

COVID-19 Guidance for Homeless Shelters: Updated November 2020 for Chicago's 'Second Wave'

COVID-19 fatigue and the second COVID-19 wave

Homeless shelters are at risk of large COVID-19 outbreaks. The 'first wave' of Chicago saw COVID-19 outbreaks in the majority of Chicago shelters, but a fast and effective response from shelter staff, shelter residents, clinical and academic partners, [CHHRGE](#), [DFSS](#), [CDPH](#) and others helped to control these outbreaks and minimize infections, hospitalizations and deaths.

2020 has been a long, difficult year, and we are aware that everyone has worked incredibly hard and gone above and beyond to protect vulnerable Chicagoans. But case counts in Chicago in early November 2020 are higher than they have ever been. It's going to be a very hard winter – but we cannot let fatigue set in, especially with early results from COVID-19 vaccine trials suggesting we will soon have more tools to fight this pandemic. Please, don't give up, we need you to continue to work hard to save lives for at least a few more months.

Shelter-based service teams

We are better prepared to respond to COVID-19 now than we have been previously. The Chicago Department of Public Health has partnered with Heartland Alliance Health and Lawndale Christian Health Center to establish **shelter-based service teams** across the City. Both organizations have a long history of partnering with shelter managers to provide high quality healthcare to people experiencing homelessness. If you have current relationships with healthcare providers SBSTs will be working with them to layer-on services as needed to enhance, and not disrupt, current services. To contact Lawndale Christian Health Center, please email sheltercare@lawndale.org. To contact Heartland Alliance Health, please email sheltercare@heartlandalliance.org.

Shelter-based service teams are teams of nurse practitioners, doctors, nurses, social workers and allied professionals. Their goal is to provide trauma-informed, on-site primary healthcare, behavioral healthcare and – critically – infection prevention and control services to slow the spread of COVID-19. Shelter-based service teams will work with you to find a convenient time to come to your shelter. If your shelter has no shelter-based service team, contact mary.schroeter@cityofchicago.org.

All teams are trained in infection prevention and control. If you are concerned about cases of COVID-19 in your facility and are wary of visitors, reach out to your shelter-based service team to discuss all the measures they take to keep staff and residents safe while remaining on site to provide essential services. Among the first tasks for shelter-based service teams are to partner with shelter managers to assess where their support can be most useful, to ensure all shelter staff and residents have access to influenza vaccines and other services and to see residents to perform a baseline health assessment.

Shelter-based service teams are critical extensions of public health and we hope they will grow into excellent partners to shelter managers. Please provide them with access to your facility, staff and residents to enable them to perform their vital work. We strongly recommend all shelter residents to be assessed by their shelter-based service team at least once.

COVID-19 testing in shelters

Through shelter-based service teams, CDPH is deploying simple rapid COVID-19 tests to every shelter. These are mainly intended to be used in people with symptoms – even very mild symptoms – of possible COVID-19. If one of your residents has symptoms of possible COVID-19, contact your shelter-based service team to arrange rapid testing. With appropriate training, shelter staff may be able to operate these tests directly, but should always report these tests as directed by their shelter-based service teams. Reach out to your shelter-based service team to learn more and to arrange training.

CDPH partners with Rush University Medical Center and the University of Illinois at Chicago to provide widespread COVID-19 testing in response to COVID-19 cases and outbreaks in congregate facilities like homeless shelters. These teams now collect nasal (nose) specimens, instead of the very deep nasopharyngeal specimens that were collected earlier in the pandemic. They are also asking fewer questions, so widespread testing is faster and more efficient than ever. Reach out to your shelter-based service team or your CDPH point of contact (see below) if you would like to discuss the need for widespread COVID-19 testing.

COVID-19 cases in shelters

We are very likely to see more cases of COVID-19 in staff or residents of homeless shelters this winter. If a case of COVID-19 is detected in a shelter staff member or resident, either through testing in the shelter or through a healthcare provider or hospital, **immediately inform your shelter-based service team and CDPH point of contact** (Andrew.Weidemiller@cityofchicago.org or Divya.Ramachandran@cityofchicago.org). Please include DFSS-Homeless@cityofchicago.org in these communications.

We continue to advise that shelter staff experiencing [symptoms](#) should not come to work. Citywide, more than half of all staff with COVID-19 worked after they began experiencing symptoms, and in many cases these may have started COVID-19 outbreaks. To protect your residents, **do not come to work if you are experiencing any symptoms, even mild symptoms**. Instead, [get tested for COVID-19](#) and limit contact with others until you receive your results.

If a staff member tests positive for COVID-19, they should be excluded from work for the [full isolation period](#). If a resident tests positive for COVID-19, your shelter-based service team will advise on whether they can be safely isolated on-site or whether they should be referred to isolation off-site. CDPH partners with Rush University Medical Center to provide supported isolation.

In general, if shelter staff are exposed to COVID-19, they should [quarantine](#) for 14 days away from work and others. However, shelter staff are critical infrastructure workers. To ensure the continuity of essential operations, [CDC advises](#) that critical infrastructure workers may be permitted to continue work following some potential exposures to COVID-19, provided they are screened for symptoms and a temperature before every shift, they always wear a face mask that covers the nose and mouth, they maintain 6 feet of distance between themselves and others in the workplace wherever possible, and there is enhanced cleaning and disinfection of all work areas.

An exception to this is if a staff member's household contact has COVID-19. In these instances, the risk of infection is very high, and the staff member should always quarantine for the [full quarantine period](#).

If a resident tests positive, encourage other residents who may have been around them to minimize movement into and out of the shelter as they are at risk of infection and possibly spreading that to others. Inform your shelter-based service team and CDPH who can organize an outbreak response, including an assessment of whether testing those other residents is required.

Intake of new residents during the second wave

The shelter you provide to Chicago residents is an essential life-saving service. This year your services are likely to be even more in-demand than ever, COVID-19 has had economic consequences for many people across this City and more may be seeking your support than ever before.

We strongly urge you to continue to accept new residents. CDPH, DFSS and many healthcare leaders do not recommend universal COVID-19 testing or quarantine on intake as it can create a barrier to shelter. However, we strongly recommend all new residents are evaluated by shelter-based service teams at the next available opportunity for a full health assessment, including for consideration of COVID-19 testing and influenza vaccine. If you have concerns about accepting new residents, please contact your shelter-based service team, CDPH and DFSS before refusing to accept new intake.

We strongly urge you to safely expand bed capacity wherever possible. We recognize many shelters reduced their occupancy during the ‘first wave’ of COVID-19 in Chicago to allow residents to physically distance and stay safe. DFSS continues to operate several large ‘decompression’ shelters. As more and more people seek shelter this winter, we urge you to look for any ways you can to safely increase bed capacity. If there is a space that could be converted to accommodate beds, tell your shelter-based service team and DFSS. Your shelter-based service team can help you try to find opportunities to increase bed capacity, and advise on how to do this safely.

We strongly urge you to continue essential day programs. Even during a Stay at Home Advisory, day programs can be essential services and should remain open and accessible wherever possible. If you operate a day program for drop-ins – particularly one providing medical services, behavioral health support or substance use disorder care – we strongly urge you to work with your shelter-based service team to identify safe ways to continue to provide accessible essential care.

Slowing the spread of COVID-19

[Our previous guidance](#) detailed steps to slow the spread of COVID-19. These principles are true today:

1. Provide educational material to your residents, such as signs and handouts
2. Ensure a ready supply of hand sanitizer
3. Clean and disinfect your shelter regularly
4. Ensure staff and clients wear facemasks that cover the nose and mouth
5. Implement physical distancing policies, such as spreading out beds and scheduling time in common areas
6. Minimize face to face contact between staff and residents
7. Ask non-essential staff to work remotely
8. Break your clients into groups or ‘cohorts’ of people who have contact with each other, but not other cohorts (e.g. cohort by dormitory, who eat together but separate from others)
9. Screen staff and residents regularly for symptoms; arrange for symptomatic residents to be tested and symptomatic staff to avoid coming in to work
10. Encourage clients to stay home in the shelter as much as possible
11. Stay in touch with CDPH, DFSS and your shelter-based service teams.

Improving infection control practices among residents

It can be difficult to consistently follow all public health guidance around social distancing and masking, especially in your own home, but it is vital to do so to protect everyone. Below are some examples of infection control practices and some suggested ways to improve compliance.

- If residents are not socially distancing, not wearing masks, or not wearing their mask correctly (every mask should cover the nose and mouth!), consider encouraging staff to model the safe behavior, holding small group (distanced) education sessions, or provide incentives for proper mask wearing (e.g. staff doing rounds and offering a small gift card or edible treat to whoever is correctly wearing their mask). **Do not discharge someone from your shelter for not adhering to social distancing recommendations.**
- As of November 16, the City of Chicago is now under a [Stay At Home Advisory](#), and all Chicago residents – including those living in shelters – are advised to only leave home to go to work, school or for essential needs such as seeking medical care, going to the grocery store or pharmacy or picking up food. **Do not discharge someone from your shelter for not adhering to the Stay At Home Advisory.**
- Although COVID-19 testing can be very helpful in response to an outbreak and should be encouraged, **do not discharge someone from your shelter for declining a test.** If someone is experiencing symptoms and declines to be tested, inform your shelter-based service team and CDPH point of contact. If someone is declining to be tested as part of widespread testing in response to cases, the skilled team of clinicians will talk with them when they are on site to test and try to persuade them to be tested.

Other guidance

The CDC and other health departments have issued guidance to organizations providing services to people experiencing homelessness in the time of COVID-19. See below for more details:

- Previous CDPH guidance: <https://www.chicago.gov/content/dam/city/depts/cdph/HealthProtectionandResponse/Homeless%20Shelters%20Reopening%20Guidance%2006.26.2020.pdf>
- Previous CDPH FAQs: <https://www.chicago.gov/content/dam/city/depts/cdph/HealthProtectionandResponse/Homeless%20Shelters%20FAQ%20Phase%20III%20and%20IV%20of%20Reopening%2006.26.2020.pdf>
- CDC guidance: <https://www.cdc.gov/coronavirus/2019-ncov/community/homeless-shelters/plan-prepare-respond.html>
- IDPH guidance: <https://www.dph.illinois.gov/topics-services/diseases-and-conditions/diseases-a-z-list/coronavirus/preventing-spread-communities/homeless-shelters>