# **OPRA FRIDAY FIVE**

News, Resources and Events for OPRA Members

JULY 30, 2021

WCTF: The Workforce Crisis Task Force met this week to review and refine proposals, getting closer to a comprehensive outline on what DODD and system partners can do to impact/improve the crisis. One proposal consists of payments/funding for employee retention, proposing to use the enhanced FMAP funding to support long-tenured, dedicated employees as well as new employees who reach certain milestones. Another proposal/sub-group of the WCTF focuses on a 'DSP benefits package' of different incentives that will attract and retain DSPs and frontline supervisors. We are exploring the scope and costs of these proposals and what level of ARPA funds that can be applied to these retention and incentive packages. The group must also explore long-term funding solutions, beyond ARPA funding, and how we can achieve competitive wages while exploring all possible service models that continue to balance sustainability with independence and person-centered supports.

Workforce Coalition: Our state budget coalition has transitioned to a 'workforce coalition' consisting of OPRA, OACB, the Ohio Waiver Network and the Ohio Health Care Association, focused on immediate support for 'hot spot' regions identified in a recent DODD survey. The coalition is developing a letter to help inform families and people served about the crisis and how it may impact services. OPRA worked with OACB to develop a process and questions for representatives of the coalition to visit with 'hot spot' areas. These visits, which will consist of reps from OPRA, OACB and DODD are intended to identify fears and concerns, themes across the state, positive practices, and potential usage for relief funds. We also want to be able to use this process to inform our system partners of the reality on the ground with real stories and real data on how the crisis is impacting the most hard-hit communities. Contact Pete with any questions.

<u>BEST Letter:</u> This week OPRA's Board of Directors approved a letter to DODD, urging Director Davis to reconsider the implementation timeline for changes coming out of the Blueprint workgroup, specifically around the Basic Employment Skills Training (BEST) service. The letter was developed through the Day Array committee, and focuses on constructive ways to move forward with the Blueprint group, prioritizing changes that expand access to services and improve sustainability for providers. <u>Click here to read the letter.</u> Please contact <u>Scott</u> with any questions.

<u>OOD Rule:</u> Yesterday we met with reps from OOD to review the <u>feedback submitted by our</u> <u>Employment Service committee last month</u>. We expect to see an official document next week describing the ways that OOD adjusted the proposed rule in light of our feedback. Though we've not seen the official response, we feel encouraged by the discussion and the modifications to the rule previewed to us. We will have more information in the coming weeks, but we want to thank participants of the Employment services committee for developing the feedback that resulted in the changes to the proposed rule. Please contact Scott with any questions.

<u>Med Admin Meeting:</u> We participated in DODD's Medication Administration Certification Committee, a recently formed committee whose purpose is to look at the certification and training processes for Category 1. The group is currently exploring breaking category 1 into different parts, intended to more quickly onboard front-line staff by getting needed training in a single day. Please feel free to reach out to <u>Rachel</u> with any questions/concerns as this group continues.



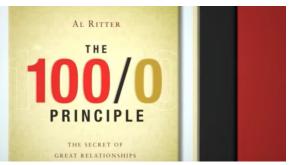


## In Case You Missed It...

Additional Updates From The OPRA Team and System Partners

<u>Memo Monday:</u> There were a number of updates in this week's MM, including the FY22 ICF rate packages, improvements to DODD MyLearning, Provider Cert. Training updates and timelines, and Broadband Ohio opportunities. <u>Click here to read Memo Monday.</u>

<u>Tech Advisory Committee:</u> DODD's Technology First Advisory Committee met this Tuesday, developing further the ideas generated in the previous meeting. Several focus areas have been identified, with committee members volunteering to lead each area. <u>Please see the linked materials</u> and let us know if you would like to be a part of any of these focus area committees.



100/0 Principle: On this morning's call, Pete spoke about the '100/0 Principle', a relationship-development practice developed by Al Ritter. The concept challenges us to take 'full responsibility towards a relationship' and expect nothing in return. Taking '100 % responsibility' then leads others to better invest and take responsibility as well. Click on the video to watch!





## **Upcoming Events**

8/5: OPRA Day Array Committee Meeting

8/10: OPRA HR Committee Meeting

### **News and Resources**

"Ohio COVID-19 cases rise above benchmark 50 per 100,000 people"

"Do You Need To Wear A Mask Indoors Where You Live? Check This Map"

"Key details of the Senate's bipartisan infrastructure plan"

"On ADA Anniversary, Biden Recommits To Disability Rights"







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As of July 30, 2021:

COVID-19 Testing Results for Reportable MUIs					
Negative	Pending	Positive	Total		
938	1	1,062	2,001		

- 1,062 people served have tested positive for COVID-19 and been hospitalized. This is an increase of 2 additional positives since the 7/23 report.
- · 236 people served have passed away who have tested positive for COVID-19. There were 0 additional confirmed death since the 7/23 report.
- · There were 1,909 people hospitalized and tested for COVID-19, which resulted in a MUI filing. This is an increase of 9 since the 7/23 report.
- A total of 2,001 COVID-19 reportable MUIs were filed as 92 individuals were never hospitalized but it was later determined their cause of death was COVID-19.

#### Impacted Counties/Developmental Centers:

- There are 85 counties and 8 developmental centers with COVID related MUIs (CADC, CDC, GDC, TDC, MVDC, SODC, WDC and NODC).
- Franklin had the most people hospitalized and tested with 243 followed by Cuyahoga with 216.
- Franklin had the most people who tested positive at 122 people followed by Cuyahoga with 120.

### **Testing Demographics:**

- Males accounted for 60.27% of those tested and females 39.73%.
- Ages of people tested ranged from 1 to 95 years. The average age was 55 years. The most common ages are 59, 61, and 63 years.
  - The breakdown of people tested by race is:
  - Black or African American-15% (55% positive testing rate)
  - Other Race -2% (54% positive testing rate)
  - Unknown-5% (47% positive testing rate)
  - White/Caucasian 78% (53% positive testing rate)

### **COVID-19 Deaths:**

- The mortality rate of those passing from COVID-19 (236) and the total people served (94,890) is 0.248%.
- The ages of those who died range from 4-95 years of age.
- · The average age of the person who died was 62 years old.
- · A total of 53 counties and 3 DCs (CDC, NODC, TDC) have reported COVID-19 deaths.

County or DC with COVID Deaths	Count	County or DC with COVID Deaths	Count
Adams	1	Lucas	16
Allen	4	Mahoning	2
Ashtabula	3	Marion	1
Belmont	1	Miami	1
Butler	6	Montgomery	10
Carroll	1	Muskingum	1
CDC	2	NODC	4
Champaign	1	Ottawa	9
Clark	6	Perry	4
Clermont	4	Pickaway	2
Clinton	1	Portage	1
Coshocton	4	Preble	3
Cuyahoga	15	Richland	6
Darke	1	Ross	1
Delaware	2	Sandusky	6
Fairfield	2	Scioto	2
Franklin	21	Seneca	1
Gallia	3	Stark	15
Geauga	1	Summit	9
Greene	1	TDC	1
Hamilton	13	Trumbull	5
Hardin	1	Tuscarawas	4
Henry	1	Vinton	1
Holmes	1	Warren	6
Jefferson	1	Wayne	4
Lake	6	Williams	1
Lawrence	1	Wood	3
Licking	7	Wyandot	2
Lorain	4		

Living Arrangement/COVID Deaths	Count
Correctional Facility	1
Family	37
ICF	71
Licensed Waiver	20
Nursing Facility	30
Supported Living	77
Grand Total	236

The Department provides the following weekly MUI updates based on COVID-19 related unanticipated hospitalizations and/or deaths entered into the Incident Tracking System. This data is not all inclusive. It does not include information about people who were suspected of having COVID-19 but not hospitalized, those who tested positive but were not hospitalized, people living with their families who were hospitalized when there was no provider present at time of hospitalization and COVID tested. For additional information and guidance, please visit DODD COVID-19 Resources.





