

## COVID-19 General Guidance for Community Non-Profit Services

This guidance is for community non-profit and voluntary sector agencies as they re-open service settings during the COVID-19 pandemic. This general guidance is appropriate for community-based non-profit services and programs delivered to groups and individuals in office settings, multipurpose rooms, and community halls or classroom settings. The guidance below is not intended for health workers or clinical care settings, long-term care or residential care/home care. Specialized [guidance is available here](#) for specific community non-profit settings, services and populations.

As every community service will be different, it is ultimately the responsibility of the organization's management and staff to review their own policies, procedures and site-specific circumstances, and to assess their ability to deliver programs and activities while ensuring that the appropriate infection prevention and control measures are implemented and maintained. For information about how to assess COVID-19 risks and to plan risk modification for your service setting, please refer to the Toronto Public Health [Four Step Risk Assessment and Risk Mitigation Guide for Community Non-Profit Services and Programs](#). Stay up to date with current Emergency Orders issued by the Province of Ontario and the City of Toronto, and guidance provided by Toronto Public Health (TPH) at [www.toronto.ca/COVID19](http://www.toronto.ca/COVID19).

### COVID-19 Transmission

**Respiratory transmission:** [COVID-19](#) is an illness that is spread mainly from person-to-person through close contact from respiratory droplets of someone with COVID-19. The respiratory droplets can travel up to two metres/six feet when we cough, sneeze, talk or sing.

**Contaminated surfaces:** It is possible for a person to get COVID-19 by touching a surface or object that has the virus on it and then touching their mouth, nose, or eyes. This new coronavirus can survive on plastic and stainless steel surfaces for [up to 72 hours](#).

**At-Risk populations:** The risk of severe illness from COVID-19 is greater for older adults, and people with an underlying medical condition or a weakened immune system (e.g. due to a medical condition or treatment). People living on a low income, people who are under-housed or experiencing homelessness, and those who live in congregate settings such as retirement homes or rooming houses may also be disproportionately impacted by the virus. Organizations should consider the vulnerability of employees, volunteers, clients and visitors when planning their services and programs.

### Protective Measures to Keep Everyone Safe

- Stay home when you are sick.
- Keep a two metre/six feet distance from others, when possible.
- Wash your hands often, and avoid touching your face with unwashed hands.
- Cough or sneeze into your elbow.
- Wear a face mask or covering when you are in an enclosed, public setting.
- Clean and disinfect frequently touched objects and surfaces.

## Promote Healthy Behaviours

### Practice physical distancing

- [Physical distancing](#) means keeping a distance of two meters/six feet from others.
- Maintain physical distancing by limiting the number of people (including all clients, employees and volunteers) onsite at one time.
- Remind clients and staff to greet each other using non-physical gestures (e.g. wave or nod).
- Physical distancing must not compromise supervision or safety.

### Increase public health awareness

- Communicate to clients, volunteers and employees about the changes you have made to protect them against COVID-19 by updating information on your website, voice mail, etc.
- [Download](#) printable posters and display in high visibility areas in your setting to promote messages about how to stay safe during COVID-19.

### Support and Encourage Proper Hand Hygiene and Respiratory Etiquette

- [Wash your hands](#) thoroughly with soap and water or use an alcohol-based hand sanitizer with 70-90% alcohol concentration, provided hands are not visibly soiled.
- Remind staff and participants to avoid touching their face, nose and mouth with unwashed hands.
- [Cover your cough](#) or sneeze with a tissue. If you don't have a tissue, sneeze or cough into your sleeve.
- Post [Hand Washing](#), [Cover your Cough](#) and [Hand Sanitizing](#) signage in visible locations.
- Ensure that staff and clients have the ability to practice hand hygiene often, and when needed:
  - Incorporate hand hygiene into breaks between program activities and before and after snacks/meals.
  - Supervise/assist clients with hand hygiene if necessary.
  - Provide accessible hand sanitizer stations if possible.
  - Monitor supplies to ensure adequate amounts of liquid soap, paper towel, (air dryer if paper towels are not available), hand sanitizer, tissues and waste receptacles with lined plastic bags.
- Use of disposable gloves is not a substitute for proper hand hygiene. If staff or clients use gloves, it is important to change gloves when changing tasks, or more often, as necessary. Wash hands with soap and water for 15 seconds before putting on and after taking off gloves.

### Support and Encourage Proper Use of Masks

- [Non-medical/cloth masks or face coverings](#) are strongly recommended for staff, volunteers and clients when onsite. Wearing a non-medical mask or face covering will protect others from the wearer's respiratory droplets and germs.
- Masks **do not replace** the need for physical distancing, hand washing, and staying home when sick.
- Train staff and clients on the [proper use of masks](#) and when and [how to safely put on and take off a mask](#).
- Provide disposable masks for clients who have not brought their own.
- Do not share masks, face coverings or gloves.
- Ensure a waste receptacle is available for discarding disposable masks and gloves.

- All masks should be changed if wet or visibly soiled. Place mask in a sealable bag until it can be washed. Launder cloth masks based on the selected fabric. Verify if washing in warm or hot water is tolerated. If the layers of fabric look worn, discard the mask.
- Face coverings may not be tolerated by everyone. Underlying health, behaviour issues or beliefs should be considered to avoid physical and psychological injuries that may result as an unintended consequence of wearing a mask. Alternative ways to provide service to people who cannot wear a mask should be considered. For example, providing service at the end of the day, with no other clients in the location, and keeping a two metre/six foot physical distance as much as possible.

### Support and Encourage Healthy Commuting

- Provision of bussing or other transportation is not recommended at this time.
- If transportation is provided, limit the number of passengers to facilitate physical distancing as much as possible. Also refer to 19 COVID-guidance related to [ride sharing](#).
- Provide guidance to staff, volunteers and clients who commute via public transit or ride/share/taxi:
  - Wear a mask and open windows.
  - Use elbow/arm to push buttons/open doors.
  - Sit in the back when using taxi and ride share.
  - Avoid travel during peak hours, if possible.
  - Avoid touching your face.
  - Do not use transit if you are sick or self-isolating.

### Maintain a Healthy Environment

#### Implement Staff Health Screening

- Have a flexible employee illness policy so that staff do not come to work sick. Remind all staff about the importance of reporting illness to their supervisor/ manager.
- Ensure all employees and volunteers complete a [health screening questionnaire](#) before each shift.
- Direct staff who answer YES to any of the screening questions to stay home
- No one with even one symptom of COVID-19 should enter the workplace.
- Staff who become sick with COVID-19 [symptoms](#), while at the workplace should go home immediately and contact Telehealth or go to an [assessment centre](#) to get tested.
- Keep up to date with public health advice on when staff may [return to work](#).

#### Implement Client Health Screening

- Post [signage](#) in visible areas clearly explaining the screening process and the conditions for entry.
- Designate an area at the entrance of the service setting for screening.
- Provide hand sanitizer for use at the screening station.
- The area should allow a minimum of two metres/six feet distance between staff conducting screening and the individual being screened. Alternatively, a protective barrier (e.g. plexiglass) can be set up around the screening station.
- Ensure clients maintain two metres/six feet from others when waiting to be screened.
- Actively screen each client individually, prior to entry to the setting, using a [health screening questionnaire](#).



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- Direct clients who answer YES to any of the screening questions to go home and self-isolate, and contact Telehealth or go to an [assessment centre](#) to get tested.
- Where possible, clients attending for an appointment should be screened by phone prior to arrival.
- Offer to reschedule appointments for clients when they are sick.

### Implement Attendance Tracking

- It is strongly recommended that daily attendance records are maintained for all clients, volunteers and employees, visitors, deliveries/contractors to support public health contact tracing efforts (e.g. name, date, time, and contact information).
- Some people may have concerns about having personal information tracked. It is important to communicate to everyone that the information is being collected to prevent the spread of COVID-19.
- Monitor attendance records for patterns or trends (e.g. clients/staff in the same group absent at the same time or over the course of a few days).
- Consider following up with clients and staff to determine the reason for any unplanned absences.
- Contact TPH if there is an increase in absenteeism associated with symptoms of COVID-19.
- If a client or staff have COVID-19 and were contagious while at the agency, TPH will investigate and notify those who may have been exposed.

### Enhance Cleaning and Disinfection

- Review Public Health Ontario's [Cleaning and Disinfection for Public Settings fact sheet](#).
- Refer to [Health Canada's lists of hard-surface disinfectants for use against coronavirus \(COVID-19\)](#) for information on disinfectants.
- Post and maintain a log to track cleaning and disinfecting activities.
- Ensure frequent (minimum twice a day) [cleaning and disinfecting](#) of high-touch surfaces and common areas such as door handles, counters, cabinet doors, light switches, faucets, toilet handles, handrails, touch screen surfaces and keypads.
- Clean and disinfect individual items (computers, books, handicrafts, cooking items) after each use.
- Chlorine bleach solutions may be prepared and used for disinfection if appropriate for the surface.
- Ensure a minimum of two minutes disinfectant contact time and allow to air dry.
- Ensure single-use items, including masks and gloves, are discarded immediately after use to reduce the risk of contamination. Garbage bins should be lined and disposed of regularly.
- Remind clients and staff not to share items, including food, dishes, articles of clothing, ear buds, phones or other electronic devices, personal items such as combs or make-up, cigarettes, vapes, supplies, etc.

### Laundry

- Label and use separate baskets or bags for clean and dirty laundry items. Laundry baskets or reusable bags must be sanitized between uses.
- Dirty laundry must be placed in a lined laundry bin for washing with hot water and detergent using a washing machine. Dryers should be used as the heat further kills any viruses.

## Recommended Modifications for Community Non-Profit Services and Settings

### Modify the Physical Space to Facilitate Physical Distancing

- Review the TPH [Four Step Risk Assessment and Risk Mitigation Guide for Community Non-Profit Services and Programs](#) resource.
- Walk through your space(s) to identify areas needing modifications.
- Remove non-essential furniture to allow ease of movement for physical distancing.
- Space seating and activity stations at least two metres/six feet apart.
- Provide visual guides such as tape on floors or tables, posters, pylons and flags to delineate two metres/six feet.
- Limit entrances to reduce staff and clients entering the setting at any given time.
- Post [physical distancing signs](#) at all entrances, in hallways, elevators, kitchens and meeting rooms.

### Install Transparent Barriers, Where Needed

- Consider installing plexiglass or other physical barriers physical distancing cannot be maintained.
- Barriers do not rely on correct usage to be effective, unlike masks.
- Barriers protect people on both sides of the barrier, unlike masks.
- Barriers provide a visible reminder of the importance of maintaining distance.
- To be effective the barrier must be large enough to create a shield between the breathing zones of the people on either side. A person's breathing zone has a diameter of about 60 cm (24 inches), which means 30 cm (12 inches) in every direction from a person's nose.
- A barrier should be positioned to accommodate the heights of the tallest and shortest people who will likely be near it. If one person is standing and the other is seated, the barrier should extend below the seated person's nose and above the standing person's nose.
- Barriers should also be wide enough to accommodate the normal movement of both people.
- [Download](#) more information about installing effective barriers.

### Modify Services and Programs to Facilitate Physical Distancing

- Limit classes, groups and meetings to a maximum of 10 people, including all staff and clients inside the space, and ensure two metres/six feet is maintained between all the participants.
- In a small room or space, the group size may need to be fewer than 10 people in order to maintain two metres/six feet of distance from others. Calculate the number of people the space can accommodate with physical distancing.
- Do not have clients wait in a waiting room. Ask clients to call when they arrive and wait outside.
- Consider virtual activities, modified job responsibilities and telework options.
- Use telephone or video conferencing when possible for meetings.
- Stagger or adjust working hours and shifts to reduce the number of staff onsite.
- If you multiple programs are provided onsite, stagger the start/end times to reduce contact between participants from different programs.
- If multiple programs are provided onsite at the same time, stagger program activities, snack times, meals and washroom breaks to contact between participants from different programs.

- Where possible, establish cohort groups consisting of the same clients and staff rather than mixing groups.
- Assign cohort groups a designated room/space.
- Incorporate and prioritize individual activities that encourage more space between participants so that physical distancing can be maintained.
- Contact sports, games or activities should not be permitted due to physical distancing requirements.

### **Modify the Use of Equipment**

- Offer activities that only use items that can be easily cleaned and disinfected or are single use and disposed of at the end of the day/program (e.g. craft supplies).
- Minimize the sharing and frequency of touching objects, equipment, surfaces and other personal items.
- Provide individualized, labelled bins for participant's supplies and items (e.g. craft supplies).
- Keep participants personal belongings to minimum. Personal items such as water bottles or coffee mugs should be labelled and stored separately.

### **Workplace Health and Safety**

- Employers must have written measures and procedures for staff safety, including for infection prevention and control.
- The Province of Ontario has general information on [COVID-19 and workplace health and safety](#). Learn about an employers' responsibilities and how to protect workers at work.
- Workers can also get information about [health and safety protections](#) at the workplace.

### **Other Resources**

Toronto Public Health regularly publishes new [guidance](#) to support community and workplace settings to re-open during the COVID-19 pandemic. Check the website regularly for new information. Tailored guidance and checklists are currently available which may be relevant for your agency:

- [Food Banks and Donation Centres](#)
- [Homeless Services](#)
- [Child Care Services](#)
- [Day Camps and Children's Programs](#)
- [Personal Support Services](#)
- [Long-Term Care Homes and Services](#)
- [Restaurants and Food Premises](#)

### **More information**

For more information, visit our website at [www.toronto.ca/COVID19](http://www.toronto.ca/COVID19) or call us at 416-338-7600.

## References

New York City Health. *Coronavirus Disease (COVID-19) Guidance for Congregate Settings*. Accessed on March 30, 2020. <https://www1.nyc.gov/assets/doh/downloads/pdf/imm/guidance-for-congregate-settings-covid19.pdf>

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