

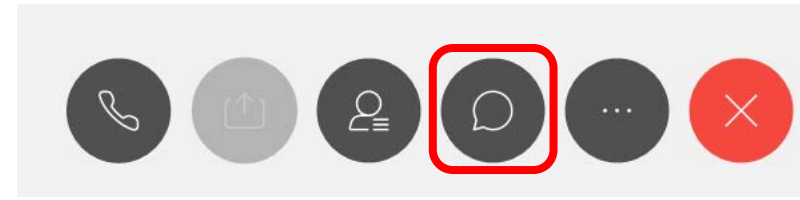


Office Hours: COVID-19 Planning and Response

April 3, 2020



Select the Chat icon to make a comment or ask a question.



Be certain the To field is set to **All Participants**



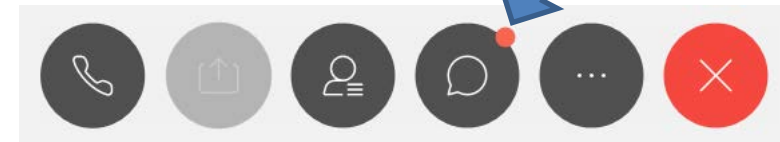
Host
Presenter
Host & Presenter
All Attendees
All Panelists
Jeanne Goodman
All Participants

To: All Participants ^

Greetings!



An orange dot on the Chat icon indicates that you have unread messages.



Panelists/Resource Advisors

Centers for Disease Control and Prevention

- Emily Mosites, PhD MPH- COVID-19 At-Risk Population Task Force, Senior Advisor on Health and Homelessness

Department of Housing and Urban Development

- Norm Suchar, Director, Office of Special Needs Assistance Programs (SNAPS)
- Brett Esders, Senior Program Specialist, SNAPS
- Marlisa Grogan, Senior Program Specialist, SNAPS

Department of Veterans Affairs

- John Kuhn, LCSW, MPH, National Director, Supportive Services for Veteran Families (SSVF)
- Sean Clark, Director of VHA Homeless Program Office's Veterans Justice Program



Panelists/Resource Advisors

Vermont Network Against Domestic & Sexual Violence

- Amy Torchia, Children's Advocacy Coordinator

Impact & Learning from Futures Without Violence

- Dr. Tien Ung, Program Director

National Health Care for the Homeless Council

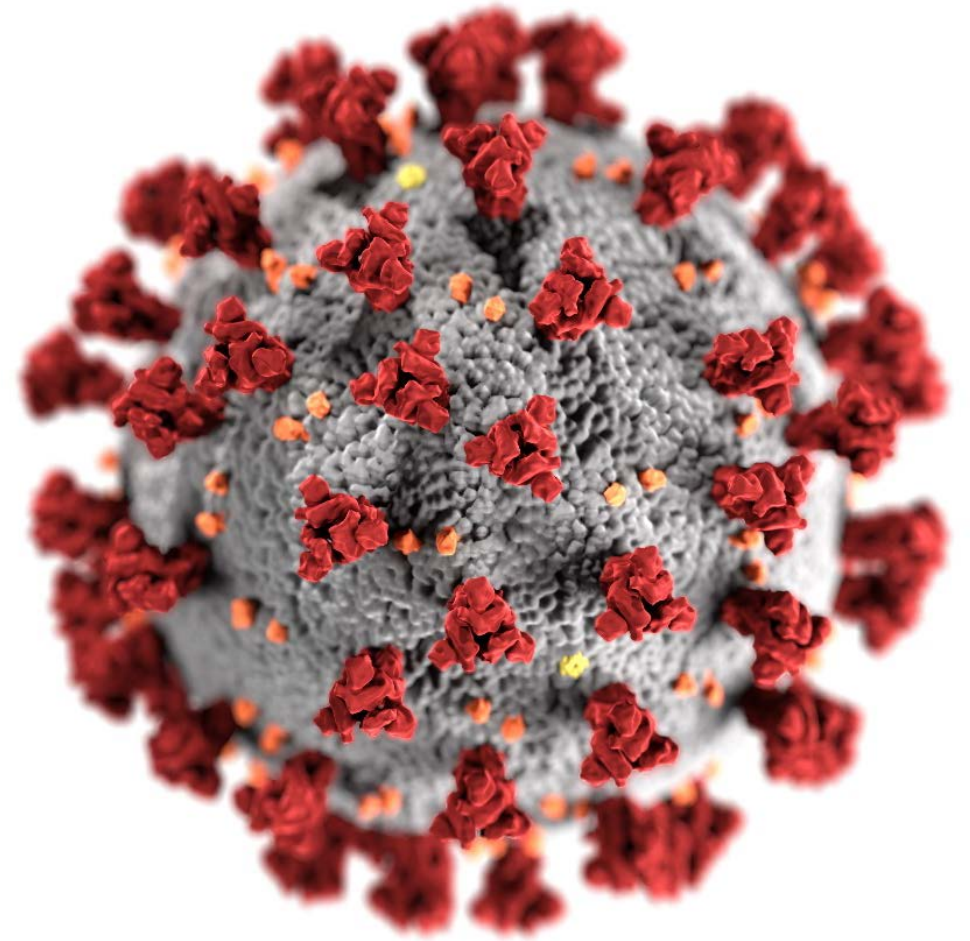
- Barbara DiPietro, PhD, Senior Director of Policy

Agenda

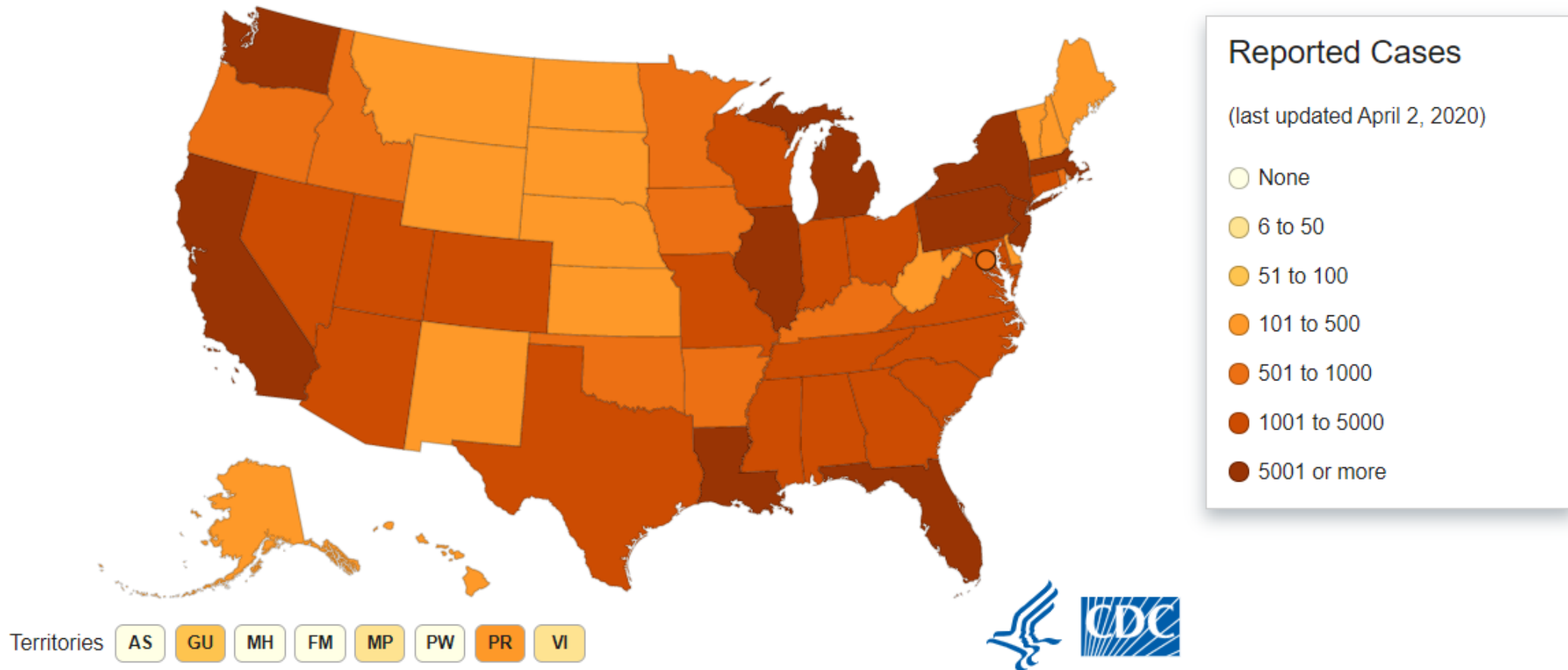
- Updates
 - Centers for Disease Control and Prevention
 - Dept of Housing and Urban Development
 - Dept of Veterans Affairs
 - National Healthcare for the Homeless Council
 - Presentation: Serving Families and DV Survivors
- Q&A

Emily Mosites, PhD MPH
At Risk Population Task Force
COVID-19 Response
Centers for Disease Control and Prevention

COVID-19 and Homelessness Guidance



Over 210,000 cases reported to CDC as of 4/2/2020



CDC guidance related to homelessness

Under “Schools, workplaces, and community locations”

Guidance for shelters and other service providers:

<https://www.cdc.gov/coronavirus/2019-ncov/community/homeless-shelters/plan-prepare-respond.html>

Guidance for people experiencing unsheltered homelessness:

<https://www.cdc.gov/coronavirus/2019-ncov/community/homeless-shelters/unsheltered-homelessness.html>



New tool: Shelter screener

<https://www.cdc.gov/coronavirus/2019-ncov/community/homeless-shelters/>

1. Determine if the client has a fever, by:

- Taking their temperature using a temporal thermometer (see box), or
- Asking “Have you felt like you had a fever in the past day?”

2. Ask the client “Do you have a new or worsening cough today?”

If the client has a fever **OR** a new/worsening cough:

1. Provide a facemask for the client to wear over their nose and mouth, if facemasks are available and if the client can tolerate it.
 - a. If facemasks are not available, advise the client on cough etiquette and provide tissues.
2. Notify management and appropriate healthcare providers, as available
3. Direct them to an isolation room if available, or an available space in the area designated for symptomatic persons
 - a. If your shelter does not have an area for symptomatic people, redirect the person to the location prespecified by your CoC, public health department, and community leadership
4. Let the client know:
 - a. If their symptoms worsen, they should notify someone immediately
 - b. Not to leave their room/the symptomatic area except to use the restroom
 - c. If they leave their room/the symptomatic area, they must wear a mask

Use standard shelter protocols for medical emergencies.



New FAQs

<https://www.cdc.gov/coronavirus/2019-ncov/community/homeless-shelters/>

Frequently Asked Questions

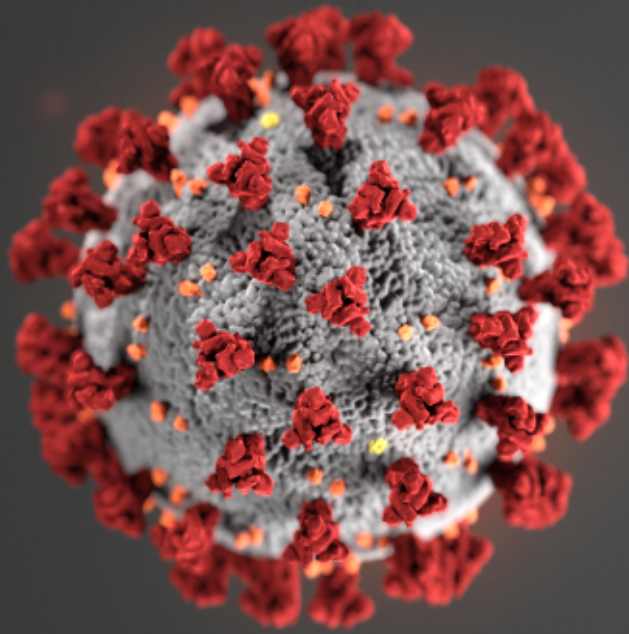
Are people experiencing homelessness at risk of COVID-19?	+
How can people experiencing homelessness protect themselves when COVID-19 is spreading in their community?	+
What should a person who is experiencing homelessness do if they have symptoms consistent with COVID-19?	+
Where can people experiencing homelessness be tested for COVID-19?	+
Where should a person who is experiencing homelessness stay if they are suspected to have COVID-19 or if they have tested positive for COVID-19?	+
Can homeless service providers accept donations?	+
Should homeless shelters screen incoming guests?	+
Should homeless shelters close?	+
Should homeless encampments be cleared?	+



Upcoming CDC materials

- Flyers/posters for communicating with people experiencing homelessness
- Shelter guidance updates





For more information, contact CDC
1-800-CDC-INFO (232-4636)
TTY: 1-888-232-6348 www.cdc.gov

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.



Office of Special Needs Assistance Programs

DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT



Encampments Info Sheet Explained

- CoCs have expressed concern over some of the guidance about clearing encampments
- HUD posted an updated version of the encampments guidance to provide clarifications.
- **Encampments should not be cleared as a punitive measure**
- Requiring people to leave their encampment without alternative service, shelter or housing strategies puts them at risk of further housing instability and puts the greater community at risk of potential virus spread

Encampments Info Sheet Explained (continued)

Appropriate strategies to assist people living in encampments should involve thoughtful community planning and coordinated outreach strategies that offer:

- Safe sheltering options at existing shelters, safe havens
- Services, food and shelter at temporary overflow spaces
- Isolation and quarantine space that may be available based on their symptoms

Non-Congregate Approaches to Sheltering for COVID-19 Response

- Communities may be considering non-congregate sheltering options in their response to COVID-19
- Non-congregate shelter can take many forms outlined in the HUD's document
- CoCs considering non-congregate sheltering options should reference document on HUD Exchange when identifying approach, considering staffing and target population
- CoCs should ensure people experiencing homelessness are included in non-congregate sheltering approaches

Non-Congregate Shelter

- Non-congregate shelter is a community-based response that can benefit many populations including the people experiencing homelessness, the elderly or people who have underlying medical conditions (among others)
- If possible, identifying non-congregate settings where those at highest risk can stay can help protect them from COVID-19
- Local Public Health should direct placement and identify the population that will be served in non-congregate shelter

Amendments ESG & CoC Grants

- ESG: Look at any older funding and reprogram
- CoC: Think about project funding balances and reprogram
- Contact HUD CPD Field Office about amendments
 - SNAPS is working to expedite grant amendment processes
- Consult resources on the HUD Exchange for information:
 - [Using a Disaster Policy to Fund Infectious Disease Preparedness and Response with ESG](#)
 - [Using CoC Program Funds for Infectious Disease Preparedness and Response](#)
 - [Eligible ESG Costs for Infectious Disease Preparedness](#)

Availability of Waivers (CoC, ESG, HOPWA, Consolidated Plan)

- On March 31, 2020 HUD released a memorandum that outlined the availability of waivers applicable to the CoC, ESG, and HOPWA programs
https://www.hud.gov/sites/dfiles/CPD/documents/COVID-19_Mega_Waiver_03-31-2020.pdf
- These waivers are intended to prevent the spread of COVID-19 and to facilitate assistance to eligible communities and households economically impacted by COVID-19
- To use the waivers, recipients must provide notification in writing, sent to a specific CPD Field Office mailbox, two days before the recipient plans to use the waiver – see LISTSERV MESSAGE

Waivers: Consolidated Plan Requirements

- The 30-day public comment period is waived for substantial amendments, provided that no less than 5 days are provided for public comments on each substantial amendment.
- The requirement for the recipient to follow its citizen participation plan is waived as efforts to contain COVID-19 require limiting public gatherings
- These waivers are available through the end of the recipient's 2020 program year and apply to ESG, HOME, CDBG & HOME programs.

Waivers: Continuum of Care Program

1. Fair Market Rent restriction for Rental Units and Leasing Costs (unit must meet rent reasonableness)
2. Disability Documentation for Permanent Supportive Housing (PSH)-Client self certification or staff observation may certify disability
3. Remove limitation on Eligible Housing Search/Counseling activities to pay for up to 6 months of rental and utility arrears

Waivers: Continuum of Care Program

4. Remove Permanent Housing & Rapid Rehousing Monthly Case Management requirement
5. Housing Quality Standards (HQS) –Suspend Initial Physical Inspection of Unit and Annual Re-Inspection
6. Remove One-Year Lease Requirement

Waivers: Emergency Solutions Grants Program

1. Costs of upgrading or enhancing the HMIS to incorporate activities related to COVID-19 may be paid to recipients that are not the HMIS Lead
2. Homeless Prevention Assistance Re-evaluations must occur every 6 months (versus every 3 months)
3. Suspend monthly Housing Stability Case Management requirement
4. Fair Market Rent restriction for Rental Units and Leasing Costs (unit must meet rent reasonableness)

CARES Act Supplemental Appropriation

- \$4 billion dollar appropriation for the Emergency Solutions Grants Program (referred to as ESG-CV)
- Awards will be provided in two separate allocations of funding focused on COVID-19 homeless response.
 - First Allocation: \$1 billion to existing recipients
 - Second Allocation: \$2.96 billion to eligible ESG recipients based on an adjusted formula

CARES Act Supplemental Appropriation (continued)

- Enhance emergency operations to protect health and safety of people experiencing homelessness, reduce the risk of virus spread
- Assist very-low-income people (up to 50% of AMI) to prevent homelessness and to support CoC recovery through Rapid Re-housing, Diversion, and Homeless Prevention

CARES Act ESG Supplemental Appropriation

Features of the Proposed funding:

- No match requirements
- No caps on component funding
- No citizen participation process, but plan should be published

Prioritize Your COVID-19 Response

- SNAPS understands your #1 priority right now is responding to COVID-19
- HUD will take into account the need for COVID response when considering performance metrics, subrecipient monitoring, governance, and future HUD monitoring and CoC Competitions;
- CoCs are encouraged to be as flexible as possible when thinking through their local competition metrics.



VA TOOLS FOR COVID-19 RESPONSE*

1. Emergency Housing
2. Securing Units to be Vouchered
3. Expanding Access to Prevention

**Guidance as of April 3, 2020 will likely evolve in response to changing conditions.*



1. TEMPORARY HOUSING IN MOTELS/HOTELS

- Reduce risk for most vulnerable: 60+, compromised immune system, and/or lung disease. Triage based on local capacity.
- Referrals should be asymptomatic.
- Need to be eligible for SSVF – homeless Veteran households with AMI below 50%



2. SECURES UNITS TO BE VOUCHERED

- Some Public Housing Authorities have reduced services and suspended housing quality inspections preventing move-in
- SSVF can be used to support move-in and rental costs until PHAs able to process HQS and transition household to voucher



2. MODIFIED ROLES OF SSVF AND HUD-VASH

- SSVF has modified guidance to allow SSVF providers to help HUD-VASH Veterans with TFA Rental Assistance
 - HUD-VASH will continue case management
- New HUD-VASH Referral Packet has been developed
 - SSVF must collaborate with HUD-VASH team to review information sharing, referral process, and prioritization



3. EXPANDING ACCESS TO PREVENTION

- SSVF has expanded access to Veterans at risk of homelessness
 - Stage 2 of the HP screening tool is no longer required to provide financial assistance
 - The requirement that a minimum of 60 percent of financial assistance be spent on literally homeless Veteran households has been waived until Sept 30, 2020
 - TFA is not recommended during eviction moratoriums




COVID-19 AND THE HCH COMMUNITY

Barbara DiPietro, Ph.D.
Senior Director of Policy
April 3, 2020

NEW ISSUE BRIEF: ACTION AGENDA FOR PUBLIC HEALTH & EMERGENCY RESPONSE SYSTEMS

1. Establish Isolation & Quarantine Space
2. Deliver Services While in Isolation/Quarantine
3. Assist Shelters with Screening & Preparations
4. Provide Services to Encampments & Other Unsheltered Homeless
5. Establish Protocol for Transportation to Testing and/or Higher Level of Care
6. Coordinate PPE & Supplies
7. Ensure Continuity of Usual Care for Entire Population
8. Continue Access to Food Programs





COVID-19 & the HCH Community: Needed Actions from Public Health and Emergency Response Systems

Issue Brief | April 2020

The worldwide COVID-19 pandemic is requiring an unprecedented infectious disease disaster response in every community in the U.S. To ensure an effective response effort, public health and emergency response systems must plan for the needs of those experiencing homelessness.

On any given night, [about 568,000 people](#) are sleeping on the street and in shelters, transitional housing programs, or other congregate settings. Every jurisdiction has people experiencing homelessness. This population is [disproportionately older](#); has high levels of chronic medical and behavioral health conditions; and has very limited ability to "stay home," "wash hands," and "practice social distancing." These factors combine to put this population at very high-risk for severe illness according to [CDC guidelines](#). People experiencing homelessness must be recognized as a priority group for public health response.

Health Care for the Homeless (HCH) programs and other local homeless services providers are implementing numerous infectious disease prevention strategies, but individual providers have neither the capacity nor the legal authority to take the significant steps needed to mitigate the spread of COVID-19 in this vulnerable population. This issue brief outlines the critical actions that public health authorities and emergency response systems must take to protect homeless populations from COVID-19, as well as some strategies being implemented and the federal guidance that is currently available to assist the effort.

Table 1. Needed Actions With Related Strategies and Guidance

Needed Actions	Strategies & Guidance
Establish Isolation & Quarantine Space: Need appropriate accommodations for four groups: <ul style="list-style-type: none">• Asymptomatic, but exposed• Symptomatic, awaiting testing/results• Confirmed positive• High-risk older individuals/chronically ill/trail remaining in congregate settings	<ul style="list-style-type: none">• Use motels/hotels, convention/recreation centers, community centers, schools, unused hospital space, FEMA trailers, mobile single room occupancy units, or other community spaces• Expedite permanent housing placements• Expand medical respite programs• CDC: Guidance for Alternate Care Sites and Isolation Sites
Deliver Services While in Isolation/Quarantine: Placing vulnerable, high-need individuals into extended "solitary confinement" may be traumatizing and disconnect people from necessary services, raising chances of clients decompensating and/or leaving against medical advice	<ul style="list-style-type: none">• Understand this population has high rates of mental health and substance use disorders, trauma, and lack of trust in institutionalized systems• Ensure clients' service providers are able to access I&Q spaces to bring health care, case management, and support services as needed• Ensure people have entertainment and are not disconnected from support systems• Ensure staff adopt a "Housing First," trauma-informed approach to those in I&Q spaces—do not expect/require abstinence from substance use

National Health Care for the Homeless Council www.nhchc.org

OTHER RESOURCES

- Dedicated COVID-19 webpage:
 - www.nhchc.org/coronavirus
 - Issue briefs and analysis
 - HUD, CDC, & HRSA materials, local policies & guidance, consumer-specific materials, podcasts, etc.
- Webinars/Weekly Town Hall meetings
 - HUD, CDC, Boston HCH, and Atlanta HCH & CoC (3/20)
 - Seattle-King County HCH (3/27)
 - Street Medicine (4/3)
 - More info: <https://nhchc.org/coronavirus-town-halls/>



Supporting Children & Families Burdened by Housing Insecurity & Homelessness during COVID -19

Tien Ung, PhD, LICSW
Program Director, Learning & Impact
<https://www.futureswithoutviolence.org>





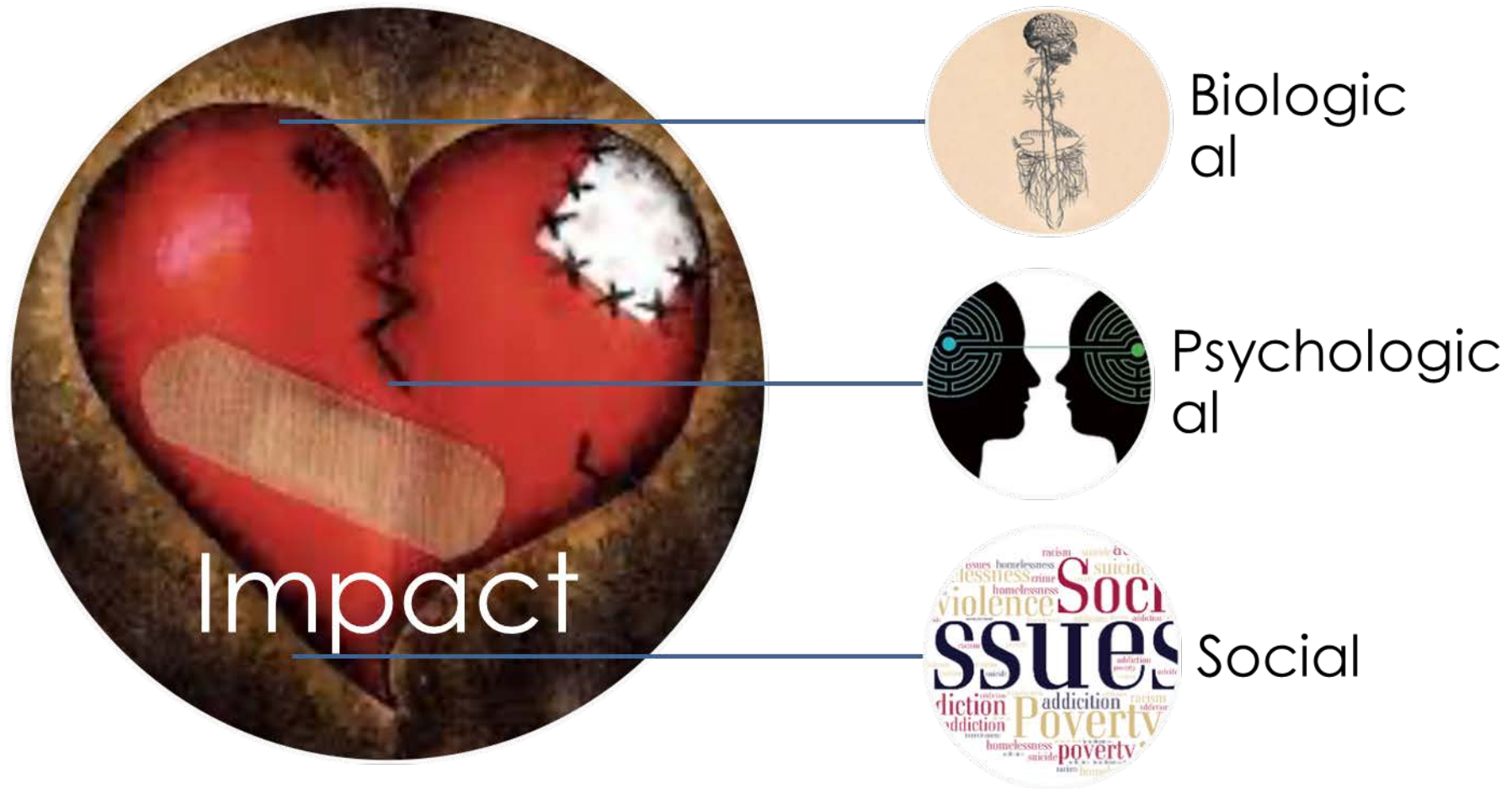
Brief increases in heart rate,
mild elevations in stress hormone levels.

Serious, temporary stress responses,
buffered by supportive relationships.

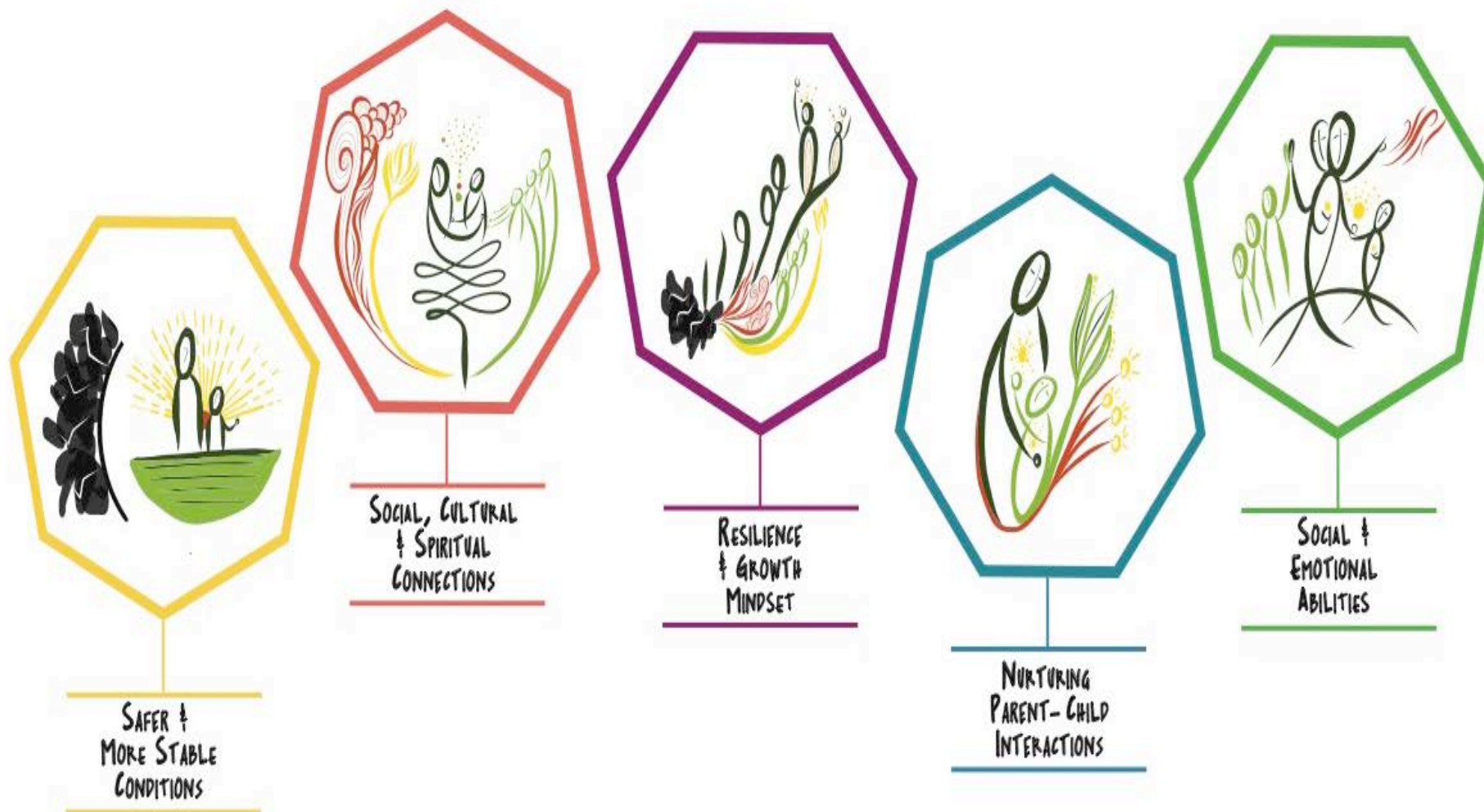
Prolonged activation of stress
response systems in the absence
of protective relationships.

Source: Center on the Developing Child





DOMESTIC VIOLENCE PROTECTIVE FACTORS





How to support families in providing structure and routines to children who are being homeschooled in shelter?

41

- Wide Open School
- Realistic goals – aim for 2 – 4 hours of learning based activities
- Make learning a part of every day routines focused on:
 - Problem solving
 - Counting
 - Reading
 - Vocabulary
- Make it fun
 - Family storyboard
 - Write poetry
 - Draw
 - Family squiggle
- Don't forget physical health
 - Family exercise challenge: squats, jumping jacks, sit ups, push ups, walk



How to support families if a caregiver gets ill?

42

- Learn about families' social networks to proactively co-create alternative childcare plans with parents
- Work closely with medical professionals to determine the severity of illness and act accordingly
- Identify partners who can provide alternative housing options for the person who is COVID positive:
 - Churches
 - Hotels
 - Airbnb - like
- Proactively develop and implement a communication plan for children and their loved one who is sick
- Proactively find & coordinate resources to help the person who is sick access medical care (e.g. – transportation, legal advocacy, etc.)
- For states where COVID has not yet exploded: Stock up on supplies



How to address the specific needs of children and families during a pandemic ?

43

- Enable service & resource access – Identify & collaborate with local service providers
 - Help families access free food resources
 - Virtual substance treatment services
 - Virtual mental health service
 - Virtual advocacy services
- Foster connections with family and friends
 - Find technology for families to use to connect with friends and family
 - Find ways for families to participate in spiritual practices and communities that are virtual
- Promote fun and joy
 - Get toys and learning supplies to families
 - Have shelter game nights with proper distancing
 - ☐ Charades
 - ☐ Have you ever
 - ☐ Sofa Singers
- Encourage mutual aid



Resources

[Domestic Violence Agencies and Shelters](#)

[Promising Futures: Best Practices for Serving Children, Youth, and Parents Experiencing Domestic Violence](#)

COVID responsive resource links

[COVID -19 Relevant Resources for Kids and Families](#)

[COVID -19 Resources for DV Survivors and Service Providers](#)

[Support for Working Families](#)

[Protecting Your Health](#)





Supporting Children and Families in Shelters during Covid-19

Amy Torchia, Children's Advocacy Coordinator
Vermont Network Against Domestic and Sexual Violence

(802) 223-1302 X 1117

atorchia1965@yahoo.com

www.vtnetwork.org



Supporting Families

- Parenting can be hard even in the best of circumstances
- Families in shelters are already feeling stress and crisis + pandemic = more stress and uncertainty
- Stress responses are heightened and it is harder to regulate emotions



The 4 Rs

- Reassure
- Routine
- Regulate
- Relationships



COVID-19 Response – kids & families

- **DV / SV Shelters**

Contingency planning with parents and families.

- **Hotel stays for “hyper-vulnerable”**

To prevent transmission.

- **Help people shelter in place safely**

Hotels - no new shelter intakes.

Suspend time / eligibility limits.

- **Congregate Recovery & Isolation sites**

Resources

- Child Trends Supporting children's emotional well-being: <https://www.childtrends.org/publications/resources-for-supporting-childrens-emotional-well-being-during-the-covid-19-pandemic>
- Sesame Street Caring for Each Other: <https://www.sesamestreet.org/caring>
- Just For Kids: A Comic Exploring The New Coronavirus (3 minute podcast NPR story & comic just for kids!): <https://www.npr.org/sections/goatsandsoda/2020/02/28/809580453/just-for-kids-a-comic-exploring-the-new-coronavirus>
- Futures resources for kids and families: <https://www.futureswithoutviolence.org/resources+for+kids+and+families>
- Vermont Network Askable Adult Campaign: <https://vtnetwork.org/askableadult>

Resources for CoCs and Homeless Assistance Providers on the HUD Exchange

Infectious Disease Prevention & Response page on HUD Exchange

- Submit a question on the [HUD Exchange Ask-A-Question \(AAQ\) Portal](#)

Check back regularly for new posts!

Key Websites with Available Resources

HUD: <https://www.hudexchange.info/homelessness-assistance/diseases/infectious-disease-prevention-response/>

CDC: <https://www.cdc.gov/coronavirus/2019-ncov/community/homeless-shelters/index.html>

NHCHC: <https://nhchc.org/clinical-practice/diseases-and-conditions/influenza/>

USICH: <https://www.usich.gov/tools-for-action/coronavirus-covid-19-resources/>

VA: <https://www.publichealth.va.gov/n-coronavirus/index.asp>

HRSA: <https://bphc.hrsa.gov/emergency-response/coronavirus-frequently-asked-questions.html>

CONTACTS

For additional information or assistance, contact:

- Centers for Disease Control and Prevention:
www.cdc.gov/COVID19; 1-800-CDC-INFO (232-4636); TTY: 1-888-232-6348
- Department of Housing and Urban Development:
[HUD Exchange Ask-A-Question \(AAQ\) Portal](#)
- Department of Veterans Affairs High Consequence Infection (HCI) Preparedness Program:
vhahcigenerall@va.gov

Q & A

