

City of Dubuque Quarantine/Isolation Shelter Plan for COVID-19

Primary Emergency Support Staff for Housing & Human Services

The following people are coordinating the emergency support function for Housing and Human Services (HHS) during COVID-19 under the general direction of the Dubuque County Public Health Incident Management Team.

- Housing and Community Development Director Alexis Steger
- Human Rights Director Kelly Larson
- Neighborhood Development Specialist Jerelyn O'Connor
- Disaster Program Manager Jolene Carpenter with American Red Cross Northeast Iowa Region
- Vicky Gassman, Visiting Nurses Association
- Nancy Van Milligen, President and CEO, Community Foundation of Greater Dubuque,
- Danielle Peterson, President and CEO, United Way of Dubuque Area Tri-States

Quarantine/Isolation Shelter Purpose and General Parameters

The primary purpose of quarantine/isolation shelter sites is to support individuals who:

- are positive or presumptively positive for COVID-19, and
- have mild symptoms and are not in need of hospitalization, and
- are homeless and unable to self-isolate in a shelter *or* live in cramped quarters in a home or apartment with people who are at heightened risk for a serious infection.

Positive or Presumptively Positive Determination

A positive determination is based on a COVID-19 test result. A “presumptively positive” determination will be made when an individual exhibits the following symptoms:

- A fever of at least 100.4 F or 37.8 C
- A persistent, dry cough
- Difficulty breathing

Self-quarantine will be recommended for anyone who is presumptively positive, whether or not they are tested. If they are tested and confirmed positive, the Visiting Nurses Association (VNA) will conduct a contact analysis and additional steps may be recommended. Finally, individuals without symptoms who are placed in quarantine based on possible exposure may be referred to a shelter at the discretion of the VNA based on individual circumstances.

Ability to Safely Self-Isolate Determination for Individuals in Homeless Shelters

Relocation to a quarantine shelter for an individual who is positive or presumptively positive and living in a homeless shelter will be at the direction of the non-profit organization operating the shelter in collaboration with the Director of Housing and Community Development. In the

event that the individual tests positive for COVID-19 the VNA will pursue contact tracing that may result in placing all current residents within the homeless shelter under fourteen-day isolation at the shelter. In the event that there are additional positive cases in the shelter, the VNA may determine to treat the shelter as having an “outbreak” and implement plans similar to those utilized at congregate living facilities.

Ability to Safely Self-Isolate Determination for Individuals in Houses or Apartments

Positive or presumptively positive individuals in their own homes, apartments, or single room occupancy units will be provided information on how to safely self-isolate and offered the opportunity to relocate to the quarantine shelter if: 1) they have limited ability to self-isolate at home, and 2) are living with someone who is at increased risk of severe complications and are not able to self-isolate at home. In the event that the individual tests positive for COVID-19 the VNA will pursue contact tracing that may result in placing all residents within the home or apartment under fourteen-day isolation at home.

Generally, relocation to a quarantine shelter for an individual living in their own home, apartment, or single room occupancy unit will be at the choice of that individual. Forced relocation through quarantine orders will be issued in limited circumstances and on a case by case basis by the County Attorney as recommended by the County Board of Health or the Iowa Department of Public Health.

Estimated Need for Quarantine/Isolation Shelters

The number of people who may need quarantine/isolation in a facility is unknown. The primary concern is for people who are living in shared spaces such as homeless shelters, single room occupancy quarters with shared common areas, and families who are doubled up.

- Homeless Shelters: There are approximately 68 people living in the following shelters in Dubuque: the Dubuque Rescue Mission, Teresa Shelter, Maria House, Mary’s Inn, YMCA, Hope House. Additional risk factors, such as underlying health conditions, are unknown but presumed likely in a population experiencing homelessness.
- Single Room Occupancy: Currently there are a total of 14 people residing at Salvia House; 4 at Manasseh House; 64 at Davis Place; and 34 at ZTM Sober Living. Salvia and Manasseh Houses have residents primarily in their fifties and sixties, with several smokers and people with underlying medical conditions such as pregnancy, Multiple Sclerosis, and diabetes. Salvia and Manasseh house have some capacity to quarantine/isolate onsite. ZTM Sober Living has one open apartment they are keeping open to use for quarantine.
- Doubled up families and heightened risk: The Pacific Islander Health Project reports that Crescent's Pacific Islander medical population has grown from 165 in 2017 to 226 in 2018 to 263 in 2019. These are unique patients, not visits. The number of Pacific Islander patients with diabetes and with hypertension has grown significantly each year as well. The percentage of the Pacific Island patients with each of these chronic diseases has remained fairly constant, at approximately 35% for diabetes and 27% for

hypertension. Many families live intergenerationally, whether for financial or cultural reasons or a combination. The same is true for many of our Guatemalan families. The Dubuque Community School District is aware of 206 families who are homeless or doubled up. This number is likely much lower than the actual number of doubled up families in Dubuque.

Preventative Actions that Have Been Taken To Date

Homeless Shelters

The Housing and Community Development Department assessed homeless shelters within the City of Dubuque in mid-March and provided Centers for Disease Control guidance to assist them in identifying potential COVID infections in their environments as quickly as possible. Shelters were instructed to contact Housing and Community Development Director Alexis Steger at any point that they identify someone in need of a quarantine shelter.

Families at Heightened Risk of Serious Complications

The Human Rights Director has been meeting weekly with the Pacific Islander Health Project (PIHP) Advisory Council and Crescent Community Health Center and has provided guidance on determining a patient's ability to self-isolate. Crescent Community Health Center staff were instructed to contact Housing and Community Development Director Alexis Steger or Human Rights Director Kelly Larson at any point that they identify someone in need of a quarantine shelter.

Instructions on how to safely self-isolate at home is available in English and Spanish from the CDC and has been translated into Marshallese and distributed broadly in the community. Attachments 1A, 1B, 1C. The PIHP Advisory Council is working with local non-profit organizations to put together home isolation packets for distribution to families most in need and at highest risk of exposure and complications. The packets will include: 1) English, Spanish, and Marshallese care and cleaning instructions for isolation at home; 2) washable cloth masks; 3) thermometers with translated use and cleaning instructions; 4) soap, hand sanitizer, and bleach or a disinfectant. The goal is to distribute the along with food and translated K-12 education supplies for children.

Quarantine/Isolation Shelters: Availability, Budget and Monitoring

The City has agreements in place with two quarantine/isolation shelters:

- A local hotel has agreed to house people at a cost of \$80 per room per day. 69 units are available and entire floors can be used as needed.
- A local privately-owned rental property has agreed to house people at a cost of \$14 per room, per day. We currently have 8 units, with the potential for 24 additional units in two separate wings. Budget projects for this facility are attached. Attachment 2. Use of

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the hotel will result in higher costs of \$66 per day, per person based on the higher room rate.

In addition, the City is developing back-up plans with local faith communities and will continue to evaluate community needs and availability of resources, modifying quarantine/isolation shelters as necessary.

Shelters will not have staff on-site but will be monitored daily by City staff and Visiting Nurses Association staff.

The following steps have been taken to provide shelter placement and monitoring.

- Five staff members from Housing and Community Development (three of whom are paramedics), one staff member from Human Rights, and one staff member from Public Works (who has CPR and AED certifications) have volunteered to serve as site monitors. They all completed virtual training through the Red Cross on operating a shelter on April 7.
- Arrangements have been made with Emergency Management to provide staff members safety equipment to the best of availability, including a plastic face shield, an N95 respirator, a disposable surgical gown, and disposable examination gloves.
 - Staff from the Fire Department will provide a safety briefing on proper use of the equipment and general COVID-19 disinfecting protocol.
 - Staff who are older than sixty or who have underlying health conditions will not be placed to serve at the shelter.
 - Staff members who exhibit symptoms will remain at home.
- Staff Assignments:
 - City staff members will be on call for twenty-four hour shifts on a rotating basis, with a back-up on-call person each day that someone is located in a shelter.
 - On-call City staff will be responsible for helping to arrange resident transportation to the site, assigning residents to rooms, reviewing quarantine requirements with residents, obtaining and delivering meals, responding to resident needs, and monitoring compliance with requirements to remain quarantined. Staff will provide individuals arriving at the shelter a facemask and complete an intake process with them. Staff will not be expected to remain on-site once the resident is settled.
 - Monitoring will be through the use of a camera placed in public hallways (as approved by City Attorney Crenna Brumwell) that will notify on-call staff when there is motion within the hallway and will record information for viewing to determine violation of protocol. Staff will visit the site to reinforce protocol as needed. The camera also allows for direct voice communication between residents and the on-call staff member.
 - Staff will be provided a separate onsite staging room for equipment, supplies, and monitoring if it becomes necessary for the on-call staff to remain on site for an extended period of time.

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- Health monitoring will be provided by a nurse from the VNA, who will perform a health check by visiting each resident at the shelter on a daily basis for the duration of their stay.
- Assignments may be modified based on needs that arise and/or number of residents placed in the shelter.

Facility Supplies and Operations

Postings:

- COVID-19 posters about hand and respiratory hygiene and cough etiquette will be posted at the entrance and inside the shelter. CDC fact sheets will be available at the shelter (see attachments 3-5).

Furniture:

- The hotel is equipped with necessary furniture.
- The 8 initial apartments at the private rental property will be set up with a cot, blankets, and personal hygiene items from the Red Cross and minimal additional furniture from the Dubuque Rescue Mission. We are working with the library to identify reading and recreational materials that may be able to be provided.

Food:

- The Mission has indicated a willingness to provide carry out meals for people in an isolation shelter as their resources allow. There is concern this support could be limited.
- Project Rooted and Resources Unite are additional options we can call upon so long as they are able to maintain their supply of food and volunteers.
- The Red Cross is available to provide food if other options are depleted.
- Given the nature of the virus, it will be important to keep plenty of fluids available to residents to keep them hydrated.
- Residents may order food or grocery delivery so long as those delivering the items are practicing social distancing and leaving items outside of the door.

Transportation:

- The Regional Transit Authority is available to transport residents to the shelter as needed. Costs will be covered by United Way vouchers so long as those remain available.
- A backup alternative for transportation is Paramount Ambulance. They have equipped an ambulance specifically for COVID-19 related transport and it is available on-demand at a cost of \$50 per person transported.

Referral Process for Quarantine/Isolation Shelter

The process for referrals involves working closely with homeless shelters, single-room occupancy shelters, non-profit human services providers, and community leaders connected

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with vulnerable populations to identify people who are positive or presumptively positive for COVID-19, are unable to isolate safely at home, and are recommended for a quarantine/isolation shelter.

For Homeless Shelters and Single Room Occupancy Quarters:

- The HHS team has developed the attached checklist for shelters to:
 - Assess residents for symptoms consistent with COVID
 - Consult with a health care provider and receive a referral for testing when necessary
 - Contact and arrange for transportation of residents to an isolation facility (see attachment 6)
- This checklist will be provided by the Housing and Community Development Director to the following shelters: Dubuque Rescue Mission, Maria House, Teresa Shelter, Catholic Worker House, Salvia House, Manasseh House, Davis Place.

For Medical Staff:

- The HHS team has developed the attached checklist for medical providers who identify residents who are presumptively positive or positive for COVID-19 and do not require hospitalization to:
 - Assess the resident's housing situation to determine whether or not they will be able to self-isolate at home
 - Contact and arrange for transportation of residents who cannot self-isolate at home to an isolation facility (see attachment 7)
- This checklist will be provided by the Public Health Specialist to medical providers in town, including Crescent Community Health Center, MercyOne, Unity Point, Medical Associates, Grand River Medical Group, and other primary healthcare providers.

For Residents who are Sick:

- The HHS team has developed the attached checklist for residents to:
 - Assess themselves for symptoms consistent with COVID-19
 - Assess their housing situation to determine whether or not they will be able to self-isolate at home
 - Contact a healthcare provider for a referral for testing and/or a quarantine shelter. (See attachment 8)
- This checklist will be distributed as follows:
 - Through United Way and the Community Foundation of Greater Dubuque to Human Services Non-profits for use with their clients.
 - Through the Human Rights Director to members of the Pacific Islander Health Project, the My Brother's Keeper Network, and the Immigration Forum.
 - Through the Equity team members to community leaders in neighborhood groups and underrepresented communities through social media, Notify Me, e-mail, and phone calls.

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- Through the Housing and Community Development Director to Housing Choice Voucher recipients.

Release of Residents and Decontamination

Standards for release from quarantine:

- Residents who have not been tested will be advised they can return to their home or shelter upon:
 - They have had no fever for at least 72 hours (that is three full days with no fever without the use of medicine that reduces fevers) AND
 - Other symptoms have improved (for example, when their cough or shortness of breath have improved) AND
 - At least 7 days have passed since their symptoms first appeared.
- Residents who have tested positive will be advised on returning to their home by the Visiting Nurses Association.

Facility decontamination:

- The City of Dubuque will contract with Serve Pro for decontamination of each room occupied upon release of the resident occupying that room. Serve Pro will be provided disinfecting guidance available from the Centers for Disease Control. <https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html> Best efforts will be made to leave rooms vacant for 24 hours before cleaning and to allow them to air out for 24-48 hours post-cleaning before placing another resident.

This document may be updated as public health guidance and circumstances change.