

Support for Youth Drop in Centers & Access Centers during COVID-19 crisis
Compiled by the [Massachusetts Commission on Unaccompanied Homeless Youth](#)

Providers across the country report that local resources for persons experiencing homelessness are contracting, not expanding, during the COVID-19 crisis. (NAEH)

The following is a list of SUGGESTED PRACTICES for Drop in Centers who are able to keep their doors open or want to re-open during this time.

PLAN-PLAN-PLAN

- Designate a COVID-19 project manager & train all staff on communication channels
 - Designate [people] who will be authorized to make decisions about escalating or de-escalating response efforts as the epidemiologic context changes. (CDC)
 - “Project management needs have been significant” -Boston HealthCare for the Homeless
- Get input and support for your emergency operations and communication plans
 - Share your plans with staff, volunteers, and key community partners and stakeholders and solicit feedback on your plans. (From CDC)

Entry & Screening

- Significantly reduce the number of people allowed inside at any one time (depending on size of space, possibly no more than 10 total, including staff)
 - Post “occupancy” & time-limit guidelines at front door
 - Have alternate referrals in place whenever possible
 - Offer grab & go meals for those turned away or waiting
- Screen for symptoms at the door including temperature scans
 - Any person with [symptoms of COVID-19](#) should be provided with a facemask, if available. (CDC)
 - Have a plan in place for where to refer symptomatic guests to the next level of appropriate medical care
 - Have a plan in place for how to transport guests
 - Notify the transfer team and medical facility of suspected COVID-19 before transfer. (CDC)
- Set up a hand washing station at the front door
 - require all guests to wash hands before entry into the space
- If available, offer every guest a cloth mask on entry into the space

Environmental Cleaning & Disinfection

- Building Cleaning
 - Cleaning should be conducted in accordance with [CDC recommendations](#).

- Ensure bathrooms and other sinks are consistently stocked with soap and drying materials for hand washing.
 - Ensure that all common areas within the facility follow good practices for environmental cleaning.
 - “[Saint Francis House] hired an outside cleaning service to add another layer of daily deep cleaning in our building, with a special focus on high-touch areas, in addition to increased sanitization by our facilities during the day” (From Saint Francis House, Boston)
- For laundered fabrics (e.g., clothing, towels, and linens): (from [MA DPH Guidance for shelters](#))
 - Avoid shaking or “hugging” dirty laundry to the greatest extent possible.
 - Launder items as appropriate in accordance with the manufacturer’s instructions. If possible, launder items using the warmest appropriate water setting for the items and dry items completely.
 - Dirty laundry from an ill person can be washed with other people’s items.
 - Clean and disinfect clothes hampers according to guidance above for surfaces. If possible, consider placing a bag liner that is either disposable (can be thrown away) or can be laundered.
 - After cleaning and disinfecting, immediately wash hands for at least 20 seconds.
- Space times between showers because of the risk caused by vapor droplets
 - *“She explained that the virus could be transmitted through vapor droplets, and that they had to let the steam dissipate and clean the stall between each use, which reduced the number of showers that they could host each day....”*
- Hand-washing
 - Provide alcohol-based hand sanitizers that contain at least 60% alcohol (if that is an option at your shelter) at key points within the facility, including registration desks, entrances/exits, and eating areas. ([CDC](#))
 - “Staff is working directly with guests to ensure frequent and consistent hand washing....” (Saint Francis House, Boston)

Meeting Client’s Basic Needs

- Offer grab and go meals, including snacks
 - This may require additional funding for the purchase, preparation, and delivery of meals
 - Food donations should be shelf-stable, and staff should take usual food-related infection prevention precautions. ([CDC](#))
- Clothing
 - Homeless service providers can accept donations during community spread of COVID-19, but general infection control precautions should be taken.

- Request that donors not donate if they are sick.
- Set up donation drop-off points to encourage social distancing between shelter workers and those donating.
- According to usual procedures, launder donated clothing, sheets, towels, or other fabrics on high heat settings, and disinfect items that are nonporous, such as items made of plastic. ([CDC](#))
- Sometimes implementing the above recommendations may not be feasible
 - “[Saint Francis House has] suspended our used clothing donation program. We are giving clothing to all those who need it using our inventory of donations and purchasing the needed clothing we do not have.”
- Phones
 - Access to working smart phones remains a critical basic need
 - Battery packs are also essential as people now have fewer places open where they can charge their phones (libraries, cafes, etc.)
 - Consider adding a sticker onto the phone or battery back with a number for the drop in or other program staff
 - Whenever possible, offer alcohol-based wipes, such as Clorox wipes, to clean phone screens. (Do not use bleach, sprays aerosol sprays. “You need your phone to work, even if you want it clean.” -Apple)
 - Phones are both a high-touch surface as well as an item that touches one’s face ([CDC](#))
- Substance Use Considerations
 - Build into operations plan enhanced overdose monitoring
 - NARCAN distribution remains a key priority
 - See additional resources including:
 - [Tips for Community-based Syringe Services and Harm Reduction Providers](#) (Harm Reduction coalition)
 - <http://neverusealone.com/> people using alone can have someone on the phone with them while they use and ensure that they are responsive after a set amount of time.

Physical Distancing (adapted from [MA DPH Guidance for shelters](#))

- Signs about social/physical distancing should be posted throughout the shelter, such as those found on the [MA DPH website](#).
- Staff should work to maintain the following social distancing policies:
 - Individuals should be kept at least 6 feet apart as much as possible and reminded not to shake hands, high-five, hug, or have any other physical contact.
 - Create a staggered bathing schedule to reduce the amount of people using the facilities at the same time.

- Reduce activities that congregate many guests at once such as “house meetings” and opt for smaller group activities where individuals can practice social distancing.
- Reduce the amount of face-to-face interactions with guests for simple informational purposes.
- Eliminate unnecessary assembly of staff. All staff meetings should allow for social distancing.

Staffing

- Staff should be reminded to check their temperature every day before coming to work and to stay home if they have a fever or are feeling unwell.
 - If staff do not own a thermometer, the drop in should make every attempt to screen staff members when they arrive to work. ([MA DPH Guidance for shelters](#))
- Be prepared for staffing shortages due to staff illnesses and fewer/no volunteers
 - Develop a plan to secure additional staff if absenteeism due to COVID-19 threatens to bring staffing to minimum levels. (CDC)
 - Identify possible use of staffing agencies or other agency staff Identify critical job functions and plan for alternative coverage by cross-training staff where possible.
 - Determine minimum levels of staff in all categories required for the space to function safely.
 - “ We have suspended onsite volunteer services” ([Saint Francis House, Boston](#))
- Personal Protective Equipment (PPE)
 - Prioritize how PPE is distributed, if available
- Offer the seasonal influenza vaccine to all guests and staff throughout the influenza season. Symptoms of COVID-19 are similar to those of influenza. Preventing influenza cases in a facility can speed the detection of COVID-19 cases and reduce pressure on healthcare resources. (CDC)

Signage

- Post signage throughout the facility communicating the following: ([from CDC](#))
 - For all: symptoms of COVID-19 and hand hygiene instructions
 - For guests: report symptoms to staff
 - For staff: stay at home when sick; if symptoms develop while on duty, leave the space as soon as possible and follow CDC-recommended steps for persons who are ill with COVID-19 symptoms including self-isolating at home, contacting their healthcare provider as soon as possible to determine whether they need to be evaluated and tested, and contacting their supervisor.
- Ensure that signage is understandable for non-English speaking persons and those with low literacy