

# Allegheny County Department of Human Services Helpful Resources

Communication Protocol for COVID-19 Cases in DHS-Contracted Congregate and Residential Settings (Applicable to facilities with 4+ residents)

This document was updated on June 1st, 2020 to:

- clarify the purpose of this policy's request that providers report symptomatic staff or clients to ACDHS and ACHD and;
- reiterate the public health importance of providers' adhering to this policy.

PACDHS and ACHD are coordinating their communication and response related to potential COVID-19 cases to promote expedient care for the symptomatic individual(s) and protect other possibly exposed residents. All personal health information shared with ACDHS and ACHD will be handled in accordance with interagency protocols and as permitted by HIPAA in furtherance of coordinated care.

If a client or staff person in a residential program develops symptoms that could indicate a COVID-19 infection (<a href="https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html">https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html</a>), please take the following steps.

## **Program Administrator Requirements**

- 1. In a single email to the following three individuals, the program administrator is to immediately notify the Allegheny County Department of Human Services (ACDHS) and the Allegheny County Health Department (ACHD) that an individual being served in the program is presumed or has tested positive for COVID-19:
  - LuAnn Brink, Allegheny County Health Department (ACHD), <a href="luann.brink@alleghenycounty.us">luann.brink@alleghenycounty.us</a>;
  - Brian Bell, DHS's Privacy Officer, <u>DHS-PrivacyOfficer@alleghenycounty.us</u>; and
  - Your DHS program office contact (see Relevant Contacts list below)

Please note that this notification and any subsequent related communications with the ACHD or ACDHS do not replace incident reporting requirements.

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- 2. In the body of the email, please include a brief description of the circumstances and identify your organization as a DHS-contracted provider of congregate or residential-based care.
- 3. Once this notification is received, you will be contacted by ACHD and/or ACDHS Privacy Officer (DHSPO) to discuss next steps.
- 4. Additional information regarding the program and/or the clients may be requested by the ACHD and/or the DHSPO, including:
  - Basic info: Name, age and risk factors (e.g., chronic health conditions like asthma, diabetes, heart condition) of any residents and staff persons who have tested positive or are showing symptoms
  - Symptoms and Testing Status: Date of onset of symptoms and, if applicable,
     COVID-19 testing status, COVID-19 testing date and COVID-19 testing result date
  - Exposure: Other residents and staff persons who may have been exposed to symptomatic individuals
  - Facility and Population: Number of current residents, physical plant design (e.g., single rooms, shared rooms, number of floors, number and type of bathrooms), physical distancing measures already in place, and capacity for further distancing or isolation measures
  - Supplies: Current and anticipated needs
  - Staffing: Current status and anticipated needs
- 5. The program administrator will consult with ACDHS and ACHD *prior* to seeking out facility wide testing, initiating offsite housing arrangements or implementing recommendations from professionals outside of the ACHD.
  - In the case of an alternative housing facility, the program administrator will also notify the jail that release or transfer of individuals is pending public health guidance from the ACHD.
- 6. T6. Following the initial notification to ACHD and ACDHS, providers must complete an incident report within the required time frames and based upon the requirements of the specific program office.
- 7. As outlined in detail in the residential guidance documents, if the client is not critically ill, they should stay in their room or, if no single room is available at the facility, they should stay in the facility's designated area for individuals who are symptomatic and awaiting a referral to offsite isolation. Most individuals who test positive for COVID-19 will never need to be hospitalized. Hospitalization is only necessary if the individual has difficulty breathing or otherwise appears critically ill. It is important to reduce unnecessary visits to hospital ERs to help reduce the spread of COVID-19.

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## **ACHD Screening Process**

- 1. Whenever the ACHD is contacted about a positive or potential case, the ACHD staff person will confirm whether the case is connected to a congregate/residential facility. If ACDHS was not contacted as part of the same communication, as outlined above, ACHD will immediately notify the DHSPO.
  - ACHD has access to the DHS Group Care Dashboard to verify whether the person's address or facility name corresponds to a DHS-contracted congregate or residential facility.
  - DHS will also perform a daily check of the NEDDS data to determine whether anyone in that system is a resident of a congregate setting. If a match is found, DHS will contact ACHD by following the same process outlined above for when notification comes into DHS from providers through the DHSPO.
  - This process will be followed regardless of whether the caller is a staff person, resident, or resident's family member, and even if the individual has already left the facility due to their COVID-19 status.
  - In the case of an alternative housing facility, Jenn Batterton (ACDHS) will notify the jail/courts as soon as this process is underway.
- 2. The ACHD team (Luann Brink, Lori Horwitz) will make recommendations about testing, isolation/quarantine considerations including the need for referrals to offsite isolation, and additional steps to contain/control the virus.
  - Although the ACHD will make a case by case determination based on the specific circumstances at each congregate facility and in consultation with the DHS, <u>CDC</u> <u>guidance</u> for investigating homeless shelters with COVID-19 cases indicates that it may be necessary to consider:
    - i. Limit movement in and out of the facility by some or all residents.
    - ii. Consider individual room or housing options for older adults or those with serious underlying medical conditions to decrease exposure potential.
    - iii. Encourage enhanced monitoring for illness.
    - iv. Provide enhanced support to staff.
    - v. Test all clients/staff or an identified cohort (based on symptoms or risk factors).
    - vi. Other alternatives.
- 3. If a symptomatic or COVID-19 positive resident has left the facility, temporarily or permanently, the program administrator will need to assist the ACHD with contact tracing, i.e. identifying the individual's new address and contact information, as well as any other locations/service providers the individual is likely to have been. In the case of a staff person who is symptomatic or COVID-19 positive, it will be important to determine whether that person has worked at any other facilities over the past two weeks.

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## **ACDHS Privacy Officer Role**

- 1. The DHSPO will coordinate with a team at ACHD and ACDHS.
- 2. If the DHSPO is notified about a potential case through a communication that does not include the ACHD and/or the DHS program office, he will immediately notify these individuals to initiate the information-sharing process outlined above.
- 3. The DHS team (DHSPO, program office contact, Amy McCarty, Jenn Batterton) and the ACHD team will discuss ACHD's recommendations, and the DHS team will document and communicate the guidance to the program administrator.

## **Other DHS Staff Responsibility**

If the program administrator does not notify the DHSPO, those persons with knowledge of the exposure must ensure that the DHSPO is immediately notified. If DHS learns about a case at a congregate facility from someone other than the facility's program administrator, the DHSPO will contact the program administrator and verify the report, and the process described above will ensue.

#### **Relevant Contacts**

ACHD COVID-19 hotline: (412) 687-2243

#### **ACHD Team:**

Lori Horwitz (lori.horwitz@alleghenycounty.us)
Luann Brink (luann.brink@alleghenycounty.us)

#### **ACDHS Team:**

DHS Privacy Officer (<u>DHS-PrivacyOfficer@alleghenycounty.us</u>)
Amy McCarty (<u>amy.mccarty2@alleghenycounty.us</u>)
Jenn Batterton (<u>jennnifer.batterton@alleghenycounty.us</u>)

### **Program Office Contacts**

Drug & Alcohol: <u>Maisha.Howze@alleghenycounty.us</u> Mental Health: <u>Jewel.Denne@alleghenycounty.us</u>

Homelessness/Housing: <a href="mailto:Cynthia.Shields@alleghenycounty.us">Cynthia.Shields@alleghenycounty.us</a>

 $Children, Youth, and Families: \underline{Rebecca.Palatino@AlleghenyCounty.US}$ 

Aging: Kimberly.Hall@AlleghenyCounty.US

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