**Statewide Residential Services Plan**

Purpose**:** To create a regional structure comprised of residential provider representatives to triage residential providers concerns or issues that arise as a result of the COVID-19 pandemic.

* Each provider association contacts will send their leadership contact information to DODD’s Ginnie Whisman **(****ginnie.whisman@dodd.ohio.gov****)** and Sara Lawson **(****sara.lawson@dodd.ohio.gov****).**
	+ DODD requests that regions include providers from their regions that are not part of a provider association in their discussions.
* DODD will compile the list and align residential regions, where needed, and send the information back out to each of their respective organizations.
* Regions will be asked to work with area providers to identify provider capacity that could be used to assist individuals displaced from their home due to provider limitations.
* Regions will be asked to work with area providers to identify buildings that could be used by providers should individuals get displaced. Buildings to consider include, but are not limited to, empty CB buildings, unused day service buildings, provider vacant buildings or areas, respite homes etc.
* Regions will be asked to work with area providers to inventory beds, supplies, PPE, bedding, blankets, essential equipment etc. to determine what supplies can be used in case of critical shortages or if a group is suddenly displaced.
* Once this is done, plans will be sent to Ginnie Whisman and Sara Lawson to share internally with DODD regional support teams.
* When an issue arises such as limited staff availability or need for supplies, etc., providers will be asked to [in order]:
	1. Exhaust own internal resources
	2. Call the local CB
	3. CB and provider will contact DODD (Ginnie and Sara) if issues unresolved or there are questions
* DODD will then mobilize the DODD regional support team in each region to help each region in a coordinated way and deploy regional resources, as available.
* DODD will monitor trends in each region and develop action plans with those regions in need of assistance.
* DODD will work with quality assurance nurses, nurse trainers and other nursing personnel by region who are willing and able to provide direct support to individuals who need this level of oversight.
* DODD will work with EMA, engage a statewide strike team, and/or facilitate CB with local EMA, to identify appropriateness/availability of local building capacity.
* DCs will be identified to be used as a last resort to serve people who need support due to lack of residential options related to COVID-19.
* Weekly calls will be convened by DODD to talk to regional residential leadership about their opportunities and challenges and share notes after calls.

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