# Basic Program Information

The Washington County Respite Shelter is an isolation/quarantine environment for individuals who are unhoused or live in a congregate setting where they cannot safely solation/quarantine. Guests must be able to maintain activities of daily living (I.e. showering, toileting, collecting their garbage in the receptacles provided). This Respite Shelter is not a medical facility and does not have medical staff onsite.

### Eligibility Criteria

- 1. Individual is determined as:
  - Tested positive for COVID (Symptomatic or asymptomatic) OR
  - Is a suspect case with a COVID test pending OR
  - Is a presumptive case without a positive COVID-19 viral test with a new onset of symptoms featuring at least two of the following: shortness of breath, cough, fever, new loss of smell or taste, radiographic evidence of viral pneumonia and within 14 days before illness onset, lived in the same household or congregate setting, had close contact with a confirmed case, or is identified as having been exposed in an outbreak *OR*
  - Is a close contact to someone who tested positive and is being told to quarantine by public health or a provider (symptomatic or asymptomatic)
- 2. <u>Individual does not need hospital level of care</u> and is able to maintain activities of daily living independently.
- 3. Individual is a resident of or currently residing in Washington County.
- 4. Individual must be currently unhoused. This may include individuals:
  - Living in a congregate setting where they cannot safely isolate or quarantine. Applicable congregate setting can include group homes, migrant camps, and shelters.
    - Living with individuals who are at a higher risk of complications from COVID 19 infection, and they cannot safely isolate in the home. Individuals at high risk include those 65+, immunocompromised individuals, those with chronic lung conditions such as COPD

# Shelter Referral Process

Please read the following instructions carefully.

- All referrals must take place between 9am and 6pm
- To make a referral: Monday-Friday 9am-5pm
  - Complete all sections of this form and email to: jporter@greatergoodnw.org CC: rrh@greatergoodnw.org
  - Call Intake Phone at 503-545-7188 to confirm receipt and provide warm hand off.
- To make a referral Saturday or Sunday 9am-5pm:
  - Collect the information on this form and call referral in to front desk at 503-640-4791
- Ensure you have received confirmation by either email or phone that referral has been received and staff are prepared for intake prior to sending client to the respite shelter.
- Please thoroughly review the information at the bottom of this form with client.

#### Gather the following information from the client being referred:

- 1. Referral Source:
  - Referring agency:
  - Referring contact name:
  - Referring contact phone:
  - Referring contact email:
- 2. Guest information:
  - Name:
  - Preferred name:
  - Address:
  - Date of birth:
  - Phone:
  - Primary language:
    - \*The shelter staff will use interpretation services as needed.
  - Discharge Date (completion of isolation/quarantine period):
  - Anticipated time of arrival:
- 3. Referral reason: Is this individual:
  - Close contact Date of last exposure:
  - COVID+ Date of positive COVID test:
  - Presumptive + Date of Symptom Onset:
  - Test pending: Date of test:
- 4. Is the individual going to the shelter alone?
  - If no, collect
    - Name:
    - Age:
    - o DOB:
    - Relationship to primary intake:

If they have a spouse/partner or are a single parent with no friends or family to care for their children, check with the Respite Shelter staff. The shelter may allow a companion (even someone with a negative test) if they consider that person already exposed.

- 5. Are they taking medications?
  - If individual needs medications, they should arrive with a 14-day supply. If they need over the counter medications (pain relievers, allergy medications, vitamins, etc.), they should also have a 14-day supply.
  - A case worker or provider can do a medication delivery to the shelter, if needed. Shelter staff cannot pick up prescriptions or medications.
- 6. Do they have a primary care provider (PCP)?
  - Name of provider:
  - o Phone:
- 7. Hospital preference?
- 8. Type of insurance?
- 9. Do you have any mobility limitations?
  - If yes, are they able to self-care, including toileting, showering, and feeding themself? Note: The respite shelter does not currently have any ADA rooms.
- 10. Do you have any preexisting medical conditions? Please include any communicable diseases such as scabies, lice, or MRSA.
- 11. Do they have any daily routines that would prohibit them from answering a phone call or a knock at the door while at the shelter, i.e. sleep aids or something of that nature?
- 12. Are they currently receiving any drug or alcohol treatment?
  - Treatment type:
  - Provider/agency name:
  - Provider/agency phone:
- 13. Do they anticipate any withdrawal symptoms from lack of access to substances?

Note: The shelter staff cannot support individuals who are dependent on alcohol or other substances who have the possibility of withdrawal. There is limited behavioral support on site.

- 14. Are they seeing a mental health provider?
  - Provider name:
  - Provider phone:
  - Have they had any suicidal thoughts in the last 90 days?
- 15. Do they have pets?
  - Is the pet a service animal?

<u>Note</u>: Clients cannot have their pets with them at the respite shelter. If they have a pet, they can ask friends or family if the pet can stay with them. If no pet accommodations, Animal Services will hold their pets while they are at the respite shelter.

- Does the shelter need to coordinate with Animal Services?
  - Ensure they are aware they need to bring enough supplies for their pet as well.

Intake Notes Pertinent to Shelter Staff:

# Important Information to Review with Client

- Respite Shelter address is 622 SE 10<sup>th</sup> Ave, Hillsboro, OR 97123
  - If they are unable to transport themselves, please arrange transportation and indicate arrival time above.
- This is an isolation environment, which means guests will be isolated to their hotel room through their isolation or quarantine period.
- The guest **must** be able to independently maintain daily living activities.
- Guests cannot leave their room on their own or have visitors.
  - The shelter will allow a few coordinated fresh air breaks per day. Shelter staff will coordinate breaks and escort guest to reduce person to person contact.
- Guests will receive three meals a day delivered to their room.
- This is not a medical facility. The shelter staff can do basic wellness checks, but they cannot support high acuity health needs.
- If the guest needs medications, they should arrive with a 14-day supply. This includes medications that would typically require daily clinic visits. If they need over the counter medications (pain relievers, allergy medications, vitamins, etc.), they should also have a 14-day supply.
- Use of tobacco products is not permitted at the respite shelter.
- The shelter staff cannot support individuals who are dependent on alcohol or other substances who have the possibility of withdrawal.
- The shelter is unable to hold any personal belongings past the individuals' stay.
- Pets are not allowed. Encourage guest to have a friend or family member watch the pet. If not, Animal Services will hold their pets while they are at the shelter. The shelter staff can take care of the process of contacting the Animal Shelter to retrieve the pet. This does not apply to service animals.
- Guests can bring no more than 2 bags/pieces of luggage with them.
- The respite shelter staff cannot receive deliveries for clients (apart from a onetime emergency delivery if they forgot something important), so guests should bring what they need for their stay.