

# Summary of King County COVID-19 Homeless Response Health Care for the Homeless Network (HCHN) Governance Council Meeting June 15, 2020

## Current Status of COVID-19 Among People Experiencing Homelessness

As of June 9th, 2020:

- 249 confirmed COVID-19 cases and 8 deaths associated with those experiencing homelessness or those residing in homeless housing facilities in King County
- 29 confirmed COVID-19 cases among employees at homeless service sites
- 57 homeless service sites in King County had at least one confirmed case, including 30 emergency shelters, 24 homeless housing facilities, and 3 day centers
- Total confirmed cases for both residents and employees represent 3.3% of all cases among King County residents since the start of the outbreak
- Cases associated with homelessness are currently doubling every 55 days compared to every 52 days for all King County residents

## Overview of the Response to Date

Since early February, many actions have been taken to slow the spread of COVID-19 in homeless service sites, summarized [here](#) and in briefings at previous Governance Council meetings. **HCHN** staff and Network providers have played leadership roles in many of these efforts in partnership with the King County Department of Human and Community Services (DCHS), the City of Seattle Human Service Department (HSD) and Public Health – Seattle & King County (PHSKC) (Environmental Health, Communicable Disease & Epidemiology (CD-EPI) and Community Health Services). These actions include:

- Developed and published guidance for homeless service providers to prevent and mitigate COVID-19 outbreaks among people experiencing homelessness
- Established centralized and coordinated communication:
  - Established the [COVIDHomelessnessResponse@kingcounty.gov](mailto:COVIDHomelessnessResponse@kingcounty.gov) email list
  - Set up weekly conference call with homeless service providers
  - **HCHN** webpage designated as the central repository for guidance and other materials to support the COVID-19 homeless response.
- Weekly calls convened by **HCHN** for nurses and outreach staff working with people experiencing homelessness to share information, discuss the conditions and needs they are seeing and to coordinate efforts and resources across agencies
- Web-based training on PHSKC sanitation and hygiene guidance led by **HCHN** and Environmental Health
- Creation of a pooled supply store by DCHS, HSD, **HCHN** and United Way of King County for homeless service sites and homeless outreach providers
- De-intensification of shelters by DCHS and HSD based on guidance from **HCHN/PHSKC** for social distancing and isolation for people with COVID-19 or COVID like illness
  - 95 individuals at high risk due to underlying health conditions and age were moved to leased hotels/motels with individual rooms
  - 10 shelters comprising 503 beds were moved from congregate settings to hotels

- Hotel rooms have been provided for 130 individuals from 5 high risk congregate shelter sites with outbreaks

Since March, an additional set of critical prevention and response activities have been established including:

- Field Assessment, Support and Technical Assistance (FAST) teams coordinated by **HCHN** and staffed with nurses from Network partners Neighborcare Health and Country Doctor and investigators from Environmental Health. FAST provides assessments of homeless service sites, guidance on sanitation and infection prevention and control, linkage to secure needed supplies, and technical assistance to implement mitigation strategies for COVID-19.
- “Strike” Teams deployed in response to reports of positive COVID-19 case(s) or a cluster of COVID-19 like illness at a homeless service site. **HCHN** staff provided leadership to develop, implement and staff Strike Teams. A team generally includes two nurses, one environmental health investigator, and potentially a behavioral health practitioner who work in coordination to:
  - Conduct a targeted on-site clinical assessment of residents and staff and an on-site facility assessment of current infection and control strategies
  - Provide education and training to prevent further transmission
  - Conduct limited testing on those with CLI symptoms
  - Initiate rapid referral of residents to isolation and quarantine
  - Determine if follow-up support is needed
- PHSKC Mobile Assessment Teams (MAT) and community testing partners, including Network partners Neighborcare Health, Harborview Medical Center and the Mobile Medical Van/Street Medicine Team (MMV/SMT), coordinated efforts to provide on-site testing at homeless service sites for residents and staff as well as for those living unsheltered
- King County Isolation and Quarantine (I&Q) sites opened in Aurora, Kent, and Issaquah. A large congregate I&Q site was opened later in Shoreline (also called the Assessment/Recovery Center or AC/RC). PHSKC partnered with DCHS to stand up these I&Q sites. **HCHN** staff led efforts to plan and implement health care services for I&Q sites including developing protocols, identifying staffing, and procuring equipment, PPE and other supplies.
- As PHSKC pivots to a sustained homeless response over the next 18+ months, **HCHN** will manage the Mobile Assessment Teams (MAT) providing COVID-19 testing and the FAST and Strike Teams. FAST and Strike teams will be joined together to form Homeless Health Emergency Action & Response Teams (HEART) which will combine the prevention and response capacities of the current Strike and FAST Teams.

As of June 8 2020:

- FAST teams have been deployed to 69 sites
- Strike teams have been deployed to 34 sites
- Roughly 5,876 tests have been conducted via 239 mobile testing events.
- 214 positive cases were identified (~3.6% positivity rate) from the mobile testing events which accounts for 76% of all cases among people experiencing homelessness; the additional cases have been identified through testing at local clinics, hospitals, or at the I&Q sites.
- The I&Q sites have served a total of 398 guests, *the majority of whom are individuals experiencing homelessness.*