



## Allegheny County Department of Human Services Helpful Resources

### Admission guidance for behavioral health residentially based care/services, youth congregate care, emergency shelters and other housing providers

Programs should continue accepting new client referrals and admitting new clients. It is important for clients to have access to medically appropriate, necessary care and /or to find shelter and homes even during this public health emergency.

- 1) Clients should not be refused admission solely based on their COVID-19 status or health conditions that place them at greater risk with COVID-19. Programs are expected to isolate clients who are symptomatic and/or have tested positive for COVID-19 onsite whenever possible and immediately contact health department (see 3(f)). Licensed providers should continue to adhere to all licensing regulations. When there are no available onsite options for isolation, providers should immediately refer the client to be considered for offsite isolation housing using the Hotel Referral Form (adults only) and include a plan to support the individual while in the quarantine space. For clients who need behavioral health support beyond what can be coordinated or provided by the referring provider, the Office of Behavioral Health should be contacted to request a case conference to coordinate appropriate supports for the individual being referred (email [DHS-COVID19Planning@alleghenycounty.us](mailto:DHS-COVID19Planning@alleghenycounty.us) and indicate OBH case conference in subject line). If the client needs additional support with activities of daily living, the referring provider should contact their program office for coordination (email [DHS-COVID19Planning@alleghenycounty.us](mailto:DHS-COVID19Planning@alleghenycounty.us) and indicate program office and case conference in subject line).
- 2) Programs may request that referring facilities provide information about any COVID-19 screening completed with the client or new COVID-19 related symptoms the client has reported. Even if information is provided, all clients should be screened for COVID-19 symptoms and exposure. The screening provides valuable information for how to manage the admission based on the presence or absence of symptoms or a COVID-19 diagnosis. Staff who are checking client temperatures should use a system that creates a physical barrier between the client and the screener whenever possible.
  - a. Determine if the client has a fever, by taking their temperature using a thermometer, or asking “Have you felt like you had a fever in the past day?”

- b. Ask the client “Do you have a new or worsening cough today?”
- c. Ask the client if they have been exposed to anyone in the past 14 days who has reported symptoms consistent with COVID-19 or been tested for COVID-19.

If the client has a fever OR a new/worsening cough:

- a. Provide a facemask for the client to wear over their nose and mouth if facemasks are available and if the client can tolerate it. If facemasks are not available, advise the client on cough etiquette and provide tissues.
- b. Notify program administrator and as available, appropriate onsite healthcare providers
- c. Direct them to an isolation room if available, or an available space in an area designated for symptomatic persons
- d. Programs are expected to isolate onsite whenever possible. If your facility does not have an area for individuals with COVID-19-like symptoms, provider should complete the Hotel Referral Form to determine eligibility for offsite isolation rooms.
- e. Let the client know:
  - If their symptoms worsen, they should notify staff immediately
  - Not to leave their room/designated isolation area except to use the restroom
  - If they leave their room/designated isolation area, they must wear a mask. If the client refuses or cannot tolerate wearing a mask, the program must to the fullest extent possible mitigate any further contamination of the environment.
- f. Identify employees who were in close contact (within 6 feet of the ill individual, for about 10 minutes) with someone who is a positive/probable case—between the time when the ill individual developed symptoms and 48 hours prior to that time. Employers are required to promptly notify employees who were close contacts of any known exposure to COVID-19 at the workplace premises, *without* disclosing personally identifiable information of the sick individual, consistent with confidentiality laws to protect the individual’s privacy.
  1. If the employee remains asymptomatic, the provider has two options.
    - a. Per the Mitigation and Enforcement Order, employees identified as a close contact of a positive/probable case may not continue to work at an in-person business and must quarantine in accordance with the direction of the Allegheny County Health Department.
    - b. In addition, if an employee who has had close contact with a positive/probable case becomes sick during the workday or tests positive for Covid-19, that person may no longer conduct in-person operations, even if asymptomatic, and must isolate in accordance with the direction of the Allegheny County Health Department. Others at the workplace who have had close contact with that employee would be considered exposed and the provider should notify them of their potential exposure.

2. Ensure the workplace has designated an employee(s) to identify and notify close contacts of positive or probable cases in a timely manner - while maintaining confidentiality of sick individuals - to implement the above-listed requirements.

Use standard protocols for medical emergencies.

- 3) Providers should designate a safe isolation space with a door that closes (such as a conference room or office) which can be used in cases when an individual shows symptoms upon screening, does not have a private room onsite to isolate in, and is awaiting an offsite isolation plan.
- 4) Given the limitations in testing, programs cannot reasonably require a COVID-19 test as a condition of admission, but if any new symptoms (within past 14 days) are present, the client should wear a mask for a period of fourteen days, and staff should follow protocol outlined in the [Intake and Isolation Flow Chart](#) to determine placement.
- 4) Individuals returning from psychiatric or medical hospital stays:
  - a. Individuals who return from the hospital and who are not showing symptoms of COVID-19 should be readmitted by the provider and isolated as necessary in accordance with this guidance.
  - b. Individuals who are discharged from the hospital after an admission for COVID-19 but have not yet been medically cleared to discontinue isolation should be treated with the same precautions as someone who tests positive but is never hospitalized.
- 5) Individuals returning from temporary stays at an isolation/quarantine hotel who have been medically cleared to discontinue isolation should be re-admitted by the provider whenever possible.
- 6) If an individual develops emergency warning signs of COVID-19 or any other life-threatening symptoms, call 911 and get immediate medical attention. Examples of emergency warning signs of COVID-19 include trouble breathing, persistent pain or pressure in the chest, new confusion or inability to arouse, or bluish lips/face.