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 (CCH) 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 <u>at risk</u> of complications if they were to contract COVID-19
 - o 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.
 - o 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.

Note: As temporary programs developed from an emergency response to a health crisis, neither of these programs are permanent nor have a guarantee into permanent housing. Please inform and support your client to connect with case management or other community resources if permanent housing is identified as the primary need.

II. Activated Respite (COVID-19 Isolation) Referral Eligibility

Please utilize the referral processes below for clients experiencing homelessness who meet the following conditions: Client who has confirmed or suspected COVID-19

A. Inclusion Criteria:

- \circ $\,$ Medical paperwork of Positive COVID-19 test within the last 10 days
- HMIS or public health alert of Positive COVID-19 test
- New onset cough, fever, shortness of breath, or loss of taste or sense of smell within the last 2 weeks, with or without documentation of a test

B. 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 <u>only</u> secondary symptoms (fatigue, muscle aches, headache, sore throat, congestion, nausea, diarrhea) with a negative point of care or awaiting test results
- o 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

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Note: Families are also eligible for Activated Respite if someone in their household is symptomatic or has been tested for 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 is discharged by self or the program, non-eligible family members are no longer able to remain in the program.*

III. Activated Respite (COVID-19 Isolation) Referral Process

If the client is experiencing a medical emergency or is unable to independently care for self (e.g. requiring acute or assisted/skilled nursing support), you may need to refer this client to hospital-level-care. If you are unsure, you may call the Patient Assistance Line at 303-312-9800. CCH MA & RN healthcare staff support this on-call line from 8 AM – 5 PM; after 5 PM, you will automatically be transferred to the Denver Health Nurse Line.

If a client is appropriate for Activated Respite, service provider staff should take the following steps.

- 1. Offer to connect the patient to hotel/motel isolation resources.
 - i. If the person accepts the offer, the service provider will continue to step 2.
 - ii. If the person declines the offer and is symptomatic for COVID-19 or has tested positive for COVID-19, the client cannot be allowed to receive shelter in congregate settings.
 - a. Please communicate that the client will not be able to access any services from any homeless service providers within the contagious period (10 days).
 - b. In order to prevent transmission to other shelter guests, <u>the client must be asked to leave</u> <u>the premises.</u>
 - c. Please ensure HMIS has COVID-19 positive or symptomatic alert placed in the chart that expires 10 days from original testing date or 1st date of symptoms.
- 2. Please place a mask on client if available. Do the best you can to maintain social distancing of at least 6 feet or place client in separate room or space while waiting.
- 3. Service provider staff will request the client's verbal consent to share their information for the purposes of connecting them to services.
- 4. The CCH referral process is available 7 days per week between the hours of 8 AM and 5 PM.
 - a. If there is a client who meets isolation criteria outside business hours, please follow your organization's protocol regarding after-hours isolation, such as a separate, individual room away from others and required masking policy.
- 5. Once verbal consent is obtained, service provider staff will:
 - i. Visit <u>https://www.coloradocoalition.org/activatedrespite</u> to fill out the Activated Respite Referral form linked on the website. This will automatically submit the form to activatedrespite@coloradocoalition.org
 - ii. On weekends only, <u>also</u> call 303-312-9800 to inform the team of the referral, as this inbox is only monitored on-demand during on-call weekend hours. You will be directed to an answering service who will forward your call to the appropriate intake team member. If the staff member is not immediately available, please ensure you give an updated contact # to return your call.
- 6. 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.

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- i. Please note that review of the intake form and referral determination can take up to 2 hours.
- a. If you have not received confirmation within this timeframe or, you have not received confirmation and it is past 4:30 PM, please call 303-312-9800 to confirm the receipt of your referral.
- ii. If the referral is not approved, service provider staff should follow guidance from the CCH nursing staff (e.g., if the client should be redirected back to a hospital or health care provider). Nursing staff will not provide housing advice but can triage health questions.
- If the referral is approved, CCH will confirm that the patient has an Activated Respite room and provide the initial referral for transportation, serviced by Bayaud, if referring facility is eligible for this (Note: Transportation only operates from 8 AM – 5 PM).
- 8. Service provider staff will notify the client 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. Clients can leave their room. Recommended reasons for leaving the isolation room may include leaving to smoke or to go on a socially distant walk. Please educate clients on the public health ramifications of entering group settings during this timeframe, such as a bus or a store.
- 9. 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. Provided 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.

IV. Additional Motel/Hotel Resources for Veterans

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.

Shelter guests who would be appropriate for protective action who are veterans should be connected to the SSVF program.

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 VA Eastern Colorado Healthcare System Community Resource and Referral Center (CRRC) Program Manager Phone: 303-294-5601 Fax: 720-723-7838 Email: <u>mary.mish@va.gov</u>

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V. **Protective Action Eligibility**: Client does <u>not</u> have COVID-19 but is at high risk for complications of COVID-19

Inclusion Criteria

Eligibility Criteria (Who to refer)

- Age >/= 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
- o 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: Partners, caregivers, children, and family members may be able to accompany a qualified individual into the Protective Action program if one person in their household is high risk. Family members must also follow the qualification criteria named above. *If the client who qualifies for 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
- 1. All other individuals and households should receive congregate shelter services and follow guidelines for social distancing, handwashing, wearing face coverings, etc.

VI. Referral Process to Protective Action

a. Protective action evaluations and intakes are paused until further notice as transitions take place to align program needs and available resources.

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- b. For referral information, please call (303) 293-2220, option 9. A voicemail system will be updated in both English & Spanish to inform the status of protective action referral availability.
- c. There is not a waiting list for protective action.
- d. The purpose of protective action was to prevent the spread of COVID-19 and minimize complications in our most medically vulnerable populations. The most effective intervention to protect against COVID-19 is vaccination. If your client has not been vaccinated, we strongly encourage you to support vaccine access and information to your client. Colorado Coalition for the Homeless, along with many other public health, community health, & hospital partners are offering vaccine access.