New York State’s supportive housing providers fill a critical role in the delivery of vital services to State residents. State oversight agencies are prepared to work collaboratively with our non-profit supportive housing providers to help navigate service delivery during the current public health crisis caused by COVID-19.

This transmittal provides preliminary answers to questions posed to State agencies related to COVID-19 by not-for-profit supportive housing providers. State agencies have issued the attached guidance, “Guidance for Operators of Facilities Providing Housing to Individuals who are Homeless and Supportive Housing, or Organizations Making Referrals to Such Facilities.” This guidance was also distributed to local governments for transmittal to their contractors of such services.

It is important to keep in mind that the pandemic situation continues to evolve and is rapidly changing. It is essential that all affected parties regularly review guidance provided by:

- The New York State Department of Health (NYS DOH) website https://health.ny.gov/diseases/communicable/coronavirus

COVID-19 has caused an unprecedented disruption in all facets of daily life. The State acknowledges the reality that programs may are not likely able to engage in “business as usual” and each agency is prepared to work with contractors to address both contractor and resident needs. Those you serve frequently are seniors and/or have underlying health conditions that make them particularly vulnerable to COVID-19, and every effort should be made to limit their exposure and monitor their health for respiratory (cough, shortness of breath, pneumonia) and fever symptoms. If a resident or staff member is experiencing symptoms and a novel coronavirus is suspected, immediately notify the local health department (LHD) where the patient resides or call 911 if the individual is experiencing serious symptoms. Health care providers should review CDC’s Interim Guidance for Healthcare Professionals Evaluating Persons Under Investigation (PUI).

Supportive housing providers are delivering essential services to New York State residents, and as such are exempt from the in-person workforce reduction provisions included in Executive Order 202.6 (or as revised) and must
remain in operation to the extent necessary to provide appropriate services. (See ESD Guidance on Essential Businesses www.esd.ny.gov)

Most supportive housing programs receive funding from a variety of sources. Many have oversight from more than one State agency; some have federal or local funding as well. Before making decisions that deviate from contractual or regulatory requirements, it is important to discuss the current situation with all funders and regulatory agencies. If a provider is overseen by more than one State agency, submitting questions in one transmittal to all agencies will help generate a coordinated response.

Frequently Asked Questions

Below are responses to commonly asked questions posed to agencies with oversight of supportive housing providers. Additional agency-specific and/or coordinated guidance regarding the topics below may be developed and will be released as soon as available. Check the DOH website above as well as applicable state agency websites for updates.

1. Can providers invoke Force Majeure to have relief from State contract requirements, for example:

   a. Ability to move funds around to deal with expenditures around COVID-19

      Provisions within most State agency contracts allow providers to move up to 10% of the total funding between budget categories. If an organization needs flexibility beyond what the contract provides, requests for budget modifications should be discussed with contract managers.

   b. Minimum occupancy/utilization requirements that cannot be met

      These requirements vary according to program and regulatory requirements. Please contact your contract manager to discuss specifically which requirements can be modified.

   c. Minimum client visits/encounters of clients

      These requirements vary according to program and regulatory requirements. Please contact your contract manager to discuss specifically which requirements can be modified or can be addressed by other means such as video technology or otherwise relaxed. Certain agencies have issued guidance regarding the use of telehealth/ telemental health approaches in residential settings.

   d. Minimum staffing levels when higher than usual employees stay home consistent with government advisories if they have symptoms even if not ill

      In all instances, agencies must take steps to retain a sufficient level of staffing to meet contract requirements and ensure the health and safety of residents. Organizations that suffer severe staffing shortages should contact their contract managers to discuss the need for changes in staffing patterns, or to report any disruption in services.
e. Provision of meals in congregate settings to residents who are ill or quarantined

Client nutritional needs must continue to be met and programs that provide meals per their contracted support services must develop appropriate alternative methods of meal deliveries. All supportive housing providers must ensure that their clients’ basic needs are met, including those for food, shelter and health care. Specific requests for modification should be discussed with your contract manager. An individual who is quarantined or in isolation must have access to nutritional meals, either through the ability to prepare meals in their quarantined space or through the delivery of prepared meals.

2. Can the State expedite or advance payments?

Depending on the source of the funding and the contract provision, it may be possible to provide advance payments up to 25% of the contract amount. Please contact your contract manager to discuss.

3. Can the State identify separate settings where individuals (and families) who have the virus can be taken?

The guidance circulated to all providers indicates that if a person is thought to have symptoms of COVID-19 or meets other screening criteria, providers should call the NYS DOH hotline at 1-888-364-3065 or your LHD at https://www.nysacho.org/directory/ for instruction. DOH will then assist in determining next steps which may include transporting the affected individual to a medical facility, instruction regarding quarantine in place, and contacting the Local Health Department (LHD) for direction on mandatory quarantine or isolation procedures, including help identifying an appropriate location for such quarantine or isolation.

4. Can the protocol for supportive housing tenants with symptoms be the same as shelter clients? i.e. taken to a hospital and if they test positive are kept in the hospital

The question posed does not accurately reflect State guidance. The State has issued guidance on the screening protocols for supportive housing providers, as well as shelter providers, which are summarized on the next page. The document entitled, “Guidance for Operators of Facilities Providing Housing to Individuals who are Homeless and Supportive Housing, or Organizations Making Referrals to Such Facilities,” is also attached. At the direction of NYS DOH, it may be possible to isolate an individual in their existing unit, making modifications such bringing meals to residents instead of them eating in a congregate dining room, setting aside a specific restroom for their use, etc. Consultation with NYS DOH is essential, as each person’s needs and the ability of each program to meet those needs must be separately assessed.

Resident Screening Protocols

Current residents and all new potential residents at intake should be screened to determine if special action should be taken before admission, using the following three questions:

1) In the last 14 days, have you traveled to an affected country? A current list for which the CDC has issued a Level 2 or 3 travel designation related to COVID-19 may be found at this CDC link:
2) Have you had contact with any person under investigation or person known to have returned from an affected country (same list as Q1) within the last 14 days, OR with anyone with known COVID-19; and

3) Do you have any symptoms of a respiratory infection (e.g., cough, sore throat, fever, or shortness of breath)?

If the individual answers “Yes” to Question 1 or Question 2, but “No” to Question 3: contact NYS DOH at 1-888-364-3065 or your LHD at https://www.nysacho.org/directory/ for instruction. If self-imposed quarantine is advised, seek an appropriate location for the individual within the facility or alternate facility.

If the individual answers “No” to Question 1 or Question 2 and “Yes” to Question 3: contact NYS DOH at 1-888-364-3065 or your LHD at https://www.nysacho.org/directory/ for instruction. If self-imposed quarantine is advised, seek an appropriate location for the individual within the facility or alternate facility.

If the individual answers “Yes” to Question 1 or Question 2, and “Yes” to Question 3:
- Provide a surgical mask and ask that the individual(s) put the mask on.
- If the facility has a medical clinic that is open, escort the individual directly to the clinic.
- Isolate in private room, with door closed if possible.
- Contact the NYS DOH at 1-888-364-3065 or your LHD at https://www.nysacho.org/directory/ for further instruction, including transport to their recommended medial facility if necessary. The receiving medical provider and transporter should be notified in advance and informed of potential concern for COVID-19.

5. We have had some tenants go to the hospital and return with little information. Asking if their discharge papers can include if they were tested for COVID-19.

When making the initial referral to the NYS DOH hotline, it may be helpful to ask how the information will be conveyed back to the program about the person’s test results. It should be noted that HIPAA restrictions do not prevent sharing of medical information directly related to public health crises. However, test results are normally provided to the individual who is tested.

6. What are the quarantine protocols for the SRO residences? (i.e. shared bathrooms and kitchens) These individuals cannot quarantine in place, does the state have alternate housing resources for these tenants?

Residents of SROs should follow screening protocols as contained in the, attached “Guidance for Operators of Facilities Providing Housing to Individuals who are Homeless and Supportive Housing, or Organizations Making Referrals to Such Facilities.” Only NYS DOH and/or the local health department can determine the most appropriate living situation for the resident; the needs of each resident have to be assessed on an individual basis. Local health departments (LHDs) are required to help individuals obtain
an appropriate housing location as needed when the individual requires isolation or quarantine.

7. If quarantined residents are unable to buy food and other necessities, how can providers support these tenants in making sure they receive food and medicine? Is the state looking at delivering meals? LHDs have been provided specific guidance from New York State DOH that instructs that the LHDs must help those isolated or quarantine meet their social, medial, and economic needs. New York State strongly encourages providers to help respond to the needs of those who are quarantined or isolated as a result of COVID-19, and to coordinate any available assistance with LHDs. Please see link below: https://www.governor.ny.gov/sites/governor.ny.gov/files/atoms/files/Interim_Conainment_Guidance_COVID-19.pdf

8. Can the state provide personal protective equipment (PPE)? In general, NYS DOH should be consulted about the need for PPE in dealing with a specific situation. NYS DOH guidance indicates that masks are needed by those who have or are thought to have COVID-19. Personal respiratory protection is not needed for individuals cleaning or disinfecting unless recommended by product labels. Providers should read and follow all label instruction for safe and effective use of products. Following use, all gloves and other disposable items should be place in a bag that an be tied closed before disposal with other wastes. Workers should wash hands with soap and water for at least 20 seconds immediately after removing gloves or use of an alcohol-based hand sanitizer if soap and water is not available. Providers needing supplies that they cannot obtain elsewhere should contact their LHD or contact their local emergency management office. Contacts for LHDs can be found at the following link: https://www.health.ny.gov/contact/contact_information/. The following link can be used to identify the appropriate county emergency management office: https://www.nysema.org/directoryNew.html. It should be noted that availability of masks and some cleaning and disinfecting items is currently limited. NYS is working to acquire needed equipment and supplies.

9. If providers are running low on cleaning supplies, can the state provide some? How can providers get the state hand sanitizer? Providers should contact their LHD or contact their local office of emergency management using the links noted above.

10. Some funders (OCFS) have provided guidance on screening visitors to congregate settings. Is this being recommended for all settings? Can the state provide guidance on visitor policies? Screening protocols for residents, volunteers, and staff are included in guidance issued by OMH and OASAS: Guidance for NYS Behavioral Health Programs, General COVID Guidance for OASAS and OMH, and OTDA also released “Guidance for Operators of
Facilities Providing Housing to Individuals who are Homeless and Supportive Housing or Organizations Making Referrals to Such Facilities” which includes screening protocols that should also be used for visitors and is included with this transmittal.

11. Will case management staff who are contractually required to conduct home visits be permitted to contact tenants by phone or video conference? The providers are looking for contractual flexibility for the contract scope and budget.

For OMH residential programs, see OMH telemental health guidance posted here: [https://omh.ny.gov/omhweb/guidance/](https://omh.ny.gov/omhweb/guidance/). For Telehealth guidance issued by OASAS, see [Telepractice Waiver Update - 3/18/20](https://omh.ny.gov/omhweb/guidance/). Please contact your contract manager with additional questions.

12. Where do providers send clients for testing, and when should they do so? Is the guidance the same across agencies?

The guidance issued by all State agencies to providers is the same: providers should follow the above resident screening protocol questions for current residents and all new potential residents. If contacting the NYS DOH hotline is indicated based on the answers to the screening protocol, DOH will provide direction to local testing sites. **No person should be sent for COVID19 testing to a hospital or testing site without going through the NYS DOH hotline or LHD.**

13. What support is available to help clients who are ill recuperate in their home v. sending them to over-crowded ER’s? Case management staff can provide limited support, but they do not have the training to safely “nurse” clients recovering from an illness, or even monitor them. b. Can the state support the deployment of home health professionals, for example, to reduce the pressure on the health systems? c. Can the state provide personal protective equipment for staff (asked above)?

   a. Each individual’s situation is likely to be different. It is essential to work with NYS DOH, the LHD, and/or the resident’s health care provider to address the needs of each individual. In some cases, the person may not need any ongoing medical support; in others, they may need to be hospitalized.
   b. The person’s health care provider or Health Home Care Manager may make referrals for home health care where appropriate.
   c. See #8 above.

14. Should/can the local Department of Homeless Services or Department of Social Services screen clients before sending them to shelters? Screening at the earliest point of entry into the shelter system would facilitate the use of appropriate personal protective equipment (PPE), limit exposure and prompt referrals to the best setting. Policies regarding shelter intake and screening are established on by social services districts consistent with local service delivery systems. The attached “Guidance for Operators of Facilities Providing Housing to Individuals who are Homeless and
Supportive Housing, or Organizations Making Referrals to Such Facilities” indicates how screening should be conducted.

15. Housing providers want to know whether they will be reimbursed for disinfecting their residences or for motels if they need to relocate people to prevent spread of virus?

Provisions within most State agency contracts allow providers to move up to 10% of the total funding between budget categories. Organizations are encouraged to track expenditures related specifically to COVID19. This information will allow NYS to identify the extent of the need and whether or not such expenditures can be accommodated within the current contract. LHDs have been provided specific guidance from New York State DOH that instructs that the LHDs must help those isolated or quarantine meet their social, medial, and economic needs. New York State strongly encourages providers to help respond to the needs of those who are quarantined or isolated as a result of COVID-19, and to coordinate any available assistance with LHDs.

NYS recognizes the invaluable role played by supportive housing providers in housing some of the most vulnerable persons in the state. While your agency’s response to the COVID-19 crisis must be consistent with these answers and the attached documents, we acknowledge that we are in an unprecedented time in which the situation is rapidly changing. We recognize that COVID-19 is having a significant impact on clients, the community, and the agencies who serve them. Please keep in contact with your State agency contract manager via e-mail.