



Isolation & Quarantine Recovery Locations



We are implementing protocols and increasing capacity.

1 Community

Mitigation to slow the spread & keep people healthy

Integrated Health Care System

Shelters & Day Centers

Broader Community w/o a place to I/Q/CRC safely

Emergency Response System

Other Institutions

PHSKC Guidance

Hygiene Supply

Technical Assistance

De-Intensify

New Shelters

3 Call Center

to provide information or guidance if symptoms present



4 Keep in or get to the right setting

Support continued community mitigation

Assign, Transport, & Sustain at I/Q

Assign, Transport, & Sustain at AC/RC

Recover In Place

I/Q in Place

Existing I/Q

Motel I/Q

Aurora I/Q

Top Hat I/Q

Interbay AC/RC

Eastgate AC/RC

5 Additional Support for in-place care

2 ID, Site, Operationalize I/Q facilities

2 ID, Site, Operationalize ACRC facilities

Flow Chart to Access Individual and Facility Supports

Call Center Responder

Determines Housing and Priority Status of Individual

Communicable Disease and Epidemiology (CD/EPI)

Case Investigation and Deploys Individual and Facility Supports

Individual Support from I&Q Team
for COVID + and Pending Test Results

Initial Contact with individual, Healthcare Provider, and Homeless Service / Operator

Apply Public Health Seattle King County
Prioritization Policy

Unit Placement
as beds are available in I/Q Facilities

Facility Support from STRIKE and MAT Teams
Follows the lead of CD/Epi and provides on site support for COVID+ cases and clusters

Homeless Strike Team
works with provider to complete case investigation, clinical assessment, facility assessment, and guidance review

MAT
On Site Testing

COVID Response Locations: Isolation and Quarantine Workflow

- Possible COVID cases identified by **Call Center** and/or **Disease Investigator**
- All COVID+ cases sent directly to **I&Q Team** to begin transportation. **CD-EPI** assigned to COVID cases awaiting test results
- **I&Q team** and **CD-EP** follow PHSKC prioritization policy for placement

Prioritization of COVID-19 Cases for Isolation & Quarantine

Assignment to COVID I&Q Response Location

- **I&Q Team** is alerted via email that an individual needs a I&Q bed
- **I&Q Team** receive service need decision from BHRD
- If bed available, **I&Q Team** assigns guest
- When more referrals than availability, **CD-EPI** and **I&Q Team** apply PHSKC prioritization policy at 12pm daily

- **I&Q Team** arrange for all transportation to & from locations
- Onsite **Medical/Behavioral Health Staff** conduct daily wellness checks; **CD-EPI** part of support team of guests while test results are pending
- **I&Q Team** works with **Onsite Managers** for meeting Basic Needs (food, comfort, etc.)
- **Onsite Managers** support facilities, food and hygiene drop off + quality assurance
- **Security** onsite 24/7

Guest Management at I&Q Response Locations

I&Q Intake

1. A person/healthcare provider contacts Public Health Call Center or Disease Investigator about COVID pending or positive case
2. Individual is identified as needing to Isolate or Quarantine at a County Recovery location
3. If resources are available, the I&Q Team coordinates transporting via medical transport or Metro contract (as of 3.28)
4. I&Q Team coordinates with Onsite Manager to have unit ready

Services

1. 24/7 Onsite Nurse and Behavioral Health specialists (staffed at all locations) will conduct symptom monitoring and support additional healthcare needs of guests
2. 24/7 onsite security
3. Financial incentives, onsite buprenorphine inductions, methadone continuation to promote isolation adherence
4. I&Q Team speaks directly with guest, Disease Investigator/CD-EPI as needed, and Onsite Staff. Coordinates basic needs, food, transportation via medical transport or bus/taxi when guest is cleared for discharge Onsite Staff coordinate directly with I&Q Team.
5. Onsite Staff coordinate directly with I&Q Team. Onsite Staff support the physical location and opening doors/placing things in rooms, but does not have face to face contact with guest

Exit

1. Healthcare providers, Public Health staff and/or Onsite Healthcare staff coordinate for when guests need to leave the I&Q Location for either Symptomatic or Asymptomatic reasons
2. Onsite BH provider supports rehousing
3. Public Health and I&Q Team coordinate transportation and speak directly with guest about what to expect/when things are ready
4. I&Q Team coordinate with Onsite Staff for room cleaning (hazmat cleaning if COVID + guest) and turn over of unit
5. Guest goes to a medical professional facility if symptomatic or back to their community if cleared by Public Health and asymptomatic.

COVID+ Guest Coordination Flow

