COVID-19 and other Respiratory Virus Guidance for Homeless Service Providers, Confinement Facilities and Non-Healthcare Congregate Living Homes

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What's New in April 2024?
- The length of isolation is now symptom based, as opposed to 10 days for everyone. Persons infected with COVID-19 or another respiratory virus should isolate from others while ill and for at least 24 hours after fever has resolved and respiratory symptoms have improved. After completing isolation, they should continue to mask for another 5 days.
- The outbreak definition has changed and is now when 3 or more residents or staff members from a facility test positive for COVID-19 within 7 days of each other OR when testing is not performed, and 3 or more residents or staff members have COVID-19, flu-like illness or cold symptoms within 3 days of one another.

Background

Coronavirus disease 2019 (COVID-19) is a respiratory disease caused by SARS-CoV-2. COVID-19 is spread to people through direct contact with respiratory droplets that are expelled into the air when an infected person talks, coughs or sneezes and small particles that can remain in the air in poorly ventilated settings.

The symptoms of COVID-19 include fever, cough, and shortness of breath. In addition, illness may be accompanied by other symptoms including tiredness, runny or stuffy nose, sore throat, chills, body aches, diarrhea, vomiting, and loss of the sense of smell or taste.

COVID-19 infection can vary in severity from mild to severe. Asymptomatic infections can occur. Check the CDC website for the most up-to-date information on COVID-19.

The Philadelphia Department of Public Health may modify guidance for homeless service providers and non-healthcare congregate living sites based on changes in community rates of COVID-19 and other respiratory viruses.

COVID-19 Prevention and Control Terms

- **Contagious Period:** The contagious period is when a person with COVID-19 can spread the virus to others. The contagious period can vary depending on severity of infection and immune status. Most people are contagious up to 2 days before symptoms start and are most contagious while they have symptoms.
- **Up-to-date on vaccination:** Most people aged 6 years and older are up-to-date when they have gotten one updated Pfizer-BioNTech or Moderna COVID-19 vaccine for the current year.

  - Older individuals and those who are moderately to severely immunocompromised may need more doses to be considered up to date and optimally protected.
  - Children 6 months to 6 years old should also receive updated vaccines. Depending on age and vaccine history they may need more than one dose to be considered up-to-date.
  - People 12 and older who are unable or choose not to get an updated Pfizer or Moderna vaccine can consider other vaccine options. Read more from the CDC about vaccines here.
- **Incubation Period:** The incubation period is the time from exposure to disease onset. For COVID-19, the incubation period ranges from 2 to 14 days with an average of 3 to 4 days with the current variants.
- **Isolation:** Isolation separates people who are infected with a contagious disease from people who are not infected.

General Prevention Tips

- **Vaccination**: There are now several vaccine products available. Vaccination is the best way to prevent severe illness and death due to COVID.

- **Masking is not required in congregate living settings like shelters, prisons, and group homes.** Masking is still recommended in certain situations (e.g., persons who have tested positive or have symptoms of a respiratory virus, persons exposed to a COVID-19 case, facilities with COVID-19 activity). Individuals may want to consider masking when COVID-19 and other respiratory virus activity in the community is elevated. Individuals may also want to consider masking if they are immunocompromised or otherwise at high risk for severe disease due to COVID-19.
- **Hand washing and other prevention supplies:** Maintain access to handwashing facilities for clients and staff. Ensure sufficient supplies (including hand sanitizer that contains at least 60% alcohol) are available and reinforce hand hygiene and respiratory etiquette.
- **Cleaning high-touch surfaces**: Clean and sanitize frequently touched surfaces regularly. Pay attention to doorknobs, banisters, tabletops, handrails, pens, phones, bathroom fixtures, keyboards, light switches, and remotes. Most disinfectants are effective against the coronavirus that causes COVID-19 and other respiratory viruses. Learn more about effective products against SARS-CoV-2.
- **Posting Prevention Reminders:** Post signs at entrances and in strategic places providing instruction on masking, hand hygiene, respiratory hygiene, and cough. Download signs here.
- **Personal Protective Equipment (PPE):** Keep a supply of gloves for staff to use when picking up used tissues or emptying wastebaskets. Maintain a supply of KN95, KF94, or N95 masks, face shields, gowns, and gloves for staff who care for clients with suspected or confirmed COVID-19.
- **Ventilation**: Ensure ventilation systems operate properly. Increase the indoor delivery of outdoor air as much as possible, while being mindful of health and safety issues (e.g., risk of falls, triggering asthma, etc.). Exhaust fans and properly maintained HEPA systems may be beneficial to improve ventilation. For more information, see COVID-19 Ventilation in Buildings.

Outbreak Definition

A COVID-19 outbreak is when 3 residents or staff members from a facility test positive for COVID-19 (rapid test or molecular laboratory tests) and have symptoms of illness start within 7 days of one another. Test date should be used for those without symptoms.

If testing is not performed, a suspected respiratory virus outbreak is when 3 or more residents or staff members from a facility have COVID-19, flu-like, or cold symptoms within 3 days of one another.

Reporting an outbreak

All suspected and confirmed outbreaks should be promptly reported to the Health Department by calling (215) 685-6741 or email COVID-GroupSettings@phila.gov.

Case identification

Anyone with symptoms of COVID-19 like illness, or with close contact to someone with COVID-19, should get tested. If you identify a client with severe symptoms of COVID-19 or other infection, take the client to receive medical care immediately or call 911.

Severe symptoms include:
- Difficulty breathing or shortness of breath
- Pain or pressure in the chest or abdomen
- Sudden dizziness
- Confusion
- Severe or persistent vomiting
- Blue color to lips
- Flu-like symptoms improve but then return with fever and worse cough

Mild symptoms, as below, do not typically require medical attention:
- Runny nose or nasal stuffiness
- Body aches
- Mild GI upset (more often seen in children) or poor appetite

Please keep in mind that these are basic guidelines. Use your judgment. If your client is over age 50 or has underlying medical problems like diabetes, heart disease or lung disease, or weakened/suppressed immune system, they may be more vulnerable to COVID-19 and its complications.

Response to persons with illness due to COVID-19 or other cold or flu-like symptoms

- If a client at a shelter tests positive for COVID-19 or has COVID-19, flu or other cold symptoms:
  - Give anyone who tests positive and anyone with respiratory illness symptoms a surgical mask.
  - Persons infected with COVID-19 or another respiratory virus should isolate from others while ill and for at least 24 hours after fever has resolved and respiratory symptoms have improved. After completing isolation, they should continue to mask for another 5 days. Persons infected with COVID-19 who do not have symptoms should mask for 5 days after testing.
    - If possible, sick clients should be placed in individual rooms with separate bathroom and eating facilities and should avoid common areas.
    - If a separate room is not available, space individuals at least 6 feet away from other clients. Consider using a large, well-ventilated room specifically for sick persons.
- Give sick clients access to fluids, tissues, plastic bags for the proper disposal of used tissues, and a means to wash their hands or use alcohol-based hand sanitizer.
- If a person's health status worsens, call their provider for medical advice. If it is a medical emergency, call 911. Alert emergency services that the individual may have or is currently infected with COVID-19.
- Staff providing healthcare to confirmed and possible COVID-19 cases in the shelter setting should wear KN95, KF94, or N95 masks, eye protection, and gloves as well as gowns, if available.

If a staff member at a shelter has suspected or confirmed COVID-19:
- Staff members who have been diagnosed with confirmed COVID-19 infection and those who have had symptoms of possible COVID-19 infection but have not been tested may return to work when no longer ill and 1 day after resolution of fever (off antipyretics) with improvement in respiratory symptoms.
- Negative tests are *not required* for staff members prior to return to work.

Outbreak Response

- If a COVID-19 outbreak or suspected respiratory outbreak occurs at a facility, contact the Health Department at (215) 685-6741 or email COVID-GroupSettings@phila.gov.
- Maintain surveillance for additional ill clients and staff by monitoring for COVID-19 or other respiratory virus symptoms. The Health Department can provide a template line list for you to use.
- Offer masks and encourage use to all residents and staff when outbreaks are ongoing.
  - Use of masks is especially important for close contacts of persons with COVID-19 or other respiratory viruses including roommates, family members, or other persons who interact closely with ill person(s).
- Quarantine or restricting movement of exposed persons without symptoms is no longer required.
- Test any additional persons who become ill for COVID-19 when symptoms appear.
  - If your site is interested in access to COVID-19 rapid tests for testing persons with symptoms or close contacts of cases, please contact the Health Department's outbreak surveillance coordinator working with your site or COVID-GroupSettings@phila.gov.
  - For sites with clinical staff, the Health Department can assist with coordination of COVID-19 molecular testing of nasal swabs at the PDPH Public Health Laboratory. Multiplex testing for COVID-19, flu, and RSV is also available for persons with respiratory virus symptoms.
  - For sites without clinical staff, a testing clinic for all clients and staff can be scheduled through the Health Department's outbreak surveillance coordinator working with your site or COVID-GroupSettings@phila.gov.
- Maintain outbreak response actions until no new COVID-19 cases have been identified for 14 days from the start of symptoms for the last case.
- Consult with PDPH about additional mitigation strategies if an outbreak is large and ongoing or impacting persons at risk for severe disease.

Admissions

- Have a plan in place for where symptomatic, new admissions who are awaiting testing or test positive can safely stay without being excluded from services.

- Admissions should not be closed, even if there are cases in the facility. Continuation of services is essential for people experiencing homelessness. Precautions should be taken to the best of the site's ability to separate sick individuals from healthy persons.

Staffing considerations

- Develop and use contingency plans for staffing disruptions caused by staff exclusions for illness. These plans might include extending hours, cross-training current employees, or hiring temporary employees.
- Contact the Health Department to discuss questions about contingency plans for staffing.

Resources

- https://www.cdc.gov/respiratory-viruses/guidance/faq.html
- https://www.cdc.gov/respiratory-viruses/guidance/respiratory-virus-guidance.html