

Rutland Regional Medical Center COVID-19 Mendon Mountain View Congregate Isolation, Quarantine & Recovery Housing

How to Make a Referral

1. Referring agency will initially assess whether the individual meets the criteria for admission at the site. Guests of COVID-19 recovery housing meet the following criteria:
 - ✓ Test positive for COVID-19 (confirmed case);
 - ✓ Minimal or no symptoms;
 - ✓ Require self-isolation due to risk of infecting others during recovery and have no other suitable place to self-isolate;
 - ✓ Do not require hospital level of care (may be discharging from a hospital or referred directly from current housing);
 - ✓ Do not require assistance with daily living and can self-evacuate the building if needed; **and**
 - ✓ If under 18, must be accompanied by a parent/guardian for appropriate supervision.
2. Referring agency will ensure that they have what they need to complete the referral via phone:
 - ✓ Permission from the client to make the referral
 - ✓ Access to the client during the referral conversation (conference call or sitting in the same room at a safe distance) to help answer questions
3. To initiate a referral, please call Rutland Regional Medical Center (RRMC) Staff at the Mendon Mountain View at: **802-552-8320**. You will be asked to complete and send the following to the RRMC referrals email: referralsmmv@rrmc.org:
 - a. RRMC referral form;
 - b. Visiting Nurse Association (VNA) consent form;
 - c. Signed Guest Consent form (includes guest expectations), **and**
 - d. Confirmation of testing.
4. **Please do not send guests to the site until you have received confirmation of placement.** Upon receiving all required information/documentation and determining that the individual is accepted at the site, RRMC staff will confirm placement, ensure that the guest and RRMC staff are both prepared for arrival, and help coordinate transportation.
5. Clinical Staff with the VNA & Hospice of the Southwest Region at the RRMC Mendon Mountain View site will work to arrange telehealth care for individuals if they are not arranging their own care.
6. Guests' Primary Care Providers (PCPs) and VNA HSR staff will participate in the discharge process to provide final authorization that staff can discharge guests.



Checklist for Referring Organizations

Any referring organization will be asked to provide the following information (as available) from the potential guest during the initial phone call to support staff in assessing appropriate placement.

- Guest Name
- Date of Birth
- Do you have a Release of Information or can you complete one now? (Verbal and/or written)
- Are they on Medication Assisted Therapy? (this is not a barrier, just important)
- Living situation – what is the reason why they do not have a place to self-isolate? Where will they return to when they recover?
- Date of test – place and verification of positive result
- Date of onset of symptoms, if known
- Current symptoms
- Ability to care for self – for example ambulating, doing personal laundry, driving, taking medications, managing any chronic conditions
- Supply of medications – will they have at least 14 days with them when they arrive? If not, who orders their prescription?
- Are there any safety plans in place that we need to be aware of?

Please do not send guests to the site until you have received confirmation of placement from RRMC.

