

HOSPITAL & TESTING SITES

ACTIVATED RESPITE AND PROTECTIVE ACTION REFERRALS PROTOCOL

I. Overview of Motel/Hotel Resources Available in Denver

The City and County of Denver is partnering with Colorado Coalition for the Homeless and the Salvation Army to support motel/hotel room options across Denver for people experiencing homelessness during the COVID-19 crisis. Specifically, these *low acuity* rooms are offered under two types of programs:

- A) **Activated Respite (AR):** Rooms provided to support *isolation* during the contagious period of the virus for those who have a confirmed positive test result or a high-clinical index of suspicion of COVID-19.
 - AR does not offer quarantine services (see section III, Eligibility)
- B) **Protective Action Respite (PAR):** Rooms for those who are *at risk* of complications if they were to contract COVID-19
 - Clients must have an eligible medical condition (see section III, Eligibility)
 - To qualify, clients must pass a safety evaluation by the CCH integrated health team

Services offered at both Activated Respite and Protective Action facilities include:

- Single or double occupancy motel rooms with meals provided,
- Minimal integrated health team support provided by Colorado Coalition for the Homeless.
 - CCH strives to provide daily support at AR and weekly support at PAR

These programs **do not offer** levels of care found in skilled nursing or assisted living facilities. Individuals must be independent with activities of daily living and safe unsupervised in a motel room with intermittent follow up from the healthcare team. Guests must be able to ask for help when needed.

II. Hospitals and Testing Sites Eligible to Make Referrals for Activated Respite

The following hospitals/testing sites are eligible to refer into Denver's Activated Respite resources:

- Hospitals and testing sites **located in the City and County of Denver** may refer all patients who meet the eligibility criteria for these resources (see Section IV).
- Hospitals and testing sites located outside the City and County of Denver but who receive transports from Denver Health paramedics, may refer patients who meet the eligibility criteria for these resources (see Section IV) below **as long as the patient was transported by Denver Health paramedics**. Note: Due to capacity limitations, transportation cannot be provided under these circumstances. The hospital/testing site making the referral must arrange transportation.
- Hospitals and testing sites located in Aurora, Adams, and Jefferson Counties who arrange and provide COVID-19 appropriate transportation for the client after the referral has been approved and the client assigned a bed. *There are a contracted number of beds for these referrals; if at capacity, we may not be able to accept referrals.

III. Eligibility for Activated Respite and Protective Action

1. Please utilize the referral process below for clients experiencing homelessness who meet the following conditions:

- A) **Activated Respite Eligibility:** Patient has confirmed or suspected COVID-19.
 - Hospitals and testing facilities need to provide a positive test result or pending test documentation

HOSPITAL & TESTING SITES

ACTIVATED RESPITE AND PROTECTIVE ACTION REFERRALS PROTOCOL

Inclusion Criteria:

- Positive PCR
- Pending PCR with new onset cough, fever, shortness of breath, or loss of taste or sense of smell within the last 2 weeks

Exclusion Criteria:

- Quarantine: Close contacts of COVID-19 who are not experiencing symptoms who have a negative or pending test result
- Quarantine: Clients with a low clinical suspicion of COVID-19, such as *only* secondary symptoms (fatigue, muscle aches, headache, sore throat, congestion, nausea, diarrhea) with a negative point of care or awaiting test results
- Clients unable to care for self in an independent living environment safely
 - Dependence to complete activities of daily living (transferring/walking, feeding, bathing, dressing, personal hygiene, continence); high-acuity behavioral health & medical conditions
- Someone who has a 2nd positive COVID-19 test within 90 days of their 1st positive COVID-19 test and has already been cleared from the contagious/isolation period

B) Protective Action Eligibility: Client does not have COVID-19 but is at high risk for complications of COVID-19.

Inclusion Criteria

Eligibility Criteria (Who to refer)

- Age \geq 65, with or without medical conditions
- Clients any age with conditions that place a client at-risk for complications from COVID-19, including the following conditions:
 - Morbid and Severe Obesity (BMI $>$ 35)
 - Chronic Lung Disease
 - Pregnancy or up to 6-months Post-partum
 - Immunocompromised, such as organ transplant, HIV/AIDS, Cancer, Immunosuppressant medications
 - Chronic Kidney Disease, including dialysis
 - Uncontrolled Diabetes
 - Hemoglobin disorders, such as sickle cell disease or thalassemia
 - Heart disease
 - Liver Disease

Note: Eligible conditions may be dynamic as recommendations from the CDC or clinical studies are updated based upon most recent evidence of COVID-19 complications and risk factors.

Qualification Criteria (Steps for admission)

- Negative COVID screening upon referral
- COVID-19 test prior to admission
- Condition which directly places client at risk for complications if COVID-19 is contracted
- Qualification by CCH's integrated health team safety evaluation
 - Low-acuity health needs; can function safely in independent living environment

NOTE: Families are eligible for Protective Action if one person in their household is high risk. Families are also eligible for Activated Respite if someone in their household is symptomatic or has been tested for

HOSPITAL & TESTING SITES

ACTIVATED RESPITE AND PROTECTIVE ACTION REFERRALS PROTOCOL

COVID-19; however, arrangements may be customized for each household to reduce risk of spread to other family members. *If the client who qualifies for activated respite or protective action is discharged by self or the program, non-eligible family members are no longer able to remain in the program.*

Exclusion Criteria

- Clients unable to care for self in an independent living environment safely, who need a higher level of care such as traditional respite, assisted living, skilled nursing, or hospital-level care
 - Dependence to complete activities of daily living (transferring/walking, feeding, bathing, dressing, personal hygiene, continence); high-acuity behavioral health & medical conditions
- 2. All other individuals and households should receive congregate shelter services and follow guidelines for social distancing, handwashing, wearing face coverings, etc.

IV. How to Direct Other Patients

- A) Individuals who are not confirmed or suspected of COVID-19 and who are not high risk for complications of COVID-19 should not be referred to Protective Action or Activated Respite.
- B) Those who require a higher level of care than these motel/hotel resources can provide should be retained at the hospital or connected with another higher acuity of care location.
- C) Those who do not need a higher level of care should be directed toward congregate shelter resources. All other individuals and households should receive congregate shelter services and follow guidelines for social distancing, handwashing, wearing face coverings, etc. For information on existing resources, please see: <https://www.denvergov.org/content/denvergov/en/housing-information/resident-resources/find-shelter.html>
- D) Additional Resources for Veterans
 - a. The Supportive Services for Veteran Families (SSVF) program has relaxed some guidelines to allow them to support SSVF-eligible veterans during the COVID crisis who otherwise may not have qualified for this service. In addition to supporting housing, this has allowed for motel rooms for veterans who are not demonstrating symptoms of COVID but who would be at high-risk for greater complications should they contract the virus.
 - b. Shelter guests who would be appropriate for protective action who are veterans should be connected to the SSVF program.
 - c. To connect a **protective-action** appropriate veteran to motel resources through the SSVF, contact Missy Mish with the VA's Community Resources and Referral Center. This coordination will help us serve more clients in non-congregate settings.

Missy Mish, LCSW
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Community Resource and Referral Center (CRRC) Program Manager
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HOSPITAL & TESTING SITES

ACTIVATED RESPITE AND PROTECTIVE ACTION REFERRALS PROTOCOL

V. Referral Process for Activated Respite

If a patient meets the criteria stated above, hospital/testing site staff should take the following steps.

1. Offer to connect the patient to hotel/motel isolation resources.
 - i. If the person declines the offer and is symptomatic for COVID-19 or has been tested for COVID-19, the patient will not be allowed to receive shelter in congregate settings and should be informed of this.
 - ii. If the person accepts the offer, the hospital/testing site will continue to step 2.
2. Hospital/testing site staff will request the patient's verbal consent to share their information for the purposes of connecting them to services.
3. Once verbal consent is obtained, hospital/testing site staff will:
 - i. Visit <https://www.coloradocoalition.org/activatedrespite>
 - ii. Fill out the Activated Respite Referral form linked on the website. This will automatically submit the form to activatedrespite@coloradocoalition.org
 - iii. The CCH referral process is available 7 days per week between the hours of 8am and 8pm. If you are submitting an Intake Form **after 5pm weekdays or anytime on weekends**, call 303-312-9800 to inform the team of the referral, as this inbox monitored on-demand during evenings or weekends.
4. Colorado Coalition for the Homeless healthcare team will review the intake form to determine whether the patient meets the criteria for the program, whether additional information is needed, and whether a room is available. Depending on capacity, room availability cannot be guaranteed.
 - i. Please note that review of the intake form and referral determination can take up to 1 hour.
 - ii. If the referral is not approved, hospital/testing site staff should keep the patient at their facility if the patient requires a higher level of care or refer to another shelter resource if appropriate (see above).
5. If the referral is approved, CCH will confirm that the patient has an Activated Respite room and provide an estimated time of arrival for transportation if referring facility is eligible for this (Note: Transportation operates from 8am to 8pm, 7-days per week).
 - i. Hospital/testing site staff will notify the patient that they will be taken to an Activated Respite program. They will remind patient that going to Activated Respite is helping them (isolate) shelter in place. Because of this, **the patient needs to stay in their motel room. They can leave to smoke, but not to go to a store.**
6. For referrals from Denver-based facilities:
 - i. Staff will make sure the point of contact and person requiring transport are at the meeting location at the appropriate time. Provider point of contact will help the person board the vehicle.
 - ii. NOTE – Multiple people **may be** transported to Activated Respite via a single transport. DDPHE recommends social distancing within the vehicle to the extent possible, that people in the vehicle keep their masks on and wash their hands after exit, and that the vehicle is not completely full if possible. Windows should be rolled down to extent practical to ventilate during and after transport.

HOSPITAL & TESTING SITES

ACTIVATED RESPITE AND PROTECTIVE ACTION REFERRALS PROTOCOL

VI. Referral Process to Protective Action

- a. If you would like to make a referral to Protective Action, please have your client call or call on the client's behalf the CCH front desk at (303) 293-2220, option 3.
- b. Please encourage the client to specifically request a protective action nursing phone assessment when prompted for reason for visit
 - i. We are only providing same-day visits at this time
 - ii. Some protective action hotels/motels have specific stipulations regarding gender identity or family status. Clients may be asked to provide this information upon requesting an appointment to determine true program/room availability
- c. The Client Access Representative answering the phone will let the client know scheduling availability of telephonic nursing visits for that day
 - i. Appointments are available M-F, typically between the hours of 8:30 – 1 PM, in order to align with intake availability at the Protective Action motel/hotel locations
 - ii. Appointment availability is determined by current protective action respite room capacity. If protective action rooms are full, the Client Access Representative may encourage the client or advocate to call back another business day.
 - iii. There is no wait list
- d. At the time of the pre-booked appointment, the client will be called by a CCH nurse.
 - i. If a client does not have access to a telephone, the client may arrive to SSHC, check-in with the front desk, and utilize one of our private rooms with a telephone for the assessment
 - ii. CCH does have access to professional translation services as needed
 - iii. A safety evaluation is completed by the CCH healthcare team; the client may speak to several members of the team before a final determination is made
 - iv. This visit takes approximately 30 minutes
- e. The client will be notified at the end of the telephone appointment if the qualification criteria has been met.
 - i. If the client qualifies for the protective action program, the client will be assigned a hotel/motel and a room number.
 - ii. If accommodations are needed (ADA, no stairs, etc.) a room may not be available same-day
- f. Once the qualified client has been assigned a room, required COVID-19 testing will be coordinated
 - i. If a client does not show up for same-day COVID-19 testing, we are unable to guarantee or hold a protective action room
- g. A CCH staff member will coordinate transportation to the protective action motel
 - i. We strive to provide same-day intakes for clients
 - ii. Please encourage client to gather belongings prior to COVID-19 testing
 - iii. Clients must limit belongings to quantity & content that would not pose a fire risk in a motel room