

Public Health guidelines for screening clients of shelters

Applying Public Health Measures to Shelters

1. Social Distancing in Shelter Spaces¹

- Ensure sleeping spaces are two metres apart and ask clients to sleep head-to-toe.
- Identify additional shelter space in your facility (if possible) to minimize the possible decrease in bed capacity due to social distancing.
- Employ appropriate strategies to space clients during food distribution, which may include:
 - using take-out containers;
 - reducing dining room occupancy by 50 per cent; and
 - offering more shifts and/or staggered dining times to reduce the number of people in group dining space at same time.

2. Frequent Hand-Washing²

- Have all staff, volunteers and clients wash hands with soap and water or use alcohol-based hand-sanitizer immediately when they enter to the facility.
- Have posters and verbal messaging reminding staff, volunteers and clients to wash hands after:
 - touching frequently used surfaces;
 - touching any part of face;
 - using the restroom; and
 - coughing/ sneezing/using a tissue.
- Remind staff, volunteers and clients to wash their hands before handling any food or eating.

3. Frequent cleaning and disinfecting³

- In addition to routine cleaning, make a plan to clean and disinfect surfaces that are frequently touched or frequently used (e.g. kitchens and bathrooms) more often.
- Commonly-used cleaners and disinfectants are effective against COVID-19.

¹ <https://sharedhealthmb.ca/files/covid-19-testing-site-social-distance.pdf>

² <https://www.canada.ca/en/public-health/services/publications/diseases-conditions/reduce-spread-covid-19-wash-your-hands.html>

³ <https://www.canada.ca/en/public-health/services/publications/diseases-conditions/cleaning-disinfecting-public-spaces.html>

Client Screening at Entry to Shelter

This process will need to be employed when there is a reasonable suspicion of community spread and will need to be updated regularly.

Set up for screening: consider a table with a sneeze guard type barrier (if available) or staff/volunteer seated with 2 tables between them and client.

Primary screening at entry (can be done by staff or volunteer):

Do you have any new cold or flu symptoms (cough, chills, fever, headache, muscle pain, sore throat, runny nose)?
Temperature of client is checked: is temperature >38.0 C

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YES

- Maintain 2 meter distance
- Instruct person to clean hands with alcohol-based hand rub
- Provide a procedure mask to person
- Move to a segregated waiting area with hard walls and door (identify designated space in advance)
- Tell person someone is coming to speak to them

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NO

Someone escorts or directs client to handwashing/ cleansing station and then to appropriate space

Disinfect any surface touched by client including door handles

Secondary Screening by Designated Lead (Community Paramedic, PHN, other)

Severe COVID-19 symptoms include:

- Extremely difficult breathing (not being able to speak without gasping for air)
- Bluish lips or face
- Persistent pain or pressure in the chest
- Severe persistent dizziness or light-headedness
- New confusion, or inability to arouse
- New seizure or seizures that won't stop

Is client unstable or severely ill?

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YES

Call 911

If this is a client with suspected COVID-19, notify the transfer team before transfer.

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NO

Screen client according to most up to date screening process:

<https://sharedhealthmb.ca/covid19/screening-tool/>

Follow directions based on response to screening questions

No further testing/action required:

Person is escorted/ directed to handwashing station and then appropriate space

Testing Required:

Transport person to testing site as directed by Health Links