Toronto Public Health (TPH) is the local authority on COVID-19 testing and prevention. When a client who has used the shelter system tests positive, shelter staff and clients should follow TPH's expert guidance and advice.

- A TPH investigator will contact your organization to begin a case and contact investigation.
- TPH will make recommendations as a result of their investigation and will work with SSHA and the shelter or respite provider to implement those recommendations.
- TPH will provide advice regarding any other measures that the site and staff may take to reduce the risk of transmission.

If you become aware of a client who has been diagnosed with COVID-19 prior to being contacted by TPH:
- Notify TPH and SSHA with the client name and DOB.
- TPH will confirm the lab results and an investigator will contact your organization to begin a case and contact investigation.

Below is an overview of what actions may be identified through the TPH investigation and some steps you can take immediately to prepare for the investigation:

**Cleaning**
- Clean and disinfect common areas (e.g., rooms, bathrooms, dining spaces).
- 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 and appropriate **contact time** (i.e. amount of time that the product will need to remain wet on a surface to achieve disinfection). Contact time is usually found on the product's label.
- Place possibly contaminated laundry in a plastic bag and wash with regular laundry soap and hot water (60-90°C) and dry well.
- Dispose of client garbage in a plastic bag before disposing of it with other waste.
- In addition to routine cleaning, surfaces that have frequent contact with hands should be cleaned and disinfected twice per day and when visibly dirty.
- Special attention should be paid to commonly touched surfaces such as doorknobs, elevator buttons, light switches, toilet handles, counters, hand rails, touch screen surfaces and keypads.

**Physical distancing and prevention of further transmission**
- Where there is an outbreak, staff and clients may need to wear PPE to reduce transmission. This may be recommended for the floor/program of the confirmed case only or throughout the program, depending on the circumstances.
• Remind everyone at your site to maintain a two metre/six foot distance from others as much as possible
• Ensure clients are following physical distancing guidelines in all common areas. Provide visual cues such as taping 2m distances in seating areas and where clients line up for services.
• If multiple floors use a shared dining room or common area, establish a schedule to reduce contact between clients on different floors.
• Reinforce the importance of physical distancing for staff working in all areas of the shelter/respite.

Reinforce Hand Hygiene & Respiratory Etiquette
• Ensure signage for hand hygiene and respiratory etiquette (e.g., cover your cough).
• Ensure that supplies that are necessary to clean hands are accessible. This includes alcohol-based hand rub (also known as ABHR or hand sanitizer), hand soap, paper towels, and garbage cans.
• Ensure liquid hand soap and ABHR dispensers are checked regularly and replenished when empty.
• Ensure ABHR used on site has an alcohol concentration of at least 70%.
• If possible, have wall-mounted ABHR/provide portable ABHR to staff.
• Educate clients about the importance of not sharing items that come into contact with their mouth (e.g. utensils, cigarettes, drinks, drug use supplies).

Active screening
• Actively screen all clients and staff for symptoms.
• All staff should be screened at the start of every shift and include temperature checks.
• Screen clients at least once per day if possible to monitor for symptoms and include temperature checks.
• Any symptomatic individuals should be sent immediately for testing.
• Clients that are awaiting test results should be held at the hospital until results are known.
• If clients waiting for test results return to the shelter, keep them isolated from other clients.
• Any clients who test positive should be referred directly from the hospital or assessment centre to the COVID-19 recovery program.

Identify the exposure period
• Consider when the client last accessed your program.
• The exposure period begins 48 hours before the onset of symptoms and continues until the client left the site for testing and isolation.

Identify any client close contacts of the confirmed case
• Close contacts may include:
Anyone sleeping in the same bedroom or a bed next to the individual.
- Any clients who are friends, associates, partners, who may have had interactions with the confirmed case of more than 15 min, or without maintaining 2 metres physical distance.

- Close contacts who have symptoms should be referred for testing.
- Asymptomatic close contacts may also be referred for testing, depending on the circumstances.
- All close contacts should isolate for 14 days.
- Referral to a designated isolation program for close contacts may be possible.
- Until that referral is made, close contacts should stay in a room with the door closed or in an isolated area, where possible, to avoid contact with other clients in a common area of the shelter.
- Asymptomatic close contacts who are tested and receive a negative result will still require isolation for 14 days to monitor for signs and symptoms, as the virus can incubate for 14 days.

**Identify any staff who may be close contacts**
- Identify any staff who had interactions with the confirmed case during the exposure period.
- Close contact means an interaction of more than 15 min within 2 metres, and where they were not wearing PPE.

**Staff testing and isolation**
- Staff who worked with the confirmed case during the infectious period (from 48 hours before onset of symptoms to the end of last shift worked / to the time a resident case was put in isolation) should stay home and self-monitor and self-isolate.
- **Work-home isolation** may be recommended in consultation with Toronto Public Health.
- All staff at the shelter should not work at other facilities during the isolation period, in order to prevent further spread of COVID-19 to other high-risk settings.
- Ensure all staff who are symptomatic get COVID-19 testing at an Assessment Centre.
- Give staff the COVID-19 outbreak number provided by TPH to provide at the Assessment Centre to ensure they are tested promptly and their test result is linked to the outbreak.

**Communication**
- Offer staff **EAP support**.
- Provide ongoing COVID-19 updates to keep staff and clients informed
- Inform any agency partners going into the setting about COVID-19 at the site.