

Safety Considerations for Counting During COVID-19

The Housing Inventory Count (HIC) and Point-in-Time (PIT) count are essential data points for understanding the resources available to people experiencing homelessness compared to the number and characteristics of people experiencing homelessness. PIT counts are a critical way of interacting with people experiencing homelessness, often including service engagement or provision of needed supplies, and understanding the scope of the issue so that Continuums of Care (CoCs) can strategically plan on how to end homelessness in their communities.

HUD is committed to maintaining safety. Conducting the PIT counts requires coordinating a lot of people. During a pandemic, the gathering and intermixing of many people presents a risk of spreading the virus. However, this risk of virus spread can be minimized. Homelessness and health challenges are connected, with many health conditions caused or worsened by the lack of housing. The following safety guidance strikes a balance between the need to maintain safety while collecting sufficient data to make life-saving decisions about serving people experiencing homelessness. CoCs can take the following steps to minimize the risk of spreading COVID-19 while conducting their counts.

Vaccination Status for People Conducting the Count: CoCs should encourage all people involved in counting to be fully vaccinated to participate in the PIT count. A CoC can choose to allow people to count who are not fully vaccinated but should follow the health precautions outlined below, as well as other safety procedures like wearing a mask and adhering to social distancing.

Health precautions: To prevent the risk of spreading COVID-19, CoCs should recommend that any volunteer be tested for COVID-19 prior to participation in the count no more than 7 days prior. If you need help coordinating testing for volunteers, consider reaching out to your local health department. CoCs should recommend that volunteers stay home if they are experiencing symptoms of COVID-19 (please see the CDC page on <u>COVID-19 symptoms</u>). CoCs should encourage volunteers to stay home if they have any symptoms and plan for volunteer absences. CoCs should also recommend volunteers observe for symptoms for up to 14 days after the count and consider getting tested for COVID-19. Many states and communities have created contact tracing applications so that people understand who they have come in contact within the event they, or someone they interacted with, tested positive for COVID-19. CoCs should consider requiring or at least suggesting that enumerators download that application if one is available in the jurisdiction they are counting in.

Personal Protective Equipment (PPE): CoCs should ask all volunteers to bring masks and wear them for the duration of the count and other volunteer efforts. CoCs should be prepared to provide masks to all volunteers as well as hand sanitizer. HUD recommends that all volunteers conducting the count bring masks to provide to those they are interviewing. Depending on the level of community transmission of COVID-19, CoCs should consider whether to also provide gloves, face shields, N95 masks, or other PPE. CoCs will have to work with their local public health authority to ensure they provide adequate PPE for conducting a safe count. For more information, refer to the CDC presentation regarding <u>PPE</u>.

Social distancing: CoCs will need to conduct counts in compliance with social distancing principles which recommends remaining at least 6 feet apart. CoCs should create small counting teams, with only



two or three volunteers per team. These teams should maintain at least six feet from one another other as well as people experiencing homelessness.

Volunteers: Conducting unsheltered PIT counts in many CoCs requires a large number of volunteers. Many CoCs have historically relied on volunteers that are 55 and older as well as post-secondary students, who are less likely to participate due to the COVID-19. HUD discourages CoCs from using volunteers that are at high risk of contracting COVID-19, including persons age 65 or older, to physically count. If your CoC has people that want to volunteer but are in a high-risk group, HUD encourages you to determine if there are other ways to use their services that minimize their exposure (e.g., entering data from surveys collected), or to politely decline their assistance this year. Also, many colleges and universities are allowing virtual learning which is limiting the number of students in communities that would ordinarily participate in the counts. CoCs can still reach out to their local colleges and universities to see if there is a way to mobilize students that are studying virtually. Communities are encouraged to engage their volunteer bases, taking into consideration those groups that are considered higher risk populations. Remote trainings and physical distancing may mean new volunteers may express interest in participating.

Homeless Service Provider Staff: Many homeless service providers are understaffed and have maximized their current staff capacity. Many CoCs will likely rely on homeless service provider staff to serve as enumerators. Homeless service providers could partner to coordinate multi-day counts, leveraging the work they are already doing with unsheltered populations to understand where people were sleeping on the night of the count.

Remote PIT Count Training: To limit social interactions, HUD recommends that CoCs maximize use of remote training options. This allows volunteers to train on the own time, at their own pace, and in their own space. However, it increases the likelihood that volunteers will be distracted and not fully absorb the material. To increase the effectiveness of remote training options HUD recommends CoCs:

- 1. *Keep the training short*. A short training that focuses on safely identifying people experiencing homelessness, minimizing contact, and how to submit the collected data is recommended.
- 2. *Include a short quiz*. The quiz should be short (no more than 5 questions) and not be difficult. The CoC should give the volunteer the correct answers, with an explanation for why the answer was correct, and allow a volunteer to take the quiz unlimited times.
- 3. *Provide a point of contact*. The CoC should provide a point of contact who can answer questions about how and where to count.

Partnerships: CoCs should work closely with public health and health care partners to conduct the PIT count. Partnering with Health Care for the Homeless providers and the local public health authority will give CoCs needed insight about safely conducting the unsheltered PIT count and may provide additional access to health resources to conduct the count.

Sampling: HUD encourages CoCs to use sampling to conduct their counts. Prior to the count, CoCs will need to identify areas that have different homeless population densities and group them accordingly (these groups are referred to as strata). This may be as simple as high-density areas and low-density



areas or may include gradations of density. HUD recommends that CoCs work with statistical experts (e.g. university staff) to develop, implement, and analyze the count. For more information about how to implement a sample approach CoCs can review <u>How to Use Sampling within a CoC to Conduct an</u> <u>Unsheltered PIT Count</u>.

Mobile Counting Applications: For the past several years, several CoCs have used mobile technology to complete their unsheltered PIT counts. The mobile technology has allowed greater planning using GIS to regularly update where people are sleeping. Mobile technology requires less physical interaction with other people. CoCs that use mobile technology do not need to distribute printed maps or surveys to volunteers. Rather, volunteers can download the mobile application at home on their personal device and use that for the count. Mobile applications generally have a resource section that volunteers can use as a refresher on how to safely and accurately count. Mobile applications often allow quick feedback for CoCs to determine if data are complete.