

## Talking about COVID-19: Resources for People with IDD

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>> JASMINA: Good afternoon everybody. I know that you will have to check out your sound. We will begin in about five minutes.

[No sound.]

>> JASMINA: Good afternoon. my name is Jasmina Sisirak. I am your host for today's webinar. Thank you for joining us for our first COVID-19 Webinar. The webinar series is presented by the Health Matters program and Department of disability and human development at the University of Illinois, Chicago, to continue project and funding from the Ohio development disabilities Council in collaboration with the aspire community services in Illinois. These webinar series are meant to provide a space for community providers to share their experiences in maintaining services for people with developmental disabilities during the COVID-19 pandemic. We will be recording and archiving the webinars. It will be sent once the archive is up on our YouTube channel. During the webinar, please note your questions in the chat box. We will ask these questions during the last 15 minutes of the webinar. I will just be collecting them.

For today's presentation, I want it to introduce Kathy Service. Her presentation will be talking about COVID-19 resources for people with intellectual and developmental disabilities. A little bit about Kathy, Kathy has been working in the field of intellectual development with mental disabilities as a registered nurse and in 1979 as a nurse practitioner both in institutional and community settings for the Massachusetts Department of Developmental Services. She was one of the first RNs nationally to be certified in the specialty of developmental disability nursing. She was serving on the National Task Group on Dementia and Developmental Disabilities since its inception and truly believes that people within Developmental Disabilities and staff are best teachers.

This presentation will discuss strategies, resources and tips to support people with intellectual and developmental disabilities do understand what is going on with COVID-19, why do we need to take precautions and how will protection help us. Additionally, we will discuss how to advocate for legal rights and reasonable accommodation and provide you numerous resources that are available online and free of charge.

Again, please ask your questions in the text box. Everyone is muted except Kathy and myself. Then again, thank you for joining us today. Kathy, I will pass the presentation to you. Welcome.

>> KATHY SERVICE: Thank you so much. Thank you everyone for being with us here. I tend to be a fast talker. I'm really going to try to speak slower. So bear with me. Jasmina Sisirak is being my slide master. I will tell her to advance the slide.

Next slide please, Jasmina Sisirak.

This is really me. That is my dog. I hope he will not start barking during the presentation. I wanted to see a couple of things here. We all know, those of us who have been around during the whole crisis, is it rapidly evolving. What this presentation is going to give you is current at the time. What I am trying to share with you is the latest of what is ethically and scientifically known. Although I am a nurse practitioner, the information I present is for the purpose of education. You really shouldn't use it in place of the advice of a healthcare practitioner, either your own or the people you support.

Next slide please. So anyone ever going to drink Corona beer again? This is the overview. I won't get so much into advocacy work or legal rights and reasonable accommodations. But I want it to let you know because of the advocacy of such groups as the ADA, DMD, Medicaid, Academy of Doctors, dentists, and developmental medicine and beyond, also hospitals and state agencies, must now modify "no visitor policies" to accommodate patients with IDD. Additionally, early on, because of the advocacy work for the marginalized group, even in my State of Massachusetts -- I live in western Massachusetts. My local hospital is affiliated with the best general. They look at their policy on crisis standards of care and the determination of the use of limited critical resources. Because of people advocating, they modified its policy.

Next slide please. This again is to reiterate its dynamics of what I'm giving to you is right, is current. Although here is an advertisement from the flu pandemic back in 1918. Next slide please. Back then, even then handwashing was important. The thing that I can't help thinking about is -- I guess I'm going to call it information integrity. I have to admit that this picture of Dr. Oz, when it came to me it came from a medical newsletter I get. It says SCDC recommends Dr. Oz wear a mask. I thought they were serious. It turns out they were just playing a joke.

But there is so much information out there. We are bombarded all times. We are on the Internet. I find that even our well-meaning friends and family will tell us things and they might be half-truth and they mean well, but the key point is try to go to reliable resources. I have some kind of listed here. All of these resources actually have a lot of re- information. A lot of things are written. They are recorded webinars and are free. I'm just going to talk to you about some of these.

The CDC and WHO, Centers for Disease Control and World Health Organization, they have a wealth of information. We're going to look at the CDC in a little bit. The WHO, there is recordings, there are posters, and anything you can use and want to use for your agencies are available there. Then, you have specialty groups like the National Task Group and Intellectual Disabilities and Dementia -- that's my group -- the AA DMD, the AUCD. For people who don't know what that stands for, it's the Association of University Centers of Disabilities. Then the American Association of Intellectual and Developmental Disabilities and the International Association of Scientific Study of Intellectual Disabilities. We got a look at their website. They have some good things on their website.

Then, go to your state. I am sure that those of you who work and are working now are probably inundated either by your department of public health or your developmental disability state agencies and departments. Last of all, our own city public health department. I want to note this quote that I got from the adult down syndrome's clinic about information, and that is, the amount of information about COVID-19 can be overwhelming and cause anxiety and stress

and our mental health is just as important as our physical health right now. We recommend staying informed about the situation, but limiting the amount of time spent following news and social media. So to being aware of these things is to take things and not get so overwhelmed. I think many of us and myself included did, especially initially.

Next slide please. So speaking of the CDC, the CDC thinks it is so important, the federal government that acknowledges you are important. They acknowledge that direct support providers are in a general risk categories healthcare personnel and they are essential to the health and well-being of people they serve. So to be aware of your value. Do you want to try to click into the first one so we can try to show people -- we're not going to spend a lot of time, but into the first website? If not -- okay. Great.

Here is one of the CDC. You can stroll down. Who are they? What do they need to know? It gives you a lot -- it is a lot of clicks on how you protect yourself coping with stress, et cetera. There is a lot of information about cloth mask, at some point, you click on there, you have the Surgeon General showing you how to make a temporary mask, et cetera. What happens? What you do? These are the general guidelines of the CDC. So in addition, they also have a clickable site -- we're not going to get into the other was there.

I just want to tell you for group homes and discussing factors of what could influence the spread in group homes for people and then they have one for behavioral disorders. One of the ones that they talk about on the other ones is that people with IDD are not naturally a higher risk for becoming infected, but -- unless they have underlying medical conditions. But they also comment that they may have difficulties assessing information, understanding or practicing preventative measures and communicating. I know from my work with all of you over the years is that you all know people you work with. You can tell if something is not quite right. So interestingly, I have got a comment on one of my general logical nurse practitioner websites about older people. They don't show fevers. When they are infected, they might seem to be a little bit off. So it's just -- I have some comment about how this is just like people we work with. To be aware with people instead of showing fevers, this happens to be because it happens to older people in general, they may not show the same symptoms. You know the people you work and support with trust you and report on things. The other thing the CDC also has is that a special section on health disparities for black and Latino communities. Next slide. Slide 7, please. Okay --

>> JASMINA: Just to add, I am adding the direct link to CDC website in the chat box. We will also -- I also shared it last week. We will also post it once we archive your webinar as well.

>> KATHY SERVICE: Excellent. That sounds great. I think that is an important site. Has a lot of information up there. Here are some possible resources. We're going to be -- we're going to be giving you a testing -- tasting of some of these. I'm not going to go into each of these. But the first one we will go into -- I'm going to make one comment about Green Mountain South advocates. This is great. It's one of the first group of people. They are from Vermont. They have people information by and for people with disabilities, plain language glossary tips. Let's go into that. This website is great because it starts off where you go into it and it has a listing on -- there you go.

So let's go into the Spanish plain language information on coronavirus. You will see this is

what was developed. Here it is in Spanish. If you stroll down a little bit, it is on the same information that is in the English-speaking. If you have families, if you have people for yourselves, to help you understand better, this is all in Spanish. This is available and it is also -- it is an example of what is available on the IASSID website. We can go into the next one, coronavirus social story. Here we go.

This is another one that if you need to be able to use. If you click on it, it is a social story for people to understand about the virus itself. You know, it's really interesting, much of the stuff I found may be more for kids, but a lot of the stuff is trying to make it so that people can understand what you're talking about. This information is really basic, but it gives you some sort of indication that, information you can use with the people you support. There is the birthday song or count to 20. How many of us -- I'm sure I know that Melissa did a lot of training with you on infection control. Okay. So this gives you something that you can use. We can go into the next one. Thank you. Autism speaks. So what should the autism community know about coronavirus outbreak? This is a little bit -- it also has some information there about handwashing, it has what you supporters of people with autism can do. Events that happen, how you can kind of help the care providers for people you support with autism. There is a couple of other sites there with autism. This is another site that is available and has free information. In your own time, please go into these sites and kind of check them out, find things, not every site will be able to meet all of your needs. I'm trying not to overwhelm you with information.

One of the other sites is from Australia. Again, because IASSID is an international organization, I guess we can go into why there are a lots of new rules. It is a fact sheet. That one down the bottom, it's a little towards the left, if you go into it, it is an easy-to-read, you know, a lot of pictures and things about why we have all of these roles about the virus. It can be -- people are questioning what is going on here and why do we have what we need to know here. There are new norms. That is the other thing. Keep in spaces between, read the -- we have a space between ourselves. Pubs are close, the beaches are closed. There are a lot of information that reaffirms to people so that they understand and the main point of all of this information is to get to communicate, to get the information, to help also reassure us and tell us, you know, that this is what is happening and how we can support each other. There you go in. Here is some -- that is some of the other ones. So we can go on to the next one.

Very interesting. Very contagious. This is the site of Beyond Words. I can agree. This is from Great Britain. Usually, they sell these books. They are like a graphic novel if you want to say. They usually charge for it. All of the coronavirus, they have about four or five of them are free for download. So do look at them. I can appreciate the one that I found pretty meaningful is about somebody who dies, a friend of mine, when somebody dies from coronavirus. It is a guide for family and care.

My friend with ID had one of his friends without ID die early on. He did not quite understand about why he could not have a funeral and things like that. You can see in these books. You can use them and try to support the people that you work with. So the best of all of this is that right now, it is free and available for you. So next we -- we can go back to the original site. We can focus on there is Down syndrome medical group. This is local, next to you all in

Chicago. It is a great center. They also have a resource guide. I want it to let you know, although it is focused on people with Down syndrome and much of the information seems to be more focused for younger people, it is still applicable. Let's click on the link.

We're going to stroll down and we will look at their resources here. You will find there is that question and answer on COVID-19 and Down syndrome. Get that. I was actually on the National Task Group. Worked on that early on. I hope to contribute to some of that. It is a great booklet. It is very -- it has been updated. A number of people have it. It is available in Spanish and English. I would probably get the abbreviated version, but it is great for you. It is great for family members. It is great to have for all of your programs. So feel free to share with people that you work with and support.

The other thing, if you go back, Jasmina, to the original resource list, if you stroll down and we look at -- there's great things on activities you can do at home, they also -- there is a -- with all of these resources, great sharing among these. Here is the green advocate. One of the ones, there is two, we're not going to get right into a get to the slide on testing is the wearing of facemask. So if you stroll down to the wearing of facemask, lots of things in Spanish talking about it. Facemasks and travel. You can see work activity considerations for people with Down syndrome.

The facemask, wearing them, you can -- they have information from the CDC. There is on 1.1 of the points is using, I think we can click on for the social story about COVID face mask. You have a lot of social stories that you can look at and share with the people you support on wearing -- I can wear a mask. It is a social story for visual learners. People with down syndrome learn better visually. So here is something that you can share with people about the coronavirus and what about it, what symptoms they can have and the facemask, the importance of it, where you go to wear facemask. Initially, I think that was complicated because, initially, we weren't asked to wear them. So now, we have to use them.

The other point I want to talk about facemasks always -- people are going out, people may not be used to wearing facemasks. We need to be able to acclimate people, talk a little bit more about facemasks because as things open up, people will be going out and they will need to wear facemasks. Keeping people used to wear a facemask will be key. The next one, I mean, they have, again, the other, we're going to go back, wearing it can be uncomfortable. We will go back to the original slide. We will come back later, Jasmina.

We're going to do a little complicated work here. But there is that possible resource. The next slide please. Here are some of the ones we already looked at. You can look at them on your own time. There is some Canadian, great Canadian resources. Next slide please.

So testing. What can I say about testing? You know, there are two types of tests. One is from the antigen, the germ itself or the virus and it is the PCR. It looks at the genetic material and detectable if the person is actively infected. These tests look for snippets of viruses. What they can tell you is they find evidence of a live virus, meaning infectious virus. Once a person fights off a virus, some particles tend to linger. It can cause infections, they can trigger positive test. The levels of these particles can fluctuate, which means how a test can come back positive after negative. It doesn't mean at that point that if virus is active. I think the point is -- we're still learning about this, to get the information.

Let's go into the Down syndrome about the testing site. I had the test last week. I was a nurse practitioner. I will admit that until you have something happen to you, you don't have a sense of what it really means. So Jasmina, if you want to go back into the Down syndrome site and pick up the testing. There is that -- there is a video of the testing that on the other side with testing itself prior to the main site there. I think, you have to go back to a earlier link. Okay. Great. Thank you.

Up above, they have an actual point about testing. There's two videos on here. One of them is a video for adults -- thank you -- and the other one has to do with -- for kids. It is a little bit more cartoonish, with music --

>> JASMINA: Kathy, sorry. Where is it?

>> KATHY SERVICE: Go up a little bit further. I apologize, a little bit further, I believe. There you go. Helping a person tolerate testing. There it is.

>> JASMINA: I can't play the video because it's going to slow down -- it is going to be off with the video and sound.

>> KATHY SERVICE: Okay.

>> JASMINA: I'm not going to play it.

>> KATHY SERVICE: That is quite all right. What I would tell people about it is it shows you how a test is done. Basically, they ask you to push your head back a little bit. I can tell you for myself, they stick a long nasal swab and they twirl around and they get some specimen and they test it. The thing about it is that it is burning when you go in. Last week, you can see right there what it looks like. You can go on here and look and get an idea if you have they have the testing done. For me, unfortunately, when they stuck it in my left nostril, they could not get in. I think I have a little deviation. So they had to take it out and do it again.

One of the things -- it reminds me again, my friend has an exaggerated gag reflex. I know, I mean, I know what I try to help him and cut nasal hair, he gags. I could not imagine having it done. Some of this information, I know from those of us who have been in the field a long, if the test is really necessary, people might need a little bit of premedication or sedation to help them relax and get the test. So to be aware of this is what we have right now for this test. Again, this is a test and for the antigen itself. Okay. We can go back to -- back to my original slide. Great.

Next slide. That shows you the same thing. So about antibody test. What they are is that they are antibodies testing is really -- the antibody is really a protein that your immune system produces to help protect you against infection. They can be IgG, which shows up earlier than IGM. To be aware of that, there are markers. They start to show up in most people. We don't know how long they last. It reminds me of years ago. I don't know how many of you were around when hepatitis B became first -- was first detected. The different kinds of tests around antigen and antibody and the length of time and how long do you would be protected and then when you have a vaccine, how long that is good for. To be aware of the source of things. I think right now, we don't know. Always, always pay attention to what comes up.

The other thing I wanted to bring up around antigen. You've probably heard of convalescent test. These are people who had the disease, but have no residual virus, but have low bodies of antibodies. What we're trying to do -- what people are trying to give them other people who

are using this as a vaccine. It is giving somebody else antibodies. It is like the measles vaccine. Again, we don't know. How long they're going to be good for and how strong they are. Next slide please.

>> JASMINA: Just a couple of questions. Does the test hurt? Testing hurt?

>> KATHY SERVICE: The testing on the antibody, the tube that goes up your nose?

>> JASMINA: That one. I am assuming.

>> KATHY SERVICE: For me, it is a little uncomfortable. I think the worst of it was burning. The alcohol. Our nasal septum is very, very sensitive. Burning could be interpreted as hurting. It may be uncomfortable for some people. It did not cause me to gag, but I could see people gagging. To be aware of these things. Plus, as they are going in, they do this twisting of the swab around inside of the nose. So you feel the things. I think for some people it is really difficult to be able to tolerate, to be honest with you. I know when they first started doing some of this work, there was some talk about saliva test. But I haven't heard anything at all. I think it can be very -- hurt, how you decide that. People may think it hurts.

When you look at the sites for the children, people are really upset. To be aware of these kinds of things, is not the easiest thing to have done. I could understand it. But it was quite difficult, you know, it really burned. It was quick, you know. They went in, twisted around and came out. But it burned. Okay. So the next couple of slides are just a review of what Melissa spoke about in the other sections. Honestly, these are challenging times. I tried to relieve humor. We left early on before the quarantine about the COVID shuffle. It's like you bump your elbow on one side and you bump on your left side. You cough into your elbow. I think some of these things are how do we use humor to try to help us through the day. Next slide please.

So these are just again some of the things, the preventive thing and that is just some of the things because we don't have treatment. How can we prevent any kind of come over -- anybody coming down with the disease is key. The next slide.

Slide 13 is phrases we can use. This is adapted from the Orange Grove Center in Tennessee. Using the whole concept is we are together. One of the things that I have found in mine -- in my work over the years is that partnerships with people, the people we support with each other and with our coworkers. You can tell people, telling people how you feel about the time and do something. What can you do with these feelings, what can you do to keep the house safe. Here are some terms that you can use. Ask each other for help. Help me through this please. Be honest about these things. You and I, we all know that people are really sensitive. They know what the sense of what is going on. How can we support each other? Next slide please.

Here again is the issue about -- I hate the term social distancing. I tend to use the term physical distancing. Social distancing, we need social connections even more than ever. We have to modify virtually, telephone, what kinds of, FaceTimed, how do we keep connected to people. Next line please. So this is an interesting slide. This is one of the things that are available if you go on the WHO website talking about gloves. We always think gloves is the panacea for things. The issue is people think they are safe. They have the gloves on, okay. Great. If you have the gloves on, then you can pick something up on your gloves and then you touch your face or touch some other object, that's not protective. So the key, regular hand washing, washing your hands the correct way offers much more protection than wearing rubber

gloves. Next slide please.

So let's talk about mask. It can be so confusing. I'm not going to click into this, but this is a website from the University of California, Berkeley. They talk about the different kinds of mask. A couple of things about mask have to do with wearing of mask, what kinds of mask you have. Goodness. Things like -- some of the mass, the different mask we have, there are things like making sure, you know, your wearing masks out in public. Interestingly enough, I've got something in one of my medical websites talking about that they believe, this one study, it is based on modeling study, the use of the facemask may prevent tens of thousands of infections in New York City after implementing mask making. It is implemented on their calculations.

As I was saying earlier, the different kinds of mask. You have N95 respirator and surgical mask, that should be saved and used for people who work with people in coronavirus. Then, you have some of the other ones, such as the ones that are made from cloth, cloth is synthetic material. Such things like that gators. The things we wear in the winter. In fact, earlier on, I wore these kind of polyethylene, or whatever they call those, mask. You can put them on. Stretchy synthetic material or cloth bandannas. You have to kind of look at it in terms of when you are using the cloth bandannas tied behind the head might be uncomfortable for extended wear, making sure you wash out mask. So the important thing is the proper use. We're going to talk about it. Next slide please.

So here are some examples of some of the mask. Some are mainly for healthcare personnel. The face shield is an interesting piece of mask kind of mask. I see a lot of people in some of the grocery stores wearing down. The good thing about it -- they are usually used in hospitals because they also prevent transmission of wet particles, for instance, when doctors are doing intimating people and you have a spread of infectious material. The are good. Another good thing they can help people who depend on lip reading and reading facial expressions. Sometimes a little dorky looking at times. But they allow people to be able to see and serve as obvious reminders of social distancing. This is one example. The other thing is -- the other cloth mask, when we get into that a little bit, people need to wear -- I see people out wearing mask incorrectly. Sometimes they let it dangle off the tip of their nose and they keep their mouth covered or they readjust their mask frequently. That's an important thing having to do with the kind of mask you have. They take them down when you're talking to people. They don't -- the important thing about mask that you need to remember as they prevent people from -- they can prevent you from spreading germs to other people if you are infected. The thing to remember is that we don't know always if people are infected. But they don't always protect you. They may do that. We're just not sure. The next slide please. So, Okay.

The hard thing about mask. This is me. I could not get anybody else to model. People have said I can't tell if my staff person, the person who is working with me, is mad at me. So we know -- we so use our facial expressions to communicate what were thinking, how we are feeling and can tell a lot about our state of being. So for the people we work with who -- sometimes language is an issue, they really look at our facial expressions. Let's think about some of the things you can do. Maybe you can tell a person how you're feeling. The other thing I think about is when I do a lot of work around dementia care is the tone of your voice. The way you speak, you know, if you are speaking lower and quietly together, people can kind of

tell and talk calmly. Think about how you are speaking, your manner of speaking. Can you tell -- I can tell that to me. Which one I'm mad at or not. My wrinkles in my eyes give me away. Next slide please.

So how do we make masks fun? I couldn't help to use this. Many of the men I know with intellectual disabilities are wrestling fans. I cannot help to include this. One of the things is when using your facemask covering, make sure your mouth and nose are fully covered, the coverage should fit snugly across your face and there are no gaps, you don't have any difficulty breathing while wearing it and it is tight or secured. What kinds of facemasks? It is incredible. I feel like I am a mask maniac. They're almost -- one of the things is we look at mask like fences. There are different kinds of fences available. Depending on the type of fence, it either will let some things, animals, people in, you know, or not allow things to come in, cows, horses, your neighbor, depending on the kind of fence. So what do we want? It is really interesting because early on in this whole process, many of us have neighborhood circles. People thought they wanted to be useful and make a mask.

I got involved. My sewing machine did not really work. Early on people were talking about the styles of mask and what kind of mask and how to do this. There were a lot of videos and even now, you can still find them. Then, at one point, people are saying you know, this is not really detecting the person. So at one point, they were telling us to get your vacuum cleaner bags and take the filters off and put them in your mask. Then something about, no, this is not good. There's particularly in this and it can cause you respiratory problems. It got honest to goodness, I was confused. I can imagine. I'm a nurse. How confusing could it be to others. Initially, I would tell you my matchmaking situation, I bought mask from the city, Jersey time of the serial. They fit around your ears. The sum that's made with regular elastic, some may with T-shirt material. Most of the mask, all the mask I have is only two layers. That seemed to work fine. Then I bought a bunch of mask from a local group. The problem with these mask, they were nicely, they were pretty mask, they were fun, they did not have, neither mask have, they fit on there, they came across, they had a flannel in the inside. They did not have a wire across the nose. Initially, I thought, okay, I can wear these. They kept sliding down. I took them under my glasses. They kept sliding down. They were a little challenging to wear. Then, my friend who is a great seamstress, did all this investigation, she made me great mask, it was a little bit more complicated to use. When I tried it, it was a little pouchy, there was breathing space. I was like, this does not fit right. Turn around, I had it on upside down. Learning how mask work. Also in hers, she love a little, it was two layers. If you want to add a filter device in between, you could do that.

Then, I got a bunch of mask from a friend of mine who made them down in Florida. She is a quilter. They're beautiful. They're quilted. You've seen those on the side. You have to tie these. They don't go easily. But they're pretty, they're really lovely. I was you can see it. This one has pink flamingos. It's lovely. My friend as a son with Down syndrome and was on the national test group. Lastly, you can use old T-shirts. One of the things is that scientists working to identify what kinds of materials Best Foods with the particles, find a high thread count useful quilts and pillowcases works well. You need to layer them to increase the filtration. According to the WHO, they have a great video on mask, cloth mask they recommend three layers. But

you've got to remember, you got to be able to breathe through these. So you have to have a certain level of density. An inner layer that absorbs your breath, which has some humidity, and then a middle possibly will act as a filter. I actually had, a friend of mine, I just drop them off today, somebody made me a mask out of a T-shirt. I had it, many of the people I support missed their day program. I had a T-shirt that was of the day program that my friends go too. I had somebody else make it. Because the T-shirt material is kind of thin, it is lovely to look at and it is great, it's got riverside industries, blah blah blah, she put the inner filters and did some material. Goes around the ears. She also added another tie. There's ways of making mask and making them be meaningful to people. Next slide please.

>> JASMINA: Somebody was asked about coffee filters.

>> KATHY SERVICE: Yeah.

>> JASMINA: Also heard that.

>> KATHY SERVICE: Yeah they can work. Try them. I think one of the things that -- I mean, you read about these things. The best is there are another layer, putting them in, again, you have to take them out. Washing your mask and doing the right way. Some types of paper towels or a little more, they are not completely, you know, dense where you can't breathe through and get hot. So yes, you can use those and try those to. So these are making mask easier. It is hard again. One of the laments I hear from this friend who is a director of the day program is that people aren't wearing mask at home. What are we going to do if they come back in? How are we going to support people in wearing masks when they have to wear a mask? So my suggestion is having making sure even if they don't wear them all the time, spent some time having mask on when you're in your social bubble and everybody is safe, wearing masks is a good thing because it keeps people from the habit. It makes it much more comfortable. This is -- you got a couple -- I'm not going to going to make a mask easier to use. You know, we try to find out what about the mask is bothering them. We have a lot of people who were defensive. If some fabric bothers you more than others, that might feel more difficult. You know, one of the things, this is interesting for me, again, we always use ourselves, making sure -- when you look at a mask, one of the things is to make sure it is intact, but also look and make sure the inner part of the mask doesn't have any fibers or here's across that, inside. Nothing drives me crazy. People can be sensitive to this is having a hair inside your mask. I will be in the supermarket shopping. My face will be itching under my mask. I know what that is, but some of the people we support don't quite understand. It is almost like, I mean, having -- we can't, you know, anyway, you know, I kind of think about humor. It is like the here and there noses like the 2020 version of have been that here in the back of our pants. That drives us crazy. You are not in the supermarket trying to get the hair out of the back of your pants just the same as you are not going to try to get the hair out of your mask. So try to plan ahead for these kinds of things and think about it. These are the kinds of things that will make for failure. Next slide please. So conditioning, and those of us in the field of conditioning, using social narrative, visual supports, timer, there's actually a YouTube video that we are not going to get into. Next slide please. This is just something for your information, disability COVID-19 forms. Stony Brook University has these available for free. Some states have their own forms and others don't. You can always download and look for your state. Information, the communication of

information from one site to another, if somebody gets hospitalized or, for instance, if a person has to go, some programs have people that are COVID positive. They moved to a group home, different group homes, et cetera, going to hotel. But always have forms on people so you can use like my health passport or Surrey Place in Canada has one. These are just available for your information. Next slide.

The last one is keeping healthy. Keeping physically and emotionally healthy isn't new to all of us. It is really important and harder, I think, than ever. The more I listen to webinars, the more the advice seems to be reinforced. It is important to get outside, if you can. The natural vitamin D is a boost to our immune system plus the color, and especially now before it gets too hot is really, green therapy lift our spirits. So keep all of the webinars on stress management, and about the importance of routine. With all of this uncertainty, having structure in the routine, I think about is like having a hand railing. It goes up and down the stairs of the pandemic. Structure, routine, sleep, healthy eating, visuals for people. You know, this was all reinforced by Dr. Brian who in one of his early webinars with adult Down syndrome clinic. You know our sense of well-being. Taking care of those, both for yourselves, you know, understanding some things are just out of your control. You need to be kind, be kind to your others, especially be kind to yourself during this period next slide please.

So for me, and I am sincere when I say this, you are all, those of you in my listening audience, you have all been my best teachers over time. Sometimes, I don't know everything. But you know by your questions and one of the things one of the things I am hoping to do is to do something on mask and personal protective health equipment for people that they can read. If you have information and can tell me questions like the whole point about what do I do, how do I tell if my staff person is mad at me or not. These are the questions we need to know. You are all my best teachers. I am forever, forever grateful to everybody out in the audience. What really? Who really matters? We all do. If you have questions, that's fine -- next one. Thank you for everything you do every single day. We would not be here without you. Feel free to call -- e-mail me. I am available. If I can't answer something now, I will get back to you. Thank you everybody. Thank you again for everything you do.

>> JASMINA: Thanks so much, Kathy. Please put your questions in a chat, the question and answer box. I have been asking some that came through, but I also have a few others. What about people with asthma and wearing face covering?

>> KATHY SERVICE: Yeah. You know, it is interesting. I think, you know, one of the things, people can wear, they should wear face coverings. I think again it is interesting because some of the information I have seen is that the people with asthma, because of the medicine that they might be on for asthma, there is less of a, you know, our autoimmune reactions to it. So it should not be, to my knowledge, any issues with people with asthma wearing face mask. If they seem to kind of -- again, try the kind of mask on. There should not be any reason that they can't wear, to my knowledge, wear a facemask. I haven't seen anything in the literature about it.

>> JASMINA: Thank you. I think you somewhat partially answering this question. But how might you help support someone with autism with sensory, specifically touch issues with their mask?

>> KATHY SERVICE: You know, taking time with people and having, again, I am thinking out loud

here, so bear with me. Touching, feeling, getting them used to the kind of fabric. Feeling across their face. Trying different things, rewarding people about how the mask is. Some masks, for instance, if you have the ties in the back, they may be much more bothersome. Around the ear ones, sometimes the elastic may be more bothersome. You might use, some people might use T-shirt material which is soft and feeling and may feel less uncomfortable for a person with autism. You know, I -- you know, I -- you think trying, as I was saying, as I tend to be a mask maniac right now, trying different mask. Having people, you know, synthesize filling them around the hands, et cetera. If you know what kinds of material people make make feel good to a person.

>> JASMINA: Someone from the audience said in our experience and mask in family members with family with touch issues touched mask may be more comfortable with a long 30-inch tie that ties at the nape of the neck. That is a -- I will put that in the chat box so everyone can see that answer as well. Thank you, Nancy. What about face coverings for a deaf individuals?

>> KATHY SERVICE: There is when you get back to some of these using the face shield, having a face shield. People around -- also for people who are deaf and lip read, the issues will be that they will not be everybody will not have a face shield on. Perhaps making sure that if you're out with the person who lip reads and you can help the person understand, you know, having, if you yourself wears -- where a face shield, be able to kind of let the -- tell the person where the person is the mask is saying, these are difficult times. We're not going to make -- meet everybody's need. That's what I would suggest right now. Using, you yourself or somebody who that person can see wearing a face shield. That is what they can kind of tell what is going on. The hard thing is like you can't be bring a face shield with you, no matter where you go. If the person tends to go in in certain places frequently, for instance, if the person has a coffee shop or someplace that they really like, may be -- again, I am thinking out loud here -- getting a supply of face shields and sharing them with the coffee shop or something and asking them, you know, if you don't mind, when this person comes in. The other thing and some of these places, they automatically have these clear shields. You know, that is all I can imagine what to do because, you know, you know, I don't know. That's the only thing I can think of right now. If anybody has any other words of wisdom, I would appreciate that. It would be interesting for me to go into the deaf community and say in terms of some of the deaf and hard of hearing places what they recommend. Yes.

>> JASMINA: A couple of comment from the audience. From Andrea, a skills trainer, I find leading by example that they will wear if you wear them. Sorry. Things are coming through, so I am losing -- from Michelle, I've seen mask with anti-fog clear smile for nurse and deaf community.

>> KATHY SERVICE: You can have, technically, have something cut out where you could. That's true. You have to kind of look around for them. Thank you. That is a good idea or good remark.

>> JASMINA: Can someone wear just the face shield when in public?

>> KATHY SERVICE: You can. As long as, is the same. The point of it is a barrier. The point is that they are a barrier. As you know, you've seen and I've seen in many supermarkets, people would just wear the barriers. So that also is -- what I would also quite honestly, I think it is fine, but if you have a question like that, I always go to our public health nurse. Check in with them.

I don't think that's a problem. Good. That's great.

>> JASMINA: Some -- thank you, Charles. Someone was asking do you know of a resource for getting the clear mask or face shield. Charles from the audience recommends that there is an Etsy shop. What we have done. I can sure one of these for you that we've done. There are on Facebook in your community, there are 3D printing sort of books that prints -- that prints face shields. They kind of -- they are able to make the face shields. We have been able to connect them with community-based organizations. They have donated thousands of face shields to nurses. Hospitals. Community-based organizations, something to think about, just see. I don't know if everyone is familiar with next door. Sometimes we post and ask for donations that way. It seems like there's always someone that is 3D printing something. Frontline workers. I would just get creative with that too. But yeah.

>> KATHY SERVICE: Great. Excellent. Excellent.

>> JASMINA: Someone said I just looked on the CDC website. They state you need to wear both and not just the shield alone.

>> KATHY SERVICE: How interesting. How interesting. I see a lot of people who just wear the shield. Interesting. That's the first time. One of the things when I talked about it is that it was a physician who was talking about the use of face shields as an alternative. Interesting. Okay.

>> JASMINA: Shifting to questions really quickly. Are there recommendations about how often or even if teachers or mentors should be tested so that they are confident that were not spreading COVID to our students or interns?

>> KATHY SERVICE: You know, that's a hard one. You, you know, honest-to-goodness, I can be positive now. I was negative last week. Any of us can be positive or negative at any point. The other thing about testing is that they relied, getting an accurate, making an accurate test. Right now, the tests are becoming much more reliable. But I have not seen any recommendations. It's interesting how different governments are saying in order for you to go out or even do this and do that, you should get tested. But I haven't seen any recommendations yet about frequency. Oh my God, to be honest with you, having that test done on a weekly or even a twice weekly basis is really challenging. I don't know how, the frequency of such, what it does toward the inside of our noses. It was really irritating. I don't know if it can be damaging to the inside of our noses. That's an interesting point. I will try to find that out.

>> JASMINA: Also following your organizational policy, I think organizations are starting to have policies. I would ask. And different states have different. If the testing is free or not.

>> KATHY SERVICE: That is a good point. Sometimes -- you know, I personally thought it was positive. I had word kinds of GI symptoms. But it came back negative. People said I bet you had it and blah blah blah. You're right. And the cost of it.

>> JASMINA: One of the other question was, can animals really get and spread COVID-19?

>> KATHY SERVICE: From my knowledge, animals, although, there is some sort of evidence, you know, the minx in the Netherlands, there are a couple of big cats, felines may get it. There's been some information about that. But the issue is -- it may not be the animals inside themselves, but it might be somebody on their coats. If you touch animals coats or different things like that, they, you could get it from them. They have, actually the CDC has information about animals. In fact, that was one of the thing early on that I contributed to the -- in the

question and answer and Down syndrome. People who have service dogs or people who have pets that are important to them, how do we do this. That is been my knowledge. I would go to the website. For the most part, I don't think the animals in turn, unless felines, maybe some animals can. Dogs, to my knowledge, it could be on there for.

>> JASMINA: Thank you. We are at the hour mark. If you have any questions or still bringing questions, please put them in the chat box. We're going to stick around for a couple of more minutes. I just wanted to take a moment to say thank you, Kathy, so much. I think these were -- there was some really amazing questions. They seem simple, but there are so much stuff out there that it could get really confusing very quickly.

>> KATHY SERVICE: Uh-huh.

>> JASMINA: Thank you for explaining some of these pieces. I also wanted to talk about June 23rd, next week, think same time, same date. Impacts of COVID-19 on organization serving individuals with intellectual and developmental disabilities. Donna Martin from the American Network of Community Options will be presenting. I have posted the direct link for registration for that webinar in the chat box. Again, thank you. We will stick around for a couple of more minutes to see if there are any questions. Again, the webinar will be archived. All of the websites that we talked about, all of the links will be there. It is going to be a one-stop shop for you guys. I'm getting a lot of thank yous and great presentation and good resources, but no question so far. So feel free to sign up. Have a great rest of the day. Hopefully, I will be seeing some of you next week. Thank you.

>> KATHY SERVICE: Thank you all.

>> JASMINA: The handouts -- sorry, Kathy.

>> KATHY SERVICE: I was going to say if there are any questions, what I was going to do is if you want to -- it's interesting, maybe what I can do is clarify a few things and send you the information. We can add that on a list of questions for an absolutely.

>> KATHY SERVICE: I would love to do that, the clarification, just to make sure of the add and the whole notion, let me find more about face shields per se. That would be good. I want to do that for everybody.

>> JASMINA: Absolutely. We can add them. We have a YouTube channel and all of the resources are added down where the "More Information" or "Show More" is. Also, we're willing to link it to our website. You will be e-mailed once everything is up. It is just we are running slightly late. Hopefully, this weekend I can get this one up. Apologies for those who have listened on last week. Thank you.

>> KATHY SERVICE: Thank you everybody. Thank you. And thank you for your questions. And do field as you have my Gmail address. Do Gmail me and remind me. I will do what I can do. [No sound.]

>> JASMINA: I think we're just getting lots of thank yous.

I wanted to thank Teresa.

The PowerPoint will be available as well on this site. You will be able to download it and the social story as well. So yes, all of that will be available. Don't worry. We will make sure you have everything.

>> KATHY SERVICE: Yeah. Yeah. For sure.

[END OF TRANSLATION]