

PREPARING TO VACCINATE PEOPLE EXPERIENCING HOMELESSNESS WHO ARE UNSHELTERED

Widespread vaccination is a critical piece of the solution to ending the COVID-19 Pandemic. <u>California's vaccine distribution plan</u> now prioritizes all people experiencing homelessness, regardless of age and sheltering status.

Vaccinate ALL 58
Together we can end the pandemic.

People staying in shelters and other congregate settings are at higher risk for contracting COVID-19 due to their living situation and should be the focus of first efforts. (See <u>Checklist for Shelter Providers</u> and <u>Lessons Learned</u>.) However, **all** persons experiencing homelessness, including people who are unsheltered, are now eligible for vaccination as they may transition to a congregate setting on short notice. In planning to reach unsheltered people, here are some important tips and key considerations.

Make delivery mobile if at all possible

Bring the vaccine and vaccinators to people's locations, such as camps, tents, or cars. Evidence from past efforts to reach unsheltered people for health interventions, including UCSF's recent experience with COVID testing and past vaccination efforts for hepatitis A and flu, indicate that bringing the vaccine to people where they are is the best way to reach people. Leaving their space or belongings can be a barrier for many unsheltered people, even to go only a short distance away. This Mobile Health Map site has a list and map of clinics with mobile capacity, including Health Care for Homeless programs.

Keep the Door Open

Several communities have conducted surveys in preparation for rolling out a vaccine strategy. Surveys in both San Diego and San Francisco showed that people experiencing homelessness were at least as likely or more likely than the general public to want to get vaccinated. Nonetheless, like the general public, many may have hesitations or be taking a "wait and learn" approach before making their decision.

Outreach and advance engagement with trusted messengers such as <u>Vaccine Ambassadors</u>, especially BIPOC people from the community who have lived experience, is critical. It is also important to build in capacity for people to decide to participate when the opportunity arises. If doing an event with appointments, plan significant capacity for walk-ups. Don't lose the opportunity for people to decide to participate in the moment. If possible, return to the same sites frequently or regularly.

If necessary to set up a vaccination event at a fixed location, select a well-known and trusted site such as a drop-in center or food program, and offer vaccination at a time people come regularly for other services and have figured out how to take care of their belongings, or have a place at the site where people may safely store their items.

Plan to go out to the same location more than once

Some people will be excited to get vaccinated or want to be included the first time. Others may take a wait-and-learn stance, wanting to see how the process goes and what others experience. By planning to come to a location more than once, for example the next day or the following week at the same time, people who were initially unsure may be willing to participate.

Use CHOWs, *Promotores*, and Vaccine Ambassadors to promote the effort

Community health outreach workers (CHOWs) or *Promotores* are frontline public health workers who are members of or have a uniquely close understanding of the community served. This relationship lets them serve as a trusted liaison, facilitate access, and improve the quality and cultural competence of service delivery. Trained <u>Vaccine Ambassadors</u> can also play this role. It is particularly important to ensure that among the team are people from racial and ethnic backgrounds disproportionately represented in the homeless population and people with lived experience of homelessness.

Hold pre-conversations

Send advance teams — trained outreach workers, CHOWs, Promotores, and/or Vaccine Ambassadors — to places people who are unsheltered are likely to be, to let them know when vaccinations will be coming and how they will be reached and supported. Be sure the team can answer their questions about COVID-19 vaccination respectfully and fully while reassuring people who may be concerned or skeptical, and without any pressure. (See box: Ready with Answers.)



Some of the questions that people experiencing homelessness may ask are similar to what other people may want to know and include:

- Is it safe for me? Who has it been tried on?
- Will it give me COVID-19?
- Will I feel sick?
- Will it cost me?

Good answers to these and other general questions can be found at <u>CPDH</u> and <u>CDC</u> websites. See <u>Between Us, About Us</u> for a specific campaign from Black heath care professionals for Black people.

People experiencing homelessness may also want to know:

- Will I have to leave where I stay now and go to a more crowded place if I get vaccinated?
- Will I be denied services if I don't get vaccinated?
- Where can I go if I don't feel well?
- Where will I get my second dose?

Communities should have prepared answers to these questions. HUD and HCFC do not permit denying anyone services funded with State or HUD funds based on whether they have been vaccinated.

Provide other resources people need

As part of both the lead up and the event days, communities may wish to provide resources such as food, hygiene kits, transportation options, socks and caps, or other things that unsheltered people need and want. Including a flyer or other information in a hygiene kit or food package with a reminder when the vaccination team will be out can be a helpful way to get the word out. Be sure to have disposable masks available.

Prepare volunteers and partners well

There may be people involved in the field effort who do not have deep experience with homelessness or people experiencing homelessness, such as a local pharmacy or community volunteers. Be sure to prepare the team in advance for what to expect and explain how important respect and deep listening is when working with people who are experiencing the trauma of homelessness. Have someone on site they can turn to if issues arise, and who can address client or volunteer concerns, as well as questions from event participants that are not related to the vaccine. Be sure this person is available and does not have another role.

Bring trusted experts to the site

During the event, it is ideal to have a physician or other health care provider on hand who is familiar with the population as well as CHOWs, *Promotores* or Ambassadors who can answer questions or concerns.

Plan for an ongoing effort

While the initial vaccination effort will likely take several weeks or months and may be a multi-entity campaign-style effort, the population that experiences homelessness and COVID-19 changes over time vaccination will likely be a critical health intervention for the foreseeable future. Communities with Health Care for Homeless programs and Street Medicine teams will need to build this into their regular workflows. For other communities, this is an opportunity for CoCs and homelessness services leaders to engage public health, county health and social services departments, local managed Medi-Cal health plans, and primary care and hospital partners about the ongoing importance of partnership and planning.



Other Considerations

One- or two-dose vaccine?

The newly approved Johnson & Johnson vaccine requires only one dose and does not require special refrigeration. Using the one-dose vaccine may be the pragmatic choice for delivery in the field, especially if medical-grade vehicles or other specialized equipment are not available. All the approved vaccines have high efficacy, particularly for preventing hospitalizations and death. Communities are encouraged to move quickly to provide vaccine to everyone who is eligible. People experiencing homelessness should be given similar information about the supply and offered a choice if one is available for others. If someone wants the two-dose course, provide information about whether this may delay vaccination for them, but make access available and support people to get there.

Places for people to rest and recover

Some people do not feel well after getting vaccinated. The most frequent effect is pain at the injection site, but some people experience significant fatigue, fever, and flu-like symptoms, especially after a second dose, or in some cases the first dose for

those who have already had COVID-19. These are normal reactions but may require some period of rest and respite. It will be important when working with people living outside or in encampments to have places that people can go for a few nights, such as a respite facility or a hotel, if they do not feel well, with connection to health services as needed. Staff may also want to prepare bags people can take with them with a few doses of Acetaminophen (Tylenol) and disposable icepacks.

Gathering contact information

It may be important to find or follow up with people after they have been vaccinated, especially if the vaccine being used requires two doses. Typical vaccine tracking with the general public collects only email, phone, and address. People who are homeless may move around and do not always have a consistent phone. Collect, with permission, as much information as possible, including phone number and/or email address if available, social media presence, whether the person will accept texts, phone number(s) for another trusted person likely to know where they are, frequent places where they stay, and programs who are likely to see or be able to find them.

About this series

The State of California Homelessness Coordinating and Financing Council, the California Health Care Foundation, and the Benioff Housing and Homelessness Initiative at UCSF have joined together to create a series of resources to help homelessness response system leaders and providers to prepare and implement a strategy for vaccinating homelessness service workers and people experiencing homelessness in every California county and community.

