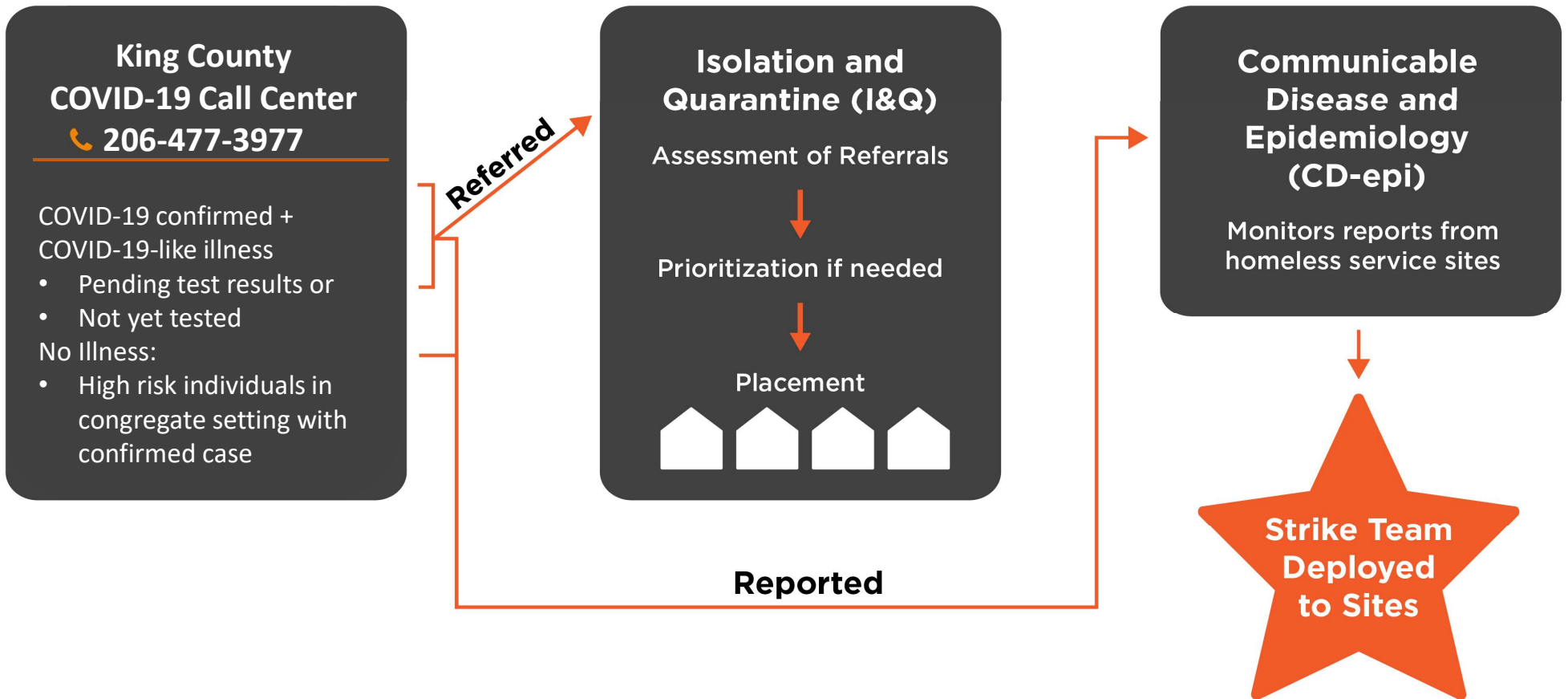


RESPONSE FOR PEOPLE LIVING HOMELESS

COVID-19



About Isolation and Quarantine (I&Q)

- A proven public health practice for reducing the spread of disease
- Quarantine is for people who have been exposed to an infectious disease and could become sick and then spread the infection to others.
- Isolation is used for people who are currently ill and contagious, and who need to stay away from others in order to avoid infecting them.
- Examples of people who may need I&Q assistance include people who do not have a separate bedroom in their home to isolate, people who have a family member who is medically fragile, students in dormitory settings, people in congregate living arrangements, or people experiencing homelessness.
 - Isolation or quarantine at a King County facility does not mean you will be alone- a care team of nurses and behavioral health providers will check in on patients daily and ensure their needs are met.

Providers can refer to isolation and quarantine individuals with:* **(4.30.20)**

1. Confirmed COVID-19 positive**
2. New COVID-19-like illness (CLI) symptoms
3. No illness (asymptomatic) who are:
 - at higher risk for severe COVID-19 illness after a COVID positive patient has been identified in their congregate setting

*In the case of limited capacity, beds would be prioritized in the above order.

** Patients with a positive test can also self-refer.

COVID-19-like illness (CLI) may be defined as *any* of the following:

- Fever of 100.4 or greater
- New cough or shortness of breath
- Sore throat
- Headache
- Muscle pain
- Chills
- Sudden loss of taste or smell.

People at **higher risk** for severe illness include:

- **Individuals over 65 years of age**
- People of all ages with underlying medical conditions, particularly if not well controlled, including:
 - **People with chronic lung disease or moderate to severe asthma**
 - **People who have serious heart conditions**
 - People who are immunocompromised.
 - Many conditions can cause a person to be immunocompromised, including cancer treatment, bone marrow or organ transplantation, immune deficiencies, poorly controlled HIV or AIDS, and prolonged use of corticosteroids and other immune weakening medications
 - People with severe obesity (body mass index [BMI] of 40 or higher)
 - People with diabetes
 - People with chronic kidney disease undergoing dialysis
 - People with liver disease

What is a COVID-19 Strike Team?

- Responds to potential COVID-19 outbreaks in congregate settings including shelters
- Includes up to 2 registered nurses, 1 environmental health investigator, and 1 behavioral health staff
- Conducts on-site clinical assessments of clients and staff to determine the need for testing and I&Q
- Conducts on-site assessment to support implementation of sanitation guidance, social distancing and infection control practices
- Deployed to sites by Public Health Communicable Disease and Epidemiology (CD-epi) based on many factors
 - Population demographics
 - Number of COVID+ cases and/or people experiencing COVID-like illness
 - Time frame of testing or confirmed results
 - A confirmed positive case
- Site is contacted before deployment
 - To ensure that COVID+ person(s) will be on-site when team arrives
 - To determine supply needs at the site
- RN will work with the COVID+ person(s) to connect them to I&Q placements
- Requests mobile testing team as needed to provide on-site testing

WHAT SERVICES CAN I EXPECT AS A GUEST AT A KING COUNTY ISOLATION & QUARANTINE CENTER?



Meals That Honor Dietary Requirements



Regular Medical Check-Ins



Mental Health Support



A Safe Space with Clean Linens & Laundry Service



Snacks and Toiletries



Cable TV or Portable Tablet



24/7 Phone Assistance & Language Access



24/7 Security



Transportation to & from the Location

More about I&Q centers:

- Guests can bring all of their belongings.
- Treatment for substance use disorder -including Suboxone- is available onsite.
- Smoking is permitted in designated smoking areas.
- Alcohol consumption is permitted.
- Multiple household members, including children, may be roomed together in many cases.
- Service and emotional support animals are welcome. Pets can be housed by the animal shelter until the patient is discharged.
- I&Q is free for everyone, and is not reported as public charge.
- Documentation status is not collected.
- Government-issued identification is not needed.
- King County does not permit law enforcement to enter the facility without a signed judicial warrant.
- Phones are provided to ensure that guests can stay connected with friends, family, and case managers.
- CPAP/BiPAP and nebulizer machines can be accommodated.
- ADA accessible.

All are welcome, no matter race, religion, gender identity, sexual orientation, immigration status, or disability

First Steps for Connecting Patients to I&Q

- Coronavirus Call Center is the first point of contact for providers to connect patients with King County I&Q facilities

Coronavirus Call Center: 206-477-3977

- Call Center operates from 8am to 10pm, 7 days per week
- Designate a member of the patient's care team who can be the contact for I&Q staff to avoid delays
- Call Center will forward the care team's contact information to an I&Q Coordinator who will contact the care team member within two hours (depending on call volume)
- Public Health's Communicable Disease-Epidemiology section may also call the care team and/or the patient for any disease investigation needed

Information Providers Should Have Available About a Patient When Contacting the Call Center

- Where the patient is currently staying and contact information for that location in case the patient leaves the health care facility prior to being connected with transport
- Any medical and/or behavioral health needs
- Please indicate if a mobility assistance device is used by the guest so that the proper vehicle can be deployed
- Please indicate if a service animal or emotional support animal will be accompanying patient or if there are lodging needs for any pets that are not service or emotional support animals.
- Any cognitive or visual impairment as well as language needs
- Height/weight and food allergies
 - A signed release of information (ROI) is not required for Public Health to receive information about the patient for connection to I&Q.

Information Providers Should Have Available About a Patient When Contacting the Call Center

Additional Information For Households Living Unsheltered

- *For transport by King County Isolation and Quarantine:* please provide as much information about location of guest pick up as available.
 - If street address is not available, please provide intersection, GPS coordinates, approximate address, and/or landmarks
- *If outreach team will provide transport,* please provide make, model and license plate number of vehicle that will provide transport
- Estimate of amount of belongings needing to be transported (for possible dispatch of larger vehicles, when available). Loading assistance will need to be provided by the referring provider (PPE use recommended).
- **Public Health strongly encourages referring provider to remain with guests until transport arrives. In cases where this not possible, information to contact the guest directly (cell phone) must be shared with Public Health in order for the placement to be successful.**

Isolation and Quarantine: Assessment of Referrals

- King County's goal is to place all patients who need it in an I&Q facility to slow the spread of COVID-19
- Assessment is needed to assure that patients placed in an I&Q facility will be safe and will not pose a safety risk to staff and other patients
- I&Q Coordinator, working with the I&Q medial triage team and King County's Behavioral Health and Recovery Division (BHRD), will assess if an I&Q facility is available that can provide the level of medical and/or behavioral health care and attention needed by the patient
- A designation of low, medium and high behavioral need will be assigned based on available information about the patient and the clinical judgment of the screeners
- Patients designated as high need may still be suitable for I&Q placement if the proper support can be provided

Level of Patient Need for Behavioral Health Support

Low need

- No documented behavioral health history in the King County data system
- No clear history of harm to self or others
- No documented behavioral health history in the King County data system

Medium need

- Not well engaged in the behavioral health system as evidenced by enrollment and documented service encounters
- History of danger to self or others that is more than 6 months ago
- Complex behavioral health need, such as withdrawals/delusions, with a plan to manage

High need

- Poor or no engagement with treatment provider as evidenced by enrollment and documented service encounters
- Clear and recent history of danger to self or others
- Complex behavioral health need, such as withdrawals/delusions, without a plan to manage
- History of arson
- History of severe property destruction

Admission Inclusion Criteria 5.11.20

Functional

- Able to perform mobilize, transfer and perform Activities of Daily Living (eating, dressing, bathing, etc.) independently
- Able to follow directions when provided appropriate language or other facilitation

Behavioral Health

- Does not pose an imminent threat to self or others that warrants a higher level of care
- Does not have behavioral health issues identified; or has mild or moderate behavioral health issues identified; or other complex behavioral health need, such as withdrawals/delusions, with a plan to manage
- Is not in active alcohol withdrawal, or at high risk for alcohol withdrawal (i.e. recent history of delirium tremens or withdrawal seizures, or recent history of hospital admission for withdrawal.)

Exclusions from Admission 5.11.20

- Patient is unable to manage activities of daily living independently, or follow directions despite appropriate language or other facilitation
- Patient poses an imminent threat to safety of self, staff or guests, (i.e. recent documented violence, arson, or predatory behavior)
- Medical problems that need monitoring or treatment adjustment beyond the level that can typically be provided in outpatient care, including:
 - Patient requiring supplemental oxygen by nasal cannula
 - Exception: Patients with a *preexisting* (i.e. prior to illness) baseline oxygen requirement, if less than 4L per minute and in possession of all necessary equipment.
 - Patient requires IV medications
 - Patient in active alcohol withdrawal or at high risk for alcohol withdrawal (i.e. recent history of delirium tremens or withdrawal seizures, or recent history of hospital admission for withdrawal.)

Patients will be assessed on a case-by-case basis by behavioral health and medical screening teams.

Once a Patient is Assigned to an I&Q Facility

- I&Q Coordinator will share information about the lodging site with the care team so it can be communicated to the patient or, the I&Q Coordinator will share this information directly with the patient
- When possible, please ensure that all prescriptions are filled and the patient has their medications with them prior to transport to an I&Q facility.
- Transportation will be provided either by private ambulance or Metro depending on capacity and availability
- An estimated time of arrival for transport will be provided. Anticipate a 1-2 hour wait time (from initial call) for the patient to be picked up
- Referring provider should provide the I&Q Coordinator with specific directions for the location to pick up the patient and ensure the patient is ready and waiting.
- Loading assistance will need to be provided by members of the patient's care team (PPE use recommended). Metro transportation staff will not have physical contact with the patient and are unable to speak with guests during transport due to the physical barrier that separates the driver.
- **Referring provider is strongly encouraged to remain with guests until transport arrives. In cases where this not possible, information to contact the guest directly (cell phone) must be shared with Public Health in order for the placement to be successful.**

DISCHARGE CRITERIA- HOW LONG WILL PATIENTS STAY AT I&Q

You've been sick with COVID symptoms and

- **you tested positive OR**
- **you tested negative, but you spent time or shared a living space with someone who tested positive.**

Leave if:

- It's been 10 or more days since you first started feeling sick AND
- You haven't had a fever for 3 days AND
- You are feeling better.

Nurses at the I&Q will keep track of how you are feeling and your temperature. They will let you know when you are well enough to leave.

You haven't been sick with COVID symptoms, but you tested positive.

Leave after 10 days from the date of your test.

You haven't been sick with COVID symptoms and you tested negative, but you spent time or shared a living space with someone who tested positive.

Stay for 14 days (2 weeks) since the last time you were with the person who tested positive.

Patients are discharged from I&Q according to these criteria to ensure that they are no longer contagious upon release.

The discharge planner will contact the patient's housing provider 24 hours prior to discharge to arrange lodging.