

Pandemic Handbook for Outreach Workers Visiting Encampments

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Trusted care in our community

Acknowledgements

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We are also grateful to the [COVID-19 Response Fund](#) for the financial support that allowed us to develop this Handbook and related materials.

About Neighborhood Health

[Neighborhood Health](#) is a non-profit network of 12 neighborhood health centers in and around Nashville and Lebanon. We have proudly served the people of Middle Tennessee for more than 44 years without regard to their insurance status or ability to pay. Today, we provide medical, prenatal, dental and behavioral health care to over 31,000 people of all ages, 58% of whom have no health insurance. This includes over 5,000 individuals who are experiencing homelessness. Because of the trust we have earned with patients, Neighborhood Health has become the largest safety net provider of primary care in Middle Tennessee – and the largest provider to African Americans (and, more generally, persons of color).

Call **(615) 227-3000** to make an appointment – or to speak with our on-call medical provider. We serve patients in our clinics, by phone, and by video chat.



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Introduction

Working with Metro Homeless Impact Division and other partner organizations,¹ Neighborhood Health drafted this “Pandemic Handbook” to summarize existing information and recommendations for outreach workers. This Handbook specifically targets outreach workers who visit encampments of individuals who are experiencing homelessness. This Handbook is only meant for use during the current COVID-19 pandemic.

Three key concerns underlie the content in this Handbook:

1. **We must keep as low as possible the number of different outreach workers who visit individual encampments over the course of a month.** Wherever possible, outreach workers should avoid entering encampments. Also, the more outreach workers who visit any particular site, the higher the likelihood that asymptomatic carriers of COVID-19 introduce the coronavirus to an encampment. By limiting the number of different outreach workers who visit a specific encampment, we reduce the chances that an asymptomatic outreach worker would unwittingly infect those living at that site.
2. **Outreach workers who visit encampments must take all recommended precautions to avoid infecting the people there.** Otherwise, asymptomatic outreach workers may unintentionally infect those to whom they are delivering supplies and providing supports. By taking all recommended precautions, outreach workers also reduce their own risk of exposure and infection.
3. **We are all in this together.** Neighborhood Health stands alongside all outreach workers. We will provide high quality medical care to any outreach worker or any individual who may need it, regardless of their insurance status or ability to pay. Anyone may call us at **(615) 227-3000** to get care.

Disclaimers

Neighborhood Health prepared this Handbook for use during the current COVID-19 pandemic. Please note:

- Recommendations regarding all aspects of the pandemic response frequently change, and readers should check for updated information from public health authorities and other experts.
- Nothing in this Handbook supersedes any information or recommendations provided by federal, state, or local public health authorities.
- The content of this Handbook does not reflect pre-pandemic standard operating procedures, nor would this apply outside of the current pandemic.
- Nothing in this Handbook constitutes medical or legal advice or formal guidance and should not be relied upon as such.

We encourage readers to contact the Metro Public Health Department or other infection control experts for further guidance.

¹ Please see the “Acknowledgements” section at the beginning of this Handbook.

Evaluating Your Risk as an Outreach Worker

1. Am I at higher risk for severe illness from COVID-19?

Some people are at higher risk of severe illness if they get COVID-19. The CDC [reports](#) these people includes individuals who:

- Are older (either age 60 older -- or age 65 or older); **or**
- Have chronic health conditions, including people with:
 - Diabetes;
 - Chronic lung disease or moderate to severe asthma;
 - Serious heart conditions;
 - Compromised immune systems, including those who have lupus or HIV or take steroids;
 - Severe obesity (body mass index of 40 or higher);
 - Chronic kidney disease and on dialysis; and
 - Liver disease.

2. Should I visit encampments if I am at higher risk of severe illness – or a caregiver for someone at higher risk?

If you fall into one of these groups, you should talk with your supervisor and your medical providers before you visit any encampment. More generally, the CDC [advises](#) you to stay home if possible.

If you are a caregiver for an individual in one of these groups, you should also talk with his or her medical provider before you visit any encampment.

3. I have difficulty breathing while wearing a mask. Can I still go to encampments?

If you have difficulty breathing while wearing a mask, you arguably should not go to an encampment. Talk with your medical provider and your supervisor as to what may be appropriate.

Using PPE as an Outreach Worker

4. Do I still need to observe social distancing if I wear PPE?

Yes. PPE helps to protect people in encampments and you. However, you must observe [social distancing](#), too, in order to minimize risk of infecting those in encampments (and your co-workers).

5. Can outreach workers ride in cars together – or share PPE?

No. Outreach workers must always observe [social distancing](#), even with each other. Thus, they may **never** ride together in a car. Also, outreach workers must always use their own PPE. **Never** share any PPE under any circumstances.

6. In addition to PPE, what other specific items should I wear?

Wear long sleeves, long pants and closed toed shoes. If possible, wear rubber boots or rubber over-boots. These create a barrier between skin and any contaminants including viruses.

For persons with longer hair, hair should be braided or pulled up into a bun.

7. What should I avoid wearing?

Do **not** wear the following into encampments:

- Rings, bracelets, earrings
- Excess clothing layers
- Headphones
- Anything not strictly necessary to transport necessary supplies

8. What should I know about my phone?

Use your speakerphone whenever and wherever possible. Avoid bringing your phone close to your face.

9. What PPE should I wear?

Consistently wear at least the following personal protective equipment (PPE):

- Surgical mask or appropriate homemade mask²
- Face shield covering the surgical mask (or, if not available, other protective eyewear)
- Disposable gloves (specifically, medical-grade, non-latex gloves)

Note: Do **not** touch the outside of your mask, especially with gloved hands. This helps protect you. See FAQ #11 below.

The above list is a minimum – and it may be appropriate for some outreach workers to wear gowns and N95 respirators. Ask your supervisor if you have questions.

10. When should I wash my hands or use hand sanitizer?

Wash your hands for at least 20 seconds or use hand sanitizer (>60% alcohol) before and after wearing gloves. When using hand sanitizer, rub your hands together until the sanitizer is fully absorbed and your hands are dry.

11. How do I put on and take off my PPE?

Closely read the CDC's [guidance](#) on the sequence for putting on and taking off PPE. To summarize:

² The CDC offers [guidance](#) ([Spanish](#)) and a [video](#) (with [Spanish](#) subtitles) on homemade masks.

- **Put on** mask, then face shield, and finally gloves.
- **Remove** gloves, then face shield, and finally mask.

See Attachment 1 (the CDC's [guidance](#) on the sequence for putting on and taking off PPE) for more detailed information. Also, the National Health Care for the Homeless Council (NHCHC) has also published helpful [guidance](#) on PPE.

12. How should I transport my stored PPE?

Transport all items, including but not limited to stored PPE, in the trunk of your car if possible.

13. How long can I use/re-use my PPE?

PPE is generally designed for single use. Public health authorities differ slightly in their specific guidance about use, extended use, and re-use of PPE during this COVID-19 pandemic.³ Attachment 2 summarizes some reasonable guidance to consider.

14. How should I store my PPE?

Store PPE items you intend to re-use in a clean sealable paper bag. However:

- Do **not** re-use items such as gloves or any soiled or damaged PPE items; and
- Clean all PPE **before** storing.

See Attachment 2 for more detailed information.

15. When should I discard my PPE?

Discard any soiled or damaged PPE and used gloves (or place in designated plastic “hazard” bag, which you later discard). Also:

- Discard gloves after touching any individual or his or her belongings.
- Discard gloves after you touch your face or your mask.

See Attachment 2 for more detailed information.

Reducing Risk You Bring COVID-19 into Encampments

16. **UPDATED:** What should my daily “self-monitoring routine” include?

First, take your temperature at least every morning with an oral thermometer. Take your temperature:

- 30 minutes after eating, drinking, or exercise; and

³ The CDC provides some general [guidance](#), and the Tennessee Department of Health offers slightly more specific [recommendations](#) for certain types of PPE.

- At least 6 hours after taking aspirin, ibuprofen (Advil/Motrin), or acetaminophen (Tylenol) – or any medicine that contains a fever reducer.

Second, ask yourself each day whether you or anyone in your household⁴ has:

- Fever (a temperature with an oral thermometer at 100.4 or higher)
- Chills or sweats
- Flu-like symptoms (tiredness or body aches)
- Shortness of breath
- Cough
- Loss of sense of taste or smell
- Sore throat
- Diarrhea
- Vomiting

Third, record your temperature symptoms in a log such as the CDC's Check and Record Everyday (CARE) [template](#).

17. UPDATED: When should I avoid going to encampments?

Do **not** go to an encampment if you lack PPE.

Do **not** go to an encampment if you or anyone in your household has a fever or other symptoms – or if you feel sick in any way. Also, consult with your supervisor before returning to work.

Also, do **not** go to an encampment if you have an exposure risk in the last 14 days – even if you have no symptoms. This would include any of the following:

- Prolonged close contact with someone who has symptoms of COVID-19 or a positive COVID-19 lab test.
- Visit inside a jail or prison
- Visit inside a nursing home
- Visit inside an ER or hospital
- Travel to any area with a high number of COVID-19 cases
- Travel on an airplane or coach-style bus (e.g., Greyhound)
- Travel outside of the U.S.

In addition, we recommend **against** visiting an encampment if you have been in any congregate setting (including shelters) and you have not consistently worn a mask, consistently used gloves with any individual or his or her belongings, consistently observed social distancing, and consistently practiced good hand hygiene.

⁴ As the CDC notes, [children](#) have similar symptoms to adults and generally have mild illness.

18. When (if ever) should I “cover” for another outreach worker and go to new encampments?

Generally, you should not “cover” for another outreach worker and visit new encampments. Consult with your supervisor and Metro’s Homeless Impact Division before going to any new encampment.

The more outreach workers who visit any particular site, the higher the likelihood that asymptomatic carriers of COVID-19 introduce the coronavirus to an encampment. By limiting the number of outreach workers who visit a specific encampment, we reduce the chances that an asymptomatic outreach worker would unwittingly infect those living at that site.

19. UPDATED: Can I as an outreach worker get tested for COVID-19 as a precaution?

Testing for COVID-19 is available to all Nashville residents at no cost. Metro asks individuals who want to be tested to call (615) 862-7777, which is open 7:00am to 7:00pm daily. Individuals may drive or walk up to an assessment center on from 9am to 3pm weekdays (Monday through Friday). The assessment centers are located at:

- Nissan Stadium, Lot “N,” 1 Titans Way, Nashville, TN 37213
- Meharry Medical College, 918 21st Avenue North, Nashville, TN 37217
- Former Kmart, 2491 Murfreesboro Pike, Nashville, TN 37217

Other county-based departments of health also offer testing. For example, the Wilson County Health Department in Lebanon also provides free COVID-19 testing Monday through Friday from 8:30am to 3:00pm. Individuals in Wilson County should call (615) 444-5325 to complete an assessment over the phone before they go to the health department.

To the extent the COVID-19 assessment centers do not test outreach workers, Neighborhood Health may be able to help. Please follow up directly with Brian Haile by emailing bhaile@neighborhoodhealthtn.org.

20. What should I do when entering an encampment to reduce the risk I bring COVID-19 into the encampment?

Each time you enter an encampment, use this sequence:

- Put on clean boots or over-boots.
- Put on all PPE in the correct sequence, including surgical mask.
- Place your smartphone in a new sealable, plastic bag and use it while in the bag during the time you are in an encampment.
- Remain at least 10 feet away from everyone, including any co-workers.

If you want people in the encampment to recognize your face before you enter their space, put your mask on (over your mouth and nose) before you get within 10 feet of any other individual – and change your gloves. **Never** “lower” your mask: Either take it off or leave it on.

21. What should I do when leaving an encampment to reduce the risk I bring COVID-19 into the encampment?

Each time you leave an encampment, use this sequence:

- Discard the plastic bag covering your phone in the same way you would discard gloves.
- Remove debris and dirt from boots with a soft bristled brush.
- Put boots in a separate plastic “hazard” bag.
- Remove your PPE in the correct sequence.
- Clean and store the PPE you can re-use (using clean gloves as appropriate).
- Wash your hands for at least 20 seconds or use hand sanitizer (rubbing your hands together until the sanitizer is fully absorbed and your hands are dry).

Do **not** visit another encampment until you have a clean pair of boots and adequate PPE. If possible, change clothes before going to another encampment.

See FAQ #49 below about what to do when you go home.

Approaching Encampments

22. Should I enter an encampment if it is not strictly necessary?

No. Deliver supplies and give them at a drop-off point wherever possible. Avoid entering encampments in order to protect those living there from any germs you may be carrying.

23. Should I wear a mask when approaching an encampment?

Yes. This protects people in the encampment and any co-workers.

If you want people in the encampment recognize your face before you enter their space, put your mask on (over your mouth and nose) **before** you get within 10 feet of any other individual – and change your gloves. **Never** “lower” your mask: Either take it off or leave it on. See FAQ #20 above.

24. How do I explain what I am doing and why?

Follow your normal process to identify yourself as you enter an encampment. While at least 10 feet away, put on your mask – and explain loudly you are doing this to protect the people in the encampment. Also, explain loudly, you are going to say at least 10 feet away if possible (again, to protect people in encampments). See FAQ #20 above.

25. What additional security precautions (if any) should I take?

Experienced outreach workers outside of Neighborhood Health recommend the following:

- Always carry a charged cellphone.

- Go with a co-worker (though drive separately and maintain social distancing).
- If you must visit an encampment alone, always let a coworker or supervisor know when you are entering a camp and when you leave.
- Trust your intuition. If something doesn't feel right, it's okay to leave.

Recognizing the Symptoms of COVID-19 – and Knowing What to Do

26. **UPDATED:** What are the symptoms I should ask about when visiting encampments?

Individuals with any of the following may have COVID-19:

- Fever (a temperature with an oral thermometer at 100.4 or higher)
- Chills or sweats
- Flu-like symptoms (tiredness or body aches)
- Shortness of breath
- Cough
- Loss of sense of taste or smell
- Sore throat
- Diarrhea
- Vomiting

27. **UPDATED:** What should I do if someone has symptoms?

Neighborhood Health will provide care to anyone, regardless of his or her insurance status or ability to pay. Persons experiencing homelessness can get free care – and, in many instances, free medications. With this in mind:

- Offer to connect the individual with Neighborhood Health. If the individual accepts, have the individual call (615) 227-3000 to connect the individual with a medical provider by phone.
- If the individual does not have a phone (or minutes), offer to allow the individual to use a disposable cell phone. If you encounter any difficulties, contact Brian Haile at (615) 944-4404 (cell). (This is a personal cell number, so please do not give out this number to anyone but outreach workers.)

Collect the disposable cell phone and use disinfectant wipes to wipe it down thoroughly. Place the disinfectant wipes in designated, sealable plastic “hazard” bag, which you later discard. Change your gloves before touching anyone or anything else – and discard your gloves in the same designated, sealable plastic “hazard” bag.

- Give them an Encampment Flyer⁵ and Encampment Card (Attachment 3). Neighborhood Health will provide you with a new supply of laminated Encampment Flyers and Encampment Cards; you may request these by emailing fweaver@neighborhoodhealthtn.org.

⁵ We are particularly grateful to Open Table Nashville for developing this very helpful flyer.

- Tell them they can call Neighborhood Health anytime, 24/7. If Neighborhood Health is closed, the individual can connect with the “on call” medical provider. Also, advise the individual to call 911 if they are in any distress.
- Encourage the individual to:
 - Wear a mask
 - Drink plenty of water, clear soup, decaffeinated tea, or juice.
 - Wash their hands frequently and for 20 seconds (or use hand sanitizer by rubbing hands together until the sanitizer is fully absorbed and hands are dry).
 - Cough into their elbow area or cover their mouth with tissues or paper towels when they cough or sneeze (even in their tent).
 - Dispose of all used tissues, disposable masks, etc. in a sealable plastic “hazard” bag, which they can later put in a trash can.
- Provide a blanket and hand sanitizer if available.

See FAQs #32, 38 and 42 below.

Do not hesitate to call 911 if you are concerned. See FAQ #29 below.

28. When (if ever) should I offer to take a person’s temperature?

If you have an oral thermometer (with disposable plastic cover) or no-touch thermometer, you may offer it to an individual who has symptoms. Offer the thermometer and lay it down near the individual while moving away to maintain [social distancing](#).

The individual should take his or her own temperature. Make note of the temperature – and whether it was taken with an oral thermometer or no-touch thermometer (since the readings will be interpreted differently).

Collect the thermometer and use disinfectant wipes to wipe it down. (For oral thermometers, also put the thermometer in a separate, sealable plastic bag to disinfect more thoroughly later). Place the disinfectant wipes in designated sealable plastic “hazard” bag, which you later discard. Change your gloves before touching anyone or anything else – and discard your gloves in the same designated plastic “hazard” bag.

29. When should I call 911?

Call 911 if an individual tells you they need to go to the ER or hospital. Do not question their need; call 911.

Also, call 911 if an individual:

- Has chest pains
- Has persistent pressure in the chest
- Has extreme trouble breathing (can’t talk without gasping for air)
- Has new confusion and/or cannot be woken

- Has blue-colored lips or face
- Has severe, constant dizziness or lightheadedness
- Has seizures

Stay on the phone with 911 until emergency personnel arrive. Follow their instructions.

30. How can I help get a person to the ER or hospital?

Call 911. Do **not** move or transport anyone unless instructed to do so by 911 operator.

Helping Persons Access Care

31. Where (and how) can a person get health care right now for COVID-19 as well as other conditions?

Offer to connect the individual with Neighborhood Health at (615) 227-3000 using the steps described in FAQ #27 above and #32 below.

Call 911 if you are concerned. See FAQ #29 above.

32. **UPDATED: What do I tell an individual who wants to get tested for COVID-19?**

Offer to connect the individual with Neighborhood Health at (615) 227-3000 using the steps described in FAQ #27 above. Neighborhood Health will explain the individual's options to him or her and help him or her to get transportation to an assessment center if needed.

Call 911 if you are concerned. See FAQ #29 above.

33. **UPDATED: What to do if a person needs medication to bring down their fever?**

If you carry over-the-counter acetaminophen (Tylenol), you may choose to offer this to individuals in encampments.⁶ (Different organizations may have different policies about distributing over-the-counter medication.) If you give out acetaminophen (Tylenol), stress that individuals should closely follow the instructions on the bottle when using. Please note the warning about use while drinking alcohol.

34. What to do if a person needs medication (or a prescription refill) for a chronic condition?

Offer to connect the individual with Neighborhood Health at (615) 227-3000 using the steps described in FAQ #27 above. We will work with you to get prescriptions delivered to any individual in an encampment.

⁶ Anecdotal reports suggest ibuprofen (Advil/Motrin) could worsen symptoms of COVID-19, but the picture is unclear. See FDA [advisory](#).

35. What to do if a person complains of a bad toothache or dental-related pain?

Neighborhood Health will provide dental care to anyone, regardless of his or her insurance status or ability to pay.

Offer to connect the individual with Neighborhood Health. However, the individual must call (615) 227-3000 to schedule an appointment. We can work with you to organize transportation for the patient.

36. When (if ever) should I transport a person to a clinic or health care provider?

Do **not** move or transport anyone unless instructed to do so by 911 operator – or unless you have pre-arranged an appointment (e.g., for emergency dental services) and clarified your intention to transport with Neighborhood Health.

As a general matter, Neighborhood Health may be able to serve the individual in an encampment via telehealth and deliver medications to him or her. Please contact Neighborhood Health to discuss specific questions or concerns. If you encounter any difficulties, contact Brian Haile at (615) 944-4404 (cell). (This is a personal cell number, so please do not give out this number to anyone but outreach workers.)

37. What (if any) masks should I give to persons living in encampments – and what should I tell them about wearing masks?

Encourage all individuals in encampments to:

- Wear masks – and wash any homemade masks regularly.⁷
- **Never** touch the front of the mask.
- Do not touch your mask or your face. If you accidentally touch your mask or your face, immediately wash your hands for 20 seconds or use hand sanitizer (by rubbing hands together until the sanitizer is fully absorbed and hands are dry).
- Store masks in a sealable paper bag if possible.
- Dispose of all used tissues, disposable masks, etc. in a sealable plastic “hazard” bag, which they can later put in a trash can.
- **Never** touch another person’s mask or pick one up.

If an individual is symptomatic, offer several disposable masks if available. Stress to the individual that:

- **Never** touch the front of the mask.
- Wash hands or use hand sanitizer anytime they touch their mask.
- They **must** put the disposable mask in a plastic bag and throw it away in a trash can if the mask gets wet or soiled.
- They **cannot wash** disposable masks; rather, put the disposable mask in a plastic bag and throw in a trash can after wearing it for a day or two.

⁷ We acknowledge the lack of a national consensus at this time as to whether the benefits of wearing masks among individuals living in encampments outweighs the risks of contamination if the masks are not appropriately cleaned, stored, and discarded – and individuals may have limited ability to practice good hand hygiene. We will continue to review the evidence and follow this discussion, but we recommend following the CDC’s [recommendations](#) to wear masks even if an individual lives in an encampment.

See general advice in FAQ #38 below.

Responding to Common Concerns

38. **UPDATED:** What general advice should I give to individuals in encampments?

Give them an Encampment Flyer and Encampment Card (Attachment 3). Neighborhood Health will provide you with a new supply of laminated Encampment Flyers and Encampment Cards; you may request these by emailing fweaver@neighborhoodhealthtn.org.

Encourage everyone to:

- Stay apart.
 - Set up their tents/sleeping quarters with at least 12 feet x 12 feet of space per individual.
 - Remain at least 6 feet away from other people.
 - Do not share tent space.
- Practice good hygiene.
 - Wash their hands for 20 second or use hand sanitizer (rubbing hands together until the sanitizer is fully absorbed and hands are dry) as often as they are able.
 - Dispose of all used tissues, disposable masks, etc. in a sealable plastic “hazard” bag, which they can later put in a trash can.
 - Cough into their elbow area or cover their mouth with tissues or paper towels when they cough or sneeze (even in their tent).
- Avoid sharing personal items.
 - Do not to share food
 - Do not to share plates or utensils
 - Do not to share cigarettes or water bottles (or bottles or containers of any types)
- Wear masks – and wash or replace masks regularly. Store masks in a sealable paper bag if possible. See FAQ #37 above.
- Pay attention to their own health.
 - Take their medication for diabetes, high blood pressure, etc. to stay healthy.
 - Know the symptoms of COVID-19. (Give out the CDC’s “Symptoms” [handout.](#))
 - Call Neighborhood Health or 911 for medical help.
- Use a tissue to open doors (including toilet doors) – and sanitize hands before and after using any shared facilities.⁸

⁸ Ideally, individuals would be able to clean/disinfect shared facilities prior to and following each use. King County, Washington published a helpful [Sanitation & Hygiene Guide for Homeless Service Providers](#).

For background review the CDC's [guidance](#) for persons experiencing homelessness.

39. How can I explain social distancing and droplet precautions?

Use a bag of confetti and throw it in the air. The confetti represent droplets. Each droplet could contain COVID-19. Two points to emphasize:

- Staying away from droplets is vital. This is why we need to stay at least 6 feet apart – and practice [social distancing](#).
- Wear masks – and wash any homemade masks regularly. Store masks in a sealable paper bag if possible. See FAQ #37 above.
- Keeping the droplets from spraying like confetti helps keep others safe. Therefore, we must use tissues or cough or sneeze into our elbows.

40. UPDATED: What handouts can I give to individuals in encampments?

Give them an Encampment Flyer and Encampment Card (Attachment 3). Neighborhood Health will provide you with a new supply of laminated Encampment Flyers and Encampment Cards; you may request these by emailing fweaver@neighborhoodhealthtn.org.

For background review the CDC's [guidance](#) for persons experiencing homelessness.

41. How should I respond to rumors about mandatory/involuntary quarantine?

Individuals experiencing homelessness have heard rumors about others who are subject to mandatory (and involuntary) quarantine/isolation orders. The Metro Public Health Department does have the power to seek such orders. The rumors have caused fear among some people and made them more reluctant to seek care.

Offer to connect the individual with Neighborhood Health at (615) 227-3000 using the steps described in FAQ #27 above. Please stress to the individual that Neighborhood Health provides medical care in a confidential manner. If the individual has specific concerns, he or she can talk with the medical provider at Neighborhood Health – and Neighborhood Health will explain the process and respect the individual's wishes and concerns.

42. How should I tell people to self-isolate/quarantine if they think they may have had COVID-19 or been exposed?

Offer to connect the individual with Neighborhood Health at (615) 227-3000 using the steps described in FAQ #27 above. The medical provider will explain the recommendations for self-isolation/quarantine carefully with the individual as appropriate.

Give them an Encampment Flyer and Encampment Card (Attachment 3). Neighborhood Health will provide you with a new supply of laminated Encampment Flyers and Encampment Cards; you may request these by emailing fweaver@neighborhoodhealthtn.org.

Also, advise the individual to wear a mask – and see FAQs #27 above. See also the general advice in FAQ #38 above.

Addressing Mental Health and Alcohol & Drug Use

43. When should I contact Mobile Crisis?

Contact Mobile Crisis at (615) 726-0125 when an individual is having a mental health emergency. Mobile Crisis continues to operate during the current pandemic. If an individual wants to call Mental Health Coop but he or she is not having an emergency, the individual should call (615) 726-3340.

44. What services are available to individuals seeking treatment for addiction?

- The Tennessee [REDLINE](#) at (800) 889-9789 provides information and referrals.
- Neighborhood Health also offers a treatment program and short-term housing for men experiencing homelessness who have a co-occurring psychiatric and substance use issue. Call Allyson Barnes (615) 227-3000 x1811 or Chris Barrett at (615) 227-3000 x1674.

See FAQs #45 and 46 below.

45. **UPDATED:** What supports are available for individuals in recovery?

- [Narcotics Anonymous](#) (NA) has updated its Nashville listings, including several locations hosting Zoom meetings.
- [Alcoholics Anonymous](#) (AA) provides some online resources and Zoom meetings.
- [Salvation Army Nashville](#) offers online and phone meetings.

The Yale Program in Addiction Medicine published [guidance](#) on COVID-19 for individuals who are in recovery.

46. **UPDATED:** What relevant advice can I give to individuals in encampments?

The Yale Program in Addiction Medicine published [guidance](#) on COVID-19 for individual who use substances. The content is heavy with text (rather than graphics). Consider giving this to individuals who use substances.

Share these messages:

- Get Naloxone/Narcan from an outreach worker.
- Do not share needles – or any equipment.
- Do not touch anyone's drugs or equipment – and don't let anyone touch yours.
- Stay hydrated.
- Do not to share cigarettes or water bottles (or bottles or containers of any types).

[Street Works](#) continues to serve individuals during the current pandemic (e.g., with needle exchange, etc.). Individuals can call (615) 256-7979 for help. Outreach workers may also contact Street Works at this number to notify them about particular needs in specific encampments.

See also the general advice in FAQ #38 above.

Protecting Yourself if You Might Have Been Exposed

47. What should I do before I get in my car after visiting an encampment?

See FAQ #21 above.

48. Can I go anywhere but home after visiting an encampment?

Yes, if you have clean boots and adequate PPE. See FAQs #20-21 above.

49. What should I do before going in my house after visiting an encampment?

When you get home, put on mask and gloves. Do the following while outside your house:

- Rinse boots with water and a sponge, scrubbing the entire boot.
- Rinse the sole of the boot more thoroughly.
- Wet sponge in already prepared diluted Lysol IC Quaternary Disinfectant Cleaner (1 ounce per gallon solution) and clean entire shoe. You can also use Lysol Disinfecting Wipes also be used or 0.05% chlorine solution (1 part household bleach to 100 parts water).
- In a container or tub, submerge the soles of the shoes (rubber bottom) in 0.05% chlorine solution (1 part household bleach to 100 parts water).
- Let sit for 10 minutes.
- After 10 minutes remove shoes and thoroughly rinse with clean sponge and water. Let dry.

While still wearing gloves and mask:

- Remove clothing before entering the house (if possible).
- Do not shake dirty clothing.
- Place clothing in a separate, sealable plastic bag.

Do **not** touch anyone in your household until you have changed clothing and washed your hands (and preferably showered).

When you do laundry:

- Wear gloves to load the washing machine.
- Discard bag in which you kept these clothes.
- Wash these clothes separately from your regular laundry.
- Use warmest appropriate water setting.

- Use disinfectant.
- Dry thoroughly.

Familiarize yourself with the CDC's [guidance](#) on household cleaning and disinfection – and consistently practice these recommendations. Also, frequently wipe down phone, ID badge, credit cards and other high-touch personal items.

50. How should I wash/disinfect a homemade mask?

The CDC [says](#) that a washing machine should suffice in properly washing a face covering. Further, the face coverings should be routinely washed (after each use).

51. **UPDATED: What should I do if I feel as if I may have been exposed to COVID-19?**

Call your medical provider. Continue your self-monitoring routine described in FAQ #16 above.

If recommended by your medical provider, get tested for COVID-19. See FAQ #19 above about testing locations.

Depending on your exposure and the recommendations of your medical provider, you may need to [self-isolate/quarantine](#). Notify your supervisor – and, if necessary, seek out guidance on assessing risk **before** you return to work.⁹ See also FAQ #53 below about going to encampments.

You are welcome to call Neighborhood Health at (615) 227-3000. We can talk with you about your concerns and care for you. We have locations open until 8pm on weekdays and on Saturday. You can also reach our on-call provider when Neighborhood Health is closed.

52. **UPDATED: What should I do if I develop a fever or any other symptoms?**

Follow the guidance in FAQ #51 above. For reference, the CDC has posted guidance about [symptoms](#) and [care](#).

Notify your supervisor and wait for medical clearance **before** returning to work. Notify your supervisor – and, if necessary, seek out guidance on assessing risk before you return to work.¹⁰ See also FAQ #53 below about going to encampments.

You are welcome to call Neighborhood Health at (615) 227-3000. We can talk with you about your concerns and care for you. We have locations open until 8pm on weekdays and on Saturday. You can also reach our on-call provider when Neighborhood Health is closed.

⁹ For reference, the CDC has published guidance for [health care workers](#), [critical infrastructure workers](#), and [general employees](#).

¹⁰ See footnote 8 above.

53. When should I stop going to encampments?

Do **not** go to encampments if you feel as if you are at higher risk of severe illness if you (or someone for whom you are a caregiver) were to get COVID-19. See FAQs #1-3 above. Rather, consult your medical provider first.

Do **not** go to an encampment if you lack PPE.

Do **not** go to an encampment if you or someone in your household has a fever, symptoms, or potential exposures to COVID-19. See FAQs #16-17 above.

54. NEW: I am a supervisor working with an employee who may have been exposed and/or may be symptomatic for COVID-19. How do I assess our organization's risks and determine next steps?

Contact the Metro Public Health Department (MPHD) for guidance. Please also see the CDC guidance on return-to-work assessments.¹¹

If you are unable to connect with MPHD, contact Brian Haile at (615) 944-4404. We will support you in any way we can.

¹¹ See footnote 8 above.

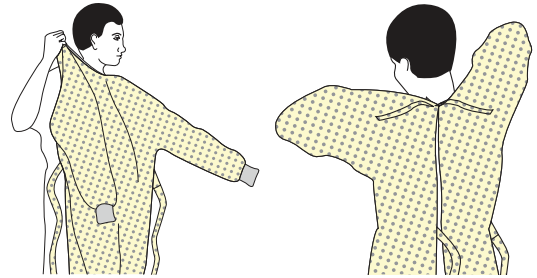
Attachment 1: Guidance for Putting on and Removing PPE

SEQUENCE FOR **PUTTING ON** PERSONAL PROTECTIVE EQUIPMENT (PPE)

The type of PPE used will vary based on the level of precautions required, such as standard and contact, droplet or airborne infection isolation precautions. The procedure for putting on and removing PPE should be tailored to the specific type of PPE.

1. GOWN

- Fully cover torso from neck to knees, arms to end of wrists, and wrap around the back
- Fasten in back of neck and waist



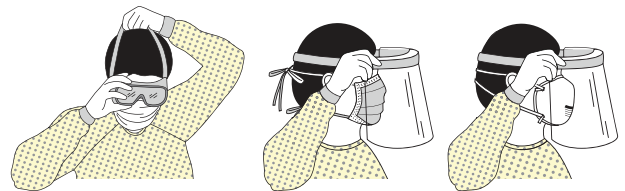
2. MASK OR RESPIRATOR

- Secure ties or elastic bands at middle of head and neck
- Fit flexible band to nose bridge
- Fit snug to face and below chin
- Fit-check respirator



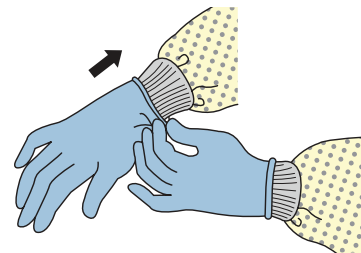
3. GOGGLES OR FACE SHIELD

- Place over face and eyes and adjust to fit



4. GLOVES

- Extend to cover wrist of isolation gown



USE SAFE WORK PRACTICES TO PROTECT YOURSELF AND LIMIT THE SPREAD OF CONTAMINATION

- Keep hands away from face
- Limit surfaces touched
- Change gloves when torn or heavily contaminated
- Perform hand hygiene



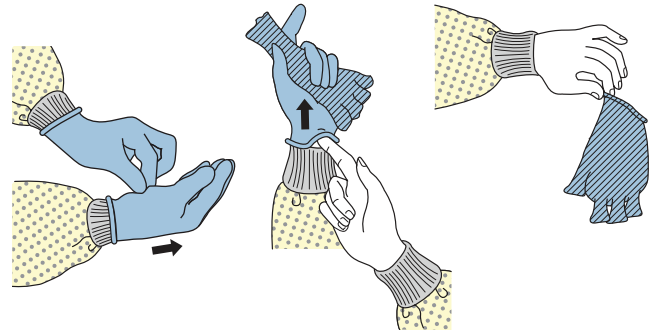
HOW TO SAFELY REMOVE PERSONAL PROTECTIVE EQUIPMENT (PPE)

EXAMPLE 1

There are a variety of ways to safely remove PPE without contaminating your clothing, skin, or mucous membranes with potentially infectious materials. Here is one example. **Remove all PPE before exiting the patient room** except a respirator, if worn. Remove the respirator **after** leaving the patient room and closing the door. Remove PPE in the following sequence:

1. GLOVES

- Outside of gloves are contaminated!
- If your hands get contaminated during glove removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Using a gloved hand, grasp the palm area of the other gloved hand and peel off first glove
- Hold removed glove in gloved hand
- Slide fingers of ungloved hand under remaining glove at wrist and peel off second glove over first glove
- Discard gloves in a waste container



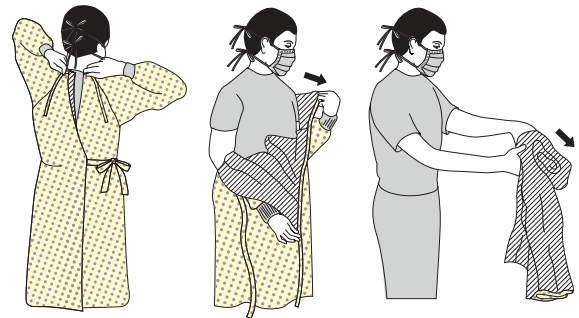
2. GOGGLES OR FACE SHIELD

- Outside of goggles or face shield are contaminated!
- If your hands get contaminated during goggle or face shield removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Remove goggles or face shield from the back by lifting head band or ear pieces
- If the item is reusable, place in designated receptacle for reprocessing. Otherwise, discard in a waste container



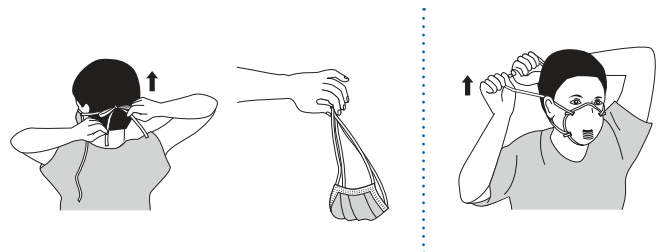
3. GOWN

- Gown front and sleeves are contaminated!
- If your hands get contaminated during gown removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Unfasten gown ties, taking care that sleeves don't contact your body when reaching for ties
- Pull gown away from neck and shoulders, touching inside of gown only
- Turn gown inside out
- Fold or roll into a bundle and discard in a waste container

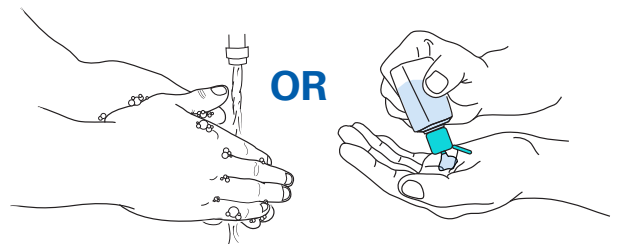


4. MASK OR RESPIRATOR

- Front of mask/respirator is contaminated — DO NOT TOUCH!
- If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp bottom ties or elastics of the mask/respirator, then the ones at the top, and remove without touching the front
- Discard in a waste container



5. WASH HANDS OR USE AN ALCOHOL-BASED HAND SANITIZER IMMEDIATELY AFTER REMOVING ALL PPE



PERFORM HAND HYGIENE BETWEEN STEPS IF HANDS BECOME CONTAMINATED AND IMMEDIATELY AFTER REMOVING ALL PPE



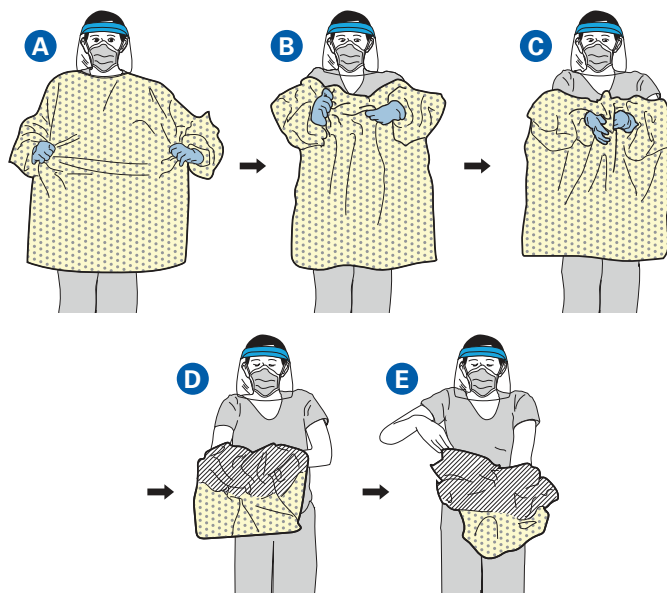
HOW TO SAFELY REMOVE PERSONAL PROTECTIVE EQUIPMENT (PPE)

EXAMPLE 2

Here is another way to safely remove PPE without contaminating your clothing, skin, or mucous membranes with potentially infectious materials. **Remove all PPE before exiting the patient room** except a respirator, if worn. Remove the respirator **after** leaving the patient room and closing the door. Remove PPE in the following sequence:

1. GOWN AND GLOVES

- Gown front and sleeves and the outside of gloves are contaminated!
- If your hands get contaminated during gown or glove removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp the gown in the front and pull away from your body so that the ties break, touching outside of gown only with gloved hands
- While removing the gown, fold or roll the gown inside-out into a bundle
- As you are removing the gown, peel off your gloves at the same time, only touching the inside of the gloves and gown with your bare hands. Place the gown and gloves into a waste container



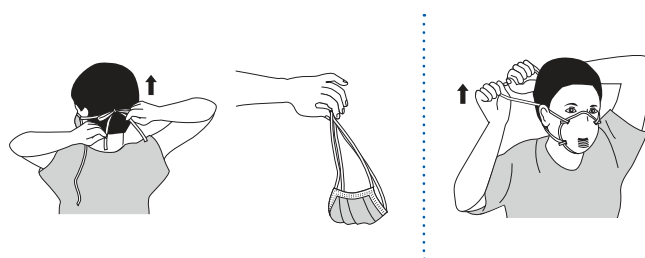
2. GOGGLES OR FACE SHIELD

- Outside of goggles or face shield are contaminated!
- If your hands get contaminated during goggle or face shield removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Remove goggles or face shield from the back by lifting head band and without touching the front of the goggles or face shield
- If the item is reusable, place in designated receptacle for reprocessing. Otherwise, discard in a waste container

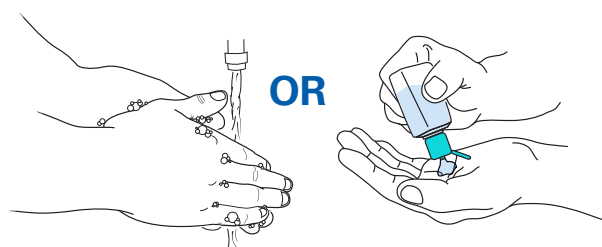


3. MASK OR RESPIRATOR

- Front of mask/respirator is contaminated — DO NOT TOUCH!
- If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp bottom ties or elastics of the mask/respirator, then the ones at the top, and remove without touching the front
- Discard in a waste container



4. WASH HANDS OR USE AN ALCOHOL-BASED HAND SANITIZER IMMEDIATELY AFTER REMOVING ALL PPE



PERFORM HAND HYGIENE BETWEEN STEPS IF HANDS BECOME CONTAMINATED AND IMMEDIATELY AFTER REMOVING ALL PPE



How to Use Personal Protective Equipment: A Quick Reference Guide for Frontline Clinical Providers

Frontline clinical providers should wear the following personal protective equipment (PPE) when treating individuals confirmed or suspected to be infected with COVID-19.



N95 RESPIRATOR



GOWN



GLOVES



**FACE SHIELD/
EYE PROTECTION**

How to properly use protective equipment

PPE TYPE	DONNING PPE	REMOVING PPE
N95 RESPIRATOR (AS AVAILABLE)	<ul style="list-style-type: none">• Secure ties or elastic band at middle of head and neck• Fit flexible band to nose bridge• Fit snug to face and below chin• Fit-check respirator	<ul style="list-style-type: none">• Front of respirator is contaminated – DO NOT TOUCH!• Grasp ONLY bottom then top ties/elastics and remove• Discard in waste container
GOWN	<ul style="list-style-type: none">• Fully cover torso from neck to knees, arms to end of wrist, and wrap around the back• Fasten in back at neck and waist	<ul style="list-style-type: none">• Gown front and sleeves are contaminated!• Unfasten neck, then waist ties• Remove gown using a peeling motion; pull gown from each shoulder toward the same hand• Gown will turn inside out• Hold removed gown away from body, roll into a bundle and discard into waste or linen receptacle
GLOVES	<ul style="list-style-type: none">• Use non-sterile for isolation• Select according to hand size• Extend to cover wrist of isolation gown	<ul style="list-style-type: none">• Outside of gloves are contaminated!• Grasp outside of glove with opposite gloved hand; peel off• Hold removed glove in gloved hand• Slide fingers of ungloved hand under remaining glove at wrist
FACE SHIELD / EYE PROTECTION	<ul style="list-style-type: none">• Put on face and adjust to fit	<ul style="list-style-type: none">• Outside of goggles or face shield are contaminated!• To remove, handle by “clean” head band or ear pieces• Place in designated receptacle for reprocessing or in waste container

Wash hands or use an alcohol-based hand sanitizer immediately after removing all PPE!

N95 Respirator Usage and Care

N95 respirators must only be used by a single wearer. Use labels to reduce accidental usage of another person's respirator.



Existing CDC guidelines recommend a combination of approaches to conserve supplies while safeguarding health care workers in such circumstances.

- Minimize the number of individuals who need to use respiratory protection through administrative controls;
- Use alternatives to N95 respirators (e.g., other classes of filtering facepiece respirators, elastomeric half-mask and full facepiece air purifying respirators, powered air purifying respirators) where feasible;
- Implement practices allowing extended use and/or limited reuse of N95 respirators, when acceptable;
- Prioritize the use of N95 respirators for those personnel at the highest risk of contracting or experiencing complications of infection.

Extended use is favored over reuse because it is expected to involve less touching of the respirator and therefore less risk of contact transmission. A key consideration for safe extended use is that the respirator must maintain its fit and function.

Homeless shelter facilities should develop clearly written procedures to advise staff to take the following steps to reduce contact transmission:

- Discard N95 respirators following use during aerosol generating procedures.
- Discard N95 respirators contaminated with blood, respiratory or nasal secretions, or other bodily fluids.
- Discard N95 respirators following close contact with, or exit from, the care area of any patient co-infected with an infectious disease requiring contact precautions.
- Consider use of a cleanable face shield (preferred) over an N95 respirator and/or other steps (e.g., masking patients, use of engineering controls) to reduce surface contamination.
- Perform hand hygiene with soap and water or an alcohol-based hand sanitizer before and after touching or adjusting the respirator (if necessary for comfort or to maintain fit).

If reusing respirators is necessary because of limited supplies:

- Hang used respirators in a designated storage area or keep them in a clean, breathable container such as a paper bag between uses. To minimize potential cross-contamination, store respirators so that they do not touch each other and the person using the respirator is clearly identified. Storage containers should be disposed of or cleaned regularly.
- Clean hands with soap and water or an alcohol-based hand sanitizer before and after touching or adjusting the respirator (if necessary for comfort or to maintain fit).
- Avoid touching the inside of the respirator. If inadvertent contact is made with the inside of the respirator, discard the respirator and perform hand hygiene as described above.
- Use a pair of clean (non-sterile) gloves when donning a used N95 respirator and performing a user seal check. Discard gloves after the N95 respirator is donned and any adjustments are made to ensure the respirator is sitting comfortably on your face with a good seal.

Use masks not evaluated or approved by NIOSH or homemade masks as a last resort.

Attachment 2: PPE Guidance for COVID-19 Pandemic

Note: Discard PPE if contaminated, soiled, or torn.

PPE	When?	Extended use: Keep on PPE without removing between patients.	Re-use: Removing and reapplying	Putting on/taking off (See also attached graphic)
Surgical facemask (See FAQ #9 and footnote 1 about homemade masks.)	All the time.	Yes, wear same facemask between patients. STOP if you touch/adjust mask then perform hand hygiene.	Store for reuse in a clean, sealable paper bag. Consider keeping and reusing a collection of 4 facemasks. ¹² Do not wash your surgical mask. (If you are instead using a homemade mask, see FAQ #50.)	Putting on: Put on before contact with patients or coworkers. Taking off: Avoid touching front of mask. Wash hands after removal. Remove fully and perform hand hygiene. STOP and TOSS: If mask becomes visibly soil, damaged, difficult to breathe through.
Disposable Gloves	Direct patient/client contact	Remove and perform hand hygiene when finished with direct patient contact and/or gloves become soiled.	Do not store or reapply used gloves.	Putting on: Perform hand hygiene before gloving up. Taking off: Perform hand hygiene after removal.

¹² To reduce risk of contamination with a re-used surgical mask is, consider cycling through 4 numbered facemasks.

- Label 4 paper bags numbers: 1, 2, 3, 4.
- After use of each facemask, place facemask in paper bag #1 on day 1, then #2 on day 2, then #3 on day 3, then #4 on day 4.
- Begin to re-use the facemasks in each numbered bag consecutively.
- This allows for 3 days between reuse of each mask, ensuring lower risk of exposure to COVID-19 when reusing.

Face shield/eye protection	Being within 10 feet of patient/client	<p>Yes, wear eye protection between patients/clients.</p> <p>STOP if you touch eye protection to perform hand hygiene.</p> <p>STOP and CLEAN: If mask becomes visibly soiled or difficult to see through.</p>	<p>LEAVE encampment area before removal of eye protection.</p> <p>Disinfect between reuses.</p> <p>Perform hand hygiene and apply gloves before reusing.</p>	<p>How to disinfect:</p> <ol style="list-style-type: none"> 1. Wash hands, put on gloves. 2. Wipe down area of counter with disinfectant. 3. Place eye protection on cleaned counter area. 4. Wipe off eye protection with alcohol or disinfectant. 5. Air dry or use clean paper towels. 6. Label if needed and store. 7. Re-wipe down counter area. 8. Remove gloves, perform hand hygiene.
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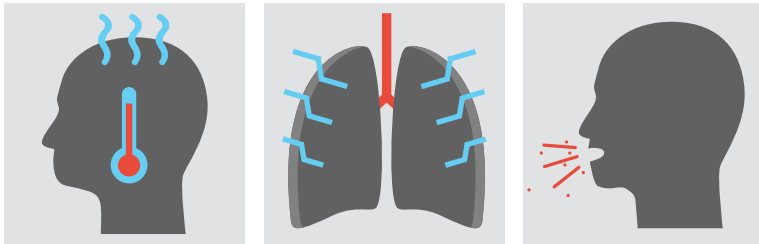
Attachment 3: Encampment Flyer and Encampment Cards

CORONAVIRUS/COVID-19

PROTECT YOURSELF AND OTHERS ON THE STREETS

UPDATED BY OPEN TABLE NASHVILLE ON 4/23/2020

KNOW THE FACTS



SYMPTOMS OF COVID-19 INCLUDE

fever, cough, shortness of breath, loss of sense of taste or smell, diarrhea, vomiting, and flu-like symptoms like tiredness or body aches. Emergency warning signs include trouble breathing, persistent pain or pressure in the chest, new confusion, and bluish lips or face.

HOW THE VIRUS SPREADS: The virus spreads mainly from person to person in close contact (within about 6 feet). It spreads when someone breathes, coughs, or sneezes the virus out. You can get the virus if you touch something with the virus on it and then you touch your nose, mouth, or face.

WHAT YOU CAN DO



- **WASH YOUR HANDS OFTEN** with soap and water for at least 20 seconds or use hand sanitizer that is at least 60% alcohol. Do this each time you go to a public place, before and after using any shared facilities, or after you blow your nose, cough, or sneeze.
- **COUGH AND SNEEZE INTO YOUR ELBOW.**
- **DON'T SHARE ANYTHING**, including cigarettes, food, plates, utensils, or bottles. Wipe your phone and other items you touch a lot with disinfectant.
- **DON'T TOUCH YOUR EYES, NOSE, & MOUTH.**
- **STAY SAFE BY STAYING APART.** Stay at least 6 feet away from other people. Put your tents or sleeping quarters 12 feet apart. Do not share tent space.
- **WEAR A MASK OR BANDANA THAT COVERS YOUR MOUTH & NOSE.**
- **USE A TISSUE TO OPEN DOORS.** Throw away used tissues, disposable masks, gloves.
- **LOOK OUT FOR ONE ANOTHER.**

GET HELP

If you have any of the symptoms, call **Neighborhood Health at 615-227-3000**. You can also **call 911**. For help with **addiction issues**, call Tennessee REDLINE at 1-800-889-9789.

For help with a **mental health emergency**, call Mobile Crisis at 615-762-0125 or go to 250 Cumberland Bend. Dr. If you're not in crisis but need to talk to Mental Health Coop, call 615-726-3340.

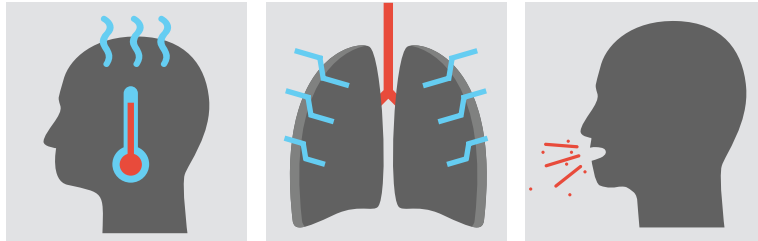
If you're experiencing **domestic violence**, call 1-800-334-4628.

If you have questions about **financial issues**, call the Financial Empowerment Center at 615-748-3620.

CORONAVIRUS/COVID-19

HOW TO TAKE CARE OF SOMEONE WHO IS SICK

UPDATED BY OPEN TABLE NASHVILLE ON 4/23/2020



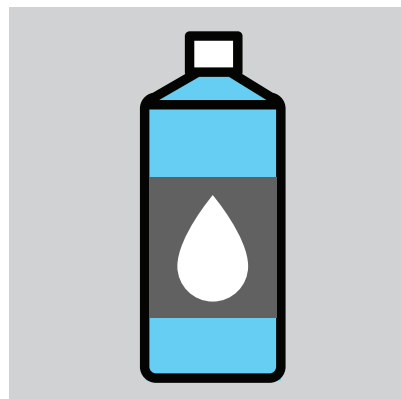
Your friend may have COVID-19 if they have a fever, cough, or shortness of breath. Protect yourself from becoming infected.

IF SOMEONE HAS SYMPTOMS, always call Neighborhood Health at 615-227-3000. You can also call 911.



TO PREVENT THE SPREAD OF GERMS:

- Keep the person away from others, including you, as much as you can.
- Have the person use a different bathroom if possible.
- Don't share anything, including clothes, dishes, or cigarettes.
- The sick person should wear a facemask or a face covering like a bandana when around people, including you.
- Wear a mask that covers your mouth and your nose.
- Wash your hands often with soap and water for at least 20 seconds or sanitize them each time you get close to a sick person.
- Don't have visitors.



HELP TREAT THE SYMPTOMS:

- Make sure the sick person rests and drinks a lot of water or sports drinks to stay hydrated.
- Tylenol may help.
- Most people get better after a week.

You are not alone, We are here to help.

- **You can get medical care from Neighborhood Health.**
 - It's free if you are homeless.
 - You can talk to our medical providers by phone or video chat.
 - Come into one of our 5 open clinics (see other side).
- **Call (615) 227-3000 anytime**, you can even call at night or on the weekend.

If you are in crisis:

- **Call (615) 726-0125 if you are having mental health emergency. This is Mobile Crisis.**
 - Or go to 250 Cumberland Bend Dr.
 - This is free and open 24/7.
- **Call (615) 726-3340 if you are not in crisis**, but you still need to talk to Mental Health Coop.

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(615) 227-3000

Neighborhood Health clinics that are here to serve you during the pandemic:

- **Downtown Clinic**, 526 8th Ave S. (next to Room in the Inn)
7am to 4pm, Mon to Fri
- **Cayce Clinic**, 617 South 8th St
7am to 4pm, Mon to Fri
- **Napier Clinic**, 107 Charles E. Davis Blvd
7am to 4pm, Mon to Fri
- **Madison Clinic**, 601 W. Due West Ave
8am to 8pm, Mon to Fri and 8am to 4pm Sat
- **Welshwood Clinic**, 419 Welshwood Dr (near Nolensville Road Walmart)
8am to 5pm, Mon to Fri

If possible, call **(615) 227-3000** before you come.



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8am to 5pm, Mon to Fri

If possible, call **(615) 227-3000** before you come.



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Neighborhood Health clinics that are here to serve you during the pandemic:

- **Downtown Clinic**, 526 8th Ave S. (next to Room in the Inn)
7am to 4pm, Mon to Fri
- **Cayce Clinic**, 617 South 8th St
7am to 4pm, Mon to Fri
- **Napier Clinic**, 107 Charles E. Davis Blvd
7am to 4pm, Mon to Fri
- **Madison Clinic**, 601 W. Due West Ave
8am to 8pm, Mon to Fri and 8am to 4pm Sat
- **Welshwood Clinic**, 419 Welshwood Dr (near Nolensville Road Walmart)
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