



# Office Hours: COVID-19 Planning and Response

September 10, 2021



# Housekeeping

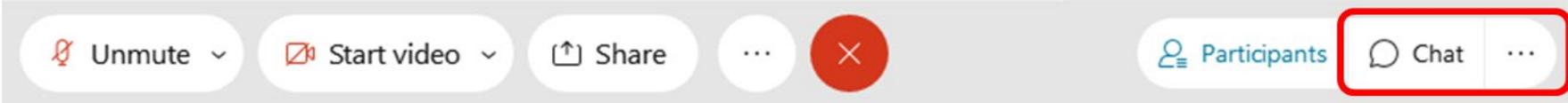
- A recording of today's session, along with the slide deck and a copy of the Chat and Q&A content will be posted to the HUD Exchange within 2-3 business days
- Event information for upcoming Office Hours, along with copies of all materials can be found here:

<https://www.hudexchange.info/homelessness-assistance/diseases/#covid-19-webinars-and-office-hours>

- Password for all COVID Office Hours: **HUD123**
- To join the webinar via the phone, please call in using:  
+1-415-655-0002      Access code: 185 207 6880

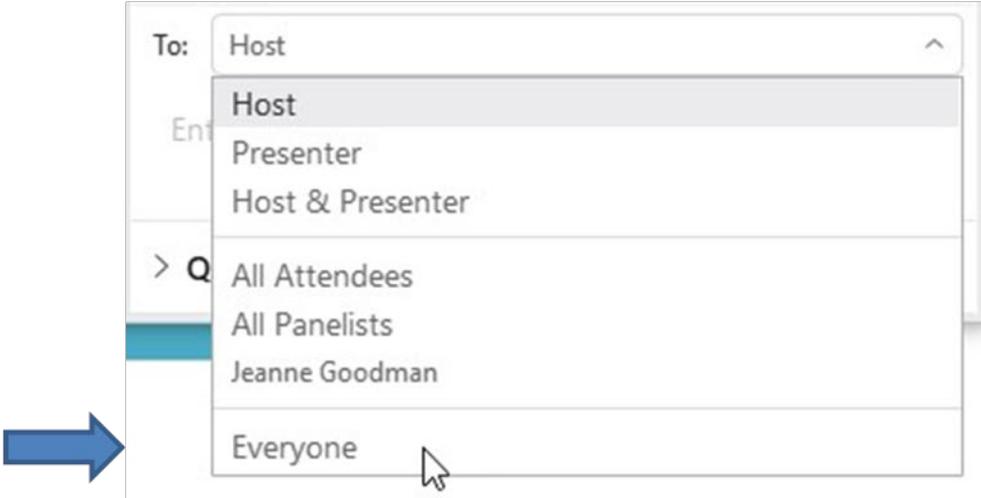
(If you need to call in toll-free, call 1-855-797-9485)

# Chat Feature



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

Be certain the To field is set to **Everyone**



# Speakers & Resource Advisors

## Department of Housing and Urban Development

- Office of Special Needs Assistance Programs
  - Norm Suchar
  - Karen DeBlasio
  - William Snow
  - Brett Esders
  - Lisa Coffman
  - Marlisa Grogan
  - Sharon Singer
  - Latesha Balam-Totten
- Ashley Kerr, HUD TA, Trellis Consulting

## Delaware State Housing Authority

- Cynthia Deakyne, Housing Development Administrator



# Speakers & Resource Advisors

## Centers for Disease Control and Prevention

- Ashley Meehan, MPH, Homelessness Unit, Disproportionately Affected Populations Team

## National Health Care for the Homeless Council

- Barbara DiPietro, PhD, Senior Director of Policy

## Department of Veterans Affairs

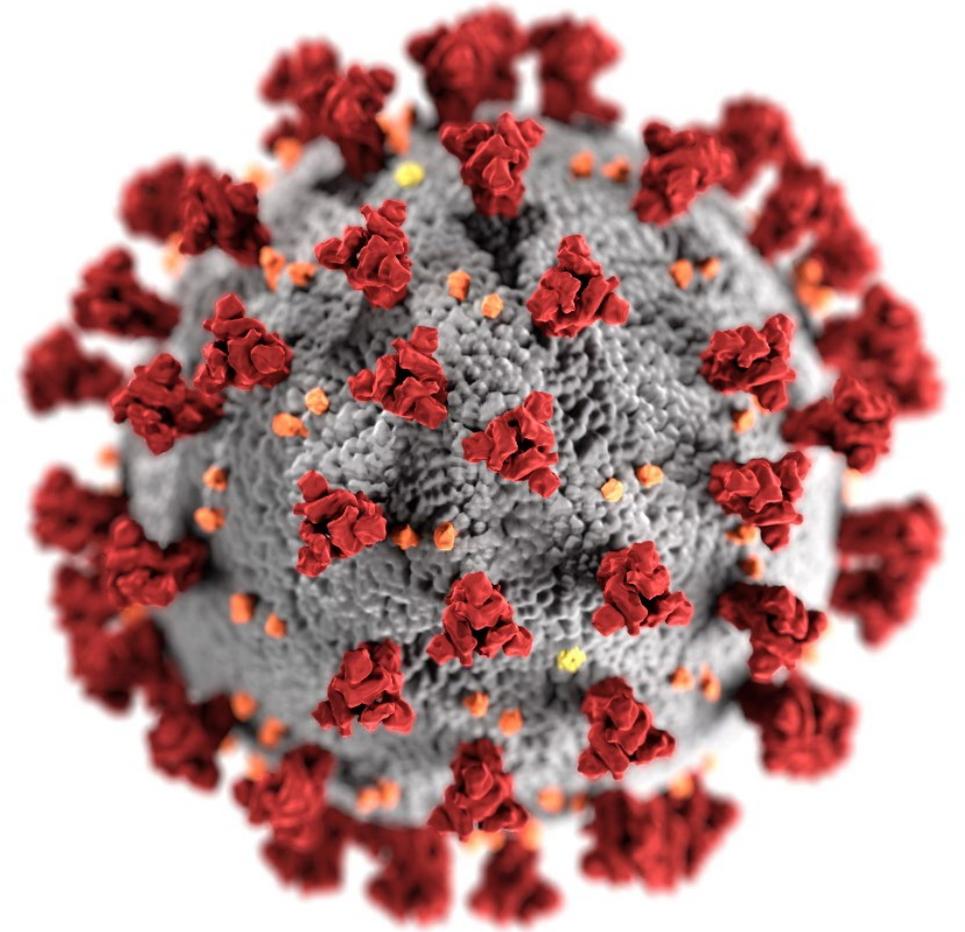
- Dina Hooshyar, MD MPH, Director, National Center on Homelessness Among Veterans (The Center), VHA Homeless Program Office
- Jillian Weber, PhD, RN, CNL, Homeless-PACT National Program Manager, VHA Homeless Programs Office



# COVID-19 and Homelessness

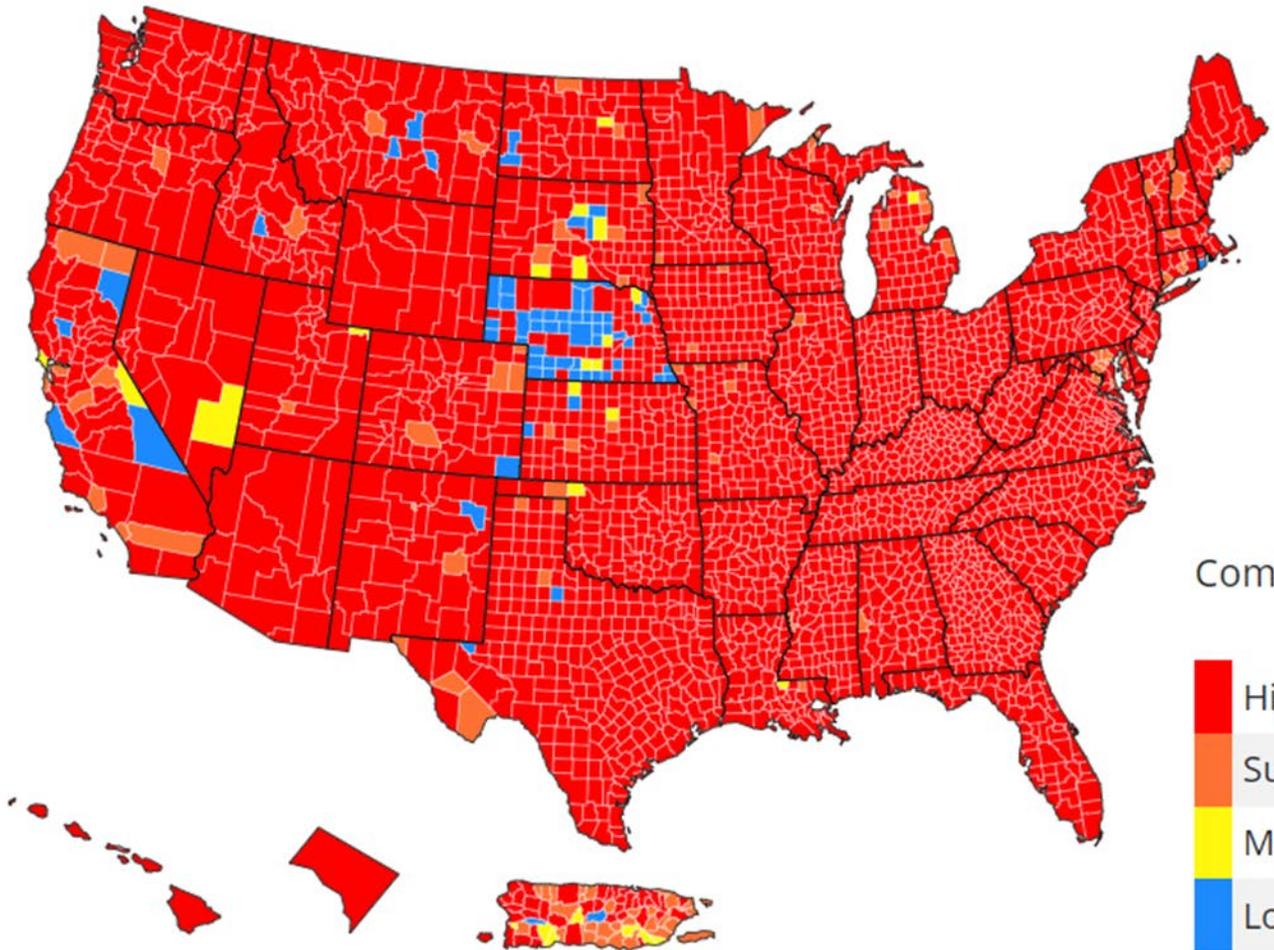
Updates

Homelessness Unit  
Disproportionately Affected Populations Team  
CDC COVID-19 Response



[cdc.gov/coronavirus](https://cdc.gov/coronavirus)

# Community Transmission of COVID-19 by County



Community Transmission in US by County

	Total	Percent	% Change
High	3019	93.76%	-0.28%
Substantial	102	3.17%	0.28%
Moderate	32	0.99%	0.34%
Low	66	2.05%	-0.34%

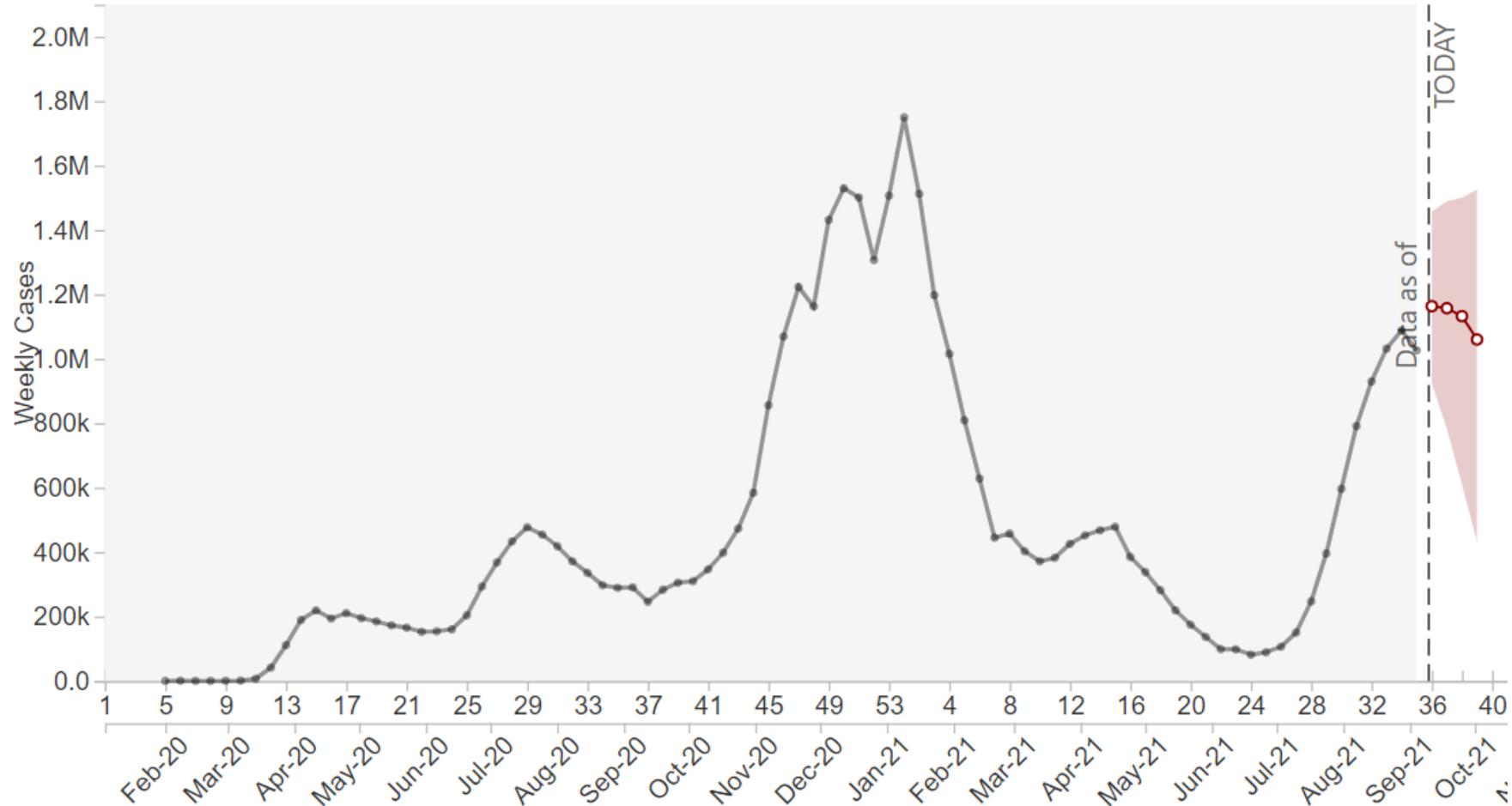
● High   
 ● Substantial   
 ● Moderate   
 ● Low   
 ● No Data



[CDC COVID Data Tracker](#)

# 4-Week Forecasting of National COVID-19 Cases

Observed and forecasted weekly COVID-19 cases in the United States

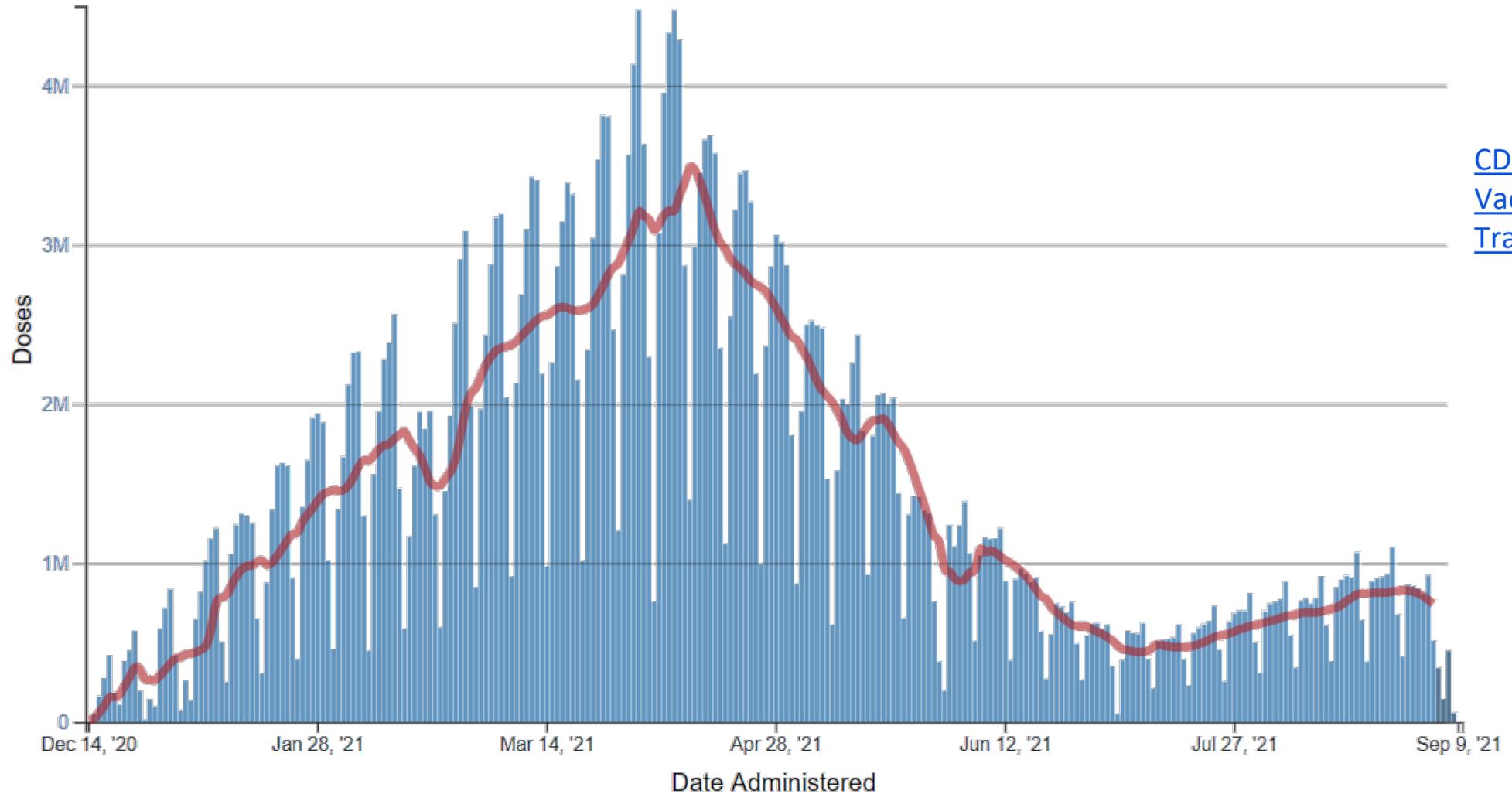


[https://covid.cdc.gov/covid-data-tracker/#forecasting\\_weeklycases](https://covid.cdc.gov/covid-data-tracker/#forecasting_weeklycases)



# COVID-19 Vaccine Doses Administered

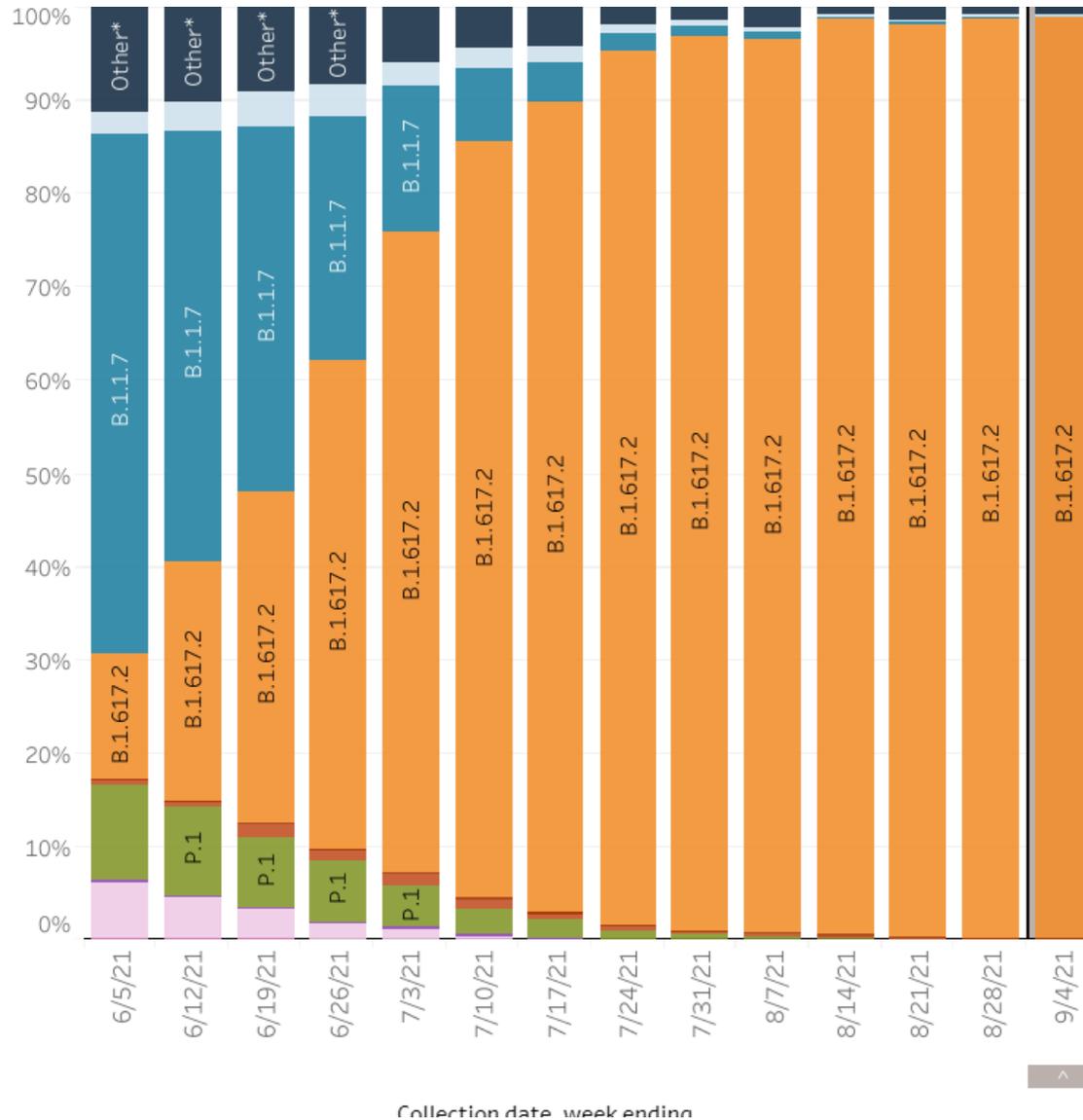
Daily Count of Total Doses Administered and Reported to CDC by Date Administered, United States



[CDC COVID-19 Vaccination Tracker](#)



# COVID-19 Variants



**USA**

WHO label	Lineage #	Type	%Total	95%PI
Alpha	B.1.1.7	VOC	0.1%	0.0-0.2%
Beta	B.1.351	VOC	0.0%	0.0-0.2%
Gamma	P.1	VOC	0.0%	0.0-0.2%
Delta	B.1.617.2	VOC	98.9%	97.8-99.8%
	AY.2	VOC	0.1%	0.0-0.5%
	AY.1	VOC	0.1%	0.0-0.5%
Eta	B.1.525	VOI	0.0%	0.0-0.2%
Iota	B.1.526	VOI	0.0%	0.0-0.2%
Kappa	B.1.617.1	VOI	0.0%	0.0-0.2%
Mu	B.1.621		0.1%	0.0-0.5%
N/A	B.1.617.3	VOI	0.0%	0.0-0.2%
Other	Other*		0.7%	0.0-1.7%

\* Enumerated lineages are VOI/VOC or are circulating >1% in at least one HHS region during at least one two week period; remaining lineages are aggregated as "Other".

\*\* These data include Nowcast estimates, which are modeled projections that may differ from weighted estimates generated at later dates

# Sublineages of P.1 and B.1.351 are aggregated with the parent lineage and included in parent lineage's proportion. Q.1-Q.8 are aggregated with B.1.1.7. AY.3-AY.25 are aggregated with B.1.617.2.

[COVID-19 Variant Information](#)



[COVID-19 Variant Data Tracker](#)

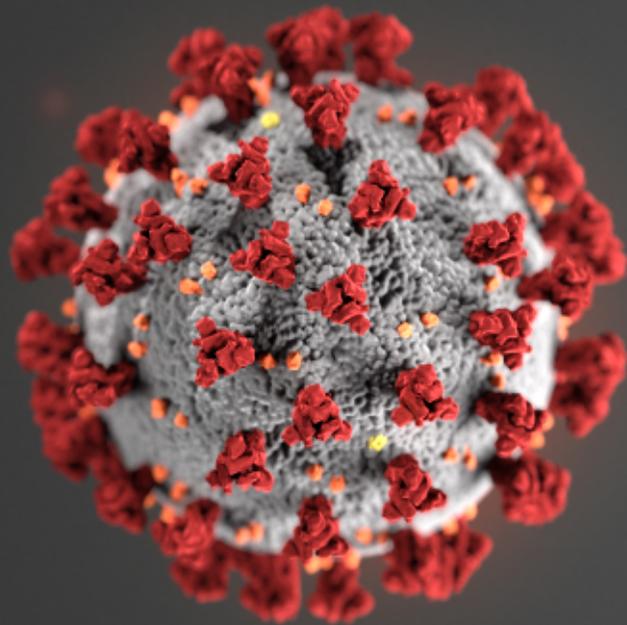
# Recent Publications

## Morbidity and Mortality Weekly Report (*MMWR*)

SARS-CoV-2 Transmission to Masked and Unmasked  
Close Contacts of University Students with COVID-19 —  
St. Louis, Missouri, January–May 2021



[https://www.cdc.gov/mmwr/volumes/70/wr/mm7036a3.htm?s\\_cid=mm7036a3\\_w](https://www.cdc.gov/mmwr/volumes/70/wr/mm7036a3.htm?s_cid=mm7036a3_w)



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





# Delaware State Housing Authority

## Emergency Solutions Grant Cares Act – CV





# Strategic Coordination

- March 2020
  - Local Jurisdictions (New Castle County, City of Wilmington, City of Dover) met with the Continuum of Care (COC) and Housing Alliance Delaware
  - Goal was to agree to coordinate and deploy CARES Act funding for homelessness needs
  - Applications, draw forms etc., all coordinated among the jurisdictions since many of the providers were state-wide





# Coordinated Priorities

- Emergency Shelter Operations
- Rapid Re-Housing
  - Regular Rapid Re-Housing
  - Hotel/Motel Voucher Rapid Re-Housing
- Homeless Prevention
- Street Outreach





# State Priorities during the Pandemic

- The Division of State Service Centers (DSSC) and Division of Substance Abuse and Mental Health (DSAMH), as a way to prepare for, prevent, and respond to (PPR) COVID19, placed as many homeless households (over 1,000) in hotels/motels throughout the state.
- Most of those households remain in hotels today





# State Priorities during the Pandemic

- Through ESG CV1 and CV2, DSHA and the other jurisdictions connected hotel/motel households to our Rapid Re-Housing agencies to transition them from the hotels and permanent housing and provide needed case management.
- Over 125 households have been placed in permanent housing to-date
- Over 800 households remain in the hotels





# ESG CV<sub>1</sub> CV<sub>2</sub>

- DSHA utilized ESG CV as follows:
  - Provided operations support to PPR to COVID 19 to all homeless shelters in Kent and Sussex;
  - Provided funding for RRH's for shelter referrals from the COC and hotel/motel referrals from DSSC;
  - Provided funding for Delaware's first Street Outreach program;
  - Provided funding for homeless prevention activities:
    - Utility arrearage and legal services





# ESG CV1

- 70% of ESG CV1 funds expended;
- 10% of ESG CV2 funds expended;
- Meet with RRH's weekly for updates and progress
- Check in or quarterly reports for other sub-grantees





# Questions?

## DSHA Contact Information

### **Alice Davis**

ESG Program Manager

Phone: 302-739-0246

Email:

[alice@destatehousing.com](mailto:alice@destatehousing.com)

### **Andy Lorenz**

CDBG Program Manager

Phone: 302-739-0261

Email:

[andy@destatehousing.com](mailto:andy@destatehousing.com)

### **Cindy Deakyne**

Housing Development

Administrator

Phone: 302-739-0291

Email:

[Cindy@destatehousing.com](mailto:Cindy@destatehousing.com)

### **Dawn Favors Jopp**

Housing Program Specialist

302-739-0246

Email:

[Dawn@destatehousing.com](mailto:Dawn@destatehousing.com)

*Thank you for joining  
us today!*



# HUD TA SPOTLIGHT

## Vaccination Events for Unsheltered Populations



# Benefits of Using HMIS/Data Collection for Vaccination

- While client participation in data collection must be voluntary and in no way impact their access to services, HMIS and other data systems can be useful for vaccination events, including:
  - Determining how many individuals are willing to be vaccinated;
  - Focus community engagement strategies to target people who may be experiencing vaccine hesitancy
  - Remind people who may need their second dose of vaccine
  - Measure equity in the distribution of the vaccine, and
  - Mitigate ongoing COVID-19 outbreaks in congregate shelters.

# Vaccination in Unsheltered Settings: Guiding Principles

- Multipronged approach
- Inclusive
- Trauma-informed
- Communicate using trusted individuals and locations
- Ease and access
- Maximize time with clients
- Safety

# Vaccination in Unsheltered Settings: General Considerations

- Use HMIS and by-name lists, street outreach and street medicine teams to identify where people are located and map out distance between vaccination event(s), central hub for supplies, and consider how to move between the two during the event.
- Estimate doses and work with your healthcare partner(s) to ensure enough doses are available and can be taken elsewhere if not used.
- During the observation period, collect client data and other information in a private location.
- Offer vaccination events frequently at the same location and time – *ex. come to the library every Tuesday from noon-2pm for a vaccination*

# Vaccination in Unsheltered Settings: Strategy #1 - Encampments

- Sync vaccination event hours with times when individuals are most likely to be at the location, including at night.
- Encampments can be formal or informal, so if there is existing leadership within the encampment, include these individuals in the planning process to ensure better turnout and acceptance by the individuals living there.
- To minimize intrusion into personal space, set up vaccination events at the outside perimeter of encampments with street access or other routes that can be used to bring additional vaccine supplies.

# Vaccination in Unsheltered Settings: Strategy #2 - Rural

- Identify regular gathering places (libraries, food banks, faith centers, transit centers, gas stations) that can be used for vaccination events.
- There may be no local homeless service providers or health department, so partner with a healthcare provider or community stakeholder who can connect with the resources needed to bring the vaccine to unsheltered people.
- Get creative when seeking out vaccine ambassadors (church leaders, postal workers, park rangers, convenience store clerks).
- Equip team with Wi-Fi hot spots and paper collection forms if there is not broadband available.

# Vaccination in Unsheltered Settings: Strategy #3 – Mobile Vaccination

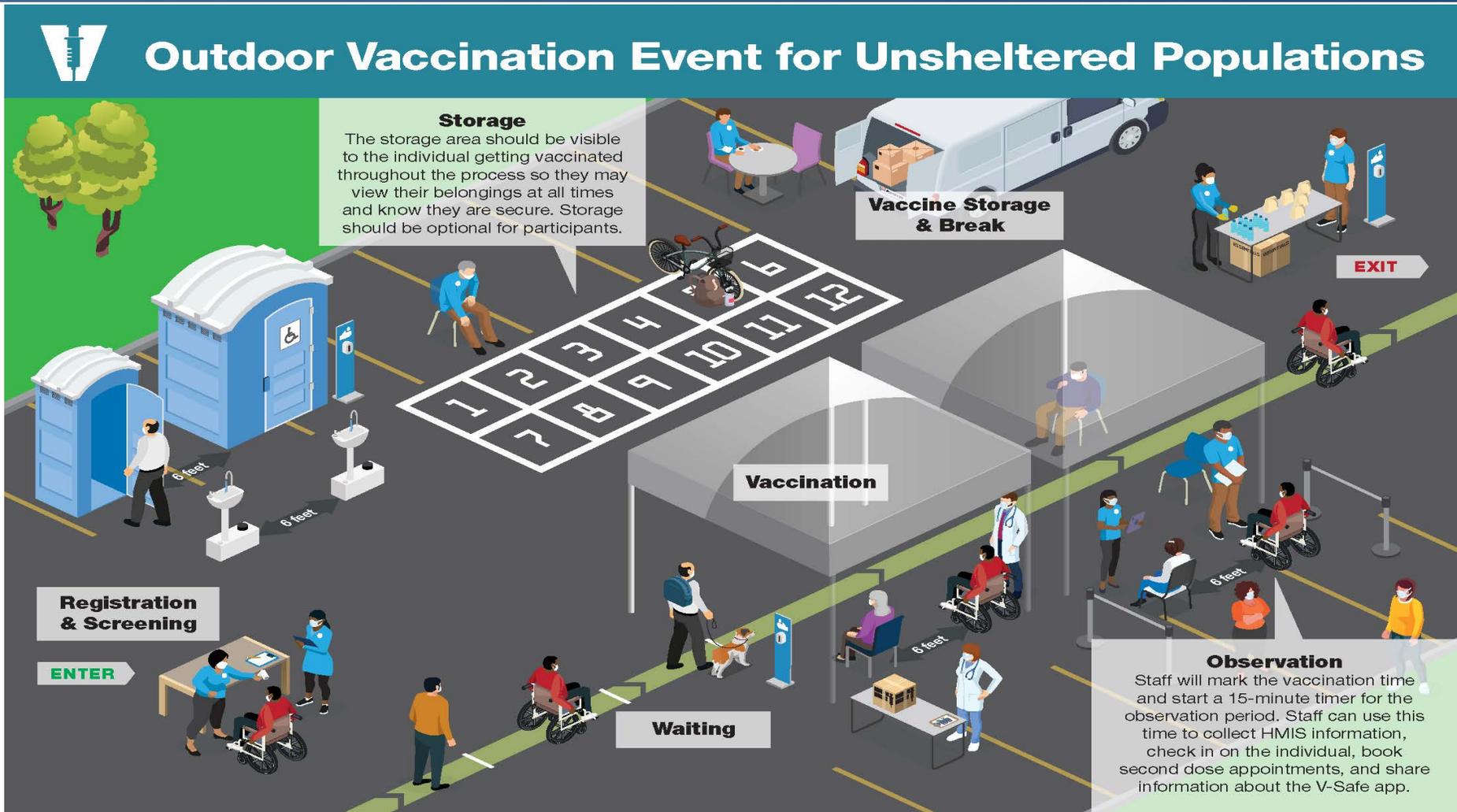
- Outreach staff can ask individuals what time works best for them and accommodate their preferences to the greatest extent possible. Attempt to identify multiple individuals who can receive vaccines at the same time to maximize vaccine supplies.
- Mobile vaccination requires less infrastructure, so consider the minimum setup (supplies, staff) needed to vaccinate safely.
- Staff may be limited to a set number of hours for vaccination attempts depending upon their travel schedule (distance, punctured vials), so factor this into planning.

# Vaccine Incentives

- Vaccine incentives have always been one of the tools to support and encourage individuals to get vaccinated, along with opportunities to talk with and ask questions of trusted sources and easy and frequent access to vaccination events.
- ESG-CV funds can now be used to pay for incentives
  - \$50 per dose
    - Pfizer and Moderna – up to \$100
    - Janssen (J&J) – up to \$50
    - Boosters (if applicable) – another \$50

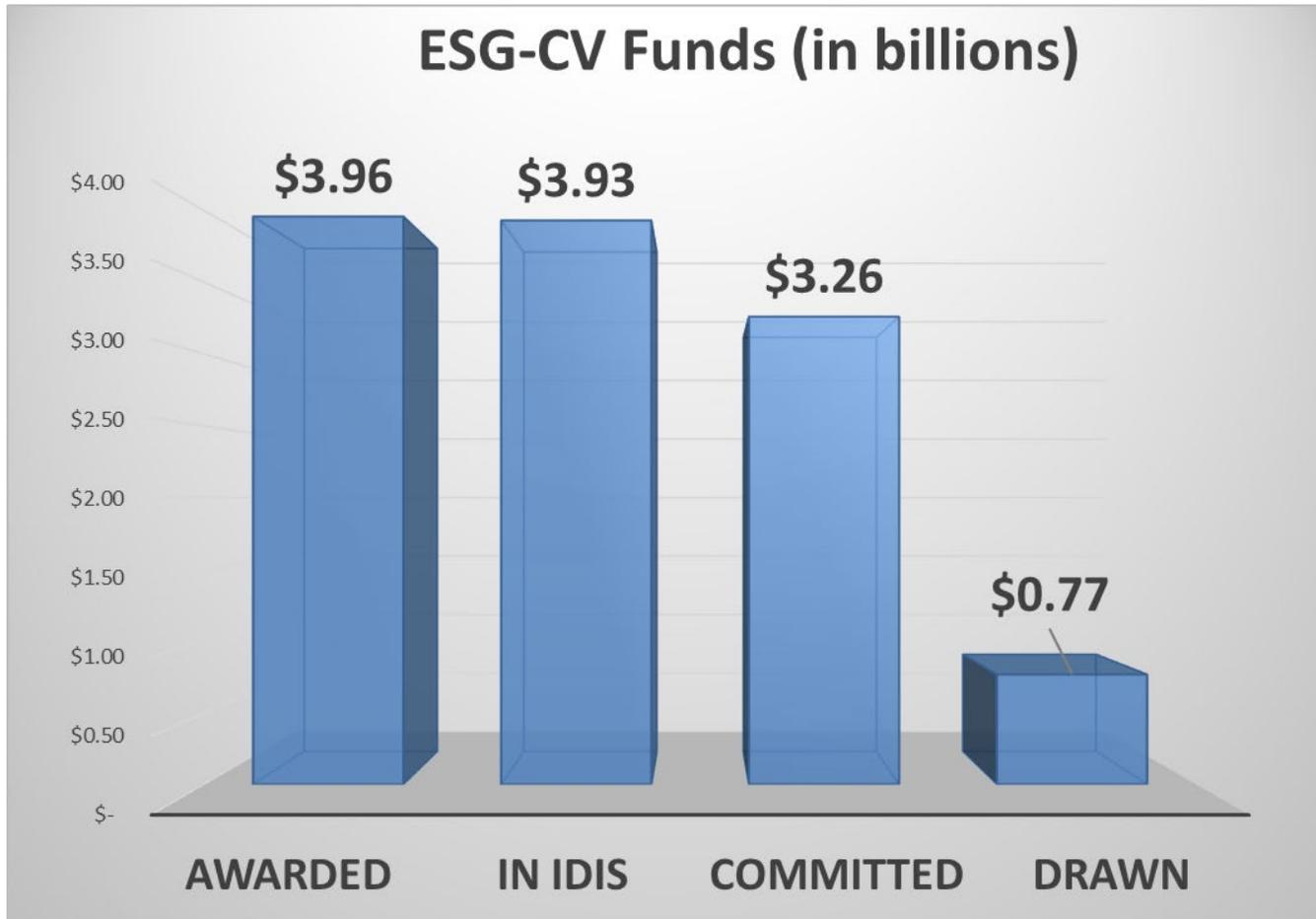
*\*ESG-CV funds may only be used for vaccine incentives to the extent other vaccine incentives are inaccessible or unavailable to people experiencing homelessness within the community.*

# Outdoor Vaccination Event Floor Plan



# ESG-CV Grants Status Report

## Updated September 7, 2021



**99.3% of funds obligated in IDIS**  
0 ESG-CV 1 and 11 ESG-CV 2 grants remaining to load

**82.4% of funds Committed**

**19.33% of awarded funds Drawn!**

**Of 362 grant recipients:**  
*168 recipients (46%) are over 20% Drawn*

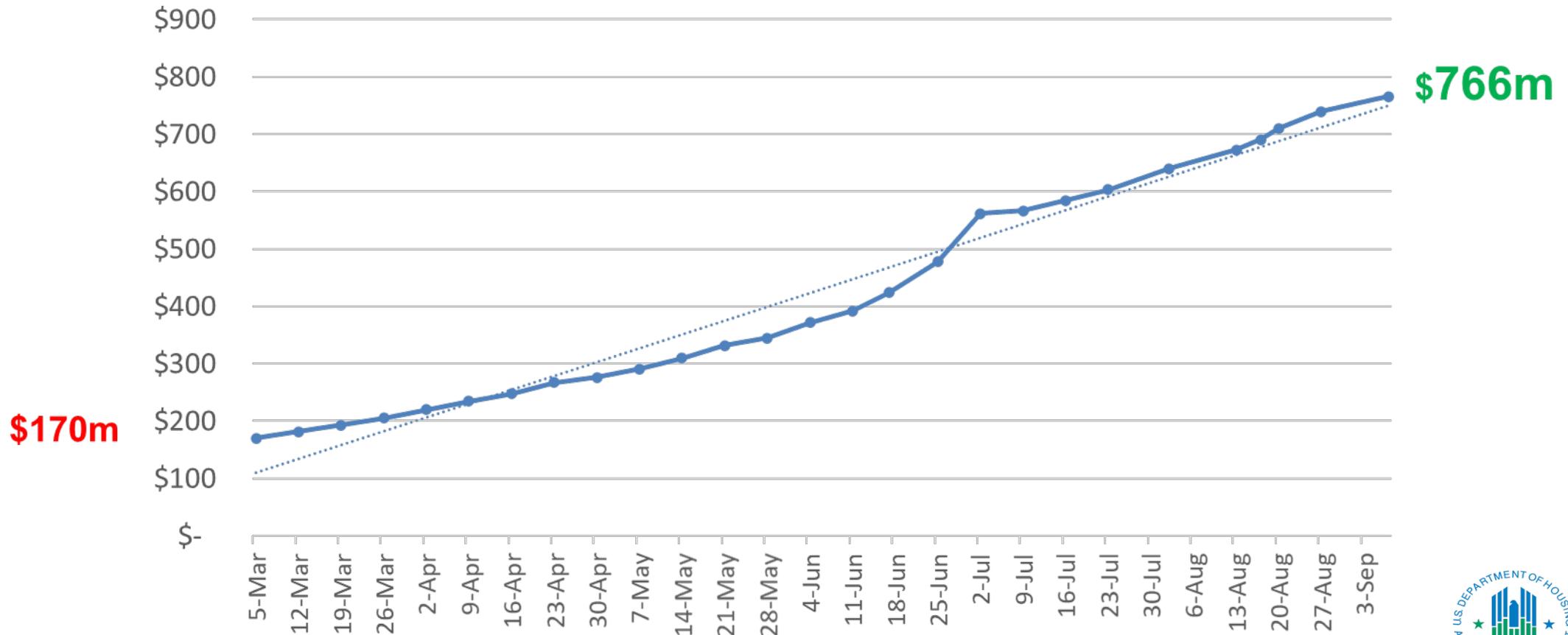
***Thank you for all your hard work!***

**20% of ESG-CV grant allocations must be expended by September 30, 2021**



# Keep it going!

ESG-CV Draws (in millions)



# New Resources Posted

- [ESG-CV Reporting Guidance](#)
- [COVID-19 EHV Referral Packet Template: Example Forms for EHV Program](#)
- [Engaging Individuals With Lived Expertise](#)

# Key Websites

**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>

# Federal Partner Contacts

For additional information or assistance, contact:

- Centers for Disease Control and Prevention:  
[www.cdc.gov/COVID19](https://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](#)



# Q & A

