

Governor's Committee for People with Disabilities

Monday, November 23, 2020

The Honorable Tony Evers 115 E. Capitol Dr. # 1 Madison, WI 53702

Dear Governor Evers,

This letter serves to provide insight into the issues facing individuals with disabilities throughout Wisconsin, which have emerged or become more poignant during this pandemic including:

- Disability Support Persons Not Allowed to Accompany Individuals with Disabilities to Medical Treatments.
- Access to COVID Testing.
- Testing and Vaccinations for Individuals who are Homebound.
- Public Health Orders and Information in Accessible Formats.
- Health and Safety of Individuals with Dementia.
- Caregiver Shortages.
- Telehealth and Broadband Access.
- Representation of Individuals with Disabilities on State Medical Advisory Committee.

In the attachments to this letter, GCPD identifies these issues and lists recommendations to address these issues being faced by people with disabilities. GCPD is dedicated to enhancing the health and well-being of Wisconsin citizens who have disabilities. As a committee of Governor-appointed volunteers with cross-disability council representation (Board for People with Developmental Disabilities, Council on Deaf and Hard of Hearing, Council on Physical Disabilities, Statutory Council on Blindness), GCPD serves to advise the Governor, state agencies, and the state legislature on issues of concern for people who have disabilities.

Wisconsin is in a state of emergency which is the exact time when vulnerable adults need additional support. This document is focused on areas of concern which have emerged due to COVID-19 pandemic, however, for the most part they are issues of ongoing concern. National data is clear that people with disabilities are at greater risk than the general population to contract the virus, to be hospitalized for it and, tragically, more likely to die from it.



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As with many COVID-19 related problems, solutions which have been implemented will serve to improve life for citizens in general beyond this pandemic. GCPD believes this will be the case for individuals with disabilities if these solutions and policies are implemented.

GCPD looks forward to discussing these issues and potential policy recommendations further. Please feel free to contact me with any questions at <u>david.morstad@gmail.com</u> or (920) 248-9210.

Respectfully,

David Morstad, Chair Governor's Committee for People with Disabilities CC: GCPD Members, Noah Roberts, and Fred Ludwig



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Issue: Disability Support Persons Not Allowed to Accompany Individuals with Disabilities to Medical Treatments

In many healthcare settings, a common policy designed to control the spread of COVID-19 has unfairly infringed upon the rights of people with disabilities; specifically, not allowing a disability support person (paid or unpaid) to accompany a person with a disability during medical consultation and treatments. This is much more poignant during a health emergency as the need to understand diagnoses, treatments, and ways to stay safe are critical. Individuals who are on Medicaid are much more likely to have lower health literacy than the general population and are at higher risk of hospitalization.

Recommendation:

 In order to help ensure the equal access to healthcare, we recommend that Wisconsin issues state policies or guidance that includes exemptions for no-visitor policies for disability support persons. This will ensure disability support persons will be allowed to accompany a person with a disability during medical evaluation and treatment and ensure healthcare providers recognize this a reasonable accommodation.

Many states have issued state policies and guidance that includes exemptions for no visitor policies for disability support persons including California, Connecticut, Delaware, Illinois, Maryland, Massachusetts, New Jersey, New York, Oregon, Pennsylvania, and Rhode Island (More information on state guidance issued is available at: https://communicationfirst.org/covid-19/covid-19-guidance).



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Issue: Access to COVID Testing

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COVID-19 testing is widely recognized as one important measure to ensure public health and safety. Individuals with disabilities in Wisconsin have experienced difficulties in obtaining COVID-19 tests due to some sites not being fully physically accessible or communication not being accessible.

Drive-Thru testing sites have increased accessibility to the general public and some people with disabilities, however, they are additional measures these test sites can take to make them more accessible to people with disabilities including training staff on disability etiquette, having mechanisms in place for people to request needed accommodations, ensuring drive-thru can accommodate wheelchair accessible vehicles, and providing accessible communication.

Recommendations:

- GCPD recommends that the Wisconsin Department of Health Services (DHS) issue guidance to both in-person and drive-thru testing sites/providers on how to make they are accessible to all people.
 - <u>Guidance on how to make drive-thru sites accessible</u> can be found at: <u>https://adata.org/factsheet/accessibility-drive-thru-medical-sites</u>.
 - Michigan is one state that has issued this <u>guidance for COVID-19 test sites</u> to address accessibility for both people of color and people of disabilities. This document is available at: <u>www.michigan.gov/documents/coronavirus/Best_Practices_for_Accessibility_at_</u> <u>Michigan_Testing_Sites_final_v9_698962_7.pdf</u>.
- DHS should also have COVID testing sites, by County, in an accessible PDF or other format on its website, as this information is not fully accessible for people with disabilities in its current format on the DHS website.

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Issue: Testing and Vaccinations for Individuals who are Homebound

Individuals who care homebound due to disability, mobility issues, age, or receiving Hospice care are able to receive flu shots from their local health departments. However, due to the pandemic, health department are not offering this service. While they aren't subject to community spread, they do have caregivers (both paid and unpaid) entering their homes on a daily basis and are at risk for exposure to the flu and COVID-19. In addition, although some of these individuals may receive home healthcare through a visiting nurse of doctor, but these medical professionals do not have a mechanism to access the flu vaccine in order to provide it in home. This will also be a challenge with the forthcoming COVID-19 vaccine to be delivered to homebound individuals.

In addition, if an older adult or person with a disability learns they have been exposed to COVID-19 by a caregiver or family member and needs a COVID-19 test, there is currently no way for these individuals to be tested in the safety of their homes.

Recommendations:

- GCPD recommends that DHS contract with home health agencies or other providers who are able to provide flu shots, COVID vaccines, and/or COVID-19 tests to individuals who are homebound and cannot get to a medical facility for vaccines and testing.
- GCPD recommends creating a waiver or way for visiting nurses and physicians to obtain the flu and COVID-19 vaccine so they are able to administer them to homebound individuals.



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Issue: Public Health Orders and Information in Accessible Formats

During this pandemic, individuals with disabilities have been subject to misinformation about preventative measures to take, the spread of the disease, and public health orders as this information has not been in accessible formats. This has been especially true for Deaf individuals who use American Sign Language (ASL). Many of the verbs and nouns used in English don't translate to ASL. In addition, public health information that has been shared via social media or on state websites has not been fully accessible for people who are blind or visually impaired who use screen readers or other assistive technology to navigate websites or read documents.

Furthermore, much of the public health information that has been disseminated has included high-level medical terminology which is not understandable for individuals for which English is a second language, people who have cognitive disabilities, or who little or no health literacy.

Some general recommendations to ensure public health information is accessible include:

- Captioning and sign language for all live and recorded events and communications including state addresses, press briefings, and live social media.
- Converting materials into "Easy Read" or plain language formats so that they are accessible for people with intellectual disability or cognitive impairment.
- Developing accessible written information products by using appropriate document formats, (such as "Word"), with structured headings, large print, braille versions, and formats for people who are deafblind.
- Working with disability organizations, including advocacy bodies and disability service providers to disseminate public health information.

There are some great resources on making public health information accessible including:

- World Health Organization, "<u>Disability Considerations during the COVID-19 Outbreak</u>." Available at: <u>https://www.who.int/docs/default-source/documents/disability/eng-covid-19-disability-briefing-who.pdf?sfvrsn=963e22fe_1</u>.
- FEMA, "<u>COVID-19 Best Practice Information: Considerations for People with Disabilities</u>." Available at: <u>https://www.fema.gov/sites/default/files/2020-07/fema_covid_bp_disability-considerations.pdf</u>.
- ITU, "<u>Guidelines On how to ensure that digital information, services and products are accessible</u> by all people, including Persons with Disabilities during COVID-19." Available at: <u>https://www.itu.int/en/SiteAssets/COVID-19/ITU-Guidelines-on-digital-accessibility.pdf</u>.

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State of Wisconsin Governor's Committee for People with Disabilities

Issue: Public Health Orders and Information in Accessible Formats (continued)

 AT3, "Information and Communication Technology Accessibility Resources for Documents, Social Media, Computer, and Mobile Device Access." Available at: <u>https://www.at3center.net/repository/ICTCoPResources</u>.

Recommendations:

- GCPD recommends that the DHS adopt "plain language" protocol for all public health information and the Governor's office adopt this protocol for all public health related executive orders.
- In addition, GCPD recommends all documents be made accessible for deafblind, blind, and visually impaired individuals.
- State agency websites where information is posted should be fully accessible to people with disabilities who utilize assistive technology and screen readers to navigate websites. There should also be a way for people with disabilities to request documents in an accessible format, if the materials on the website are not accessible.
- Public health information and executive orders should be readily available in Spanish and other languages so people can understand the preventive measures they should be taking to protecting themselves and reduce the spread of COVID-19.



Governor's Committee for People with Disabilities

Issue: Health and Safety of Individuals with Dementia

This pandemic and related prevention and safety measures has been especially difficult for individuals with dementia and their families to understand. Given the risks that older adults face from both COVID-19 and dementia, The <u>Centers for Disease Control has provided additional guidance to caregivers of adults</u> with Alzheimer's disease and other types of dementia to reduce the spread of COVID-19 and to help them manage their patients' physical and mental wellbeing as well as their own wellbeing. However, not all people living with dementia require caregivers. Therefore, the degree of assistance a person needs will depend on the extent that their dementia has progressed. For people living with dementia, changes in behavior or worsening symptoms of dementia should be evaluated because they can be an indication of worsening stress and anxiety as well as COVID-19 or other infections.

Recommendation:

• GCPD recommends that a Living Well Toolkit be developed for individuals with dementia and their families, modeled after the <u>Board for People with Development Disabilities COVID-19 Resource</u> <u>Toolkit (https://wi-bpdd.org/wp-content/uploads/2020/08/LW-Covid-Toolkit-Final-Full.pdf</u>), which has recently been published. The toolkit focuses on how individuals can stay healthy, stay safe, and stay connected during this pandemic.



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Issue: Mask Mandate and Communication

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GCPD recognizes the importance of masks in reducing the spread of COVID-19. However, Deaf people and individuals who are hard of hearing are struggling to communicate in certain situations due to the mask mandate. Many individuals with hearing impairments rely heavily on lip reading or facial expressions to understand what is being communicated, and it's important to be able to see the person to communicate effectively.

Recommendations:

- GCPD recommends the publication and distribution of communication cards for use at clinics and hospitals and other facilities where urgent communication about health care takes place with Deaf people or people with hearing impairments, recognizing it may take time to get an accommodation in place to effectively communicate.
- In addition, GCPD recommends the guidance be sent to medical providers stating that if individual needs to remove a mask to communicate effective or if an individual needs a medical provider to wear a face shield to communicate effectively that there is a process in place for requesting these accommodations.



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Issue: Caregiver Shortages

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Wisconsin is experiencing a statewide caregiver shortage, which was on ongoing issue prior to COVID-19, and now is at a critical point. The pandemic has caused instability in the caregiver workforce as workers are unable to provide care if their children's school or daycare has closed, if they are sick, or have been exposed to COVID-19. With lack of back up caregivers available this has caused sine individuals with disabilities to move from their homes or apartments to live with parents or relatives or to move into rehabilitation facilities.

Recommendations:

- GCPD recommends DHS creating caregiver education materials on their personal responsibility to behave safely and the risk they pose the people they care for when they disregard safeguards to prevent COVID-19 spread. This includes personal behavior, not coming to work sick or if they have been exposed to COVID-19, getting their flu shot, and the COVID-19 vaccine when available.
- GCPD also recommends the state providing temporary hazard pay for caregivers providing Medicaid-funded services during the pandemic to compensate workers for the risk they are enduring while caring for people with disabilities.
- In addition, GCPD recommends DHS requesting MCOs, ICAs, and other personal care providers to provide caregivers paid sick time to discourage caregivers coming to work when they are ill.



Governor's Committee for People with Disabilities

Issue: Telehealth and Broadband Access

Broadband connectivity is quickly becoming one of the most basic of human needs. Broadband connectivity provides: communication with others; opportunity to grow through education and employment; and connection to essential information and services. Broadband is widely available across the United States. However, there continues to be pockets of unserved areas and this is especially true in rural areas of Wisconsin. Although programs exist to assist with the cost of internet service and technology devices these programs are not beneficial if broadband access is not available.

The need for broadband access has become even more apparent during the COVID-19 pandemic. Broadband access is needed for remote work, school work, to access unemployment benefits, to enter bank information for stimulus checks, for telehealth visits, and to connect with others during times of social isolation. Also the internet has been a vital resource in providing information about COVID-19 as well as information on safety precautions to prevent community spread of the virus. Without connectivity there are pockets of people with disabilities who may not have access to this information through other means. In addition, this means there are people with disabilities who do not have access to vital telehealth services.

Recommendations:

- GCPD recommends the state invest in broadband infrastructure and cell phone towers in Wisconsin needs to occur to enable people with disabilities to live independently.
- GCPD also recommends the state provides funding for devices and hot spots to people with disabilities. GCPD recommends using Illinois as a project model where their ATP received \$1.7 million CARES Act funding and leveraged an additional \$250,000 because the response rate had exceeded the funding available. They created the Illinois Cares Connection Project offering two bundles (iPad and Android). Participants who do not have internet are offered a year of service. They also have a data system to track activity from referral to fulfillment, tutorial for both bundles, provide telephone technical assistance, and more.



Governor's Committee for People with Disabilities

Issue: Representation of Individuals with Disabilities on State Medical Advisory Committee

One concern that emerged early in the pandemic was the formation of a State Medical Advisory Committee which is making recommendations related to COVID treatments which did not include first-person representation of an individual with a disability. Often, disability representation is an after-thought when groups are making recommendations and/or decisions that affect citizens of Wisconsin. GCPD thinks it is important to have representation as many people are unfamiliar with the complex social, economic, political, and cultural ramifications of disability in our society.

Recommendation:

• GCPD recommends that it be standard protocol to have first-person representation (a person with a disability on the State Medical Advisory Committee as it is important that people with disabilities be represented in community and government decision-making which directly impacts them.