



Alameda County
Health Care Services Agency



Alameda County
Social Services
Agency

PROJECT ROOMKEY: ALAMEDA COUNTY OPERATION COMFORT & OPERATION SAFER GROUND Protecting the Health & Safety of Our Community

Hotel rooms provide a safe environment for isolation and recovery.

OPERATION COMFORT – COVID-19 INDIVIDUAL SAFETY UNITS CHECK LIST

Everyone in our community is working together to stop the spread of the COVID-19 infection. If you have COVID-19 symptoms, the best way to keep yourself –and others—healthy is to go into Individual Safety Units (ISU’s) at the County’s Operation Comfort.

The time that you will be at the ISU’s will ensure that you are safe, cared for, and that your community is protected. Your participation is for your well-being and to prevent the spread of COVID-19 infection to other people around you who could die from it.

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| <ul style="list-style-type: none"> <input type="checkbox"/> You will have your own room in a hotel <input type="checkbox"/> You can only stay in the hotel until you are no longer contagious <input type="checkbox"/> You will not have a key to your room (but can lock it from the inside) <input type="checkbox"/> You cannot have visitors <input type="checkbox"/> You will get three scheduled 20 minutes outdoor breaks per day to get fresh air, walk your pet, smoke, etc. <input type="checkbox"/> You can only smoke outside during breaks three times/day <input type="checkbox"/> You will have your own bathroom <input type="checkbox"/> You’ll get clean sheets <input type="checkbox"/> You will get three meals a day delivered to your room <input type="checkbox"/> You’ll have cable TV, phone, wifi, and a microwave <input type="checkbox"/> You can share a room with your partner, they MUST also referred <input type="checkbox"/> Staff will check in on you regularly to see if you are getting better or worse <input type="checkbox"/> On site security will ensure you are safe <input type="checkbox"/> You can bring a pet with you <input type="checkbox"/> If you need you can access nicotine patches or Medication Assisted Treatment. | <ul style="list-style-type: none"> <input type="checkbox"/> You will be given notice three days before your isolation period is over and transportation to discharge location. <input type="checkbox"/> The Rules of Operation Comfort: <ul style="list-style-type: none"> o Stay in your room and don’t allow anyone else in your room o Wear a mask at ALL times when outside your room o Practice Physical Distancing when out of the room o Shower and practice good hygiene o Inform staff immediately if your symptoms get worse. o No violence or threats of any kind o No theft o No public use of drugs or alcohol o No selling or sharing of drugs or alcohol o Limited storage; one 64-gallon bag of items permitted, you can utilize overflow storage on site. |
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When you arrive at Operation Comfort, you will be screened for weapons by security, complete a medical intake, review the Program rules of conduct, and sign a program agreement. All belongings will be placed in a bed bug oven.



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Either way, please acknowledge that you have been offered medical isolation at Operation Comfort. Providers may initial/sign for you with your verbal consent:

Initials:

_____ I understand that (program name:) _____ has offered me an isolation room as part of the Operation Comfort program.

_____ I have been fully informed of the Operation Comfort Program.

_____ Yes, I will participate in the Operation Comfort program.

_____ No, I have declined participation in the Operation Comfort program.

Participant Name: _____

Signature: _____

Date: _____

Agency Name: _____

Staff Name: _____

Date: _____