



**STATE OF HAWAII  
DEPARTMENT OF HEALTH  
DEVELOPMENTAL DISABILITIES DIVISION**

P. O. BOX 3378  
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In reply, please refer to:  
File:

September 10, 2020

Dear Provider Agencies,

The number of cases of COVID-19 are at a level where community spread in Hawaii is a threat to all. We know that provider agencies have been critical in preventing the spread of the virus, and we are very grateful for your efforts.

Throughout the pandemic, the Developmental Disabilities Division (DDD) has been collaborating with other Divisions in the DOH as well as provider agencies through a DDD COVID-19 Rapid Response Protocol. The purpose of the Rapid Response Protocol is to ensure DDD participants receive the best care possible during an emergency.

Your role in continuing to prevent and respond to COVID-19 is critical. The purpose of this communication is to provide steps to take and information about your role should you become aware of a case among participants, caregivers or direct support workers.

**YOUR ROLE**

If you are alerted that any one of the following has tested positive for COVID-19, please contact DDD immediately so we can support you with taking the appropriate and required actions during the initial response phase:

- DDD participant;
- A close contact/family member, caregiver/household member of a participant; or
- Direct support worker (DSW) that provides support for a participant.

**PROCEDURE**

1. If you are alerted as described above, please contact all of the following COVID-19 Rapid Response Team members by email:
  - a. Mary Brogan ([mary.brogan@doh.hawaii.gov](mailto:mary.brogan@doh.hawaii.gov)),
  - b. Dr. Ryan Lee ([ryan.lee@doh.hawaii.gov](mailto:ryan.lee@doh.hawaii.gov)),
  - c. Sandy Kakugawa ([sandra.kakugawa@doh.hawaii.gov](mailto:sandra.kakugawa@doh.hawaii.gov)), and
  - d. Tracey Comeaux ([tracey.comeaux@doh.hawaii.gov](mailto:tracey.comeaux@doh.hawaii.gov)).

2. In order to help DDD provide a supportive response during the initial phase of notification, please provide the following information (if available) and take the following actions:
  - a. Name and contact information of the **DOH Investigator/Contact Tracer** involved with the "Case" (test positive person);
  - b. **PPE and cleaning resources and needs of the household** (e.g. gloves, masks, face shields, disinfectants). Ability of the agency to provide the PPE or not;
  - c. **List of person(s) the participant, family member, and/or DSW has been in "close contact"** (defined by the CDC as within 6 ft distance for greater than 15 minutes during infective period) **with, and last contact date/time/place;** and
  - d. **Submit an Adverse Event Report (AER)** to DDD for the DDD participant who has positive test results as soon as your agency is notified.

Thank you for working with the DDD during these uncertain times. We are committed to helping you provide the best outcome for each person you serve.

Sincerely,



Mary Brogan  
Administrator