Vaccine Operational Guidance for Homeless Provider Staff and People Experiencing Homelessness

March 16, 2021

Background

This operational guidance includes recommendations intended to help Homeless Service Organizations plan for prioritization of vaccines for the following:

- Homeless Provider Staff (Group 3 Frontline Essential Workers) – Eligible starting March 3, 2021
- People Experiencing Homelessness or Domestic Violence (Group 4 Adults at High Risk for Exposure and Increased Risk of Severe Illness) – Eligible starting March 17, 2021

Initially, some vaccine providers may be ready to vaccinate homeless provider staff and people experiencing homelessness as early as March 3rd and March 17th respectively while other vaccine providers may continue to focus on vaccinating Group 1 (health care workers and long term care facility staff/residents) and Group 2 (adults ages 65 and older) if they are still experiencing significant demand from these populations. Vaccine providers include most hospitals and health systems, most federally qualified health centers, all local health departments, some pharmacies, and some clinics.

1. Who is eligible for vaccination in Groups 3 and 4?

Starting March 3, 2021, North Carolina will open vaccinations to Frontline Essential Workers, including the groups of homeless provider staff listed below who work in the following settings AND roles (this list is not exhaustive):

<table>
<thead>
<tr>
<th>Settings</th>
<th>Roles</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Shelters</td>
<td>• Homeless Shelter Staff</td>
</tr>
<tr>
<td>Transitional Housing</td>
<td>• Social workers, counselors</td>
</tr>
<tr>
<td>Street Outreach</td>
<td>• Domestic Violence Staff</td>
</tr>
<tr>
<td>Rapid Rehousing/Homelessness Prevention Organizations</td>
<td>• Residential Counselors</td>
</tr>
<tr>
<td>Case Management</td>
<td>• Case Managers</td>
</tr>
<tr>
<td>Other settings that are required to be in-person at the worksite</td>
<td>• Outreach Workers</td>
</tr>
<tr>
<td></td>
<td>• Food Service Workers (e.g., soup kitchen, food pantry, etc.)</td>
</tr>
<tr>
<td></td>
<td>• Custodial Staff</td>
</tr>
</tbody>
</table>
Due to the high-risk of the population, all people experiencing homelessness that were not already eligible in Groups 1 – 3 are eligible for the COVID-19 vaccine in Group 4. This includes:

1. People that live in emergency shelters, transitional shelters or other congregate settings;
2. People that live in a place not meant for human habitation (e.g., camp, car, etc.); and
3. People who are fleeing or attempting to flee domestic violence and are currently residing in domestic violence or other emergency shelters.

2. How should communities and homeless service providers begin plans to vaccinate people experiencing homelessness or fleeing domestic violence and homeless provider staff?

People experiencing homelessness and homeless provider staff can get vaccinated by any vaccine provider in North Carolina. You can learn which vaccine providers are near you by visiting Find a Vaccine Location (myspot.nc.gov).

Developing a plan to vaccinate 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 local health departments, Federally Qualified Health Centers (FQHCs), tribal health programs, private health care organizations, and pharmacies. Coordinating and partnering with local health departments now can facilitate inclusion of these populations in vaccination planning.

People who are experiencing homelessness may have difficulty accessing medical services in traditional settings, such as a clinic or pharmacy. Therefore, vaccine distribution plans should include strategies to bring vaccines to people experiencing homelessness and staff, including homeless service sites like shelters, day programs, or food service locations. The COVID-19 vaccination program implementation plans should also include strategies to offer vaccination in areas frequented by people experiencing unsheltered homelessness. These areas could include encampments or other known locations where people experiencing unsheltered homelessness spend time.

3. What steps should a Continuum of Care or Homeless Service Organization take in planning vaccination distribution and administration for people experiencing homelessness?

Step 1: Meet locally to determine roles and responsibilities of partners. Continuums of Care (CoC) are encouraged to meet with homeless service organizations in their communities to determine the best strategy for vaccination rollout for people experiencing homelessness. In some communities, the CoC may work with one or more vaccine administrator to create a plan for all homeless service organizations in that community or region. In others, the CoC and the organizations in the community may choose to take a less centralized approach where each homeless service provider would work with a vaccine administrator to develop a plan for vaccinating the people they serve. There may also be situations in which a mix of models is most effective. Communities should review HUD guidance on Vaccine Planning and Distribution: Roles and Responsibilities. As communities start planning, consult the HUD guidance on Questions to Assist CoCs and Public Health Authorities to Plan and Prepare for Vaccine Distribution.
Step 2: Contact a local vaccine administrator in your county or region. Vaccines are currently administered by a variety of health care providers, including local health departments, hospitals, pharmacies, Federally Qualified Health Centers (FQHCs), and others. Continuums of Care and/or Homeless Service Providers should reach out to local vaccine administrators in their county and region to find a partner to vaccinate people experiencing homelessness. This may be the same partner for COVID-19 testing or other healthcare activities. You can learn which vaccine providers are near you by visiting Find a Vaccine Location (myspot.nc.gov).

Homeless service organizations who are unable to connect with a local vaccine provider in their area should contact Erika Ferguson (Erika.Ferguson@dhhs.nc.gov) for further assistance.

Step 3: Determine vaccine roll-out strategy that works best for your community or organization. Continuums of Care and/or Homeless service providers should work with these vaccine administrators to determine the best strategy for vaccinating people experiencing homelessness in their community or region. There are two options for vaccinating homeless populations that HUD describes in guidance (here). Flexible planning can ensure either type of rollout is successful.

- Scenario 1: Bring the Vaccine to a Program (e.g., shelter, encampment, meal service site)
- Scenario 2: Bring the People to the Vaccine (e.g., clinic, pharmacy, mass vaccination event, or other community vaccination site)

HUD: Vaccination in Congregate Settings: Event Types and Considerations Guidance

Bringing the Vaccine to a Program Site: Holding vaccination events at community-based venues like emergency shelters or meal service sites may eliminate some barriers including transportation and fear for members of the community who have experienced discrimination and negative interactions with medical providers. However, on-site vaccination may not be possible in some communities based on vaccine administrator capacity or the number of people served at a site.

Bring the People to the Vaccine: Even if a community plans on-site vaccination events at different organizations and/or programs, there will still be a need to plan for bringing people to the vaccine (e.g., clinics, pharmacies, mass vaccination events, or other sites). Homeless service organizations that have transportation may plan to use their own transportation. Others may opt to coordinate with local public transportation providers that are providing free transportation to vaccine sites. People in North Carolina who need transportation assistance to receive a COVID-19 vaccine should reach out to their local transit agency. You can find your local transit agency online at North Carolina Public Transit (https://www.ncdot.gov/divisions/public-transit/Documents/NC_public_transit.pdf). Local transit agencies serve all 100 North Carolina counties.

Make sure to include Domestic Violence Shelters and other Victim Service Providers in community planning. Find additional guidance on special considerations for vaccine distribution to survivors here: HUD: Vaccine Distribution & Survivor Safety Considerations for Homeless Service Providers

Step 4: Work with Vaccine Administrator Partner to Submit Vaccine Event Application.
To ensure that people experiencing homelessness and homeless provider staff have access to COVID-19 vaccines, NCDHHS is prioritizing shelters and other homeless organizations for vaccine events. Events are additional allocations to a Vaccine Administrator that is partnering with a Homeless Service Organization to vaccinate people experiencing homelessness and homeless provider staff.
Applications for event vaccine allocations are submitted by vaccine providers. NCDHHS will send
reminders to all homeless service organizations about vaccine event applications each week. Homeless
service organizations can work with their vaccine administrator partner to submit an application for the
additional allocation. For the application, homeless service organizations will need to provide their
Vaccine Administrator Partner with an estimated number of people that need and want vaccination.
Please provide outreach to clients and staff to determine a true estimate of the number of people
interested in a vaccine. Not all clients and staff may be interested in vaccination at the first event.

NCDHHS is collecting anticipated event applications for homeless vaccination events and will also send
reminders to all homeless service organizations about upcoming vaccine event applications deadlines so
that organizations can reach out to their vaccine provider partners. For the application, homeless service
organizations will need to provide their Vaccine Administrator Partner with an estimated number of
people that need and want vaccination. Please provide outreach to clients and staff to determine a true
estimate of the number of people interested in a vaccine. Not all clients and staff may be interested in
vaccination at the first event.

Step 5: Continue to Work with Vaccine Partner to Ensure all People Experiencing Homelessness Have
Access to Vaccinations
Effectively vaccinating people experiencing homelessness will not be a one-time event. There will need
to be continuous outreach, education, and partnership with vaccine administrators to make sure all
people experiencing homelessness have access to vaccines. Make sure people experiencing
homelessness have access to multiple vaccination events to allow clients time to consider receiving the
vaccine.

4. How can we help build vaccine confidence in our community?
Consider taking the following steps to educate your employees and clients about the COVID-19 vaccine:
- Send letters, text messages or email blasts
- Schedule meetings with residents, networks, and team members to learn about the COVID-19
  vaccine to share information about the COVID-19 vaccines
- Display posters and other printed materials in places where staff and clients spend the most
time
- Post vaccine information on your organization’s social media or worksite television monitors
- Partner with trusted community leaders to promote getting your vaccine when it’s your turn

Resources to share with your employees about the COVID-19 vaccine:
- **HUD Exchange Homeless System Response: Vaccine Planning and Distribution Resources.** Updated resources from HUD and other partner related to vaccines.
- **Flyers and Fact Sheets:** Print and share flyers in your community.
  - Bilingual - Your Best Shot Against COVID-19
  - Simpler Flyer – English / Spanish
  - Postcard Size Handout – English / Spanish
- **Infographic:** Use on your website and digital displays.
  - North Carolina’s Vaccine Groups – English / Spanish
- **Videos:** Post on social media, play on internal displays, and share on websites and in
  newsletters.
NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

- English Video Library / Spanish Video Library featuring faith leaders, community leaders, frontline workers, older North Carolinians and more

- Social Media Graphics: Post on your social media channels using our Social Media Graphics

- FAQs: Use to answer questions that staff may have about the vaccine. Our frequently asked questions are updated weekly.
  - FAQ - English – English / Spanish (updated weekly)

- Presentation: Become a Vaccine Ambassador by attending a Vaccine 101 presentation. Register now. (Recommended for school administrators who want to be knowledgeable about COVID-19 vaccine facts.)
  - Vaccine 101 Deck – English / Spanish

- Collect and Share Stories: Share stories of people telling why they got or plan to get the vaccine. Use this tip sheet to record and share a video or photo.
  - Tip Sheet to Record Your Vaccine Selfie – English / Spanish

- Website: Link to our Vaccine websites.
  - YourSpotYourShot.nc.gov

Equity and Trusted Messengers. 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.

As you develop communications strategies, consider:

- Including people experiencing homelessness and/or people with lived experiencing in the communication and distribution planning
  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.

- Identifying trusted messengers or “Vaccine Ambassadors”
  Vaccine Ambassadors are trusted and trained community members including well-respected 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. Note: Vaccine Ambassador roles can be funded through ESG-CV or ESG annual funds.

Find additional resources and communications resources on HUD’s website: COVID-19 Homeless System Response: Vaccine Planning and Distribution

Vaccine 101 Training for Homeless Service Leaders: Homeless service leaders (e.g., case managers, peer support, etc.) can attend a NC Department of Health and Human Services (NCDHHS) Vaccine 101 presentation so that they can help direct employees to trusted sources of information. Please submit a request using NCDHHS’s form if your organization is interested in helping to organize a vaccine 101 presentation led by NCDHHS presenters.

5. What vaccine should my organization or vaccine administrator partner use?

All three vaccines are safe and effective. More than 100,000 people volunteered in clinical trials for all three vaccines (Pfizer, Moderna and Johnson & Johnson) to make sure they are safe and work to
prevent COVID-19 illness. The vaccines help protect you from COVID-19 and are extremely effective in preventing death and hospitalization from COVID-19 with no serious safety concerns noted in any of the clinical trials. The U.S. Food and Drug Administration (FDA) makes sure the vaccines are safe and can prevent people from getting COVID-19. Like all drugs, vaccine safety continues to be monitored after they are in use.

However, the one-dose Johnson & Johnson/Janssen COVID-19 vaccine can be transported and stored more easily at a refrigerated temperature of 3-8°C. These product characteristics are amenable for use in mobile clinics or sites, such as on-site events at homeless shelters, that do not have freezer capacity necessary for storing the mRNA COVID-19 vaccines. The single-dose vaccine might be desirable for people who want or need to complete their immunization schedule with a single visit or who might have difficulty returning for a second dose. In addition, a single dose vaccine may be desirable for mobile populations or populations with high turnover, such as residents in homeless shelters and people experiencing homelessness.

6. Can I provide incentives to people experiencing homelessness to encourage vaccination?

Vaccination is an important tool to control the COVID-19 pandemic. Building relationships and providing consistent, transparent information will be important to ensuring that clients feel comfortable receiving the COVID-19 vaccine. However, some organizations may choose to provide additional incentives to people experience homelessness to increase overall vaccination adherence. HUD has released additional guidance on incentives: [HUD: Utilizing Incentives to Increase Vaccine Adherence](#)

7. Is there funding available to support people experiencing homelessness and homeless provider staff in getting vaccinated?

Emergency Solutions Grants (ESG) annual or ESG-CV funds can be used for a wide range of activities that support vaccine planning and distribution. Sub-recipients can use ESG or ESG-CV funds to assist with vaccine rollout. Eligible vaccine-related costs under the street outreach and or emergency shelter components include but are not limited to:

<table>
<thead>
<tr>
<th>Cost Item</th>
<th>Emergency Shelter</th>
<th>Street Outreach</th>
</tr>
</thead>
<tbody>
<tr>
<td>Renting spaces for vaccine events</td>
<td>Outpatient Health Services</td>
<td>Emergency Health Services</td>
</tr>
<tr>
<td>Hiring vaccine ambassadors to engage/educate peers about the vaccine</td>
<td>Case management</td>
<td>Engagement Case management</td>
</tr>
<tr>
<td>Transporting people to/from vaccine events</td>
<td>Transportation</td>
<td>Transportation</td>
</tr>
<tr>
<td>Mobile outreach vans and staff to support vaccine distribution</td>
<td>Not Applicable</td>
<td>Emergency Health Services</td>
</tr>
<tr>
<td>Staff training on vaccine and rollout strategies</td>
<td>Training</td>
<td>Training</td>
</tr>
<tr>
<td>PPE and supplies at vaccine events</td>
<td>Operations</td>
<td>Emergency Health Services</td>
</tr>
</tbody>
</table>
8. Should homeless provider organizations continue to use COVID-19 protection strategies (e.g., masks, social distancing, non-congregate shelter) after vaccine has been administered to staff and clients?

Homeless service providers should continue encouraging all precautions, including wearing a well-fitting mask that covers your mouth and nose when around others, staying at least 6 feet away from others, avoiding crowds, avoiding poorly ventilated spaces, and washing your hands often. Continue to follow the prevention recommendations for homeless service providers, including the provision of overflow sites to allow for decompression, and recommendations related to unsheltered homelessness. Additionally, reducing crowded living conditions can decrease the risk of other respiratory and skin conditions. To help with long-term decompression strategies, public health jurisdictions and homeless service providers should work with local partners to continue connecting people experiencing homelessness to permanent housing.

Not enough information is currently available to say if or when CDC will stop recommending that people wear masks and avoid close contact with others to help prevent the spread of the virus that causes COVID-19. We also do not yet know whether getting a COVID-19 vaccine will prevent you from spreading the virus to other people, even if you don’t get sick yourself. Experts are working to understand whether new variants of the virus that causes COVID-19 change the effectiveness of COVID-19 vaccines. While experts learn more about how COVID-19 vaccines work in real-world conditions, it will be important for everyone to continue using all the tools available to help stop this pandemic.

For more information, please see NCDHHS’s [Interim Guidance for Individuals Who Have Been Vaccinated](https://www.ncdhhs.gov/coronavirus/interim-guidance-individuals-who-have-been-vaccinated).


Organizations that request additional PPE or cleaning supplies can reach out to Erika Ferguson (Erika.Ferguson@dhhs.nc.gov).

9. Now that the COVID-19 vaccine is available to people experiencing homelessness, should the vaccine be a requirement to access homelessness services (e.g., shelter)?

Vaccination is an important tool to control the COVID-19 pandemic. However, because homeless services are critical to survival and well-being, service providers should take all steps possible to ensure that providing vaccination does not create a barrier to entry into homeless service sites. Building relationships and providing consistent, transparent information will be important to ensuring that clients feel comfortable receiving the COVID-19 vaccine.
10. Is there a cost to receive a COVID-19 vaccine?

There is no cost. They are free to everyone, even if you don’t have health insurance. The federal government is covering the cost. Administration fees will also be covered for those who are uninsured and should be covered by all health insurance companies. No vaccine provider should be charging anyone to receive the vaccine.

11. What kind of identification is needed to receive a COVID-19 vaccine?

North Carolina does not require a government-issued identification card, like a driver’s license, to be vaccinated. Vaccine providers should not ask for photo identification. Instead, vaccine providers are encouraged to use other ways to confirm that they are vaccinating the right person. Vaccine providers may ask people to pre-register, to fill out a form on-site with their name, address and date of birth, or ask for a bill or other document with your name and address on it. Vaccine providers should not withhold vaccinations or appointments for vaccinations because you cannot present identification.

12. Can non-US citizens receive a COVID-19 vaccine?

The COVID-19 vaccine will be available to everyone for free, whether or not they have health insurance and regardless of their immigration status. Information is kept confidential and won’t be shared with ICE for immigration enforcement. Getting the vaccine does not have a negative impact on people’s chances of adjusting their immigration status. The Department of Homeland Security released a statement on equal access to COVID-19 vaccines and vaccine distribution sites.