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Adapting Homeless & Addiction Services to the COVID-19 Crisis in Chicago

A Safe Haven's Establishment of the First Isolation Space for Treatment of Chicago's Homeless Population



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Introduction

The COVID-19 pandemic has put the American public on high alert regarding the spread of the highly-contagious novel coronavirus. With deaths in the United States surpassing 100,000 and emerging research on the disproportionate impact COVID-19 is taking on communities of color, already-vulnerable populations are at particular risk of contracting and spreading COVID-19.

Even prior to the spread of COVID-19, addressing the crisis of rising homelessness has challenged lawmakers. As cities struggle to find sustainable solutions to address homelessness and healthcare, A Safe Haven in Chicago, IL, has pioneered a successful model that has a proven track record of success. Its unique model of individualized services along with its commitment to serving vulnerable communities is what allowed A Safe Haven to adapt and rise to the challenge of treating COVID-19 in homeless populations.

A Safe Haven recognized the threat of COVID-19 early on and identified opportunities to utilize its facilities to treat homeless populations at risk of COVID-19 infection. Through identifying partnerships with both governmental agencies and healthcare systems and moving swiftly to take action, A Safe Haven established and now operates the first and exclusive isolation medical and behavioral healthcare respite center for COVID-19 positive homeless and doubled up families in Chicago.

Background

Neli Vazquez Rowland, Co-Founder A Safe Haven (ASH) is the pioneering architect of one of the most comprehensive vertically integrated models that provides individualized services to the homeless.

Established in 1994, ASH's multidisciplinary team approach includes case managers, nurse practitioners, substance abuse treatment professionals, psychology clinicians, educators, and workforce development specialists. Life-skills trainers work together on behalf of each resident in the same space, applying real time, assessment-driven coordinated services.

The A Safe Haven network features a unique and full range of social and behavioral healthcare services, a portfolio of managed social business enterprises, and a full continuum of phased housing. A Safe Haven also boasts a significant network of qualified partners with provider organizations, landlords and employers throughout the Chicagoland area.



Neli Vazquez Rowland, Co-Founder and President of A Safe Haven Foundation

Since its inception, the vision and mission of A Safe Haven has been to help influence a paradigm shift in the way our nation addresses and solves the root causes of poverty and homelessness. ASH is specifically designed to help foster sustainable social, economic, and housing stability and independence for the individuals and families and for the communities in which they live. ASH has provided housing and services to over 130,000 individuals, including adults, families with children, youth, and over 10,000 military veterans.

Information Gathering

As the international news began to report the rapid spread of the novel coronavirus (COVID-19) in countries around the world in January and February 2020, A Safe Haven leadership recognized the potential for the health crisis to reach the United States and, specifically, the Chicagoland area. The ASH leadership team began conducting research to learn about the disease by monitoring news reports and reviewing the Centers for Disease Control and Prevention (CDC) guidelines. A Safe Haven simultaneously took steps to strengthen existing flu and infection control policies and procedures (frequent cleaning with disinfectant, hand sanitizers throughout the facilities, and onsite nurse practitioner for healthcare consultations and referrals to medical facilities).

Recognizing that COVID-19 posed a significant risk, on January 31, 2020, A Safe Haven President began emailing with the Vice President of Operations, Mark Mulroe, and in house legal counsel, Elizabeth Donahue, to initiate the process of implementing preventative measures in accordance with CDC guidelines.



Angela Moss, RUMC Nursing Director conducts PPE training program to A Safe Haven monitors to work in COVID 19 Isolation Medical Respite.

Activation Stage

After identifying the threat that COVID-19 posed to the community, particularly to the vulnerable populations that it serves, A Safe Haven took action to address and respond to COVID-19. Over the course of just weeks, ASH took action to convert a 7,000 square foot former office space into what is now the first and exclusive isolation medical and behavioral health respite center for people experiencing homeless in Chicago. On March 11th, Chicago had only 25 reported cases at the time, Dr. Ansell said RUMC Models are predicting 6,000 new cases in the next two weeks and anticipated a shortage of space in which to treat COVID-19 patients, etc. Neli Vazquez Rowland, invited Dr. Ansell to come for a tour of A Safe Haven.

March 5, 2020: The Westside Rush University Medical Center led a Conference at Malcolm X College to discuss community population health and a much-needed response to poverty. COVID-19 was not discussed.

March 6, 2020: A Safe Haven President scheduled a meeting with the event organizer, Dr. David Ansell, Vice President of Community Outreach of Westside Rush University Medical Center (RUMC), to rekindle a conversation that they had had three years prior to discuss collaboration.

March 11, 2020: A Save Haven and Westside Rush University Medical Center agreed to initiate a plan to strategically integrate the organizations' visions and missions to stabilize individuals and families living on the west side of Chicago, one of the most impoverished communities in Chicago and in Illinois. They discussed RUMC's projection for COVID-19 cases in the Chicagoland area. They predicted 6,000 new cases in the next two weeks. She invited Dr. Ansell to visit A Safe Haven's facility for a tour of the space.

March 12, **2020**: Neli Vazquez Rowland emailed Dr. Ansell a proposal on how to collaborate on health, social, economic, housing, and policy issues and to address the spread of COVID-19 among the homeless population in Chicago.

March 15, 2020: A Safe Haven's implementation of the plan to convert available 7,000 square foot space into a 115-bed space was underway for homeless populations.

In anticipation of the need to shelter more unsheltered homeless due to COVID-19. Mark Mulroe, COO, together with A Safe Haven Directors, had already commandeered the A Safe Haven Board Room to serve as the Incident Command Center to assess and evaluate current assets, research the CDC and World Health Organization's (WHO) policies and recommendations, and set up systems to respond to all aspects and needs, including cleaning supplies, medical supplies, staffing of A Safe Haven per standard operating policies, and procedures and protocols regarding the novel coronavirus.

March 19, 2020: Vazquez Rowland hosted a tour for Dr. Ansell with some of his colleagues. She showed them the space recently vacated by The Chicago Housing Authority (CHA) that was being converted to additional quarantine space for homeless patients under investigation (PUI) for COVID 19. He was accompanied by Angela Moss, Director of Nursing at RUMC, Dr. Stephen Rothchild, Community Medicine at

RUMC and Dr. Evan Lyon from Heartland Alliance. At this point, ASH and RUMC devised the plan to use ASH's facilities to treat the homeless population that tested positive for COVID19. ASH pivoted its initial plan to convert it into a 100 bed residential unit to accommodate the impending surge of homeless in need of shelter and other services during the COVID-19 pandemic.

COVID 19 Positive isolation Space in the former CHA Office Space

Chicago Homeless and Healthcare Response Group for Equity (CHHRGE)

Led by Dr. Stephen Rothchild and with the support and leadership of Dr. David Ansell, Neli Vazquez Rowland, President of A Safe Haven was invited to join inaugural calls to coordinate a



COVID 19 Positive isolation Space in the former CHA Office Space

West Side Response Team to the COVID-19 pandemic on behalf of homeless populations. These initial calls also included Dr. Tom Huggett and Dr. Bruce Wilson, both of the Lawndale Christian Health System; Angela Moss, Director of Nursing at RUMC; and the Chicago Department of Public Health, among many others.

Implementation Stage

Through the coordinated and negotiation efforts of Chicago's Department of Public Health led by Dr. Anwar and Megan Cunningham, A Safe Haven was able to secure the financial support and liability waivers needed to build out its 7,000 square foot space into Chicago's first official isolation space for homeless patients that tested positive for COVID-19.

Building this isolation space required logistical coordination at a high level and did not come without risks. Below, the process of making this plan a reality is outlined, from the decision-making and approval process all the way to the construction process.

Assessing Risks

Converting its space into a COVID-19 isolation space brought up a number of considerations that A Safe Haven took into account, including alignment with its mission to provide high quality treatment and services to homeless populations and financial and legal risks.

Considerations ASH took into account before decided to proceed included:

- Mission Alignment
- COVID-19 site contamination risk
- COVID19 legal liability risk
- •COVID-19 financial risk
- Board buy in and support
- Staff buy-in and support

Once these considerations had been assessed and satisfied, ASH moved forward with the proposal to convert the 7,000 square foot former CHA space into a fully-functional 100 bed isolation unit.



Neli Vazquez Rowland, with representatives from Chicago Department of Public Health, City of Chicago Department of Family Support Services, and RUMC



RUMC nurses and ASH Project Manager setting up the nursing station for COVID 19 Space

Converting a Plan into Reality

Successfully creating an isolation space to treat COVID-19 positive homeless populations required more than just the space. A Safe Haven worked closely with its partners to outline each element of the plan from medical care to insurance and liability waivers to assessing staff needs.

To do this, A Safe Haven undertook the following steps:

- · Identify and design the configuration of the space
- Identify and set up meeting with the partners including CDPH, RUMC, and others to provide Medication Assisted Treatment (MAT) for opioid addiction
 - Understand the COVID-19 epidemiology and how it spreads (i.e., droplet or aerosol)
 - Engage & assign tasks to A Safe Haven Directors and quality control leadership
 - Assess staff requirements
 - Assess inventory
 - Assess procurement
 - Implement project schedule
- Implement technology tracking of census and COVID-19 reporting for existing census and specialized Isolation space reporting
- Set up meetings with Healthcare HVAC engineering firms, who recommended HEPA negative air machines due to common system irrespective of disease not deemed airborne
 - Prepare a proposal and budget
 - Submit proposed agreement

The proposed agreement delegated specific responsibilities between A Safe Haven, the City of Chicago Department of Public Health (CDPH), and RUMC:

- A Safe Haven: Responsible for site construction; scope of services, financial budget, insurance coverage (general liability)
- CDPH: Provided indemnification and payment schedule
- RUMC: Subcontractor to provide medical services only, insurance coverage (general liability and professional liability)

A Safe Haven then sought approval from its Board of Directors. The proposed plan raised a number of concerns among the Board, including risk of site contamination, financial liability, reputation risk, and board D&O insurance coverage. To address these concerns, A Safe Haven requested outside Counsel to review the proposed contract. One Board member resigned due to perceived extraordinary risk.

A Safe Haven: Responding to COVID-19

Ultimately, the Board voted unanimously in support of the project upon securing and confirming funding, liability waivers, and insurance coverage and site construction began.

Building, Installation, and Operationalizing

The final phase of the plan entailed the actual construction of the isolation space, which entailed the following.

Installations:

- Three HVAC negative HEPA air machines
- Cubicle partitions tightly covered in six mil plastic to create pods of six beds
- 100 new bed bug resistance bed frames and mattresses
- Knee-operated hand washing sink
- •IT televisions, video conferencing and telephones
- Equipment and systems to provide telehealth services
- Security camera system
- Lockers for nurses

Site Features:

- •10 dedicated men and women bathroom stalls (5 each)
- •10 mobile shower units
- Secured onsite Mobile Storage Units for resident possessions
- Existing concrete high gloss flooring
- Resourced a dining room area with tables and refrigerator
- Resourced a dedicated nursing station
- Partitioned from general area to provide separate, dedicated entrance and egress

Legal and HR Considerations:

- Researched Department of Labor and state definition of ASH workers deemed essential
- Secured contracts with City of Chicago and subcontract with RUMC
- Secured liability waivers and insurance coverage

Critical Infrastructure Advocacy

In order to successfully and safely operate its isolation space, A Safe Haven advocated to be included as first Responders on par with nursing homes and healthcare workers to qualify for both necessary medical personal protective equipment (PPE) supplies and dedicated funding for healthcare services.

A Successful Plan to Treat Homeless COVID-19 Populations

A Safe Haven now operates the first and only 100 bed isolation space that is successfully treating homeless populations with COVID-19 in a safe manner. In partnership with the City of Chicago and RUMC, A Safe Haven has been able to convert its space into a fully functional isolation space that both treats vulnerable populations and protects public health.

24/7 ASH Services and Staffing

- Ash Staffing Services Hiring
- Monitors Liaison & Monitor to provide
- Comfort care
- Medication assistance
- Intake Services
- Administrative services
- ASH catering daily healthy, nutritious meals
- Deep cleaning janitorial services
- Transportation services seven days per week
- Housing discharge services
- Tele-behavioral healthcare services
- Private quarters for head of households with children
- Pods of six with barriers for semi private congregate accommodations to separate men and women
 - Fresh linen, towel service & toiletry kits
 - Laundry services
 - Outdoor patio
 - Post-service survey
 - 24/7 security guards

Rush University Medical Center Services and Staffing

- In Person & Tele Health Services
- Medical Assessment
- Medical Services

Heartland Health Services

Medication Assisted Treatment Services as needed (minimal)

Chicago Department of Public Health

- Appropriately allocated and distributed federally-approved funding in response to the COVID-19 pandemic to the departments of OEMC and CDPH. Their leadership and understanding of the public health urgency of both the disease and the need to prioritize the homeless to "shelter in place" was key to helping to facilitate the seamless coordination and partnership between the City, ASH & RUMC
- •CDPH relied on the subject matter expertise of A Safe Haven and Rush University Medical Systems to establish the integrated innovative institutional health to community based behavioral healthcare model on behalf of COVID-19 positive homeless
- •CDPH is operating the central intake from hospitals and homeless providers to A Safe Haven isolation space:
 - Screening Exclusions
 - Violent criminals
 - Sex offenders
 - Arsonists
 - Ambulatory
 - Not too sick to be in a hospital
- •CDPH coordinated all medical supply efforts and coordination of delivery with OEMC To A Safe Haven
- •CDPH generously offered manpower to help stand up the ASH isolation space. However, A Safe Haven utilized all in-house facilities teams and contractors to do all construction, moving, HVAC and all staffing services;

On **April 11**, **2020**, A Safe Haven's COVID-19 isolation space opened, remarkably just 30 days from the initial ASH/RUMC meeting.

Media Coverage

Since launching the first and only isolation space for the treatment of homeless populations with COVID-19, A Safe Haven has received considerable press attention in top English- and Spanish-language outlets:

- Yahoo Finance
- MSNBC
- Mental Health Magazine
- Negocios Now
- •WTTW NPR
- ABC 7 Chicago
- •WGN
- Univision
- Telemundo
- Dennis Denard Chicago Speaks I Heart Radio
- UJAM Television Morning Show
- Jen Weigel Radio Show
- HUD Midwest Matters Inaugural Zoom segment Hosted by HUD Regional Director, Joe Galvan Featured Guest ASH President
- ·Local and national podcasts





Así es la inspiradora labor de una organización en Chicago que ayuda a desamparados y combate el coronavirus

- Host a Daily COVID-19"Push to End Homeless Briefing' on Facebook Live with State Representative LaShawn Ford
- Social Media: Launched a Daily COVID-19 "PUSH To End Homelessness Briefing" on Facebook Live with State Representative LaShawn Ford, Co-Chair of State Commission on Housing and Homelessness. Also hosted A Safe Haven alumna and military veteran, Nikelcia Marcelin, state legislators, City Council members, media experts and more. The purpose was to beat the drum daily on prioritizing addressing homelessness during COVID-19.





• Hosted Press Conference before the State Legislature reconvened to determine State Allocation of CARES Act funding at A Safe Haven headquarters with State Representatives LaShawn Ford, Delia Ramirez, Lindsey LaPointe, all members of the Housing and Homelessness Committee and other homeless program leaders including Dr. Evelyn Figeroa from Pacific Garden Mission homeless program and Dr. Huggett of Lawndale Christian Healthcare Center were represented. Testimonial was provided by Nikelcia Marcelin.



ASH President Neli Vazquez Rowland at press conference with Illinois State Representatives on the Housing and Homelessness Committee and CHRRGE members prior to the State Legislature's reconvening to discuss CARES Act allocation.

On **April 13**, **2020**, ASH President Neli Vazquez Rowland was invited to join Mayor Lori Lightfoot daily televised COVID-19 Press Briefing To Announce and Speak on behalf of the opening of Chicago's exclusive A Safe Haven Covid-19 Positive Isolation Space and Medical Respite for the Homeless.



Neli Vazquez Rowland speaking at Mayor Lightfoot's daily televised COVID-19 Press Briefing

Fundraising Efforts

In order to continue operating and providing services to the Chicagoland community, A Safe Haven continues to pursue fundraising efforts through diverse sources:

- Corporate grants
- Private foundations
- Individual donations
- Payroll Protection Plan
- All Chicago
- •DFSS
- Chicago Community Trust
- Abbvie COVID-19 Community Resilience Fund
- Coleman Foundation
- •W.P. & H&B White Foundation
- Rotary One Foundation
- A Block Marketing

- Ronald J. Woods Charitable Trust
- Launched COVID-19 GoFundMe Campaign
- Yard Sign Campaign

Advocacy Efforts

A Safe Haven has also undertaken advocacy efforts to communities that are hardest-hit by COVID-19 to ensure that populations that most need its services are aware of the resources available to them:

- Hosted Daily Briefings with Local Legislator State Rep LaShawn Ford with invited guests including elected officials, media experts, real estate experts, and more.
 - Hosted and attended various press conferences to bring attention to community
 - Created bilingual marketing collateral in both Spanish and English targeted to:
 - •North Lawndale Community African American (30% of population in Chicago 60% Death Rate)
 - •Little Village Community Latino Community (60% testing positive in 60623 zip code)
 - Secured live testimonials from residents in isolation space
- Participated daily in calls with government agencies at the federal, state, and city levels
 - Outreach to community groups
 - Outreach to business advocacy groups
- Daily calls with 100 leaders in the City from homeless and healthcare systems and government agencies
 - ASH Bi-Weekly Newsletter
 - Ongoing social media
 - Participated Zoom and Zoom Press Conferences
 - Presented ASH COVID-19 Best practice to State Department of Human Services
 - Presented ASH COVID-19 to State Housing and Homeless Commission
- •Community Hunger Response: hosted weekly food pantry distribution to community to meet record demand

Outcomes

As of May 24, 2020, A Safe Haven is proud of its results as it operates both the COVID-19 isolation space and the rest of its facilities.



"Everyone should have a place to go like this [who has] COVID-19, the Latino community especially, people who are just getting dumped onto the streets. A Safe Haven is a great place to go."

- Richard Lopez, A Safe Haven resident successfully treated for COVID-19
- •1,400 residents among ASH 40 Real Estate Developments in program related transitional, supportive housing networks, all All High Risk populations with comorbidities
 - •4 COVID-19 Positive Cases & 3 different locations
 - 0 cases of site contamination to other residents
 - •158 COVID-19 patients treated in the isolation space
 - •106 adult men
 - •45 adult women
 - •1 trans woman
 - •6 children
 - O Staff COVID-19 positive
 - 0 deaths

ASH also expanded the isolation space's purview beyond homeless individuals to also include doubled up families in high risk communities that were not able to appropriately isolate.

Isolation space discharges are made to assessment-driven levels of care including hospitals, other homeless programs, A Safe Haven continuum of care and supportive housing

Lessons Learned and Recommendations

As part of its mission to continually provide the most up-to-date and effective services to the Chicago community, A Safe Haven has compiled a list of takeaways and recommendations as the city continues to adapt and respond to the COVID-19 crisis.

- CDPH has been handling the intake process there is a learning curve
- •311 calls overwhelmed, complaints of lack of response, has created a slow referral process
- City funded Transportation for homeless transportation to A Safe Haven isolation space has been a slow process
- •ASH recommends that either RUMC or ASH handle the intake process 80% of intakes have been reverse referrals to CDPH
- ASH recommends adding a position(s) discharge case manager(s) work currently being provided by nurses and ASH staff creating stress on team
 - RUMC added 24 hour nursing coverage
- •We recommend that the Chicago Department of Public Health continue to lead the homeless agenda to continue to address it as a public health issue
- Patient Survey resulted in 95% high satisfaction rate with overall services provided by both ASH & RUMC teams



Coming out of its most recent Board meeting, A Safe Haven debriefs on its first week of services through the isolation space. The Board expressed unanimous appreciation and support for A Safe Haven's continued adherence to its mission and vision.

A Save Haven also met with all Directors to describe Department of Labor and State designation of homeless workers as essential workers. There was unanimous buy-in and satisfaction from Directors with A Safe Haven's leadership and approach. A Safe Haven also provided a 25% payroll salary increase for all Directors and for all resident-facing staff.



The Future of Healthcare and Homeless Delivery System

The ASH I CDPH I RUMC - COVID 19 Medical Respite, innovative institutional healthcare to community based state licensed behavioral healthcare model has broader implications to the future of addressing complex root causes and consequences of homelessness short and long-term. A Safe Haven is currently advocating and pursuing mechanisms like Medicaid and private health insurance coverage to help cover the cost of ongoing efforts to help scale and standardize the vertically integrated delivery system to achieve a more integrated, comprehensive institutional health to community based behavioral healthcare continuum of care and delivery system that is guided by multi-faceted data driven performance measures, outcomes and sustainable results.

Conclusion

Since its inception in 1994, A Safe Haven has been committed to providing high quality services that support vulnerable populations struggling with drug addition and with homelessness. ASH's commitment to working with the community to ensure that each of its residents receives individualized, tailored care translates directly into ASH's ability to adapt and respond to the COVID-19 crisis.

A Safe Haven's unique treatment model allowed it to adapt its space and protocols to effective respond to the COVID-19 crisis and protect both homeless populations at risk from COVID-19 exposure and, in turn, protect public health in Chicago. As A Save Haven has proven time and time again, its model of providing individualized, sustainable support and services will continue to adapt as needed to provide support to the Chicago community throughout this crisis. A Safe Haven is a scalable and repeatable, award-winning vertically integrated model that is focused on helping influence a paradigm shift in the way our nation prevents, addresses, and ends the root causes of poverty and homelessness in a meaningful and sustainable manner.