



Interim Guidance for Sobering Care Providers in Response to COVID-19

The occurrence and risk from substance use disorders is not lessened during this time. Vulnerable populations, including persons experiencing homelessness and those with symptomatic substance use disorders, may be at risk for infection during an outbreak of COVID-19. This virus has spread rapidly, and although evidence is emerging rapidly about the [transmissibility, severity, and other qualities](#) of this coronavirus, there are current precautions everyone can take to help respond to this pandemic.

Many recommendations have emerged to help decrease the risk to of COVID-19 which can be implemented in sobering centers during the provision of care during acute intoxication. The following guidance may be applicable for sobering centers and alternative care settings providing care to individuals who are acutely intoxicated.

Masks: Have staff wear masks at all times. Guidance for type of mask (surgical, cloth, respirator-level) is dependent based on new COVID-19 information, the level and type of care being provided, whether working with confirmed or suspected COVID-19 cases, and the availability of the supply chain. Refer to the latest CDC guidance for the [Shelters](#) and [First Responders](#).

As able, place surgical masks on all admitting clients.

Physical Distancing: Create a physical space to allow 6' separation at all times. This may involve re-configuring clinical and dorm space and reducing the number of clients served at any one time. Place visual cues indicating 6' of separation in open spaces, including hallways, front entrances, and any location where staff or clients may congregate. Use physical barriers to encourage physical distancing and protect staff, such as adding an extra table to the front entrance, moving staff out of open areas

Screening: Screen employees and incoming clients for COVID-19 symptoms, including temperature, before they enter the building. Common signs of illness may include fever, coughing, or shortness of breath. Coordinate with your occupational health program as able to establish self-monitoring guidelines.

Symptomatic individuals: If not already on, provide a mask on any symptomatic person. Minimize the number of staff members who have face-to-face interactions with clients with respiratory symptoms.

Transportation: Have a trained Emergency Medical Service/ Emergency Medical Technician assess and transport anyone you think may have COVID-19 to a healthcare facility. Depending on local protocols, it may be recommended to contact your receiving facility before contacting transportation.

Cleaning: Continuously clean the facility throughout the day. This may likely increase the amount of cleaning typically provided in the facility. Provide cleaning in restrooms after client access.

Other:

Limit visitors to your facility and limit the number of volunteers.

NOTE: This guidance is informed by CDC recommendations as of 4/26/2020 and we will update as new information emerges. *Is your sobering center operating as a quarantine or isolation site? Need more support? Please reach out and we will help connect you to the right people and protocols.*