Continuums of Care (CoCs), public health authorities, emergency management agencies, and local governments should work together to consistently implement infection control guidance to prevent the spread of MPX at congregate shelter sites.

Below are a series of preparedness considerations designed to help homeless service providers implement strategies to mitigate the spread of MPX in congregate facilities. The considerations can be printed for staff or embedded in operational procedures and protocols. Topics include:

- Messaging and communication
- Symptom screening
- Animal care
- Cleaning and disinfection
- Testing, treatment, and vaccination
- Hygiene and personal protective equipment
- Bathroom protocols
- Meal management

To learn more about strategies for infection control measures and preparedness information related to MPX, view the Disease Risks and Homelessness page on the HUD Exchange. For additional information about MPX, visit the Centers for Disease Control and Prevention (CDC) and the World Health Organization websites.

**Messaging and Communication**

- **Reduce stigma around monkeypox (MPX).** Anyone can get MPX and communities should consider it a public health concern for all. Using sensationalized language about a particular population or community may inadvertently stigmatize this group and create a false sense of safety for those who do not identify with the identified group(s).

- **Involve partner organizations.** Partner with culturally specific organizations and providers such as those with LGBTQIA+ or Black, Indigenous, and People of Color leaders that can support outreach to minority populations and marginalized groups represented in the local community. These organizations have developed trusting relationships with impacted groups and are the most appropriate to develop and deliver messaging, plan and facilitate events, and avoid stigmatizing language.

- **Involve people with lived experience of homelessness** in all planning efforts. Individuals with knowledge of the system will bring insight into how messaging will resonate within sheltered and unsheltered communities.

- **Build staff and guest knowledge** by providing clear and factual information on signs and symptoms, prevention, and how the virus spreads. Ensure information is available in languages commonly spoken in your program.

- **Provide access to medical professionals and knowledge ambassadors.** Provide guests with access to medical professionals and other trusted sources to answer questions and dispel myths about MPX.
Help Identify Cases

- **Encourage guest self-checks** for MPX upon entry into and while staying at the shelter, and as part of outreach teams’ engagement practices.
  - Individuals with MPX typically exhibit flu-like symptoms before the rash appears. These symptoms may include fever and chills, headache, muscle and back aches, swollen lymph nodes, exhaustion, and/or respiratory symptoms like a sore throat, congestion, and cough. Not all individuals will have all symptoms.
  - Most people with MPX will get a rash. Shelter staff may not see the rash if it is covered with clothing, so teach shelter guests what the rash looks like and encourage guests to conduct self-checks.
  - If shelters choose to screen for symptoms, it is important to work with public health partners to develop a procedure for what to do if MPX is identified to ensure individuals have access to needed shelter and services.

- **Be prepared when a guest has MPX symptoms.** If a guest is symptomatic, follow standard procedures developed with your public health partners and [CDC guidance](https://www.cdc.gov), including:
  - Direct the guest to a designated isolation area offsite (e.g., hotel or dormitory) or **within the shelter** if there is no offsite space available. People with MPX should remain isolated from others until there is full healing of the rash. This may take up to four weeks.
  - Notify appropriate public health authorities and healthcare providers to support **contact tracing** and guest support.

Animals

- **Understand MPX transmission between animals and humans.** People can pass MPX to animals through petting and other close contact. Likewise, an infected animal can pass the virus to humans.

- **Develop an animal care plan.** Shelter staff should work with guests with MPX who have animals to develop an animal care plan. This may include designating an alternate person to care for the animal or isolating the guest and animal together until the contagious period is over. The mental well-being of the guest should always be considered alongside the potential for transmission.

- **Be prepared when an animal is infected with MPX.** If an animal becomes infected, shelter staff should contact their local [health department and veterinarian partners](https://www.cdc.gov) for guidance on isolation and treatment.

Cleaning and Disinfection

- **Develop cleaning protocols.**
  - Implement a cleaning schedule and frequently disinfect all high-touch surfaces such as doorknobs, handrails, sink handles, toilets, countertops, workstations, phone stations, tables, chairs, and elevator buttons.
• Have disposable wipes and gloves available to clean surfaces and items immediately after use.
• Discuss with your public health partners whether enhanced cleaning schedules would be beneficial at certain sites based on layout and occupancy.
• **Choose wet cleaning activities** (mopping, spraying) and avoid activities that could spread dried material from scabs such as the use of fans or sweeping.
• **Use an EPA-registered disinfectant** with an *emerging viral pathogen* claim, which may be found on the Environmental Protection Agency’s (EPA’s) **List Q**.
• **Implement laundry protocols.**
  • Soiled laundry should be gently and promptly cleaned.
  • Be sure to use gloves when removing linens to prevent the possible spread from handling laundry items; do not shake or handle laundry in a manner that may disperse infectious material.
  • Linens may be laundered using regular detergent and warm water. After proper washing, linens and clothes can be reused.
  • Staff responsible for cleaning and laundry should wear full personal protective equipment (PPE) such as mask, gown, eye protection, and gloves. For laundry, PPE may be removed after the wash cycle is complete.
• **Minimize availability of soft furnishings**, which can harbor infectious material. Consider covering furniture (e.g., beds, chairs) in isolation areas with sheets, blankets or plastic covers.
• **Implement protocols for handling waste.** Contaminated waste such as dressings, bandages, or disposable gloves should be immediately contained and properly disposed of.

### Hygiene and Personal Protective Equipment

• **Hand hygiene is critical.** Individuals should use an alcohol-based hand rub after touching rash material, clothing, linens, or environmental surfaces that may have had contact with rash material. Use the COVID-19 standard of **handwashing** or use hand sanitizer when unable to wash your hands.
• **Enforce mask wearing** for staff when caring for someone with MPX and for guests with a suspected or confirmed MPX case. Continue to encourage guests to wear masks at all times to help prevent the spread of other diseases such as the flu and COVID-19.
• **Staff should wear full PPE** while cleaning or handling soiled linens.
• **Cover all skin rashes** by wearing a mask, long sleeves, or pants.

### Testing, Treatment, & Vaccination

• **Know when to test.** People who think they have MPX or have had close personal contact with someone with MPX should talk to a healthcare provider to determine if testing is necessary.
• **Refer for testing.** Ensure staff know how and where to refer people for testing.

• **Identify an appropriate space** where clients can quarantine while they await test results.

• **Vaccination is recommended** for people who are at higher risk of contracting MPX, as well as those who have been exposed to MPX. Prioritization will be set by state health officials.

• **Manage vaccine appointments.** Typically, the vaccine is a 2-dose course. Make sure guests being vaccinated have a second appointment scheduled.

• **Supportive care** like pain management may be available if needed. In some severe cases, medication like TPOXX may be prescribed.
  
  • Ensure over-the-counter pain relievers are available to anyone with MPX.

**Bathroom Protocol**

• **Plan bathroom use.**
  
  • When possible, designate separate bathrooms and showers for clients with suspected and confirmed cases of MPX.
  
  • When separate bathrooms are not available, designate a bathroom schedule so that people with MPX may access the shower at regular intervals.

• **Develop sanitary practices.**
  
  • Clean and disinfect bathrooms after use by anyone infected with MPX. Leave cleaning supplies in the bathroom stalls and encourage clients to wipe down touchable surfaces after each use.
  
  • Provide guests with a clean bath towel upon entry to limit the sharing of potentially contaminated towels.
  
  • Stock bathrooms with hand sanitizer, soap, paper towels, and cleaning supplies; create a staff schedule to stock bathroom supplies regularly.
  
  • Ensure that running water is available in all bathrooms and that toilets are in working order.

**Meal Management**

• **Enable contactless meal access** to protect guests, staff, and volunteers picking up meals at entry or exit points.

• **Deliver meals** to rooms or areas where clients who are symptomatic or have MPX infections reside.

• **Provide disposable disinfectant wipes and cleaners** so clients and staff can wipe down dining tables before and after eating.

• **Isolation in place guidance** should be followed regarding communal dining space.