GLASS DOOR'S HOSTELS

HOW WE ARE ASSESSING CLINICAL VULNERABILITY AND MANAGING COVID RISKS INSIDE OUR HOSTELS

27 NOVEMBER 2020

GLASSDOOR

WHAT OUR CASE STUDY COVERS

- About Glass Door
- Hostels overview
- · Public Health involvement
- · Referral pathway
- Clinical triage
- Response to symptomatic guests
- GP and community nursing support
- · What next?

ABOUT GLASS DOOR

- 20+ years' experience providing night shelters
- 2019-20: 170 spaces per night in 5 shelter circuits (30-35 in each)
- Year-round casework: tailored advice, advocacy and practical assistance
- · Open access







GLASSDOOR

HOSTELS OVERVIEW

- · New covid-safe model
- Two hostels Paddington and Victoria
- Capacity for 92 guests each night
- Self-contained bedrooms
- Bathrooms shared by pair or small cluster (max 4)
- Three meals a day provided
- 24/7 staff presence
- Hostel caseworkers on site 5 days a week
- Dinner service for those who can't access hostel

PUBLIC HEALTH INVOLVEMENT

- Early involvement of Public Health contacts for Local Authority
- · Planning meetings
- Public Health formal sign off on our plans before launch
- Key recommendations from our Public Health contact:
 - guests asked about current covid symptoms before and again on arrival
 - daily temperature and wellbeing checks
 - masks worn by all guests & staff except when a guest is in room /shower
 - · own bedroom required
 - bathroom ratios (1:4 max)
 - · limit staff and volunteer turnaround
 - · establish protocol for symptomatic guests
 - · group clinically vulnerable guests together in hostel layout

GLASSDOOR

HOSTEL REFERRALS

- · As open access as possible
 - · no local connection or recourse to public funds required
 - · guests must have low support needs and be able to evacuate safely
- We accept referrals from:
 - Glass Door caseworkers
 - · a list of approved external referrers
 - individuals can self-refer by coming to meet a Glass Door caseworker
- · Referral form is online
 - On a hidden web page
 - Referral data feeds directly into InForm from web form
 - Waiting list is paused when too long closed to new referrals

HOSTEL REFERRAL PATHWAY

- · Hostel referral form submitted by caseworker / external referrer
 - · Form asks about mobility issues, support needs, risk level
 - · Not possible to refer when the waiting list is temporarily paused
- Referral form reviewed by Guest Services Officer
 - · Exclusions criteria framework is used to confirm referral is appropriate
 - If concerns, escalated to Co-Head of Casework for decision
 - Referral accepted / rejected
 - Accepted referrals added to waiting list (on InForm)
- · Vacant hostel spaces filled from waiting list
- Prospective guest phoned to offer space
 - Asked about current covid symptoms (avoid symptomatic guests presenting)
- · Guest arrives at hostel
 - Temperature check
 - Health assessment asked about current covid symptoms and assessed for clinical vulnerability

Support needs assessment	Does the applicant have any alcohol or drug misuse issues? Please provide details of effects on behavior, triggers and any treatment.*
Does the applicant have a physical impairment or condition that means they would be unable to evacuate a building independently via stairs in the event of an emergency or would be unable to wash themselves independently in a bath/shower without adaptations? (if yes, the guest is not suitable for our hostst.)."	angers wire untractional
	<i>#</i>
	Does the applicant have a history of violent or aggressive behaviour, arson or abuse of others? Including property damage, exploitation and sexual assault. Please provide details (dates, circumstances, triggers).*
Does the applicant have any mobility issues that would affect their ability to comfortably walk up five flights of stairs several times per day unaided? This will not impact on their ability to get a space but will be used to help us plan where in the building to place the guest."	h
	Does the applicant have any history of being vulnerable to abuse or exploitation (including self-neglect)?*
h	4
Do they have any medical issues which it is important for staff to be aware of? *	Does the applicant have a recent history (with the last two years) of self-harm or suicide? *
4	
Does the applicant have any history of mental health issues? Please provide details of symptoms,	1
including effect on day-to-day living and interactions with others and details of any current treatment.*	Please provide any other relevant information about whether the applicant poses a risk to themselves or others (women and children). Include behavioural needs, additional learning needs and/or mask exemptions
	,
	PREVIOUS PAGE SUBMIT

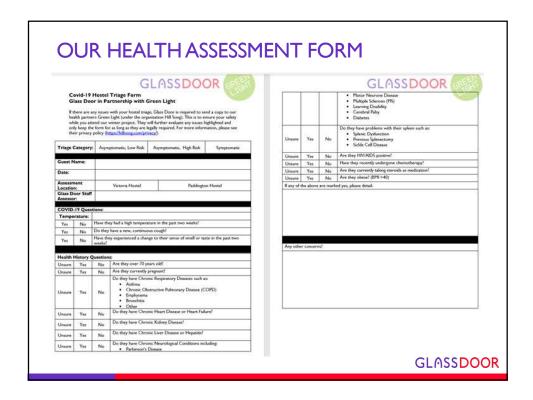
CLINICAL TRIAGE – OPENING DAY

- · Green Light medics on site
- · Guest arrives and immediately has health assessment with Green Light
- · After assessment, Green Light escort guest into guest induction room
 - · Green light inform Glass Door staff if guest is clinically vulnerable
- · Guest receives hostel induction and signs code of conduct with staff
- Staff allocate guest a bedroom
 - Based on guest's clinical vulnerability, gender and mobility
- · Health assessment form is scanned and stored by Glass Door
 - clinical vulnerability is recorded on guest's InForm record

GLASSDOOR

CLINICALTRIAGE – DAYTWO ONWARDS

- · Process is same but Green Light no longer on site
- · Glass Door staff complete health assessment form with guest
- · Any concerns that require clinical input are escalated to Green Light
- · Glass Door staff contact Green Light by phone / email
- · If concerned, Green Light will come out in person to assess guest



RESPONSETO SYMPTOMATIC GUESTS

Most likely to discover symptoms at health assessment triage, daily wellness check or if guest reports symptoms. In any of these cases:

- · Guest is immediately isolated
- NHS Find and Treat is called
- · Find and Treat determine if guest needs covid test
- If guest needs test, they will come to hostel to do rapid test
- If it's out of hours, guest isolates in room until Find and Treat are available
- If covid test result is positive, Find and Treat transport guest to Mildmay Anything guest has touched is cleaned
- · Guest can return to hostel once all clear of covid

GP AND COMMUNITY NURSING SUPPORT

- · If an unmet health need is discovered during health assessment triage:
 - · Contact guest's GP or local GP if they're not registered
 - · Contact III if urgent care or clinical advice is required
- · Agreement in place with local GP practice
 - · Happy to register our guests as new patients, regardless of local connection
 - · Point of contact for health needs identified by health assessment triage
 - Also providing ongoing GP support
 - Phone/online consultations with guests
 - May arrange clinic hours on site at hostel
- · Homeless Health community nursing team support:
 - Administering flu vaccinations for hostel guests
 - · Offering clinic hours at hostel or at the Passage (Victoria)

GLASSDOOR

WHAT NEXT?

- 92 v 170 spaces a night last year
- Hostels at capacity
- · Waiting list closed on day three
- · Expected increased need early next year
- Options for opening night shelters
 - Measuring CO2 levels within venues
 - Access to rapid response testing
 - Early access to vaccinations

Possibility to help hundreds more people this winter

ANY QUESTIONS?