

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](#). Information is posted in two places: 1) [Updates on the City's response and service](#) (look under 'Housing and Shelter'), and 2) [Resources for service providers](#) (look under 'Homelessness Services'). Service providers are also encouraged 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, including Toronto Public Health's [website](#)

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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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.

More information about our response is available in [this backgrounder](#).

SSHA has developed an online [infographic](#) that highlights key data points and actions undertaken to implement our three-tier COVID-19 response. The infographic will be updated regularly to keep you informed and up to date on the latest information on our response.

How are clients being prioritized for the Rapid Housing Initiative?

Access to Rent-Geared-to-Income (RGI) housing continues to be managed through the Centralized Waiting List – there have been no changes to the process related to COVID-19.

Access to the TCHC Rapid Housing Initiative is being managed through Coordinated Access. Clients will be referred through our Coordinated Access System and we will use by-name list to identify clients for housing who are also on the Centralized Waiting List for social housing. Clients' support needs are also assessed, as we want to ensure people have a high likelihood of having a successful tenancy. Within that group, we are prioritizing those that are at an increased risk related to COVID-19.

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

Eleven new facilities have been opened with approximately 492 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 90 spaces are operated by Dixon Hall, at 188 Carlton St and 354 George St.
 - 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 are temporary shelter sites being staffed?

As of April 14, more than 300 City staff have been redeployed to work in temporary shelter sites from other City Divisions. In addition, approximately 90 SSHA staff have been redeployed to support the temporary sites, some experienced staff from our directly operated shelters to provide expertise to the temporary sites, and some from other parts of SSHA where they work in office settings. We estimate that up to 700 staff may be redeployed through implementation of our overall response plan.

How is Inner City Health Associates (ICHA) supporting the response?

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 using hotels and university residences as part of its COVID-19 response?

We have secured over 1200 hotel rooms at 11 locations across the city. Ramp up of those programs to full occupancy at those locations is underway.

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.

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?

Please refer questions to Toronto Public Health regarding the number of confirmed cases in shelter clients. TPH is posting status of cases in Toronto shelters here.

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. A point-in-time snapshot on the number of clients in our shelter system is posted on the City's [website](#). This is an interim measure while we work to establish full and accurate reporting on current program capacities. This snapshot will be updated once per week.

Response to non-urgent community and client complaints and community meetings and site visits will be suspended.

Street Outreach

The City's outreach teams continue to engage people 24/7 who are sleeping outdoors.

A recent increase in the number and size of encampments has led to increased concerns about the safety and well-being of people living outdoors, as well as the impact on the community. The City of Toronto and community partners are taking immediate steps to support those sleeping outdoors by mobilizing a COVID-19 response strategy for outreach and encampments that includes three key components: Access to safe indoor space, shelter and housing; targeted strategies for outreach, engagement, education and prevention; and harm reduction and encampment health and safety.

The City implemented a moratorium on clearing of encampments at the start of the pandemic, and suspended the usual approach based on the Interdepartmental Protocol for Encampments.

Beginning April 29, 2020, clients staying in outdoor locations identified for the Interim Housing Program will be offered access to a variety of indoor spaces and will be notified of clearing of encampment sites they are on. Outreach teams will continue to engage with clients at these sites after these encampment clearing notices have been posted.

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 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 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 facilities?

The City has opened seven portable toilet and hand washing stations in the downtown core that are available 24/7. Supplies at these stations will be replenished regularly:

- Alexandra Park, 275 Bathurst St
- Jimmie Simpson Park, 872 Queen St E
- Regent Park, 600 Dundas St E
- Wellesley Community Centre, 495 Sherbourne St - Outside the Community Centre
- Moss Park, 150 Sherbourne St
- Sunnyside Park, 755 Lake Shore Blvd W
- Little Norway Park, 689 Queen's Quay W
- Dundas Square, 1 Dundas St E

As of April 29, six additional indoor Sanitation and Washroom Service locations will be open to people experiencing homelessness. Each location has showers, washrooms, and drinking water available. More information on the locations and schedule will be available on the City's website.

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 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.

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).

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 (HIS) 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.

What other resources have been added to the system to support women experiencing domestic violence?

Violence against women shelters are funded by the Province of Ontario and not part of the City's emergency shelter system. The City has a referral partnership with the violence against women sector but no funding relationship or system oversight function.

The City of Toronto is working with other levels of government to find housing for survivors of domestic violence. In 2019, the Government of Canada announced the Canada-Ontario Housing Benefit (COHB) program, part of a bi-lateral agreement under the National Housing Strategy (NHS). The City received an allocation of \$9 million over the next two years. Provincial guidelines give eligibility priority to a number of target groups who are on, or eligible to be on, the social housing subsidized waitlist. SSHA estimates the City will provide a portable monthly housing benefit to approximately 1,300 low-income households. Staff are targeting a rollout of COHB by next month. Eligible households will be selected from the existing centralized waitlist for subsidized housing with priority provided to survivors of domestic violence and other vulnerable groups.

Earlier this month, the federal government also [announced](#) support to those experiencing homelessness and women fleeing gender-based violence during COVID-19 pandemic.

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 3: 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](#).

The City of Toronto has compiled and posted [Resources for non-health care community settings: Understanding when personal protective equipment \(PPE\) is needed](#), which provides links to guidance around PPE.

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 m² (75 ft²) 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.

Three new posters have been developed for shelter operators to promote physical distancing in common spaces:

- [Sleeping areas](#)
- [Common areas](#)
- [Dining areas](#)

Please share these resources with staff and post them in relevant areas.

Of the current shelter system, how many meet the physical distancing guidelines?

While the current lateral separation in Toronto Shelter Standards does not meet TPH's physical distancing guidance of 6 feet, many shelters do already exceed the minimum requirements of 2.5 feet between beds.

SSHA has undertaken an initial assessment of what proportion of our existing shelter sites are able to meet the 6 feet physical distancing guidelines and how to mitigate locations that aren't able to meet that. We have encouraged shelters, respites and 24-hour drop-ins to implement additional spacing between beds/cots where possible to achieve the 6ft/2m guideline, as well as to take additional physical distancing measures in your program common areas.

We have an ongoing process underway to validate and confirm that these guidelines are being achieved, through a site visit that will assess whether physical distancing standards have been met.

We also have a Quality Assurance assessment process underway to assess and audit compliance with standards and good practices at the new sites we are establishing. Each new site is assessed before it opens to ensure appropriate measures are in place to reduce risk of contagion or spread of COVID-19. Ongoing assessment will also be conducted to ensure ongoing maintenance of these standards once new sites open. Methodology for site assessments will include alternative methods of communication to minimize on site visits.

Are the new 24-hour temporary COVID-19 response facilities 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 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/>

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

SECTION 4: CLIENT SCREENING AND TESTING

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.

Please send the completed COVID-19 screening tool and ICHA medical directive with the client to the assessment centres. Omitting this information may lead to clients being returned to the original shelter site rather than being redirected to the isolation or recovery sites.

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.

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. 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. 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: WHAT HAPPENS WHEN A CLIENT TESTS POSITIVE

What can shelter operators expect when a client tests positive for COVID-19?

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.

An [information sheet](#) that outlines what homelessness service providers can expect when a client tests positive for COVID-19 is available online.

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

The client is provided their test result at the hospital or assessment centre. A physician will arrange for referral of the client directly to the recovery program. Toronto Public Health will contact the shelter or respite to conduct contact tracing.

How 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 will work with the shelter provider to identify 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 enhanced screening and monitoring of all staff and clients and refer any symptomatic individuals for testing.

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.

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

TPH recommends that close contacts 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 for testing to the COVID-19 Assessment Centre immediately in order to minimize exposure.

How can clients self-isolate in a shelter/respite/24-hour drop-in environment?

We have an isolation program for people who are close contacts and 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 respite 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. Please refer to Bed Deactivation Policy for Clients Referred to Isolation and Recovery Sites Policy and Procedure on the [City's website](#).

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. Those locations should implement similar screening and physical distancing protocols. These 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 that there are also challenges that have been identified for self-isolation in a congregate setting. There are at a minimum 4700 clients currently living in various congregate supportive housing models across the City. Given supportive housing falls under provincial jurisdiction the City is seeking provincial support to address the needs of this vulnerable population. The City in partnership with the supportive housing sector in Toronto is requesting funding required for isolation and recovery programs for this purpose.

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-19?

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: FUNDING SUPPORTS

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

The Province of Ontario recently announced a \$200 million fund to help social service providers across the province cover additional costs related to Covid-19. The City of Toronto, Shelter Support and Housing Administration has received \$39.2 million of the provincial total. The federal government has also allocated \$22.2 mil in Reaching Home funding to Toronto for the COVID-19 response.

The City of Toronto is currently incurring significant costs to deliver our Covid-19 response for vulnerable homeless individuals, including activating 11 new facilities and 1200 hotel rooms. These response costs far exceed the amounts confirmed by both the federal and provincial governments to date. The City is working with provincial and federal governments to request additional funding required to address the scale of the response in Toronto and to meet needs of organizations in Toronto to respond.

There is currently no direct application process for community-based social service agencies to apply for funding. Non-profit organizations should continue to track costs related to the response. As additional information is available about funding, this will be communicated to all of our community partners.

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.).

How and when will frontline workers in the homelessness services sector receive the wage increase announced by the Province on April 25?

On April 25, the Province announced a \$4 an hour wage increase for frontline pandemic workers. This includes those in shelter and supportive housing. SSHA has not received any formal communication from the Province about how this funding for wage increases will be implemented or what the allocation for Toronto will be. As soon as we receive additional information we will share an update with our community partners.

SECTION 8: 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 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 and the City will respond to all of those media inquiries

SECTION 9: 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 and we will provide responses in our future email communications.