

COVID-19 Information Sheet: Infection Prevention and Control
Providing In-Person Support for People Experiencing and Exiting Homelessness
March 22, 2022

Purpose

This information sheet is intended to support organizations and staff providing supports to people experiencing, at risk of experiencing, or transitioning from experiencing homelessness to provide in-person service in a safe manner to reduce the risk of transmitting or contracting COVID-19. Workers providing supports in congregate living settings i.e. in shelters can refer to the [Congregate Living Setting Resources Toolkit](#) for guidance on providing support in congregate living settings. This information sheet can be used by workers in congregate living settings when providing support to service recipients in the community.

Occupational Health & Safety and Personal Protective Equipment (PPE)

This guide should be used to support compliance with COVID-19 guidance provided by the Ministry of Health, Ministry of Labour, Training and Skills Development and Toronto Public Health (see resource section below). Protecting the health and safety of workers, including implementing a variety of measures to control potential exposure to COVID-19 is vital as organizations continue to provide essential services to the public.

The best way to reduce the likelihood of COVID-19 transmission in the workplace is to have multiple controls in place, including screening for COVID-19 symptoms, vaccine policies, maintaining a physical distance of two metres from others where possible, and the use of personal protective equipment (PPE) which supports workers to complete work duties safely. All workers are required to wear applicable PPE as directed by their employer. Workers are also required to inform service-users of their requirement to wear a mask (if applicable).

Workers are encouraged to complete [Infection Prevention and Control \(IPAC\) training modules](#) and collaborate with workplace health and safety representatives or Joint Occupational Health and Safety Committees wherever possible to support safe work practices. Organizations should include risks, hazards and controls to mitigate hazards in their workplace safety plan as part of their obligation to prepare a safety plan under the [Reopening Ontario Act](#).

COVID-19 Vaccinations

The health and safety of workers is a priority. Vaccination is a key element in the protection of workers against serious symptoms and transmissibility of COVID-19. The City of Toronto has released its [Mandatory Vaccination Policy](#) requiring the vaccination of all City of Toronto employees. Shelter Support and Housing Administration (SSHA) has also released its [Mandatory Vaccination Directive](#) outlining the requirement of all City-funded shelter providers to implement a mandatory vaccine policy for City-funded shelter and 24-hour respite sites. [Toronto's Medical Officer of Health strongly recommends local employers institute a workplace vaccination policy](#) to protect their

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employees and the public from COVID-19. Additional information is provided in the Resource section below to support workers and service users with booking a vaccination appointment.

Screening

Staff working in shelter programs and providing in person support to people experiencing or exiting homelessness should complete the [COVID-19 Screening tool for Staff](#) prior to entering indoor settings, which may include individuals' homes, coffee shops, indoor appointments, etc. Workers should assess the service user for COVID-19 using the [COVID-19 Screening tool for Clients](#) prior to entering their home or engaging in one-on-one service delivery. If support is being provided in a service recipients' home, all individuals in the home should be screened prior to entry.

	Screening	Personal Protective Equipment (PPE)
Worker	<ul style="list-style-type: none"> complete the COVID-19 Screening tool for Staff prior to attending their shift self-monitor throughout the day and immediately self-isolate and advise a supervisor if COVID-19 symptoms develop 	<ul style="list-style-type: none"> perform hand hygiene prior to putting on (donning) and taking off (doffing) PPE (including masks and eye protection) must wear a surgical mask and eye protection throughout the visit complete a risk assessment to identify additional PPE requirements if service-recipient requires direct care that requires less than 2 meters of physical distance
Service Recipient	<ul style="list-style-type: none"> will be screened for COVID-19 other members of the household should also be screened for COVID-19 	<ul style="list-style-type: none"> strongly encouraged to wear a surgical mask provided by staff for source control if service recipient is able to wear a mask perform hand hygiene prior to putting on (donning) and taking off (doffing) masks service should not be refused if service recipient is not able to wear a mask. Staff should wear appropriate PPE and maintain 2 metres of physical distance during visit

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		<ul style="list-style-type: none">• Other persons present indoor are strongly encouraged wear a mask (if able) during visit
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Providing In-Person Support to Service Recipients

Workers may provide a variety of in-person supports to service recipients including but not limited to attending housing viewings, furniture bank appointments, medical appointments, case management supports and meeting with people staying outside or who recently moved into housing.

Scheduling In-Person Support

- At the time of scheduling the in-person support staff should advise the service recipient of the following:
 1. minimize the number of non-essential people present during the visit (if possible)
 2. if additional people will be present, i.e. in a household, household or family members who are not involved in the immediate support should be asked to maintain at least a 2 metres distance from staff
 3. all people present during the visit are required to participate in screening and are strongly encouraged to wear a mask for the duration of the visit
 4. open windows where possible prior and during the indoor visit to optimize ventilation
 5. where the recommendations outlined in this document cannot be met, consider meeting in an outdoor private space

Before the Indoor Visit

- Limit items brought into the visit location to only that which is essential
- Remember to bring PPE for service recipient and other essential attendees
- Workers should have necessary PPE and alcohol-based hand sanitizer available to them for all indoor visits

Screening

- If a service recipient or other person in the home answers yes to any questions in the [COVID-19 Screening Tool](#), do not schedule the appointment or attend the visit. Provide COVID-19 testing information and offer support to book an appointment for COVID-19 testing at a [COVID-19 Assessment Centre](#). Advise the person to [self-isolate](#). Advise the person to contact their primary care physician if they have one to advise them of their symptoms. Offer support to contact a physician if the person does not have one.
- While the service recipient is self-isolating and/or awaiting test results, workers should continue communicating by phone or e-mail wherever possible to identify

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urgent needs and offer supports and resources to address needs while in isolation

- Once cleared for COVID-19, re-book the home visit

During the In-Person Visit

- Optimize indoor ventilation where feasible, e.g., asking the service recipient to open windows prior to and during the visit if safe and weather permits, and running exhaust fans that vent outdoors if possible i.e. bathrooms and/or kitchen
- Maintain two meters of distance from all people both indoors and outdoors where possible
- Wear all required PPE for the duration of the visit
- If any person develops symptoms during the visit, end the visit. The symptomatic person should [self-isolate](#) and book an appointment for COVID-19 testing at a [COVID-19 Assessment Centre](#)

After the Visit

- Complete hand hygiene
- Safely dispose of used PPE. Workers must store used PPE in a sealed bag or container until they are able to discard it appropriately

Commuting in Shared Vehicles

Where possible workers are encouraged to use public transportation and maintain two metres of distance when accompanying service recipients in the community (if possible).

If necessary to commute together, considerations should include:

- Perform hand hygiene prior to putting on PPE and entering the vehicle
- Workers must wear required PPE including a surgical face mask and eye protection
- Service recipients should wear a new surgical face mask
- Two metres of distance should be maintained where possible
- Ask passengers to sit in the back seat to maintain physical distance (if possible when travelling in the same vehicle)
- Where possible, consider installing plastic screens or plexiglass shields as a physical barrier between the driver and passenger in the back seat. Ensure that these barriers do not create any new safety hazards such as visual obstructions for the driver
- Use the vehicle climate control system and windows to improve fresh air intake/air circulation. Increased airflow can reduce contaminant build up. Avoid using the recirculated air option
- The vehicle should be cleaned, including cleaning and disinfection of high touch surfaces using an appropriate disinfectant, after each service recipient leaves

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Think Equity

The COVID-19 pandemic is having a disproportionate impact on many Black, Indigenous and racialized Torontonians. Workers and service providers should consider how to meet service users where they are and endeavor to explore how they can bridge service gaps and meet the needs of the service recipient. Consider the following (non-exhaustive) list of factors when working with a client who may be from an equity seeking group:

1. Ask the service user what supports or resources they might need. If you believe there is a service you can offer or a referral you can make, explain why you are offering this support. [311 Toronto](#) can help you find community organizations offering supports for many diverse groups.
2. Assess and address language and communication needs prior to meeting with a service recipient. Use interpreters to communicate COVID-19 protocols and requirements, if needed.
3. Service recipients, including members of equity-deserving groups, should not be refused service. Speak with a supervisor if you have questions about how to safely provide services or referrals, to ensure service-users are connected to required supports.

For more information on working with equity-deserving groups visit the following webpages: [City of Toronto Confronting Anti-Black Racism Unit](#), [Toronto For All – City of Toronto](#), and [City of Toronto Indigenous Affairs Office](#) webpages.

Additional Resources for Staff and Service Recipients

Staff, service recipients and other household members should be directed to appropriate educational materials for COVID-19. Below are additional resources for staff and service recipients. Note, resources listed below are good best practices however may not be mandatory in non-high risk settings.

[About COVID-19 Vaccinations](#)

[COVID-19 Assessment Centre](#)

[COVID-19 \(coronavirus\) and workplace health and safety | Ontario.ca](#)

[COVID-19 Guidance: Home and Community Care Providers \(gov.on.ca\)](#)

[COVID-19 How to Get Vaccinated](#)

**COVID-19 Information Sheet: Infection Prevention and Control
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[COVID-19 Visual Screening Tools](#)

[PPE Information Sheet for Staff](#)

[COVID-19 Information Sheet for Staff: Supporting Clients to Follow COVID-19 Measures](#)

[Develop your COVID-19 workplace safety plan | Ontario.ca](#)

[COVID-19 Guidance for Taxi and Ride Share Vehicles](#)

[Public Transport and COVID-19 – What We Know So Far](#)

Definitions

Active Screening includes a person asking the screening questions to another person or people completing a screening tool prior to entrance.

Hand Hygiene refers to hand washing, or hand sanitizing to maintain clean hands and fingernails. Hand hygiene should be performed upon entry and exit of the service recipient's home. Hand hygiene should occur after body fluid exposure risk and after client contact. Hand hygiene should be performed frequently with alcohol-based hand rub, with a minimum of 70% alcohol, for a minimum of 15 seconds or with liquid soap and water when hands are visibly soiled. The use of gloves does not replace the need for proper hand hygiene practices. Improper use of gloves increases the risk of disease transmission. Gloves should not be worn if not providing direct care to the service-user.

Workplace is any land, premises, location or thing at, upon, in or near which a worker works.