

Columbus/Franklin County COVID-19 Homeless Response Network (HRN)

Screening at the Front Door

September 8th 2020



www.csb.org



Webinar Overview

Today's Topic: Screening for COVID-19 symptoms at the Front Door

Questions:

- All phones are muted – please “raise hand” to ask a question or share a comment
- Use the Question pane in control panel to submit question



Webinar will be recorded and posted to

<https://www.csb.org/providers/COVID-19-provider-guidance>



Agenda

- COVID-19 Prevention Plan
- Screening and the What Now's
- Additional concerns that may come up at screening

COVID-19 Prevention Plan

- **All individuals who are homeless should be screened when calling the hotline to access shelter and daily while in shelter/congregate transitional housing/drop-in center, or at each contact if unsheltered.**

KEEP YOURSELF SAFE. KEEP OTHERS SAFE.
Stay 6 feet away. Ask 7 questions.

Check temperatures of all staff and clients at the door.

A healthy temp is below 100.4 degrees.

Use the screening tool to screen clients for COVID-19.

It's fast and easy.

7 simple questions

You can screen people from 6 feet away.

Keep your distance to keep yourself safe

It's important.

It's the only way to slow the spread of COVID-19



Facilities Assessments



Daily [Non-Medical Screening](#) (by Shelter, Transitional Housing and Outreach)



[Screening Questions for Medical Staff](#)
(completed by Medical Partner)

Randomize Testing



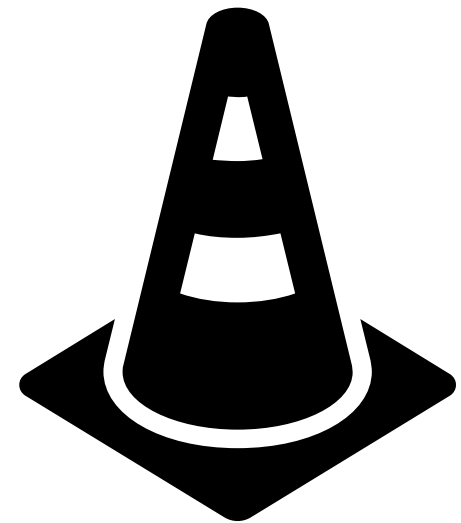
Tested due to exposure to COVID-19 and/or are experiencing symptoms.



Tested for another reason (ie: randomized workplace testing) AND no recent exposure to a person with COVID-19 and not experiencing symptoms

Designated Screening Area

- Screening staff should wear a facemask or cloth face covering (for source control) but do not need to wear PPE if they are separated from patients by a physical barrier such as a glass or plastic window. Screening staff should make these interactions as brief as possible by limiting the interaction to screening questions only.
- If a staff member must be within 6 feet of a patient, they should use appropriate PPE, including an N95 or higher-level respirator (or facemask if a respirator is not available), gloves, and, eye protection. A gown could be considered if extensive contact with the patients is anticipated. Cloth face coverings are not considered PPE and should not be worn by HCP when PPE is indicated.



What counts as Close Contact?

- You were within 6 feet of someone who has COVID-19 for a total of 15 minutes or more
- You provided care at home to someone who is sick with COVID-19
- You had direct physical contact with the person (hugged or kissed them)
- You shared eating or drinking utensils
- They sneezed, coughed, or somehow got respiratory droplets on you



**Q1-Q6, IF YES
to ANY: Client
CANNOT stay
in emergency
shelter or
transitional
housing until
further
screened by a
medical
provider**

Provide patient with a **cloth face covering or facemask** (if not already wearing one) and offer an explanation on proper placement of mask, and encourage them to leave it on while they are in the facility

Direct patient to remain 6 feet away from other patients and staff not wearing appropriate PPE. Maintain this separation by:

- Designating a part of the waiting area (taking into account layout and size of waiting area) that is separate from the other patients by at least 6 feet
OR
- Designating a separate waiting area in another room for symptomatic patients, if layout permits
OR
- Allowing symptomatic patients to wait in a personal vehicle or outside the facility until their treatment time, if medically stable

Notify direct patient care staff of the presence of a symptomatic patient

Preparing the Client for What Happens Next

- Two kinds of tests are available for COVID-19: viral tests and antibody tests.
- A [viral test](#) tells you if you have a current infection.
- An [antibody test](#) might tell you if you had a past infection.
- https://youtu.be/5hu7_xlsCRg



	MOLECULAR TEST	ANTIGEN TEST	ANTIBODY TEST
Also known as...	Diagnostic test, viral test, molecular test, nucleic acid amplification test (NAAT), RT-PCR test, LAMP test	Rapid diagnostic test (Some molecular tests are also rapid tests.)	Serological test, serology, blood test, serology test
How the sample is taken...	Nasal or throat swab (most tests) Saliva (a few tests)	Nasal or throat swab	Finger stick or blood draw
How long it takes to get results...	Same day (some locations) or up to a week	One hour or less	Same day (many locations) or 1-3 days
Is another test needed...	This test is typically highly accurate and usually does not need to be repeated.	Positive results are usually highly accurate but negative results may need to be confirmed with a molecular test.	Sometimes a second antibody test is needed for accurate results.
What it shows...	Diagnoses active coronavirus infection	Diagnoses active coronavirus infection	Shows if you've been infected by coronavirus in the past
What it can't do...	Show if you ever had COVID-19 or were infected with the coronavirus in the past	Definitively rule out active coronavirus infection. Antigen tests are more likely to miss an active coronavirus infection compared to molecular tests. Your health care provider may order a molecular test if your antigen test shows a negative result but you have symptoms of COVID-19	Diagnose active coronavirus infection at the time of the test or show that you do not have COVID-19

Coronavirus Testing Basics

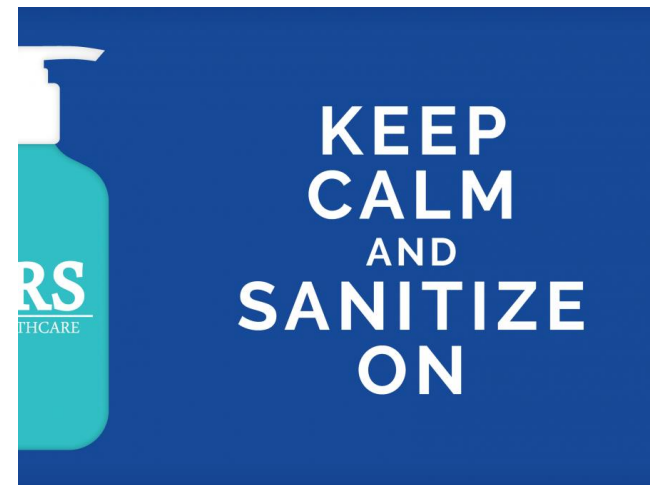


Definitions of:

- **Cloth face covering:** Textile (cloth) covers that are intended to keep the person wearing one from spreading respiratory secretions when talking, sneezing, or coughing. **They are not PPE and it is uncertain whether cloth face coverings protect the wearer.** Guidance on design, use, and maintenance of cloth face coverings is [available](#).
- **Facemask:** Facemasks are PPE and are often referred to as surgical masks or procedure masks. Use facemasks according to product labeling and local, state, and federal requirements. FDA-cleared surgical masks are designed to protect against splashes and sprays and are prioritized for use when such exposures are anticipated, including surgical procedures. Facemasks that are not regulated by FDA, such as some procedure masks, which are typically used for isolation purposes, may not provide protection against splashes and sprays.

STOP! And Sanitize

- Immediately after departure of the symptomatic patient from waiting area, disinfect surfaces that were within 6 feet of the symptomatic patient
 - Items that cannot be disinfected, such as magazines and other paper materials, should remain with the patient or be discarded
 - This is in addition to the regular (frequent) baseline cleaning and disinfection process that should be occurring for the entire waiting area

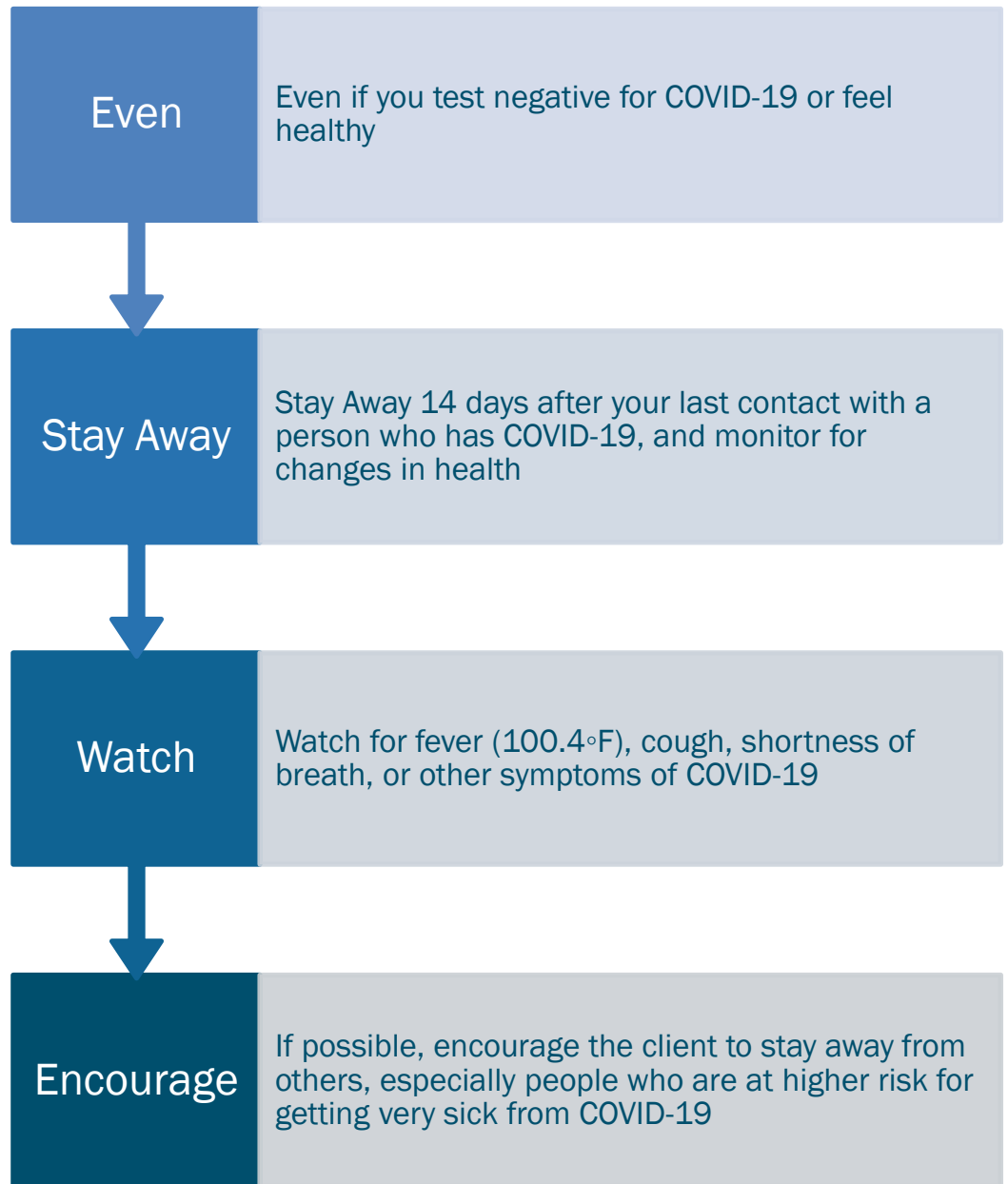


For Those Recovered from COVID-19

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- At this time, we do not know if someone can be re-infected with COVID-19. Data to date show that a person who has had and recovered from COVID-19 may have low levels of virus in their bodies for up to 3 months after diagnosis. This means that if the person who has recovered from COVID-19 is retested within 3 months of initial infection, they may continue to have a positive test result, even though they are not spreading COVID-19.
- There are no confirmed reports to date of a person being reinfected with COVID-19 within 3 months of initial infection. However, additional research is ongoing. Therefore, if a person who has recovered from COVID-19 has new symptoms of COVID-19, the person may need an evaluation for reinfection, especially if the person has had close contact with someone infected with COVID-19. The person should isolate and contact a healthcare provider to be evaluated for other causes of their symptoms, and possibly retested.

Great
News, the
test was
Negative,
now what?



I think or
know I had
COVID-19,
and I had
symptoms,
when can I
be around
others?

- 10 days since symptoms first appeared **and**
- 24 hours with no fever without the use of fever-reducing medications **and**
- Other symptoms of COVID-19 are improving*

**Loss of taste and smell may persist for weeks or months after recovery and need not delay the end of isolation*

COVID-19 ASSOCIATED HOSPITALIZATION RELATED TO UNDERLYING MEDICAL CONDITIONS

FACTORS THAT INCREASE COMMUNITY SPREAD AND INDIVIDUAL RISK



CROWDED
SITUATIONS



CLOSE / PHYSICAL
CONTACT



ENCLOSED SPACE



DURATION
OF EXPOSURE

RISK FOR HOSPITALIZATION IF YOU HAVE ANY OF THESE CONDITIONS AND
GET COVID-19 COMPARED TO PEOPLE WITHOUT THE CONDITION(S).



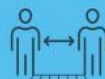
*Conditions include asthma, obesity, diabetes, chronic kidney disease, severe obesity, coronary artery disease, history of stroke and COPD.

Data has shown that racial and ethnic minority groups with the referenced conditions are at even higher risk for severe COVID-19 illness. Race and ethnicity are risk markers for other underlying conditions that impact health — including socioeconomic status, access to health care, and increased exposure to the virus due to occupation (e.g., frontline, essential, and critical infrastructure workers).

ACTIONS TO REDUCE RISK OF COVID-19



WEARING A MASK



SOCIAL DISTANCING
(6 FT GOAL)



HAND HYGIENE



CLEANING AND
DISINFECTION



ALTHOUGH RISK GENERALLY INCREASES WITH AGE, ALL INDIVIDUALS
SHOULD ROUTINELY TAKE ACTIONS TO REDUCE RISK OF INFECTION
AND AVOID ACTIVITIES THAT INCREASE COMMUNITY SPREAD.

cdc.gov/coronavirus

Source: Ko JY, Danielson ML, Town M et al. 2020.
CS319360-A 08/08/2020



What about My Pets?

- A small number of pets worldwide, including cats and dogs, have been reported to be infected with the virus that causes COVID-19, mostly after close contact with people with COVID-19.
- Based on the limited information available to date, the risk of animals spreading COVID-19 to people is considered to be low.
- It appears that the virus that causes COVID-19 can spread from people to animals in some situations.
- Treat pets as you would other human family members – do not let pets interact with people outside the household.
- If a person inside the household becomes sick, isolate that person from everyone else, including pets.
- This is a rapidly evolving situation and information will be updated as it becomes available.

Staying Healthy on the Frontline

Take

Take breaks from watching, reading, or listening to news stories, including social media. Hearing about the pandemic repeatedly can be upsetting.

Take

Take care of your body.

- Take deep breaths, stretch, or meditate.
- Try to eat healthy, well-balanced meals.
- Exercise regularly, get plenty of sleep.
- Avoid alcohol and drug.

Make

Make time to unwind. Try to do some activities you enjoy.

Connect

Connect with others. Talk with people you trust about your concerns and how you are feeling.

For those who Are Pregnant, Breastfeeding, or Caring for Young Children

- Do not skip your prenatal care appointments.
- Limit your interactions with other people as much as possible.
- [Take precautions](#) to prevent getting COVID-19 when you do interact with others.
- Make sure that you have at least a 30-day supply of your medicines.
- Talk to your healthcare provider about how to stay healthy and take care of yourself during the COVID-19 pandemic.
- If you don't have a healthcare provider, contact your nearest [community health center](#) or [health department](#).
- Call your healthcare provider if you have any questions related to your health.
- Seek care immediately if you have a medical emergency.
- You may feel increased stress during this pandemic. Fear and anxiety can be overwhelming and cause strong emotions. Learn about [stress and coping](#).

Supporting People with Developmental and Behavioral Disorders

- Don't stop any medications or change any treatment plans without talking to the client's provider.
- Talk to your healthcare provider, insurer, and pharmacist about creating an emergency supply of prescription medications. Make sure that you have at least 30 days of prescription and over-the-counter medications and [supplies](#) on hand in case you need to stay home for a long time. Ask your healthcare provider if it is possible to obtain a 90-day supply of your prescription medications.
- Make or update [care plans or an emergency notebook](#). These should include important information about a person's medical conditions, how to manage those conditions, how to contact healthcare providers and therapists, allergies, information on medications (names, dosages, and administration instructions), preferences (food and other), and daily routines and activities. This may help the client receive consistent care if other Direct Service Providers or family members are unavailable.

QUESTIONS

CSB COVID-19 Information Repository:

<https://www.csb.org/providers/COVID-19-provider-guidance>

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Community Shelter Board



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communityshelterboard