

## Shelter, Support & Housing Administration Division

### Homelessness Services COVID-19 Response Frequently Asked Questions and Resources

This FAQ sheet has been developed to answer questions that homeless service providers may have about COVID-19 and SSHA's response. In addition to this document, service providers are encouraged to review the [City's website for updates on SSHA services](#), and to review the following resources:

- [Updated Ontario Ministry of Health COVID-19 Guidance: Homeless Shelters](#)
- [TPH Interim Guidance for Homelessness Service Setting Providers](#)
- [COVID-19 Infection Prevention and Control Tips for Homelessness Service Providers](#)
- [TPH Pandemic Planning Guide for Housing Services and Shelters](#)
- [COVID-19 client screening tool for homelessness service settings](#)
- [COVID-19 screening process for clients in homelessness service settings](#)
- [Checklist for clients referred for COVID-19 testing](#)
- [Instructions for arranging non-emergency transportation for clients](#)

Note that as the situation is changing rapidly, the answers we provide today may change tomorrow based on updated circumstances and information.

Please stay up to date with the most recent information to keep yourself informed of new developments by referring to credible sources of information, such as Toronto Public Health's [website](#) and the [City's website for updates on SSHA services](#).

**Please share this document with staff in your organization, as it may answer questions they may have about the current situation.**

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## FREQUENTLY ASKED QUESTIONS

### SECTION 1: SSHA SERVICES AND RESPONSE TO COVID-19

#### What is SSHA doing to respond to the emergence of COVID-19?

Based on the evidence and medical advice we have received, we know we need to quickly take actions to delay the spread of COVID-19 to significantly reduce risks. The City has developed a three tier approach to strengthening prevention against COVID-19 in our emergency shelter system. These tiers are prevention, mitigation, and recovery.

We have rapidly implemented this plan since March 16, mobilizing our response on an urgent basis, to be as prepared and stay one step ahead of a very rapidly evolving situation. We are taking these steps because we know that many people experiencing homelessness have underlying chronic medical conditions that increase their risk from COVID-19 and this is a particularly vulnerable population.

#### Tier 1: Prevention

##### *Enhanced Infection Prevention and Control Guidance*

SSHA has worked closely with Toronto Public Health to provide guidance, training, tools and resources to all homeless service providers on Infection Prevention and Control measures required to protect staff and clients. We are following all provincial public health recommendations and have provided homelessness service providers with a number of resources, including a Toronto Public Health (TPH) COVID-19 fact sheet. This includes increased funding and distribution of Personal Protective Equipment (PPE).

##### *Physical distancing in the shelter system*

SSHA provided guidance on maintaining physical distancing in shelters, 24-hour respite sites and 24-hour drop-ins, including adding visual cues throughout buildings to assist clients and staff in maintaining physical distancing, making recommendations to stagger meal times and limiting use of common areas. Some shelter sites are able to meet the physical distancing guidance of 6 feet between beds.

We have also activated a range of new 24-hour response sites, hotel rooms and permanent housing units to help people experiencing homelessness to maintain physical distance. As of April 14, over 1,000 people have been moved into new spaces to meet a range of needs. By April 30, we will have moved an additional 1,000 people.

### *Outreach and Encampments*

Outreach workers continue to proactively connect with people 24/7 to provide support and referrals to shelter and housing, provide COVID-19 education, screening for COVID-19, referrals to testing at Provincial Assessment Centres, and to assess safety. Parks Ambassadors from the Parks, Forestry and Recreation division continue to support clients sleeping outdoors in public parks by providing referrals to Streets to Homes. Outreach teams will prioritize larger encampments with the greatest health and safety risks.

All clearing of homeless encampments has been put on hold until further notice, unless they are abandoned or suitable accommodations for all clients has been found.

The City of Toronto and community partners are taking immediate steps to support those sleeping outdoors by mobilizing a strategy for outreach that includes three key components:

- Access to safe indoor space, shelter and housing
- Targeted strategies for outreach, engagement, education and prevention
- Harm reduction and encampment health and safety

### Tier 2: Mitigation

#### *Screening and Testing*

The Province of Ontario recommends those who live in congregate settings be tested as soon as possible if they develop any symptoms of COVID-19 or are in close contact with someone with COVID-19. In compliance with these recommendations, SSHA has a screening process in place across all shelters, 24-hour respite sites and temporary sites to identify clients who require COVID-19 testing. This includes standard screening processes using Toronto Public Health guidelines at all points of entry by phone or in-person and active ongoing screening and monitoring of clients and staff at all sites.

#### *Isolation for Clients Waiting for Test Results*

In March, we created a dedicated program with isolation spaces and appropriate health supports for people identified through screening and assessment processes that were waiting for test results. This program was the first of its kind in Canada. More than 150 clients were supported to isolate in this program while awaiting test results.

The province has since significantly decreased waiting times for COVID-19 test results. People awaiting test results will no longer be admitted to the isolation program and assessment centres are being asked to keep people who are homeless while they are awaiting test results. Clients who test positive will be referred to SSHA's recovery program. Clients who test negative can return to the regular shelter system.

### Tier 3: Recovery

#### *Isolation for Clients Who Test Positive for COVID-19*

Inner City Health Associates, University Health Network, Parkdale Queen West, The Neighbourhood Group, SSHA and TPH had previously partnered to launch a 200-bed COVID-19 isolation site for people who experience homelessness.

However, with turnaround time for test results having significantly improved, the partners recognize that there is an immediate need for an interim COVID-19 positive site for the people experiencing homelessness and have agreed to transition this site for COVID-19 positive clients. This interim COVID-19 recovery site has been active as of April 16 and can support up to 200 people.

The site is run using a harm reduction and trauma-oriented approach, and staff includes peer supports and harm reduction workers. Clients are housed in individual hotel rooms, and will be required to spend most of every day behind a closed door. Consideration will be given, therefore, to clients' ability to tolerate this type of isolation for 14 days.

Planning for an expanded recovery site is also underway.

#### *Rapid Housing Access Initiative with TCHC*

SSHA is working with Toronto Community Housing on the Rapid Housing Access Initiative to identify vacancies that can be made available immediately to people currently in shelter system. These TCH units will be prioritized to those particularly vulnerable to COVID-19, particularly seniors, who are living in the emergency shelter system.

Clients will be referred through our Coordinated Access system and will be provided with supports to be successful in achieving housing stability. Furniture to set up the units will be provided from the Furniture Bank. All supports are within existing resources.

As of April 21, 48 households have moved into housing. An additional 3 will move in the next week and another 32 are being matched to units. More than 250 units have been identified for this initiative.

#### *Leveraging Investments*

The recent and unprecedented expansion of our services presents an opportunity to leverage investments and secure these properties through purchase or long-term lease for future affordable and supportive housing.

The City will be advocating for future stimulus funding from federal and provincial governments to take advantage of this opportunity and advance longer term solutions to homelessness.

#### **How many sites and spaces has SSHA opened to increased physical distancing?**

Eleven new facilities have been opened with approximately 472 new spaces to create more opportunity for physical distancing for clients from shelters, 24-respites and 24-hour drop-ins. This is not to create additional capacity in our shelters, but have allowed SSHA to move people within existing programs, particularly our 24-hour respite sites and 24-hour drop-ins to create more opportunity for physical distancing in those sites.

- Seven community centres, six operated by City staff (300 spaces) and one operated by Sistering to provide their 24-women's drop-in (a multi-service agency for at-risk, socially isolated women and trans people in Toronto who are homeless or precariously housed) (35 spaces).
  - a. John Innes Community Recreation Centre, 150 Sherbourne St.
  - b. Warden Hilltop Community Centre, 25 Mendelssohn St.
  - c. Driftwood Community Recreation Centre, 4401 Jane St.

- d. Jimmie Simpson Recreation Centre, 872 Queen St. E.
  - e. Matty Eckler Community Recreation Centre, 953 Gerrard St. E (for women and trans clients only)
  - f. Masaryk Cowan Community Centre (relocation of Sistering's 24-hour drop-in services, operated by Sistering)
  - g. Trinity Bellwoods Community Centre, 155 Crawford St.
- Trinity Bellwoods Community Centre (the seventh community centre) was activated on April 8 to provide additional physical distancing at Seaton House (up to 60 spaces).
  - Two sites with a total of 95 spaces, operated by community partners, to off-set the early wind down of the Out of the Cold Program (OOTC). This year, Dixon Hall continues to operate an Out of the Cold location at 188 Carlton St. The location has 45 beds for the rest of the Out of the Cold season. An additional location is operating at 354 George St. with 50 beds. If required, the City will activate Metro Hall during an Extreme Cold Weather Alert.
  - 2 sites with expanded facilities on-site
  - 1 site moved beds to another program

Information on each new facility is available on [Homeless Help](#).

There are an additional 10 facilities identified and ready to be activated as they are needed, and we are also exploring opportunities to use additional available hotels as shelter spaces.

### **How is Inner City Health Associates (ICHA) supporting the response within the homelessness sector?**

ICHA is a key partner in our response, supporting program delivery and management at our isolation and recovery sites, as well as providing advice and guidance in assessing and referring clients to testing. ICHA and SSHA are also partnering on the COVID-Alert Risk Evaluation (CARE) initiative.

### **Is SSHA opening beds in hotels and university residences as part of its COVID-19 response?**

We have secured over 1200 hotel rooms at 12 locations across the city:

- 1020 rooms at 11 locations for physical distancing,
- 200 rooms at 1 location for isolation and recovery.

As of April 19, 7 sites have been activated to support physical distancing, with 665 clients moved into rooms. Ramp up of those programs to full occupancy at those locations is underway, as well as activation of four additional hotel locations pending staffing and transportation of clients.

The City has recognized that individuals who are vulnerable or at risk often need supports that hotel spaces or apartments cannot provide. Currently, the division is focused on moving individuals who are able to live independently. This will ensure clients with greater support needs are able to stay in an environment that they are familiar with and can meet their needs.

One additional location with 200 rooms is being used to provide supports to people recovering from COVID-19.

We are developing operational plans for the remaining rooms and locations, including:

- On-site staffing supports, either through City staff or community partner agencies

- Fire & Life Safety assessments and completion of any work required
- Ensuing contracts are in place for facility operations - food, cleaning, linens, etc.
- Developing a transportation plan and schedule to coordinate moves of clients to hotel locations

Because of the availability of existing city properties and hotels for use as shelter, we have not pursued college dorms as yet. Some students not able to find other accommodation under short notice may still be in the buildings. This remains an ongoing option for consideration moving forward.

### **How can people experiencing homelessness access SSHA COVID-19 hotel rooms?**

Hotel programs are being created to achieve physical distancing in our existing shelter system. Clients will be moved from existing programs where there is a need to reduce capacity to achieve physical distancing guidelines. We are working with ICHA and our partners to identify individuals who are at risk from COVID-19 related harms, and whose level of support needs is appropriate for a hotel program setting.

### **What is the COVID-Alert Risk Evaluation (CARE) Project?**

ICHA and SSHA are partnering on the COVID-Alert Risk Evaluation (CARE) initiative. The goal of the project is to prevent COVID-19 in the most vulnerable, improve physical distancing through emergency housing, and identify and protect people in our community who face the highest risk of serious harms.

CARE assesses client risk of COVID-related hospitalization and ICU admission using ICHA health records, Shelter Management Information System (SMIS) data, and in-person assessments to identify each client's risk of COVID-related harms.

These assessments inform how we can cohort our more vulnerable clients in safer spaces appropriate to their risk, for example who to prioritize to move into hotel spaces, and help ensure that health care providers can give higher risk clients the care that they need.

This process has started already, we have begun assessment of more than a thousand client electronic records and are following -up with the additional frontline and in person assessments to validate the information.

The project will help to identify clients with increased vulnerability and risk and develop appropriate strategies to mitigate those risks. Moving people to hotels is one of those strategies that may be identified. Some people may also be referred to other programs where they can get supports appropriate to their needs.

### **Are any positive cases of COVID-19 in the shelter system? What happens if/when there is?**

Please refer questions to Toronto Public Health regarding the number of confirmed cases in shelters. TPH is posting status of cases in Toronto shelters [here](#).

When someone using our shelter system tests positive, TPH notifies SSHA and the shelter or respite provider. TPH is responsible for leading the case and contact investigation and recommending next steps to manage health risks for the site, staff and clients who were in close



contact with the individual. SSHA will fully cooperate with TPH's investigation and support implementation of the steps identified by TPH.

### **Should homelessness service providers expect a surge in demand for services as a result of the COVID-19 related economic crisis?**

SSHA has taken steps to protect housing stability during these challenging economic times. Social housing providers have been instructed to discontinue eviction-related processes and issuance of Notices of Decision for Loss of Eligibility – RGI Assistance. SSHA has suspended the processing of existing and incoming Requests for Review – Loss of Eligibility for RGI Assistance.

Housing providers have been directed to be flexible and exercise discretion on rent payments particularly as they apply to households whose primary source of income is employment. Housing providers have been instructed to work with impacted tenants to defer rent payments and/or enter into payment agreements.

In addition, the provincial government has suspended evictions and instructed the Sheriff's Offices to halt any scheduled enforcement. Questions related to evictions should be directed to the [Province's Rental Housing Enforcement Unit](#) or call 416-585-7214 or 1-888-772-9277.

Important work is being undertaken by community partners to ensure that individuals who are released from corrections have a safe place to go to upon release from prison. The City's shelter system is experiencing significant pressures due to the pandemic and we are encouraging the provincial government to provide the necessary supports and resources needed for people being discharged from provincial institutions during the COVID-19 pandemic to access housing or other accommodation upon their release.

## **SECTION 2: CHANGES IN SERVICE AVAILABILITY FOR PEOPLE EXPERIENCING HOMELESSNESS**

### **What SSHA services will stay open/be closed during this time?**

#### *Shelters and Supports for Individuals Experiencing Homelessness*

129 Peter Street referral centre has been closed to walk-in service. All referrals to shelter should be directed to Central Intake at 416-338-4766. Clients can access Central Intake by calling 311 or 1-877-338-3398, toll-free from any pay phone. The nearest payphone to 129 Peter Street is located at Queen St. W and Bathurst St.

All City-operated shelters, respites and 24-hour women's drop-ins will remain open.

Response to non-urgent community and client complaints and community meetings and site visits will be suspended. Shelter and overnight service daily occupancy reporting will also be suspended.

Should Environment and Climate Change Canada forecast a temperature of -15° C or colder, or a wind chill of -20° C or colder, the Medical Officer of Health will issue an Extreme Cold Weather Alert and the City will carry out the Cold Weather Response Plan.

### *Street Outreach*

Outreach workers continue to proactively connect with people to provide support, referrals to shelter and housing, provide COVID-19 education, screening for COVID-19, referral to testing at Provincial Assessment Centre, and to assess safety. All clearing of homeless encampments has been put on hold until further notice as our focus is on the safety of those in encampments living outdoors.

### *Housing Support*

Most Housing Stability Services will continue, including payments to service providers and landlords, and processing of Housing Allowance applications. Some services may be subject to longer wait times.

Access to Housing (Housing Connections) offices at 176 Elm St. will be closed. Residents can continue to submit applications by fax, online, or by mail. Information on Rent-Geared-to-Income Housing is available at [toronto.ca/accesstohousing](http://toronto.ca/accesstohousing) or by contacting Housing Help Centres.

Please contact Housing Help Centres to confirm hours and in-person services available. Their contact information is available via the City's [Homeless Help](#) page.

Responding to general inquiries regarding files and requests for program information is suspended. Emails sent to [ask@housingconnections.com](mailto:ask@housingconnections.com) will be responded to once normal operations resume.

Financial services and contract administration activities will continue. This includes Social Housing Apartment Improvement Program (SHAIP) and Toronto Renovates payments.

### **Are day time drop-in services still available?**

Most drop-in programs remain open, although many have adjusted their services to accommodate physical distancing measures. For example, some are offering take away meals only, appointment-only service, and/or telephone and email outreach to vulnerable clients.

Please contact the drop-in provider directly to determine operating hours and the availability of in person services. A listing of SSHA-funded drop-ins with contact information is available on [Homeless Help](#). The Toronto Drop-In Network is maintaining a [directory of services available at this time](#).

SSHA is currently conducting a survey of day time drop-in services to assess service levels and needs in order to inform a coordinated response and daytime drop-ins have been provided with additional funding to support their COVID-19 response.

### **Are housing workers deemed essential at this time?**

The Province's Essential Workplaces list identifies "*Not-for profit organizations that support the provision of food, shelter, safety or protection, and/or social services and other necessities of life to economically disadvantaged and other vulnerable individuals*" as essential. This means that all positions in shelters, respite services and drop-ins are considered essential, as well as housing support workers.

**Are clients allowed to stay in shelters 24/7 or are they required to leave during the day?**

The majority of our shelters operate 24/7 and people are allowed to stay inside. We have a few programs that are still overnight only and funding has been allocated to those programs to operate all day as part of the COVID-19 response, to ensure people staying in those programs have a place to be indoors during the day given the closure of other community spaces.

**Where can clients access toilets and hand washing, with many indoor locations being closed?**

The City has opened seven toilet and hand washing stations in the downtown core and is exploring opportunities to open additional locations. Supplies at these stations will be replenished regularly:

- Alexandra Park
- Regent Park
- Dundas Square
- Wellesley Community Centre
- Moss Park
- Sunnyside Park
- Little Norway Park

**SECTION 3: CLIENT ADMISSION AND SCREENING**

**How can service providers refer clients seeking shelter at this time?**

During the COVID-19 pandemic, please assist clients seeking shelter to call the Central Intake Line at 416-338-4766, 1-877-338-3398 toll-free or 311 to be referred to available shelter and respite spaces. Temporary shelter and respite sites may not have space to accommodate walk-in referrals. Calling Central Intake in advance is recommended to minimize unnecessary travel in keeping with physical distancing guidelines provided by Toronto Public Health.

**Should/can shelters go into lockdown and shelter in place – should shelters stop accepting new referrals?**

Shelters should continue to maintain their existing capacity and accept new admissions into your programs, while implementing the physical distancing approaches identified by Toronto Public Health. Given the ongoing pressures on the shelter system and needs of this very vulnerable population, we need to continue to provide safe indoor places for people to seek shelter. Shelter to shelter transfers should be suspended where possible to limit movement between programs.

**Vulnerable population are at a high risk of domestic violence at this time. What is the current process for Special Priority Program (SPP) applications?**

Access to Housing is continuing to process applications, with priority on SPP applications. There have been some challenges though with housing calls being prioritized through the Human Services Integration (HSI) call centre. If clients cannot get through on the 338-8888 line, they should call the main SSHA Housing Stability Services (HSS) line at 416-492-4126 and we will re-direct.

### **How should sites be screening clients for COVID-19?**

One of our key priorities has been to develop processes to screen clients and refer them for testing to one of the COVID-19 Assessment Centres. In partnership with Toronto Public Health, we have developed a [screening tool](#) and [instructions for accessing transportation](#) from shelters, 24-hour respites, 24-hour drop-ins, day time drop-ins and Streets to Homes to testing centres for clients who meet the screening criteria. Clients should be screened on intake to the program, as well as active monitoring of existing clients for development of symptoms.

More information is available on the [TPH website about locations of testing centres](#).

### **What precautions should sites take for refugees who have recently arrived or clients who have recent travel history?**

The federal government has restricted entry to Canada. Most foreign nationals are not currently being admitted across the border. The client [screening tool](#) provides direction for shelter sites regarding screening of clients who are recent arrivals.

### **Who can access non-emergency transportation for homeless clients who meet the screening criteria?**

City-operated or funded shelters, 24-hour respite sites, 24-hour women's drop-ins, day time drop-ins and any other service that works with clients who are experiencing homelessness can [access non-emergency transportation](#) for homeless clients needing transportation to an assessment centre and/or to the isolation site following assessment.

Transportation is available between 8am and midnight every day.

### **Will the non-emergency transportation that will bring clients from shelter sites to the Assessment Centres be marked with signage noting it is transporting individuals potentially exposed to COVID-19? Is there a way to minimize stigmatization of the individual and maintain their privacy and dignity?**

The third party contracted transportation company has been instructed not to have such signage for the reasons outlined. The drivers will arrive wearing full personal protective equipment to transport clients with symptoms of COVID-19 to the assessment centres or hospital for testing.

Please understand this service is being provided in place of a regular ambulance that would arrive for this same purpose with staff in full PPE. Unfortunately, our EMS service is not currently able to provide this as they are overstretched.

It is helpful to educate neighbours and others in the community about the important work we are doing to quickly isolate very vulnerable members of our community who show symptoms and have them tested. After testing a special isolation shelter has been established for people to stay until their test results are returned.

### **Is the mental health status of shelter clients taken into consideration when arranging the non-emergency transportation?**

All referrals of clients for non-emergency transportation will be made by shelter operators. The shelter operator will be able to leverage existing relationship with the client to ensure they are given all required support during transportation.

**Are you going to provide sites with infrared thermometers?**

Service providers are encouraged to purchase supplies required for your response, using the additional funding has been provided for IPAC and other supplies.

**If a client needs to go off-site to attend an appointment, will the TTC still accept tokens?**

The TTC is no longer accepting cash, TTC tickets or TTC tokens on buses at this time, but individuals will not be denied service. Instead, customers are asked to pay at their first opportunity (i.e. when they transfer onto a streetcar or at a station).

Remind clients they must board and exit buses from the rear doors only, and to maintain physical distance from other customers and the operator while on transit.

**SECTION 4: CLIENT TESTING**

**Where will clients who meet COVID-19 screening criteria go for isolation after testing?**

In March, we created a dedicated program with isolation spaces and appropriate health supports for people identified through screening and assessment processes that were waiting for test results, which was taking a number of days at the time.

The province has since significantly decreased waiting times for COVID-19 test results.

For this reason, people awaiting test results will no longer be admitted to the isolation program and assessment centres are being asked to keep people awaiting test results clients until their test results are back. Clients who test positive will be referred to SSHA's isolation program for recovery. Clients who test negative and do not require further isolation can return to the regular shelter system.

**What should sites do if a client refuses to be tested for COVID-19?**

Staff should use their relationship with clients to help them understand the importance of testing, and should offer additional supports to clients to encourage testing (e.g., accompanying them to the testing site). If a client continues to refuse testing, staff should alert the DOC at [sshadoc@toronto.ca](mailto:sshadoc@toronto.ca). The DOC staff will pass the information on to the EOC at the City, who will advise on next steps.

**If a client is sent for COVID-19 testing and the test is negative, will they be given documentation to show the shelter their test was negative?**

Clients who are referred for COVID-19 testing will be assessed by public health staff to determine whether testing is necessary. Upon confirmation of a negative test result, individuals may return to the shelter/respice/drop-in program they were previously admitted to. We are currently developing tracking processes on results of testing and will update as new information is available.

### **Is on site testing being considered for shelters or other homelessness services settings?**

In partnership with Toronto Public Health, we are exploring opportunities for further mobile testing at shelter locations. A prioritized approach to testing on-site is underway, focussed first at locations that have confirmed outbreaks, and then at other sites identified as higher risk. Providers may be contacted by hospital or community health providers regarding testing at their shelter. In order to be effective, this process should be coordinated by Toronto Public Health. Please contact SSHA or TPH if this is something you are in discussions with health partners about.

## **SECTION 5: CLIENT ISOLATION AND QUARANTINE**

### **How can clients self-isolate in a shelter/respice/24-hour drop-in environment?**

We have an isolation program for people who require isolation for 14 days, for people identified through TPH's contact tracing process when there is confirmed positive COVID-19 cases in shelters.

Shelter and respice providers should consider possible options for creating isolation spaces within your facility to the extent possible. For example, designate any separate rooms with closed doors, with separate bathrooms if possible or designate an accessible or all gender washroom for this purpose. If only shared rooms are available, consider designating a room with the fewest possible number of other residents.

Review the information available from Public Health Ontario about [how to self-isolate](#) and [guidance for caregivers and household members of people who are self-isolating](#), and from the [Ontario Ministry of Health COVID-19 Guidance: Homeless Shelters](#).

### **Where do people go if they test positive for COVID-19?**

We have created a dedicated program with appropriate health supports for people who test positive for COVID-19.

Clients will be transported to this location from the Toronto Region COVID-19 Assessment Centres and will remain there for 14 days or until they have recovered. No direct referrals to this program will be accepted outside of this process. To protect the confidentiality of clients who are testing for COVID-19, and because the sites are not available to clients outside of this process, the exact location of the site will remain confidential.

### **What harm reduction supports are available to clients at the recovery site?**

The site is operating from a harm reduction lens and has a wide range of support available for people who use substances. For example, methadone and managed alcohol programming is available, and peer supports are on site. The site is staffed 24/7 with nurses.

Clients and staff can refer to Toronto Public Health's [COVID-19 Harm Reduction Tips](#) and [COVID-19 Overdose Response Tips](#)

### **Should shelters hold beds for clients who are sent for testing?**

Yes. If the results are negative, they will return to their shelter bed at the referring program. If the results are positive, the client will be transported to the recovery site.

### **Will the City offer similar supports and services for daytime drop-in programs?**

The City recognizes that daytime drop-ins programs support very similar clients as our 24/7 programs. We are working to implement similar screening and physical distancing protocols at City funded drop-in programs. The programs will also be able to access the same isolation and COVID-19 recovery sites as 24/7 shelters for clients who are experiencing homelessness.

### **Will the City offer similar client isolation and recovery programs for people housed in congregate settings like rooming houses and other shared accommodations?**

The City of Toronto understands the risks and challenges of self-isolation in a congregate setting. SSHA is working with the province to investigate what is available for those living in shared accommodations. This includes investigating current capacity and expected demand for isolation services in these sectors. We are also investigating referral pathways to ensure people are able to self-isolate.

### **What information or advice do you have for people experiencing homelessness who are pregnant, breastfeeding or providing infant care and who test positive for COVID?**

Please refer to TPH guidance about [people who are pregnant, breastfeeding or providing infant care](#). Homelessness service providers would not be expected to make these decisions. Medical advice would be provided in specific situations through the investigation and referral to the recovery program by TPH and ICHA.

## **SECTION 6: FRONTLINE STAFF TESTING AND ISOLATION**

### **How and when should frontline staff be tested for COVID-19?**

Staff should follow [Toronto Public Health's COVID-19 testing guidelines](#). Staff at homelessness sector organizations are considered essential and should be tested when presenting at an assessment centre.

All staff or visitors entering and/or working in homelessness services settings should be actively screened at the beginning of every shift, prior to entering the workspace. Staff and visitor screening will help to minimize the risk of exposure to COVID-19 in the workplace and support staff and client health and safety. A COVID-19 Staff and Visitor Screening Tool for Homelessness Services Settings is posted on the [City's website](#).

### **How should sites manage staffing issues while staff are self-isolating or feeling unwell?**

Sites should develop contingency plans as soon as possible. Planning should include identifying mandated and critical services, ranking all services in order of priority, and planning to limit non-essential or lower priority services as needed. Staff serving non-essential functions should be trained to backfill essential positions wherever possible.

## SECTION 7: REDUCING RISK OF INFECTION

### Where can sites get access to personal protective equipment (PPE) for staff, and additional cleaning supplies?

We recognize that access to personal protective equipment (PPE) is critical to being able to provide services safely and that this is an area of concern for many providers.

There is a limited supply of PPE and cleaning supplies available. The City is currently assessing what PPE and cleaning supplies are on hand and how to ensure first responders and health care providers have the equipment they need. SSHA is working to prioritize the homeless sector to receive PPE and cleaning supplies and is developing a distribution plan as supplies become available.

The City has provided all shelters, 24-hour respites, and drop-ins community agencies with \$1.2M to support increased infection control and prevention activities, and purchase specialized cleaning supplies, PPE and increase social distancing (e.g. using curtains). To recognize the importance and value of the work of front-line shelter staff, we have provided funding to increase their wages.

Please note that masks are not currently recommended for frontline staff who are feeling well and interacting with clients who are feeling well. Physical distancing protocols recommended by TPH should be followed in these cases. Masks should be prioritized for use by people who are feeling unwell. In general, N95 masks are not recommended as appropriate protective equipment in response to COVID-19.

Physical distancing and proper hand hygiene are the first lines of response in preventing the transmission of COVID-19. Staff should regularly and thoroughly clean their hands with an alcohol-based hand rub or wash them with soap and water. These measures can drastically mitigate potential contaminants that may cause illness. Staff should continue to follow personal hygiene measures outlined in the City's [Tip-Sheet on COVID-19 Prevention](#).

### How can shelter operators encourage physical distancing in shelters?

We continue to work closely with our partners at Toronto Public Health and Inner City Health Associates (ICHA) in developing physical distancing guidelines for homeless services. As these are being developed, we encourage you to consider the feasibility of implementing any of the following best practices at your sites:

- Increase spacing between beds to 6ft/2m where possible
- Arrange beds so that individuals lay head-to-toe (or toe-to-toe)
- Use neutral barriers (foot lockers, curtains) to create barriers between beds
- Stagger mealtimes to reduce crowding in shared eating facilities
- Stagger the schedule for use of common/shared kitchens
- Create a staggered bathing schedule to reduce the amount of people using the facilities at the same time
- Create a schedule for using common spaces
- All staff should only be working at one site (shelter or residential setting)



Sleeping areas should provide a minimum of 7 m<sup>2</sup> (75 ft<sup>2</sup>) of personal space per client in sleeping areas, to ensure a lateral separation of 2m (6.5 ft.) can be maintained between mats/cots where possible, in alignment with physical distancing guidelines established by Toronto Public Health. SSHA is aware that not all sites are able to meet this guideline and is currently assessing how to mitigate risks at these locations.

**Of the current shelter system, how many meet the physical distancing guidelines set by TPH?**

While the current lateral separation in Toronto Shelter Standards does not meet TPH's physical distancing guidance of 6 ft, many shelters do already exceed the minimum requirements of 2.5 feet between beds. We are currently undertaking assessment of what proportion of our existing shelter sites are able to meet the 6 ft physical distancing guidelines and how to mitigate locations that aren't able to meet that. We have encouraged shelters to implement additional spacing between beds where possible.

We are currently working to identify additional program locations, including use of hotel programs, to provide additional physical distancing in our existing shelter programs.

**Are the new 24-hour temporary COVID-19 response facilities are set up to meet the physical distancing guidelines?**

The new temporary programs we have set up are required to meet the Toronto Public Health guideline for physical distancing.

**What can service operators do to reduce risk of infection at their sites?**

To reduce the risk of infection and ensure ongoing service capacity, we ask that all providers implement the following measures:

- Implement physical distancing strategies at your sites where feasible
- Suspend shelter to shelter transfer practices
- Temporarily limit service restrictions, except in cases where a shelter provider determines that the service-restricted client poses an immediate threat or danger to another individual's health or safety, or the security of the shelter
- Divert resources as needed to ensure continued delivery of core support services
- Support clients with family reunification where possible to reduce their risk of exposure
- Eliminate non-essential visitors and service providers on-site, and screen all visitors on entry to the premises

In keeping with these recommendations, SSHA will be suspending non-essential initiatives at this time. Monthly 24-Respite Standards site visits and upcoming schedule Shelter Standards Assessment site visits will be postponed until further notice. The Street Needs Assessment, planned for later in April, will also be postponed until further notice.

We encourage each service provider to review your own operations and suspend non-essential services. These decisions should be made by your organization. Please email [sshadoc@toronto.ca](mailto:sshadoc@toronto.ca) to report any changes to your services and copy your lead SSHA staff.

For further training on infection prevention and control, Toronto Hostels Training Centre, in collaboration with Toronto Public Health, has developed a free six hour e-learning module "Communicable Diseases Prevention and Control" with funding from SSHA. The course covers the basics of communicable diseases and recommendations for protecting and promoting health for yourself and your clients. Topics include responding to Public Health alerts in SMIS, identifying the links in the chain of transmission and infection prevention and control, performing adequate hand hygiene and caring for your hands; and selecting, putting on and removing personal protective equipment appropriately. For more information please visit the Toronto Hostels Training Centre website: <https://thtcentre.com/>

### **Is SSHA expanding supports for women and trans individuals who are at high risk?**

SSHA is working to expand supports for a broad range of clients. Two 24-hour temporary COVID-19 response sites have opened for women and trans clients. These respites are located at Matty Eckler Community Centre (operated by the City of Toronto) and Masaryk-Cowan Community Recreation Centre (operated by Sistering).

### **Should sites increase Infection Prevention and Control practices at this time?**

A reminder to continue to increase routine practices of IPAC within your facility as one of the most effective ways to reduce the spread of infections. Refer to the [IPAC guide developed by Toronto Public Health](#) specifically for shelter and 24-hour respite site services.

### **What should shelters do if community members complain that they observe people outside a shelter, 24-hour respite or 24-hour drop-in who are not demonstrating physical distancing?**

SSHA is committed to working closely with shelter, 24-hour respites and 24-hour drop-in providers to implement measures to increase physical distancing. Homelessness service providers are encouraged to take measures to implement and encourage physical distancing using approaches identified by [Toronto Public Health](#).

It is challenging to enforce physical distancing in a public space and not all individual involved may be service users. Service providers can help ensure physical distancing in client queues outside sites by chalking out 2 metre distances on the sidewalk and asking clients to adhere to markings.

More generally, service providers should attempt to engage and educate clients on the importance of preventative and containment measures in relation to COVID-19.

- Use rapport to engage clients.
- Inquire if there are supports that can be put in place to assist clients with physical distancing and/or screening if required.

Please do not restrict service to shelter.

If you have additional concerns or need to escalate a situation, your site supervisor can contact SSHA DOC at [sshadoc@toronto.ca](mailto:sshadoc@toronto.ca)

## **SECTION 8: CONTACT TRACING**

### **What happens next if a client is sent for COVID-19 testing and the test is positive?**

If a client receives a positive result, Toronto Public Health will implement their contact tracing and notification protocol.

### **Who is notified when a client tests positive for COVID-19?**

A positive COVID-19 test result is transferred from the physician at the testing site to a physician at our COVID-19 recovery site who will manage their case. Toronto Public Health will contact the shelter or respite to conduct contact tracing.

### **Who does TPH investigate when they identify a positive case?**

In order to identify who may have been exposed to the COVID-19 positive client or staff, TPH investigates at all close contacts from 2 days before the first day of onset of symptoms. A close contact is defined as anyone who was within 2 meters of the individual for 15 minutes or more without PPE.

TPH will contact the shelter or respite operator to confirm the client was at the site during the period where they were contagious. Shelters the client stayed at will be asked to monitor all staff and clients and report any symptomatic individuals.

### **How does TPH determine risk at a shelter?**

TPH does a risk assessment to determine how many people may have been exposed to the contagious individual. TPH may ask about layout of the building, the number of individuals in a room, washroom layout, and total clients at the site. Based on this information, TPH will also provide additional guidance on infection control for that particular setting. All individuals who may have been exposed will be asked to self-isolate or be tested.

### **What are casual exposures and why are they not tested?**

Staff who may have been casually exposed (less than 15 min) will be asked to self-isolate or work-home isolate or work from home for 14 days. These individuals will be asked to monitor their symptoms.

### **How long should someone who was exposed to a positive case self-isolate?**

TPH recommends individuals are isolated for 14 days after the last date of contact with the individual who was positive. All clients who are screened and show symptoms for COVID-19 should be transferred to the COVID-19 Assessment Centre immediately in order to minimize exposure.

## **SECTION 9: FUNDING SUPPORTS**

### **How can my agency apply for funding support for homelessness service providers recently announced by the provincial and federal governments?**

On April 1, the City was advised by the Province that its allocation under the Social Services Relief Fund was \$39,240,200 for 2020-21, which was to be used to allow the City to help a diverse range of vulnerable people in need, including people living in community housing, supportive housing, people with low incomes, social assistance recipients, or others who require social service support, as well as those that are experiencing homelessness.

Since mid-March, the City and its community-based shelter providers, have been incurring (and will continue to incur) significant costs to support the needs of the City's homeless population during this pandemic. We are still calculating the increased cost to the City but it far exceeds the \$39.2 million received to cover the costs of responding during this pandemic to support our clients and partner agencies. The City is grateful for the support from the province to help off-set the additional costs to the City and its partner agencies, and continues to make funding requests to other levels of government to ensure we have sufficient resources given high demands for homelessness services in Toronto and the rate of spending to address immediate demand during the COVID-19 response, as well as recovery and stabilization including opportunities for long-term housing stabilization.

The response to COVID-19 is evolving rapidly and City staff remain connected with our federal and provincial counterparts to inform and leverage new flexibility within existing funding and any new funding announced to do as much as possible to stabilize housing for at risk and vulnerable Toronto residents.

### **What about increased income support payments from province?**

The City will coordinate requests to the Province on funding to support vulnerable individuals experiencing or at risk of homelessness.

Recent announcements have confirmed funding for additional income supports.

The City has established a Community Services working group to coordinate response across community based social service programs. Food security is a key priority for the group, who will be working with community partners to identify solutions.

### **Can clients access the Canada Emergency Response Benefit?**

As a result of loss of income because of the COVID-19 pandemic, some of your clients may be eligible to receive the Canada Emergency Response Benefit (CERB).

CERB is a taxable benefit of \$2,000 for a 4-week period, for up to 16 weeks. The Ministry of Municipal Affairs and Housing has confirmed that the CERB must be included as income when calculating RGI rent.

Please see the attached "Applying for the Canada Emergency Response Benefit – April 9, 2020". Please consider printing and posting in a place where clients have access (elevators, lobbies, entrance doors, etc.).

## **SECTION 10: MEDIA QUERIES**

**My organization has received media inquiries related to the pandemic. Can you provide guidance on how to respond?**

We have heard that many of you are receiving increased media inquiries related to the pandemic. Some information for how to handle these media inquiries:

- Feel free to answer media questions about your own operations, programs and supports for clients at their own site(s).
- Make it clear that you are speaking on behalf of your own agency and not the City of Toronto.
- Send any media inquiries related to health status or cases of clients or staff to Toronto Public Health's media inquiry email [TPHmedia@toronto.ca](mailto:TPHmedia@toronto.ca) as they have info on confirmed cases and know what they can/can't disclose without giving away any private health information.
- Any media inquiries about what the City of Toronto is doing, please refer to [media@toronto.ca](mailto:media@toronto.ca) and the City will respond to all of those media inquiries

## **SECTION 11: SITE SPECIFIC QUERIES**

**I have a specific query related to my site/program. Who should I contact?**

If you have questions, we encourage you to contact your SSHA Lead Staff or send us your questions to the centralized email address [sshadoc@toronto.ca](mailto:sshadoc@toronto.ca) and we will provide responses in our future email communications.