologize. What does MTM? MTM stands for medical transportation.

168
00:24:21.085 --> 00:24:26.785
Oh, sorry someone say that it is a medication transportation provider.

169
00:24:27.055 --> 00:24:30.954
They are actually the broker of the transportation providers

170
00:24:31.315 --> 00:24:45.805
and they actually assign transportation companies to provide pick-ups and drop-offs to medical appointments and other habilitative type of

171
00:24:46.015 --> 00:24:46.795
services.

172
00:24:47.640 --> 00:24:54.055
But we will reach out to them, as matter of fact, I will email them as soon as I get off the phone and see if they would be available to come and talk to us.

173
00:25:13.615 --> 00:25:27.835 **Kirk Dobson:**
This is Kirk Dobson, I just wanted to clarify the last comment that came up before the text message that was sent and said to clarify refer to individual treatment plans. Some vendors seem to think they are permitted to sign plans for RSA consumers under current COVID-19,

174



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00:25:28.619 --> 00:25:30.865
is this not illegal or ethical?

175
00:25:43.525 --> 00:25:43.855

176
00:25:43.855 --> 00:25:45.474 **Crystal Thomas:**
Kirk, Can you repeat what you said.

177
00:25:53.875 --> 00:26:08.634 **Winslow Woodland:**
Kirk can you repeat the question, please. **Kirk Dobson:** Sure, my phone was muted. It said to clarify and this is going back to the confirmation for verbal consent or written consent. The person's responded to clarify different individual treatment plans.

178
00:26:08.845 --> 00:26:22.375
Some vendors seem to think that they are permitted to sign plans for RSA consumers under the current pandemic. Is this not illegal or ethical? **Andrew Reese:** I will not get to legal or ethical issues.

179
00:26:22.404 --> 00:26:36.924
It is inappropriate. The, the, there are treatment plans. First of all. That is RSA are involved in their individualized plans for employment, and they specifically call for the client's signature.

180
00:26:37.464 --> 00:26:50.065
We have addressed this multiple times on this call in which I have said, there are circumstances where we are waiting for the client to return the document with their physical signature on it.

181
00:26:50.065 --> 00:26:59.694
And as long as they confirm that they have signed it will have written on our record client consented mailed for signature.

182
00:27:00.625 --> 00:27:04.974
And that is good to go and then we need to make sure.

183
00:27:04.974 --> 00:27:07.644



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And what has all happened quite often in the past,

184

00:27:07.855 --> 00:27:12.474

is that we have worked with the provider who is working directly with the person and sees them

185

00:27:12.474 --> 00:27:19.644

physically quite regularly to make sure that the provider gets the document from the person and get it back to us,

186

00:27:20.424 --> 00:27:20.664

but

187

00:27:21.085 --> 00:27:21.505

you know

188

00:27:21.744 --> 00:27:24.750

this is not something that is new,

189

00:27:24.775 --> 00:27:26.365

quite frankly, with COVID.

190

00:27:27.055 --> 00:27:27.984

We have,

191

00:27:30.325 --> 00:27:44.244

I will not estimate the number, but well over a hundred people who attend college outside the DC area. So, we deal with having to get signatures from people who we do not work with physically all the time and this has not changed with COVID

192

00:27:44.664 --> 00:27:56.755

and there is no one, unless they have been specifically authorized as a representative for the person who was authorized to sign on behalf of a person.

193

00:28:01.494 --> 00:28:10.734 **Question:**

As we engage with people we support around reopening. We are consistently asked about what type of visits are



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194

00:28:10.734 --> 00:28:18.595

okay, we are continuing to restrict in person visits in the home as noted,

195

00:28:19.045 --> 00:28:32.154

but is there any restriction on arranging outdoor visit with family/guardians following appropriate social distancing and masking guidelines?

196

00:28:32.575 --> 00:28:46.410

Would you ask that these be tracked in our visitor screening logs if facilitated by the provider? **Andrew Reese:** So, they are not a visitor to the placement.

197

00:28:46.404 --> 00:28:51.595

So, there is no requirement to log in there; however, keeping in mind. First of all

198

00:28:53.664 --> 00:29:07.974

there is no longer a stay at home order. So, visitation with people outside the home can occur and I would hope is occurring and people have been in for a long time and they are probably wanting to see people.

199

00:29:08.154 --> 00:29:08.904

And as I said

200

00:29:08.904 --> 00:29:09.384

before

201

00:29:09.384 --> 00:29:15.865

it is essential that we continue to practice all of those practices

202

00:29:15.865 --> 00:29:16.674

we know of

203

00:29:16.674 --> 00:29:19.884

in terms of regular hand washing for

204



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00:29:19.884 --> 00:29:23.815
at least twenty seconds, maintaining social distance, standing

205
00:29:23.815 --> 00:29:27.295
at least six feet from people, keeping on face covering

206
00:29:27.894 --> 00:29:39.115
and those things should also be practice if people have a visit with family members. Now, the one caveat where you said would it be a good idea to maintain that information.

207
00:29:39.295 --> 00:29:54.025
If they are visiting with family, we have their contact information already. If the person were to test positive through this contact tracing force, we would then have to identify within this period of time.

208
00:29:56.934 --> 00:30:11.365
Within a particular period of time that the contact tracer asks about with whom did they have contact and how can we get in touch with those people, but I would expect that if someone is visiting family, we already have all of that information. But, yeah, it is important.

209
00:30:11.394 --> 00:30:23.815
It is important to note to my understanding, like restaurants that have opened are supposed to be collecting the names of everyone that comes to the restaurant. And the purpose of that is in the event there is a positive result

210
00:30:23.934 --> 00:30:37.525
they are going to have to reach out to those people to say, on the day that you were here someone who had close personal contact with you tested positive and therefore, you may need to get a test.

211
00:30:37.525 --> 00:30:50.214
So, it is important to know who the person had contact with for people who are out and about you need to be sort of documenting for yourself where you are going in the event

212
00:30:50.214 --> 00:30:53.454
you are going to have to provide that information to someone later.



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213

00:30:53.724 --> 00:31:05.515

But that is the kind of thing that contact tracers are used to doing in that. You know, I made an appointment to get my haircut, but I do not remember the person's name, but it was here is the address, right away.

214

00:31:06.144 --> 00:31:20.095

It is their job to track that kind of stuff down. **Question:** Our persons are currently not able to complete spin down plans because some of their vacation plans has been cancelled.

215

00:31:20.575 --> 00:31:23.244

How do we handle over resources

216

00:31:23.519 --> 00:31:30.654

to prevent our persons from losing their Medicaid benefits during the pandemic?

217

00:31:33.835 --> 00:31:35.454 **Andrew Reese:**

As part of the planning process,

218

00:31:35.454 --> 00:31:40.974

you should be looking at the resources someone has and what needs to be spent and how,

219

00:31:40.974 --> 00:31:41.275

which,

220

00:31:41.305 --> 00:31:41.634

you know,

221

00:31:41.634 --> 00:31:49.855

and then making plans together about how it should be spent is there equipment that the person does not have that they would benefit from having,

222

00:31:51.119 --> 00:31:51.684

you know,



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223

00:31:52.375 --> 00:31:57.144

none of us are able to go on vacation right now and so

224

00:31:57.144 --> 00:31:57.954

for many of us

225

00:31:57.954 --> 00:32:12.865

it means the ability to save have people looked into Able Accounts, because that is the way that many of the people we support can save and keep resources protected from counting against

226

00:32:12.865 --> 00:32:14.815

you in order to maintain benefits.

227

00:32:15.355 --> 00:32:25.494

I think that it is a great question because people need to be thinking about it. It is a great problem to have, that I have this money that I have not spent.

228

00:32:25.555 --> 00:32:39.565

So, what is a responsible way that I can either save this money in a particular place where it does not count as a resource against me or what is an appropriate resource that I need to purchase that I had not planned for originally,

229

00:32:39.714 --> 00:32:45.924

that might benefit me going forward and those are issues that really need to be addressed by the team.

230

00:33:01.134 --> 00:33:09.295 **Winslow Woodland:**

For those on the phone, our General Counsel has provided this statement: Providers should never sign for the person,

231

00:33:10.434 --> 00:33:13.375

substitute decision makers and guardians

232

00:33:13.375 --> 00:33:17.934

are the only persons who should be signing for people



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233
00:33:17.964 --> 00:33:20.605
and only in those limited circumstances,

234
00:33:20.880 --> 00:33:30.954
usually for medical issues unless it is a general guardian. Moving

235
00:33:30.954 --> 00:33:31.315
right

236
00:33:31.315 --> 00:33:34.045
along into the next question.

237
00:33:36.265 --> 00:33:50.545 : **Question:**
When do we anticipate reopening day programs? **Andrew Reese:** So, that is a really good question and we are working with day providers. There is a group that is meeting again next week to talk about that.

238
00:33:51.265 --> 00:34:03.744
One of the things that I think is really important for people to be aware of, we are actually working closely with in doing the planning currently we are working closely with providers and some stakeholders

239
00:34:04.734 --> 00:34:15.385
to look at this question not just about facility-based day programs, but about all of our day services and how do we move forward with people re-engaging in services outside the home.

240
00:34:16.855 --> 00:34:19.074
But as it relates to facility base,

241
00:34:19.074 --> 00:34:33.684
we are also coordinating closely now with the Department of Aging and Community Living because they had some of the same issues that we do regarding concerns about the safety for people attending a facility based

242
00:34:33.684 --> 00:34:37.045
program like that and together



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243

00:34:37.045 --> 00:34:51.625

we will be working with DC Health to make sure that any recommendations that we have ensure the safety of the people attending these programs just so that people have an idea of where those

244

00:34:51.625 --> 00:34:54.295

recommendations seemed to be headed.

245

00:34:56.215 --> 00:35:10.014

I do not see given our current circumstances that we will have the opportunity for any facility-based programming where you have more than ten people in a facility or at least a part of a facility.

246

00:35:10.014 --> 00:35:24.264

That is isolated from the rest of it, including people supported and staff until we get to stage four, which is there is a vaccine, an effective vaccine or a cure.

247

00:35:24.655 --> 00:35:32.005

and until that time we are going to have to maintain these social distancing practices in these good hygiene practices,

248

00:35:32.250 --> 00:35:47.094

of regularly washing hands, staying six feet from people. This is really going to preclude any kind of large day program where you have more than ten people. It, it may be that you have facilities where you can create sort of a couple

249

00:35:48.355 --> 00:36:00.985

Different facilities within a facility, but you are not going to have a facility with any kind of shared staff or shared facilities where there are more than ten people for quite some time.

250

00:36:03.474 --> 00:36:12.835 **Question:**

Next question: With the change in environment due to COVID-19

251

00:36:12.864 --> 00:36:27.835



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is there a plan with DDS to subsidize training utilization of technology to improve services to our people given that acquisition of these technologies may be out of reach for small provides?

252

00:36:32.514 --> 00:36:33.114 **Winslow Woodland:**
So,

253

00:36:33.775 --> 00:36:35.635
It is a very interesting question,

254

00:36:36.144 --> 00:36:41.034
but we do have within all providers,

255

00:36:41.394 --> 00:36:42.175
support people

256

00:36:42.175 --> 00:36:42.954
residential,

257

00:36:43.405 --> 00:36:52.675
residentially their budgets for those residential supports that includes cable and include telephone.

258

00:36:52.980 --> 00:37:05.155
So, with regard to the technology, I just wonder if it is a matter of purchasing a computer and I heard someone talk about spin down a little while ago.

259

00:37:06.204 --> 00:37:20.394
The idea that we would have to approach those on an individual basis to determine what the person's needs are an intern, determine how to acquire this specific technology and in terms of training.

260

00:37:20.425 --> 00:37:26.514
I know that they are opportunities where we are seeking to become a part of the grant.

261

00:37:26.514 --> 00:37:40.885



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Where that is exactly what will be doing for folks in terms of supporting them in assessing and their technological needs supporting their ability to use the tech. Well, acquiring the technology.

262

00:37:41.159 --> 00:37:43.164

And then the use of the technology.

263

00:37:47.275 --> 00:37:57.355

I just noticed that Precious added to the response to one question, which I think was really helpful, which is that I am keeping in mind that in some homes

264

00:37:57.355 --> 00:38:10.614

you could easily get to more than ten people in the home and people need to be very aware of this. Keeping in mind, first of all in stage two, in stage one which is where we are right now

265

00:38:10.855 --> 00:38:16.855

there still should not be visits happening in the home. In stage two when there will be visits happening in the home,

266

00:38:17.364 --> 00:38:27.235

you still have to think about what those visits look like and thanks for reminding us of this Precious. Which is you still should not have more than ten people.

267

00:38:28.434 --> 00:38:35.784

You know, you cannot have that big family birthday party, even in stage two, where you have got a whole bunch of people close to each other.

268

00:38:35.784 --> 00:38:44.545

We still got to be practicing safe social distance, face coverings and hand washing throughout stage three

269

00:38:44.815 --> 00:38:55.195

and so, it is going to be really important for people to remember to keep these protocols in place in stages two and three about maintaining safety within the home.

270

00:39:00.114 --> 00:39:10.045 **Crystal Thomas:**



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We received the comment, thank you for mentioning Able Account and a website for more information. So that is <https://savewithable.com/dc/home.html>

273

00:39:24.655 --> 00:39:27.684 **Andrew Reese:**

Someone had also mentioned, I do not see it in the comments anymore.

274

00:39:27.775 --> 00:39:42.655

Someone also mentioned that a good thing for people to be considering doing with their vacation money might be thinking about technology needs they have and addressing them with those additional funds that are available to them.

275

00:40:17.304 --> 00:40:28.434 **Winslow Woodland:**

There was a question on when is phase two starting. We are going to put the link that will give you the information that the Director shared earlier in the call,

276

00:40:28.434 --> 00:40:37.494

not to go back and repeat that because we have already covered that earlier in the call.

277

00:40:40.375 --> 00:40:49.885 **Andrew Reese:**

But you can get up to date information at coronavirus.dc.gov and you will see in the link at the top of the page,

278

00:40:52.045 --> 00:41:01.585

it provides you with the current status, in terms of, right up at the top

279

00:41:01.614 --> 00:41:10.554

it says there is a situational update and so you can see what was provided as people may be aware,

280

00:41:10.704 --> 00:41:13.255

the mayor has press briefings,

281

00:41:15.684 --> 00:41:16.045

Monday,

282



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00:41:16.045 --> 00:41:16.465
Wednesday,

283
00:41:16.465 --> 00:41:18.144
and Friday at eleven am,

284
00:41:18.744 --> 00:41:26.184
and it is very helpful to tune into those because you will get real time updates
and those press briefings.

285
00:41:28.045 --> 00:41:33.804 **Question:**
There is a question. Are there specific guidelines for taken person served on
vacation?

286
00:41:34.945 --> 00:41:44.514 **Andrew Reese:**
So, first of all in stages one and two travel is discouraged unless it is
traveling to

287
00:41:49.195 --> 00:41:56.724
refers to non-essential trip travel so, unless it is to accomplish some essential
thing, travel is discouraged.

288
00:41:56.994 --> 00:42:05.125
So, until we get to, at least stage three talking about traveling for a vacation
is not really appropriate.

289
00:42:09.355 --> 00:42:20.485
And, you know, the thing to keep in mind, the district has been doing quite well
in seeing the numbers of new cases go down.

290
00:42:22.554 --> 00:42:34.764
There has not been, there is not consistency across the country in enforcing the
kinds of necessary restrictions to ensure that the numbers stay down.

291
00:42:35.155 --> 00:42:38.784
So, as people begin to think about traveling, that is those.

292



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00:42:38.815 --> 00:42:47.034

That is something you really need to think about is what the guidance is in the state where you plan to travel to,

293

00:42:47.394 --> 00:42:58.855

which is one of the reasons for discouraging travel is that we know what steps are being taken in the district to ensure people safety.

294

00:43:03.414 --> 00:43:04.525 **Question:**

June 19th

295

00:43:04.554 --> 00:43:09.085

is the schedule for stage two is that correct?

296

00:43:09.144 --> 00:43:23.755 **Andrew Reese:**

No, as I mentioned at the beginning, there are certain metrics that need to be achieved and the best thing to do is to log into the mayor's website and then to listen to the press briefings each day.

297

00:43:25.105 --> 00:43:33.355

and from that, you will be able to tell, because, as I look at the guidance that I reviewed.

298

00:43:34.704 --> 00:43:49.465

At the beginning there was not anyone on the contact tracing force and June 19th is it

299

00:43:49.465 --> 00:43:51.594

just about a little about a week from now.

300

00:43:51.835 --> 00:43:59.875

Yeah, that is the next Friday. I am not aware of anyone saying that we are going to get to.

301

00:44:03.505 --> 00:44:07.284

All of these metrics by next Friday,

302



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00:44:07.284 --> 00:44:22.224

especially given that we have to be over ninety percent in our contact tracing capacity in contacting people who newly tested positive and contacting contacts of

303

00:44:22.224 --> 00:44:25.525

people who newly tested positive for,

304

00:44:26.034 --> 00:44:27.474

for people who tested positive.

305

00:44:27.474 --> 00:44:32.425

That is within one day for their contacts within two days, over ninety percent of the time.

306

00:44:32.815 --> 00:44:45.804

Now, for every other metric, it is a reality that we could be there by next week because the requirements are low trans.

307

00:44:47.695 --> 00:44:58.195

Sustain decreasing community spread for fourteen days, and we are already at nine days, low transmission rate. So, we need to see that number stay below one.

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00:44:58.195 --> 00:45:12.684

It has been below one for some time now, but it needs to stay there for five days. Positivity rate below fifteen percent for seven days. It is currently at seven-point five percent.

309

00:45:12.744 --> 00:45:27.324

So, we hope that stays low maintaining the healthcare capacity at below that the healthcare utilization is below eighty percent for fourteen days to ensure that we have what is called surge

310

00:45:27.684 --> 00:45:32.994

capacity and making sure the contact tracing capacity is where we needed to be.

311

00:45:33.295 --> 00:45:42.474

So is all that going to be there unless the mayor announced this morning that her view is that we are there I have not heard that.



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312

00:45:42.925 --> 00:45:43.434

And,

313

00:45:44.250 --> 00:45:44.664

you know,

314

00:45:45.264 --> 00:45:45.835

like I say,

315

00:45:45.835 --> 00:45:49.074

the best thing is to just keep watching the,

316

00:45:50.730 --> 00:46:05.605

that may or press briefings and you will get the real time update they are about where things stand in terms of these various metrics.

317

00:46:05.605 --> 00:46:07.434 **Question:**

For providers that are based outside of the DMV

318

00:46:07.465 --> 00:46:13.585

are we to follow our own space protocol? **Andrew Reese:** Absolutely.

319

00:46:32.244 --> 00:46:46.974 **Crystal Thomas:**

So, for those of you on the line, you can text 202-590-7618 or you can text your questions in the chat box.

320

00:47:46.974 --> 00:47:50.605

Well, hold for a moment for any additional questions.

321

00:48:48.204 --> 00:48:59.815 **Kirk Dobson:**

Director Reese this is Kirk again, there is a question that came in as a follow up. Are over resource issue is the threshold, the threshold now four thousand dollars as opposed to two thousand dollars for concerns?

322

00:49:00.594 --> 00:49:07.465



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Again as a follow up to her over resource issue is a threshold, now four thousand dollars as opposed to two thousand dollars for concerns.

323

00:49:15.144 --> 00:49:27.054

Can I just say, Marie, I thought you were a mental health professional too, because I am quite comfortable with the silence. I always allow the silence to do the work so that people then come up with additional questions.

324

00:49:27.445 --> 00:49:41.844

and I understand that someone texted in a question, which was a question about whether there has been a change in the resource limit for social security. I am not aware of such a change.

325

00:49:42.085 --> 00:49:56.605

The one issue related to resource limits and social security is that people who received the twelve hundred dollars that they are allowed a year that does not count toward their resources for a year.

326

00:49:56.784 --> 00:50:07.704

They are allowed a year before they have to spend those resources in the same way, people who get a back payment or allowed additional funds.

327

00:50:23.965 --> 00:50:30.655

I think Sandy's responding to this, saying the resource limit on Medicaid is four thousand, we will have to check into that

328

00:50:30.655 --> 00:50:32.094

and we will confirm next week.

330

00:50:37.824 --> 00:50:38.275 **Question:**

July 1

331

00:50:38.275 --> 00:50:42.414

living wage

332

00:50:42.715 --> 00:50:52.315



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will there be a standard increase in all rates to accommodate all aspects of waiver services or just

333

00:50:52.315 --> 00:50:54.804

those services that involve DSP?

334

00:50:57.355 --> 00:50:58.735 **Andrew Reese:**

I will confirm next week,

335

00:50:58.735 --> 00:51:05.905

my recollection from the right adjustment is that it was just those rates that that were affected by the wage increase,

336

00:51:08.699 --> 00:51:14.184

but I will confirm that. We have those rates ready to go

337

00:51:14.184 --> 00:51:26.125

but we have prepared those with the assumption that we will hear back okay,

338

00:51:26.364 --> 00:51:35.875

we have prepared those with the assumption that we will hear something back from CMS regarding the appended K amendment

339

00:51:36.054 --> 00:51:42.144

and so, we are hoping we can publish all of that at once. If we are not able to then we will have to

340

00:51:43.344 --> 00:51:46.824

cut out just the July 1 rates without the appendix adjustment.

341

00:52:35.184 --> 00:52:48.324 **Question:**

How are these resources being measured when individuals are still not receiving payments because of certain demographically issues, for example, closures and shut down?

342

00:52:50.784 --> 00:53:00.534 **Andrew Reese:**



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I am not aware and Danielle, perhaps you could type in a follow up here. I am not aware of an issue with people receiving their funds.

343

00:53:06.954 --> 00:53:15.775

So, can I just ask I will ask another clarifying question. Sandy are you saying that these asset limits or any change or they are just the existing asset limits.

344

00:53:22.224 --> 00:53:28.675

Thank you. So okay perfect. Should we open.

345

00:53:31.255 --> 00:53:32.184

We do that.

346

00:53:51.744 --> 00:53:54.594

Your line is not open if you would like to speak.

347

00:53:56.815 --> 00:54:06.894 **Andrew Reese:**

I know there is this issue about people receiving stimulus that there are lots of people that have not yet gotten their stimulus checks, and you have a year from when you get it to spend those resources.

348

00:54:06.894 --> 00:54:19.735 **Question:**

So, someone asked is it fine for our person support to go out in the community, even retail stores, and the like, as long as the guidelines are followed?

Andrew Reese: Yes,

349

00:54:19.974 --> 00:54:25.735

except that most retail stores are not yet open. They have curbside service, but absolutely it is okay.

350

00:54:25.735 --> 00:54:39.925

People can go out in the community as long as you are following all those guidelines that is the stay at home order has ended even throughout the day at home order, we had encourage that people should go outside, get sunshine and get exercise.

351

00:54:40.315 --> 00:54:53.394



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And now there are some more things that people can do, frankly, it's quite limited. But there are some things that people can do. You do not want to take a group of people to the grocery store steal.

352

00:54:54.204 --> 00:55:07.945

You know, when people are going grocery shopping, it should be one person from the household. That does the grocery shopping, because we still want to do everything. We can to limit the number of people who are indoors at any, any kind of a building.

353

00:55:44.875 --> 00:55:54.414 **Question:**

Okay, we receive another question. The SRC is actively working to make waivers for RSA federal. What does the status of waivers

354

00:55:54.414 --> 00:55:55.255

for RSA?

355

00:55:55.769 --> 00:56:03.655 **Andrew Reese:**

So, my understanding is that the Secretary of Education requested from Congress,

356

00:56:03.655 --> 00:56:12.985

although Congress had included the ability to do these waivers in one of the I do not know if it was a cares act

357

00:56:12.985 --> 00:56:19.764

or the subsequent act and the waivers that were being requested related to

358

00:56:23.514 --> 00:56:37.644

the requirements to expand fifteen percent of the VR grant on Pre-employment, transition services during FY 20 any states were being challenged by this.

359

00:56:37.974 --> 00:56:51.684

Because schools were closed and so providing no services was more challenging and not being able to extend that fifteen percent could reduce other parts of the VR grant. So, they were asking for a waiver for that.

360

00:56:51.954 --> 00:57:02.155



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There is a requirement that fifty percent of the supported employment grant be expanded on youth with disabilities, which is youth up through the age of twenty-four.

361

00:57:02.635 --> 00:57:08.065

And so, they were asking for a waiver for that requirement on the supported employment grant.

362

00:57:08.724 --> 00:57:09.324

And

363

00:57:09.324 --> 00:57:10.255

lastly,

364

00:57:10.284 --> 00:57:11.184

at this time,

365

00:57:11.184 --> 00:57:20.034

they were also asking for a waiver to extend the amount of time allowed to spend FY 19

366

00:57:20.065 --> 00:57:22.135

carry over funds,

367

00:57:22.135 --> 00:57:25.045

which all have to be spent by September 30, 2020

368

00:57:25.405 --> 00:57:26.394

369

00:57:26.905 --> 00:57:31.014

and so, they were asking for an extension on that. Just so people are aware,

370

00:57:32.335 --> 00:57:46.284

some VR programs in the country shut down and were not providing services at all during the pandemic and so they were really struggling with some of these requirements. In the district



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371

00:57:46.284 --> 00:57:49.974

we actually spent about two weeks since

372

00:57:53.909 --> 00:58:08.394

Patients since the pandemic began, we have been able to process applications. We have been able to coordinate with people as people familiar with. Know we were supposed to rely to the extent possible on existing evaluations.

373

00:58:08.394 --> 00:58:18.264

So, you know, the challenge with getting new assessments has not been much of a challenge because ideally, people will come with evaluations.

374

00:58:18.625 --> 00:58:28.164

We have been working remotely on processing applications with people, and then moving things along quite effectively.

375

00:58:28.195 --> 00:58:37.675

We have also been working with a number of our providers and with the Department of Employment Services to provide Pre-employment, transition services to youth.

376

00:58:37.704 --> 00:58:51.295

So, we are hoping, even though we are hopeful that there will be a waiver of these requirements. We are hoping that at least for our Pre-employment transition service requirement that we are able to meet that requirement this year.

377

00:58:51.445 --> 00:58:58.344

And in the district, we will be able to provide all those necessary services to youth to help prepare them for employment.

378

00:59:01.105 --> 00:59:14.784 **Crystal Thomas:**

And our general council commented that the public notice for the increase of living wage identities, the waiver services are published in today's June, twelve register.

379

00:59:23.755 --> 00:59:33.324

Is there a particular number to dial to ask a question for those who are on the call by phone, and you can text



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380
00:59:41.454 --> 00:59:49.465
at 202-590-7618, again 202-590-7618.

381
00:59:52.974 --> 01:00:07.344 **Andrew Reese:**
And I do see that it is after one o'clock, and just as a reminder to people, you can also submit questions in advance and then we will answer them at the beginning of our meeting next week. So, if there are no other questions.

382
01:00:19.465 --> 01:00:30.835 **Crystal Thomas:**
And the Deputy of RSA commented up for our RSA questions, if you need further clap clarification, contact him at 202-442-8601 and that Darryl Evans.

383
01:00:30.954 --> 01:00:35.875
O

384
01:00:38.784 --> 01:00:48.355
So, thank you to everyone. Please enjoy this wonderful spring weather that we are having today. That is supposed to last into tomorrow.

385
01:00:51.144 --> 01:01:04.195
Once again, I do just want to express Thanks to the extent, we have direct support staff provider staff on the call. Thank you for all the work that you are doing for the people that we support.

386
01:01:04.764 --> 01:01:06.235
We do recognize that.

387
01:01:06.235 --> 01:01:20.545
You have been on the front line here and that we are seeing tremendous progress now and in people really learning all the steps that we need to take we have been learning as we go about

388
01:01:20.905 --> 01:01:21.144
you know,

389
01:01:21.144 --> 01:01:24.684



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the importance of face covering and all circumstances.

390

01:01:25.974 --> 01:01:37.494

You know that we have really learned to do this better and because of that, the numbers that we reported today were the same numbers we reported last week with the exception that we have more people who have recovered.

391

01:01:38.364 --> 01:01:48.565

and that is tremendous progress and was really good to be able to report and so, thanks to all of you and I will talk to folks next week.