



# COVID-19 Screening and Testing Protocol for Congregate Shelters and Outreach Programs

Last Updated: 4/30/2020

## Protocol Overview:

In order to maintain a safe environment for clients and staff, congregate shelter staff will screen clients staying at or entering the shelter for symptoms of coronavirus (COVID-19). Outreach staff will also screen clients they have engaged. Clients who have symptoms should be transported to a temporary isolation and quarantine (ISAQ) site by calling the **DHS COVID-19 Hotline (24 Hours / 7 days): 202-671-3076**. The purpose of this document is to provide instructions for staff on how to enact this protocol.

*Note: Clients should be encouraged to remain in the shelter / on the shelter premises or in their current location for unsheltered clients, to the maximum extent possible. Clients in shelter will retain shelter assignments and will not move from shelter to shelter during the COVID-19 pandemic to minimize contact with other people to the maximum extent possible.*

## 1. Who does this protocol apply to?

This protocol applies to:

- **All congregate emergency shelter facilities.** A congregate emergency shelter is a facility where a number of people reside in close proximity to one another. Multiple people sleep in the same room (often in bunk beds), bathroom facilities are shared, and meals are provided cafeteria-style.
- **Youth programs where self-isolation is not possible (included in the term “shelter” for the remainder of this document).** For example, youth programs where a youth is in a room with a roommate and is not able to self-isolate in a different room on the premises. *Note that isolation site capacity is limited, and providers should make an attempt to isolate clients on-site if a private room setting is available.*
- **Outreach teams.** Public and privately funded – serving adults and youth.

## 2. Who should be screened?

- Everyone currently in the shelter (staff should use the bed list as guidance).
- Everyone entering shelter (if they are new to the shelter or have left the premises and are returning). This includes staff and vendors in addition to clients.
- Everyone unsheltered. Individuals experiencing homelessness who are not in shelter; whether in multi-person encampments or in a location by him/herself.

## 3. Where should screening occur?

At Intake (for new clients):

Shelter staff should conduct screening of clients seeking to enter the shelter outdoors before the client



goes inside. The staff conducting the screening should follow federal Centers for Disease Control and Prevention (CDC) social distancing guidelines and try to remain six feet away from the client (known as “social distancing”) while doing the screening.

*Note: To the extent possible, clients lining up to enter shelters should also be encouraged to follow social distancing guidelines and remain approximately six feet apart from one another. Given that shelters have transitioned to 24 hours, there should not be the need for large numbers of shelter guests to line up at the same time.*

In Shelter (for existing clients):

Shelter staff should use discretion on how to set up a process for screening clients currently in the shelter. Shelter staff doing the screening and clients waiting to be screened should practice social distancing to the extent possible following CDC guidance. Options may include setting appointment times and using cafeteria space to conduct screenings at different tables.

For Outreach (upon initial engagement):

Outreach staff should conduct screening of clients as the initial engagement effort upon meeting the client. The outreach staff asking the screening questions should follow CDC social distancing guidelines and try to remain six feet away from the client (known as “social distancing”) while asking screening questions.

For Staff & Vendors (prior to entering the shelter):

All shelter staff, outreach staff, and vendors must be screened before entering the building/interacting with clients. Shelter / Outreach management shall determine the best location/process for this to occur.

#### 4. How often should screening occur?

For Shelter: All clients entering the shelter for the first time or after leaving the premises and returning should be screened before entering the shelter.

Screening of clients remaining on the premises should happen **daily**, if a client newly exhibits or expresses they have symptoms (e.g. fever, cough, headache, new loss of taste or smell, repeated shaking with chills, sore throat, shortness of breath, or muscle pain), OR if a provider receives notification that a client or staff at the site has tested positive for COVID-19.

For Outreach: Screening of clients who have previously been engaged should occur at each engagement with a quick check to determine any changes in their health OR if a client newly exhibits or expresses they have symptoms (e.g. fever, cough, headache, new loss of taste or smell, repeated shaking with chills, sore throat, shortness of breath, or muscle pain).

#### 5. What is the screening process?



The screening process involves determining if an individual has a fever and/or has other symptoms of COVID-19. **Please see the attached Daily Screening Questionnaire.** The questionnaire will determine whether a client is at risk of having COVID-19 and should receive further screening/testing at an ISAQ site. It will also determine whether staff or other visitors should be sent home or refused entry to the site.

## 6. What is the process for taking a temperature?

Temporal thermometers use an infrared scanner to measure the temperature of the temporal artery in the forehead. Temperature takers should keep as much distance from individual as they can, wash their hands with soap and water or use alcohol-based hand sanitizer (at least 60% alcohol) regularly, and use gloves.

To use thermometer:

1. Turn on the thermometer.
2. Gently sweep the thermometer across the client's forehead.
3. Remove the thermometer and read the number:
  - **Fever:** Any temperature 100.4 F or greater is considered a fever.
  - **No fever:** People with temperatures at or below 100.3 F.<sup>1</sup>
4. Clean the thermometer with an alcohol wipe (or isopropyl alcohol on a cotton swab) between each client. You can reuse the same wipe as long as it remains wet.

## 7. Who should be transported to an ISAQ site?

Clients who have ANY of the following symptoms in the past 24 hours should be transported to the ISAQ:

- A fever (over 100.4 F)
- A new or worsening cough
- Difficulty breathing
- Chills
- Sore throat
- Body aches or muscle aches
- A change in ability to smell things
- A change in ability to taste things

## 8. How should staff document the screening process and results?

Staff are encouraged to print and use the Daily Screening Tool worksheet (attached) to document who has been screened and their screening results. The information collected on this sheet is helpful to have if the client later tests positive and the shelter needs to conduct contact tracing.

Staff can also fill out the Daily Screening Tool worksheet online by using this [FORM](#).

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<sup>1</sup> If the temperature is close to the cutoff, 100.2 or 100.3, staff can take it again to confirm the number.



**9. What should shelter/outreach staff do after identifying a client who needs to be transported to an ISAQ site?**

For the client's safety and the safety of others, staff should not let clients who meet the screening criteria for referral to ISAQ enter or stay in shelter. Staff should arrange for the client to be transported to an ISAQ site for additional medical care and COVID-19 testing by taking the following actions:

1. Call the **DHS COVID-19 Hotline (24 Hours/7 Days): 202-671-3076** to arrange transportation to the ISAQ site.
2. Provide the client with the DHS Client Referral letter (attached) and walk through the information in the letter with the client. Discussing the letter with the client is essential so that the client knows what to expect.
3. Provide the client with a mask to wear and a safe space to isolate away from others while awaiting transport.
4. *Shelter staff only:* Hold that client's bed for three days in the event the client receives a negative test result and can return back to the shelter.

**10. What information must staff provide to the DHS COVID-19 Hotline to request transport to an ISAQ site?**

Staff should be prepared to share the following information:

- Caller's name, phone and email
- Client Name, Weight, Gender, Race/Ethnicity, Date of Birth, Contact Number (if available)
- Client's dorm and bed number
- Date of onset of symptoms
- Whether client has a fever
- Date of COVID test, if applicable
- Name of COVID-positive person the client came in contact with, if known
- Whether client smokes or has any language, mobility, dietary, or ADA needs
- Whether client has any known medical requirements
- Emergency contact name and number for client

Please use the attached spreadsheet to collect the required information prior to calling the hotline.

**11. What should staff do if the client is showing emergency signs?**

If the client develops emergency warning signs, staff should **call 911 *immediately***.

Emergency warning signs include:

- Severe difficulty breathing or shortness of breath
- Persistent pain or pressure in the chest



- New confusion or inability to arouse
- Bluish lips or face \*

*\*This list is not all inclusive. The client should consult a medical provider for any other symptoms that are severe or concerning.*

## 12. What happens if someone refuses to be screened?

If they are not showing symptoms, allow the person into shelter with additional guidance on proper hygiene and sanitation according to current [CDC protocols](#).

Anyone who demonstrates symptoms such as fever, cough, and shortness of breath should not be allowed to enter the shelter. In the absence of on-site medical care (i.e. Unity Health Care), staff should call 911.

## 13. What happens if someone is waiting for COVID-19 test results OR has tested positive for COVID-19?

Clients that have been tested for COVID-19 at a medical facility will be transported from the medical facility to the ISAQ site until negative status is confirmed or the client is medically cleared to return to the shelter.

In the event that a client presents at a shelter and states they have been tested and are waiting for results OR indicated that they have tested positive for COVID-19, shelter staff should contact the **DHS COVID-19 Hotline (24 Hours / 7 Days): 202-671-3076** to arrange transportation to a ISAQ site.

## 14. What happens if someone indicates they have been tested for COVID-19 and the result is negative or they have been medically cleared for release from an ISAQ site?

If a client indicates that they have been tested for COVID-19 and the test result was negative or they have been otherwise medically cleared to be released from an ISAQ site, staff should ask to see that client's paperwork confirming negative status or discharge letter from ISAQ.

If the client does not have paperwork, staff should check HMIS to verify a program entry listed under the Entry/Exits section of the client's record. The Program Entry will be listed as **DHS - ISO Program - ES - DHS Direct** with an Entry date listed. A date under the Exit column will indicate the client has been cleared to return to shelter. In some instances, DHS will be provided with the paperwork the client received. The paperwork will be uploaded under the Client Profile tab under File Attachments. *Note: paperwork may not be provided to DHS for all clients.*

## 15. What is the location of the ISAQ Sites?

In order to protect client safety and confidentiality, DHS is not sharing the locations of the ISAQ sites with the public. If you learn of a site location, please do not share the information with anyone.



**16. What other protective measures should providers take?**

Consistent Mayor's Order 2020-063, [\*Extensions of Public Emergency and Public Health Emergency and Measures to Protect Vulnerable Populations During the COVID-19 Public Health Emergency\*](#), issued April 15, 2020, we ask providers to take the following protective measures (if not already underway):

- Exclude all Visitors and Non-Essential Personnel from entry or access to the shelter;
- Require each person entering the shelter to wash hands with soap and water for at least twenty (20) seconds or disinfect their hands with an approved hand sanitizer;
- Cancel all group activities at the shelter, except for group activities required to address a medical need;
- Encourage employees and residents to practice social distancing, including not shaking hands or engaging in any other unnecessary physical contact;
- Provide adequate sanitizing products, including hand sanitizers or disinfecting wipes, at all entry and exit ways and throughout the shelter;
- Restrict all seating in communal dining areas and allow individuals to pick up 'grab and go' prepackaged meals. Appropriate social distancing practices must be followed in communal dining areas, such as staggering meal times or spacing individuals at least six (6) feet apart;
- Encourage and facilitate use of electronic communication platforms for videoconference or telephone visits with residents, consistent with public safety. If an in-person visit is required, the visit must take place in compliance with the shelter's policies;
- Implement regular disinfection procedures for cleaning high-touch surfaces

**17. Where can I turn if I have additional questions?**

For questions or additional information, please email [dhs.covid19@dc.gov](mailto:dhs.covid19@dc.gov) or visit <https://coronavirus.dc.gov>.

**Attachments:**

- DHS Referral Letter to ISAQ Site
- DHS Daily Health Screening Questionnaire
- Spreadsheet for collecting information for DHS COVID-19 Hotline



Daily Health Screening Questionnaire

Date of Health Screening: \_\_\_\_\_ Name of staff doing screening: \_\_\_\_\_

Shelter Name: \_\_\_\_\_

CLIENT INFORMATION

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of Birth: \_\_\_/\_\_\_/\_\_\_\_\_ Gender (circle one): Male Female Transgender

Race: \_\_\_\_\_ Ethnicity (circle one): Hispanic Non-Hispanic

Room/Dorm number: \_\_\_\_\_ Bed #: \_\_\_\_\_ Bunk (circle one): Upper Lower

Is this person a member of the staff? (circle one) Yes No

HEALTH SCREENING QUESTIONS

Temperature: \_\_\_\_\_ Note: Fever = a temperature of 100.4° F (38° C) or greater

Table with 3 columns: At any time during the past 24 hours have you, Check One (Yes/No), and 8 rows of health screening questions.

If they answer "No" to all of the Health Screening Questions above AND do not have a fever, no additional information needs to be collected. Allow the person to stay in the shelter.

Follow-up Questions for Clients with Symptoms that may be due to COVID-19

If they answer "Yes" to any of the Health Screening Questions OR have a fever, ask all of the questions below and follow the steps for isolating clients:

What is the date that you first experienced any of these symptoms or felt unwell: \_\_\_\_\_

Have you seen a doctor or gotten treatment for these symptoms in the past 14 days? (circle one) Yes No

If yes, did the doctor test you for COVID-19 and or give you any instructions to self-isolate or self-quarantine? (circle one) Yes No



**Are you experiencing any other symptoms? (circle one)** Yes      No

*If Yes:* Please describe other symptoms: \_\_\_\_\_

### Steps for Isolating Clients

All clients who *answer "Yes" to **any** of the health screening questions above **OR** have a fever* should be sent to the DHS Isolation and Quarantine (ISAQ) Site – please see Questions 9 & 10 for instructions. They should be provided with a mask if not wearing one, and transported to the isolation site and tested for COVID-19 or to the hospital via FEMS (as appropriate based on their symptoms).