Checklist - Non-Filer Tool on IRS.gov*



Information non-filers will need to provide:

	Full name, current mailing address and an email address
	Date of birth and valid Social Security number
	Bank account number, type and routing number, if you have one
	Identity Protection Personal Identification Number (IP PIN) you received from the IRS
	earlier this year, if you have one
	☐ Taxpayers who previously have been issued an Identity Protection PIN but lost it,
	must use the Get an IP PIN tool to retrieve their numbers
	Driver's license or state-issued ID, if you have one
	For each qualifying child during 2019: name, Social Security number or Adoption
	Taxpayer Identification Number and their relationship to you or your spouse
What	to expect
	Create an account by providing your email address and phone number; and establishing a
	user ID and password.
	You will be directed to a screen where you will input your filing status (Single or Married
	filing jointly) and personal information.
	☐ Note: Make sure you have a valid Social Security number for you (and your
	spouse if you were married at the end of 2019) unless you are filing "Married
	Filing Jointly" with a 2019 member of the military. Make sure you have a valid
	Social Security number or Adoption Taxpayer Identification Number for each
	dependent you want to claim for the Economic Impact Payment.
	Check the "box" if someone can claim you as a dependent or your spouse as a dependent.
	Complete your bank information (otherwise we will send you a check).
	You will be directed to another screen where you will enter personal information to
	verify yourself. Simply follow the instructions. You will need your driver's license (or
	state-issued ID) information. If you don't have one, leave it blank.
	You will receive an email from Customer Service at Free File Fillable Forms, a trusted
	IRS partner, that either acknowledges you have successfully submitted your information,
	or that tells you there is a problem and how to correct it. Free File Fillable forms will use
	the information to automatically complete a Form 1040 and transmit it to the IRS to
	compute and send you a payment.

^{*}Non-Filer Site on IRS.gov: <u>irs.gov/coronavirus/non-filers-enter-payment-info-here</u>

Checklist for Outreach Staff



Staff training and policies

- Provide training and educational materials related to COVID-19 for staff.
- Minimize the number of staff members who have face-to-face interactions with clients.
- Develop and use contingency plans for increased absenteeism caused by employee illness or by illness in employees' family members. These plans might include extending hours, cross-training current employees, or hiring temporary employees.
- Assign outreach staff who are at <u>increased risk for severe illness from COVID-19</u> to duties that do not require them to interact with clients in person.
- Outreach staff should review <u>stress and coping resources</u> for themselves and their clients during this time.

Staff prevention measures

- Encourage outreach staff to maintain good hand hygiene by washing hands with soap and water for at least 20 seconds or using hand sanitizer (with at least 60% alcohol) on a regular basis, including before and after each client interaction
- Advise staff to maintain 6 feet of distance while interacting with clients and other staff, where possible.
- Require outreach staff to wear <u>masks</u> when working in public settings or interacting with clients. They should still maintain a distance of 6 feet from each other and clients, even while wearing masks.
- Advise outreach staff to avoid handling client belongings. If staff are handling client
 belongings, they should use disposable gloves, if available. Make sure to train any staff using
 gloves to ensure proper use and ensure they perform hand hygiene before and after use. If
 gloves are unavailable, staff should perform hand hygiene immediately after handling client
 belongings.
- Outreach staff who are checking <u>client temperatures</u> should use a system that creates a physical barrier between the client and the screener as described <u>here</u>.
 - Where possible, screeners should remain behind a physical barrier, such as a car window, that can protect the staff member's face from respiratory droplets that may be produced if the client sneezes, coughs, or talks.
 - If social distancing or barrier/partition controls cannot be put in place during screening, PPE (i.e., facemask, eye protection [goggles or disposable face shield that fully covers the front and sides of the face], and a single pair of disposable gloves) can be used when within 6 feet of a client.

- However, given PPE shortages, training requirements, and because PPE alone is less effective than a barrier, try to use a barrier whenever you can.
- For street medicine or other healthcare staff who are providing medical care to clients with suspected or confirmed COVID-19 and close contact (within 6 feet) cannot be avoided, staff should at a minimum, wear eye protection (goggles or face shield), an N95 or higher level respirator (or a facemask if respirators are not available or staff are not fit tested), disposable gown, and disposable gloves. Masks are not PPE and should not be used when a respirator or facemask is indicated. Healthcare providers should follow infection control guidelines.
- Outreach staff who do not interact closely (e.g., within 6 feet) with sick clients and do not clean client environments do not need to wear personal protective equipment (PPE).
- Outreach staff should launder work uniforms or clothes after use using the warmest appropriate water setting for the items and dry items completely.

Staff process for outreach

- In the process of conducting outreach, staff should
 - Greet clients from a distance of 6 feet and explain that you are taking additional precautions to protect yourself and the client from COVID-19.
 - If the client is not wearing a mask, provide them with one.
 - Screen clients for symptoms by asking them if they feel as if they have a fever, cough, or other <u>symptoms consistent with COVID-19</u>.
 - o Children have similar symptoms to adults and generally have mild illness
 - Older adults and persons with medical comorbidities may have delayed presentation of fever and respiratory symptoms.
 - If medical attention is necessary, use standard outreach protocols to facilitate access to healthcare.
 - Continue conversations and provision of information while maintaining 6 feet of distance.
 - If at any point you do not feel that you are able to protect yourself or your client from
 the spread of COVID-19, discontinue the interaction and notify your supervisor.

 Examples include if the client declines to wear a mask or if you are unable to maintain
 a distance of 6 feet.

Source: Center for Disease Control and Prevention (CDC)

https://www.cdc.gov/coronavirus/2019-ncov/community/homeless-shelters/unsheltered-homelessness.html

Checklist - CDC Guidelines for People Experiencing Unsheltered Homelessness



Help clients prevent becoming sick with COVID-19

- Consider the balance of these risks when addressing options for decreasing COVID-19 spread.
 Those who are experiencing unsheltered homelessness face several risks to their health and safety.
- Continued linkage to homeless services, housing, medical, mental health, syringe services, and substance use treatment, including provision of medication-assisted therapies (e.g., buprenorphine, methadone maintenance, etc.). Use telemedicine, when possible.
- Some people who are experiencing unsheltered homelessness may be at <u>increased risk of severe</u> <u>illness</u> from COVID-19 due to older age or certain underlying medical conditions, such as chronic lung disease or serious heart conditions.
 - Reach out to these clients regularly to ensure they are linked to care as necessary.
 - o Prioritize providing individual rooms for these clients, where available.
- Recommend that all clients wear <u>masks</u> any time they are around other people. Masks should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated, or otherwise unable to remove the mask without assistance.
- Provide clients with hygiene materials, where available.
- Discourage clients from spending time in crowded places or gathering in large groups, for example at locations where food, water, or hygiene supplies are being distributed.
 - If it is not possible for clients and staff to avoid crowded places, encourage spreading out (at least 6 feet between people) to the extent possible and wearing masks.

Help link sick clients to medical care

- Regularly assess clients for <u>symptoms</u>.
 - Clients who have symptoms may or may not have COVID-19. Make sure they have a
 place they can safely stay in coordination with local health authorities.
 - If available, a nurse or other clinical staff can help with clinical assessments. These
 clinical staff should follow <u>personal protective measures</u>.
 - Provide anyone who presents with symptoms with a mask.
 - o Facilitate access to non-urgent medical care as needed.
 - Use standard outreach procedures to determine whether a client needs immediate medical attention. Emergency signs include (this list is not all inclusive. Please refer clients for medical care for any other symptoms that are severe or concerning to you):
 - Trouble breathing
 - Persistent pain or pressure in the chest
 - New confusion or inability to arouse

- Bluish lips or face
- Notify the designated medical facility and personnel to transfer that clients might have COVID-19.
- If a client has tested positive for COVID-19
 - Use standard outreach procedures to determine whether a client needs immediate medical attention.
 - If immediate medical attention is not required, facilitate <u>transportation</u> to an isolation site.
 - Notify designated medical facility and personnel that the client has tested positive for COVID-19.
 - If medical care is not necessary, and if no other isolation options are available, advise
 the individual on how to isolate themselves while efforts are underway to provide
 additional support.
 - During isolation, ensure continuation of behavioral health support for people with substance use or mental health disorders.
 - In some situations, for example due to severe untreated mental illness, an individual
 may not be able to comply with isolation recommendations. In these cases,
 community leaders should consult local health authorities to determine alternative
 options.
 - Ensure the client has a safe location to recuperate (e.g., respite care) after isolation requirements are completed, and follow-up to ensure medium- and long-term medical needs are met.

Source: Center for Disease Control and Prevention (CDC)

https://www.cdc.gov/coronavirus/2019-ncov/community/homeless-shelters/unsheltered-homelessness.html