

VACCINE PREPARATION FOR CALIFORNIA'S HOMELESSNESS RESPONSE SYSTEM

COVID-19 vaccination is one of the most important tools to end the COVID-19 pandemic. COVID-19 vaccines are safe, free to all Californians, and up to 95% effective.

Due to the currently limited supply of vaccine, vaccination is happening in a phased and prioritized approach in California to ensure access and equity. The approach is based on a streamlined statewide framework.

California is prioritizing for vaccination based on risk and age, particularly those who are 65 and older. Vaccines will be allocated to make sure low-income neighborhoods and communities of color have access to vaccines, and providers will be compensated in part by how well they are able to reach disparately affected communities.

The Centers for Disease Control (CDC) has provided guidance that vaccine distribution plans should incorporate strategies to bring the vaccines to places where people experiencing homelessness are, including homelessness service sites like shelters, day programs, or food service locations. If possible, it is recommended to vaccinate everyone on-site, including both staff and guests.

This document is a guide for homelessness response system leaders and providers to understand and prepare for a rapid rollout of vaccinations for staff and clients when the state reaches this priority population. Additional detailed information will be released over the coming weeks to further support these efforts.

ABOUT THIS SERIES

The State of California Homeless 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 prepare and implement a strategy for vaccinating homelessness service workers and people experiencing homelessness in every California county and community. These planning materials are the first resources of the series.



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CURRENT CONTEXT FOR PLANNING

Coordination is critical

Developing a plan to vaccinate staff and people experiencing homelessness will likely require coordination with multiple agencies. To date, vaccines have been distributed to a variety of providers within every county including public health departments, Federally Qualified Health Centers, tribal health programs, private health care organizations and pharmacies. Outreach and distribution will soon become more centralized across the State but delivery will still rely on many providers and venues. Coordinating and partnering with local health departments now can facilitate inclusion of staff and clients of the homelessness response system in vaccination planning.

Trusted Messengers Matter

People experiencing homelessness and people most impacted by COVID-19 are disproportionately Black, Indigenous, and People of Color (BIPOC). Some staff and clients may be reluctant to be vaccinated, having concerns or experiences of personal, familial, and historic racial trauma related to health care and vaccination. Successful efforts will need trauma-informed and tailored strategies that build confidence, deliver clear and accurate information from trusted messengers, and meet people where they are.

Vaccine Availability is Fluctuating

Availability of the vaccine is changing rapidly and frequently, and guidelines may shift as the State continues to develop strategies to make vaccines available to everyone in an efficient and equitable manner.

Tracking Support may be Needed

The two currently available vaccines require two doses to be fully effective; planning must take into account the ability to give two doses over a three to four-week period. People experiencing homelessness may not have the ability or interest to participate in a smartphone-based notification and reminder system which is being used for many others receiving vaccine. Communities and providers will need to consider additional methods to help track and remind.



- Begin to prepare your community or agency's COVID-19 vaccination plan right away in partnership with your local public health department.
- 2. When convening your planning team, ensure the team includes people with lived experience of homelessness and Black, Indigenous, and People of Color (BIPOC) who are representative of the population who experience homelessness in your community.
- 3. Use the attached checklists to inform your preparation process.

STAY INFORMED

Continue to check back at the Department of Public Health and the Homeless Coordinating and Financing Council page for new information and materials.

California for All Vaccine Information

HCFC Coronavirus
Resources

ADDITIONAL INFORMATION
Centers for Disease Control
and Prevention
Frequently Asked Questions

U.S. Department of Housing and Urban Development
Vaccine Planning and Distribution

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VACCINE PREPARATION CHECKLIST



FOR HOMELESSNESS RESPONSE SYSTEM LEADERS

Continuums of Care, County welfare departments and other funders

		PLAN	WITH	PUBLIC	HEALTH
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Connect immediately with your local Department of Public Health, Health Care for the Homeless, Tribal Health Program, and other key health care providers in your community to jointly plan for vaccinating staff and people experiencing sheltered and unsheltered homelessness. Find contact information for your local Department of Public Health at the California For All website and Tribal Health Programs through Indian Health Services.



HUD and CDC concur that the best strategy is to take vaccination efforts to where people experiencing homelessness are and to vaccinate both staff and clients if possible. Use this information to advocate for local vaccination events at shelters, Project Roomkey sites, encampments, and other sites frequented by people experiencing homelessness.

PLAN WITH PEOPLE WITH LIVED EXPERIENCE OF HOMELESSNESS

Ensure meaningful participation from people with lived experience and Black, Indigenous, Latinx, and People of Color are on your planning team to help design and implement vaccine awareness, confidence building, and vaccine rollout.

CREATE A TEAM OF VACCINE AMBASSADORS

Vaccine Ambassadors are trusted and trained community members including wellrespected program staff, people with lived experiences of homelessness, and members of racial groups most impacted by homelessness and COVID-19 who can provide information and answer questions.

ESTIMATE DOSES NEEDED

Estimate the number of doses that will be needed. Make use of Point-in Time Count and Homeless Management Information System (HMIS) data and by-name lists to help estimate numbers of individuals who are sheltered and unsheltered, and map critical locations.

DEVELOP LIST OF POTENTIAL VACCINE SITES

Develop an order of priority for locations to offer vaccination, beginning with shelters, Project Roomkey sites, and other congregate settings. Ensure that racial disparities are considered in developing plans so that Black, Indigenous and People of Color experiencing homelessness have equitable access to the vaccine.

Consider having vaccinators go first to sites with the highest numbers of older people, larger sites, and sites where distancing has been more difficult. Partner with the priority sites to ensure they are

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ready and eager to participate, and that people with lived experience support the recommended sites.

DEVELOP TRANSPORTATION STRATEGIES

If vaccines cannot be brought to all locations, transporting staff and people experiencing homelessness to wider community vaccination events or locations may be needed. Work with local public health to make transportation and any off-site events easily accessible, safe, and welcoming for people experiencing homelessness.

PLAN FOR DATA COLLECTION

HMIS can collect information for planning, delivering, and tracking vaccine delivery to people experiencing homelessness. Engage with your HMIS lead and vendor to start planning. New fields may include a person's interest in receiving vaccination, their location, date of first vaccination, projected date of second vaccination, contact information, etc. Ensure that local HMIS privacy policies allow this.



Remember that not everyone experiencing homelessness agrees to be in HMIS and this should not be a basis for denying services or access to vaccine. Plan for other ways to support tracking if needed.

ALLOCATE RESOURCES TO SUPPORT THE PLAN

Identify resources that can support a successful vaccination plan. Emergency Solutions Grants (ESG) and COVID-19 Emergency Solutions Grants (ESG-CV) funds can be used for many costs including hiring vaccine ambassadors, renting space and transportation for events, mobile outreach, training, and providing personal protective equipment (PPE) and supplies. Homeless Emergency Aid Program (HEAP) and Homeless Housing, Assistance and Prevention Program (HHAP) funds can also be used for these costs, with the appropriate change request information submitted to HCFC.

COMMUNICATE

Provide information as you receive it to your providers, people experiencing homelessness, and stakeholders. Use fact sheets with graphics, provider calls, websites, and social media to share information. California has downloadable materials available in many languages. Invite Public Health or Health Care for the Homeless representatives to join meetings and communications to help address questions and concerns.

SUPPORT

Support your shelter and Project Roomkey providers to undertake their checklist of activities.

SPOTLIGHT: VACCINE AMBASSADORS



Vaccine Ambassadors provide outreach to people experiencing homelessness (PEH) to increase vaccine confidence. Ambassadors will disseminate clear and consistent information about the vaccine and facilitate two-way communication between PEH, public health, and homelessness partners to support goals for equitable vaccine distribution.

See more including funding options and a job description

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VACCINE PREPARATION CHECKLIST



FOR PROJECT ROOMKEY OPERATORS
AND SHELTER PROVIDERS

PARTICIPATE IN PLANNING

Engage with homeless system leaders, public health, and other local stakeholders to develop a coordinated vaccine strategy. Help ensure that your staff and people with lived experience are included in the planning stages and support their participation.

START CONVERSATIONS NOW

Start talking with staff and residents right away about the vaccine and its benefits and limitations; use these conversations to address questions and concerns. Use HUD-developed materials on how to have these conversations and answer any questions (see "Building Confidence" section below).

Identify trusted leaders among your staff and residents who can be Vaccine Ambassadors; work with your system leaders to establish and pay for an Ambassador program — HEAP, HHAP, Emergency Solutions Grants ESG and ESG-CV funds can be used for this purpose.

Remember that historic and continuing racial trauma and experiences with the medical system may make some people, particularly Black, Indigenous, and People of Color

Give people information to make decisions for themselves; make sure myths and misinformation are addressed and the benefits of the vaccine are conveyed, but do not pressure people to be vaccinated or require vaccination.

(BIPOC), reluctant to get the vaccine; tailor strategies and messages to these concerns and partner with trusted health providers.

PLAN FOR PHASING IF NEEDED

While the ideal practice will be to have everyone at a particular site (staff and residents) vaccinated at once, this may not be possible due to limited vaccine supply. To prepare for the possible need to prioritize among staff and residents, have an internal priority order ready according to local public health guidance.

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SURVEY SPACE AND PLAN FOR LOGISTICS

To accommodate and support vaccinations at your site, you will need to prepare the space and coordinate with the health organizations that will administer the vaccine.



If practical, set up the vaccination process outside to help reduce the spread of COVID-19.

Ensure there is space for health providers to set up and deliver the vaccine and area to observe those who have been vaccinated for 15-30 minutes.

Know what the team doing the vaccinations will bring and what supplies you need to provide.

Plan for staff and Vaccine Ambassadors to ensure a smooth event where the vaccine is efficiently administered, and where residents and staff know what to expect and are supported.

If you will be transporting staff and residents to a community vaccination event, ensure trusted staff or ambassadors can accompany people and help them at the site.

TRACKING AND FOLLOW UP

Once staff and residents are vaccinated, they will need a second vaccine within several weeks, depending on the vaccine used. People getting vaccinated are generally being asked to enroll in VaxText, a smartphone-based tool to provide reminders. However, not everyone will have a phone or want to participate in this type of follow-up. Your agency may need to act as a backup or primary source for finding and reminding people when the second dose is needed. Talk with local public health about options for tracking and follow-up, including using HMIS.



BUILDING CONFIDENCE: HOLDING CONSTRUCTIVE CONVERSATIONS

People may have many reasons for being concerned or reluctant about the vaccine. In particular, BIPOC may have negative personal, familial, and historical experience of the medical system and of vaccination that informs their thinking.

To provide clear information and answer questions, staff and residents who can act as Vaccine Ambassadors need information, strategies, and practice for messaging and answering concerns in ways that respect people's experiences and autonomy to make decisions.

HUD has issued guidance and tools for how to have effective conversations about the vaccine with staff and clients. California will soon provide additional messaging tools and lessons learned from communities where efforts are underway.



See HUD issued guidance and tools.

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