ASPR TRACIE Technical Assistance Request

Request Receipt Date (by ASPR TRACIE): April 6, 2020
Response Date: April 8, 2020
Type of TA Request: Standard

Request:

ASPR TRACIE received a request to identify (1) resources to assist outpatient centers in documenting clients experiencing homelessness who have been tested for COVID-19; and (2) information on any states that have opened designated shelters for people experiencing homelessness who have tested positive for COVID-19.

Response:

The ASPR TRACIE Team reviewed existing resources; namely our COVID-19 At-Risk Individuals Resources page. We also conducted a search online for other relevant materials. The following two sections in this document provide the resources that we were able to gather in response to the requestor’s inquiries.

Please refer to the Centers for Disease Control and Prevention’s Coronavirus Disease 2019 webpage for the most up-to-date clinical guidance on COVID-19 outbreak management.

I. Guidance Resources


This web page provides links to multiple resources specifically geared towards individuals experiencing homelessness and COVID-19.


This document includes a checklist for homeless shelters to consider when planning for and responding to the COVID-19 outbreak in homeless shelters.


This web page provides resources to support those experiencing homelessness, including guidance for homeless service providers, frequently asked questions, cleaning and
disinfection information, planning guidance, hand washing posters, and street outreach guidelines.


This document offers guidance to persons experiencing homelessness and the providers that serve them. It provides infection prevention information, identifies staff and resident education needs, lists necessary supplies, provides cleaning instructions, and identifies ways to reduce the likelihood of COVID-19 cases. NOTE: Pages 5-6 provide information regarding actionable steps for symptomatic clients.

II. **Shelters for People Experiencing Homelessness with COVID-19**

ASPR TRACIE conducted an online search for articles that referenced state and local shelters for people experiencing homelessness and how they were preparing for and managing clients who tested positive for COVID-19.

McDonald’s (2020) blog—posted on the National Alliance to End Homelessness website—is called *COVID-19: What State and Local Leaders Can Do for Homeless Populations* and describes, in general, how funding to homeless service providers can be used to reduce the risk of disease transmission.

The following articles highlight state and local examples of how shelters are working with clients who are waiting for test results or have tested positive for COVID-19.


In Washington, DC, the Department of Human Services is notifying clients when someone who has been staying at a homeless shelter has tested positive for COVID-19. Those who were in close contact with confirmed cases and clients with overall higher risk (e.g., older clients) are moved to a quarantine site (a vacant hotel room).


After receiving reports about several clients who tested positive for COVID-19, the city of Brockton (MA) stood up heated tents to house homeless “individuals whose health needs to be monitored after exposure to a positive case, or while waiting for their test results.” “Isolation hotels” with 24/7 nursing and security support are being used to house those who tested positive.

This article addresses the experience of Mecklenburg County, NC, which has leased out a hotel for people experiencing homelessness and “have tested positive for the virus, display symptoms and are awaiting results, or have been exposed to someone with the virus and need somewhere to isolate.”


This memo was sent to homeless assistance providers and emphasizes steps to take to prevent disease spread among clients and staff. The memo lists, in priority of order, homeless individuals for which shelter at hotels/motels should be located, beginning with those who:

1) Test positive for COVID-19 who do not require hospitalization but need isolation (including those exiting from hospitals);
2) Have been exposed, or potentially exposed to COVID-19 who do not require hospitalization;
3) Persons needing social distancing as a precautionary measure, particularly for high-risk groups such as people over 65 or with certain underlying health conditions (respiratory, compromised immunities, chronic disease); and
4) Other homeless populations that are not among the foregoing categories but whose living situation makes them unable to adhere to social distancing guidance.”


In Baltimore, the Mayor’s Office of Homeless Services worked with service provides and public and private agencies to develop five interventions specific to COVID-19:

1. Emergency Shelter Assessments and Testing (includes a shelter screening tool, telephonic screening, and COVID-19 testing and isolation);
2. Hospital Discharge Policies (depending on COVID-19 status);
3. Isolation Sites (for those awaiting results and/or recovering from the virus);
4. Expanded Capacity for Social Distancing in Shelters
5. Outreach to People Experiencing Unsheltered Homelessness