COVID-19 Person-Centered Planning Discussion Guide

This Discussion Guide was designed to assist individuals, families, Supports Coordinators (SCs), Service Providers and other team members in planning and identifying supports and services needed for individuals to reengage in activities outside of their home, if and when they choose to do so, when COVID-19 Safer-at-Home orders are lifted. This guide should be used to evaluate an individual’s circumstances as conditions change and teams reconvene and reevaluate if revisions or modifications to an individual’s supports and services are necessary. SCs should begin collecting information during their weekly well-being check-ins and facilitating team discussions.

This Guide includes six core areas to consider: Desire to Return to Community Activities and Settings, Physical Health Status, Infection Control Measures, Mental Health and Behavioral Health Needs, Changes in Routine, and Conditions of Supports & Services. The questions are framed for the individual but can also be asked to family/caregivers and other team members. It is critical for teams to discuss service options in case the individual chooses not to return to a facility-based service or is unable to adhere to new infection control and/or social distancing requirements.

This document is intended to be used as a guide for conversations the SC is having with the individual, their family, service providers and other team members. The results of the ongoing discussions and next steps should be documented in service notes and the Return to Day Services Assessment.
DESIRE TO RETURN TO COMMUNITY ACTIVITIES AND SETTINGS

QUESTIONS TO CONSIDER:

• Are you able to do the things you liked doing before the stay at home order went into effect?
• Are the preferred activities currently closed or have limited access? (Some examples might be shopping, movies, bowling, volunteering.)
• What do you like to do/what are your preferred activities?
• How do you feel about going out into the community to participate in activities you enjoyed before the stay at home order?
• How would you like to spend your day?
• Are there any concerns/anxiety about community activities and transportation to/from community activities?
• Have you noticed new strengths/resiliencies that have come out during this time for you and your family? (for example, did you spend time doing something new or find a new hobby that you didn’t do before, like cooking?)

GUIDANCE:

If the individual is demonstrating a desire to return to community settings and/or activities, then:

• The SC should facilitate a conversation with the individual, their family/caregivers and team to assess if the individual needs support with reintegrating back into the community. This should be very individualized and highly dependent on the unique needs of the individual and potential challenges.
• Plan for supporting the individual in returning to those activities, if they are available and in accordance with health guidelines (for example, transportation trip should limit the number of passengers).
• If it is an activity that cannot be done while complying with current precautions, identify and offer alternative activities that the individual might enjoy instead.
• The team should discuss how the individual typically engages with others, both people they know and people they do not know to identify risks and mitigation strategies.

If the individual is unsure or is expressing some anxiety about returning to community settings and/or activities, then:

• The SC should facilitate a conversation with the individual, their family/caregivers and team to assess if the individual needs support with reintegrating back into the community. This should be very individualized and highly dependent on the unique needs of the individual and potential challenges.
• Consider continuing to support the individual remotely and engage the providers to help them identify solutions to ease anxieties.
• Consider ways to systematically expose an individual to the community in hopes of assuaging the individual’s concerns or anxiety.
If the individual appears unwilling to return to community settings and/or activities or is expressing significant anxiety about returning to community settings and/or activities, then:

- Continue to support the individual in their current environment and then reengage in conversations over time in an effort to build up to increasing their comfort levels.
- The SC should facilitate a conversation with the individual, their family/caregivers and team to assess if the individual needs support with reintegrating back into the community. This should be very individualized and highly dependent on the unique needs of the individual and potential challenges.

**PHYSICAL HEALTH STATUS**

**QUESTIONS TO CONSIDER:**

- How do you feel physically?
- Have there been any changes in your health status since the initiation of restrictions as a result of the COVID-19 pandemic?
- Do you have any signs or symptoms of COVID-19?
- Have you or anyone in your household been tested for COVID-19? If so, what were the results of the test?
- Prior to the COVID-19 pandemic, did you have any medical conditions that required support?
- Do you have any identified health risks? (diabetes, lung disease, high blood pressure, age (65+), other risks identified through the health risk screening tool for people in residential services)
- Are you taking all prescribed medicine, if applicable?
- Are you on a special diet? Have there been any changes to special dietary precautions?
- Are any members of your household sick or have a positive COVID-19 diagnosis?

*Note: In addition to the typical symptoms of COVID-19 that are identified by the CDC, ODP providers have noted that for individuals with ID/A, COVID-19 infection has presented as weakness or a change in baseline behavior without or prior to respiratory symptoms emerging. Providers should take this into consideration during service provision and screenings prior to service provision and closely observe individuals for weakness or changes in behavior that may be indicative of illness.*

**GUIDANCE:**

If the individual has recovered fully from COVID-19, or has no signs/symptoms of COVID-19, or is able to report on potential emergence of COVID-19 symptoms or has reliable family/caregiver to do so, and has no other physical health issues then:

- Consider how to support the individual returning to increased community activities, if they are available, while continuing to monitor and check in on current health status.

If the individual has any signs/symptoms of COVID-19 other than a fever (cough, shortness of breath/difficulty breathing) or is not able to report on potential emergence of COVID-19 symptoms and/or does not have reliable family/caregiver to do so, or is having some other physical health issues, then:

- Put strategies in place to ensure that health issues are being addressed and followed up on by the appropriate medical experts and COVID-19 testing is considered;
• Services should be provided remotely, if applicable.
• Consider how tele-health options can support the individual.

If the individual has active, confirmed COVID-19 symptoms/illness, or awaiting results of COVID-19 screening, or has current signs/symptoms consistent with COVID-19, or has any high-risk health conditions, then:

• The individual should seek medical attention and team transition discussions should be on hold until the health issues are resolved.
• Consider how tele-health options can support the individual.

**INFECTION CONTROL MEASURES**

**QUESTIONS TO CONSIDER:**

• Are you washing your hands frequently?
• Do you need support with washing your hands?
• Are you able to practice social distancing when you are interacting with others? Do you understand why that is important? (for example, if you saw your friend today, what would you do? Give her a hug, stand back and wave?)
• Are there challenges in maintaining social distancing? If so, what are they?
• Do you have a mask and are you able to wear it to go out for activities?
• How long can you wear a mask?
• If you live at home with your family, does everyone in your family have masks?
• Can you and do you cough or sneeze into your elbow?
• Will you agree to participate in screening precautions when engaging in community activities (temperature checks, etc.)?
• Do you have allergies or sensitivities to cleaning products or hand sanitizer/soap?
• Will your communication be hampered by the use of masks, either receptively (read lips) or expressively?
• Are you working?
• Are you able to follow all the new safety measures at work?

**GUIDANCE:**

Teams must plan based on the individual’s ability to engage in social distancing, use of masks, and regular handwashing and sanitizing safety precautions.

If the individual is able to independently or with supports practice good hand washing/hygiene, social distancing, wear a mask for the amount of time needed for a given activity, cough or sneeze into elbow, then:

• Support the individual in returning to community activities, if they are available.

If the individual inconsistently practices good hand washing/hygiene, social distancing, wearing a mask for the amount of time needed for a given activity, coughing or sneezing into elbow, then:

• Support the individual in improving their skills related to following the proper safety precautions to avoid contracting or spreading COVID-19.
If the individual is not able or is unwilling to (with or without supports) practice good hand washing/hygiene, social distancing, wear a mask for the amount of time needed for a given activity, cough or sneeze into elbow, then:

- If there is a medical reason preventing an individual from being able to wear a mask, continue providing supports the individual is currently receiving until the requirement to wear masks is lifted.
- Continue supporting the individual in their current environment and then reengage in conversations over time and build up to increasing their ability and/or willingness to practice necessary safety precautions to avoid contracting or spreading COVID-19.

**MENTAL HEALTH AND BEHAVIORAL HEALTH NEEDS**

**QUESTIONS TO CONSIDER:**

- Have you acquired any new skills (like coping skills) to help you deal with the COVID-19 crisis?
- Have you noticed any new or worsening symptoms that you think might be related to your mental health?
- Do you have any concerns for your safety (self-harm or aggression)?
- Have you had any problems come up at home that you did not know how to deal with? Do you feel prepared for a problem that might come up?
- Was behavioral support and/or mental health treatment (counseling/therapy) being provided prior to the restrictions as a result of the COVID-19 pandemic? If so, is it still being provided? Is the plan still effective/working?
- Have you experienced any of the following while at home?
  - Stress
  - Isolation
  - Death of a family member, caregiver, friend
  - Someone in your household has/had COVID-19 (individual had to move out of their home for quarantine, change of staff, change of routine)
  - Other traumatic events you may have experienced
- If any of the above were experienced, does behavioral support and/or mental health support (counseling/therapy/grief counseling) and/or other supports need to be provided?

**GUIDANCE:**

If the individual is feeling safe and has the necessary supports and skills to deal with any current mental or behavioral concerns, then:

- Support the individual in returning to community activities, if they are available.

If the individual is feeling unsafe and does not have enough support or skills to deal with any current mental or behavioral challenges, then:

- Ensure that appropriate supports are in place or access to services is available and can help the individual with their mental health/behavioral health needs.

If the individual is experiencing a mental health crisis due to their recent experience, then:

- Ensure that appropriate supports are in place or access to services is available and can help the individual with their mental health/behavioral health needs.
CHANGES IN ROUTINE

QUESTIONS TO CONSIDER:

- How are you spending your day since the stay at home order has been in place?
- What is your sleep like every night?
- Have you had changes in your sleeping patterns/schedule?
- Are you doing any physical activity or exercise every day?
- Have you experienced any changes in your physical activity?
- Have you maintained contact with people who are important to you? (family, friends, staff you have a strong relationship with)
- How are you maintaining contact? By phone? Video chat? Other?
- Have you created new routines in your day that you would like to maintain?

GUIDANCE:

If the individual’s current, daily routine aligns with the requirements of their activities (like employment) when they transition then:

- Support the individual in maintaining their current routine.
- Consider any new activities that the individual wants to continue to engage in and how they can be built into their routine.

If the individual will need to adjust their current, daily routine to align with the requirements of their activities (like employment) when they transition then:

- Help the individual identify what changes they would like to prioritize in their daily routine and how their team can support them.

If the individual’s current, daily routine does not align with the requirements of their activities (like employment) when they transition then:

- Assist the individual in seeking additional services to address the negative impacts on their daily routine. Identify ways the team can support the individual as they begin to transition back to their routine prior to the stay at home order.
- Engage the team to help the individual develop a schedule to build a routine that helps establish structure for their day.

CONDITIONS OF SUPPORTS AND SERVICES

QUESTIONS TO CONSIDER:

- What services are you currently receiving every week?
- How have you been receiving supports during the stay at home order?
- How satisfied were you with those supports?
- How do you want to receive supports moving forward?
- Do you have the assistive technology you need to receive services remotely? (Smart phone, tablets, etc.)
- Have you had the same staff during the stay at home order?
- Is there a certain staff person that you would like to continue to support you?
• Do you have access to the necessary technology to be successful with remote supports?
• Do you have what you need to be able to communicate your wants and needs? (e.g. interpreter)
• Do you have a job that you will be returning to?
• Will you need support in order to be able to return to work?
• Are there family supports currently in place that will need to be replaced due to their return to work?
• If you self-direct your services, is there staff (SSPs) available as the 40/60 rule is reinstituted?

GUIDANCE:
If the individual does not want any changes to their current supports and services after the stay at home order is lifted, then:
• Continue to provide the current supports and services as allowed under Appendix K, as long as health and safety of the individual can be assured (for example, continue providing remote services is applicable).
• Assess whether the individual has what they need to receive remote supports and/or telehealth (assistive technology) and if not, support them in getting what they need.
• Assess if the individual has lost any skills since the stay at home order or gained new skills or competencies.

If the individual needs some changes to their current supports and services after the stay at home order is lifted, then:
• The team should discuss available options to provide needed supports to the individual (for example, the individual is going back to work and needs support on the job) and adjust accordingly.
• Assess if the individual has lost any skills since the stay at home order or gained new skills or competencies.

If the individual needs significant changes to their supports and services after the stay at home order is lifted, then:
• The team should discuss available options to provide needed supports to the individual (for example, the individual’s provider had stopped providing services that the individual benefited from) and adjust accordingly.
• Assess if the individual has lost any skills since the stay at home order or gained new skills or competencies.

RESOURCES:

https://www.alabamapublichealth.gov/covid19/symptoms.html
https://altogetheralabama.org/communities/