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2 **Letter of Agreement**  
3 **ADA/Medical Mask Accommodations (COVID-19)**  
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6 This agreement is between the Oregon Homecare Commission (Employer) and the SEIU  
7 Local 503, OPEU (Union).  
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9 Novel Coronavirus disease (COVID-19) is a respiratory illness that can spread from  
10 person to person. Healthcare workers are at a higher risk of exposure and infection with  
11 COVID-19. As the parties share a mutual interest in assuring the health and safety of  
12 consumer, families, workers and the community and as healthcare workers are on the  
13 front lines in the delivery of essential health services to consumers in need, the decisions  
14 of the employer of record should be guided by the Centers for Disease Control and other  
15 public health agencies. In addition, the Parties wish to work together to take reasonable  
16 steps to protect consumer, families and workers from unnecessary exposure to  
17 communicable diseases including COVID-19.  
18

19 ADA or medical condition accommodations, needed or made in the consumer-employers  
20 place of residence, are the responsibility of the consumer-employer.  
21

22 Gov. Brown has issued new statewide requirement that face coverings be worn in any  
23 indoor public space as of July 1, 2020.  
24

25 Based on this guidance and recognizing the heightened risk faced by consumers cared  
26 for by HCWs/PSWs and PCAs, APD, ODDS, OHCC, and OHA-HSD is requiring  
27 Providers to wear a mask or cloth face covering when delivering any in-person care within  
28 six feet of an individual, this is specific to Providers that do not live with their consumer.  
29

1 To ensure the safety of both consumers and Providers and that the Governor's new  
2 mandate is adhered to, APD, ODDS, OHCC, and OHA-HSD will provide PPE required to  
3 accommodate the needs of consumers or Providers.

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5 A Provider seeking a mask exemption for an ADA or medical condition must submit a  
6 request to OHCC. The request should not include medical records. Requests must be  
7 sent to OHCC's Customer Relations Unit at:

8  
9 [OHCC.CustomerRelations@dhsosha.state.or.us](mailto:OHCC.CustomerRelations@dhsosha.state.or.us).

10  
11 OHCC will contact the worker and email a link to an attestation form that the worker will  
12 complete through DocuSign.

13  
14 A provider who refuses to wear a mask when delivering in-person care within six feet of  
15 an individual whom the provider doesn't live with cannot provide services for a consumer  
16 (s). It is the responsibility of the Provider, if the Provider elects, to notify the Union that  
17 he/she is refusing to wear a mask without an exemption.

18  
19 During this unprecedented time, the parties are working together, in good faith, to provide  
20 for the safest possible work environment and for the well-being of providers and the  
21 consumers that they serve. As a result of this pandemic, changes can and are occurring  
22 daily and not all things can be foreseen when these LOAs are signed by the parties. The  
23 parties acknowledge that LOAs may have to be amended to make minor corrections due  
24 to ongoing changes and/or to correct items that may not have been envisioned at the time  
25 of signing.

26  
27 This accommodation is specific to COVID-19 and will sunset when the COVID – 19 State  
28 of Emergency Declaration is lifted by the Governor of the State of Oregon or when the  
29 mandate to wear masks is lifted by the Governor.

1 For the Employer:

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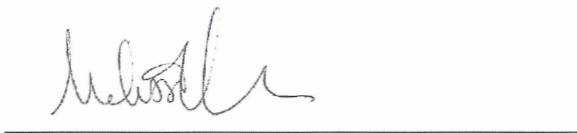


A large, stylized handwritten signature in dark ink, appearing to read "J. C. Springer", is written over a horizontal line.

10/1/2020  
Date

7 For the Union:

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A handwritten signature in dark ink, appearing to read "Melissa Unger", is written over a horizontal line.

10/1/20  
Date

11 Melissa Unger, Executive Director

12 SEIU, Local 503, OPEU