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ACL 20-15

Date: July 16, 2020
To: Community-Based Adult Services (CBAS) Center Administrators and Program Directors
From: California Department of Aging (CDA) CBAS Branch
Subject: Frequently Asked Questions (FAQ) #5, CBAS Temporary Alternative Services (TAS) – In-Center Services

Purpose

The purpose of this All Center Letter (ACL) is to notify CBAS providers that the Department of Aging (CDA) has released a Frequently Asked Questions (FAQ) document pertaining to ACL 20-14, CBAS Temporary Alternative Services (TAS) Guidance on Provision of In-Center Services, released on June 25, 2020. The FAQ is attached.

Questions

Please contact the CBAS branch if you have any questions: (916) 419-7545; cbascda@aging.ca.gov.



Frequently Asked Questions - #5
Guidance for Community-Based Adult Services (CBAS)
Temporary Alternative Services (TAS) – In-Center Services
Released – July 16, 2020

Introduction

CDA has received several questions that indicate common areas of uncertainty among providers about the circumstances under which they can provide in-center services. These FAQs address specific concerns raised by providers. It is critical to remember the following are general considerations and proceed with limited in-center services only after ensuring that:

- Any service provided in-center (i.e., within the center facility) must be essential, in the participant's best interest and unable to be delivered remotely
- The service can be delivered safely, by appropriate and qualified staff who are trained to deliver the particular service
- All items on the In-Center Checklist have been completed, including planning, protocol development, and training of staff
- A CBAS TAS Plan of Operation that reflects in-center services has been approved by CDA
- Physical distancing of at least six feet can be maintained and masks will be worn by participants and staff at all times. Note: staff must also wear additional personal protective equipment when delivering any service in closer than six feet proximity
- Very frequent hand washing/sanitizing will be practiced

Additionally, All Facilities Letter (AFL) 20-27.1 provides the following guidance for centers electing to provide in-center services, ADHCs should:

- Encourage personal protective measures among staff and participants (such as staying home when sick, handwashing, respiratory etiquette, etc.)
- Clean frequently touched surfaces daily
- Ensure hand hygiene supplies are readily available in all buildings
- Implement social distancing measures
- Eliminate group gatherings of participants

- Alter participant schedules to reduce mixing
- Limit programs with external staff
- Screen participants and staff for fever and respiratory symptoms prior to their entering the facility
- Enact no-visitor policy

NOTE: Key directives from ACL 20-14 that will be reflected in answers below include the following:

- **CBAS TAS requirements are still in effect and there is no return to traditional CBAS congregate services allowed at this time.**
- Optimization of telehealth and doorstep services continues to be recommended to minimize the need for in-center services.
- In-center services may only be provided to participants as clinically appropriate and must be delivered in the shortest amount of time necessary to provide the needed service. In-center services must minimize the amount of time that the participant is outside the home, and only be delivered by providers that have the resources to safely provide such care.
- State Public Health Officer has stated that individuals at high risk for COVID-19 should leave home only for essential needs and activities and minimize time outside the home.

Q.1. Are you saying that we can begin services as usual again?

A.1. No, this is not a return to business as usual. ACL 20-14 specifically states that restrictions on group services specified in ACL 20-06 are still in effect. Specifically, congregate services provided inside the center are not allowed at this time. Essential services to individual participants may be provided in the center so long as they meet criteria defined in ACL 20-06 and with proper safety precautions. The center **MUST** operate with infection control measures in place to protect participants and staff to reduce the risk of spreading the virus.

Q.2. Is there a limit to the number of participants that can be in the center at one time?

A.2. There is no one number of participants that applies to all CBAS TAS approved providers for provision of safe and appropriate in-center services. Centers vary in size and layout, among many other variables that affect a provider's ability to deliver safe in-center services. With physical distancing and masking, some centers that have the space and available staffing **may** be able to have multiple participants in the building at one time. However, participants may not be assembled into groups or in closer than six feet proximity at any time and the number of total individuals present in the building at one time should be limited.

Refer to the section titled **NOTE** above under the Introduction.

Q.3. We're considering taking our participants to the park with groups of 10, just so they can have some fresh air and socialize with each other. Of course, we will have safety protocols and get permissions from their families. Is this allowable?

A.3. Reference the Introduction section above and Question 2 above. Note that group gatherings of participants are not to be held. Critical considerations are that the service is essential, can be safely provided by qualified and trained staff, does not put participants or staff at risk, and that participants are not assembled into groups or in closer than six feet proximity at any time.

Q.4. With ACL 20-14 in place, will it be up to the CBAS center to continue TAS CBAS or open up for in-center service in the coming months?

A.4. In-center services have been allowed as part of the package of services under CBAS TAS since its inception in March 2020. ACL 20-14 addresses questions related to allowable CBAS TAS in-center services and establishes new processes for approval of in-center services for providers that weren't previously delivering services in the center and are now considering doing so. Both those providers previously approved per their CBAS TAS Plans of Operation to deliver in-center services and those now considering being approved must meet the new requirements in ACL 20-14.

All CBAS TAS providers must continue to deliver the full array of required services listed in ACL 20-07, regardless of whether they choose to deliver services in the center. A return to providing congregate services in the CBAS centers is not currently allowed.

Q.5. Will in-center services still be 1:1 or will there be a move to "small group modality" (e.g. 10 or less).

A.5. Reference the Introduction section above and Questions 2 and 3 above. ACL 20-14 emphasizes that ACL 20-06 restrictions on group services are still in effect and neither small nor larger group modalities are allowed. Additionally, ACL 20-14 adds references to statewide orders for wearing of facial coverings (masks) and physical distancing of at least six feet. Centers vary in size and layout, making it possible for some to deliver services safely in-center and others not. Planning and protocol development considerations for providers can be found in the CBAS TAS In-Center Checklist.

It is critical that participants are not assembled into groups or in closer than six feet proximity.

Q.6. Can we serve breakfast and offer lunch to go?

A.6. Reference the Introduction at the top of this FAQ. Additional specific considerations regarding serving a meal to a participant at the center might include: 1) what is the reason – is the participant nutritionally compromised or do they have serious food insecurity issues?; 2) what are the risks of having a participant or participants eat at the center; and 3) could they have breakfast before arriving at the center to limit contact?

Provider decisions regarding whether to serve a meal to any individual at the center can be further informed by addressing all the requirements in the CBAS TAS In-Center Services Checklist. Provision of meals for pick up and/or delivery is specifically listed as a service under CBAS TAS, may be very appropriate for many participants, and is addressed in ACL 20-07.

Q.7. Is the center required to meet traditional CBAS staffing ratios when providing in-center services?

A.7. Staffing for CBAS TAS in-center services must be adequate to meet the needs of the individual participants served. CBAS staffing ratio regulations, which are based on congregate/group services for a minimum of four-hour days of attendance, are not applicable to the individual, time-limited services allowable under CBAS TAS.

ACL 20-07 requires CBAS TAS providers to staff as follows:

Providers must staff CBAS TAS with no less than a 1) Program Director; 2) Registered Nurse(s); and 3) Social Worker(s) to carry out CBAS TAS tasks and be available during provider-defined hours of services, Monday – Friday.

Providers must have additional staff as needed to address the number of participants served and their identified needs and to assist in the delivery of services required for CBAS TAS participation, and as described in the provider's CDA approved *CBAS TAS Plan of Operation*. **All staff must function within their scope of practice, qualifications, and abilities.**

Additionally, staff must be trained in universal precautions and use of personal protective equipment (PPE). Services must be provided by the appropriate staff member for the task.

Q.8. Do the participants need to be at the center for at least 4 hours per day?

A.8. Traditional CBAS requirements for minimum attendance of four hours of congregate services are not applicable to CBAS TAS in-center services. ACL 20-14 reflects the orders of the State Public Health Officer, that individuals at high risk for COVID-19 leave home only for essential needs and activities and minimize time outside the home. CBAS TAS in-center services should only be provided as essential, per participants' assessed needs, and if they are not feasible to perform remotely.

Q.9. Can we have participants here with two shifts, for example, some come from 9 am - 11 am and the rest from 11:15 am -1:15 pm?

A.9. Scheduling of service delivery is the purview of the provider, so long as all requirements for CBAS TAS are met, services meet all requirements specified in ACL 20-14, are delivered per your approved CBAS TAS Plan of Operation, and you have submitted your CBAS TAS In-Center Services Checklist and received approval from CDA to proceed.

As a reminder, as stated in ACL 20-14, providers should only offer in-center services to participants for whom remote services cannot feasibly be performed and those who have essential need for in-center services. Group services are still not allowed.

Q.10. Can we do a half a day in-center services and a half a day TAS through telehealth? Meaning, can we have participants at the center for a couple hours of the day and later the SW and/or RN will provide telehealth?

A.10. As stated in the response to Question 5, scheduling of service delivery is the purview of providers and is specified in your approved CBAS TAS Plan of Operation. To clarify, in-center services ARE CBAS TAS services, just as telehealth services are and must be delivered as per requirements specified in ACL 20-07, and group services are still not allowed.

Q.11. Do we need to keep logs for sanitation that include the person's name, date, and time?

A.11. It is the provider's responsibility to put protocols in place for safety and sanitation and ensure that they are being followed, in keeping with all state licensing and local requirements. ACL 20-07 states that CBAS TAS providers must maintain all customary administrative records such as staff time sheets, transportation logs, attendance logs, etc.) as well as health records. ACL 20-14 and the CBAS TAS In-Center Services Checklist provide links and references to assist providers in developing safety and sanitation protocols.

Q.12. We originally submitted and received approval for our CBAS TAS Plan of Operation that included in-center services, but we have not yet started providing those services. Do we need to submit the CBAS TAS Checklist for In-Center Services if we don't have plans to begin in-center services at this time?

A.12. No, you do not need to submit the Checklist if you're not currently providing in-center services. Updating your assigned CDA analyst on your current status regarding in-center services will assist them in knowing not to expect to receive a completed Checklist from your center. Also, the Checklist is worth reviewing now to give you time to prepare for in-center service provision when the time comes.

Q.13. Are drive-by events at the center and/or pick up/drop off of supplies/food considered in-center services?

A.13. No. Those would be considered similar to "door-step" services and do not require completion of a modified Plan of Operation and TAS In-Center Services Checklist.

Q.14. We have been serving participants individually in our center on an as needed basis as stated in our approved CBAS TAS Plan of Operation. Do we still need to do additional paperwork?

A.14. Yes. Although your Plan of Operation may not need to be updated, providers previously approved for in-center services are required to complete the TAS In-Center Services Checklist.