



Gratitude



During this Thanksgiving season let us reflect on the importance of gratitude and count our blessings each day. Let us be thankful for all who go above and beyond to make life better for others. In these uncertain times, it is important to focus on faith and the values that we adhere to everyday. We can achieve greatness by choosing actions that are true to the heart. Kindness and Goodness are virtues characteristic of our genuine efforts in creating a peaceful and balanced world, and also a positive mindset. Acknowledging these efforts are a true testament to Gratitude and the impact it has on all of us as the most powerful source of inspiration.

Thank you to the Olean Center for allowing us to share this from their newsletter!

Happy Thanksgiving!

We hope everyone has a happy and safe holiday

As we approach the Thanksgiving holiday I wanted to take a moment to express my gratitude, which is shared by all of us at BHDDH, for the incredible work that is being done to provide such wonderful services to adults with Intellectual/Developmental Disabilities by the staff members of the Developmental Disability Organizations and other contracted workers around Rhode Island.

We recognize that your care, support and sacrifice in providing services in residential and community programs, as well to those living with family members and independently, are vital to ensuring that people with disabilities remain safe and supported through the long days, weeks and months of this pandemic.

Thank you for your commitment and endurance as we work together to meet the needs of the vulnerable population and as we look forward with hope relief in the coming year. You and your work are amazing and greatly appreciated.

Kevin W. Savage

Acting Director, DD Services



News from BHDDH Developmental Disabilities Services (DDS)

The **virtual public forum** held on November 16th was well attended with about 100 registrations. Since a number of registrations included more than one person watching, it was one of the best attended forums we've had. Kevin Savage, Acting Director of DDS, provided some updates about projects, and a good portion of the forum was dedicated to answering questions. A summary of the Q&A is attached.

A new **information piece on how funding can be used** has been developed with input from an Advocates committee and with assistance of the Sherlock Center on Disabilities of RI College. The piece is **attached at the end of this bulletin** and can be found on the [BHDDH website](#) or the [Sherlock Center website](#).

Crisis Stabilization Unit Opened: Fellowship Health Resources, Inc has opened Rhode Island's first Crisis Stabilization Unit (CSU) in Pawtucket. It offers individuals 18 years of age and older with a behavioral health (BH) diagnosis a structured space to improve recovery and promote a safe transition to the community. The CSU will also support those with negative symptoms related to a secondary diagnosis of an intellectual and/or developmental disability (I/DD). [View a video about the CSU here](#).

The Autism Project Offers Free Online Course to Prepare for a Career Working with People with Autism Monday, December 7 through Friday, December 11

The Autism Project is offering a **FREE, ONLINE** class titled "**Gaining Skills Towards Employment Supporting Individuals with ASD/DD.**"

You will learn about Autism Spectrum Disorder, as well as tools for engaging individuals with ASD in the classroom, community, and at home. At the end of the class, 6 hours of resume and interview prep will be offered, as well as assistance with job placement in Direct Support Worker positions (Paraprofessionals, PASS workers, HBTS, and/or RESPITE workers). This is a 36 hour class, and you will receive a certificate upon completion.

This is an online event. This event will take place over ZOOM from December 7th—11th from 9:00 am to 5:00 pm (with hourly breaks).

To register go to: <https://bit.ly/gainingskills>
[\[bit.ly\]](#) You will receive a link to the Zoom event in your email after you submit your registration.

Assistance is available for those who do not have access to the technology needed for this class. This program is funded through the Rhode Island Department of Labor and Training. For any questions, please contact Ariana DeAngelis: ADeAngelis1@lifespan.org or 401-785-2666 ext. 76475



Unemployed due to COVID-19?

PREPARE FOR A CAREER WORKING WITH PEOPLE WITH AUTISM!

Get more info and sign up for the **FREE** Class at:
<https://bit.ly/gainingskills>

The Autism Project

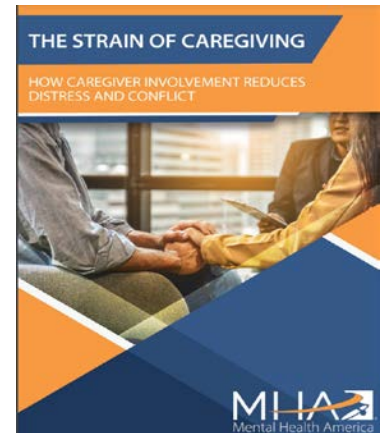
November is National Family Caregivers Month

November is the month where we take time to recognize the millions of people who dedicate their time, often unpaid, caring for a family member in need. Particularly as we approach the festive season when focus is placed on family and quality time, it is important that we show our appreciation for those who work tirelessly to provide care; whether it be financial, medical, domestic or emotional support. We must never under-estimate the strength that caregivers have for providing this support to those people who need it the most, nor the toll that it can take both emotionally and physically upon them. The devotion and love that these people show to their loved ones rightly ought to be celebrated. A Presidential Proclamation declaring November as National Family Caregivers Month (NFCM) provides much recognition for these devoted family members.



The national observance is spearheaded by [Caregiver Action Network](#) (CAN), a nonprofit that provides free education, peer support, and resources to family caregivers. The 2020 theme, #CaregivingInCrisis, highlights new realities that family caregivers and their loved ones face during these uncertain times.

In recognition of National Family Caregivers Month, [Mental Health America](#) has released a new report, [The Strain of Caregiving: How Caregiver Involvement Reduces Distress and Conflict](#), which explores whether family caregivers feel involved in the care of their loved ones, if involvement has an effect on their levels of distress and conflict in providing care, and the hope they have for their loved one's recovery. This report is an analysis of survey responses from 817 caregivers of a family member or friend living with a mental health condition collected from October 2019-May 2020.



The Administration for Community Living (ACL) is also a proud observer of NFCM, and works year-round through [programs and councils](#) to engage, support, and empower caregivers, including the [National Family Caregiver Support Program](#), the [Lifespan Respite Care Program](#), and the [Advisory Council to Support Grandparents Raising Grandchildren](#).

The [RAISE Family Caregiving Advisory Council](#) is charged with providing recommendations to the Secretary of Health and Human Services on effective models of family caregiving and support to family caregivers, as well as improving coordination across federal government programs. Learn more about ACL at <https://acl.gov/>.



Where's the Help I Need? Caregiving During a Pandemic

Family caregivers deal with numerous challenges every day. Caregiving is one of the hardest jobs you can imagine. The COVID pandemic has added another layer of stress. Caregivers are dealing with a new set of challenges. Many caregivers rely on friends, family, or support groups to help them through difficult times, and to fight the isolation so many caregivers feel. But as a result of COVID, many family caregivers find that some help they have relied on is not available at a time when help is needed more than ever.

That is why Caregiver Action Network created Caregiver Help Desk. It's a no-cost resource that can provide family caregivers with all types of help whenever they need it. Caregiver Help Desk connects family caregivers with expert staff and digital tools to help them find answers to their



questions. Caregivers have contacted Help Desk with financial questions, how to find virtual support groups, resources in their local area—or just needing to talk. Since its creation, Caregiver Help Desk has helped thousands of family caregivers in all 50 states. Support is available from 8:00AM until 7:00PM Eastern by calling the toll-free number at **1-855-CARE-640 (1-855-227-3640)** or go to [CaregiverAction.org/helpdesk](https://www.CaregiverAction.org/helpdesk) and use the chat or e-mail features.

Pfizer chooses Rhode Island as one of four states in pilot vaccine delivery program

As Pfizer works on developing a distribution plan for its coronavirus vaccine, it's looking toward the Ocean State. Rhode Island was chosen along with Tennessee, Texas, and New Mexico to be part of a COVID-19 Immunization Pilot Program because of their differences in size, population, and immunization infrastructure.

Pfizer is on track to apply for emergency-use approval from the U.S. Food and Drug Administration later this month. While Pfizer said its vaccine appears to be 90 percent effective, it must be stored at ultra-cold temperatures of minus 94 degrees Fahrenheit, presenting a challenge to distribution.

“Rhode Island is one of the best-immunized states in the country,” a RI Department of Health spokesman said. “One of the reasons is our systems for ordering, distributing, and administering the vaccine in healthcare settings and community settings.”

While the four states will not receive the vaccine earlier than other states, being part of the pilot will enable Rhode Island to be ready once the vaccine that has gone through all the safety reviews. “Rhode Island will be ready on day one to distribute this vaccine. Having a seat at the table allows us to build a plan that works for Rhode Islanders, expanding on our existing vaccine infrastructure to reach every neighborhood and every community” said Governor Raimondo.

Rhode Island will distribute the vaccine in phases as it become widely available. Two pharmacy chains are prepared to administer any future COVID-19 vaccines once approved. Stop & Shop and Woonsocket-based CVS Health are among the first that will give the vaccines at no cost.

A Message from Rhode Island Governor Gina Raimondo

Over the last two months, we've tried to be as targeted as possible in our restrictions, so that we could keep our economy open and keep Rhode Islanders safe. Unfortunately, what we've done to date hasn't been effective enough. I've done everything I could to avoid more severe restrictions because I know how hard it is for both people and businesses. But people aren't following the rules and we're left with no other options. **So today, we announced both immediate changes to the current guidance and our plan for a two-week pause starting after Thanksgiving.**

And for the next 10 days, we're making two additional changes:
















1. **Effective immediately, we're lowering the social gathering limit to a single household.**
This means you should not be spending time socially with anyone you don't live with in the next 10-days, including on Thanksgiving.
2. In addition to the stricter capacity limits on stores over 30,000 sq. ft., **we're also requiring box stores to develop a plan for handling the increased volume of shoppers this season, including for Black Friday, and post that plan in the store.**

Just after Thanksgiving, we'll be entering a two-week pause. This is the crux of our winter strategy. In just a two-week period, we have the ability to prevent overwhelming our hospital system without the need for a total lockdown. None of this is easy. I know how difficult it's going to be over the next few weeks, especially on Thanksgiving. But the loss of life we face if we don't follow the rules is far too great. If we take the next few weeks seriously and **pause our activities and our social lives for a short time, then we can get through this without the need for a full lockdown.**

We're all in this together.
-Gina Raimondo

Rhode Island on PAUSE

11/30 - 12/13

OPEN	LIMITED	CLOSED
 IN-PERSON PreK-8 SCHOOL	 IN-PERSON HIGH SCHOOL	 IN-PERSON COLLEGES & UNIVERSITIES
 CHILD CARE	 SOCIAL GATHERINGS One household	 OFFICES (WHEN POSSIBLE)
 MANUFACTURING & CONSTRUCTION	 INDOOR DINING 33% capacity, early closures, one household per table	 BAR AREAS
 PERSONAL SERVICES	 RETAIL 1 person/100 sq. ft. (big box: 1 person/150 sq. ft.)	 RECREATIONAL VENUES
 HEALTH CARE	 HOUSES OF WORSHIP 25% capacity (max of 125)	 INDOOR SPORT FACILITIES, GYMS & GROUP FITNESS, ORGANIZED SPORTS (excludes NCAA & professional sports)

'DON'T DO IT': Rhode Island doctor warns against indoor Thanksgiving gatherings with those outside your household

By Dialynn Dwyer, Boston.com Staff

<https://www.boston.com/news/coronavirus/2020/11/16/megan-ranney-thanksgiving-gatherings>

If you're moving forward with Thanksgiving plans despite COVID-19 that include guests beyond your immediate household, a Rhode Island emergency room doctor has an urgent message for you: Don't do it.

Megan Ranney, an emergency room physician for Brown Emergency Medicine and director of the Brown Lifespan Center for Digital Health, raised concerns on Twitter over the weekend about the attitude toward holiday gatherings, flagging a recent survey in which 38 percent of Americans said their plans included 10 people or more.

"This gives me heart palpitations," Ranney wrote, sharing the poll. "Folks. DON'T DO IT. This is going to light a million new fires and devastate families across the country.

"DO NOT DO INDOORS THANKSGIVING with people who aren't part of your immediate household," she added. "I'm begging you."

The doctor emphasized there is "so much evidence" that both small and large "family" gatherings drive the spread of COVID-19, [pointing to a Maine wedding](#) that led to [177 infections and 7 deaths](#), a [three-week family gathering](#) where 11 individuals of 14 staying in a house got sick, and a New Jersey family get together that [resulted in the deaths](#) of five of its members.

"I could go on, and on, and on," Ranney wrote of the examples. "The short version, though? JUST DON'T DO IT. You are putting your family's and your own health at risk."

If "you must" do an in-person Thanksgiving or holiday celebration, Ranney recommended it take place outdoors, for a limited time, with six feet of social distancing, and separate food dishes for those outside your household. Or, opt for a virtual celebration.

The situation in hospitals is already dire, Ranney warned on CNN on Sunday, describing the circumstances in her own emergency room as "horrific" as cases continue to rise. "Right now, our hospitals and our ERs are at the breaking point and we are on the edge of what is the worst possible thing for a health care provider, which is to not be able to help," she said. "We are literally running out of beds in the hospital. We're running out of intensive care unit beds, dialysis machines. We are exhausted. We are seeing our colleagues get sick."

When a patient is really sick with COVID-19, Ranney stressed it is "not like watching an episode of E.R.," packed with excitement and drama.

"It is a quiet and sad death," she said. "We are looking at patients who can't see their families to say goodbye. It's just the beeping of a machine, the sound of a ventilator, and those last ditch efforts we make to try to save them, knowing that there's so little that we can do. It is an absolutely heartbreaking moment for all of us in health care, not just doctors and nurses. But all of our support staff, our techs, our respiratory therapists. Even the housekeeping staff. They're just worn out and tired and scared of what's coming next."

I/DD Research Centers Weigh in on I/DD Needs During Pandemic

A letter published recently in the *American Journal of Psychiatry* on behalf of the directors of the nation's 13 Intellectual and Developmental Disabilities Research Centers, which are funded by the National Institutes of Health (NIH), draws attention to "the diverse array of effects of the COVID-19 pandemic on individuals with intellectual and developmental disabilities in the United States." The signatories hope to "stimulate subsequent scientific and advocacy efforts to ameliorate the disproportionate burden of the pandemic on people with intellectual and developmental disabilities." They begin "with the assertion that among non-infected persons in the United States, few are more adversely affected by COVID-19 than individuals with intellectual and developmental disabilities, given that a vast proportion require in-person care or critical therapeutic support within their living environments, with little backup or systematic coverage for prolonged interruption of services." The letter outlines several priorities that must be met to address the impact of the pandemic on individuals with I/DD:

- Restoration of in-person support services or comparable alternatives;
- Consideration of the likely disproportionate impact of mitigation efforts and social distancing on individuals with intellectual and developmental disabilities;
- Addressing inequity in education, exacerbated by distance learning, across the lifespan;
- Approaching implementation of telehealth practice in clinical care in a manner that maximizes accessibility and effectiveness for individuals with I/DD; and
- Ensuring access to testing for and appropriate medical care of individuals with intellectual and developmental disabilities infected with the virus.

The letter refers to the "Herculean task stakeholders and advocates have to ensure that public decision making and the massive mobilization of relief funds by federal, state, and local governments are equitably responsive to the needs and interests of individuals with intellectual and developmental disabilities, who require representation in all decisions that affect the population in a public health emergency of this scale," and calls "for Congress to expand home- and community-based services." Read the [letter](https://ajp.psychiatryonline.org/) at <https://ajp.psychiatryonline.org/>.

Healthy People 2030 Framework

The U.S. Department of Health and Human Services (HHS) has released the Healthy People 2030 framework. Healthy People 2030 is the latest update to the Healthy People public health initiative, which is a framework to establish public health priorities that help individuals, organizations, and communities across the United States improve health and well-being of the nation.

Healthy People 2030 establishes goals and data-driven benchmarks for improving a variety of health outcomes across a wide range of populations. The framework includes a goal to "Reduce the proportion of people with intellectual and developmental disabilities who live in institutional settings with 7 or more people." According to the framework, "people with intellectual and developmental disabilities who live in large institutional settings may have poorer quality of life. They're often isolated from their families, and they may not be able to make important decisions about their lives. Laws and programs that increase the number of smaller, family-sized residential settings for people with disabilities can provide more opportunities for educational, physical, and social activities." The framework is available at <https://health.gov/healthypeople/objectives-and-data/browse-objectives>.

Silver Linings

No stopping the show for small businesses

<https://warwickonline.com/stories/no-stopping-the-show-for-small-businesses,156909>

By Arden Bastia



Small Business Saturday may look different this year, but Sue Babin is hopeful for a successful event. Babin, the Director of Special Projects at the RI Developmental Disabilities Council, is passionate about supporting and uplifting Rhode Island small businesses. Her role on the council is to help veterans and folks with disabilities establish their own businesses and become entrepreneurs.

In the past, Small Business Saturday was held at the Crowne Plaza where hundreds of vendors and thousands of attendees would gather for the day. In 2019, the event hit its highest attendance with 142 vendors and about 3,500 shoppers.

“We were on track to have our fourth year at the Crowne, and we were almost sold out of vendor space,” recalls Babin in an interview. “But then COVID hit. We crossed our fingers and hoped that things were different in the fall. And when we realized that things weren’t changing, we came up with the idea of a virtual event.”

This year the event, which is free to attend, is taking place virtually on <http://sbsshopri.com/> and the Shop RI Facebook page. What was previously just a one-day event; **Small Business Saturday begins on Nov. 28 at 9 a.m. and extends through the full month of December.**

“Businesses in RI have struggled financially because of COVID, small businesses and big businesses. Some of these small businesses are too small and can’t apply for the state grants. I think people have learned more about online shopping, and all this different online stuff that we didn’t know 7 months ago,” said Babin.

To help vendors with their online presence, Babin and her team have offered free classes to business owners. Babin explained that the classes teach owners how to boost their websites and Facebook pages, as well as providing tips and tricks to sell virtually.

“It’s not about the money for us,” she says of herself and her colleagues, “it’s about showcasing cool businesses and awesome gifts. We want the public to walk into the event and not see someone with a disability, but instead see a business. You don’t see color, you don’t see ability, and you don’t see ethnicity.”

Babin says to expect new and exciting ways to interact with vendors from home, including raffles throughout the day, gift certificate giveaways, prerecorded interviews with business owners, and much more.

Vendors can still register to sell at the event. The deadline is Nov. 20 and it costs \$55. Visit <http://sbsshopri.com/> to register and to view the complete list of vendors attending this year’s event.

SATURDAY
11.28.2020
9am - 4pm
Virtual Event This Year
Join us!

Macy's Thanksgiving Day Parade will be virtual

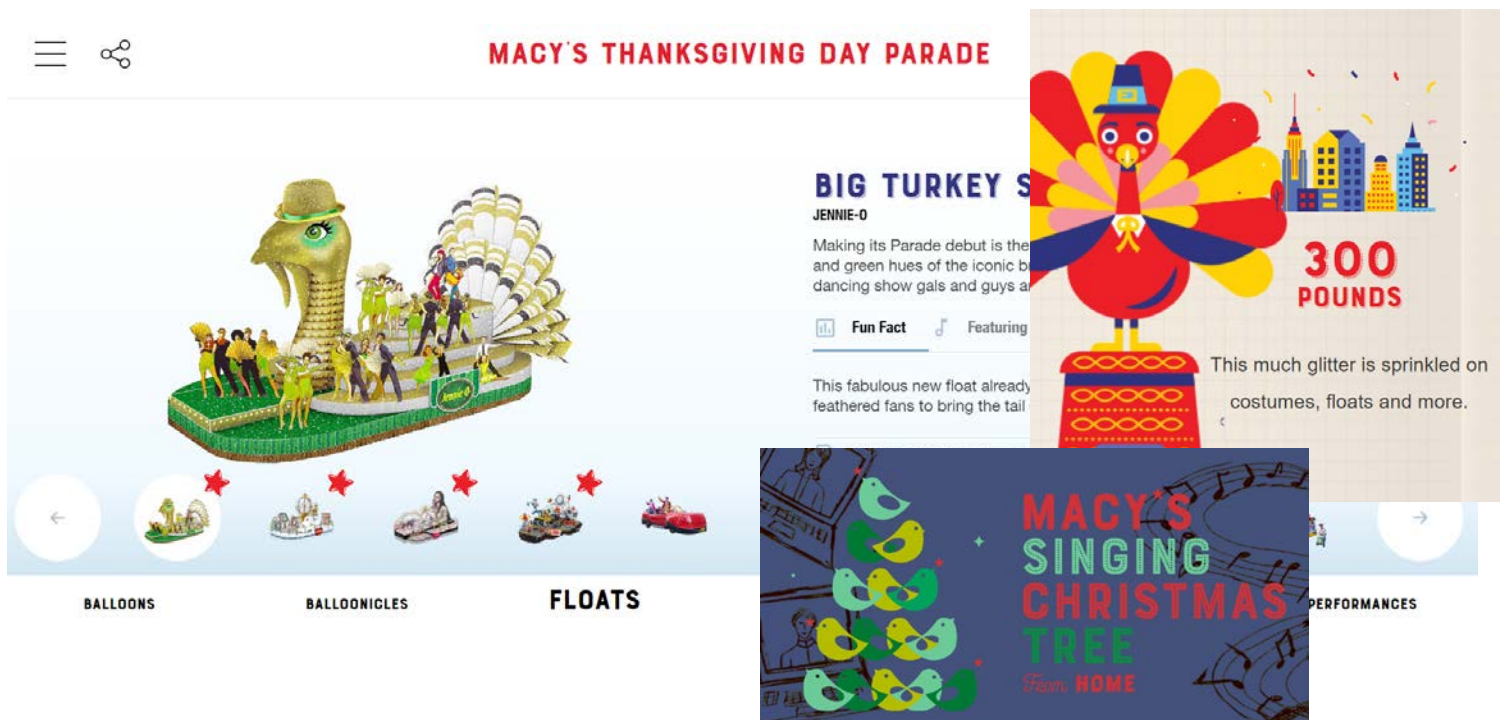
WATCH IT LIVE FROM 34TH STREET ONLY ON NBC, THURSDAY, NOVEMBER 26, 9AM-NOON IN ALL TIME ZONES!

LET'S CELEBRATE TOGETHER—AT HOME!

Since we aren't marching down the streets of NYC this year, the only place to see all the performances, gigantic balloons & fabulous floats is from the comfort & safety of your home.

Visit the [Macy's parade website](#) for views of the floats, balloons and other attractions.

[Download and print](#) free Parade-themed coloring pages, word searches, & more.



19 Thanksgiving Games That Have Nothing to Do With Football

From festive takes on classic games to some of the most creative ways to celebrate Turkey Day you'll ever see (turkey bowling, anyone?), you are sure to enjoy these games—which you can buy or DIY. Playing Pin The Feather On The Turkey or a Thanksgiving memory matching game. From a Thanksgiving Mad Libs to a family-friendly Would You Rather game, there are plenty of games for everyone. And, in the spirit of the holiday, the list also includes games that'll get you thinking about what you're thankful for. Game night definitely just got a holiday makeover.

See the list of games at <https://www.housebeautiful.com/entertaining/holidays-celebrations/g3901/thanksgiving-family-games/>

If you are experiencing a mental health crisis, BH Link is here for you

BH Link's mission is to ensure all Rhode Islanders experiencing mental health and substance use crises receive the appropriate services they need as quickly as possible in an environment that supports their recovery. Call 911 if there is risk of immediate danger. Visit the BH Link website at www.bhlink.org or for confidential support and to get connected to care:

CALL (401) 414-LINK (5465)

If under 18 CALL: (855) KID(543)-LINK(5465)

Visit the 24-HOUR/7-DAY TRIAGE CENTER at 975 Waterman Avenue, East Providence, RI

Stay Informed with Information on COVID-19

Rhode Island Department of Health COVID-19 Resources

Hotline (401) 222-8022 or 211 after hours;

Email RIDOH.COVID19Questions@health.ri.gov

Website <https://health.ri.gov/covid/>

Center for Disease Control COVID-19 Information

Website cdc.gov/coronavirus

Videos <https://www.cdc.gov/coronavirus/2019-ncov/communication/videos.html>

Includes a link to ASL videos

BHDDH Information on COVID-19's Impact on DD Services and the DD Community

Website bhddh.ri.gov/COVID

RI Parent Information Network (RIPIN)

Website <https://ripin.org/covid-19-resources/>

Call Center (401) 270-0101 or email callcenter@ripin.org

Advocates in Action – for videos and easy to read materials

Website <https://www.advocatesinaction.org/>

Website offers BrowseAloud, which will read the website to you

Sign Up for Our Email List

If you aren't receiving email updates and newsletters from BHDDH, you can sign up on our website. From the main BHDDH page at bhddh.ri.gov, select **What's New**, then go to bottom and click on **DD Community Newsletter**. The link to sign up for the BHDDH Newsletter is directly below the title, as shown in the picture at right.

DD Community Newsletter

[SIGN UP FOR THE BHDDH NEWSLETTER](#)

Contacting DD Staff

DDD has put extended hour phone coverage in place with a central business hour phone number and an on-call number for nights and weekends.

If you have a vital need, please call the numbers on the next page. If you have any general questions or concerns, please email them if you can, in order to try to leave the phone lines free for those who need to call. We will do our best to address your questions directly or through future newsletters.

AM **M T W Th F** PM
401-462-3421

8:30 AM → → → → → ← ← ← ← ← 4:00 PM

WEEKDAYS DURING BUSINESS HOURS FOR:

- **VITAL, NON-MEDICAL SUPPORT NEEDS**
- **QUESTIONS ABOUT YOUR DD SERVICES**

During business hours
 (Monday-Friday 8:30-4:00),
 for questions or support
(401) 462-3421
 Para español, llame
(401) 462-3014

PM **M T W Th F** PM
401-265-7461

4:00 PM → → → → → ← ← ← ← ← 10:00 PM

AFTER HOURS ON WEEKDAYS FOR:

- **VITAL, NON-MEDICAL SUPPORT NEEDS**

For emerging or imminent care
 related questions,
 Mon - Fri 4pm-10pm and
 weekends 8:30am-10pm
(401) 265-7461

AM **SAT SUN** PM
401-265-7461

8:30 AM → → → → → ← ← ← ← ← 10:00 PM

ON WEEKENDS FOR:

- **VITAL, NON-MEDICAL SUPPORT NEEDS**

E-MAIL THE DIVISION

BHDDH.AskDD
@BHDDH.RI.GOV

HELP US KEEP THE PHONE LINES OPEN FOR
 THOSE WHO ARE CALLING WITH A VITAL NEED!

WHEN POSSIBLE, PLEASE SEND AN E-MAIL FOR:

- **NON-CRITICAL CONCERNS** about Your Services and Supports
- **GENERAL QUESTIONS** about Your Services or the RI DD System

Send general questions to the
 AskDD email address. Please
 do not email critical issues.
BHDDH.AskDD@bhddh.ri.gov

911

FOR MEDICAL EMERGENCIES
CALL 911
 RIGHT AWAY. DON'T WAIT!

For medical or
 healthcare related
 emergencies, call
 your Primary Care
 Physician or 911

CONTACT YOUR DOCTOR

CALL FOR:

- ROUTINE Healthcare Questions
- NON-EMERGENCY Medical Care

FOLLOW YOUR DOCTOR'S ADVICE
 DON'T go to their office
 unless they tell you to!

Other Ways to Use Day Funds

People with intellectual and developmental disabilities (IDD) can choose to use their funds in new and different ways to support their participation in community activities!

How people take part in day activities and supports has changed due to the COVID-19 pandemic. Many agency supports are limited or have stopped. Below are some examples of how people who used agency day services before COVID, and those that self-direct, can now use their day program funding to support their participation in community activities. To use funds in a new way, you can revise your existing plan. You don't need to do a whole new plan in order to change how you use your funds.

For more information about using your funds differently, speak to your provider agency or fiscal intermediary.

Other Ways to Use Your Funds	Examples	How This May Help You
Buy technology or equipment	<ul style="list-style-type: none"> • iPad / tablet • Computer • Ear buds / headphones • Cell phone • Zoom or other video platform 	<ul style="list-style-type: none"> ✓ Increases your access to online social activities ✓ Increases your access to friends and families, reducing feelings of isolation while social distancing
Hire your own staff	<ul style="list-style-type: none"> • Family member • Neighbor • Trusted friend 	<ul style="list-style-type: none"> ✓ Allows you to have needed support from trusted individuals ✓ Allows you to put supports in place quickly
Add or change a service	<ul style="list-style-type: none"> • Respite • Add new employment services 	<ul style="list-style-type: none"> ✓ Allows you to put new services in place
Join a community activity/club/group that supports your goals	<ul style="list-style-type: none"> • Zoo membership • YMCA/gym membership • Fees for an art class • Fees for online class 	<ul style="list-style-type: none"> ✓ Allows you to participate in new activities ✓ Allows you more options for community activities

If you find this information helpful, please share with other people who can use this information.



Disability Rights

RHODE ISLAND

Rhode Island's Designated Protection & Advocacy Agency
Keeping You Informed of
Your Rights While Hospitalized

**If You Have A Disability,
You Have The Right To Have A
Support Person While Hospitalized.**

A Support Person Is Someone Designated To Assist
With Your Essential Care And Treatment.

A Support Person Is Essential To A Patient With A Disability,
Altered Mental Status, Communication Barriers, Behavioral,
Intellectual and/or Developmental Disabilities, Dementia,
and/or Behavioral Health Needs.

If You Feel Your Rights, or the Rights of
Someone In Your Care Are Being Violated,
Disability Rights Rhode Island is Here To Help!


DRRI Can Help


Contact us at 401-831-3150 or contact@drri.org


drri.org


33 Broad Street, Suite 601

Providence, Rhode Island 02903

 : 401-831-3150

 : 401-831-5335

 : 401-274-5568

 : 800-733-5332

REOPENING RI

Tips for a safer holiday season

Rates of new COVID-19 cases and hospitalizations are steeply rising in Rhode Island and across the country. Wherever you celebrate this holiday season, follow these tips and consider participating in only lower risk activities to help lower the chances of catching and spreading COVID-19.



Lower risk celebrations

- **Limit in-person holiday gatherings to only people you live with.** Do not travel or host guests for the holidays. Staying home and celebrating with only those you live with is the best way to protect yourself and others from COVID-19.
- **Find safer, creative ways to celebrate the holidays** with people you don't live with.
 - Prepare or order a holiday meal for friends or family. Deliver food to them in a way that limits contact.
 - Host a virtual holiday dinner with extended family or friends, especially if they are at a higher risk for severe illness from COVID-19 or live in a nursing home or assisted living facility.
 - Watch sporting events, parades, and movies from home or virtually with others rather than going out.

Higher risk celebrations

If you risk celebrating the holidays in person with people you don't live with:

- **Limit social contact outside of your household to one other household or one or two other people.** Keep your group small and stable. Limit social gatherings to no more than 10 people as required by law, unless you are at a restaurant or a location with an on-site licensed caterer.
- **Wear your mask and watch your distance at all times**, even within your small, stable group.
- **For 14 days before and after holiday gatherings**, stay home, avoid contact with other people, and only leave home for essential activities.
- **Take it outside as weather permits.** Open windows and doors to increase air flow when guests come inside.
- **Plan and get creative with limiting the use of shared spaces and objects.** For example, seat people at least six feet apart from each other. When exchanging gifts, use hand sanitizer or exchange gifts virtually.
- **Clean and disinfect** commonly touched surfaces and shared items between uses.
- **Avoid these activities:**
 - Sharing food and drinks.
 - Shaking hands and hugging. Wave and verbally greet others instead.
 - Singing, dancing, chanting, and shouting. These activities increase your chances of catching and spreading COVID-19 through the air.
 - Outdoor family football games and other high-contact activities.
 - In-person gatherings with people at a higher risk for severe illness from COVID-19, such as older adults and people with certain medical conditions.

- **Wear a mask and watch your distance any time you're near people you don't live with**, even if you're with extended family, teammates, your faith community, or close friends—indoors and outdoors.
- **Stick to essential activities and continue to take it outside.** Essential activities include going to work or school, exercising, medical appointments, and buying goods and meals.
- **Remember the three Ws!**
 - **Wear a mask** that's at least two our nose, mouth, and chin without any gaps.
 - **Wash your hands** often with soap and water for at least 20 seconds. Or carry and use hand sanitizer that's at least 60% alcohol.
 - **Watch your distance** by staying at least six feet apart from others.
- **Stay home and apart from others if you have symptoms**, if you may have been exposed to someone with COVID-19, or if you are in quarantine or isolation.



These tips may change as COVID-19 case counts change. Find more tips for safely celebrating holidays at www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/holidays.html

11/02/2020

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An official publication of the State of Rhode Island.



RHODE ISLAND

REOPENING RI

Holiday Season Guidance: Do's

Wherever you celebrate this holiday season, **follow these tips** and consider participating in only lower risk activities to help lower the chances of catching and spreading COVID-19.

Remember the three Ws!

- **Wear a mask** that's at least two layers thick and fits snugly but comfortably over your nose, mouth, and chin without any gaps.
- **Wash your hands** often with soap and water for at least 20 seconds. Or carry and use hand sanitizer that's at least 60% alcohol.
- **Watch your distance** by staying at least six feet apart from others.

If you celebrate in person with people you don't live with: Plan and get creative with limiting the use of shared spaces and objects. For example, seat people at least six feet apart from each other and use hand sanitizer when exchanging gifts.

Limit in-person holiday gatherings to only people you live with.

If you celebrate in person with people you don't live with: Open windows and doors to increase air flow when guests come inside.

If you celebrate in person with people you don't live with: Limit social contact outside of your household to one other household or one or two other people. Keep your group small and stable. Limit social gatherings to no more than 10 people.



○ Find safer, creative ways to celebrate the holidays with people you don't live with. For example, deliver a meal to older relatives, host a virtual holiday dinner, or watch a movie from home.

○ **If you celebrate in person with people you don't live with:** Take it outside as weather permits.

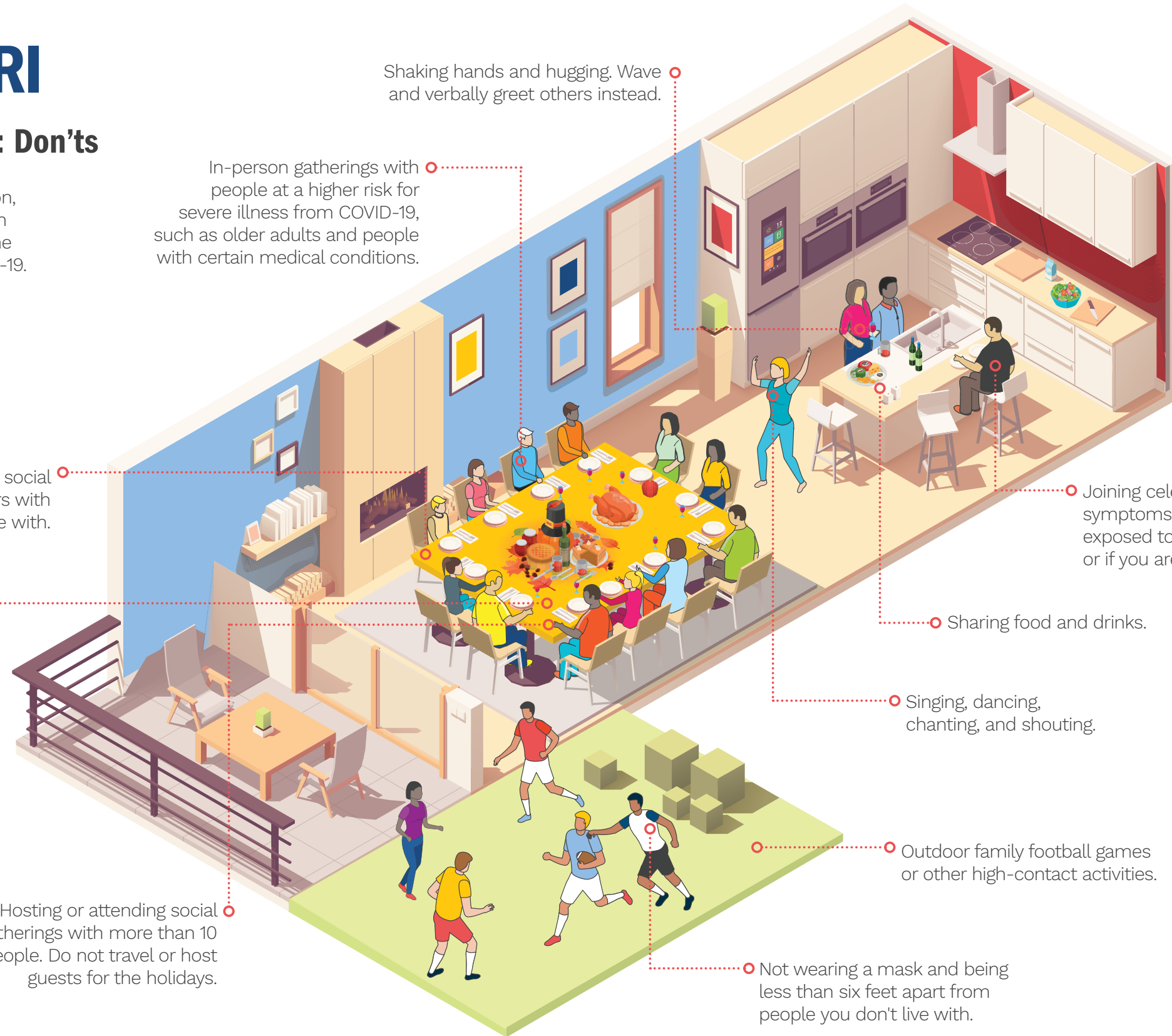
○ **If you celebrate in person with people you don't live with:** Clean and disinfect commonly touched surfaces and shared items between use.

○ Wear a mask and watch your distance any time you're near people you don't live with, even if you're with extended family, teammates, your faith community, or close friends—indoors and outdoors.

REOPENING RI

Holiday Season Guidance: Don'ts

Wherever you celebrate this holiday season, **avoid these activities and behaviors** with people you don't live with to help lower the chances of catching and spreading COVID-19.



Shaking hands and hugging. Wave and verbally greet others instead.

In-person gatherings with people at a higher risk for severe illness from COVID-19, such as older adults and people with certain medical conditions.

Hosting or attending social gatherings indoors with people you don't live with.

Joining celebrations if you have symptoms, if you may have been exposed to someone with COVID-19, or if you are in quarantine or isolation.

Sharing food and drinks.

Singing, dancing, chanting, and shouting.

Joining celebrations if you have symptoms, if you may have been exposed to someone with COVID-19, or if you are in quarantine or isolation.

Outdoor family football games or other high-contact activities.

Hosting or attending social gatherings with more than 10 people. Do not travel or host guests for the holidays.

Not wearing a mask and being less than six feet apart from people you don't live with.



Developmental Disabilities Services

Notes from DD Community Forum

November, 16, 2020 from 3-4:30pm

Zoom Online Meeting hosted by Advocates in Action

- ▶ Kelly Donovan from Advocates in Action opened the meeting and welcomed everyone.
- ▶ Acting Director of DD Services Kevin Savage introduced the DD team, provided updates, and took questions.

DDS Updates

1. COVID Response

Working with providers and the community to address the COVID pandemic is the priority at the moment.

- **Congregate Care Impact:** In last 14 days, 33 residents and 63 staff members from 31 group homes (about 11% of the 291 total group homes) have been impacted by COVID. As of today (11/16), no group home residents are hospitalized.
- **Visitation guidance:** It is strongly advised that congregate care providers suspend all visitation to keep the vulnerable population as safe as possible. The one exception is for compassionate care visits.
- Director Savage acknowledged concerns about **the impact of long-term quarantining and social distancing.**
 - Families are encouraged to sign up for emails from BHDDH, including the DD News bulletins that are sent out weekly. DD News contains information about DD Services and other topics including positive mental health activities.
 - If you feel that you or someone you love is not getting the support needed, please contact your social caseworker.
 - Some providers are conducting virtual activities. If you want to engage with another provider, your social caseworker can assist you with a referral.
 - Internally, DDS is working with Medicaid to ensure alternatives, such as group virtual activities or online classes, are covered by Waiver funding.
- **SIS Assessments:** SIS workers have been certified in conducting virtual assessments. SIS meetings are now being scheduled on HIPAA-compliant Zoom lines. There are 246 assessments that need to be rescheduled due to COVID.
- Some **ISP meetings are happening on Zoom** lines. Please be mindful of privacy issues and try to use HIPAA-compliant lines or other security measures built within Zoom.
- There is a strong focus on **community-based services**, as opposed to center-based programming, going forward. The goal is to ensure that people have access to services in an individualized manner to meet their specific needs.
- COVID has increased conversations about **ways someone can use their allocation for day supports.** If you want to discuss options, reach out to your social caseworker, provider agency, or FI. More information about options will be shared via the weekly DD News bulletin and posted on the BHDDH website, as well as partner websites such as the Sherlock Center and Advocates in Action.

2. START (Systemic, Therapeutic, Assessment, Resources, and Treatments)

- The Center for START Services will work with RI to develop a **crisis intervention system** for individuals with IDD and behavioral health needs. START is an evidence-based model that includes intensive training and certification of individuals as START Coordinators, who provide crisis prevention and intervention services.

3. **Enhanced SLA funding**

- SLA providers are now able to receive additional funding for the day supports they are providing to their SLA participant due to the COVID-related closure of the usual day supports agency.

4. **EVV (Electronic Visit Verification)**

- EVV is set to be implemented with a soft launch starting January 21, 2021. BHDDH is working with FI's and stakeholders to get everyone on board.
- There are about 37 self-directed people in the DD system who have been identified as receiving home-based services subject to EVV.
- An information piece explaining EVV and to whom it applies is in development.

5. **Employment**

- **PCSEPP 3** is well underway with 4 lead agencies overseeing the implementation: Looking Upwards, Perspectives, Seven Hills RI, and Work, Inc. The customized employment pilot program is focusing on Consent Decree target population members who have never been employed and need a different approach to employment. There is information on the employment page of the BHDDH website at (https://bhddh.ri.gov/developmentaldisabilities/employmentfirst_index.php), including links to the recording of the virtual open house where all four of the projects were presented as well as copies of the presentation materials. If you are interested or unsure if you are eligible, contact Jay MacKay at Gerard.MacKay@bhddh.ri.gov or at (401) 462-5279 or talk with your social caseworker.
- Providers are continuing to offer traditional employment supports.
- Many people continue to work as essential workers. Many others have obtained jobs since March.
- In October, RIPIN and BHDDH sponsored a Peer-to-Peer panel and a Family-to-Family panels called Real Talk about Work. In the panels, adults with differing abilities shared stories of how they got hired and the supports they received along the way, and parents and siblings shared their perspectives. You can see the Peer panel at <https://www.youtube.com/watch?v=PXGzFyc3muQ> and the Family panel at <https://www.youtube.com/watch?v=FUDpCISqI8w>.

6. **Consent Decree**

- In July, the Federal Court issued an order identifying 16 administrative barriers for the Department to address to reduce the administrative burden on providers. Five workgroups are addressing these 16 areas: Fiscal, Eligibility, Appeals, Contacts, and Individual Budgets. The workgroups anticipate that recommendations will be made by the end of the calendar year.
- Brian Gosselin stressed the need to ensure that the system complies the Consent Decree requirements and is person-centered. He has spoken to many and appreciates the support in his interim role as Consent Decree Coordinator.

7. **Conflict-Free Case Management**

- A working subgroup of the Quality Advisory Committee has been charged with developing a recommendation for a conflict free case management model. The group has an 8-week timeline to flesh out details for each federally required component of case management to include purpose, set of expected activities/tasks, and provider standards.
- Brenda DuHamel, an Associate Director within DD Services at BHDDH, is also working with the Long-Term Services and Supports (LTSS) Team at the Executive Office of Health and Human Services (EOHHS) to develop a conflict-free case management system to meet the needs of all HCBS agencies and ensure that BHDDH is aligned with the larger State efforts.

8. **Technology Purchases**

- Many people have asked for an itemized list of what technology and services can be purchased. No exhaustive list exists because the purchases should be defined and supported by each individual's plan. A list of some approved common technology items will be developed, but an individual will still be able to submit a personalized request for what they need.
- The pandemic has exposed a clear need for and many benefits of technology for everyone, including DD participants. However, BHDDH recognizes that not everyone wants to use technology and will continue to explore various ways to communicate with participants and families.

9. **Budget**

- This item is deferred until the next community forum, after a budget has been approved by the General Assembly.

10. **Transition Services**

- DDS works closely with the RI Department of Education (RIDE), the Office of Rehabilitation Services (ORS), and the RI Parent Information Network (RIPIN) to create **a collaborative state plan for transition planning** and services. RIDE, ORS and DDS provide presentations to introduce adult service options to educators working with transition-age youth (age 14 through 22).
- A **Transition Community of Practice** has been established with State agencies and representatives from provider agencies with the goal of increasing communication with educators across the state.
- Adult service information is provided to students and families/caregivers starting at age 14. DDS or RIPIN, representing DDS, participates in IEP meetings for youth with Intellectual or Developmental Disabilities ages 14 through 22 in public, private, and charter schools.
- DDS has an **"Eligibility by 17"** policy that encourages student to apply around the time they turn 17. This has led to an increase in students who know they are eligible for adult services several years before they exit school-funded services.
- DDD social caseworkers are assigned to work with students at least one year prior to the student's exit from school-funded services.
- A family/caregivers **Transition timeline** has been created to provide benchmarks for steps to be taken to help the youth transition into adult services.
- Outreach to children's organizations (CEDAR) has taken place, to reach a younger population and provide an earlier introduction to adult services to families.
- Materials have been updated, translated into Spanish and are available on the Transition page of DD website (https://bhddh.ri.gov/developmentaldisabilities/transition_services.php)

Community Questions

1. With vaccines on the horizon, are there plans to roll those out to those with DD?
 - a. BHDDH is working with the RI Department of Health (RIDOH) on this. RI is one of 4 states chosen to participate in a pilot program on the logistics of distributing a vaccine. Nationally, there has been advocacy efforts to include people with I/DD in the priority population for the vaccine. We will get information out as soon as a vaccine is available and decisions on distribution are known.
2. What is being done to ensure that people can be tested for COVID?
 - a. There is a process in place for surveillance testing in congregate care sites. BHDDH's Dr. Daly will be the prescribing physician. Providers will be able to get orders to do this testing themselves. Tina Spears from the Community Provider Network of RI has taken a leading role in working with RIDOH to roll this out.

3. When you talk about the number of people impacted by COVID in group homes, do they include those who are quarantining?
 - a. No, just those who have tested positive.
4. What is happening with respite services?
 - a. Respite services still exist but may be more difficult to access. Not everyone has a respite allocation, but if people have it and it's defined in their plan, they can use it. If your regular staff is not available, you can hire qualified friends or family to provide respite during COVID.
5. Will family members still be able to get paid to support their loved one after the COVID crisis is over?
 - a. We don't know yet but that is our goal. We will be working with Medicaid to extend this and allow individuals to choose whomever they want to provide services.
6. Can self-directed individuals still hire family members who live with them to be their direct support staff?
 - a. Yes. This will continue for the duration of the state of emergency. Shared Living Arrangement (SLA) providers cannot be hired to provide supports by the individual who lives with them, but enhanced funding is available for SLA providers who are providing day services that an agency was providing before COVID.
7. Are there specific criteria for the SLA providing day supports, required to qualify for the enhanced funding?
 - a. Yes, an SLA provider should contact their agency for details about applying for the enhanced stipend.
8. How many SLAs have had the opportunity to receive the enhanced stipend?
 - a. Over 150 have applied for the enhanced stipend. The enhanced stipend applies to SLA providers who are working more with individuals throughout the whole day while their regular community and day supports are unavailable due to COVID.
9. How will situations with enhanced SLA funding be handled when day programs choose to close after request has been sent in and then reopen for a short period of time then close again? Does a new request need to be submitted for every change that occurs?
 - a. In this scenario, the participant's decisions matter more than what the agency providing day supports does. The participant has 2 options. First, the participant returns to the day provider when it reopens. In this case, a new request is needed. Any changes will need a new request. Second, the participant chooses not to return to the day provider when it reopens. If the participant keeps getting their day supports from the SLA provider, then there are no changes and a new request is not needed.
10. Does the start date for enhanced SLA funding go back to August?
 - a. For those who have already applied and were providing the services in August, the SLA funding will go back to August. Interested SLA providers should contact their SLA agency who can provide full details on how to apply and eligibility requirements.
11. If I requested enhanced funding in August, and provided the services since March, is there any reason why I would not be awarded the enhanced funding back to August?
 - a. Individual circumstances cannot be addressed in this forum, but please contact your SLA agency or your social caseworker to discuss your situation.

12. Once a Purchase Order (PO) is created, how long does it take for the Shared Living Arrangement (SLA) provider to receive the funding?
 - a. We are working with provider agencies on the SLA enhanced stipend and hope to get the first round completed soon.
13. Please clarify if an S109 or the Purchase Order needs to be submitted for the enhanced stipend for SLA?
 - a. Just the S109.
14. If someone attended a program such as Cornerstone which is a non-DDO agency that was paid without DD funding, can their day funds still be accessible for the SLA enhanced stipend?
 - a. Yes
15. What are agencies doing about training for SLA providers, Direct Support Professionals (DSPs), and respite workers (e.g. CPR, first aid), given COVID?
 - a. Agencies are providing as much training as they can and are working with our regulatory office to waive trainings that are not safety related. Some trainings are being done online or virtually. The primary focus is on providing services to people in their homes. During the last few weeks as COVID has surged, we want to be sure we're supporting agencies in meeting staffing requirements.
16. Is there a process in place for acquiring personal protective equipment (PPE) for Direct Support Professionals that work for self-directed individuals?
 - a. BHDDH is able to obtain bulk PPE supplies and is working on a distribution plan. Self-directed individuals can reach out to their social caseworkers who will make a request to obtain PPE. The Department has a team
17. Are people being denied public transportation to work for fear of COVID? Taking public transportation remains difficult with COVID. The front seats are often not available to use.
 - a.RIPTA is taking fewer passengers due to precautionary measures and social distancing on their vehicles. The Ride Program has put a policy in place that they will not transport anyone who is symptomatic, which means that someone who was brought to work or other location may not be able to take Ride home if they develop symptoms during the day. Some individuals have chosen not to take public transit due to concerns about exposure or concerns about not being able to get home if they have symptoms. Those using public transit should develop an alternate plan to get home if they become symptomatic while out.
18. What outreach is there to home schooled families which may have children with disabilities that are not met through the public education path? Such as a student who is 22 and not yet serviced by a transition program – is it too late?
 - a. People age 22 have probably already exited school-funded services, so they would need to apply for adult services. We encourage applying for eligibility by age 17 for all youth. If youth are home schooled, the family should reach out to their local school district, or to Sue Hayward at BHDDH about transition. For all transition related questions, please email Sue at Susan.Hayward@bhddh.ri.gov

19. Are the state's caseworkers or ORS still involved in any furloughs or cutbacks?
 - a. BHDDH social caseworkers are not furloughed. Many are working from home. Face-to-face work is limited during COVID and BHDDH offices are closed to the public. ORS does not have furloughs but are still "closed lobby" and limiting community-based work during COVID.
20. Who can we contact if social caseworker does not respond?
 - a. Contact their Supervisor. Call the main DD number (401-462-3421) if needed to find out the name of your caseworker or their supervisor.
21. Will the Consent Decree workgroup joint meeting be opened for advocates to listen to?
 - a. No, but we will be putting meeting notes and recommendations on the BHDDH website.
22. What is coordination with the DHS Medicaid application?
 - a. Individuals applying for DD Services must also apply for the Long Term Services and Supports (LTSS) Waiver through the Department of Human Services (DHS). These are currently two separate application processes. BHDDH is working with DHS and the Executive Office of Health and Human Services (EOHHS) to reduce the burden in applying for services and to improve how information is provided to applicants and participants, as well as how information is shared across State agencies and services.
23. How can we highlight or make access easier to the Sherlock Plan/Medicaid Buy-In as a viable option for people who are working?
 - a. The Sherlock Plan Medicaid for Working People with Disabilities Program is a type of Medicaid eligibility for working adults with disabilities. It is administered through the Department of Human Services (DHS). People eligible under this category are entitled to the full scope of Medicaid benefits, home and community-based services, and services needed to facilitate and/or maintain employment. Some participants may be required to pay a monthly premium. BHDDH is working with DHS to streamline Medicaid information and applications, including for the Sherlock Plan. Individuals can also get some information about the Sherlock Plan and other benefits through benefits counseling.
24. Has there been any discussion to provide training to individuals on technology?
 - a. Training can be provided using tier package funding.
25. What is the limit for assistive technology?
 - a. Technology spending is linked to the individual's normal tier package funding, which may constrain spending in any given year depending on the individual's plan and other goals. The choice of assistive or enabling technology is individualized and needs to be attached to the goals in an individual's plan.
26. For technology, I understand we can purchase it, but is there a way to purchase internet access?
 - a. We are working with Medicaid to determine how to fund internet access. One issue is who is accessing it because funds must be used for the individual, not others. We need to ensure this is an allowable cost written into our waiver so that Medicaid funds can be used for it.
 - b. An attendee offered information that if people apply for free phones (as mentioned in BHDDH bulletins), it comes with free internet.

27. Does a technology committee exist?
- a. No, but once we get through the Consent Decree workgroups in the new year, we will look at forming a technology committee.
28. You said there is technology funding available. Is that funding above or outside the normal tier package?
- a. Funding comes out of the normal tier package. Purchase of technology is an allowable use of package funding under a goods and services line item.
29. Can you use technology for a class or assistance on how to use technology?
- a. Yes, it should be detailed in the plan and entered on the purchase order under goods and services.
30. Should gym memberships be promoted at this time if the State may lock down again? Would it be more fiscally beneficial to obtain technology as opposed to a gym membership?
- a. The guidance document in question isn't limited to spending under COVID, so there may be examples of allowable costs that may not be desirable right now with the pandemic. Each individual needs to decide what is in their best interest and document it in their plan. An online gym membership might be something someone decides they need if they already have the technology.
31. Are there CPR trainings available for Self-Directed support staff and is payment through a Purchase Order?
- a. If Self-Directed individuals want to send staff to training, it can be paid through the goods and services line item.
32. Please clarify EVV again. Is there funding in place to assist FI's with the implementation of EVV? Is this only for home-based services?
- a. EVV is a new Medicaid requirement that goes into effect in 2021 to verify home healthcare visits. EVV is only required for individuals who get personal care home healthcare services provided under Medicaid. COVID has not changed these services. There is funding for training individuals on how to use system.
33. What is the Cedar organization known for?
- a. Cedar provides case management for youth and adolescents.