

COVID-19 FAQ for AS and APS workers

1. **Do I need VPN to access PeerPlace?** PeerPlace may be accessed from a computer, tablet or smart phone as long as those devices have internet access. VPN is not needed to access PeerPlace.
2. **Our agency just hired a new APS worker but trainings have been cancelled. Can she still do investigations?** APS workers have up to a year from the date of their first year of employment in APS to complete required training. Workers who are approaching the one-year hire date and who have not finished training are encouraged to seek case management guidance from their supervisors to ensure that they are following correct procedures. The APS Regional Consultant is also a resource for the worker. The worker may still perform APS investigations.
3. **Our agency is providing food delivery to many older adults but that is the only assistance the agency is arranging for these adults. Do we need to open Adult Services cases for each of these clients?** If the adults are not seeking other services and budget lines 895 or 833 are not being used, then do not open an Adult Services or APS case. If the adult requests a service such as homemaker or budget lines 895 and 833 are being used, the worker shall follow procedures for opening an Adult Service or APS case.
4. **Are APS and AS workers charged with “checking on” vulnerable Virginians in our community?** Unless directed by your local department administration or an order from the Governor, at this point, AS and APS workers are only required to adhere to state mandates such as APS investigations and provision of home based services such as homemaker, chore and companion. Additionally, local departments are encouraged to communicate and collaborate with Area Agencies on Aging to ensure the health and well-being of vulnerable adults is being addressed.
5. **What should I tell agency-approved providers about entering the adult’s home?** This should be handled on a case-by-case basis. The client is the employer and can decide if the provider should enter. Will the provider enter if he or she can wear gloves or a mask? The provider may decide he or she does not want to enter. In that case, are there alternate duties that could be performed such as picking up groceries for the client or delivering hot meals? Could the provider perform phone contacts to ensure the client’s well-being?

The following resources are available for AS and APS workers:

Virginia Department of Health: <http://www.vdh.virginia.gov/surveillance-and-investigation/novel-coronavirus/>

Centers for Disease Control: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>

Administration for Community Living: <https://acl.gov/COVID-19>

Substance Abuse and Mental Health Administration: <https://www.samhsa.gov/coronavirus>

National Center on Elder Rights: <https://ncler.acl.gov/getattachment/Resources/Covid-19-ACL-doc.pdf.aspx?lang=en-US&eType=EmailBlastContent&eId=e1f28614-e19a-410c-a5a1-fa07ca3b75c6>

BROADCAST

DATE: March 24, 2020

TO: Local Directors, Regional Directors, Eligibility Supervisors and Aged, Blind and Disabled (ABD) eligibility workers

FROM: Tishaun Harris-Ugworji, Auxiliary Grant (AG) Program Manager,
Department for Aging and Rehabilitative Services (DARS),
tishaun.harrisugworji@dars.virginia.gov
804-662-7531

SUBJECT: AG Program: New and renewal applications procedures in response to COVID-19

CONTACT(S): Shelley Henley, AG Program Consultant
Shelley.Henley@dars.virginia.gov, 804-662-7071

This broadcast establishes temporary procedures for AG cases in response to COVID-19. The following procedures should be implemented immediately.

New Applications:

- New applications must be honored the date they are received. Do not change the date of receipt due to office closures caused by COVID-19.
- Applications received during the temporary extension period of March 24, 2020 to June 30, 2020 will be processed using the temporary extension procedures.
- Applications are still required to be processed within 45 days from the date of receipt as stated in AG policy, regardless of agency closures or modified work schedules due to COVID-19.
- All verifications may be postponed at application for up to 90 days except two, verifications for level of care (DMAS 96) and residency in an approved setting.
- Presumptive eligibility may be awarded during the extension period. Notice of action must advise client of the presumptive approval with the requirement to provide all postponed verifications by the 90th day or the benefits will be terminated.
- Required verifications may be obtained by telephone when possible. Workers must document the case record with the details of the conversation, including name of person providing information, relationship or title, contact phone number and date of conversation.

Renewal Applications:

- Evaluate all AG cases as they become due for renewal during the temporary extension period of March 24, 2020 to June 30, 2020.
- Conduct ex parte reviews for AG cases when possible and certify the approved recipients for the upcoming year as normal.
- Identify AG cases that require a renewal application and verifications. These cases should have their renewal date extended for 90 days.
- To determine the extension date, add 90 days to the end of the certification period. Example: AG case is due for renewal in April (cert period ends 4/30/20). If the case cannot be processed ex parte, the renewal date becomes 7/31/20. The worker will complete a full evaluation for the case when the extension is over.

All cases must be updated in AGTrak. AGTrak may be accessed at the following link: <https://www.vadars.org/HCBSWareHouse/Account/Login>. VPN is not required to access AGTrak.

Workers who complete renewals using ex parte procedures should document in AGTrak following normal documentation procedures.

Workers who process applications and renewals under the temporary extension guidelines should increase the disposition date by the 90-day extension period and document in the case notes "COVID19 temporary extension."

Direct additional questions to Shelley Henley, AG Program Consultant.

BROADCAST

DATE: March 16, 2020

TO: Local Directors, Regional Directors, Local Adult Services (AS)/Adult Protective Services (APS) Workers/Family Services Specialists and Supervisors

FROM: Paige McCleary, Director, Department for Aging and Rehabilitative Services (DARS), APS Division

SUBJECT: Information for AS and APS workers regarding COVID-19: Provision of services to vulnerable adults

CONTACT(S): Margie Marker, 804-662-9783, Marjorie.marker@dars.virginia.gov
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The following information is for APS and AS workers who provide critical interventions and support to older adults and individuals with disabilities. Local AS and APS workers' efforts to mitigate the spread of COVID-19 among the AS and APS service population, many of whom have underlying medical conditions and are especially susceptible to the virus, are to be commended. The information in this broadcast outlines ways for workers to adhere to federal and state guidance on reducing virus transmission while also ensuring that adults receive protections and retain access to important services. As the COVID-19 situation is rapidly changing, DARS APS Division staff will evaluate the need to update or modify the information provided in this broadcast.

Medicaid Long-term Services and Supports (LTSS)

On Friday, March 13, the Department of Medical Assistance Services (DMAS) issued guidance to screeners of Medicaid LTSS. DARS shared this guidance with the APS Regional Consultants and requested that the information be shared with LDSS screeners. If you conduct screenings for LTSS and did not receive this guidance, please contact your regional consultant.

General guidance regarding APS Investigations

APS investigations must continue. Per state regulations, the APS workers shall make a face-to-face contact with the alleged victim. . . as soon as possible but not later than five calendar days after the initiation of the investigation unless there are valid reasons that the contact could not be made. Workers who are unable to conduct a timely face-to-face contact with the alleged victim shall thoroughly document in the PeerPlace case record the valid reason the contact did not occur. Examples of valid reasons include, but are not limited to, visitation restrictions to control an active virus outbreak in a facility or suspicion or confirmation that that subject of the APS report has COVID-19. Gathering

information from collaterals or other sources that supports or refutes the allegations in the report is critically important during this time.

APS investigations in facility settings

APS workers should identify themselves and the reason they are requesting to enter a facility (e.g. “conducting an APS investigation”). Facilities may ask APS workers to undergo a brief health screening before entering a facility. Workers should adhere to facility guidelines regarding health screenings and the facility’s request that the worker wear gloves and gowns or conduct interviews in a designated room within the facility. If the APS worker is refused entry to the facility, the worker should document the refusal in the PeerPlace case record, including identifying the person who denied entry and the reason provided. The worker should also notify the appropriate APS regional consultant of the denial of entry.

Required contacts with clients receiving protective services or home-based care

APS ongoing cases, in which the adult is receiving protective services, must have a monthly contact from the APS worker. APS workers should use appropriate judgment as to whether a face-to-face contact (e.g. home visit, office visit) with the adult, the adult’s legal representative or the designated caregiver is possible. If a face-to-face contact is not possible, the worker should conduct a phone contact with the adult, the adult’s legal representative or the designated caregiver. A successfully completed phone contact with the adult, the adult’s legal representative or the designated caregiver meets the requirement of a monthly contact (APS Division Manual, Chapter 3, Section 3.14). If the contact is unsuccessful, the worker shall document the reason in the PeerPlace case record.

Home-based services cases, in which the adult is receiving homemaker, chore, or companion services, require a quarterly contact. AS workers should use appropriate judgment as to whether a face-to-face contact (e.g. home visit, office visit) with the adult, the adult’s legal representative or the designated caregiver is possible. If a face-to-face contact is not possible, the worker should conduct a phone contact with the adult, the adult’s legal representative, or the designated caregiver. A successfully completed phone contact with the adult, the adult’s legal representative, or the designated caregiver meets the requirement of a quarterly contact (APS Division Manual, Chapter 3, Section 3.14). If the contact is unsuccessful, the worker shall document the reason in the PeerPlace case record.

Assisted Living Facility (ALF) Assessments or Reassessments

AS workers are still required to complete ALF assessments and reassessments. Beginning March 16 until April 16, workers should conduct ALF assessments and reassessments by phone call or video conferencing (if available) and use supporting documentation such as information from family members or medical records to enable completion of the Uniform Assessment Assessment (UAI) and other assessment documents.

DARS wants to thank the hundreds of local AS and APS workers who are taking extraordinary steps to protect vulnerable adults and ensure they receive necessary services during this unique and difficult time. The APS Division staff will support workers by addressing questions and concerns as to how this situation affects workers’

interactions with older adults and individuals with disabilities.

Information about COVID-19 is available at the following sites. APS Regional Consultants will continue to share updated COVID-19 information that may affect the provision of AS and APS in Virginia.

Virginia Department of Health: <http://www.vdh.virginia.gov/surveillance-and-investigation/novel-coronavirus/>

Centers for Disease Control: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>

Administration for Community Living: <https://acl.gov/COVID-19>

Centers for Medicare and Medicaid Services, Guidance for Infection Control and Prevention of Coronavirus Disease 2019 (COVID-19) in Nursing Homes:
<https://www.cms.gov/files/document/3-13-2020-nursing-home-guidance-covid-19.pdf>

Governor Northam's Declaration of State of Emergency:
<https://www.governor.virginia.gov/newsroom/all-releases/2020/march/headline-853537-en.html>



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Memorandum

Date: March 27, 2020

To: Assisted Living Facility Licensees and Administrators

**From: Paige McCleary, Director, Department for Aging and Rehabilitative Services (DARS)
Adult Protective Services (APS) Division**

Subject: Information for Assisted Living Facilities (ALFs) during COVID-19 crisis

The following information is for Licensees and Administrators who provide care for older adults and individuals with disabilities in ALFs. As the COVID-19 situation is rapidly changing, DARS APS Division staff will evaluate the need to update or modify the information provided in this memo.

ALF Assessments or Reassessments

Local department Adult Services (AS) workers are still required to complete ALF assessments and reassessments. Beginning March 16 until further notice, workers should conduct ALF assessments and reassessments by phone call or video conferencing (if available) and use supporting documentation such as information from family members or medical records to enable completion of the UAI and other assessment documents.

Adult Protective Services (APS) Investigations

APS investigations are still occurring. Local department APS workers are evaluating the circumstances described in each APS report and determining the need to make a face-to-face contact. APS workers are conducting a face-to-face visit with a resident unless there is a valid reason not to meet with the resident. Workers may attempt a phone or video conference with the resident in lieu of a face-to-face meeting. APS workers understand that ALF staff may ask the worker to take certain precautions or undergo a brief health care screening before entering the facility. APS workers are to comply with such requests.

Auxiliary Grant Program

Local department eligibility workers have received guidance on how to process new AG applications and renewals. DARS is taking steps to ensure that residents who receive monthly AG payments continue to do so during the COVID-19 crisis. DARS AG Program staff has implemented telework procedures. If you have questions, you may contact AG Program staff at their email addresses:

Tishaun Harris Ugworji, AG Program Manager, tishaun.harrisugworji@dars.virginia.gov

Shelley Henley, AG Program Consultant, shelley.henley@dars.virginia.gov

DARS would like to thank ALF staff who are taking extraordinary steps to protect and provide care to vulnerable adults during this unique and difficult time.

BROADCAST

DATE: March 24, 2020

TO: Local Directors, Regional Directors, Local Adult Services (AS)/Adult Protective Services (APS) Workers/Family Services Specialists and Supervisors

FROM: Paige McCleary, Director, Department for Aging and Rehabilitative Services (DARS), APS Division

SUBJECT: Information for AS and APS workers regarding COVID-19: Updated guidance on provision of services to vulnerable adults

CONTACT(S): Margie Marker, 804-662-9783, Marjorie.marker@dars.virginia.gov
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The following updated guidance is for APS and AS workers who provide critical interventions and support to older adults and individuals with disabilities. Guidance that has not changed since the March 16 broadcast is noted below. Updated guidance appears in italics. As the COVID-19 situation is rapidly changing, DARS APS Division staff will evaluate the need to update or modify the information provided in this broadcast.

Medicaid Long-term Services and Supports (LTSS)

On Friday, March 13, the Department of Medical Assistance Services (DMAS) issued guidance to screeners of Medicaid LTSS. DARS shared this guidance with the APS Regional Consultants and requested that the information be shared with LDSS screeners. If you conduct screenings for LTSS and did not receive this guidance, please contact your regional consultant. THIS GUIDANCE HAS NOT CHANGED

General guidance regarding APS Investigations

APS investigations must continue. *However, until further notice, the APS Division is permitting flexibility regarding the regulatory requirement that APS workers shall make a face-to-face contact with the alleged victim. . . as soon as possible but not later than five calendar days after the initiation of the investigation unless there are valid reasons that the contact could not be made. Workers must evaluate each APS report and determine whether the face-to-face contact can occur, or whether the worker should initiate a phone or videoconferencing contact with the alleged victim. Some examples of when a worker may pursue a phone or video contact include but are not limited to:*

- (1) the adult is located temporarily or permanently in a facility setting and (2) a facility representative has denied or will deny entry by the APS worker;*
- (2) the adult is suspected to have or has COVID-19, or may live with a person who has COVID-19; or*

(3) the report alleges a type of maltreatment (e.g. financial exploitation, verbal abuse) that may be investigated without direct observations of the adult

Workers who are unable to conduct a timely face-to-face contact with the alleged victim shall thoroughly document in the PeerPlace case record the valid reason the contact did not occur. Gathering information from collaterals or other sources that supports or refutes the allegations in the report is critically important during this time.

APS investigations in facility settings

APS workers should identify themselves and the reason they are requesting to enter a facility (e.g. “conducting an APS investigation”). Facilities may ask APS workers to undergo a brief health screening before entering a facility. Workers should adhere to facility guidelines regarding health screenings and the facility’s request that the worker wear gloves and gowns or conduct interviews in a designated room within the facility. If the APS worker is refused entry to the facility, the worker should document the refusal in the PeerPlace case record, including identifying the person who denied entry and the reason provided. The worker should also notify the appropriate APS regional consultant of the denial of entry.

Required contacts with clients receiving protective services or home-based care

APS ongoing cases, in which the adult is receiving protective services, must have a monthly contact from the APS worker. APS workers should use appropriate judgment as to whether a face-to-face contact (e.g. home visit, office visit) with the adult, the adult’s legal representative or the designated caregiver is possible. If a face-to-face contact is not possible, the worker should conduct a phone contact with the adult, the adult’s legal representative or the designated caregiver. A successfully completed phone contact with the adult, the adult’s legal representative or the designated caregiver meets the requirement of a monthly contact (APS Division Manual, Chapter 3, Section 3.14). If the contact is unsuccessful, the worker shall document the reason in the PeerPlace case record. THIS GUIDANCE HAS NOT CHANGED

Home-based services cases, in which the adult is receiving homemaker, chore, or companion services, require a quarterly contact. AS workers should use appropriate judgment as to whether a face-to-face contact (e.g. home visit, office visit) with the adult, the adult’s legal representative or the designated caregiver is possible. If a face-to-face contact is not possible, the worker should conduct a phone contact with the adult, the adult’s legal representative, or the designated caregiver. A successfully completed phone contact with the adult, the adult’s legal representative, or the designated caregiver meets the requirement of a quarterly contact (APS Division Manual, Chapter 3, Section 3.14). If the contact is unsuccessful, the worker shall document the reason in the PeerPlace case record. THIS GUIDANCE HAS NOT CHANGED

Assisted Living Facility (ALF) Assessments or Reassessments

AS workers are still required to complete ALF assessments and reassessments. Beginning March 16 until *further notice*, workers should conduct ALF assessments and reassessments by phone call or video conferencing (if available) and use supporting documentation such as information from family members or medical records to enable completion of the Uniform Assessment Assessment (UAI) and other assessment documents.

Home-based Care (HBC) Assessments and Reassessments (functional and financial eligibility determination)

Beginning March 16 until further notice, local departments shall assess or reassess an adult's functional eligibility for home-based services (homemaker, chore, or companion) via phone or videoconference. The worker shall complete/update the UAI in PeerPlace based on the information obtained from the adult, the adult's representative (if applicable), the home-based services provider (current, active HBC cases) and through other sources as appropriate.

In order to evaluate the adult's financial eligibility, the worker shall ask the adult or the adult's representative (if applicable), to provide verbal information about the adult's income and resources. If the adult, who is currently receiving HBC remains eligible based on information provided, the worker shall update the PeerPlace case record and set the redetermination date for no greater than one year from the date eligibility was established. Workers shall request documentation that was used to determine/continue financial eligibility be mailed or emailed (via encryption) to the local worker within 60 days of the application date (new case) or within 60 days of the updated redetermination date.

Consent to exchange information

Until further notice, APS and AS workers may obtain a client's verbal signature on the Consent to Exchange Information form. The worker shall write the client's name on the signature line and the reason for verbal signature e.g. John Doe (verbal consent COVID-19). The worker shall provide the client or the client's representative a copy of the form as soon as practicable. The worker shall enter a note in the PeerPlace case record "verbal consent due to COVID-19."

New applications for Adult Services

Local departments are obligated to process applications received at the local department requesting adult services such as homemaker, chore, and companion services. While the application should be processed in 45 days, eligibility determination for services may be extended to 60 days until further notice.

COVID-19 FAQ for AS and APS workers

DARS APS Division has also posted a COVID-19 Frequently Asked Questions (FAQ) for AS/APS workers on FUSION at <https://fusion.dss.virginia.gov/dars/DARS-Home/ADULT-SERVICES> Resources and Procedures heading. The FAQ should be used in conjunction with this broadcast. The APS Division will update the FAQ in response to questions that workers ask APS regional consultants.

Again DARS thanks local AS and APS workers who have endured extraordinary circumstances as they continue to provide critical services to older adults and individuals with disabilities in their communities. APS Regional Consultants will continue to share updated COVID-19 information that may affect the provision of AS and APS in Virginia.