

# COVID-19 Quick Reference Guide for Homeless Shelter Operators

*Based on Alameda County Public Health guidance and shelter-specific FAQs*

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## WHEN TO REPORT OUTBREAKS

- 📞 **Report to ACPHD via SPOT:** 5+ COVID cases in 7 days among residents/staff
  - 📞 **For SPOT questions:** COVIDOB@acgov.org
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## TESTING & ISOLATION

### General principles:

In the absence of single-bed rooms, shelters providers should think creatively about how to “cohort” clients. For example, if the space is a large open room, can you cohort clients together in one corner of the room, and place HEPA ventilation equipment nearby?

### Who to Test

- ☒ **Test immediately:** Anyone with symptoms. If negative, repeat in 48 hours.
- ☒ **Consider testing:** New admissions, close contacts (5 days after exposure)
- ☒ **Don't need to test:** Staff returning from vacation (unless symptomatic)

### Isolation/Cohorting Rules

🏠 **Isolate/cohort those with a positive home test until:** *If possible*, 24+ hours fever-free (without fever-reducing meds) AND symptoms improving. *If not possible:* Rely on masks and use of outdoor space to prevent transmission.

- 😊 **After isolation:** Encourage masks for 5 days
- 📅 **If symptoms return:** Go back to isolation/cohorting until criteria met again

## Staff Return to Work

- 🧑 **Staff should mask indoors for 10 days**
  - 📅 **10 days from:** Symptom start OR first positive test (if no symptoms)
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## MANAGING SHARED SPACES

### "Stay Home" in Shelter Context

- 🛏 **Shared dorms:** Cohort COVID+ residents together when possible; when not possible, optimize use of fans, ventilation, HEPA units to clear air and to protect the healthy
- 😊 **All residents:** Provide masks to everyone (sick and healthy) for common areas
- 👤 **Improve ventilation:** Use air cleaners, open windows when possible

### Infection Control Priorities

1. **Cohort** COVID+ residents together
2. **Mask** everyone when possible, including during sleep
3. **Distance** beds as far apart as possible, **at least** 6 feet
4. **Ventilate** sleeping areas
5. **Clean/Disinfect** high touch surfaces and make hand sanitizer available

**Intakes/Admissions and Existing Covid+ Clients** ☒ **Don't deny access** to COVID+ individuals


☒ **Help them mask** or find appropriate shelter


☒ **Coordinate with other shelters** to cohort COVID+ residents at one site when possible

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## DAILY OPERATIONS DURING OUTBREAK


### Screen Everyone Daily For:

 Fever, chills, fatigue

 Cough, sore throat, runny nose

 Difficulty breathing

 Nausea, vomiting, diarrhea, abdominal pain

 Loss of smell/taste


### Masking Recommendations


☒ **Strongly recommend** masks for anyone with symptoms

☒ **Encourage** masks for everyone during outbreaks

**? If someone refuses:** "Ask them to do the best they can"


### Dining & Activities


 **Meals:** Room service or outdoor dining preferred

 **Group activities:** Pause during outbreaks

 **Cohort:** Keep stable groups together

## Drop-in Centers


 **If outbreak at shelter:** Don't automatically deny drop-in access

 **Better approach:** Coordinate to have COVID+ individuals use same shelter/drop-in; When possible, provide services outdoors, increase physical distance between participants, request masking in drop-in centers

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## PPE & CLEANING

### Staff Caring for COVID+ Residents

 **N95 respirator** (should be fit-tested, may be re-used once if not visibly damaged.)


 **Eye protection**


 **Gloves and gown**

 **Never reuse PPE**

### Environmental


 **Clean twice per shift with appropriate PPE:** Focus on high-touch surfaces


 **Hand sanitizer:** Multiple locations (entrances, dining, bedrooms, bathrooms)

 **Ventilation:** Portable air cleaners in isolation areas and areas of poor air flow

## WHEN SYMPTOMS RETURN

 **Refer to primary care provider** for evaluation

 **Return to isolation** until fever-free 24+ hours (without fever-reducing meds) with improving symptoms


 **Paxlovid rebound:** Symptoms can return with or without treatment

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## RESOURCES & SUPPLIES

## Getting Help

 **Testing and masking supplies:** [COVID-19 Tests and Masks Request Form](#)

 **Vaccines/immunization:** Encourage the use of primary care for vaccination. If your site is interested in a vaccination drive, contact Regional Coordinator at ACHCH or Seth Gomez, Pharmacist at HCH ([seth.gomez@acgov.org](mailto:seth.gomez@acgov.org))

**Medical respite:** Available for severely ill residents

- Cardea Health <https://cardeahealth.infoflo.one/application>

Eddie's Place: [Eddies.place@cardeahealth.org](mailto:Eddies.place@cardeahealth.org)


Fairmont Respite: [Fairmontrespitereferral@acgov.org](mailto:Fairmontrespitereferral@acgov.org),

- Lifelong

Adeline Respite: (510) 421-3215 or [respite@lifelongmedical.org](mailto:respite@lifelongmedical.org)

 **Isolation hotels:** No longer available

## Free Supplies


 **PPE, masks, tests:** Limited availability – use request form above

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## KEY REMINDERS

 **Main goal:** Cohort COVID+ residents, provide masks, improve ventilation

 **When in doubt:** Contact [COVIDOB@acgov.org](mailto:COVIDOB@acgov.org) or [Harrison.alter@acgov.org](mailto:Harrison.alter@acgov.org)

 **Report outbreaks:** 5+ cases in 7 days via SPOT

 **Coordinate:** Work with other shelters to manage COVID+ residents together

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This guidance reflects current ACPHD and ACHCH recommendations as of August 2025.

For questions: [COVIDOB@acgov.org](mailto:COVIDOB@acgov.org) or [Harrison.alter@acgov.org](mailto:Harrison.alter@acgov.org)