

Guidance for Providers of Services to Albertans Experiencing (or at-risk of) Homelessness:

2019 Novel Coronavirus (COVID-19) Prevention and Preparation

March 16, 2020

This guidance is based on what is currently known about COVID-19 and includes public health recommendations made for Albertans as of March 16, 2020. The situation is changing rapidly. Please check www.alberta.ca/COVID19 for the most recent recommendations.

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Introduction

This document is intended to help providers of services for Albertans experiencing (or at-risk of) homelessness. It was developed initially for emergency homeless shelters but may also be applicable to other types of shelters, housing sites, transitional housing facilities etc. as well as agencies providing services to marginalized and vulnerable populations. The document outlines general recommendations to prevent COVID-19 in these settings. If a case is identified in, or associated with your facility, further instructions will be provided by AHS Public Health.

It is acknowledged that limited staffing, physical lay-out, shared accommodation, communal areas and programming may pose challenges for implementing the recommendations outlined in this document. Facilities are encouraged to customize and prioritize as necessary.

Service providers will likely have many unanswered questions. Please know that logistics such as where to get masks and other personal protective equipment are being worked out and processes for supporting vulnerable populations needing to self-isolate or diagnosed with COVID-19 are being developed. More details are forthcoming.

Agencies providing services and shelters for vulnerable populations such as Albertans experiencing or at-risk of homelessness are currently exempt from the recent public health interventions announced over the last week e.g., the March 12, 2020 Chief Medical Officer of Health recommendation that mass gatherings over 250 people be cancelled. However, service providers can decrease risk of transmission (spread) of COVID-19 by ensuring no more than 250 people are in the same room at any given time and eliminating large congregations of vulnerable populations.

This guidance is based on what is currently known about COVID-19 and includes public health recommendations made for Albertans as of March 16, 2020. The situation is changing rapidly. To stay current on the most recent public health recommendations related to COVID-19 in Alberta, please visit:

- Alberta Health Services: www.ahs.ca/covid
- Alberta Health: www.alberta.ca/COVID19

Organizations dedicated to housing and homelessness issues may also be good sources of information. Recent examples from Canada include:

- <https://caeh.ca/coronavirus-resources/>
- https://www.orgcode.com/pandemic_planning_and_services_that_support_people_who_are_homeless
- <https://www.homelesshub.ca/blog/pandemic-planning-how-can-my-agency-prepare-potential-spread-coronavirus>

General Information about COVID-19

Coronaviruses are a large family of viruses. Some coronaviruses cause respiratory illness in people, ranging from common colds to severe pneumonias. Others cause illness in animals only. Rarely, animal coronaviruses can infect people, and more rarely, these can spread from person to person through close contact.

COVID-19 is a novel coronavirus that had not been detected previously in humans. It is the cause of the respiratory outbreak in China that has now been detected in many other countries around the world, including Canada.

Symptoms

Symptoms are similar to influenza and other respiratory illnesses. Common symptoms include:

- fever
- cough
- extreme tiredness

Most people recover from this disease without needing special treatment. However, it can cause serious illness in some, and there is a risk of death in severe cases. Those who are older and those with other medical problems (such as high blood pressure, heart disease, lung disease, cancer or diabetes) are more likely to develop serious illness, which can include difficulty breathing and pneumonia.

There is currently no vaccine or specific medication for COVID-19.

Transmission

COVID-19 is spread mainly by coughing, sneezing or direct contact with a person who has the infection or with surfaces they have recently touched by someone with the virus. COVID-19 can also be spread when droplets (like from a cough or a sneeze) land on a surface and then someone touches that surface. If that person puts their hands near their mouth, nose or eyes, the person may get the infected with the virus.

Risks

The risk of exposure in Alberta is still assessed as low at this time, however we anticipate this risk may increase in the coming weeks. The higher risk does currently apply to people who develop fever and/or cough or shortness of breath AND in the 14 days before illness onset travelled to anywhere outside of Canada or had close contact with a confirmed or probable case of COVID-19 or laboratory exposure known to contain COVID-19 virus.

The health system is committed to work with shelter service providers to ensure the safety of clients, staff and volunteers. We are carefully monitoring the situation and have taken the necessary steps to identify cases and prevent the ongoing spread of the virus.

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Prevention

Agencies and service providers are likely reviewing, updating and implementing their emergency operating plans and deliberating critical operational decisions. However, it is also important to remember that effective strategies to reduce the spread of COVID-19 by clients, staff and volunteers build on everyday infectious disease prevention practices and strategies:

- wash hands often
- appropriately cover coughs and sneezes
- avoid touching face with unwashed hands

General Prevention

There are many things you can do to prevent spread of respiratory illness in your facility, particularly by facilitating hand hygiene, respiratory etiquette and social distancing.

- Ensure there are enough supplies on hand for proper hand hygiene, including soap, warm running water and paper towels or hot air dryers.
- If possible, consider adding hand sanitizer stations to supplement handwashing. Use alcohol-based hand rub or ABHR with greater than 60% alcohol. It is recognized that staff may have concerns with providing free access to ABHR; to address this concern, staff may choose to apply the ABHR directly to client hands.
- Provide tissues and garbage bins for use by staff and clients. No-touch garbage cans are preferred for disposal of items.
- Remind clients, staff and volunteers of the importance of hand hygiene and respiratory etiquette and encourage them to avoid touching eyes, nose and mouth.
- Post signage throughout your facility. Examples of posters that can be posted:
 - <https://open.alberta.ca/publications/covid-19-information-help-prevent-the-spread-poster>
 - <https://www.albertahealthservices.ca/assets/healthinfo/ipc/if-hp-ipc-flu-handwash-how-to.pdf>
 - <https://www.albertahealthservices.ca/assets/healthinfo/ipc/if-hp-ipc-cover-cough.pdf>
 - <https://www.albertahealthservices.ca/assets/healthinfo/ipc/if-hp-flu-hand-rub-how-to.pdf>
- Keep, at a minimum, of about 1 metre (3 feet) between sleeping mats with “head to foot” placement. If possible in your space, increase the distance between mats even further.
- Consider cancelling group activities. Events with more than 50 attendees that involve international participants, critical infrastructure staff, seniors, or other high risk populations such as immune compromised should be cancelled until further notice. If you continue to hold activities for clients, strictly monitor for personal hygiene, and conduct frequent environmental cleaning and disinfection of the areas used. If cancelling group activities, consider other options for client psychosocial benefit.
- Encourage all staff, volunteers, and clients to get the seasonal flu shot. While this will not prevent COVID-19, reducing cases of influenza will lessen the burden of illness and the overall concern of symptomatic individuals in the facility.
- Remind individuals they do not need to be tested for COVID-19 if, in the past 14 days, they have not travelled outside Canada or have not had contact with someone with the virus. There is an online self-assessment tool to help determine if a test for COVID-19 is needed:
<https://myhealth.alberta.ca/Journey/COVID-19/Pages/COVID-Self-Assessment.aspx>

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For staff and volunteers

- Staff and volunteers should be encouraged to stay home if sick.
- Staff and volunteers should wash their hands frequently with soap and warm water. This includes when they first arrive at the facility, before preparing food, after any contact with saliva or nasal secretions (e.g., used tissues), after handling client belongings, after cleaning activities, and after using the washroom. Refer to hand-washing guidance here:
 - <https://www.albertahealthservices.ca/info/Page14955.aspx>.
- Staff and volunteers should avoid touching eyes, nose and face, and should remind each other if they see co-workers touching their own faces.
- Cover your cough and sneezes and then wash your hands. Refer to respiratory etiquette guidance here:
 - <https://www.albertahealthservices.ca/info/Page14511.aspx>
 - <https://www.albertahealthservices.ca/ipc/hi-ipc-routine-practices-algorithim-cc.pdf>
- If using disposable gloves for any tasks, handwashing is still important and should be done before putting on and after removing the gloves. If using gloves, change often, especially if soiled, ripped or become dirty.
- Monitor for signs of illness amongst clients, especially new cough, fever, or shortness of breath.
- Encourage clients to report any symptoms of illness right away.

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General environmental cleaning

- Attempt to have additional cleaning supplies on hand.
- Conduct frequent cleaning and disinfection of the facility, especially high-touch surfaces like door knobs, light switches, railings, tables, chairs, etc.
 - See Appendix 1 for general cleaning and disinfecting recommendations.
- Consider all surfaces in the client environment as contaminated. Start at the cleanest part of the equipment or surface and move towards the dirtiest.
- Ensure manufacturer recommended wet-contact time is achieved. Wet contact time is the minimum time required for items to be in contact with the disinfectant to ensure germs are killed.
- Place equipment on a clean surface to air dry. Do not actively dry with a towel or other device.
- Store all disinfectants out of the reach of children, pets and confused individuals.
- Clean client care areas on a regularly scheduled and frequent basis.
- Clean and disinfect all non-critical equipment and environmental surfaces between client use (e.g. shared equipment, treatment surfaces such as mats, platforms and tables)
- Clean and disinfect sleeping mats after every use.
- Wash client bedding frequently.
- Use care when handling laundry: have a system to keep dirty laundry separate from clean laundry.
- Staff or volunteers doing cleaning, including handling laundry, should wear gloves and gowns. The labels of the cleaning and disinfecting products you are using will likely identify what protective equipment staff or volunteers should use.

Food handling

Germs from ill clients/staff (or from contaminated surfaces) can be transferred to food or serving utensils. Facilities should reinforce routine food safety and sanitation practices. Where possible, implement measures to minimize client/resident handling of shared food and items that may touch another client's/resident's food, such as:

- Dispense food onto plates for clients/residents
- Minimize client/resident handling of multiple sets of cutlery
- Remove shared food containers from dining areas (e.g. shared pitchers of water, shared coffee cream dispensers, salt & pepper shakers, etc.)
- Dispense snacks directly to clients/residents and use pre-packaged snacks only
- Ensure that food handling staff are in good health and practice good hand hygiene
- Ensure that all surfaces of the tables and chairs (including the underneath edge of the chair seat) are cleaned and disinfected after each meal
- Staff assigned to housekeeping duties should not be involved in food preparation or food service, if possible

Planning for future cases/potential outbreak at your facility

Start planning now to reduce the impact of a potential outbreak in your facility. Here are some steps to take in advance:

- Consider connecting with other providers of homeless services, municipalities, and AHS Zone Public Health (see Appendix 2 for contact information), and make a list of key contacts.
- Analyze the capabilities of your facility. Do you have separate spaces for clients who are ill, or who need to self-isolate? If not, are you aware of alternate locations? Make a list of nearby healthcare and housing facilities that may need to be used by your clients.
- Start screening clients on arrival. Ask questions about recent travel and any respiratory symptoms they may be experiencing. Note if they have any underlying/chronic health conditions that may make them more susceptible to severe COVID-19 symptoms. New volunteers and staff should be asked similar questions.
- Identify contingency plans for increased staff and volunteer absenteeism. You might consider cross-training current staff, or hiring temporary staff. More information on business continuity can be found here: <https://www.ccohs.ca/publications/PDF/businesscontinuity.pdf>
- If you have a healthcare facility onsite, ensure the facility and staff are prepared. Information for health care providers can be found here: <https://www.albertahealthservices.ca/topics/Page16956.aspx>
- Be aware that shelter use may increase during an outbreak. You may need to order additional operational supplies like food, toiletries, and arrange for additional staffing.
- Have a communication plan. How will you get information to staff, clients, volunteers, community partners, and other key stakeholders in a timely manner? Consider internal websites, email strings, automated text messaging, etc.
- Be aware that everyone may be at risk for adverse mental health outcomes during a stressful event like a disease outbreak. How can your organization support both staff and clients?
- Stay informed about the local COVID-19 situation, using trusted resources such the links to Alberta Health and Alberta Health Services included in this document.

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Questions and Answers

What if a client has symptoms?

- AHS Zones are actively planning to identify locations where ill clients who live in homeless shelters, transitional shelters or similar settings with COVID-19 can be isolated, treated and supported. As designated locations are identified, additional information will be provided.
- If available, provide a face mask right away to any client exhibiting respiratory symptoms such as fever, cough, sore throat, shortness of breath, additional respiratory symptoms, muscle aches or extreme tiredness.
- If symptoms are mild, and consistent with COVID-19 use the self-assessment tool to determine whether they should be tested for COVID-19 or whether they need to call Health Link at 811. The assessment can be completed by the client or on behalf of them if they are unable. The COVID-19 Self-Assessment Tool can be found at <https://myhealth.alberta.ca/Journey/COVID-19/Pages/COVID-Self-Assessment.aspx>
- If clients develop SEVERE symptoms, contact 911 immediately; advise dispatcher and any medical teams who arrive that symptoms are consistent with COVID-19.

If required to isolate a client:

- Place client away from other clients
- Place client in an individual room with four walls and a door, if possible.
- If individual rooms are not available, consider using a large, well-ventilated room.
- Space beds apart as much as possible (2 metres or greater), have clients sleep head-to-toe, and put up temporary barriers between beds, such as plastic sheeting.
- If possible, designate specific washrooms for symptomatic clients only.

What if staff show respiratory symptoms?

- Advise staff (including administrators, health care personnel, cleaning staff, food handlers and volunteers) to check for any signs of illness before reporting to work each day and notify their supervisor if they are ill.
- Encourage staff and volunteers to stay home if they are ill.
- Staff and volunteers with symptoms should use the self-assessment tool to determine whether they should be tested for COVID-19 or whether they need to call Health Link at 811. The assessment can be completed by the client or on behalf of them if they are unable. The COVID-19 Self-Assessment Tool can be found at <https://myhealth.alberta.ca/Journey/COVID-19/Pages/COVID-Self-Assessment.aspx>
- Anyone needing to present to any healthcare facility and who is at higher risk for COVID-19 (for example, recent travel or person who has had contact with a returning traveler who is ill or who had contact with a known case) should be instructed to immediately self-identify at presentation to a health care facility.
- Effective March 12, all Albertans with respiratory symptoms, even if they have not travelled, are asked to stay home until 14 days have passed from the start of their symptoms. This may impact staffing levels, but is a precaution to prevent spread of illness in the community.

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What if staff have just returned from travelling from outside of Canada?

Effective March 12, all Albertans currently outside Canada should self-isolate for 14 days when they return. Self-isolation guidance can be found here: <https://open.alberta.ca/publications/self-isolation-information-sheet>

If staff develop symptoms – cough, fever or difficulty breathing – they should be instructed to stay home and use the self-assessment tool to determine whether they should be tested for COVID-19 or whether they need to call Health Link at 811. The COVID-19 Self-Assessment Tool can be found at <https://myhealth.alberta.ca/Journey/COVID-19/Pages/COVID-Self-Assessment.aspx>. Staff members should not go to an emergency room, urgent care centre or doctor's office. If severely ill and in need of urgent medical attention call 911 and inform them that you may have COVID-19.

Staff can stay up to date on current recommendations for travelers here: <https://www.alberta.ca/coronavirus-info-for-albertans.aspx#toc-5>, click on “Info for Travelers”

I'm concerned about COVID-19 and need advice. Should I call Health Link?

Please visit the following websites if you have further general questions about what COVID-19 is, how it is spread, or how many cases there are in the world at present.

- Alberta Health Services: www.ahs.ca/covid
- Alberta Health: www.alberta.ca/COVID19
- [Public Health Agency of Canada](http://PublicHealthAgencyofCanada.ca)
- [World Health Organization](http://WorldHealthOrganization.org)

Use the self-assessment tool to determine whether you should be tested for COVID-19 or whether you need to call Health Link at 811. The assessment can be completed for yourself or on behalf of someone else if they are unable. The COVID-19 Self-Assessment Tool can be found at: <https://myhealth.alberta.ca/Journey/COVID-19/Pages/COVID-Self-Assessment.aspx>

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Further Information

Up-to-date information on the evolving situation of COVID-19 in Alberta and Canada is available on the following websites:

Alberta Health ([COVID-19 Info for Albertans](#))

<https://www.alberta.ca/coronavirus-info-for-albertans.aspx>

Alberta Health Services ([novel coronavirus \(COVID-19\)](#))

<https://www.albertahealthservices.ca/topics/Page16944.aspx>

Public Health Agency of Canada ([Covid-19: Being Prepared](#))

<https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/being-prepared.html>

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Appendix One:

Public Health Guidelines for Environmental Cleaning of Public Facilities during Respiratory Illnesses in the Community

This information is to support owners and operators of public facilities with general cleaning and disinfection considerations as it relates to COVID-19.

- Increase daily cleaning and disinfection of common areas and surfaces. Pay particular attention to doorknobs, light switches, staff rooms, desktops and washrooms, and other high touch surfaces.
- Cleaning refers to the removal of visible dirt, grime and impurities. Cleaning does not kill germs but helps remove them from the surface.
- Disinfecting refers to using chemical to kill germs on surfaces. This is most effective after surfaces are cleaned. Both steps are important to reduce the spread of infection.
- Use a disinfectant that has a Drug Identification Number (DIN) and a virucidal claim. Be sure to follow the instructions on the label to disinfect effectively. Alternatively, you can prepare a bleach water solution with 100 ml of unscented household bleach per 900 ml of water.
- Be sure to use take the appropriate precautions when using chemicals for cleaning and disinfecting. Consult the products' Safety Data Sheets.

Appendix Two:

AHS Zone Public Health Contacts (Regular and After Hours)

AHS ZONE (Link to Zone MOH)	REGULAR HOURS Business hours may vary slightly from Zone to Zone, but are typically 8:30 am – 4:30 pm			AFTER HOURS
Zone 1 South	Communicable Disease Control	CDC Intake	587-220-5753	(403) 388-6111 Chinook Regional Hospital Switchboard
	Environmental Public Health	EPH CDC Lead	403-388-6689	1-844-388-6691
Zone 2 Calgary	Communicable Disease Control	CDC Intake	403-955-6750	(403) 264-5615 MOH On-Call
	Environmental Public Health	EPH Disease Control	403-943-2400	
<u>Zone 3 Central</u>	Communicable Disease Control	CDC Intake	403-356-6420	(403) 391-8027 CDC On-Call
	Environmental Public Health	24 Hour Intake	1-866-654-7890	
<u>Zone 4 Edmonton</u>	Communicable Disease Control	CDC Intake Payer	780-445-7226	(780) 433-3940 MOH On-Call
	Environmental Public Health	EPH		
<u>Zone 5 North</u>	Communicable Disease Control	CDC Intake	1-855-513-7530	1-800-732-8981 Public Health On-Call
	Environmental Public Health	EPH		