

INTRODUCTION

The COVID-19 pandemic has swept across national borders, overwhelming health systems and disrupting services worldwide. The homeless population is especially vulnerable during the pandemic for several reasons: they generally have a higher prevalence of comorbidities, poorer access to healthcare, and are economically disadvantaged. They have the added challenges of adhering to social distancing and hand-hygiene guidelines in aggregate living spaces. Not to mention the overarching impact of racism that exacerbates the factors listed. My project aims to address the challenges and needs of people experiencing homelessness in the face of the COVID 19 pandemic at the Rodeway Inn Shelter and House of Mercy.

COMMUNITY PARTNER

MC Collaborative was established 7 years ago by Christine McKinley and Andy Carey with the goal of serving homeless individuals in Rochester through collaboration with various local homeless advocacy groups.

Regarding the COVID-19 pandemic, their main concerns are:

- 1) Not having a digitalized symptoms screening system
- 2) Having outdated information regarding COVID-19
- 3) Staff burn-out during the winter

COMMUNITY HEALTH IMPROVEMENT PROJECT OBJECTIVES

- 1) To develop a streamlined and digitalized screening process
- 2) To provide up-to-date educational material (mini-lessons and posters)
- 3) To integrate these components into the UR Street Outreach rounds

SCREENING TOOL

Screening questions based on existing chat bot question flows were made into a form on Epi-Info, a free CDC software designed for epidemiologic information collection.



COVID-19 Symptom Screening

Date and Time: Name: Position:

In the past 24 hours, have you had any of the symptoms below that are new or unusual for you?

Temperature of 100 °F (37.8 °C) or higher
Chills
Severe Muscle or body aches
Severe Fatigue
Severe Headache
Congestion or runny nose (not due to allergies)
Sore Throat (not due to allergies)
Loss of taste or smell
Loss of appetite
Cough
Shortness of breath or difficulty breathing
Nausea, vomiting, or diarrhea

In the past 14 days, have you traveled outside of New York for more than 24 hours?

In the past 14 days, has anyone known tested positive for COVID?

Actual Temperature:

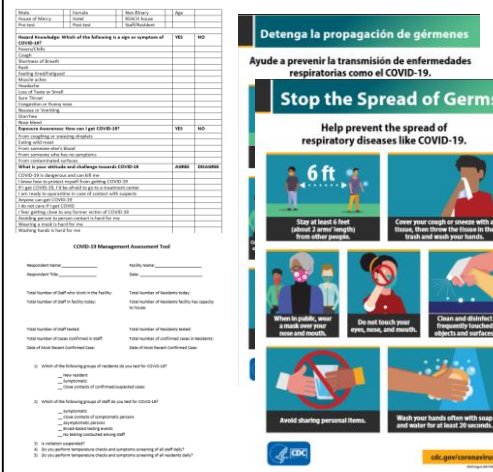
Initial of Staff Filling out Form:

EDUCATIONAL MATERIAL

There are 3 different mini-lesson plans: COVID-19 symptoms, Risk factors, and prevention. Each lesson contain basic information from CDC, WHO and Up-to-Date and are 3 minutes in length. Lessons are written in script-like fashion for easy delivery of content.

I planned to administer a COVID-19 attitude and knowledge assessment form as a pre-test and post-test to assess impact of the project. Additionally, a COVID-19 Management Assessment and Response Tool is used to assess the safety practices at each location.

Educational posters are adapted from the CDC website to fit the context of homelessness and distributed at each location.



Detenga la propagación de gérmenes
Ayude a prevenir la transmisión de enfermedades respiratorias como el COVID-19.

Stop the Spread of Germs
Help prevent the spread of respiratory diseases like COVID-19.

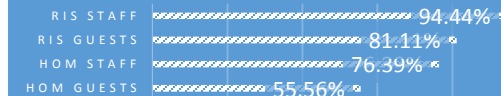
Stay at least 6 feet (about 2 meter) away from other people.
Cover your cough or sneeze with a tissue. Throw away the tissue in the trash and wash your hands.
When in public, wear a mask over your nose, mouth, and chin.
Do not touch your eyes, nose, and mouth.
Clean and disinfect frequently touched objects and surfaces.
Avoid sharing personal items.
Wash your hands often with soap and water for at least 20 seconds.

COVID-19 Management Assessment Tool

RESULTS AND CONCLUSIONS

- Due to suspension of in-person volunteer activities, the project was not able to be rolled-out completely
- Completed components include pre-tests and CMARs at Rodeway Inn Shelter and House of Mercy
- Virtual staff information sessions were held in place of incorporating mini-lessons during Street Rounds

AVERAGE PRE-TEST SCORES



IMPACT AND SUSTAINABILITY

Originally, the plan for this project was to incorporate the educational portion of this project into the pre-existing student led group, UR Street Outreach. Street outreach rounds leaders were to be trained on how to give these sessions and they will have access to the mini-lecture outlines in the street outreach supply closet. This structure can then be further expanded to include other educational topics depending on interest and needs of shelter residents and staff members.

Additionally, I have helped organize phone-banks to county officials to advocate for opening of more hotels to homeless individuals seeking a safe and socially-distant shelter. I will continue to openly communicate with my community partners and provide additional informational virtual sessions depending on the need and interest of the staff. Once in-person activity are no longer suspended, the original plan can hopefully be resumed.