

## COVID-19 "Isolate in Place" Tips for Homelessness Service Settings

As more local transmission of COVID-19 occurs in Toronto, strategies for clients to self-isolate or "isolate in place" in homelessness service settings will need to be implemented. This will include strategies for "cohorting" or grouping clients. Cohorting can be used when single rooms are not available or during outbreak situations. Service providers may encounter a range of challenges with cohorting clients depending on the population served, and the physical layout of the setting. The following are general tips for isolating clients within a homelessness service setting.

### The following individuals must self-isolate:

- Those who have COVID-19, OR
- Those with COVID-19 symptoms (e.g. fever, cough, sneezing, sore throat, difficulty breathing, muscle aches, tiredness), OR
- Those who may have been exposed to COVID-19

### General Advice

- Clients with COVID-19 should, as much as possible, be placed in an individual room with a dedicated bathroom.
- Clients with COVID-19 symptoms should be placed separately from others until testing can be arranged.
- Clients who are isolating should not go outside.
  - If they need to go outside to smoke, inform them to keep at least two metres/six feet between themselves and others, and to not share their cigarette or drug-use supplies with others.
- Clients in self-isolation should not use public transportation, taxis or ride-shares.
- Clients should not be hanging out with others in-person. Encourage other ways for people to connect such as by phone.
- Clients who have to have contact with others should practise physical distancing, and keep at least two metres/six feet between themselves and the other person.

### Cleaning and Disinfection

- Make sure that environmental cleaning and disinfection is performed on a routine and consistent basis, and conduct enhanced cleaning and disinfection of high-touch surfaces (i.e. surfaces that are frequently touched by hands) at least twice per day and when visibly dirty.
  - Check the expiry date of products and always follow manufacturer's instructions and appropriate **contact time** (i.e. amount of time that the product will need to remain wet on a surface to achieve disinfection).

### Tips for Cohorting Clients

- If an individual room is not available, consider using a large, well-ventilated room to place clients who have COVID-19 or symptoms together (i.e. cohorting) away from well clients.
  - In areas where clients who have COVID-19 are staying together, keep beds two metres/six feet apart, and consider using temporary barriers between beds (e.g. curtains).

- Do not use the top bunk of bunk beds.
- Designate a separate bathroom for clients with COVID-19.
- If your setting is a large open space (e.g. respite site), consider designating a separate space for well clients that is separate from ill clients and use barriers (e.g. privacy screens) to separate the areas.
- Clients who are symptomatic can be provided a mask when they are in shared spaces. Educate clients on the appropriate use of mask if they need to leave the designated area.
- Consider keeping the following clients separate (i.e. cohorting them within these groups in separate areas/rooms from each other):
  - Clients with COVID-19
  - Clients with symptoms of COVID-19
  - Clients who are asymptomatic and have been exposed to COVID-19 (and are being monitored for symptoms)
  - Clients who are vulnerable to severe illness related to COVID-19 (e.g. have underlying medical conditions, over 70 years old)
  - Well clients who have not been exposed to COVID-19.
- Think about movement in the building and how to ensure that these groups of client's are not interacting or passing each other throughout the building (e.g. can different entry/exit points in the facility be used for different groups, and sectioned off).
- Minimize movement as much as possible in the building.
- See the below chart for cohorting guidance for client's who are ill or positive for COVID-19:

	1 Person Ill	2 – 10 People Ill	More than 10 People Ill	Majority of People Ill
IDEAL  LEAST IDEAL	Isolate in separate room	Accommodate together in separate room	Accommodate together on separate floor or in separate section of facility	Accommodate throughout entire site
	Isolate in shared room	Accommodate together in common area	Accommodate throughout entire site	
	Isolate in large shared space	Accommodate together at one end of floor		

**Tips for Cohorting Staff**

- Assign staff to work in areas with the client's diagnosed with COVID-19 or symptomatic with COVID-19.
- Ensure staff assigned are not working in other areas, interacting with other staff, or with well clients in the setting.
- Establish a break schedule to ensure that staff remain separate.

## Personal Protective Equipment

- Staff should perform hand hygiene before putting on/handling personal protective equipment (PPE) and after removing it.
- PPE should be chosen based on a risk assessment of the type of care or contact being provided to clients, what area of the body staff may become exposed to body substances, and how an illness is spread. COVID-19 is spread by the droplet / contact route.
- Generally, PPE is not indicated when not within two metres/six feet of a symptomatic client/client positive with COVID-19. If within two metres, wear a mask.
- For providers who may be involved in having people with COVID-19 residing at their settings, provide education to staff on proper PPE use. Staff must be trained on the safe use, care and limitations of PPE, including [donning \(putting on\) and doffing \(taking off\) personal protective equipment](#) as well as proper disposal.
- If direct care/service is being provided to a symptomatic client (less than two metres/six feet between the staff and client), staff should wear appropriate PPE for droplet/contact (e.g. gloves, mask, eye protection).

## More information

For more information, visit our website at [www.toronto.ca/COVID19](http://www.toronto.ca/COVID19) or call us at 416-338-7600.

## References

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