

**UPDATE ON CORONAVIRUS (COVID-U19)**

**CONFERENCE CALL WITH DR. BUCKLEY SCHEDULED THURSDAY, MARCH 12 AT 2:00PM EASTERN**

**March 11, 2020**

ACCSES has been working closely with Dr. Thomas Buckley, Ed.D., Director of Population Health for YAI, a network of agencies that supports more than 20,000 people with intellectual and developmental disabilities. As you know, the people we serve are placed at greater risk due to the Coronavirus.

A Coronavirus is any of a family (Coronaviridae) of large RNA viruses that **cause upper respiratory tract infections** and gastrointestinal diseases in humans and animals. Only nine percent of the general population dies from respiratory infections. The **number one cause of death** for people with intellectual and developmental disabilities (IDD) is respiratory infections. In a recent Australian investigation into the deaths of Australians with IDD, 34% of the decedents died of respiratory infections. Those with IDD that died as a result of respiratory disease were attributed most commonly to pneumonia, bronchopneumonia, aspiration pneumonia, or HN1 Influenza. Currently, there is an outbreak of COVID-19 that is sweeping across the globe. We need to be prepared for the possibility of an increased number of cases in the United States.

Although respiratory disease is often linked to age, people with IDD may be at a higher risk due to a combination of factors such as:

* Limited mobility and dependence on others;
* Epilepsy, Down syndrome and cerebral palsy;
* Swallowing difficulties (dysphasia);
* Recurrent pneumonia;
* High use of psychotropic medication;
* Gastroesophageal Reflux (GERD) disease;
* Receiving enteral nutrition (tube feeding); and
* Poor oral health (such as dental problems and gum disease).

The people we serve are especially vulnerable population to respiratory infections and therefore, could potentially suffer the greatest morbidity and mortality from the Coronavirus. This is particularly important for those people with IDD who have complex health and neurological conditions and limited verbal communication.

Be particularly aware of the following conditions and take appropriate action, including contacting guardians or medical professionals:

* Rapid breathing
* Breathing difficulties
* Fever
* General malaise or lethargy
* Functional decline
* Increased confusion or agitation
* Incontinence (new onset)
* Loss of appetite
* Abdominal pain
* Headache
* Chest pain
* Tachypnoea (abnormally rapid breathing)
* Cough
* Blue coloration of the skin around the mouth.

There are many strategies that providers can put in place to reduce the risk of people with IDD contracting respiratory illness and the Coronavirus. We will continue to work with Dr. Buckley and his team on providing you the latest information on Coronavirus, the risks it poses to the individuals we serve, and strategies for recognizing and containing any infection. We recommend that your organization:

* Provide your staff with clear information about the heightened risk, signs and symptoms, of the Coronavirus.
* Form a Coronavirus Response Team at your organization so everyone will know to whom they should go for information or to report a potential problem.
* Promote preventative strategies at each of your settings to minimize the risk of contracting Coronavirus (for your convenience, we have created a one-sheet for you to distribute or post), including:
	+ Educating every person on your staff and the individuals you serve on the best way to wash their hands – you might want to have an individual you serve lead the demonstration and do a group sing-along or other activity to help people recognize the 20 seconds that is called for to wash hands fully.
	+ If available, keeping hand sanitizer that is at least 60% alcohol available for individuals to use: and
	+ Reminding everyone not to touch their faces.
* Conduct a review of people with IDD who are at risk of developing respiratory diseases and/or have had recurrent respiratory illness so that they are identified and receive timely access to respiratory specialist assessment and treatment.
* Designate a ‘red flags’ system that triggers staff to seek urgent medical assistance; this must be clearly understood by your entire staff.
* Minimize outside visitors to work or residential settings to the extent possible.
* Educate direct support personnel on the Coronavirus and what to do if they have a concern about any individual's health; and
* Ensure that sufficient food, water, medical supplies are stockpiled at all residential settings.
* Encourage individuals (or their guardians) who are at risk at risk of pneumonia to vaccinate against pneumococcal pneumonia and influenza.

Those of you who serve residential needs have additional concerns and planning is important, including possibly designating a location where an individual or individuals may be treated without the risk of infecting others in their group setting as well as providing appropriate training for support staff. Some organizations may also find support staff reluctant to work, therefore, preparation becomes even more important. Knowledge and common-sense prevention will go a long way toward protecting our communities.