

# GUIDANCE FOR ISOLATION OR CONGREGATE SHELTER PROCUREMENT DURING COVID-19

As cities strive to meet public health guidelines quickly, many cities are pressed with a need to find congregate or isolated shelter for residents who are not able to socially distance indoors. The following are best practices gathered from our participating cities.

## Congregate Settings

It is possible to maintain congregate settings during COVID-19, but it is important to practice social distancing even within existing shelters. To meet social distancing recommendations while accommodating the population of people who need shelter and services, we see cities de-densifying shelters, establishing new congregate settings, and reorganizing or redistributing the population based on risk and need.

- **Seattle, WA:** The city of Seattle has been working closely with county and state agencies to respond to COVID-19. Early in their collaborative response, the city assumed the responsibility of reorganizing the shelter system to maintain and/or create healthy and appropriate living environments for individuals and families in need. The city de-densified existing shelters (limiting occupancy to 50 people or fewer). Shelters prioritized families and high-risk individuals for isolated spaces. Additional shelters were created by converting underutilized buildings such as gyms and warehouses into congregate settings.

## Isolation Spaces

The highly infectious nature of COVID-19 makes isolation an important option, if resources allow, to help individuals and families stay safe and to slow the spread of the virus. Cities are making dramatic moves to provide thousands of isolation spaces to meet their immediate need to assist those living on the street or staying in congregate accommodations. It is common for these spaces to segregate members of homeless populations by health status, such as high-risk, asymptomatic, or symptomatic/confirmed positive.

- **London, UK:** The Greater London Authority (GLA) entered into an agreement with the UK branch of InterContinental Hotel Group PLC to provide hotel rooms for the city's homeless population. Following the national government's instruction that hotels must close unless they provide accommodations to health service staff, the GLA reached out to establish a pilot [program](#), securing 3,000 spaces for 12 weeks. During this period, hotels provide a skeleton staff (in most cases, only a receptionist), and the GLA provides all other services including food service, physical and mental health care, support services, transportation, and cleaning and maintenance.
- **Boston, MA:** Suffolk University responded to Mayor Walsh's requests to transform empty dormitories into homeless shelters during the crisis. City workers from the Mayor's Office of Tourism, Sports, and Entertainment [converted a 172-room dormitory](#) into a shelter in early May to house the city's homeless population.

- **Los Angeles, CA:** Utilizing [Project Roomkey](#), a California-based program that secured FEMA approval for 75% federal cost-share to lease hotel and motel rooms, the city of Los Angeles is working to provide all of its street homeless with shelter during this time. Unions are taking the lead in negotiating deals between hotels and public sector or non-profit entities to keep vacant rooms occupied during the crisis.
- **New York City and San Francisco:** These cities are using “master lease” permanent supportive housing properties (completely empty buildings with private rooms like a Single Room Occupancy [SRO], traditionally with a private landlord) to house people who need social isolation.
- **San Francisco, Los Angeles, and New York City:** These cities were all assisted in finding available hotel space through [Trestle Health and Housing](#), which established connection to large national hotel chains offering vacated facilities for use by homeless-serving systems.
- **Seattle, WA:** The city purchased a closed treatment center and is constructing villages of wooden tiny houses with limited HVAC systems to create isolation spaces.

### Key Takeaways and Considerations

- **Establish regional approach and standard protocols:** Assess total potential for each level of bed need for the region, and use triage screening and protocols to ensure clients are placed appropriately to keep them as safe as possible.
- **Utilize partners:** Establish partnerships by looking to agencies, landowners, labor unions, service providers, and different levels of government.
- **Leverage political capital:** Cities can leverage political will to make commitments beyond sheltering for permanent housing.
- **Recognize that expertise is still important during a pandemic:** Experienced non-profit service providers can be helpful in recruiting workers with essential skills to provide services to the homeless.