



National Indian Health Board
**NATIONAL TRIBAL
COVID-19 RESPONSE**

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4/20/2020

Providing Services and Care to the Homeless Population

To ensure everyone entering your care receives the same information in as quickly as possible, service providers can establish a plan for communicating information about COVID-19 with all staff, volunteers, community partners, or anyone interacting with clients.

Are People and Families Experiencing Homelessness at Risk for COVID-19?

Yes. Homeless services are often provided in crowded places. Many people who are homeless are older or have underlying health conditions, making them at a higher risk for a severe case.

What Should I Tell Community Members to do to Protect Themselves?

Many of the CDC recommendations to prevent COVID-19 are more difficult for someone who is homeless. If possible homeless individuals should follow these recommendations. When communicating this information try to identify any specific barriers to the individual, such as a disability, and potential mental health challenges.

What actions should be taken at shelters?

Screening

- Ask, “Do you have a new or worsening cough today?”
“Have you felt like you have had a fever in the past day?”
- Check temperatures while wearing disposable gloves, a facemask, and eye protection.
- Anyone found with symptoms should be given a facemask (if available) or cloth face covering
- Encourage any clients with symptoms of COVID-19 (fever, cough, or shortness of breath) to alert their service

providers (case managers, shelter staff, and other care providers). Make sure to identify local places (homeless healthcare clinics, street medicine clinics, etc.) that have testing available.





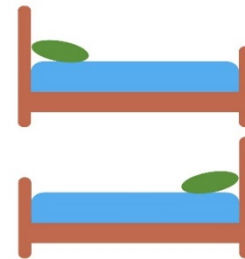
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Sleeping Areas

- Sleep “head-to-toe”.
- Arrange beds or cots at least 6 feet apart and have clients sleep in the same bed each night.
- Clients who are sick or have symptoms should sleep in individual rooms if possible.



**Head
to
Toe**



General Hygiene

- Decrease the number of staff who have face-to-face interactions with clients.
- Install physical barriers for staff who will have interactions with clients, such as a “sneeze guard” at the check-in desk.
- Encourage frequent hand hygiene. Keep bathrooms well stocked with soap, and place alcohol-based hand sanitizers that contain at least 60% alcohol at key points in the shelter.

Unsheltered Homeless Populations

For those living in warmer climates where many homeless individuals live unsheltered, setting up hand washing stations or providing outreach about where you can have your temperature monitored and receive medical care is important. Identify locations for temporary shelter and encourage people to practice physical distancing.

My Family Member(s) are Homeless and Have Returned Home

If a family member experiencing homelessness returns home, they should be immediately screened for COVID-19 and tested if possible. Even if they do not have symptoms of the virus, they could be carrying it. If testing is not immediately possible, they should be self-quarantined for 2 weeks inside the house, monitoring temperature and symptoms of COVID-19.

References and Resources

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

Disclaimer:

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