People living in encampments during public health emergencies, such as the COVID-19 outbreak, need targeted support to avoid becoming sick and to continue receiving life-sustaining supplies like food and water. Continuums of Care (CoCs) should confirm the status and contingency plans for outreach services.

Sanitation and Safety: Sanitation and social isolation practices are important to limit the spread of infection among people living in encampments.

- Coordinate with public health and emergency management officials to ensure that an encampment cleaning schedule is implemented. Appropriate cleaning and disinfecting measures to support the health of encampment residents may assist in reducing the risk for infection.

- Ensure nearby restroom facilities have functional water taps, are stocked with hand hygiene materials (soap, drying materials) and bath tissue, and remain open to people experiencing homelessness 24 hours per day.

- Public facilities may be closed for an extended period of time or may not be accessible to encampment residents. If toilets or handwashing facilities are not available nearby, provide access to portable latrines with handwashing facilities for encampments of more than 10 people. Pursue options for mobile hand washing stations and portable latrines through public health or local offices of emergency management.

- Provide hand sanitizer and other hygiene products to encampment residents on a regular basis.

- Communicate about practices that help people stay safer like washing hands, covering coughs, maintaining distance.

- Encourage people staying in encampments to set up their tents/sleeping quarters with at least 12 feet x 12 feet of space per individual.

- In coordination with local healthcare providers and public health, establish a set protocol for reporting symptoms and coordinating medical care when concerned about an encampment resident’s health.

- Engage encampment residents from 6 feet away and explain the reason for the precaution.


Access to food and water: CoCs should ensure that an organization is identified to deliver these life-sustaining commodities. Local non-profits and voluntary organizations may be limiting volunteer options during this time of increased risk. Once aware that encampment residents have lost reliable sources of food and water, CoCs should contact the designated organization to facilitate delivery.
and water, CoCs should immediately alert local or state offices of emergency management to ensure residents have restored access to these vital resources.

**Service Coordination**: During this time of enhanced risk and reduced service delivery, consider documenting an outreach schedule that includes local emergency response officials. Clear articulation of which entity is delivering what commodity at what location is important to ensure no gaps emerge.

- Reach out to partners for support: Engage street medicine teams, Healthcare for the Homeless agencies, public health agencies, law enforcement partners.
- Consider offering opportunities for unsheltered individuals to be tested for COVID-19 when field tests become available. A symptom screening tool may assist in making that decision. An example of a symptom screening tool is posted on the HUD Exchange here:
  - [COVID-19 Client Triage Tool: Atlanta, GA CoC Example](#)

**Related Resources**

- [Interim Guidance for Responding to Coronavirus Disease 2019 (COVID-19) among People Experiencing Unsheltered Homelessness](#) (Centers for Disease Control and Prevention)
- [Infectious Disease Toolkit for CoCs](#) (Department of Housing and Urban Development)

**Ask A Question**

Submit questions to the [Ask A Question (AAQ) portal](#). In Step 2 of the question submission process, select “CoC: Continuum of Care Program” from the “My question is related to” drop down list and write “Health Preparedness and Response” in the subject line.

---

Unless individual housing units are available, **do not** clear encampments during community spread of COVID-19. Clearing encampments can cause people to disperse throughout the community and break connections with service providers. This increases the potential for infectious disease spread.

---

*This resource is prepared by TA providers and intended to help recipients and subrecipients understand the ESG Program Interim Rule. Always refer to the program regulations to ensure compliance with program requirements. The contents of this document, except when based on statutory or regulatory authority or law, do not have the force and effect of law and are not meant to bind the public in any way. This document is intended only to provide clarity to the public regarding existing requirements under the law or agency policies.*