

# Metro public health department TEMPORARY LODGING PROPOSAL

## For At-Risk Nashvillians During COVID-19

### OVERVIEW

*After being exposed to or contracting COVID-19, all Davidson County residents are required to quarantine or isolate themselves for a minimum of 10 days. For many cases and contacts in Nashville, it is difficult to isolate from others due to multigenerational and other crowded housing arrangements. Additionally, many cases have the financial means to seek temporary, alternate shelter independently. It is the purpose of this proposal to outline a temporary program that would provide hotel rooms to these individuals and families during the length of their quarantine or isolation period.*

### The Objectives

*To provide at-risk Nashvillians with safe and appropriate places to quarantine or isolate after exposure to, or diagnosis of COVID-19*

- Need #1: Cases who have been diagnosed with COVID-19 have presented with urgent and sometimes dire housing needs during the pandemic. The primary focus of this proposal is to provide funding for the temporary lodging component of the “At-Risk Nashvillian COVID Response Plan”, which details and addresses the needs of immigrant and refugee communities whose primary language is not English. Many members of these communities live in multi-generational or multi-family households where it is challenging to isolate away from non-infected household members. These community members need a secure place to isolate to reduce transmission throughout their large households. Conexion Americas will aid MPHD in placing cases and contacts in hotel rooms where needed and Siloam Health will support the program by partnering cases with a Community Health Worker (CHW).

Other cases in Nashville who have a need for temporary housing would also benefit from the proposal. This would allow MPHD to be responsive to singles or family units with an urgent need for temporary housing. Some examples of need include cases who have suffered immediate evictions from a shared or single housing arrangement upon notification of case status to either the landlord or others living in the home, cases who need to isolate away from a congregate sheltering situation, and cases who need to immediately isolate from high-risk household members with comorbidities that could result in serious hospitalizations or death if they contract COVID-19.

- Need #2: Contacts have similar needs to cases, and it may at times make more sense to place contacts in temporary sheltering arrangements when there are multiple cases in one household. Contacts cannot begin their quarantine period until their last date of exposure, and when there are multiple cases in a household contacts can sometimes be required to quarantine for much longer than 14 days. Removing them as soon as possible from a house where multiple cases occur allows them to begin and complete their quarantine period sooner and therefore return to work sooner.

## The Opportunities

*Metro Public Health Department (MPHD) has identified community partners and hotels willing to work through the needs outlined in this proposal*

- Goal: An immediate hoteling location that would be available for at-risk Nashvillians and other cases who need temporary lodging during their isolation or quarantine period

## The Solutions

*MPHD has continued to evaluate and address needs of at-risk Nashvillians to provide evidence-based solutions during COVID-19*

- Recommendation: contract with one of several engaged hotel partners to procure 1 floor of rooms between September 1, 2020 and December 31, 2020, with the option to extend into 2021 if funding is available
  - September and October 2020 will be an evaluation period with a report due by Monday, October 26, 2020 so Metro can determine the utility and feasibility of continuing the program

## OUR PROPOSAL

*Davidson County has over 23,000 confirmed cases of COVID-19. Metro government has implemented evidence-based closures, executive orders, and preventive measures to further prevent the spread of COVID-19 in the county. This proposal aims to reduce the risk of large, multi-generational household spread and community spread among the homeless population.*

This proposal is intended to act as a supplement to the “At-Risk Nashvillian COVID Response Plan” and serve others who have an urgent need for temporary housing but are not directly impacted by this plan. By providing the following services to at-risk populations and cases and contacts in a critical housing situation, Metro government can adequately address the needs of these communities while preventing further spread of COVID-19 in high-density living situations:

- Hotel rooms coordinated by MPHD and partner agencies
- Case and contact monitors through routine case and contact follow up at MPHD
- Community health workers (CHWs) that are paired with certain cases and contacts through existing partnership with Siloam
- Delivered meals from community partners
- Housing navigation where applicable

### Execution Strategy

*This is a multi-pronged, multi-agency approach with both public and private entities. Each agency and partner are intended to act as a community and content expert, all working in concert to address each need of the affected individuals and families.*

### Project Outline

For at-risk Nashvillians in crowded or multigenerational households, referrals are made through two channels. Individuals and families who express need to MPHD or community partners are referred to Community Health Workers (CHWs) who are language-concordant and connect individuals to additional resources. These CHWs will connect individuals who need separate accommodations to the hotel coordinator at Conexion Americas. Individuals that call into the COVID Hotline or other assistance lines who express a need for additional accommodations will be referred to a navigator at Conexion Americas for assessment and enrollment and will also be referred to a CHW for longer follow up and support.

Other cases or contacts would be referred to this service during the routine investigation and/or monitoring processes that already exist at MPHD or via hospital or ER referrals upon patient discharge.

This proposal aims to serve 150 people in these case cohorts between September 1, 2020 and December 31, 2020 and 125 additional cases from Jan 1, 2021 to March 30, 2021 if additional funding is acquired.

## Hoteling

Cases and contacts will be allotted one hotel room per adult. If the adult is a caregiver to minor children, those children will be allowed to stay in the same room as their adult caregiver. While at the hotel cases or contacts will have access to use the hotel phone for local calls should they need to contact family members, speak with their medical providers, and be monitored by MPHD case or contact monitors. The following are general guidelines set forth by MPHD:

- a. Guests will stay on average 7-14 days; length of stay varies by case
- b. Guests will be checked in by a Metro or partner employee and escorted to their room while wearing PPE, potentially via service entrance, service elevator, or stairwell depending on hotel configuration.
- c. Transportation of guests to and from hotel will be prearranged and provided by a partner agency or a Metro employee if they do not have their own transport
- d. Guests with their own vehicles can park in a validated hotel lot and MPHD will cover the cost of parking during their stay

The hotel rooms will not receive in-person housekeeping services from hotel staff. The following accommodations will be made so that the cases and contacts are kept comfortable while housekeeping staff is kept safe:

- a. Hotel will follow CDC guidelines for all cleaning and laundry services
- b. Any items like towels, sheets, or toiletries will be delivered by “knock and drop” or contactless delivery methods
- c. Housekeeping will provide extra garbage bags
- d. Guests will bag disposable items and trash in provided bags, call the front desk for a pickup, and leave the bags outside the door
- e. Housekeeping will double bag the pre-bagged items and dispose of them immediately
- f. Rooms will be left empty for 24 hours after guest checkout, before cleaning

There are several possible configurations for meal planning and deliveries. MPHD, partners and the selected hotel are entitled to select the option that best suits each organizations’ capabilities. The following is a list of options which are subject to modification until specific contracts are agreed upon:

- a. Hotels will provide disposable cutlery and dishes
- b. Continental, and shelf-stable breakfast can be provided by community partners or the hotel, based on contractual agreements

- c. Lunches can be delivered by one of the community partners, Second Harvest Food Bank or faith-based organizations. Lunches can be delivered by “knock and drop” or contactless delivery method
- d. Dinner meals will be provided by the hotel and trash will be handled as described above
- e. Extra snacks and non-alcoholic beverages can be delivered by hotel staff via “knock and drop” delivery and will be covered by MPHD (subject to contract agreements and daily per diem budgets set forth by Metro)

MPHD and partners will provide monitoring of guests. The following is a suggested set of guidelines and is subject to change based on the organizations’ capabilities:

- a. MPHD will provide standard COVID-19 case and contact monitoring: every other day calls for routine case and contact monitoring
- b. Partner agencies will maintain contact with respective guests based on their capacity and connection to them (i.e. Siloam CHWs for non-English speaking cases)
- c. Cases and contacts provided a hotel room will not receive a key, will be informed of this upon receiving a hotel room, and will be able to get out in the event of an emergency
- d. Hall monitors have been requested by hotels and MPHD is working with partners to identify monitors
- e. Guests will have phone access only limited to local calls

**TIMELINE FOR EXECUTION**

*The initial phase includes a start date of September 1, 2020 and the secondary phase would begin if the program is successful in the initial evaluation period, if the partner hotel wishes to continue, and if additional funding is available.*

Description	Start Date	End Date
Hoteling Contract (Initial Phase)	Sep 1, 2020	Oct 31, 2020
Evaluation Period	Sep 1, 2020	Oct 31, 2020
Hoteling Contract (continuation of initial phase based on favorable evaluation)	Nov 1, 2020	Dec 31, 2020
Hoteling Contract (Secondary Phase)	Jan 1, 2021	Mar 31, 2021
Community Partner Meal Delivery (Initial Phase)	Sep 1, 2020	Dec 31, 2020
Community Partner Meal Delivery (Secondary Phase)	Jan 1, 2020	Mar 31, 2021

**BUDGET FOR HOTELING**

<b>Lodging and Food</b>	<b>Unit Cost</b>	<b>Total Cost</b>
Hotel room <i>*based on the requirement at Hayes to book entire floor at a time (17 rooms for 122 days)</i>	\$69	\$143,106
Lunches <i>*150 cases and contacts with an average 10-day stay at \$12/lunch</i>	\$12	\$18,000
Dinner <i>*150 cases and contacts with an average 10-day stay at \$20/dinner</i>	\$20	\$30,000
<b>Total Lodging Costs Costs</b>		<b>\$191,106</b>
<b>Incidentals and Supplies</b>		
Miscellaneous Supplies <i>*can include parking, disposable items, print materials, extra snack foods, or other unknown needs of cases and contacts while in isolation or quarantine</i>		\$5,000
<b>Total Incidentals and Supplies Costs</b>		<b>\$5,000</b>
<b>Total</b>		<b>\$196, 106</b>

## CONCLUSION

**i** *While Metro government was quick to stand up an emergency COVID response shelter and address the needs of many community members, as the COVID-19 pandemic extends into the second half of the year, many needs still stand without solutions.*

This proposal is set to address the most pressing needs for at-risk Nashvillians during the COVID-19 pandemic. By providing temporary housing and wrap around services, intended to prevent spread throughout our most susceptible populations, we protect all our citizens and prevent cases in our highest risk settings.

Thank you for your consideration,

Metro Public Health Department  
COVID Response Team