Interim Guidance for Emergency Housing Service Settings

Providers 2019 Novel Coronavirus (COVID-19)

Background

Persons experiencing homelessness may be at risk for infection of Novel Coronavirus (COVID-19). Emergency housing service settings that provide temporary housing, congregate living spaces or other services for people who are experiencing homelessness or who are under-housed, are diverse and face unique issues in supporting the populations that they serve.

Purpose:

This interim guidance is intended to help emergency housing service setting providers:

- Reduce the risk of exposures of acute respiratory illnesses (e.g., including COVID-19 which can present with a fever, new cough or worsening cough, or new or worsening shortness of breath)
- Support the COVID-19 planning process
- Provide planning considerations if there is local transmission of COVID-19

As this situation continues to evolve and change, York Region Public Health will provide updated guidance. This interim guidance should be adapted to individual settings.

Objective

This interim guidance document is intended to support response planning and varied recommendations for:

1. Visitors/Volunteers who are individuals that may enter emergency housing and drop-in settings to support programs and services, but who do not rely on those services for meeting their shelter and housing needs,
2. Staff who are employed in emergency housing service operations and/or drop in settings, and
3. Clients that access shelter services and drop-ins and rely on these settings for housing, food, and other services.

Recommendations should be applied with consideration and interchangeably to each of these groups.

What is 2019 Novel Coronavirus (COVID-19)?

Coronaviruses are a large family of viruses known to cause illness ranging from the simple common cold to more severe diseases such as Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS). COVID-19 which was originally identified in Wuhan, China is a new (novel) strain that experts are learning more about every day. More information can be found on www.york.ca/COVID19

Public Health

1-877-464-9675
TTY 1-866-512-6228
york.ca/covid19
March 25, 2020 – information may be subject to change

Adapted from Toronto Public Health
Reducing the risk of acute respiratory infections (including COVID-19) in homelessness strategies:

Strategies for providers to implement to reduce the risk of acute respiratory illness transmission:

- **All staff, visitors, volunteers and client are to practice physical distancing**
  - To prevent the spread of COVID-19 and to protect our community, York Region Public Health encourages all residents to stay home/or in emergency housing, when possible, and reduce their interactions with others.
  - Physical (or social) distancing means limiting the number of people you come into close contact with and maintaining a distance of two (2) metres from other individuals as much as possible.
  - Link to [Physical Distancing Poster](#)

- **Ask sick staff, visitors, volunteers to stay home.**
  - Staff, visitors and volunteers who have symptoms of acute respiratory illness are asked to stay home and not attend the setting until 14 days after symptom onset and they are afebrile (i.e., fever free) and symptoms have improved (NOTE: different guidance applies for hospitalized patients or health care workers regarding COVID-19 and return to work)
    - Staff should notify their supervisor and stay home if they are sick

- **Ask sick staff, visitors, or volunteers to separate themselves from others if they become sick at the setting.**
  - Staff, visitors, or volunteers who have acute respiratory illness symptoms (i.e. new or worsening cough or difficulty breathing) and fever upon arrival to the setting or become sick during the day should:
    - Be separated from others and be provided a surgical mask,
    - Supported to access health care services, and
    - Sent home immediately to self-isolate and contact their primary health care provider, Telehealth Ontario (1-877-797-0000) or York Region Public Health (1-800-361-5653)

- **Support clients in identifying if they are having symptoms of acute respiratory illness**
  - Ask client if they are experiencing any symptoms of acute respiratory illness:
    - Fever
    - New or worsening cough
    - New or worsening shortness of breath
  - If symptoms appear, provide a surgical mask to the client, isolate the client immediately, and support the client in accessing appropriate healthcare.
    - If a space for self-isolation is not available for the client, measures to maintain physical distancing of at least 2 metres should be taken.
    - Accommodations should be made for appropriate housing for these clients if acute healthcare services are not required, and/or if they are awaiting test results for COVID-19.

- **Ask staff, visitors, volunteers, and clients if they have concerns about COVID-19.**
  - If staff, visitors and/or clients have questions, direct them to:
    - Visit the following websites:
      - York Region Public Health: [www.york.ca/covid19](http://www.york.ca/covid19)
    - Call the following for support and information:
- York Region Public Health 1-800-361-5653
- Telehealth Ontario: 1-877-797-0000

- **Plan for staff and volunteer absences.**
  - Develop flexible attendance and sick-leave policies. Staff/volunteers in addition to their own illnesses may need to stay home caring for a sick household member, or caring for their children in the event of school and daycare closure/dismissal.
  - Identify critical job functions and positions, and plan for alternative coverage by cross-training staff members.
  - Consider implementing similar processes used for covering staffing shortages such as statutory days or peak vacation request time.

- **Travel related advice for employees:**
  - We encourage operators and providers to review and recommend the Public Health Agency of Canada’s current travel advisories for the latest guidance and recommendations for employee(s) with an international travel history.
  - Anyone who has travelled outside of Canada should:
    - **Self-isolate** for 14 days when they return. People who are self-isolating should not go to work.
    - Monitor themselves for symptoms of COVID-19 for 14 days after returning to Canada
    - Contact their primary care provider, Telehealth Ontario at 1-866-797-0000 or York Region Public Health at 1-800-361-5653 if they experience symptoms of COVID-19.
  - Essential workers who have travelled and are part of workplaces that are essential to daily living are able to return to work as long as they do not have symptoms. However, they should vigilantly self-monitor for symptoms for a period of 14 days and identify themselves to their employer so that a plan can be put into place to ensure the protection of those workplaces.
    - Essential employees should be encouraged to continue to vigilantly monitor for symptoms of: fever, new or worsening cough, new or worsening shortness of breath
    - It is important to note that COVID-19 symptoms can range from mild to severe flu-like symptoms and other common respiratory infections
    - Follow recommended physical distance practices
    - If essential workers experience symptoms of COVID-19, they should follow self-isolation guidelines, inform their employer and contact their primary care provider, Telehealth Ontario at 1-866-797-0000 or York Region Public Health at 1-800-361-5653

**Encourage good infection prevention and control practices to help reduce risk of acute respiratory illnesses (including COVID-19)**

- Ask staff and visitors/volunteers to engage in routine infection prevention and control practices to lower the risk of respiratory illness, including COVID-19.
- Ask all staff, visitors, volunteers, clients/participants to engage in regular and frequent hand hygiene (i.e. cleaning hands).
  - Post Hand Washing and Hand Sanitizing posters in visible locations around the setting. Make sure that hand washing posters are posted in washrooms and
above sinks and that there are hand sanitizing posters near alcohol-based hand rub (ABHR) dispensers.

- Review the importance of proper hand hygiene. Avoid touching your face with unclean hands.
- If having wall-mounted alcohol-based hand rub (ABHR) is not feasible, consider providing portable ABHR to staff. Ensure that the alcohol-based hand rub used on site has an alcohol concentration between 60% and 90%.
- Offer supervised hand hygiene for clients (e.g., have a staff member pump alcohol-based hand rub (ABHR) into client's/participant's hands as they enter the setting).
- Ensure liquid hand soap (not bars of soap) and alcohol-based hand rub dispensers are available, monitored and well-supplied.

- Ask all staff, visitors, volunteers, clients/participants to engage in good respiratory etiquette (e.g., cover their mouth and nose when they cough or sneeze with a tissue, or cough or sneeze into the bend of their elbow and not their hand).
  - Post Cover Your Cough or Sneeze posters in visible locations around the setting(s).

- Ensure environmental cleaning and disinfection is performed on a routine and consistent basis (consider a schedule). This also needs to be discussed with any contracted cleaning company/agency. Consideration for the following should be made:
  - Commonly used cleaners and disinfectants are effective against COVID-19.
  - Frequently touched surfaces are most likely to be contaminated.
  - Use only disinfectants that have a Drug Identification Number (DIN). A DIN is an 8 digit number given by Health Canada that confirms it is approved for use in Canada.
  - Check the expiry date of products you use and always follow manufacturer's instructions.
  - In addition to routine cleaning, surfaces that have frequent contact with hands should be cleaned and disinfected twice per day and when visibly dirty. Examples include:
    - High-touch surfaces (e.g., door knobs, light switches, counters handrails, elevator buttons, touch screen surfaces and keypads)
    - Common areas (e.g., dining rooms, sleeping quarters, bathrooms)
    - Shared equipment (e.g., telephones, computer keyboard, walkie-talkies)
    - Ask clients/participants to not share items that come into contact with the mouth or nose (e.g., drug-use equipment, drinking and eating utensils, cigarettes).
    - Staff and visitors/volunteers should try to use techniques to limit and reduce exposure to respiratory droplets from coughs or sneezes (e.g., social distancing, stand next to rather than in front of the client who has respiratory symptoms).

Additional considerations in response to current cases of COVID-19

- Confirmed and suspect cases of COVID-19 are reported by health care providers and Public Health Ontario Laboratory to public health. Other than health care settings, workplaces are not required to report to public health.
  - Public health performs a risk assessment for all COVID-19 exposures including those occurring in a homelessness service setting.
- Public health will provide advice regarding any other measures the setting and staff may need to take in order to reduce the risk of transmission. Measures may include restricting movement and transfers between facilities and suspending new admissions.
- Public health will advise if any special cleaning and disinfection processes are recommended.

**Planning in case of local transmission of COVID-19**

- York Region Public Health is updating its COVID-19 planning documents and recommends that all providers begin to consider their continuity of operations plans.
  - A Public Health Guide for Group Living Residents is a resource that can be referred to in the interim for service operators and providers from York Region Public Health.
  - Interim guidance for homeless service providers to plan and respond to coronavirus disease 2019 (COVID-19) from the CDC.
- Establish ongoing communication with York Region Public Health to facilitate access to relevant information before, during and after an outbreak to support providers on how to best decrease the spread of acute respiratory illness and lower the impact of COVID-19 in their setting in the event of local transmission. Call Health Connection at 1-800-361-5653.
- Providers should identify and communicate planning components which may include reducing the spread among staff, protecting those who are at a higher risk of adverse health complications, maintaining operations, and minimizing negative effects from supply chain disruptions.
- Put together a team to assist in developing and implementing site specific plans to prevent the spread of COVID-19.
- Providers should try to develop partnerships with other health and non-health related agencies to develop strategies which may be used during community spread. Plans should assess needs, resources, and decisions on how the facility will implement activities. Some areas to consider include:
  - Assessing risk to staff and measures to maintain their health.
  - Education and training for staff.
  - Facility Readiness: signage, supplies, and staffing.
  - Housekeeping.
  - Establishing pathways of communication.
  - Assessing risk to clients/participants consider:
    - Strategies to safely implement isolation or the separation of symptomatic clients/participants from well clients/participants (i.e. grouping ill individual together and away from well individuals) in the event of local transmission.
    - Transportation and preventing spread of COVID-19 between shelters, agencies and facilities and health care workers.

**More information**

For more information, contact York Region Public Health at 1-800-361-5653.
References


Toronto Pandemic Influenza Planning: A Planning Guide for Homeless and Housing Service Providers. Leung, C.S.,


