

Disaster Health Services: COVID-19 Non-Congregate Sheltering

<u>Purpose</u>

Use this job tool to successfully provide Disaster Health Services (DHS) to clients in non-congregate settings during the COVID-19 pandemic.

Audience

- Disaster Health Services responders
- Non-Congregate Shelter Manager
- DRO Leadership (suggested)

Supporting DAT Level 1-2 Responses with Non-Congregate Sheltering

Disaster Health Services follows the service delivery as outlined in the <u>Disaster Health Services</u>

<u>Standards & Procedures</u> for any standard Disaster Health Services referrals by Disaster Action Teams.

Provide all Disaster Health Services virtually.

- If client answers "NO" to questions 1-3 on the <u>COVID-19 DAT Response Screening Questions</u> but references a medical need, Disaster Action Teams refer the client to Disaster Health Services.
- If client answers "YES" to questions 1-3 in the <u>COVID-19 DAT Response Screening Questions</u>, Disaster Health Services contacts the client virtually. When interviewing the client, discuss:
 - Has client sought previous medical care regarding COVID-19?
 - If client has an existing medical plan of care for COVID-19, Disaster Health Services inquires about client's current symptoms and advises client to contact 911 if symptoms worsen.
 - If client has no existing medical plan of care regarding COVID-19, Disaster Health Services contacts local public health and provides the client's name and location.
 - Does the client have any COVID-19-related needs (like a thermometer, masks, or tissues)?
 - If needs are identified, arrange for a drop-and-go delivery of items needed,
 maintaining 6-foot social distancing. Coordinate this delivery with the local chapter.
 - o Does the client have any additional disaster-related health care needs?

Supporting Level 2-4 Responses with Non-Congregate Sheltering

- HQ Disaster Health Services Manager obtains a list from the HQ Sheltering Manager of all clients
 placed in non-congregate shelters daily. Ensure this list includes a name, location, and phone
 number for each client.
- HQ Disaster Health Services Manager assigns Disaster Health Services responders to virtually contact all clients and conducts a wellness check (initial and daily) to inquire as to any disasterrelated health care needs.

- Initial wellness check will occur within the first 24 hours of client's assignment to noncongregate setting. HQ Disaster Health Services Manager, or designee, makes every attempt to assign the same Disaster Health Services responder to the same noncongregate location each day.
- If Disaster Health Services is unable to reach a client for two consecutive days, Disaster Health Services contacts the on-site Shelter Manager to request a wellness check of the resident.

Disaster Health Services initial wellness check includes:

- An assessment of all members of the household for fever, cough, sneezing, headache, and/or diarrhea.
- 2. A C-MIST interview, where a Disaster Health Services responder assists clients to:
 - Identify their needs, including Disaster Mental Health, Disaster Spiritual Care, and casework.
 - Develop a plan to address any assistance to meet their needs using family, external partners, home health agencies, and local public health or human services:
 - Explore what resources the client requires as identified during the C-MIST interview including, but not limited to:
 - Mobility: Does the client need a walker, wheelchair, or mobility assistance?
 - Language: Does the client require language assistance?
 - Request Disability Integration to assist with obtaining video relay, American Sign Language, or Interpreter. See Remote Interpreter Services Job Tool.
 - Transportation: Does client require transportation assistance for medical care?
 - Is Uber or Lyft available? County paratransit?
 - Self-Care: Discuss with clients their ability to complete activities of daily living, like bathing, dressing and toileting.
 - Inquire as to any pre-event care being provided. With permission from the client, Disaster Health Services contacts provider(s) and informs them of client's location.
 - If client needs assistance with any activities of daily living, and there is no available resource, the HQ Disaster Health Services Manager makes arrangements with a homecare agency to provide on-site assistance with the specific approval of the Senior Associate, Disaster Health Services at national headquarters.
- 3. A discussion about any unmet disaster-related health care needs.
- 4. Disaster Health Services responder provides clients with instructions on when to call 24/7 Disaster Health Services line for virtual support:
 - For non-emergency assistance with health needs;
 - For assistance with any consumable medical supplies or durable medical equipment;
 - To report to the 24/7 Disaster Health Services any symptoms related to an upper respiratory illness or gastrointestinal illness, like coughing, difficulty breathing, nausea, vomiting, or diarrhea.
- 5. Disaster Health Services responders instruct clients to call 911 for any life-threatening illness or injury.

Virtual Daily Wellness Checks for Non-Congregate Sheltering

 Disaster Health Services contacts each client listed on the non-congregate client roster daily by phone. Conduct all Disaster Health Services wellness checks virtually.

- o If client reports a fever >99.5, cough, or other respiratory symptoms, instruct client to contact their health care provider or local public health.
 - Disaster Health Services responder contacts the HQ Disaster Health Services
 Manager to request guidance on placing symptomatic clients in individual rooms if housed with a family unit.
 - Disaster Health Services responder contacts local public health when individuals exhibit symptoms associated with COVID-19 and provides client name and location.
 - Disaster Health Services follows local public health or health care provider quidance regarding self-isolating at non-congregate locations.
 - HQ Disaster Health Services Manager notifies the AD of Operations when a client requires self-isolation (if directed by the local public health agency or health care provider).
 - Disaster Health Services responder contacts self-isolating clients frequently and advises clients to contact 911 if symptoms worsen.
- Disaster Health Services responders follow <u>Disaster Health Services Standards & Procedures</u> to support disaster-related health care needs.
 - If financial assistance is required, HQ Disaster Health Services Manager collaborates with AD of Recovery or HQ Casework & Recovery Planning Manager to arrange for the delivery of a client assistance card (CAC) to the client.
- HQ Disaster Health Services Manager collaborates with the AD of Recovery or HQ
 Casework & Recovery Planning Manager to identify the process to create a new Client
 Assistance System (CAS) case and obtain and deliver a client assistance card to client.
 - The HQ Disaster Health Services Manager communicates this process to the Disaster Health Services team.

HQ Disaster Health Services Manager

The HQ Disaster Health Services Manager is responsible for:

- Following <u>Disaster Health Services Standards & Procedures</u> for manager responsibilities virtually.
- Confirming that every client receives the wellness package, which includes:
 - 1 liquid gel thermometer for each client;
 - o 1 face mask for each client (no masks for children under 2 years old);
 - 1 tissue pack if necessary.
- Notifying the Senior Associate, Disaster Health Services at national headquarters of any need to
 activate the Teladoc partnership because a Disaster Health Services responder reports that a
 client(s) requires health care that is not available through the client's usual health care provider.
 - The Senior Associate, Disaster Health Services notifies the HQ Disaster Health Services
 Manager when the service is active and provides the Teladoc phone number.
 - Disaster Health Services responders may refer a client to Teladoc for complaints of acute illness or injury if a client is unable to access their usual health care provider.
- Compiling the totals from all submitted *Aggregate Morbidity Reports* (see below for responder reporting) and sending a final daily count to DisasterHealthSVCS@redcross.org.
 - Include [HQ Disaster Health Services Manager's name], DRO #, AMR on the subject line of the emailed report.
 - o This report is due daily by 6:00 p.m. local time.

Documentation and Reporting

Virtual Client Health Record

Disaster Health Services virtual responders document daily wellness checks and any assistance or referrals utilizing the <u>Disaster Health Services Virtual Client Health Record</u>. Disaster Health Services virtual responders save each client's *Disaster Health Services Virtual Client Health Record* to their device using this naming format: ClientLastName.ClientFirstName_DOB. Example: Doe.John_03.14.1965.

Disaster Health Services virtual responders use the same file for consecutive daily reporting.

Disaster Health Services virtual responders email completed *Disaster Health Services Client Health Records* to the HQ Disaster Health Services Manager when out-processing. Disaster Health Services virtual responders ensure that all copies in the "SENT" folder, the "DELETED" folder, and the "RECYCLE BIN" of a responder's device are permanently deleted to ensure client privacy.

Disaster Health Services Aggregate Morbidity Report

All Disaster Health Services virtual responders complete the <u>Disaster Health Services Aggregate</u> <u>Morbidity Report</u> during their shifts and submit a report daily to the HQ Disaster Health Services Manager with cumulative numbers noted in the total's columns.

- Count any individual the Disaster Health Services virtual responder has contact with during the reporting period in the *Total Disaster Health Services Contacts* entry as the *Line 7* entry on the *Disaster Health Services Aggregate Morbidity Report*.
- Count only those clients whom a Disaster Health Services virtual responder provides assistance
 to or for, including daily wellness checks, as a subset of the *Total Contacts* noted on *Line 7*.
 These contacts are recorded on *Line 7B* of the *Disaster Health Services Aggregate Morbidity*Report.
- Disaster Health Services virtual responders attempt to complete all data entries requested on the Disaster Health Services Aggregate Morbidity Report as they are able, including any referrals provided to the client.
- Disaster Health Services virtual responders save completed forms to their device and email a copy to the HQ Disaster Health Services Manager, as instructed by the HQ Disaster Health Services Manager.