

## DIVISION OF DEVELOPMENTAL DISABILITIES

# ASSESSING RISK FOR DDD MEMBERS WHO ARE AT HIGHER RISK FOR SEVERE ILLNESS FROM COVID-19

**June 15, 2020**

**Updated March 30, 2021**

This guidance is intended to provide assistance for vendors and other planning team members to identify DDD members who are at higher risk for severe illness or members who need extra precautions related to their potential exposure to COVID-19 and to help create plans that support the health and safety of members and staff during the COVID-19 emergency.

This guidance applies to Vendors, Support Coordinators, and other planning team members to align with Executive Order 2020-36.\*

**All vendors** should provide a copy of their pandemic plan and associated procedures to stakeholders including members and families to ensure they are familiar with the procedures implemented to protect the members. They are also encouraged to share their pandemic plans with other qualified vendors, upon request. The intent for sharing is to facilitate care for shared members who are high risk or who may need extra precautions. Vendors should consider delivering these in an electronic format to mitigate cost and administrative burden.

### **Residential Congregate Settings - Group Homes, Developmental Homes**

Qualified Vendors supporting members in group homes or developmental homes must implement COVID-19 mitigation strategies to reduce the risk of spreading COVID-19 as outlined in DDD's [COVID-19 QVA Guidance for Congregate Settings](#) guidance document. Each Qualified Vendor shall review and document the review of each member who lives in the home by using the criteria developed by the CDC for members who are at higher risk:

<https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-higher-risk.html>.

The Qualified Vendors shall inform the planning teams of all members living in the home if at least one member in the home is at higher risk for severe illness.

### **Other Congregate Settings**

Qualified Vendors operating other congregate settings must implement COVID-19 mitigation strategies to reduce the risk of spreading COVID-19 as outlined in DDD's [COVID-19 QVA Guidance for Congregate Settings](#) guidance document. They may develop procedures to screen for higher risk behavior that could place other members at risk and share that information with the planning team to assist members in mitigating risk associated with participating in services in congregate settings. This might include behavior such as going into the community without face coverings, attending large social gatherings or traveling outside of the country.

## Planning Team Responsibilities

### High Risk Members

If a member lives with someone that is high risk, or is high risk themselves, and wants to resume attending day programs, employment services, community outings or other activities, the planning team must consider and develop strategies to address limiting the spread to the home. Mitigation strategies may include but are not limited to: restricting visitors, delaying in-person or on-site attendance at day or employment activities, limiting community activities to essential health and safety needs, or other reasonable strategies. These mitigation strategies are not considered a rights restriction.

If the team cannot identify mitigation strategies that can reasonably protect the high risk member(s) in the home, the service delivery should remain as is, until the team can identify how to keep the entire home safe.

The team must re-evaluate if changes to the Governor's Executive Order 2020-36 or to the CDC guidance for people at higher risk for severe illness are made or if the needs of the members in the home change.

The CDC made revisions on March 29, 2021, simplifying the list of underlying medical conditions of those who are or may be at an increased risk of severe illness from COVID-19. The CDC states that people of any age with the following underlying conditions **can be more likely to get severely ill** from COVID-19:

- Cancer
- Chronic Kidney Disease
- Chronic Lung Diseases including COPD, Asthma, Interstitial Lung Disease, Cystic Fibrosis, Pulmonary Hypertension
- Dementia or Other Neurological Conditions
- Diabetes (Type 1 or 2)
- Down Syndrome
- Heart Conditions (such as Heart Failure, Coronary Artery Disease, Cardiomyopathies or Hypertension)
- HIV Infection
- Immunocompromised State
- Liver Disease
- Overweight and Obesity
- Pregnancy
- Sickle Cell Disease or Thalassemia
- Smoking, Current or Former
- Solid Organ or Blood Stem Cell Transplant
- Stroke or Cerebrovascular Disease
- Substance Use Disorders

More information about these underlying conditions can be found at <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html>.

Children who are medically complex, who have serious genetic, neurologic, metabolic disorders, and with congenital (since birth) heart disease **might be at increased risk** for severe illness from COVID-19. Additionally, the risk for severe illness from COVID-19 increases with age, with older adults at highest risk.

Most people with disabilities are not inherently at higher risk for becoming infected with or having severe illness from COVID-19. However, some people with disabilities might be at a higher risk of infection or severe illness because of their underlying medical conditions. If a person has one of the disability types listed below, there might be at increased risk of becoming infected or having unrecognized illness:

- People who have limited mobility or who cannot avoid coming into close contact with others who may be infected, such as direct support providers and family members
- People who have trouble understanding information or practicing preventive measures, such as hand washing and social distancing
- People who may not be able to communicate symptoms of illness

The [CDC](#) provides additional actions that may be taken to mitigate the spread of COVID-19 based on specific medical conditions and other risk factors.

### Members Requiring Extra Precautions

The planning team(s) shall also identify members who may need extra precautions. Teams shall develop a plan to provide individualized support in areas where the individual has a higher level of risk. This might include things like teaching a member to wear a mask, follow a hand-washing schedule or use their communication system to communicate signs of illness.

<https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-disabilities.html>

If the member or guardian disagrees with the identified mitigation strategies (for example limits to visitors), the team shall document this in the member's planning document including any alternative services or service delivery methods offered to the member (for example daily phone calls or video chats). This disagreement shall not prohibit the vendor from implementing the identified mitigation strategies to protect other members and staff at the congregate care setting and is not considered a rights restriction.

\*Governor Ducey's Executive Order 2020-36:

<https://azgovernor.gov/file/34817/download?token=9X8aggcf>

“Stay Healthy, Return Smarter, Return Stronger” effective May 16, 2020, at 12:00 a.m. states in part: All vulnerable individuals, including the elderly and individuals with underlying health conditions, are advised to take responsible steps to continue limiting their time away from their place of residence or property. Members of households with vulnerable individuals should take precautions to protect vulnerable individuals and be aware that by returning to work or being out in public, they could carry the virus back home.”

## **Revision History**

July 30, 2020

PAGE 2-3: Addition of the CDC's updated list of underlying medical conditions that increase or may increase the risk of severe illness from COVID-19.

March 30, 2021:

PAGE 2: Updated list of underlying condition which can make severe illness from COVID-19 more likely per updated CDC guidance.