Shelter-Based Isolation & Quarantine Capacity for Symptomatic or Sick Individuals

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The January-February 2022 omicron COVID surge resulted in overwhelming numbers of infections and rapid transmission of COVID within shelters across the country. The surge overwhelmed most local homeless Isolation/Quarantine (I/Q) hotel systems, and many shelter programs nationally were forced to “fend for themselves” to create emergency isolation/quarantine spaces at their facilities.

As funding for COVID I/Q programs declines so does I&Q hotel capacity, and shelter providers will need develop capacity to shelter symptomatic persons on site. This includes planning for “surge” events where they might have to provide COVID-19 isolation and quarantine in place.

On-Site Care for Symptomatic Residents

- Please closely review the [California Department of Public Health Infection Control Guidance for Clients in Congregate Shelters, Including Shelters for People Experiencing Homelessness](#).
- If the client has severe symptoms, arrange for the client to receive immediate medical assessment and care as appropriate by calling 911:
  - Trouble breathing
  - Persistent pain or pressure in chest
  - Pale, gray, or blue-colored skin, lips or nail beds, depending on skin tone
  - New confusion or disorientation
- Require masking by staff, volunteer and residents during times of high levels of COVID transmission.
- Follow the CDC [cleaning and disinfection guidelines for community facilities](#), and cleaning facilities if someone is sick.
- Clients with symptoms of COVID-19 should be moved to a private area of the facility for isolation and be tested as soon as possible.
- If a resident or household infected COVID-19 is able to isolate/quarantine in their own private room, they may do so and have meals delivered, and use either a private bath, or a shared bath that is well-ventilated between uses.
- If infected clients cannot be housed separately, they may be isolated as a cohort in a large and well-ventilated on- or off-site space with a separate bathroom and a door that can be closed to other clients.
- Symptomatic clients who have not been diagnosed with COVID-19 should not be cohorted with clients with known SARS-CoV-2 infection.
- Symptomatic clients should wear a surgical mask, KN/N95 mask if available, or other well-fitted mask with multiple layers.
- Shared items used by infected/symptomatic clients should be cleaned thoroughly before use by another client.


On Site Isolation and Quarantine Rooms

Programs are also learning to develop their own ongoing capacity to provide isolation and/or quarantine rooms/quarters on site. Shelter-based I&Q rooms can:

- Enable newly-arrived residents to live temporarily in a separate cohort until it is clear they are not infectious;
- Provide special rooms where symptomatic individuals can quarantine away from the general population;
- Enable COVID-positive persons to safely isolate-in-place during their contagious isolation period.

Following are some basic guidelines in development of isolation/quarantine rooms in homeless shelter programs.

- Specify certain rooms or dorms to be used as I&Q rooms.
- Make every effort to draw in ample quantities of fresh air from windows. Use window fans to draw in additional fresh air.
- Isolation room airflow should bring clean air into an I/Q room with potentially infectious individuals and must exhaust “dirty air” outside the building -- and not into spaces shared by healthy individuals.
- This may mean using window fans to also force “dirty air” out of a room.
- Place HEPA Portable Air Cleaners in isolation rooms, and ensure that you can achieve at least 8 Air Exchanges per Hour (ACH):
  - 8 x length (feet) x width (feet) x height (feet) / 60 = minimum CFM for Portable Air Cleaner (HEPA)
- Check with a HVAC specialist to create additional ventilation to I&Q rooms, and to ensure “dirty” air is not flowing from the I&Q room to other habited spaces.

On Site Isolation and Quarantine Guidance and Recommendations during a COVID Surge:

Advanced Level: Read the Alameda County Health Care for the Homeless draft “Guidance and Recommendations for Providing Shelter Based Isolation and Quarantine for Individuals Experiencing Homelessness in Alameda County” for examples of on-site isolation and quarantine during a COVID surge.

This is a working document which attempts to bring together direction and guidance to support shelter providers who are working with Alameda County Health Care for the Homeless and Alameda County Public Health Department Disease Control Investigators in times when a COVID-19 surge overwhelms the capacity of our Isolation & Quarantine resources to provide isolation/quarantine for every actual, suspected or contact to cases of COVID-19 in our shelter and homeless care systems.