

Reopening Guidance for Protective Services Older Adult Face-To-Face Visits

In accordance with Governor Wolf's phased reopening plan for Pennsylvania to mitigate the spread of COVID-19, this document provides guidance to the Area Agency on Aging (AAA) network for safely returning to face-to-face visits when conducting investigations, assessments and service provisions for Protective Services (PS) during the Yellow and Green Phases.

The Pennsylvania Department of Aging (PDA) recognizes the perceived fears of older adults and PS staff regarding COVID-19 and the need for caution and flexibility during the AAA's transition to normalize PS operations and investigations.

The purpose of face-to-face or in-person visits is for PS to conduct investigations and/or assessments to identify risk(s) posed to the older adult. When risk(s) are identified, a PS service plan is developed in collaboration with the older adult or their legal representative and/or informal supports. With the consent of the older adult, the PS service plan is implemented to reduce or eliminate the identified risks.

In the interest of maintaining the safety of older adults and staff, PS Investigators are to follow, where applicable, the guidelines issued by the Centers for Disease Control and Prevention (CDC), the Administration for Community Living (ACL) and the Pennsylvania Department of Health (DOH) to mitigate the spread of the COVID-19 virus. It is highly recommended that all PS staff take PDA's training regarding infection control located on PDA's Learning Management System and pass the competency evaluation prior to resuming PS on-site investigations.

Yellow Phase:

Continue to conduct PS investigations and assessments remotely, off-site and not face-to-face, unless the allegations on the Report of Need (RON) include the immediate or potential risk of self-neglect, serious bodily injury, serious physical injury, sexual abuse, or death. If the allegations contain the risk of any of these possibilities, a face-to-face visit may be conducted after consulting with PDA PS staff. An example of where an off-site investigation may be possible is when an older adult's care plan was not followed by facility staff and the older adult fell. As a result of the fall, the older adult sustained a large skin tear, the older adult has already been transferred to the hospital for treatment and the alleged perpetrator has been suspended from the facility.

If an off-site investigation reveals significant concerns, regardless of the type of allegations reported, a face-to-face visit may be conducted after consultation with PDA PS staff. A well-check conducted by a local police department may also be requested to determine if urgent support is needed through a face-to-face visit.

When the AAA identifies there is a need to conduct a face-to-face visit and has consulted with PDA PS staff, the PS Caseworker shall consider the allegations on the RON, such as physical abuse or caregiver neglect, when determining if the older adult should be contacted before or only at the time of the face-to-face visit. When contacting the older adult by telephone before the face-to-face visit, the PS Caseworker shall discreetly notify the older adult of the allegation and explain the need for the face-

to-face visit. While on the call with the older adult, complete the **Community or Facility COVID-19 Screening Tool for Protective Services** (Screening Tool). Maintain a record of the Screening Tool as a file attachment to the older adult's record in SAMS. The outcome of the Screening Tool will determine if a face-to-face visit with the older adult is to be conducted. When no symptoms are present, a face-to-face visit is to be completed; however, when symptoms of COVID-19 are present or older adult/household/residency is positive for COVID-19, a face-to-face visit should not be done. Discuss any concerns regarding scheduling a face-to-face visit with the PS Supervisor, document the reason for the face-to-face visit and outcomes of the Screening Tool in a journal entry in SAMS. The PS Supervisor is to document their approval/denial of the face-to-face visit in a journal entry in SAMS.

On the day of the scheduled face-to-face visit, the PS Caseworker conducts the following:

- Call the older adult to confirm the face-to-face visit
- Ask the older adult if anything has changed since the last contact (e.g. anyone ill) and document any changes in the older adult's SAMS record
- Discuss any changes or concerns regarding the face-to-face visit with the PS Supervisor
- Reschedule the face-to-face visit when older adult reports symptoms and/or is positive for COVID-19 and/or household/residency has symptoms and/or positive case(s) for COVID-19. PS Caseworker is to instruct the older adult to self-quarantine and consult their physician when symptoms are present. Document the reason(s) for rescheduling face-to-face visit in a journal entry in SAMS.
- Ask the older adult if they and others in the residence have masks and to wear them during the visit
- Bring extra masks
- Bring an extra copy of the proposed PS service plan to remain with the older adult
- Attach the PS service plan to the older adult's SAMS record
- Obtain signed consent to implement the PS service plan from the older adult and if signed consent cannot be obtained, verbal consent is to be witnessed by two people

Following the face-to-face visit, the PS Caseworker documents the following in the older adult's SAMS record:

- Location of the face-to-face visit (facility or a private residence)
- The general nature of the allegation
- Investigative planning was completed
- Identify what Personal Protective Equipment (PPE)/supplies were available and what specific PPE/supplies were used (e.g., face shield, gown, shoe covers, cleansing wipes, gloves, mask)
- Findings of the interview(s)

Green Phase:

Conduct face-to-face PS visits for all PS allegations when the older adults and others in the residence report no current symptoms of COVID-19 per the **Community or Facility COVID-19 Screening Tool for Protective Services** (Screening Tool). Maintain a record of the Screening Tool responses as a file attachment to the older adult's record in SAMS. The outcome of the Screening Tool determines if a face-to-face visit with the older adult is to be conducted. When no symptoms are present, a face-to-face visit is to be completed; however, when symptoms of COVID-19 are present and/or older adult/household/residency is positive for COVID-19, a face-to-face visit should not be conducted.

The PS Caseworker shall consider the allegations on the RON, such as physical abuse or caregiver neglect, when determining if the older adult should be contacted before or only at the time of the face-to-face visit. When contacting the older adult by phone before the face-to-face visit, the PS Caseworker shall discreetly notify the older adult of the allegation and explain the need for the face-to-face visit. Discuss any concerns regarding the face-to-face visit with the PS Supervisor and document the reason for the face-to-face visit and outcomes of the Screening Tool in a journal entry in SAMS. The PS Supervisor is to document their approval of the face-to-face visit in a journal entry in SAMS.

When contacting the older adult, the PS Caseworker conducts the following:

- Complete the Screening Tool on the older adult
- Maintain a record of the Screening Tool as a file attachment to the older adult's SAMS record
- Schedule a face-to-face visit based on the results of the Screening Tool (no current symptoms, illness, etc. detected)
- Discuss with the PS Supervisor any concerns with the results of the Screening Tool and scheduling/conducting the face-to-face visit
- Reschedule the face-to-face visit when older adult reports symptoms and/or is positive for COVID-19 and/or household/residency has symptoms and/or positive case(s) for COVID-19. PS Caseworker is to instruct the older adult to self-quarantine and consult their physician when symptoms are present. Document the reason(s) for rescheduling face-to-face visit in a journal entry in SAMS.

On the day of the scheduled face-to-face visit, the PS Caseworker is to use the guidance listed in the Yellow Phase above.

Following the face-to-face visit, the PS Caseworker documents the following in the older adult's SAMS record:

- Location of the face-to-face visit (facility or a private residence)
- The general nature of the allegation
- Investigative planning was completed
- Identify what Personal Protective Equipment (PPE)/supplies were available and what specific PPE/supplies were used (e.g., face shield, gown, shoe covers, cleansing wipes, gloves, mask)
- Findings of the interview(s)