



In-Person Meeting Indoor or Outdoor

March 1, 2022

All employees, contractors and visitors must continue to wear a mask, regardless of vaccination status, physically distance themselves and follow the safety precautions in place when in VMRC buildings and during work hours.

It is expected that Community Care Licensing licensed facilities^{[4],[5]} will abide by the CCL PINs^[6] regarding visitation, and those licensed by CDPH will abide by the All Facilities Letter (AFL)^{[7],[8]} regarding visitation.

When there is mutual agreement between the consumer/family and Service Coordinator (SC) to meet in-person indoor or outdoor. The expectation is for the SC, or other staff, to meet at the home or other natural environment of the consumer. Six feet physical distancing must be always observed. All meeting participants will wear mask or face covering at all times, covering nose and mouth, regardless of vaccination status, when in the office (lobby, meeting room, conference room, etc.).

To ensure health and safety of the consumer, their family, and service coordinator during COVID-19 pandemic, the following will be observed:

1. Before meeting with someone, please ask if the individual is sick or someone, they live with is sick; or had a COVID-19 exposure (COVID-19 Screening Questions). If they are, please reschedule your visit accordingly.
2. Pre-meeting preparation: finish as much paperwork/documentation prior to the in-person meeting. The goal is to have as less time as possible while at the in-person meeting to limit exposure.
3. The meeting will be held in an area where more than 6 feet physical distancing will be always observed. Guidelines from CCL, CDPH and local county public health offices will be followed. To lessen the risk, all meeting participants will wear mask at all times and physically distance more than 6 feet away from each other.
4. Attendees such as consumer, family member, support staff, service coordinator, etc., are required to always wear and keep on the following:
 - For indoor: mask or face covering. Face shield or eye goggles optional^{[9],[10],[11],[12]}.
 - For outdoor: mask, face covering. Face shield or eye goggles optional.
 - VMRC staff may wear disposable gowns if they want to.
 - Personal Protective Equipment (PPE) are provided by VMRC to their staff^[13] and consumers.
5. No handshakes or fist bumps or hugging.
6. Avoid touching face.

7. Have a hand sanitizer handy to practice frequent hand hygiene when soap and water is not available.
8. For consumers who live in care homes, follow the infection control guidelines as approved the licensing authority.

Risk stratification: the more precautions taken, the lower the risk of getting COVID-19. While virtual meetings provide the least risk to health and safety of consumers, their families, providers, and our staff than in-person meeting, restricted monitoring of consumers home settings also pose a risk. This latter risk is so severe throughout the state that our Department of Developmental Services has determined the mitigation is essential to preventing abuse and neglect that can be prevalent throughout our community. Things we will do to reduce the risks to health and safety on our consumers, their families, their providers, and ourselves:

1. For those not vaccinated we have provided for monthly voluntary COVID-19 testing and beginning September 1, 2021, weekly testing will be required of all non-vaccinated employees without exception.
2. Wearing mask, face shield/goggles, and require others to wear face coverings if they are to engage with you in the course of your work in an indoor setting.
3. In case others do not have a face covering, be sure to bring extra masks with you while in the community conducting these face-to-face meetings indoors.
4. Ask to use soap and water in the consumers home and if not granted use hand sanitizer provided to you at no cost by VMRC.
5. Maintain a physical distance of at least 6 feet away even in an open area while having an in-person meeting outside the home.

All these precautions are proven activities that will lower risk of acquiring COVID-19, which can make or others around you gravely ill.

The April 21, 2021 DDS directive regarding in-person monitoring visits requires regional centers to perform quarterly in-person monitoring for individuals living outside the family home. Due to an increase in COVID positivity rates, regional centers are concerned about balancing the benefits of in-person monitoring with the risk cross-contamination may pose.

VMRC's Clinical Director or Designee will determine when staff should conduct remote monitoring visits based on case positivity rates in each county in VMRC's catchment area and notify all case carrying and QA staff that remote monitoring shall stay in place until further notified (When a county's 7-day test positivity rate over a period of three consecutive days exceeds 5% as indicated) and when the remote monitoring visits can be suspended.

All regional center staff who conduct monitoring visits will comply with vaccination, testing, and masking requirements as outlined in DDS' September 28, 2021 letter to regional centers regarding the Public Health Order issued that same date as well as any applicable subsequently-issued Public Health Orders.

1. Per the recent ARCA Quarterly Monitoring Proposal regional centers may perform thorough remote quarterly visits as outlined in the process below which is designed to closely replicate in-person monitoring (with at least two annually being unannounced) if both the following conditions are met:
 - a. The home has been visited in-person since October 1, 2021; and,
 - b. There were no significant concerns noted during the last in-person visit related to the quality of vendored care being provided.
2. RC staff will conduct in-person quarterly monitoring visits to licensed or certified settings if any of the following are true:
 - a. A concern arises during a remote unannounced visit referenced in paragraph 1.
 - b. The home is currently subject to a regional center corrective action plan or facility sanction.
 - c. Within the last 30 days the regional center has been notified the home has been cited by its licensing agency.
 - d. The home is an ARFPSHN, EBSH, or CCH subject to more frequent monitoring; or,
 - e. The home does not have adequate internet connectivity to allow for a comprehensive remote unannounced visit.

These adjustments will conform with the requirements outlined in the ARCA Quarterly Monitoring Proposal.

* SCs can begin conducting Unannounced Visits remotely using Teams/Zoom.

Instructions for conducting Unannounced Visits Remotely:

1. The Service Coordinator informs the service provider that an unannounced remote visit will occur after 30 minutes and no later than (1) hour.
2. The Service Coordinator sends a meeting invite including a link for the electronic remote meeting.
3. The Service Coordinator while conducting the unannounced visit, reviews and make inquiries related to every item found within the unannounced visit form.
4. The Service Coordinator sends the completed unannounced visit form to the Special Projects SOTs (Denise Clements or Paoshoua Vue).
5. The Service Coordinator completes an Alert Form and sends to the Alert e-mail group, if during the remote visit, a Quality-of-Care issue is detected
6. The Service Coordinator completes an SIR, if during the remote visit, alleged abuse or neglect are detected.

Please contact the VMRC Help Desk for support and technical assistance with Microsoft Teams or Zoom.