

If a client or staff member develop symptoms while at a shelter:

- Symptoms may include:
 - Fever (greater than or equal to 100.4 F or 38 C)
 - Subjective chills
 - Cough
 - Shortness of breath or difficulty breathing
 - Fatigue
 - Muscle or body aches
 - Headache
 - New loss of taste or smell
 - Sore throat
 - Congestion or runny nose
 - Nausea or vomiting
 - Diarrhea
- Client or staff should avoid any further contact with other individuals
 - If tending to a sick individual, staff should use PPE including masks, gloves, and eye protection
- If the sick individual is a staff member, that staff should be sent home immediately
- If the sick individual is experiencing any of the following symptoms, 911 should be called to the transport the patient immediately:
 - Difficulty getting enough air
 - Chest pain
 - Change in alertness or responsiveness
 - Bluish lips or face
 - Rapid breathing
 - Any other life threatening symptom
- Clients and/or staff experiencing symptoms are encouraged to receive COVID-19 testing
- Clients and/or staff experiencing symptoms should follow isolation guidance provided by ADHS found [here](#)

If a client is a confirmed or suspected case of COVID-19:

- Clients who are a confirmed or suspected case of COVID-19 should not be excluded from accessing shelter services
- Client should follow isolation guidance provided by ADHS found [here](#) until release from isolation criteria is met
- When possible, the client should be provided with an individual room or designated room for clients who are a confirmed or suspected case of COVID-19
 - The client should avoid common areas as much as possible
- Client will be contacted by Coconino County Health and Human Services (CCHHS) for initial contact tracing interview and to receive isolation guidance
- CCHHS may contact the shelter to help in determining close contacts within the shelter
- Repeat testing is not recommended or required

If a staff member is a confirmed or suspected case of COVID-19:

- Staff should remain home and follow isolation guidance provided by ADHS found here until release from isolation criteria is met
- Staff will be contacted by CCHHS for initial contact tracing interview and to receive isolation guidance
 - Staff will be encouraged to disclose results to employer
- CCHHS may contact the shelter to help in determining close contacts within the shelter
- Repeat testing is not recommended or required

If clients or staff who are fully vaccinated are identified as being a close contact to a COVID19 case:

- Coconino County Health and Human Services will work with shelter officials to notify close contacts of possible exposure
- Close contacts who are fully vaccinated do not need to quarantine if they meet the following criteria:
 - Are not inpatients/residents in a healthcare or congregate healthcare setting AND
 - Are fully vaccinated AND
 - Have remained asymptomatic since the most recent COVID-19 exposure
- It is recommended that fully vaccinated individuals seek testing 3-5 days after the exposure and wear a mask while in indoor public settings for two weeks following the exposure or until they test negative.
- If a fully vaccinated close contact experiences COVID-like symptoms, they should isolate and consider getting testing for COVID-19

If child or staff who previously tested positive for COVID-19 are identified as being a close contact to a COVID19 case:

- Coconino County Health and Human Services will work with shelter officials to notify close contacts of possible exposure
- Close contacts that previously tested positive for COVID-19 do not need to quarantine if they meet the following criteria:
 - Exposure is **within 3 months of symptom onset of their initial illness**, or (if asymptomatic) since specimen collection of first positive PCR/antigen test AND
 - Have met the criteria to end isolation AND
 - Remain asymptomatic
- If a close contact with a previous positive test experiences COVID-like symptoms, they should isolate and consult with their healthcare provider

If clients or staff who are unvaccinated are identified as being a close contact to a COVID-19 case:

- CCHHS will work with the shelter to notify close contacts of possible exposure
- Unvaccinated close contacts who do not have a previous positive COVID-19 test in the last 90 days should follow quarantine guidance provided by ADHS found [here](#)

- If a close contact develops symptoms, they should consider getting tested for COVID-19 and follow isolation guidance provided by ADHS found here until release from isolation criteria is met
- Close contacts may choose to get tested while asymptomatic but should wait 6-8 days following exposure before getting tested.
 - If result is negative, the close contact should still complete their entire quarantine and continue monitoring for symptoms

Key Terms

Isolation: separates sick people with a contagious disease from people who are not sick

Quarantine: separates and restricts the movement of people who were exposed to a contagious disease to see if they become sick. For COVID-19, this means staying home or in a private room with a private bathroom for 14 days after last contact with a person who has COVID-19

Symptomatic: individual is experiencing one or more symptoms of COVID19

Asymptomatic: individual is currently not experiencing any symptoms of COVID19

Fully Vaccinated: two weeks or more have past after receiving the second dose in a two dose series or one dose in a one dose series

Congregate Setting: Any facility where people living in a group setting share living space (including bathroom or kitchen) AND those living there depend on the facility for:

- Completion of activities of daily living; OR
- Temporary shelter; OR
- Medical services.

Congregate settings include, but are not limited to:

- Shelters with dormitories
- Jails, prisons, and detention centers (ICE and ORR)
- Group homes (Division of Developmental Disabilities - DDD, Department of Child Safety - DCS)
- Temporary shelters for people who are asylum-seeking/unaccompanied children

Congregate healthcare settings include, but are not limited to:

- Inpatient physical rehabilitation facilities
- Inpatient behavioral/addiction rehabilitation
- Long-term care facilities (LTCFs)
- Hospice • Assisted living facilities