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**ACHCH Shelter Health Guidance for COVID-19 and Influenza:**

**July 26, 2021**

The following information is a general guide and is not intended to take the place of medical advice from a health care provider. Shelter staff are not health care providers and, ACHCH reminds all to carefully respect masking and physical distancing guidelines. Shelter staff should not place themselves at risk through close contact with people, especially those who may be symptomatic. The following guidance for homeless shelters is aligned with [Centers for Disease Control guidance](#).

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**1. Plan and be aware of key COVID-19 guidance and resources**

Shelter staff leads should coordinate closely with the Alameda County Health Care for the Homeless program and have a system to share information and updates from the program and County Health Officer to staff and guests.

- **ACHCH Homeless Providers Community Call** every Wednesday 10:30-11:30am. Please visit the [Shelter Health Guidance page](#) for more information.
- [Alameda County Health Care for the Homeless guidance and resource](#)
- [Shelter Providers COVID-19 response checklist](#)
- [Alameda County Public Health updates and guidance](#)

**2. Guidance and Education for Staff and Residents**

Shelter programs should:

- **Effectively screen all staff for symptoms or potential exposure before or when they arrive at work EVERY DAY.** Simply administering a temperature check is not a reliable screening. Examples of screening questions should at the least include:
  1. Within the last 10 days have you been diagnosed with COVID-19 or had a test confirming you have the virus?

2. Are any members of my household, or anyone else I have had close contact within the past 14 days, in isolation for COVID-19 or had a test confirming they have the virus?
3. Have you had any one or more of these symptoms today or within the past 24 hours, which is NEW OR NOT EXPLAINED by a reason other than possibly having COVID-19?
  - Fever, Chills, or Repeated Shaking/Shivering
  - Cough
  - Sore Throat
  - Sudden Loss of Taste or Smell
  - Feeling Unusually Weak or Fatigued
  - Shortness of Breath, Difficulty Breathing
  - Muscle pain
  - Headache
  - Runny or congested nose
  - Diarrhea
  - Nausea and vomiting

Any YES response to the above questions, and staff should not be permitted to come to work.

- **Remind staff “If you feel sick, DON’T COME TO WORK!”** *No one needs “heroes” who may spread infection to their co-workers and guests. “Sick” is purposefully defined at a very low threshold: anyone who feels unwell. This could include fever/sweats/chills, cough, shortness of breath, sore throat, body/muscle ache, fatigue, gastrointestinal symptoms, congestion/sneezing not caused by allergies. Any staff or volunteer who becomes sick at work should be sent home immediately.*
- Make every available effort to ensure that staff is vaccinated. Some programs and jurisdictions require that either staff is vaccinated or they provide proof of negative COVID test on a weekly basis.
- Make sure that flyers have credible educational information clearly visible and available to staff and guests. ACHCH recommends posting the following information: [Symptoms](#), [Wear a Mask](#), [Cover Your Cough](#), [Wash Your Hands](#), [Physical Distancing Meals](#), [Physical Distancing Sleeping](#)
- Assess staff for potential exposure risks. Redirect vulnerable (aging, chronic illness) staff from higher risk positions providing prolonged close contact.
- **Staff should practice and promote effective physical distancing, and avoid all close contact with symptomatic persons.** Have Protective Personal Equipment (PPE) on hand for any unusual situations involving close contact with symptomatic persons.
- **Shelter leadership should closely read, be familiarize and implement CAL OSHA COVID-19 Emergency Temporary Standards:** <https://www.dir.ca.gov/dosh/coronavirus/>
- Maintain program point persons in contact with the ACHCH program.

**PPE Supplies:**

Protective Personal Equipment includes: **Face shields, gowns, face masks, gloves, N95 face masks**

**3. Provide hygiene and prevention materials to staff and guests:**

Shelter staff should:

- Give all residents easy access to soap, water, and hand-drying resources.
- Have hand sanitizer available for general use. Ensure that handwashing is frequently done.
- Have facial tissue and waste baskets available.
- **Face masks are mandatory.** Please always wear a mask unless eating, drinking, or sleeping.
  - Change your mask if it gets saturated and dispose of it safely.
  - Wash hands before and after changing your mask to prevent spreading of germs.
  - Ventilation is important. Keep windows and doors ajar to create airflow as much as possible. Consult with ACHCH Shelter Health lead for ventilation information.
  - Maintain adequate supplies including PPE.
  - See 'Protect Yourself in Workplace and Home' below.

**Information on Face Masks and Respirators**

There are key differences between face masks and respirators:

<p><b>Disposable surgical face mask</b></p> <ul style="list-style-type: none"><li>• “surgical mask, disposable mask, medical mask”</li><li>• Looser fitting</li><li>• Keeps virus from getting OUT of a sick person (sneeze, coughing, talking) to protect OTHERS.</li><li>• Protects from splashes/drops coming from a sick person</li><li>• Also prevents hand-mouth-nose touching and droplet transmission.</li></ul>	<p><b>N95 or KN95 Respirator</b></p> <ul style="list-style-type: none"><li>• Health workers use when directly treating infected guests</li><li>• Useful for staff when forced to deal closely with a symptomatic person.</li><li>• Must be tightly fitted, filters air coming IN from aerosolized virus particles.</li><li>• Hard to breathe through if you are sick, young or old.</li><li>• Not recommended for general use during viral pandemic.</li></ul>
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**4. Screen guests for symptoms, risk and health care:**

Shelter staff should:

- Closely review and follow guidelines in [Shelter Providers COVID+ Resident Checklist](#).
- Provide symptom management checks 2x daily and record on this [log](#).
- Ask open ended questions (i.e. Are you feeling ok? Any new or unexplained symptoms? Have you had recent contact with anyone known to have COVID-19?).
- Taking temperatures is not a comprehensive way to screen for symptoms. Please use the log from above 2x daily with each resident and all staff.
- **Symptomatic Guests:** If a resident is symptomatic, or learns that they recently had contact with a confirmed COVID-19 case, place them in isolation, as best you can,

separated from the rest of the residents in your shelter (see 'Isolate and Provide care for Symptomatic Persons' below).

- i. Refer symptomatic or recent contact to Isolation Housing as soon as possible (see 'Refer to Isolation Housing' below).
  - ii. If a person has **severe symptoms** (shaking, high fevers, difficulty breathing, difficulty walking, inability to stay hydrated, unable to care for self in shelter/tent) **CALL 911**.
  - iii. Contact Kari Jennings-Parriott at (510) 472-4255 or email at [kari.jenningsparriott@acgov.org](mailto:kari.jenningsparriott@acgov.org) ASAP.
- **Testing:**
    - Refer to <https://covid-19.acgov.org/testing.page?#Community> for free community testing locations nearby.
    - Consider requesting regular on-site testing by ACHCH.
  - **Health Care:** Ensure that shelter guests have access to a [primary care provider](#). See People with chronic health issues continue to need ongoing health care even in time of pandemic.

## 5. Refer to Isolation Housing

If a person develops symptoms of COVID-19 including fever, cough or shortness of breath, or reveals that they are a recent contact of a person with a confirmed case of COVID-19, please refer them to countywide [Isolation Housing – Operation Comfort --](#) as soon as possible:

- **Operation Comfort Hotel Screening & Referral**  
Form: <https://forms.gle/CG9GQW4R8nxRFwbg8>
- If a person has severe symptoms (shaking, high fevers, difficulty breathing, difficulty walking, inability to stay hydrated, unable to care for self in shelter/tent) CALL 911.
- Your shelter program should have an Isolation Housing lead. Please have an isolation housing isolation and referral action plan. If your shelter or program is not connected to the referral process, write [covidhousing@acgov.org](mailto:covidhousing@acgov.org).
- Immediately contact the ACHCH program when you refer someone to Operation Comfort, if you have concerns or questions, or you believe someone with COVID symptoms, needs isolation and treatment, and cannot access Isolation Housing: 510-891-8950 (business hours), Kari Jennings-Parriott (510) 472-4255 or email [kari.jenningsparriott@acgov.org](mailto:kari.jenningsparriott@acgov.org); or contact ACPHD (925) 422-7595 outside of business hours.
- **Transportation:** People accessing Isolation housing are provided with transportation. **Do not transport symptomatic guests on your own, nor through rideshare or taxis.**

## 6. Practice physical distancing in the shelter setting:

All guests should follow current [County orders](#).

Shelter providers should continue to have lower numbers or decompressed shelter census at this time. Everyone, guests and staff should wear face masks at all times

**Examples of Social Distancing in Shelter Setting:**

- Practice frequent handwashing and sanitizing.
- Keep at least 6 feet of “social distancing” with other people, avoid handshakes, hugs, etc.
- Divide up sleeping spaces into smaller groups, with at least 6’ between each bed.
- Create room dividers to separate beds.
- Continue to keep shelter beds at the decompressed rate will advised otherwise. Shelters have reduced the amount of guests to enable them to expand the amount of space and support physical distancing.
- Get “grab and go” lunches and meals and stagger meals to enable people to eat at separate times and locations.

## 7. Isolate and provide care for symptomatic persons

- Shelter providers should make contingency plans for outbreak situations in which a shelter may need to convert to a Quarantine In Place environment. Consult with ACHCH shelter health lead Kari Jennings-Parriott, to discuss contingency plans for staffing, meals, supplies, etc.
- Symptomatic persons with no other isolation options, or whom are awaiting referral or transport to Isolation Housing, should be enabled to temporarily isolate, ideally in a separate, well-ventilated room, kept out of close contact (at least 6’) of others, arrange to receive “to go” bag lunches, water, tissue and face masks. They should be provided with medical care information and “home” isolation. [More information](#) available from Alameda County.
- **Identify isolation spaces for symptomatic persons:** Designate a space for people who may become symptomatic. If possible, designate a nearby separate bathroom just for symptomatic people. Develop a plan for cleaning the room at least daily.
  - Require the guest to wear a surgical mask.
  - Encourage the guest to lie down and rest. Most will want to do this.
  - Prevent dehydration. Encourage guest to drink plenty of water, clear soup, decaffeinated tea, juice. Bring food to the guest to avoid contact with other persons.
  - Provide guest with hand sanitizer, tissues and plastic bag or lined garbage bag to dispose of tissues.
  - Encourage guest to cough into their elbow area or cover their mouth with tissues or paper towels when they cough or sneeze.
  - Avoid housing the sick person in a room with people who have health conditions that increase their risk of complications from COVID-19, these include but not limited to HIV, asthma, diabetes and pregnancy.
  - Use sheets or curtains to create temporary barriers between beds.
  - Check in on guest several times a day.

## 8. Sanitation recommendations:

- Please refer closely to the Seattle King County [Seattle King County Sanitation and Hygiene Guide](#).

- Cleaning and Disinfecting Shelters and Programs
  - High touch areas likely to be contaminated should be cleaned and disinfected at least daily.
  - A 10% bleach solution (1/4 cup bleach to 1 gallon water) is adequate to kill COVID virus. After cleaning, let a bleach solution stand for 3-5 minutes and air dry. More detailed information [here](#).
  - Be sure to use a separate procedure for first cleaning a surface, then disinfecting it: Disinfection usually requires the product to remain on the surface for a certain period of time (e.g., letting it stand for 3 to 5 minutes). with an EPA-registered disinfectant to kill germs, *after* the surface has been cleaned with soap and water.
  - Personnel performing the cleaning and disinfecting should use disposable gloves.
  - Use damp cleaning methods. Dry dusting or sweeping can cause airborne virus droplets.
  - Change mop heads, rags, and similar items used for cleaning and disinfecting frequently.
  - Clean, disinfect, and dry equipment used for cleaning after each use.
  - Items such as dishes, linens, or eating utensil do not need to be cleaned separately, but it important to note these items should not be shared or used by others.

## 9. Protect Yourself in Workplace and Home

- **Personal Protective Equipment:** Depending on your role in the shelter, you will have different PPE needs
  - Janitor- gloves and surgical mask
  - Food server- gloves and surgical mask
  - Shelter Staff- surgical masks, face shield when working within 6' of a resident and also gloves when touching residents
- **How to use PPE**
  - Don before contact with guests, generally when you get to work
  - Use carefully – don't spread contamination
  - Do not touch your face
  - Avoid touching or adjusting other PPE
  - Remove gloves if they become torn; perform hand hygiene before donning new gloves
  - Limit surfaces and items touched
- **Wearing a Surgical Mask**
  - Clean your hands with soap/water or hand sanitizer
  - Make sure mask has no holes or tears
  - Determine the top from the bottom. Top has metal edge to mold to the shape of your nose
  - Determine front from back. The color side is usually the front, white side touches the face
  - Follow the instructions for the mask

- Hold mask by ear loops
- Place a loop around each ear
- Mold/pinch the metal edge to the shape of your nose
- Pull the bottom of the mask over your mouth and chin.
- **Disposing of surgical Mask**
  - Wash hands with soap and water or use hand sanitizer
  - Avoid touching front of the mask as it may be contaminated
  - Hold both the ear loops and gently lift and remove mask
  - Throw mask in the trash
  - Wash hands with soap and water or hand sanitizer

Staff should try to wear the same mask throughout their shift if it is not soiled.  
Please see: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/>
- **How do I dispose of PPE**
  - Remove and discard carefully, either at the doorway or immediately outside patient room; remove respirator outside room
  - Place in red biohazard bag if it has blood or bodily fluids.
  - Place in trash can otherwise
  - Immediately perform hand hygiene
- **Before Leaving Home**
  - Wash hands, arms to elbow and face
  - Put on clean clothes and immediately prior to leaving home
  - Avoid scarves and flowy clothing
  - Minimize the number of objects transported between home and work
  - Clean hard surfaces with disinfectant prior to leaving, ex. Phones, purses, lunch bags, etc...
- **At Work**
  - Maintain social distance as much as possible from staff and residents
  - Wear surgical mask when not eating
  - Wear gloves if touching a resident
  - Wash hands frequently for 20 seconds
  - Wash hands well prior to eating
  - Frequently disinfect phones, keyboards mouse, pens, badges, door handles and high touch areas
- **Going Home**
  - Wash hands, arms to elbow and face
  - Clean hard surfaces with disinfectant prior to leaving, ex. Phones, purses, lunch bags, etc...
  - If you can change clothes to wear home. If not change clothing immediately upon returning home.
  - Put work clothing in a bag or in the washer to be cleaned
  - Wash hands again when you arrive at home.

## 10. Vaccines

- Vaccines are the best way to protect staff and residents and stop the community spread of COVID-19.
- Make every available effort to ensure that staff is vaccinated. Some programs and jurisdictions require that either staff is vaccinated or they provide proof of negative COVID test on a weekly basis.
- Work to track vaccination status of residents – how many and who are vaccinated vs. how many/who are not vaccinated?
- Please visit [ACHCH Vaccine Page](#) for more details about
  - i. List of Alameda County vaccine sites
  - ii. ACHCH Community Care vaccine schedule
  - iii. Moderna, Pfizer and Jassen information packets.
  - iv. COVID-19 Vaccination Resources
  - v. Vaccine posters for shelters
- If you would like to set up a vaccine clinic at you site please email [kari.jenningsparriott@acgov.org](mailto:kari.jenningsparriott@acgov.org)

\* All Information gathered from

[Seattle King County Sanitation and Hygiene Guide](#)

[CDC Interim Guidance for Homeless Shelters](#)

[HUD Infectious Disease Toolkit for Shelters](#)

CDC <https://www.cdc.gov/coronavirus/2019-ncov/index.html>