



Strategies for Continuing Healthy Homes Activities While Social Distancing

Within the healthy housing field, there is an intense interest in learning about innovative adaptations and new ways to continue healthy homes activities during this time of social distancing (also called “physical distancing”). In response to this interest, requests for information and tools, and ongoing conversations between the National Center for Healthy Housing (NCHH) and multiple stakeholders across several of our key initiatives, we’ve published this peer-sharing series entitled Strategies for Continuing Healthy Homes Activities While Social Distancing. The examples highlighted in this series provide not only a firsthand perspective of the exciting work undertaken by this and other change leaders around the country to develop new strategies or layer additional components into larger systems but also a way to contact them for additional information. Use these real-world strategies as a resource to maintain, improve, and expand healthy housing activities or when considering your own local possibilities during this difficult time.

Omaha Healthy Kids Alliance: Engaging Residents with Technology During COVID-19 to Perform Home Assessments and Interventions

Author/Key Contact

Kiernan Scott, kiernan@omahahealthykids.org
Executive Director, Omaha Healthy Kids Alliance (OHKA)



Strategy Goal

As part of our efforts to continue serving clients during COVID-19, we have developed protocols to aid clients either in full personal protective equipment (PPE)* with respect to social distancing and directed health measures or virtually via videoconferencing. See the attached resource, *COVID Home Visit Protocols*.

- Determine client mobility and technological requirements to qualify for full-PPE or virtual hybrid visit.
- Educate residents about healthy homes best practices via telephone before the visit to determine client needs and home condition and prepare client for visit.
- Safely perform home inspections and construction interventions in response to social distancing precautions in place due to COVID-19.

Description

Before the Healthy Home Assessment:

- The administrative coordinator conducts an intake survey to determine which programs the client qualifies for and which visit is most appropriate (see *Visit Type Decision Tree* resource attached). The administrative coordinator schedules the visit and assigns an educator and inspector to provide tailored education and a comprehensive healthy home assessment, respectively.

* NCHH note: Dependent on the sufficient availability of PPE and related procurement funding, minimum recommended protocols for PPE generally involve disposable gloves, mask, gown, and shoe coverings (booties), as well goggles or a face shield. To minimize potential cross-contamination post-visit, PPE should either be wiped with alcohol or removed and placed into a plastic bag for disposal on site prior to entering any vehicles or structures.

- The educator calls the client to conduct our educational survey and collect social history and information on the current home conditions and client concerns. The educator documents the process in the *Family Action Plan* (resource attached) and sends it to the inspector.
- The inspector reviews the *Family Action Plan* to prepare for the visual inspection before the visit.
- Within 24 hours of the visit: The educator, inspector, and client respond to the *COVID Symptom Screen* (resource attached). If any party fails the symptom screen, the visit must be rescheduled.

Healthy Home Assessment:

- For full-PPE visits: The educator and inspector don proper PPE when arriving at the home; the client stays in an isolated room of the home with other occupants except for opening the front door and briefly speaking with inspectors while wearing a mask. The client will be provided a mask if they do not have one.
- For hybrid virtual visits: The educator sends a Zoom link to the client (if using their own device) or prepares a Zoom session on the tablet to be passed to the client. When arriving for the visit, the educator and inspector don masks and any other desired PPE. The educator and inspector remain outside the home with one tablet and video conference with the client inside the home. Note: If any environmental testing inside is needed (such as lead dust wipes), the inspector must don full PPE before entering the home.
- If construction is needed in the home, the contractor adheres to social distancing/PPE requirements while working. The client does not enter the work area while the contractor works inside the home.

Materials, Supplies, and Capacity Needed

- Two (2) tablet computers with cellular data plan
- Headphones with microphone for inspectors/educators to speak with clients
- PPE: disposable masks and gloves, goggles, hand sanitizer, and alcohol wipes
- Adequate staffing and training for all personnel
- Educator fanny pack for visits, including PPE, in clear, wipeable fanny pack
- Inspector bag for home visits, including Dragon puffer, GFCI checker, CO detector, flashlight, and PPE, in a clear, wipeable bag
- Two bins for staff to organize equipment pre- and post-visit: one for “dirty” equipment and one for “clean”
- A pair of “visit shoes” and/or disposable paper booties. OHKA purchased designated “visit shoes” for all staff that are only to be worn in client homes. “Visit shoes” are placed into the “dirty” tote bin stored in the back of staff vehicles after use. All items in the “dirty” bin are wiped down with alcohol wipes in between use.
- UV-C box(es) to sanitize field materials as applicable

Resources Attached

- COVID Home Visit Protocols.
- *Visit Type Decision Tree*.
- *Family Action Plan/Construction Plan*.
- *COVID Symptom Screen*.

For additional examples and resources related to the COVID-19 pandemic, visit ...

https://bit.ly/NCHH_Pandemics

Strategies for Continuing Healthy Homes Activities While Social Distancing

Omaha Healthy Kids Alliance: Engaging Residents with Technology During COVID-19 to Perform Home Assessments and Interventions

This series of informal peer-sharing resources is supported by funding from multiple funders, including the Robert Wood Johnson Foundation, the Centers for Disease Control and Prevention’s (CDC) National Center for Environmental Health, and the New York State Department of Health’s Childhood Lead Poisoning Primary Prevention Program. The contents of these materials are solely the responsibility of the authors and do not necessarily represent the official views of any funding partner. No official endorsement should be inferred.

The National Center for Healthy Housing makes no claims of medical or legal expertise and cannot claim that these protections are adequate. For medical questions, consult a qualified healthcare worker; for legal issues, seek proper legal advice.

November 2020

COVID HOME VISIT PROTOCOLS

Pre-Visit Preparation

1. Intake and Demographics

- a. Explain who OHKA is and the programs we can provide
- b. Conduct intake and explain visit options
- c. Determine technology capabilities of client
- d. Use Visit Type Checklist to determine the type of visit
- e. Schedule a time for inspection and Educational Survey/Symptom Screen

2. Educational survey and Symptom Screen

- a. Educator Calls client 24 hours prior to inspection to complete surveys and symptom screen
- b. Review client responsibilities (wearing a mask, 6ft distance, etc) with client based on their type of visit
- c. Answer any client questions
- d. Document results from surveys and any other relevant information in the Family Action Plan

COVID HOME VISIT PROTOCOLS

Visit Prep: Inspector and Educator

1. Educator

- a. Set up two (2) iPads for visit (if virtual): an “Inspector” iPad and a “Client” iPad. Both are wiped down and sanitized after visits, but the inspector iPad remains the same, and the client iPad is used for clients to prevent cross contamination.
- b. Ensure PPE pack is packed and ready, include mask for client in case they need it

2. Inspector

- a. Make sure inspector bag is packed with needed tools and PPE
- b. Review client’s concerns in the Family Action Plan

COVID HOME VISIT PROTOCOLS

Visit: Hybrid Virtual

1. Arriving at the home/exterior inspection

- a. Inspector, Educator and Client put on masks
- b. Inspector
 - i. Conducts exterior inspection
- c. Educator
 - i. Sets up Zoom, hands tablet off to client (if applicable)

2. Interior Inspection

- a. Client uses tablet to walk through home to showcase hazards
- b. Rooms and noted hazards are documented via screenshot on tablet
- c. Assessment has been tailored for new process and emphasizes common hazards
- d. If any environmental testing is needed, inspector goes inside in full PPE

3. Visit Completion

- a. Tablets wiped down
- b. Hand sanitizer/PPE guidelines followed
- c. Inspector goes home to change before returning to office

COVID HOME VISIT PROTOCOLS

Visit: Full-PPE In-Home

1. Arriving at the home

- a. Inspector and Educator don all PPE (including visit shoes), client given a mask if needed
- b. Confirm with client that only 1-2 people are in the home and isolated in separate room of the house

2. Inspection

- a. Inspection completed, client in separate room with other occupants for entire duration
- b. Educator to assist Inspector by taking photos/answering any client questions

3. Visit Completion

- a. Educator and Inspector doff PPE in proper order
- b. Visit bag is wiped down with alcohol wipe
- c. Visit shoes placed into "dirty" bin in their car
- d. Sanitize hands
- e. Inspector and Educator go home to change before returning to the office

```
graph TD
    Q1[Does the client qualify for a program beyond a Healthy Home Assessment?] -- "if yes" --> Q2[Has the client reported bedbugs/fleas in the last 6 months?]
    Q1 -- "if no" --> Q3[Does client agree to complete a symptom screen 24 hours prior to the visit, wearing a mask while OHKA is in the home, and limiting occupants to 1-2 people?]
    Q2 -- "if yes" --> R1[Hybrid Visit recommended]
    Q2 -- "if no" --> Q4[Does the client have the ability/will to use a personal phone/tablet or OHKA tablet?]
    Q4 -- "if yes" --> R1
    Q4 -- "if no" --> Q5[Does the client have mobility issues that limit their ability to walk through their home with a tablet?]
    Q5 -- "if yes" --> R1
    Q5 -- "if no" --> Q6[possible Hybrid if technology barrier can be solved]
    Q6 -- "if yes" --> Q3
    Q6 -- "if no" --> R2[Hybrid Visit if not able to limit occupants]
    Q3 -- "if yes" --> R3[schedule Full Home Visit in PPE]
    Q3 -- "if no" --> R2
```

Does the client qualify for a program beyond a Healthy Home Assessment?

- if yes**: **Has the client reported bedbugs/fleas in the last 6 months?**
 - if yes**: **Hybrid Visit recommended**
 - if no**: **Does the client have the ability/will to use a personal phone/tablet or OHKA tablet?**
 - if yes**: **Hybrid Visit recommended**
 - if no**: **Does the client have mobility issues that limit their ability to walk through their home with a tablet?**
 - if yes**: **Hybrid Visit recommended**
 - if no**: **possible Hybrid if technology barrier can be solved**
 - if yes**: **Does client agree to complete a symptom screen 24 hours prior to the visit, wearing a mask while OHKA is in the home, and limiting occupants to 1-2 people?**
 - if yes**: **schedule Full Home Visit in PPE**
 - if no**: **Hybrid Visit if not able to limit occupants**
 - if no**: **Hybrid Visit if not able to limit occupants**
- if no**: **Does client agree to complete a symptom screen 24 hours prior to the visit, wearing a mask while OHKA is in the home, and limiting occupants to 1-2 people?**
 - if yes**: **schedule Full Home Visit in PPE**
 - if no**: **Hybrid Visit if not able to limit occupants**

Hybrid Home Visit

- Most desirable option
- Only option if client cannot reduce number of occupants in the home or if home has bedbugs/fleas

if yes → Has the client reported bedbugs/fleas in the last 6 months?

if no

if no

if yes

if no

if yes

if yes

if no

if no

if yes

- Most desirable option
- Only option if client cannot reduce number of occupants in the home or if home has bedbugs/fleas

FAMILY ACTION PLAN

Pre-Visit Checklist

CLIENT NAME:

ADDRESS:

TYPE OF VISIT:

☐

VIRTUAL

☐

FULL PPE

CHILDREN WITH ASTHMA

ASTHMA TRIGGERS

CLIENT TOP CONCERNS:

1.

2.

3.

OTHER NOTES FROM ED SURVEY:

SOCIAL DEMOGRAPHIC INFO:

EDUCATOR:

DATE OF VISIT:

INSPECTOR:

FAMILY ACTION PLAN

Post-Visit Checklist

TOP HAZARDS AND LOCATIONS

Hazard

Healthy Home Principle

Location

OTHER ISSUES/ASTHMA TRIGGERS

Issue

Healthy Home Principle

Location/Notes

REFERRALS

CONSTRUCTION PLAN

(if applicable)

CONSTRUCTION REHAB?

☐ YES

☐ NO

SCOPE OF WORK

NEXT STEPS

COVID SYMPTOM SCREEN

DATE OF VISIT:

TYPE OF VISIT:

CLIENT NAME:

INSPECTOR:

EDUCATOR:

IN THE PAST **14 DAYS**, HAVE YOU OR ANYONE IN YOUR HOME:

- | | | |
|--|------------------------------|-----------------------------|
| 1. Had a fever of 100.4 or higher? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Had a cough or sore throat? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Had difficulty breathing or shortness of breath? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. Been confirmed or suspected of having been infected with COVID-19? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6. Been exposed to someone known or suspected to have been infected with COVID-19? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If yes to any of the above, reschedule in 2 weeks

HAVE YOU OR ANYONE IN YOUR HOME TRAVELED OUTSIDE THE AREA IN THE LAST 14 DAYS?

☐ Yes ☐ No

If yes and visit is in-home with full PPE, consider rescheduling in 2 weeks or switching to hybrid virtual

VISIT HAS BEEN: ☐ Confirmed ☐ Rescheduled for: