

Question	Response
<p>Are partitions ok in place of walls? We can build like a half wall so our HVAC system can circulate in our large rooms.</p>	<p>The Guidance document, <i>Re-Opening Adult Day Center Guidance</i>, issued on 10-2-2020 states in the first section of the document that a separate space is defined by ‘walls and doors’. However, later in the document it references walls/partitions. Partitions can be constructed to make a separate space; however, they must include a door to enclose the space.</p> <p>If partitions are used as walls to create separate spaces, the partitions should extend high enough to block the view of seeing across the walls in order to mitigate the spread of COVID 19 virus to other groups. A door should also be in place. The walls should go high enough to block view, but can allow for space for the HVAC to operate properly.</p> <p>The purpose of the <b>separate spaces</b> for each group of 1:8 is to ensure that individuals are staying in their groups and are not mingling across groups and maintaining the integrity of the group.</p> <p>Partitioned spaces should not be side by side or share walls, but should be separated by at least 6 feet to build in an additional prevention measure to further prevent the possible spread of the COVID 19 virus.</p> <p>Shower curtains are not acceptable measures as partitions or doors.</p> <p>Providers must use their best judgement when defining a separate space, knowing the purpose of the separation, which is to cut down on the spread of COVID 19 virus and to keep the individuals safe.</p>
<p>If we have a cafeteria, can each separate group eat in cafeteria and we sanitize between meals?</p>	<p>Yes, you can go to the cafeteria but you must ensure that everything is sanitized prior to the next group. Only one group is allowed at a time.</p>
<p>When we do transport clients, we do it in small cars, not buses. Can cars still be used?</p>	<p>Yes, you can use smaller vehicles to transport. Please ensure individuals are screened prior to entering the vehicle and to hand sanitize and wear masks. Individuals will need to understand that they should not touch others in the vehicle and limit the time spent inside of the vehicle.</p> <p>Opening the windows slightly to allow air flow if possible is another measure that can be used. Sanitizing the vehicle between uses is a must. You can use the guidance given and adapt to your specific vehicle.</p>

<p>The draft plan mentions the provider is responsible for washing cloth masks. Why would a provider be responsible for washing cloth masks? Wouldn't that be the responsibility of the family? We wouldn't want to touch/handle used PPE.</p>	<p>It is the provider's responsibility to ensure the health and safety of all individuals served. It is imperative that the individuals wear a clean mask to the day program each day to ensure that proper health precautions are in place.</p> <p>If the provider is unable to wash the cloth masks, possibly providing disposable masks is an option. There isn't a way for the provider to ensure that the individual/family will wash the mask and the individual will return each day with a clean mask.</p>
<p>Do we still have to social distance 6 feet apart when they are in their small groups?</p>	<p>Yes, social distancing must be enforced at all times within the groups in house, groups in the community, as well as outside.</p>
<p>Can you say more about "update emergency preparedness plan, as needed"?</p>	<p>All policies and procedures should ensure that COVID practices are included.</p>
<p>Will everyone need to be tested before returning to center?</p>	<p>This is not a mandate.</p>
<p>Our part time instructors leave at 1:30 and participants cannot be switched to our full time instructors waiting for their transportation if they have to be in the same group all day. Our hours may need to be changed.</p>	<p>This is correct. Groups cannot be mingled. The agency may consider staggering departure times to assist with this issue.</p>
<p>For the Day Habilitation Virtual, can this service be delivered at the same time as other waiver services?</p>	<p>Medicaid rules do not allow for the delivery and billing of more than one waiver service at a time.</p>
<p>We are in an extremely poor parish, there are several clients who do not have internet or even phones. Is there a possibility of them being provided with these things so we can provide services, or is that the responsibility of the center?</p>	<p>Waiver services are not in place to assist with this. There is not currently any funding streams from State Office, but you may check with your LGE or with local nonprofit agencies.</p> <p>We have included resources for funding at the end of the Guidance document that was released on 10.2.2020.</p>
<p>What are the limits for our community based outings, do they have to be 1:3 or can they still be 1:8?</p>	<p>At this time, we are only funding 1:8 ratios except where allowed in the Supports Waiver. Exceptions have been requested in the Appendix K to allow for the 1:3 ratio across waivers, but we have not received approval.</p> <p>Once approval is received, providers will be notified.</p> <p>Groups smaller than 1:8 can be done at this time, but the reimbursement will only be at the 1:8 ratio.</p>
<p>Is the choice to open up to the agencies, or do we need to wait for Office of</p>	<p>Permission to reopen day programs was released by the State Health Officer on 10.2.2020. The reopening was effective on Monday October 5, 2020. You can review that document <a href="#">here</a>.</p>

Public Health to allow agencies to reopen?	
We do not have a Fire Marshal nor Health Department Survey, do we need to wait until that is completed before we can reopen?	Each agency will need to contact the Health Standards and/or Fire Marshal office for questions or concerns about your business. The State Fire Marshall has developed the ‘Open Safely’ website to assist you.
Once this guidance is approved, what is the additional gating criteria for a reopen date?	The State Health Officer issued an order on 10.2.2020, and you can find all of the gating criteria in that document. The document is available <a href="#">here</a> .  For specific percentages of COVID positive cases by parish, please refer to the LDH COVID <a href="#">website</a> .
Once the drafted plan is approved, what will be the next criteria to reopen?	Please refer to the <i>Re-Opening Adult Day Center Guidance</i> document issued on 10-2-2020 for the precautions to put in place. Send in your Reopening plans to the LGE and a copy to the <a href="mailto:ocdd-hcbs@la.gov">ocdd-hcbs@la.gov</a> email. In your plan, please include the number of individuals who are in a waiver that are planning to return and the number of individuals who reside in an ICF/IID.
Will providers be forced to open?	Providers will not be forced to open.
Is there anything that can be done for providers who choose not to reopen right now because of risk, but need help financially to cover basic bills and keep the doors open?	Additional retainer payments are being permitted after the passage of HB39. A call with Medicaid was held on 10/19/2020 to discuss the guidelines. Please refer to the information that is posted in LaSRS regarding additional retainer payments.
If providers are not planning to open should they notify Health Standards?	No, it is not necessary to let Health Standards know if you plan to remain closed temporarily. If you are a provider who is not planning to reopen at all, you should then let Health Standards know you are relinquishing your license. You must also notify the LGE so they can offer freedom of choice (FOC) to the individuals that you currently serve.
The guidance states that opening windows while transporting in vehicles is a best practice. With winter coming, how should this be handled?	Opening windows was a recommendation for air circulation. If the weather does not allow for windows to be opened, such as rain or cold weather, then you can use your best judgment and not open them.
Transportation: We understand the guidance to be 50% of the vehicle capacity however it goes on to state 1 client per seat and using every other seat. Our facility has 15 passenger vans which by that rule would mean we can only have 2 clients per van with 3 rows verses 7 passengers (2 staff/5 clients) at 50% capacity. Can we please get some clarification on this? Every facility has different vehicles and this guidance is not appropriate for all vehicles.	The <i>Re-Opening Adult Day Center Guidance</i> , issued on 10-2-2020 stated:  Develop a seating plan that ensures social distancing on each vehicle: <ul style="list-style-type: none"><li>• Vehicle shall not <b>exceed 50% capacity</b>, including staff</li><li>• Masks shall be worn at all times on the vehicle</li><li>• Participants are to ride one per seat with every other seat empty <b>or</b> configure where social distancing is practiced as this may be different for each vehicle.</li></ul> Providers should adapt the guidance to the size/style of the vehicle they are using to transport participants.

	<p>Providers should work with families and staff to drop off and pick up the participants. In the survey that was completed with families and individuals in August, families stated that they would be able to assist with transporting to the programs.</p> <p>The guidance that OCDD provided in the document issued on 6-15-2020 for Supported Employment services provided additional discussion on transportation. This included:</p> <ul style="list-style-type: none"> <li>• When entering the vehicle, the first person to enter should proceed to the last seat. A seat should be skipped, the next person takes the next seat, and so forth.</li> <li>• The last person to enter the vehicle should be the first person to get off the vehicle.</li> <li>• Everyone should remain seated until it's their turn to exit the vehicle.</li> <li>• Limit the number of individuals being transported at one time through such methods as skipping every other seat. There should be enough space between individuals to practice social distancing, and so that individuals can not touch each other.</li> </ul>
<p>My question is in reference to those who have been receiving additional individual supports hours in lieu of the day program.</p> <p>Since the program will not be at 100%, will those individuals who are not able to attend their usual schedule still receive some additional hours of individual supports?</p> <p>For example, if a client went to the day program 5 days a week but is only able to attend 2 or 3 days due to the new policies, will they receive individual supports to make up for those days he or she is not able to attend the day program.</p>	<p>The IFS services will still temporarily be in place to fill in any gaps where the day program services are not provided. However, by the end of 12/31/2020, the additional hours will be going away. If there are any problems, please contact the individuals' support coordinator.</p>
<p>If a day habilitation providers who want to reopen, do they need to submit to the LGE their policy revisions that reflect the safety measures put in place? How will compliance with the new safety directives be verified?</p>	<p>It is not necessary for providers to send any policy revisions to HHS, receive a copy of the provider's Reopening plan and this should include how the policy was revised to reflect safety measures. Ocdd-hcbs@la.gov</p>

<p>The guidelines state that to open the facility should be located in a parish that is below the threshold of 5%. Our facility meets this guideline, but if a client lives in a parish that happens to be over the threshold, does that affect their ability to attend our Day Habilitation Program?</p> <p>Is it the facility's responsibility to check the CMS threshold data each week?</p>	<p>The 5% threshold just refers to the parish in which your agency is located.</p> <p>Yes, it is up to your agency to review the data for your parish each week. Utilize the data that is present to make your determination.</p>
<p>Can the residents of an ICF/IID return to the day program?</p>	<p>Prior to residents of an ICF/IID return to the day program, there should be no one, including staff, who has tested positive for COVID 19 at their home within the last 14 days. If someone at the ICF/IID should test positive after their return, the individuals who are attending the day program should not attend until everyone in the ICF/IID are no longer positive for COVID 19.</p>
<p>After checking the numbers today on the LDH website, our parish's positivity rate has moved above the 5% rating of positivity as per the memo dated 10/2/20. As an agency that operates in this parish and starting providing services to our clients last week when our number was at 4.6%, are we allowed to continue operating daily or do we have to close operations until our positivity rate moves back below 5%?</p>	<p>Once your agency's parish has met the 5% threshold to reopen, you can stay open if the positivity rate increases <b>unless the State Health Officer issues an order to close your parish or your location.</b> See #6 in the State Health Officer's memo dated 10-2-2020.</p>