

## **MEMORANDUM**

**FROM:** Laura Howard

**DATE:** June 15, 2020

**SUBJECT:** KDADS Status Report

The Kansas Department for Aging and Disability Services continues to meet the needs of Kansans. More than 1,900 state hospital employees are working a full onsite schedule and are adhering to safety guidelines put in place by their respective superintendents and agency recommendations. During the first two weeks of social distancing, approximately 20 employees from the agency's central office were identified as essential and worked from home. Today, 96 percent of KDADS's central office workforce are teleworking or working staggered schedules in offices to optimize social distancing.

### **METRIC**

KDADS and CMS have collaborated and to complete infection control surveys in the five remaining Life Care Centers in the state and conduct infection control surveys at the Burlington (Riverbend) facilities this week.

The staffing number includes the agency's Abuse, Neglect or Exploitation Hotline that continues to take reports as usual and staff that are prepared to go into facilities for investigation when necessary using Centers for Disease Control and Prevention (CDC)-approved screening questions and proper personal protective equipment (PPE). Surveyors are also available, and most have been fitted for PPE. KDADS and the Centers for Medicare and Medicaid Services (CMS) have completed infection control surveys in the Life Care Centers in the state. Federal and state surveyors conducted infection control surveys at the Burlington facilities earlier this month. We have continued processing name-based background checks for long-term care and health care workers in nursing facilities and HCBS settings in the required two-day timeline.

The agency, using recommendations issued by the CMS along with internal recommendations, has developed guidance for its healthcare workers, stakeholders, constituents and partners to aid them in implementing social distancing as well as temporary protocols to follow during service provision.

Within the first few days of the pandemic, more than 20 Guidance documents were generated for community-based organizations alone. To date, that number has increased to more than 50. Additional guidance continues to be posted on the agency's website which was created solely to

### **METRIC**

To date, 53 Guidance documents have been developed and posted for stakeholders.

communicate guidance measures and revisions and/or updates. We have recommended every entity adopting KDADS guidance keep a copy of either the state or federal guidance they choose to follow on record for future audits or reviews. Our goal with state guidance is to allow for as much local decision-making as possible in its implementation.

## I. COVID-19 GUIDANCE

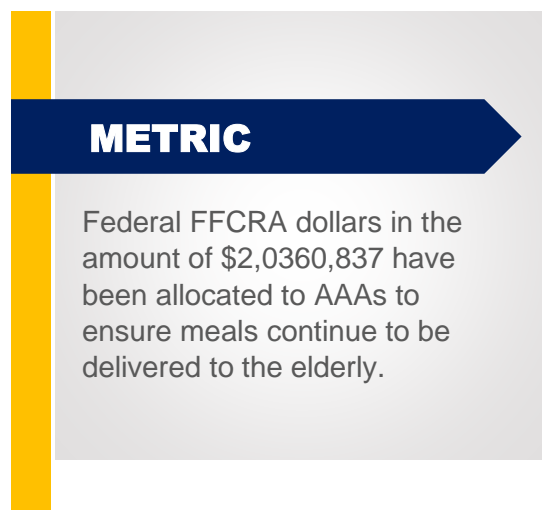
### **☐ AGING AND DISABILITY COMMUNITY SERVICES AND PROGRAMS COMMISSION**

Throughout the COVID-19 emergency period, to encourage social distancing and stop the spread of the pandemic, the agency directs that providers and participants terminate participation in congregate settings or activities and implement protocols in accordance with the program-specific COVID-19 guidance provided at the agency’s website, to include:

#### **Nutrition Services**

- Senior Nutrition Services
- Senior Nutrition Services FFCRA
- Senior Nutrition Services CARES
- Senior Nutrition Services FAQs
- Reopen Guidance for Congregate Nutrition Services
- COVID-19 Nutrition Services Incentive Program (NSIP)

The 11 Area Agencies on Aging (AAAs) Directors and KDADS staff are in daily communication regarding nutrition services for older Kansans. The AAAs and their nutrition providers are responding quickly to the ongoing changes spurred by the pandemic.



**METRIC**

Federal FFCRA dollars in the amount of \$2,0360,837 have been allocated to AAAs to ensure meals continue to be delivered to the elderly.

As congregate meals sites have closed in support of social distancing, nutrition providers and AAAs are transitioning to “grab-and-go” meals which allow for quick pick up. In addition, as the demand for home delivered meals has increased, nutrition providers and AAAs are focusing on delivering frozen meals, multiple meals and shelf-stable meals. The goal is to deliver as many meals as possible, as efficiently as possible. That said, meal programs are built on volunteers. Most volunteers are the youngest of the old. As such, many volunteers are opting to stay safe at home. In response, the AAAs and nutrition providers are transitioning to paid employees (including hiring individuals unemployed by COVID-19).

## METRIC

Federal CARES dollars in the amount of \$6,785,425 have been allocated to AAAs to support Older Americans Act programs.

Specific to funding, KDADS staff worked quickly to identify and allocate (as per a Guidance document) the additional funding awarded to Kansas from the FFCRA and Coronavirus Aid, Relief, and Economic Security (CARES). The additional federal dollars will assist in supporting meals, in-home services, caregiver and ombudsman services. Specific to caregivers, several AAAs are exploring the option of purchasing communication devices to reconnect caregivers to their loved ones in nursing facilities.

### Supportive Services for Older Adults and Caregivers

The CARES Act provided supplemental funding for programs authorized by the Older Americans Act of 1965. Through this program the AAAs provide a broad range of services and resources to seniors, promoting independent living in their communities across Kansas.

The AAAs understand this is a unique opportunity for these programs and they are working on innovative ideas and goals to serve Kansas seniors and caregivers during this pandemic. The AAAs and KDADS have been in constant communication during the planning process of CARES Act funding. The AAAs have been proactive on collaborating with local organizations to meet specific needs of their senior population.

### HCBS Waivers

- Brain Injury Measures
- IDD Services Measures
- Frail Elderly
- PD Waiver Measures
- TA Wavier Measures
- Autism
- All Waiver Measures
- Eligibility Assessments and Reviews
- Background Check Measures
- SED Waiver Measures
- HCBS Services with Telemedicine
- Congregate Settings Guidance

## METRIC

KDADS received approval of its Appendix K request for all HCBS waivers on April 1.

Within days of the pandemic, KDADS staff began working on the CMS Appendix K document. Appendix K is the federal Emergency Preparedness and Response document designed for 1915(c) home and community-based waivers. The document is not intended to accommodate a request for multiple waivers, however, CMS created an addendum “check list” for purposes of COVID-19 requests. KDADS and KDHE collaborated and approval was received from CMS. KDADS anticipates amending the Appendix K document to include retainer payments for allowed HCBS services. This request is consistent with other states.

## **Additional Specific Guidance**

- Specialized Medical Care
- Home Visit Measures (Home Workers)
- Conflict of Interest for ADRCs/AAAs/MCOs – Meals
- Client Assessment, Referral and Evaluation (CARE)
- Level of Care Assessments Aging and HCBS
- OAA SCA CARE QA
- Service Providers Serving Persons with Disabilities
- Stimulus Funds for HCBS and LTCFs
- Disaster Area Plan and Budget Guidance
- Technology and the Family Caregiver Support Program
- COVID 19 CARES Service Taxonomy Exceptions
- COVID 19 CARES Emergency Support Guidance
- Senior CARE Act Services

### **☐ *SURVEY, CERTIFICATION and CREDENTIALING COMMISSION***

On June 12, KDADS issued guidance intended to provide requirements and recommendations to Kansas nursing facilities regarding COVID-19 testing and the reopening of their homes to visitors and services, using a phased approach based on information from the Kansas Department of Health and Environment (KDHE), CMS and CDC. Separate guidance will be released for assisted living, Home Plus and other state licensed facilities.

CMS has announced that federally certified nursing homes are eligible to receive up to \$3,000 in Civil Money Penalty (CMP) funds to purchase electronic devices to enable residents to visit with family and friends in a virtual setting and participate in telehealth visits. This program was initiated in response to the restrictions placed on visitors in nursing homes to prevent the spread of COVID-19. CMP funds may be used by nursing homes to purchase tablets, iPads, and similar devices, as well as accessories including headphones and protective covers to help with cleaning between uses. KDADS is accepting application from certified nursing homes interested in participating in this grant program. Applications will be reviewed to verify requests for equipment are within parameters established by CMS. Facilities will receive an approval letter from KDADS with instructions on how to submit invoices for payment.

### **Training Programs**

- Certified Nurse Assistants
- Temporary Aide Training and Employment Requirements

### **Health Occupations Credentialing**

- Adult Care Homes Executive Order #20-19, 20-23 and 20-26
- Training Programs for Certified Nurse Aides/Certified Medication Aides-Clinical Portion

## Long-Term Care Facilities and Nursing Homes

- LTCF COVID Readiness Self-Assessment
- Reporting Guidance for Nursing and Long-Term Care Facilities
- Nursing Facilities Reopening Requirements and Recommendations

### ☐ *BEHAVIORAL HEALTH SERVICES COMMISSION*

- Telephonic and Telemedicine Expansion for Substance Use Disorder (SUD) Providers
- SUD Providers Verbal Consent
- Temporary Additions to Formulary for Community Support Medication Program
- Nursing Facility for Mental Health and Community Mental Health Center (CMHC) Continued Stay Screens Suspended
- CMHC Verbal Consent
- Community Run Organizations Employee Wages
- Kansas Coalitions Program and Budget Reallocation in Light of School Closing
- SAMHSA PPE Letter for Treatment Providers
- Methadone Clinics

### ☐ *COMMUNITY SERVICE PROVIDERS and CDC*

- Performing Essential Functions
- Plain Language Information on Coronavirus for People with Disabilities
- GRAIL COVID-19 for Persons who Self-Direct
- Centene to Expand Access, Reduce Cost of Care for Most Vulnerable Populations
- CDC - DIY Cloth Face Covering Instructions
- CMS COVID-19 Long-Term Care Facility Guidance
- Guidance for Infection Control and Prevention of Coronavirus Disease 2019 (COVID-19) in Nursing Homes

## II. BEHAVIORAL HEALTH SERVICES FUNDING OPPORTUNITY

### **METRIC**

KDADS applied for \$2 million in federal grant funding to support additional behavioral health services to individuals affected by COVID-19.

KDADS applied for the Substance Abuse and Mental Health Services Administration (SAMHSA) Emergency COVID-19 grant. This \$2 million opportunity for states is designed to support additional behavioral health services to individuals impacted by the COVID-19 pandemic. The KDADS application targeted multiple hotspots in Kansas where COVID-19 has shown significant community spread already and establishes a fund to support the provision of services to target populations of uninsured or underinsured individuals, including health care workers. These funds will be utilized to provide referrals, assessments, crisis services

and evidenced-based therapy through community-based providers. While the application is under review at the federal level, KDADS anticipates receiving funds for the program before the end of May in order to support these new additional services during this time of emergency.

### III. OUTREACH TO ADULT CARE HOMES IN SUPPORT OF THEIR COVID-19 RESPONSE EFFORTS

#### METRIC

KDADS has developed a 3-step process to solicit self-identified COVID-19 response efforts from adult care homes in the state.

On April 10, 2020, in response to a survey generated by the three Adult Care Home (ACH) trade associations, Leading Age Kansas, Kansas Health Care Association and the Kansas Adult Care Executives, and in response to Governor Kelly’s Executive Order 20-23 (dated April 15, 2020), KDADS began reaching out to ACHs across Kansas via email.

KDADS’s outreach includes a three-step process:

1. First, an email from KDADS is sent that attaches a form called “COVID-19 Adult Care Home Checklist Form.” The purpose of the form is for facilities to self-identify their COVID-19 response efforts based on two overarching categories: 1) Alternate Care Site (ACS) or 2) Designated Facility/Unit (DFU). A subcategory of Designated Facility/Unit includes 3) Change in Bed Classification (CBC).

An Alternate Care Site is an option available to facilities based on guidance from CMS. According to a federal toolkit, Alternate Care Sites are structures of opportunity created to provide a safe and comfortable setting where patients can be isolated and monitored during the COVID-19 pandemic. The safety of patients, care providers and the general public is the main priority.

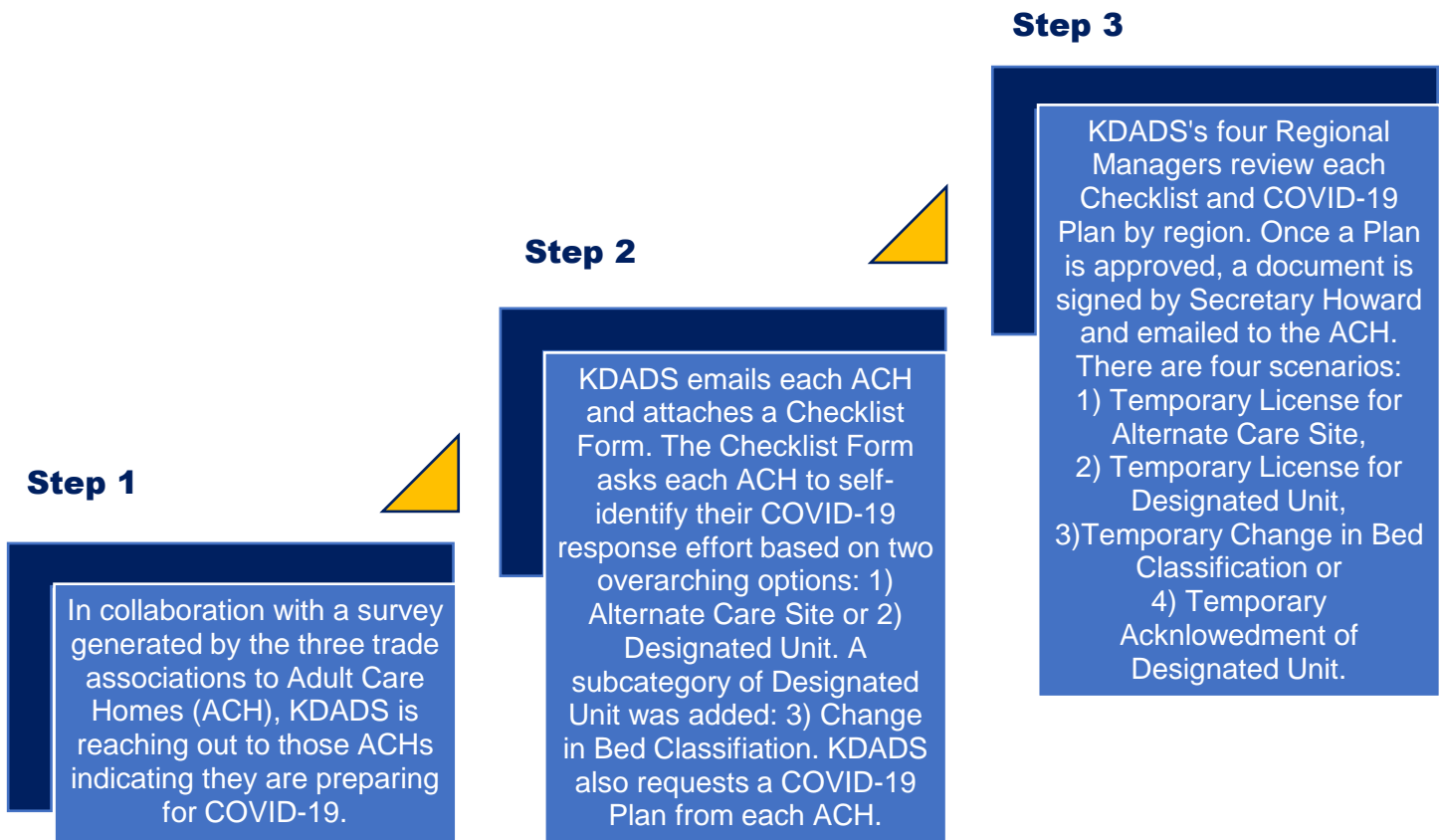
A Designated Facility/Unit is an option available to facilities based on guidance from CMS dated April 2, 2020. According to the guidance, the purpose is to avoid transmission within long-term care facilities by designating separate facilities or units within a facility to separate COVID-19 negative residents from COVID-19 positive residents and individuals with unknown COVID-19 status.

KDADS created a subcategory of the Designated Facility/Unit, called Change in Bed Classification, to accommodate requests, whereby, facilities are indicating their plan is to convert an office space or other common space to a designated unit.

2. Second, KDADS asks the facility to return the signed Checklist Form and attach an outline of their COVID-19 response efforts plan. The plan format is not prescriptive. As such, some facilities are sending very brief, concise one-page plans while others are sending multiple pages.

3. Third, KDADS's four Regional Managers of Survey and Certification review each plan, by region, and ask questions as needed. The Regional Managers are registered nurses and are familiar with the facility, staff and the buildings. Once a plan is approved, KDADS's nursing facility Program Director updates a spreadsheet to track the ACH response efforts. Based on the Plan, one of four documents is triggered from the tracking spreadsheet and signed by Secretary Howard:

- 1) Temporary License for Alternate Care Site,
- 2) Temporary License for Designated Unit to include additional licensed bed capacity,
- 3) Temporary License for Change in Bed Classification, or
- 4) Temporary Acknowledgment for Designated Unit not including additional licensed bed capacity, change in bed classification or physical environment.



Numbers by region, as of April 22:

Region	ACS	DFU	CBC	DFU/A	Grand Total
NE	1	5	2	7	15
NW	4	2	4	1	11
SE	1	2		6	9
SW	1	5	1	6	13
<b>Grand Total</b>	<b>7</b>	<b>14</b>	<b>7</b>	<b>20</b>	<b>48</b>

KDADS’s next step in working with the three trade associations is to continue outreach efforts. The three trade associations will generate emails, directly, to their members and attach the KDADS Checklist Form. KDADS will establish a general mailbox to be reviewed daily. As email messages are received from ACHs, KDADS will repeat Step 3 above.

#### IV. COVID-19 COMMUNICATIONS

- March 16, a press release was issued statewide from Governor Laura Kelly, Kansas Department for Health and Environment (KDHE) Secretary Dr. Lee Norman and Kansas KDADS Secretary Laura Howard announcing enhanced measures for state nursing facilities to protect residents from the COVID-19 outbreak.
- March 18, 2020, KDADS issued a statewide press release announcing that visitation at all four state hospitals had been restricted effective immediately as a measure of precaution to reduce exposure of COVID-19 to residents and staff.
- March 27, an announcement was made statewide via press release that Kansas had received just over \$2 million in U.S. Department of Health and Human Services (HHS) grants from the Administration for Community Living (ACL) to help communities provide meals for older adults.
- April 6, KDADS issued a statewide press release reporting that three staff members and one resident at Parsons State Hospital and Training Center (PSHTC) had tested positive for COVID-19 in the previous week. Those were the first confirmed positive cases at any of the four state hospitals. (See STATE HOSPITALS below for update.)
- April 17, a press release was issued statewide reporting that that two male staff members at the Kansas Neurological Institute (KNI) tested positive for COVID-19, the first positive cases at KNI in either residents or staff.
- April 22, a statewide release was issued reporting one female staff member at Larned State Hospital (LSH) tested positive for COVID-19, the first positive case at LSH in either residents or staff.
- May 5, an announcement was made statewide via press release that steps to keep the state’s two psychiatric hospitals operating while keeping patients and staff safe during this pandemic were being implemented to manage the state’s critical mental health infrastructure while creating capacity to quarantine any new patients in a single room for symptoms monitoring for up to 14 days after admission. Additionally, the hospitals have planned for isolation of any symptomatic or COVID-19 positive patients.



- May 11, a statewide press release was issued announcing the contract hire of Kathy Greenlee to serve on a half-time basis as the Kansas COVID-19 Long-Term Supports and Services (LTSS) Liaison. The role of the LTSS Liaison is designed to be a cross-agency partnership with KDADS, the Kansas Division of Emergency Management (KDEM) and the Kansas Department of Health and Environment (KDHE).
- May 12, a press release was issued statewide announcing that Kansas has received more than \$6.7 million in U.S. Department of Health and Human Services (HHS) grants from the Administration for Community Living (ACL) to help communities provide supportive services, meals, caregiver support services and long-term care ombudsman services for older adults as part of the federal CARES Act.

## V. STATE HOSPITALS

- KDADS has been emphasizing publicly that all four of the state hospitals are open and filling positions. Deputy Secretary of Hospitals and Facilities Scott Brunner reported April 1 recruiters have filled several vacant Mental Health Development Disability Technicians (direct care staff) positions at Larned State Hospital and a class of new employees starts training April 6.
- All four hospitals have followed infection control processes as directed by medical staff at each hospital, infection control nurses, KDHE and CDC guidelines. This includes having all staff in masks while they are working with patients or unable to maintain a 6-foot distance.
- All four hospitals have identified and prepared isolation units on their respective campus for patients that are screened positive for COVID -19 or while screening them for COVID-19 symptoms.
- All four hospitals are screening staff at the beginning of each shift for fever and respiratory symptoms.
- PSHTC has 16 confirmed COVID-19 cases confirmed through testing; seven residents and nine staff. The resident cases are isolated in one cottage. The medical director is in regular communication with the Labette County Health Department to coordinate testing of suspected cases and verifying best practices for infection control. The staff cases have generated a great deal of concern among those continuing to work at the hospital. Hospital leadership stays in daily communication with the staff providing updates on current cases, infection control and staff support. We have counselors on campus to provide support to the staff struggling with workplace stress. As of April 23, 10 of the residents and staff that were COVID-19 positive have been designated as recovered.
- Larned State Hospital had its first confirmed COVID-19 positive case this week. A female staff member was confirmed with COVID-19 Tuesday, April 21. That day staff working in the same area as the staff member were notified of the diagnosis and were instructed to self-monitor for symptoms. All patients in that treatment unit are wearing masks.
- Steps to keep the state's two psychiatric hospitals operating while keeping patients and staff safe during this pandemic have been implemented to manage the state's critical mental health infrastructure while creating capacity to quarantine any new patients in a single room for symptoms monitoring for up to 14 days after admission. Additionally, the hospitals have planned for isolation of any symptomatic or COVID-19 positive patients.

## VI. LEGISLATIVE ACTION

The Legislature passed HB 2016 during the 2020 Special Session requiring KDADS to complete infection control inspections for all nursing facilities, state licensed facilities, assisted living facilities, Home Plus and Adult Board and Care homes within 90 days of the effective date of the bill. HB 2016 also requires KDADS provide the necessary PPE, sanitizing supplies and testing kits appropriate to the needs of each facility on an ongoing basis, based upon the current number of residents; the current number of full-time and part-time staff members; the number of residents and staff who have tested positive for COVID-19 in the last 14 days; the ability to separate COVID-19 residents from non-COVID-19 residents; and any other factors deemed relevant by the Secretary of KDADS. The agency is in the process of evaluating the logistics of supplying PPE, supplies and testing kits through existing supply channels at KDHE and KDEM.

KDADS is planning a survey of adult care homes and nursing facilities to gather information from facilities about their PPE supplies, ability to purchase or use the KDEM distribution process, and adequacy of staffing levels and access to COVID-19 testing supplies.

KDADS leadership is organizing the efforts of the 50 certified surveyors and seven state licensed facility surveyors to conduct all the required infection control surveys by the 90-day deadline in HB 2016. CMS requires Kansas to complete infection control surveys in the CMS certified facilities by July 31. To meet that deadline, KDADS has entered an emergency contract with a consulting firm that can supply certified surveyors to complete infection control surveys, while having enough capacity to conduct follow-up surveys, respond to repeat outbreaks and conduct surveys for abuse and neglect complaints.