

### Introduction

The coronavirus (COVID-19) pandemic raises many questions about safe and effective approaches to winter shelter planning this year. There is a new tension between preventing the immediate threat of death by exposure for people experiencing homelessness and mitigating the increased probability of COVID-19 transmission as more people congregate in winter shelter facilities. Additionally, COVID-19 has disproportionately affected Black, Indigenous, and people of color (BIPOC) experiencing homelessness, highlighting the importance of better meeting their needs. This document is designed for homeless system leaders and describes an inclusive local winter planning process, helping communities:

1. Engage critical partners.
2. Project winter sheltering capacity needs.
3. Create a [Winter Emergency Plan](#) to meet escalating levels of shelter demand and consider [alternative approaches to winter sheltering](#).
4. Prevent the spread of COVID-19 in winter shelter facilities.

### 1. Engage Critical Partners

While communities are facing significant challenges this winter, the first priority is to provide protection from the life-threatening consequences of exposure to winter elements. Strict adherence to [CDC guidelines](#) on the physical spacing needed to prevent COVID-19 transmissions, however, will limit available capacity. Including key partners at the beginning of the winter planning process will allow communities to leverage their expertise and experience to the fullest effect.

#### Identify Planning Partners

Extend the reach and effectiveness of the winter emergency response by ensuring planning tables are representative of the racial and ethnic makeup of populations served by the homeless system and include people with lived experience of homelessness.

Partner	Role in Planning
Public health	Ensure public health standards are met in shelter facilities and determine responses in situations where both lifesaving sheltering measures and adherence to infection control requirements are challenging or impossible. See the U.S. Department of Housing and Urban Development’s (HUD’s) <a href="#">discussion guide</a> to support initial conversations with public health authorities.
Healthcare providers/ Healthcare for the Homeless	Create pathways to healthcare services for people with medical and behavioral health needs, including those living sheltered or unsheltered who need specialized services.
Emergency management	Support winter emergency planning and leverage assets (local, state, or federal) that can support winter sheltering and outreach needs.
People with lived expertise	Design and inform practical plans for effectively locating, engaging, and sheltering people experiencing homelessness this winter. Urgency does not have to conflict with equity. We can save lives and house people while concurrently incorporating people with lived experience and diverse partners into the planning process, engaging them in the execution of our vision, and honoring new and different approaches.
Outreach providers and behavioral health	Develop an approach to getting those experiencing more severe behavioral health challenges into winter shelter facilities.

## Winter Emergency Activation and Communications Plan

It is critical for communities to define what triggers the winter emergency response and how weather alerts are communicated to key stakeholders. To mobilize adequate resources and staffing, communities should consider the timeframe within which an alert will be issued, which entity is responsible for making the alert determination, and how and to whom it will be communicated.

Download the [Winter Emergency Activation and Communications Plan](#), which provides a set of key decision points and a template to guide the planning process.

## 2. Project Winter Capacity Needs

It is hard to predict the level of shelter demand communities will face this year, with potential increases in unsheltered homelessness and decreases in year-round beds due to physical distancing requirements. Local jurisdictions are deploying various strategies for using existing data to estimate the number of winter overflow beds needed, such as:

- Understanding your community's:
  - Trends in winter shelter utilization over the past three years.
  - Loss of beds resulting from physical distancing and shelter decompression.
  - Projected increases in unsheltered homelessness.
- Monitoring real-time shelter utilization data from congregate and non-congregate shelters to assess utilization trends and capacity constraints.
- Analyzing coordinated entry data such as changes in the number of:
  - Households seeking assistance.
  - Assessments completed.
  - Shelter/street outreach program enrollments.
  - Households entering projects from unsheltered situations.

## 3. Create a Winter Emergency Plan

Given the variables that may impact shelter demand this winter, communities should adopt a contingency planning approach to winter planning. Use the [Winter Emergency Plan template](#), which is designed to help communities build a versatile strategy that can adapt to changing local conditions and surges in individuals and families seeking shelter. The template guides communities through each function of the winter emergency response and identifies resources needed across three scenarios of escalating winter shelter needs (Plan A, Plan B, and Plan C).

## 4. Prevent the Spread—Preparedness Checklists

Continuums of Care (CoCs), public health authorities, emergency management agencies, and local governments must work collaboratively and focus collectively on consistent adherence to infection control guidance across all winter shelter sites that are activated. Shelters should incorporate four main strategies to prevent transmission of COVID-19 within congregate facilities:

1. Encourage vaccination
2. Enforce physical distancing
3. Enforce mask-wearing
4. Implement enhanced cleaning and disinfection

Download the series of [preparedness checklists](#) designed to help providers implement strategies for mitigating the spread of COVID-19 in winter facilities. The checklists can be printed for staff or embedded in operational procedures and protocols. Topics include bathroom cleaning protocols; symptoms screening for staff and clients; safe sleeping protocols; physical distancing, face coverings, and ventilation; meal management; and cleaning and disinfecting.