

COVID-19 Status in HMIS

COVID-19 is spreading rapidly in the US, prompting an emergency response from homeless service providers. While it is our hope that Mecklenburg County clients stay healthy, the HMIS team has created COVID-19 Status questions to collect necessary public health monitoring data. This data collection will help us with contact tracing and also allow for future data evaluation to assess and inform homeless services systems' future emergency responses.

Where to record data: **Client Profile page** (if your agency has a custom assessment on the Client Profile screen then you can find the COVID-19 assessment at the bottom of the **Client Summary page**)

When to record data: When clients **self-identify as having fever, cough or shortness of breath or diarrhea not related to stomach flu**. If clients normally have these symptoms, you can ask if the symptoms are worse than usual. Be sure to record symptomatic cases on the same day clients self-identify.

What data to enter:

- **Information Date:** This is the date you gathered the information.
- Enter Yes for **"Symptoms consistent with COVID-19"** if appropriate. Leave blank for healthy clients
- Enter **Date Symptoms Started** for ALL symptomatic clients. If client can't remember, enter today's date.
- Ask **"Have you been in close contact with a person who has been diagnosed with COVID-19"**. If yes, follow on-screen guidance.
- Ask **"Have you been tested for COVID-19"**. If yes, ask where the client was tested and follow on-screen guidance.
- Enter **Quarantine Date**, if appropriate. Leave blank if NA or unknown.
- Enter **Hospitalization Date**, if appropriate. Leave blank if NA or unknown.
- Enter **Test Result**, if known. Leave blank if NA or unknown.
- Enter any important notes in **Client Health Notes**.
- If client self-reports feeling better, enter a **Recovery Date**.

If your agency has not provided specific information about what to do if the client answers yes to having symptoms, and/or being in contact with a person diagnosed with COVID-19 and/or being tested for COVID-19, guidance from the Mecklenburg County Health Department is listed at the bottom of the assessment in blue.

COVID-19 Status



Select 'Yes' if a client shows symptoms consistent with COVID-19. Leave blank if not symptomatic.

Symptoms consistent with COVID-19 (fever, cough, shortness of breath)?	<input type="text" value="-Select-"/>	G
Is client experiencing diarrhea not related to norovirus [AKA stomach flu]?	<input type="text" value="-Select-"/>	G
If symptoms consistent with COVID-19, date symptoms started:	<input type="text" value=""/> / <input type="text" value=""/> / <input type="text" value=""/>	G

If yes:

Ask the individual to wear a disposable mask, and follow your agency's procedure for next steps. If you aren't sure of next steps, follow Health Department guidance at the bottom of this assessment.

Have you had known close contact to an individual who has been diagnosed with COVID - 19?	<input type="text" value="-Select-"/>	G
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If yes, follow your agency's procedure for next steps. If you aren't sure of next steps, follow Health Department guidance at the bottom of this assessment.

Have you been tested for COVID - 19?	<input type="text" value="-Select-"/>	G
If yes, where were you tested?	<input type="text"/>	G

If yes, follow your agency's procedure for next steps. If you aren't sure of next steps, follow Health Department guidance at the bottom of this assessment.

If symptoms consistent with COVID-19, quarantine date:	<input type="text" value=""/> / <input type="text" value=""/> / <input type="text" value=""/>	G
If hospitalized, date:	<input type="text" value=""/> / <input type="text" value=""/> / <input type="text" value=""/>	G
If known, test result or confirmed disease status:	<input type="text" value="-Select-"/>	G

Client health notes:	<div style="border: 1px solid #ccc; height: 80px; width: 100%;"></div>	G
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Recovery date:	<input type="text" value=""/> / <input type="text" value=""/> / <input type="text" value=""/>	G
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If client indicates they are experiencing symptoms, ask the individual to call one of the following healthcare system's COVID-19 hotline for testing and screening:

Atrium Health COVID-19 Hotline at 866-462-3821 or Novant Health COVID-19 Hotline at 877-499-1697

If client indicates they have been in close contact with someone diagnosed with COVID-19, please have the individual call the MCPH COVID-19 Hotline (980-314-9400 option 1) to speak with a Communicable Disease nurse for guidance on exposures.

If client indicates they have been tested, have them call the MCPH COVID-19 Hotline (980-314-9400 option 1) to speak with a Communicable Disease nurse to verify test. If the test is verified, MCPH will provide specific guidance for next steps & housing.

Additional Emergency Data Guidance:

- Try to record every COVID-19 Case. The status of every client can aid response efforts.
- All client rosters need to be correct. Exit old clients and create new client records as needed.
- Due to emergency conditions, shelter client HMIS records should be checked every night.
- Double check long-term clients, actual physical addresses and phone numbers if possible.
- Exit any clients who may have passed away prior to this emergency.
- Ask permanent housing and scattered site clients to call and report to case managers if feeling unwell.
- Ask for support. How can we help you with this important health monitoring task?

What if the data is wrong? The homelessness services sector has been instructed to respond to all symptomatic cases, therefore shelter and housing providers should track **“symptomatic”** cases, and not worry about a formal diagnosis. If we wait for a diagnosis, we will collect very little data. Caution demands we consistently flag and count all **“symptomatic”** clients. Undercounting in this situation could endanger clients.

HMIS Privacy and Security:

The HMIS Privacy and Security Standards offer a basis for disclosure of COVID-19 status (§ 4.1.3):

Threats to Health or Safety

A provider may share a participant's COVID-19 status under applicable law and standards of ethical conduct if: 1) the provider believes in good faith that the disclosure is necessary to prevent or lessen a serious and imminent threat to the health or safety of an individual or the public; and 2) the information is shared with a person reasonably able to prevent or lessen the threat. Note that the threat to health or safety can be a threat to any individual or the public in general. Under current emergency circumstances, disclosing COVID-19 status to anyone offering services to a client meets this standard. Disclosing information about other individuals possibly exposed to COVID-19 is also permissible under this authority to either the exposed individuals; to anyone who can offer health care, protection, or assistance to an exposed individual; or to anyone who can lessen the threat of COVID-19 to themselves, to others or to the public.