



The  
Guesthouse  
Leaving the light on in North Simcoe

# **SHELTER OPERATIONS MANUAL**

**April 2018**

Next Review Date: April 2019

Please visit our website regularly for recent news and policy changes:

<http://www.theguesthouseshelter.ca/>

[www.facebook.com/TheGuesthouseShelter/](http://www.facebook.com/TheGuesthouseShelter/)

# Content

<b>Preface</b> .....	<b>3</b>
<b>Organizational Structure</b> .....	<b>4</b>
<b>History of the Guesthouse Shelter</b> .....	<b>5</b>
<b>Volunteers Screening, Training, and Evaluation</b> .....	<b>6</b>
Volunteer Screening .....	6
Volunteer Training .....	6
Volunteer Communication .....	6
Exceptional Offers of Help - Boundaries .....	7
<b>BASIC INFORMATION SHEET</b> .....	<b>8</b>
BASIC RULES .....	9
EMERGENCY PHONE NUMBERS .....	10
<b>Our Day-to-Day Program</b> .....	<b>11</b>
BREAKFAST SHIFT 6:00 am – 8:00 am .....	12
SUPPER SHIFT 5:00 pm – 8:00 pm .....	13
EVENING SHIFT 8:00 pm – 11:00 pm .....	16
NIGHT SHIFT 11:00 pm – 6:00 am .....	17
DROP-IN SHIFTS .....	18
<b>General Safety Procedures</b> .....	<b>19</b>
Entry for Guests .....	19
Entry for Volunteers .....	19
Storage of Guest Bags .....	19
Overnight/Reoccurring Guest Storage .....	20
Prescription Medication .....	20
Intervening in an “Incident” .....	21
Relationship to the Police .....	21
Police Attending an Incident .....	22
Trespassing & Suspension of Service .....	22
First Aid Kit .....	23
Automated External Defibrillator (AED) .....	23
The Phone .....	23
Confidentiality .....	24
Sharps (Syringes) .....	24
Non-Guest Incidents .....	25
Age of Volunteers .....	25
Workplace Hazardous Materials Information System .....	25
<b>Fire Emergency</b> .....	<b>26</b>
The Guesthouse Shelter Fire Route .....	28
<b>Special Considerations</b> .....	<b>29</b>
Deviation and exception of policy and procedure .....	29
Families (Including Babies, Children and Youth) .....	29
Storage of personal food items for guests .....	30
Guest clothing and personal items (storage) .....	30
Guestrooms (bed) configuration .....	30
Harm Reduction .....	30
Laundry .....	32
Showers .....	32
Infection Prevention and Control .....	33
Risk Factors .....	33
<b>Forms</b> .....	<b>35</b>
Guest Log In .....	35

Communications Log .....	36
Volunteer Log In .....	38
Incident Report .....	39
Deviation Report .....	40
Overnight Guest Sign In.....	41
Guest Drop In Sign In .....	42
Guesthouse Phone Log .....	43
Guesthouse Medicine Cabinet Log.....	44
<b>Appendices .....</b>	<b>45</b>
Appendix A – Communicable Disease Reporting .....	45

# Preface

## ***THANK YOU...***

... for volunteering to help feed and shelter our “neighbors” through the Guesthouse (TGHS) Shelter. This manual will help you understand what is expected of you as you assist the homeless and vulnerably housed who seek food and emergency shelter.

Our program objectives are twofold:

1. To provide food and shelter in a safe familial environment within North Simcoe that cares for those in physical, intellectual, emotional, social and spiritual need.
2. To encourage understanding of the needs in our community regarding fundamental human rights to food and shelter.

## **Your Role as a Volunteer**

Many who volunteer do so out of a sense of compassion and desire to help those less fortunate. Such concern is what keeps the Shelter operating. Thank you. Without your volunteerism with The Guesthouse Shelter, our guests might not be fed and/or housed.

To safely provide for our guests, certain policies and skills need to be in place. All of our guests are fascinating and real human beings with a story to share whom you will have the opportunity of getting to know. Some, especially those affected by mental health and substance abuse can present challenges. This manual contains the practices that will help keep you, your fellow volunteers and our guests safe and well. Specifically, you will read about:

- Welcoming guests in through our door
- Providing guests with a warm nourishing meal
- Providing guests with a safe place to sleep
- Talking and socializing with guests
- Appropriately sharing your knowledge and shelter experiences to raise awareness of local homelessness needs and solutions

Read the manual carefully. Learn your role. Complete required documents. Attend required training sessions. Stay current by reading all emails, newsletters, shelter documentation and policy directives. Contact **Shelter Operations Manager** and/or **Community Engagement Coordinator** regarding questions or concerns. Past experience has shown that volunteers who let “compassion” get too far ahead of “good sense” can needlessly expose themselves, our guests, and ultimately the entire shelter to unnecessary harm.

Much in this manual has been gathered through experience over the past fifteen years - we have learned what works well. In addition, we have visited other shelters that are thriving, from which we continue to learn and improve. This manual represents our current vision for a “best practice” volunteer-driven emergency shelter.

# The Guesthouse Shelter & Community Hub

## Organizational Structure

The Guesthouse Shelter is a non-profit, registered charity, governed by a volunteer Board of Directors.



## **History of the Guesthouse Shelter**

The Guesthouse evolved from the Out of the Cold movement, a grassroots movement initiated by some Toronto high school students in 1988 to provide food and shelter in a non-judgmental setting. The design and name quickly caught on, with various Toronto faith groups opening places of worship one day a week, providing winter food and shelter.

Out of the Cold programs now exist from coast to coast. However, most are found in Southern Ontario communities. Cambridge in particular, provided our local Out of the Cold program with an exemplary model of what is possible. Started by seven churches in 1998, the Cambridge Out of the Cold program matured into Cambridge Shelter, a permanent best-practice solution occupying an attractive new facility within a vibrant part of the downtown. While changing significantly through taking on paid staff and provision of formally funded social support programs, Cambridge Shelter is still largely a volunteer-driven entity. By 2011, Cambridge Shelter's volunteer base had grown to 1,400.

Midland Out of the Cold began in 2003 as a temporary solution to the loss of Experience House, a year-round emergency shelter that had first opened in 1985. Similar to other communities, our local Out of the Cold program moved each day from church to church from Dec 1 to March 31. In Dec 2007, Midland Out of the Cold moved into a permanent space in the basement of Knox Church.

With numbers of guests continuing to grow, Midland Out of the Cold was incorporated in 2010. Charity status came to be in December 2011. Inspired by the example of Cambridge and informed by much study to determine the extent of local homelessness, in May 2012 the board of Midland Out of the Cold voted unanimously to stay open year-round. With this expanded vision we built upon our roots as Out of the Cold and in April of 2013 we formally adopted the name The Guesthouse Shelter.

In 2014 a new plan was developed to move forward with a new shelter facility which would be fully-accessible, equipped with a commercial-grade kitchen, 18 beds and a community 'hub' space for partnering service providers to deliver needed services to those in our community struggling from inadequate or no housing. As of June 2017, The Guesthouse Shelter officially launched a Grand Opening of its new facility at 522 Elizabeth Street.

As of January 2018, The Guesthouse is now operating as a Community Hub hosting an array of social and community services to offer to guests and community members.

As the organization moves forward, administration and operations continue to expand to offer programming options such as emergency shelter, meal programming and housing supports. The Guesthouse Shelter & Community Hub is quickly growing as a community leader who largely relies on our team of dedicated volunteers.

## **Volunteers Screening, Training, and Evaluation**

Clients of The Guesthouse Shelter ('Guests') face many challenges and barriers besides just weather and hunger, making them most vulnerable. Often, they are without support networks, struggle with mental health and addiction issues, have been robbed of possessions, assaulted and verbally abused. Knowing this would make it very easy to inflict further hurt on our guests. The Guesthouse Shelter strives to screen, train, and evaluate all volunteers in an effort to provide the safest shelter possible to help and support those in need.

### **Volunteer Screening**

At the request of The Guesthouse Shelter management all volunteers are required to obtain a police record check and must present the original record to the Community Engagement Coordinator. The Guesthouse Shelter is not obliged to keep a copy, only to note the date and the sealed stamp on the original copy. The record check will be noted on the volunteer's paperwork as being "clean". If the record is not completely 'clean', the CEO will be consulted for further discussion.

Experienced volunteers are knowledgeable in many facets of shelter operations through communications with the Shelter Operations Manager and the Community Engagement Coordinator. Experienced volunteers help to effectively and safely support fellow volunteers. New volunteers should expect to have an orientation process with the Community Engagement Coordinator which introduces them to the history of the shelter and outlines their responsibilities as a volunteer. The new volunteer will indicate their choice area of helping and what shifts best suit their schedule. Our goal to provide a meaningful and positive volunteer experience in support of the guests.

### **Volunteer Training**

All new volunteers should read this manual and stay attentive to communications from the Guesthouse Shelter administration office relating to current events and policy changes. All existing volunteers should refer to this manual periodically as a reference.

Volunteers are encouraged and, in some cases, may be expected to take part in training activities and initiatives offered by TGHS, or in partnership with community agencies.

### **Volunteer Communication**

An important consideration for everyone involved is day-to-day consistency of operations. Our guests need routines they can count on as do our staff and volunteers. In order to be as consistent as possible, volunteers need to be communicated with on a regular basis through the Community Engagement Coordinator and the Shelter Operations Manager to ensure consistent and effective communication.

TGHS strives to create fulfilling experiences for volunteers. Volunteers should expect the roll-out of formal and scheduled training opportunities. Meetings will be conducted with the CEO, Shelter Operations Manager and Shelter Shift Leads to address any concerns or matters to be resolved in result of daily happenings. Volunteers are encouraged to express concerns to TGHS staff members.

## **Exceptional Offers of Help - Boundaries**

On occasion, non-volunteers or guests may become involved in helping at the shelter. For example, a local church might bring in a meal and stay to help serve the meal, or a guest might provide support to another guest by way of getting the ketchup or wiping up a spill. While we all are inspired to help, we need to respect boundaries of the shelter and of others. Trained volunteers should remain vigilant to provide the skills that only they and their formal training can guarantee.

# The Guesthouse

## **BASIC INFORMATION SHEET**

Welcome to The Guesthouse Shelter & Community Hub  
Hours of operation are as listed below:

**Address:**  
522 Elizabeth St.  
Midland, ON  
L4R 2A1

**Phone:**  
705-527-4111  
(Shelter)  
705-528-1096  
(Admin)

**Email:**  
som@theguesthouseshelter.ca

**Shelter Hours:** Daily 5:00 PM to 8:00 AM

**Wake-Up:** 6:30 to 7:00 AM

**Breakfast:** Served until 7:30 AM. Guests must exit shelter at 7:45AM

**Supper:** Served between 5:30 and 6:30 PM

**Curfew:** 11:00 PM. No exceptions unless authorized by Ontario Provincial Police.

**Drop-In Hours:** Schedules change seasonally. Open as warming/cooling station as specified by environmental concerns.

Any day when the predicted high is not above -15° C, or – Any day when the predicted high is not below 30° C (Determined previous day at noon from Environment Canada Midland website – County wide weather warnings)

# BASIC RULES

**NO WEAPONS**

**NO ALCOHOL OR DRUGS**

**PROTECT ALL GUESTS**

**DO NOT WASTE**

**RESPECT OTHERS**

**RESPECT THE BUILDING**

**ENJOY YOUR TIME WITH US!**

# EMERGENCY PHONE NUMBERS

Keep this Page Beside the GH Phone

You are at:

**The Guesthouse Shelter**

**522 Elizabeth St. (North - Easy St. Entrance), *Midland***

**(705) 527-4111**

Police: 911 or (705)526-3761

Ambulance: 911 or (705)526-5466

Fire: 911 or (705)526-4279

Street Outreach (Denis) (705)309-1695

Simcoe County Public Health Unit (705)721-7520  
(After-hours: 1-888-225-7851)

## The Guesthouse Shelter Staff Directory

Chief Executive Officer	705-528-1096 Ext. 200	ceo@theguesthouseshelter.ca
Shelter Operations Manager	705-528-1096 Ext. 207 or 705-527-4111	som@theguesthouseshelter.ca
Housing Sustainability Worker	705-528-1096 Ext. 205	beth@theguesthouseshelter.ca
Community Engagement Coordinator	705-528-1096 Ext. 204	cec@theguesthouseshelter.ca
Shelter Shift Lead	705-527-4111	

## Our Day-to-Day Program

The shelter is designed around the principle that the same basic rules and practices are followed every day and every shift at the shelter. This is done so that all staff, guests and volunteers get used to a routine. A regular routine improves safety and reduces stress. Breaking the routine can lead to confusion and often can be extremely upsetting to our guests. While we do not want to stifle your creativity, please follow the routine.

All shelter shifts will be manned by a minimum of two personnel.

We begin our day with breakfast and follow the shifts through to the overnight. The shifts are as follows:

- **Breakfast Shift:** 6:00 to 7:45 am; 2 volunteers
- **Supper Shift:** 5:00 to 8:00 pm; 3 - 4 volunteers (Supervised by SSL)
- **Evening Shift:** 8:00 to 11:00 pm; 1 - 2 volunteers (Supervised by SSL)
- **Night Shift:** 11:00 pm to 6:00 am; 1 volunteer (Supervised by SSL)
- **Drop-In Shifts:** Various as needed

Each shift has been designated a required number of volunteers with at least two personnel per shift. The number of volunteers is based on our experience regarding the typical workload required with each shift. Having too many volunteers on a shift can be as frustrating as not having enough.

TGHS welcomes both men and women to the Shelter. Experience has shown us that in many situations, guests react markedly different to volunteers based on whether they are male or female. In the interests of having guests feel as safe as possible, we strive to have at least one male and one female volunteer present at all times.

We occasionally have families with children and youth. Be mindful that families need privacy to be a family: parents need space and time to parent and children need to turn first to their parents for help. At the same time, homelessness places severe stress on a family unit and volunteers should remain vigilant to provide ready support and love. Please see designated section for considerations for families.

Children and youth require protection from addictive and criminal activities, predators, inappropriate media, and inadequate supervision and nurturing. The Guesthouse Shelter is determined to focus first on the safety of children and youth in the shelter. Alternative shelter and food arrangements may be made so that children and youth in the shelter remain safely housed.

## **BREAKFAST SHIFT 6:00 am – 8:00 am**

We invite volunteers to submit suggestions, questions and concerns to the Community Engagement Coordinator at [cec@theguesthouseshelter.ca](mailto:cec@theguesthouseshelter.ca).

### **Start of Shift**

Upon arriving to the shelter, volunteers will sign their name in the Volunteer Shift Log binder which is kept in the shelter office. Each volunteer signs their name in the designated volunteer shift section. Volunteers are requested to arrive 15 minutes prior to beginning their shift. This allows time for the volunteers to review the Communication Log. If necessary, a brief discussion may be requested to alert volunteers of any special issues or concerns to be aware of during their scheduled shift.

Since the front desk is unoccupied during the breakfast shift, volunteers must always remain ready to step into the role of welcoming first-time guests into the shelter. A volunteer will need to show new guests around the shelter to identify essentials such as emergency exits and washrooms. All new guests entering the shelter for the first time must read and sign The Guesthouse Code of Conduct, copies of this are kept in the shelter office.

### **Shift Operation**

Volunteers are to start waking guests at 6:30AM with 7:00AM being the last wake up call. To wake guests, at 6:30AM, first gently tap on the guest's door, then slightly open the door and say "Good morning, it is 6:30, it's time to get up, breakfast is being served, I will come back in fifteen minutes at 6:45AM". At 6:45AM, again knock on the door before opening, as you open say "Good morning, it is 6:45. Time to get up, I will be turning on the lights in fifteen minutes. At 7:00AM, gently knock on the door and say "Good morning, I am turning on the lights now. It's time to get up, breakfast is being served.

It is very important when waking guests to do so in a gentle manner. Often times how people are waking up set the tone for the day. Please remember to be kind, even when greeted by a grumpy guest.

Guests will drop in for breakfast who did not spend the night which is permitted. The breakfast shift volunteers have the right to refuse any guest if a problem exists around behaviour and/or safety. If you believe a situation is dangerous, call 911. Second call the "on call" personnel posted in the shelter office. Third, fill out an incident report.

Proper hygiene is very important. The kitchen area must be kept clean at all times. When serving food to the guests and cleaning up the dishes, use disposable gloves. All dishes must be washed in the dishwasher to ensure proper sanitization. Use bleach, soap and hand sanitizers as needed.

On days when the shelter is closing at 8:00 AM, guests should be ready to leave the facility by 7:45 AM. Before leaving, guests should be reminded to take any needed belongings with them.

Whether the shelter is to be open or closed, sleeping rooms should be kept tidy with beds made and clothing put away off the floor. If a guest needs their bedding washed, they should strip their bed before leaving in the morning and put their laundry in the laundry room for washing. A clean set of bedding will be provided by 8:00 PM as needed.

## **End of Shift**

The kitchen must be cleaned after each shift ensuring food and dishes are clean and put away. The dining room tables should be wiped clean with a mixture of bleach and water.

Before leaving at the end of a shift, the volunteers must sign out in the Volunteer Shift Log binder and complete the Communication Log (Located in shelter office).

If the shelter is not scheduled to be open during the day, and the Custodian is not present in the shelter, it is the responsibility of the volunteers to ensure the shelter is clear of guests and the door is closed and locked before leaving the shelter.

If the shelter is scheduled to stay open, this will be indicated to the volunteers and shift changes will take place accordingly.

## **SUPPER SHIFT 5:00 pm – 8:00 pm**

### **Shift Staff & Volunteer Opening Procedures:**

- Shelter Shift Lead arrives by 4:45 PM and signs in for their shift(s); 5pm to 6am
- Volunteers arrive by 4:45 PM and sign in for their shift
- The Front desk is set-up to greet guests into the shelter by 5:00 PM

All volunteers should arrive at least 10 minutes before their shift to be aware of any relevant information prior to beginning their shift. The Shift Staff Lead may use a few minutes before opening to hold a brief team meeting.

At the start of the shift, each volunteer signs their name in the Volunteer Shift Log (located in shelter office), noting the time in. Volunteers should put on a green name tag with their first name only. When a volunteer or staff member finishes their shift, they will sign their name and time out in the Volunteer Shift Log.

Volunteers and Staff may leave their belongings in the shelter office while here on shift. If needed for security purposes, the shelter office can be locked at any time (key located on kitchen lanyard).

The kitchen is a restricted area of entry for volunteers only, guests are not to enter the kitchen area at any time.

Watching TV at any time when the shelter is open is acceptable, providing the content and the volume are also acceptable to everyone present within the shelter environment. Please be mindful of the TV content being viewed if children are present.

## **Greeting the Guests**

Supper guests should not sign in or enter the shelter unless there are at least two personnel present and ready to greet the guests. Exception may be made if Shelter Shift Lead is present. Greeting guests at the front desk is one of the most important aspects of the shelter operation. This is a time to observe guests and may provide the opportunity to determine any potential issues before they arise. No guests will be admitted to the shelter until signed in and belongings are secured.

During the supper shift is when there is a higher volume of guests coming to the shelter for a meal.

Staff and Volunteers must assess a guest's behaviour and determine if a guest is sufficiently in control of their behaviour and physicality to enter the shelter.

Some potential warning signs could be:

- Excessive inebriation
- Aggression
- Verbal Abuse
- Attempt to conceal drugs and/or weapons

A judgment call must be made by the Shelter Shift Lead (staff) as to whether a guest should be allowed to enter the shelter. Volunteers may use their best judgement to inform the Shelter Shift Lead. **You are under no obligation to admit anyone.** It is often better to deny entry to one person than to put others at risk. It is at the discretion of staff and volunteers to provide a bag lunch or meal to a guest who has been denied entry. If there is concern for the imminent safety, please call the Police or 911 if deemed a medical emergency.

## **Guest Sign In**

The Guest signs the time in and their name on the Guest Log, first and last name, if a name is unclear, please ask the guest for the correct spelling of their name and re-write it in a clear manner.

Pay It Forward Program – Is a meal program executed within the shelter that straddles the ideals of enablement and empowerment where guests and community members have the opportunity to give back to the shelter by providing one dollar for their meal.

The guest pays one dollar for dinner to the Pay It Forward program (PIF), or they may pre-pay for more than one dinner at a time which is checked off on the Guest Log.

If a guest does not have a dollar, ask them for any kind of donation, but never deny a meal. Without judgement, invite them in to eat.

Staff and Volunteers will print their name(s) on green tape to wear and guests will be provided white tape with their name written on it to be worn while in the shelter.

If a guest is arriving to the shelter for the first time, they must read and sign The Guesthouse Code of Conduct (CoC). If the guest has difficulty reading and/or writing the staff or volunteer is responsible for helping the guest through the CoC.

Ask the new guest if they will need to stay the night. If so, their belongings are to be laundered upon entering the shelter and put away in an assigned locker once laundered. The guest will also be asked to shower and be given a clean set of bedding to make their bed for the night. The guest may request help from staff, or volunteer to do so.

Showers for guests are permitted during the morning until 7:00AM. Guests are asked to shower at night instead of the morning. Showers may be taken after 6:30 PM once dinner and clean-up is finished.

### **Meal Serving**

Supper is to be served starting at 5:30 through to 6:30 PM. When supper is ready to be served, the guests are called to the kitchen serving window and provided their own plate of food. On special occasions food may be served buffet style with volunteer's help to dish out the food. It is at the discretion of a guest, staff or volunteer to say grace prior to dinner. Some volunteers may ask for females and children to line up first and then men.

Guests are able to have a second serving of food once everyone has been served their first plate.

Volunteers are welcome to serve themselves a plate of supper once all guests have been served and there is enough food to go around for everyone.

Proper hygiene is very important. The kitchen area must be kept clean at all times. When preparing food for the guests and cleaning up the dishes, try to use disposable gloves. Use bleach, soap and hand sanitizers as needed.

Once dinner is finished being served, dishes should be washed using the dishwasher. The kitchen should be tidied and leftover food should be labeled with the date of preparation/served then put away in the refrigerator.

As the dining room fills with guests it becomes incumbent for the Shelter Shift Lead to oversee the dining area and be available to volunteers.

### **End of Shift**

At the end of the supper shift, all volunteers must sign-out on the Volunteer Shift Log (Located in shelter office). The Shelter Shift Lead will make notes in the Communication Log noting what was served for dinner, how many female/male guests were present for dinner and a note on how the environment was, (e.g., noisy, quiet.).

## **EVENING SHIFT 8:00 pm – 11:00 pm**

### **Start of Shift**

Shelter Shift Lead arrives by 4:45 PM and signs in for their shift(s); 5pm to 6am

Volunteers arrive and sign in the Volunteer Log-In. All volunteers should arrive at least 10 minutes before their shift for to be aware of any relevant information prior to beginning their shift.

During the evening shift there isn't anyone stationed at the front desk, therefore, evening Staff and Volunteers must always be ready to greet new guests. All new guests will read and sign a Code of Conduct with the help of Staff and/or Volunteers.

Clothing and toiletry items are kept on hand for emergency purposes.

### **Shift Operation**

It is important to be aware of knowing where everyone is in the shelter during each shift.

A key part of the evening shift is for Staff and Volunteers to interact socially with the guests. The guests usually like talking, watching TV, playing cards, Scrabble, etc. Staff and Volunteers should mingle where they are comfortable and engage with the guests if appropriate. Staff and Volunteers should never retire to a separate space and leave the guests on their own.

It is reasonable to ask a single guest if they would like to play cribbage. It is reasonable to ask a guest to be the fourth person for a game of Euchre. It is reasonable that a guest may not be able to play a whole game of Scrabble, or may need to stop every few minutes to go outside for a smoke. It is reasonable to offer a guest reading glasses if needed. It is reasonable that a guest may be more than happy to tell you details about a TV show, book or subject which you know nothing about. It is reasonable that you will leave the evening shift feeling fulfilled through a single simple action that you doubt others would appreciate. Share anyway, while preserving the anonymity of guests.

Guests who are not staying overnight are permitted to shower at the discretion of Shelter Shift Lead when the time is available to do so.

Overnight Guests are asked to shower in the evening before going to bed. Overnight guests are permitted to relax in the Common Room starting at 8 PM and some guests may wish to go to bed early. Staff/Volunteers will arrange for clean bedding to be

provided as needed. For respect of the guests, sleeping areas are to be as quiet and safe as possible.

Some guests may wish to go out for the evening and must return by 11:00 PM. Upon returning to the shelter, guests must be respectable and safe. If guests are not respectable or safe, they will be asked to leave the shelter. If there is further issue the Police will be called.

## **End of Shift**

Volunteers must sign-out on the Volunteer Shift Log and Shelter Shift Lead is responsible for completing the Communication Log.

## **NIGHT SHIFT 11:00 pm – 6:00 am**

### **Start of Shift**

Shelter Shift Lead arrives by 4:45 PM and signs in for their shift(s); 5pm to 6am

Volunteers arrive and sign in the Volunteer Log-In. All volunteers should arrive at least 10 minutes before their shift for to be aware of any relevant information prior to beginning their shift.

No one should be entering the shelter after 11:00 PM. Staff and volunteers are not permitted to open external shelter doors (building or shelter) after 11 PM. **As an exception**, at the discretion of the Shelter Shift Lead, the police, or hospital may call after hours to ask if we have a bed available for someone being released from their custody or discharged from hospital. For safety, the police/hospital are expected to pre-screen and provide information regarding the guest.

All new guests must read and sign a Code of Conduct and be briefly shown around the shelter (e.g., fire exits, washrooms). Possessions must be stored in a locker and guests are assigned a bed. Clothing is to be laundered and if deemed appropriate the guest is asked to shower and provided with a clean set of bedding.

### **Shift Operation**

It is important to be aware of knowing where everyone is in the shelter during each shift.

For safety, The Guesthouse building is locked at 11:00 PM on a daily basis and smoking is prohibited between the hours of 11:00 PM and 6:00 AM. If a guest chooses to leave after 11:00 PM they are not permitted to re-enter until 6:00 AM the next day.

Guests are typically sleeping during the overnight shift. Staff and Volunteers should be mindful of maintaining a respectable, quiet sleeping environment. Some guests may have difficulty sleeping through the night and some may get up for a bathroom break. Staff, Volunteers and Guests are asked to use their discretion in watching TV for volume and being respectful of noise while awake during the night.

During the overnight shift, Shelter Shift Lead stays awake and the volunteer may use the single room to sleep. If a situation arises during the night, Staff will wake the volunteer for extra safety and support.

### **End of Shift**

Before leaving the shelter in the morning, guests are asked to confirm if they will need to stay overnight again the next night, and if so, their name is written on the overnight guest log. This allows staff to determine the availability of beds on a daily basis.

**Note:** If a guest signs in for a bed and does not show up that night, it is marked as a “no show” in the book and the bed will no longer be available to that same guest without further discussion.

Volunteers must sign-out on the Volunteer Shift Log and Lead Staff is responsible for completing the Communication Log.

### **DROP-IN SHIFTS**

*Drop In shifts will be executed based on season, temperatures and volunteer/staff availability. TGHS will not compromise the safety of the shelter, or any individual in an attempt to conduct a drop-in session. For more information please contact the Community Engagement Coordinator – cec@theguesthouseshelter.ca*

### **Start of Shift**

The Arriving Shift Volunteers procedures (as described in the Supper Shift Section above) must be followed during the drop-in shift.

Incoming Shelter Shift Leads, or TGHS staff will review the Communication Log and may (as required) conduct a short “shift meeting” to alert arriving volunteers to any special issues. Regardless, as volunteers arrive and sign in, each is encouraged to check the Communication Log and talk informally to out-going volunteers regarding possible issues.

### **Shift Operation**

Operational specific may be subject to change. Duration of drop in session, location and staff/volunteer availability will be directed well before the start of drop in session. Default to super shift procedures.

### **End of Shift**

Before leaving, all volunteers must sign-out on the Volunteer Shift Log.

# **General Safety Procedures**

## **Entry for Guests**

Regardless of the time of day, every entry must be controlled. Shelter Shift Leads will oversee the entry of guests at all times. Any volunteer assigned to control entry must carry out the role in a confident and clear manner. Familiarize yourself with the code of conduct and TGHS policies relating to guests; clearly tell the guest what is expected and make sure you are satisfied that the entry is safe. If any question remains, please communicate concerns with the Shelter Shift Lead.

Guests most commonly enter the premises during the Supper shifts. During that time, the Shelter Shift Lead sits at the front desk controlling entry. The front desk acts as a visual boundary, requiring all those who enter to stop and register. When comfortable, an experienced volunteer may occupy the front desk as overseen by the Shelter Shift Lead.

## **Entry for Volunteers**

Volunteers use the same physical entry point as the guests. Volunteer safety, especially where volunteers may be entering/exiting from/to an uncontrolled area late at night should be considered.

Once entered, the volunteer should make him/her-self known to the Shelter Shift Lead.

## **Storage of Guest Bags**

Our guests live out of their backpacks. For many it is everything that they own. Please respect it. Guests' bags and other personal items must be secured in a personal locker directly after entry. Bags are not allowed into the shelter space. Guests should be warned that TGHS staff or volunteers are not responsible for items located in lockers.

All guests including meal time, one time stay, or reoccurring stays must use secured lockers located in the front entry for their daily carried items.

Guests may be asked to open their backpack/bags for inspection. If a volunteer has a suspicion regarding the contents of a guest's bag, please refer to the Shelter Shift Lead. Before asking to check the contents of a bag, guests should be reminded that any attempt to bring banned items into the shelter is grounds for being refused entry. Viewing the contents should be conducted with the Shelter Shift Lead away from other guests to preserve guests' dignity and privacy.

Occasionally a guest will want to retrieve something from his/her bag. Shelter Shift Leads are responsible to provide this service and will only comply when he/she is safely able to do so. To guard against theft, Shelter Shift Leads may appear overly-cautious as they insure the identity of the person requesting locker access.

At no time will a guest or volunteer be given access to anyone else's possessions.

## **Overnight/Reoccurring Guest Storage**

Over-night guests should be encouraged to use the lockers located in guestrooms to store clothing, common items and non-valuables – please note that these lockers are **not secured**. TGHS staff or volunteers are not responsible for items located in guestroom lockers.

Food and drinks are prohibited from being stored in guestroom lockers.

All clothing and other items must be laundered and/or inspected before entering guestroom lockers.

## **Prescription Medication**

Guests often bring in prescription medication, occasionally not in the original dispensing container. Many of these substances are highly addictive, widely abused, stolen and traded for even more potent illegal substances of abuse.

For the safety of all, the following policies are to be followed closely:

### Medication Cabinet

All guests entering The Guesthouse with prescription medication must secure medications in one of two ways. One, in the medicine cabinet located in the shelter office. Two, in an assigned guests' secured locker located in the front entrance of the shelter. If a guest refuses to do so, the Shelter Shift Lead or other staff may refuse admission to the shelter.

TGHS will strive to remind guests that TGHS cannot be held responsible for the loss or theft of the medication.

Guests should be referred to the Shelter Shift Lead, or other staff for any medication locked in the Medication Cabinet, or a guests' locker. Staff may refer the opening of the medicine cabinet to an experienced volunteer who feels comfortable doing so. Medications stored in the Medicine Cabinet must be in their original container and prescribed to the guest for whom they are being kept. Guests requiring an original container for meds should be encouraged to inquire from the pharmacy.

The Medication Cabinet is locked at all times and is only unlocked by TGHS Staff members, or their designate. Guests are NOT permitted access to the medication Cabinet. Volunteers are not permitted to access the medicine cabinet unless otherwise directed by TGHS staff. The Guesthouse Shelter will not be responsible for the administration of a guest's medication.

### **TGHS Volunteers DO NOT dispense meds!**

#### **TGHS Volunteers DO:**

1. Provide food or liquid if needed.
2. If asked, remind guests to take pills.

3. Refrigerate meds that need refrigeration . As with other medications, only the Shelter Shift Lead should pass such medication to the guest (when asked).
4. Remain vigilant to address incidents where medications are being abused or shared.

Shelter Shift Leads log each time the Medication Cabinet is opened AND any time refrigerated medications are requested by (and passed to) guests.

### **Intervening in an “Incident”**

Every effort should be made to keep things running smoothly and quietly. Heading problems off before they start is by far the best approach. If circumstances permit please refer all incidents to the Shelter Shift Lead.

Nonetheless, incidents will occur. While no complete list exists, incidents may include:

- Fist fights
- Display of a weapon, drugs or alcohol in clear violation of TGHS rules
- Verbal arguments, unexpected outbursts
- Overly aggressive behavior
- A guest persistently asking a volunteer to violate the shelter rules

Incidents are characterized by any volunteer or staff feeling that their safety or perceiving that another’s safety is threatened.

All incidents should immediately be reported to the Shelter Shift Lead. In extraordinary situations when the Shelter Shift Lead is not nearby or is otherwise busy, any volunteer has the authority to call 911 for police support. Similar to a fire emergency, volunteers must first protect their own person. Only then, assist if possible to protect other volunteers and guests.

The police will come quickly in response to any call for assistance. In rare cases where the Shelter Shift Lead is unavailable, be prepared to clearly tell police what action you wish them to take (e.g., “Joe has to leave”). Once the incident is resolved and as directed by the Shelter Shift Lead, the volunteer most directly involved in the incident will be required to write up the details on an Incident Report.

### **Relationship to the Police**

Many of us are shy about dealing with the police. We may think we shouldn’t bother them unless things are really bad. Volunteers must not think that way and are encouraged by both The Guesthouse and the police to err on the side of caution – you will not be judged poorly for requesting police assistance.

The Southern Georgian Bay OPP are as much a part of our program as you are. The police are regular visitors to the program, either checking up on how things are going or helping to resolve an incident. Welcome them when they come in for a visit. Call on them whenever things start to get out of hand. They are truly an integral part of The Guesthouse Shelter & Community Hub.

## **Police Attending an Incident**

Once called, the police will usually attend within three to five minutes. If you feel the police may have difficulty locating the incident, have two or more volunteers wait outside to direct the officers.

Once they have arrived, the police will assess the situation and take appropriate action. If a serious (criminal) incident is occurring (such as a fist fight) the police will know what to do and take action.

In many cases things will have settled down and no apparent problem will exist when the officers arrive. In these cases, the officers will ask: (ideally the Shelter Shift Lead)

- i. What has occurred?
- ii. What do you want them to do about it?

Be prepared for these questions. If no criminal offense is obvious, the Shelter Shift Lead or volunteer must propose a solution to the police that they will feel safe with. If that means that you want the officers to remove the offending guest(s) from the premises and not to return, then clearly say so. If you feel that the guest can safely remain, then say so.

Officers are likely to take volunteers aside and ask questions required to file their report. Details required will include your name, address, birthdate and a brief description of the incident.

## **Trespassing & Suspension of Service**

**Definition of Trespass:** Denial of access to all services and physical property of 522 Elizabeth Street. Enforced by the Trespass to Property Act, R.S.O. 1990, c. T.21.

**Definition of suspension of services:** The suspension of one, or multiple services administered from the location and physical property of 522 Elizabeth St. Based on individual and behavioural circumstances.

On rare occasions a volunteer may feel that a guest represents a serious and immediate threat to shelter safety. In such cases, the volunteer will alert the Shelter Shift Lead regarding the details and to determine next steps.

The Shelter Shift Lead may decide to suspend the guest for no more than one night. This decision will be communicated to the police. The offending guest will normally be escorted out of the building by the police. As an alternative, the Shelter Shift Lead may choose to ask a guest to leave the shelter for a set period of time to allow the guest to “cool off”, but not to exceed three hours. Timelines are at the discretion of the Shelter Shift Lead.

The Shelter Shift Lead will contact the Shelter Operations Manager to advise him/her of the situation and record details of the suspension in an Incident Report.

The Shelter Operations Manager, in turn, will communicate with the Chief Executive Officer as soon as possible. If circumstances require a higher level of intervention, matters may be brought to the Board of Directors via the Chief Executive Officer.

A meeting of the CEO, SOM, the guest and/or other related stakeholders may be called when determining duration of suspended services.

Copies of a “Notices of Trespass” will be delivered by TGHS staff to the Ontario Provincial Police and where possible, personally handed to the trespassed guest. Final decisions regarding the trespassing of anyone from the shelter rests on the Chief Executive Officer.

## **First Aid Kit**

A fully supplied first aid kit can be found directly in between the shelter entrance and the shelter office entrance. Be familiar with what is included.

If a guest requires first aid, where possible, let the guest apply his/her own band-aids or dressings. Where necessary, use the latex gloves supplied in the kit. Refer the use of First Aid Kits to the Shelter Shift Lead, or other staff as circumstances allow.

Note any use of the First Aid kit in the Communication Log. Include details as to what items were used and whether restocking will be needed.

## **Automated External Defibrillator (AED)**

A fully supplied AED can be found directly in between the shelter entrance and the shelter office entrance. Be familiar with what is included.

Note any use of the AED in the Communication Log. Include details as to what items were used and whether restocking will be needed.

## **The Phone**

Two working phones will always be available in the shelter – Both wired and wireless. Phones will be stationed in the shelter office. At the discretion of the Shelter Shift Lead, Guests may use the telephone, each call must be accompanied by an entry in the call log.

Phones should be wiped with a disinfectant solution daily.

The Phone is not to be used by volunteers for personal calls, except with regards to teenage volunteers, where a parent calling in should always be able to reach his/her volunteering child, and a teenage volunteer should always be allowed to call a parent in an emergency.

On occasion, the Shelter Shift Lead may allow a guest to use **the wired phone** (e.g., to contact a family member, to contact an employer). Before allowing guests to use the phone, the Shelter Shift Lead will:

1. Insure that a cell phone is nearby for emergency use.

2. Remind the guest that calls need to be brief.

Volunteers or staff will dial the number and then pass the wired handset to the guest. All TGHS calls are logged in the binder on the Phone Call Record Sheet.

## **Confidentiality**

Guests are to be treated with dignity and respect at all times. In talking with the guests they may provide you with very personal information about their life and situation. Personal guest information should not be divulged outside of the program except where there is imminent risk of personal harm (e.g., a guest reveals his/her intent to beat-up another guest the first chance he/she gets). A guest's personal information should only be provided to those who have a lawful need to know (i.e., in the above example, the OPP).

Similarly, all volunteer related information provided to the TGHS program is kept strictly confidential. If the volunteer wishes to release personal information to the guest, he/she may do so. However, you are strongly cautioned not to tell guests your last name, address, phone number, or any other information that could identify you outside of the program.

Under no circumstances are volunteers under the age of 18 to share any information beyond their name and general information such as family members, favorite subjects and TV programs. If in doubt, teen volunteers should seek the guidance of a designated parental figure or the Shelter Shift Lead.

## **Sharps (Syringes)**

On rare occasions, a syringe has been found either in the facility or just outside. Syringes (or any sharp) are a safety hazard and must be disposed of properly in the "Sharps" disposal bin. (Disposal bins are located in every guest bathroom, the Level 1 bathroom and on the west exterior wall off the Easy Street entrance. Whenever possible, such a procedure will be carried out by the Shelter Shift Lead or designated on call staff member.

Before attempting to dispose of a sharp, ensure that you are able to handle it safely. Seek prick resistant gloves from the shelter office (located on top of medicine cabinet). Keep onlookers to a minimum (You may need another volunteer to help.). Use disposable gloves when handling any sharps containers or paraphernalia. When possible, bring an additional sharps container (located with on top of medicine cabinet) close to where you have found the sharp. In a safe manner put the sharp into the disposal unit. When removing the gloves, turn them inside out as you take them off so as not to contaminate your hands or anything else they may come in contact with. Then dispose of them safely.

Once the disposal is complete, the volunteer/staff most directly involved in the incident will be required to write up the details on an Incident Report.

## Non-Guest Incidents

Incidents requiring a report need not involve guests. For example, an injury to a volunteer (e.g., cut on broken glass or serious fall) should be documented in an Incident Report. When in doubt, err on the side of caution and complete a report.

## Age of Volunteers

TGHS volunteers traditionally have been at least 18 years of age. However, in recent years volunteers younger than 18 years have contributed greatly to the program, inspiring older volunteers and staff.

As a result, TGHS now welcomes younger volunteers (14-17 years of age), as long as a parent or designated guardian is working at the same time as the underage volunteer(s). Parents or designated guardians should be vigilant to provide extra support as needed whenever tasks or situations arise beyond the expected capacity of underage volunteers.

## Workplace Hazardous Materials Information System

The Workplace Hazardous Materials Information System (WHMIS) is a Canada-wide system designed to give employers and workers information about hazardous materials used in the workplace. Under WHMIS, there are three ways in which information on hazardous materials is to be provided:

1. Labels on the containers of hazardous materials (see example below).
2. Material safety data sheets, which are compiled within a WHMIS binder and kept in an accessible place. The data sheets supplement the label with detailed hazard and precautionary information
3. Worker education programs.

The shelter WHMIS binder is located in the shelter office. Volunteers and staff should look through the binder to become familiar with known hazardous materials. Shelter Shift Leads will have further training regarding WHMIS standards and thus able to answer some of the questions Volunteers may have regarding WHMIS.



## Fire Emergency

### Fire Procedure

The Fire Department can be reached by dialing

**911 or (705) 526-4279**

**Before trying to help others in an emergency, make sure you are safe.**

#### **Upon Discovery of Fire**

- Leave the fire area immediately and assist anyone in immediate danger to evacuate
- Close all doors behind you to contain the fire
- Alert other staff, volunteers and guests
- Use fire exit stairwells and doors to leave the building
- Proceed to the parking lot on south, Elizabeth St. Exit – or - the north, Easy Street parking lot and take attendance
- When safe call the fire service at 911
- The Shelter Shift Lead, or staff will meet the arriving fire crew and advise on the number of volunteers and guests and whether all are evacuated

#### **Upon Hearing the Fire Alarm**

- Leave the building immediately and alert/assist anyone in danger to evacuate
- Use fire exit stairwells and doors to leave the building
- Close all doors behind you to contain the fire
- Proceed to designated outside assembly area and take attendance
- When safe, call the fire service at 911

#### **Fire Safety Precautions**

All TGHS volunteers and staff should understand the fire evacuation plan. Details are illustrated on a map found in this manual on page 28, and include:

- Two fire exits: (1) leading from the dining room to the main entrance and exit of the shelter, north side of building, (2) leading from the common room, south side of building. These are to be used by the staff, volunteers and guests.
- The designated assembly points, in the municipal parking lot across on First St. and Easy St. All guests and volunteers must remain at the assembly point until allowed to leave by the attending fire or police officers.

Once a year, all volunteers should exit the building by way of the designated exit route and walk to the designated TGHS assembly point. /cont'd.

The six TGHS fire extinguishers are located (i) left of the main shelter entrance door, directly right of the shelter office door, (ii) directly under the sink to the left of the shelter kitchen entrance (iii) located to the left of the shelter kitchen fridge, (iv) automatic fire suppression system for rangehood, (v) located on the left side of hallway wall in between bathroom entrances, (vi) located in common area slightly left of the fire exit door. All volunteers should be aware of the extinguisher locations and how and when to use them.

The carbon monoxide detectors are located in the kitchen pantry/storage area, in the shelter hallway, in the medical exam room, in the custodial storage room and one located in every sleeping area (guestroom).

Smoke/Heat detectors are located in the shelter office space, the main dining area, the shelter hallway, the kitchen, the pantry storage area, custodial storage area, in all guestrooms, in the common area, the laundry room and both north and south entrance/exit ways.

The use of candles or open flames is not permitted at any time. Deviation may be acceptable in terms of religious/spiritual needs. Consult with SSL staff, or Shelter Operations Manager.

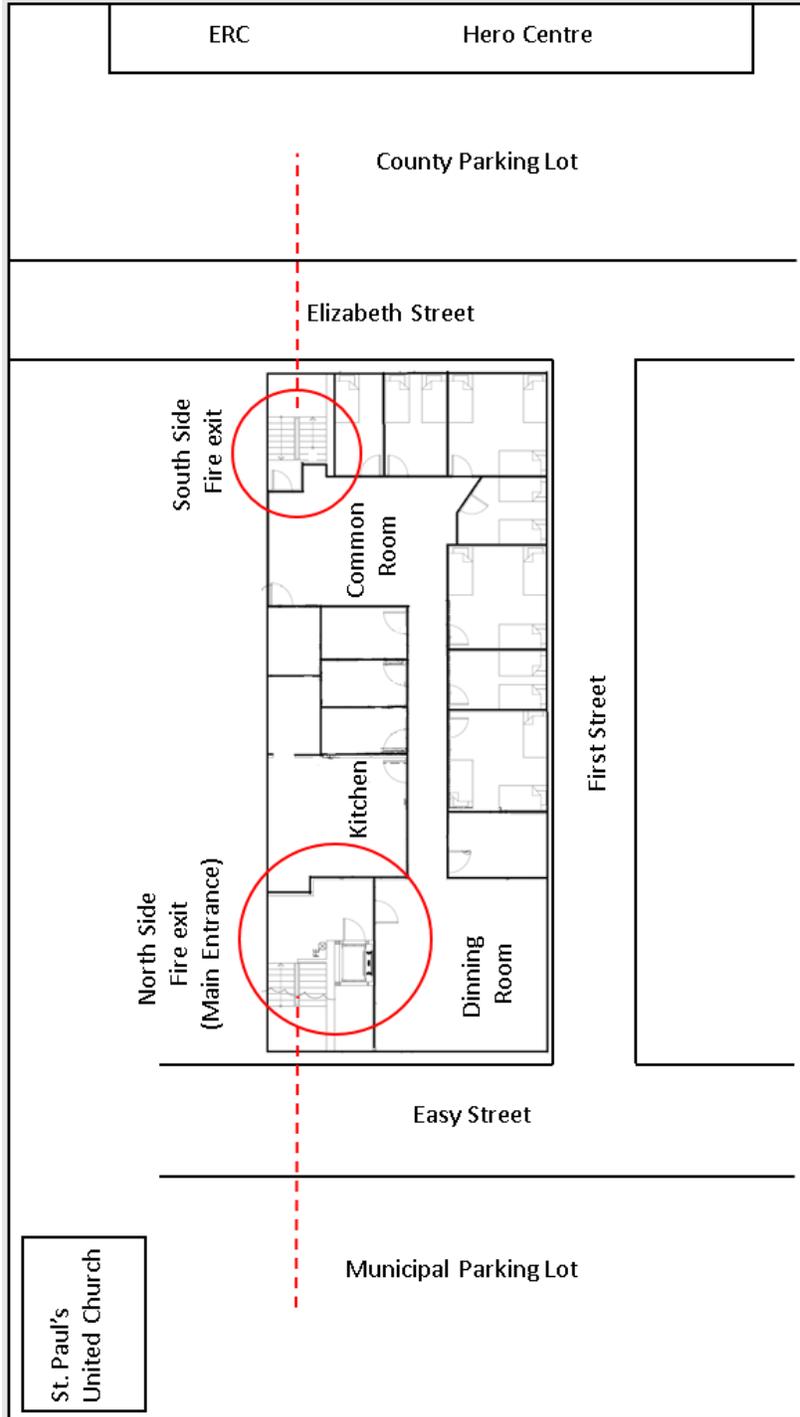
As part of the regular security rounds ensure:

- All garbage is in proper waste receptacles
- No open flames are present
- Fire exits are not locked or blocked
- All other fire safety rules are observed

Be mindful that fire safety for our guests is logically increased through relaying to them what you yourself know. For example, when showing a new guest around the facility, point out the exit door in the common room and describe what a guest could expect to encounter if he/she had to exit through that door (alarm sounding, emergency lighting, exit signs, stairwell, out to street, road, and parking lot).

**REVIEW FIRE EXIT MAP ON NEXT PAGE!**

# The Guesthouse Shelter Fire Route



## **Special Considerations**

### **Deviation and exception of policy and procedure**

The Guesthouse Shelter Operations Manual is set out to be the guideline of daily operations for shelter programming. We must remember that people who may be utilizing shelter service may be highly vulnerable and experiencing a multitude of barriers. Barriers may be as unique as the individuals themselves and as practitioners we must remember that we may encounter “grey” areas where this manual may be challenged. Danger and emergency situations will often supersede the Shelter Operations Manual and will allow for deviation of written guidelines.

This Operation Manual is a set of learned guidelines, best practices, policy and procedures. There will come times during daily shelter operations where you will have to deviate from this set of guidelines. It will be the discretion of the Shelter Shift Lead or the Shelter operations Manager to deviate from the Operations Manual’s directives. The SOM and/or SSL staff must be accountable for the deviation. All deviations will require a written response and be accessible in the Deviation Report binder located in the shelter office.

### **Families (Including Babies, Children and Youth)**

There are times when family units may need to utilize shelter services. It is important to be mindful that families go through many phases and may require some special consideration to meet their unique needs while staying in the shelter.

There are times when babies, children and youth may need to utilize shelter services. It is important to be mindful that these little people may need extra care and special considerations and protection.

All considerations will be subject to approval by the Shelter Operations Manager. Examples may include but are not limited to:

Allowing families to occupy one room, including both male, female parents and children.

Allowing a family to access the common room before 8PM. This could include allowing the family to use this space during dinner (food is not generally allowed in this area).

Early access to the common room may be permitted in order to get small children ready for and put to bed prior to 8PM.

Access to shower and bathing opportunities prior to 8PM and in the morning as needed.

More belongings and personal items may be permitted in guestrooms. Examples may include but are not limited to toys, special care items, homework supplies, etc.

Allowance of special food provisions such as school time meals, snacks, special dietary considerations. Dry foods may be kept in shelter office, or marked in pantry area and perishable products in the shelter kitchen fridge.

### **Storage of personal food items for guests.**

The storage of food for guests within TGHS equipment (fridge's, freezers, pantry etc.) will be entirely at the discretion of the Shelter Operations Manager, or the SSL and directly communicated to the SOM. Storage will be limited to those with medical, or special dietary needs, families with children and other special considerations. The general storage of food on a daily, weekly, or monthly basis is not permitted. All storage is based on the discretion of the Shelter Operations Manager and based on storage capacity.

### **Guest clothing and personal items (storage)**

If a guest is asked to leave the shelter, TGHS staff will hold their personal belonging for now more than a period of 48 hours unless specified by the Shelter Operations Manager.

If a guest's locker is abandoned for a period of 48 hours. Items will be removed and stored for an additional 48 hours, unless otherwise specified by the Shelter Operations Manager.

### **Guestrooms (bed) configuration**

The Guesthouse Shelter is committed to supporting men, women, youth and families. There are times that guestrooms may have to be reconfigured to suit the needs of any given demographic. Families (Adults & youth) may be placed into the same room, or a room to better suit the family's needs. Individuals may be assigned to different rooms to accommodate the increased usage of another gender. Individuals may be assigned to bedrooms by themselves for safety concerns.

TGHS does not exercise the reservation of guestroom beds. Beds are occupied on a first come, first serve basis. Special considerations to reserve a bed will come from a referral from partner agencies, OPP, GBGH and other shelters.

### **Harm Reduction**

Harm reduction is an integral component of the health promotion and illness prevention, treatment and care continuum. Through client-centered approaches, effective harm reduction policy and programming can achieve positive population health outcomes and reduce stigma and discrimination against those whose use of substances make them vulnerable to illness and other health harms.

TGHS promotes the use of sharps collection containers. There are five (5) sharps containers located at 522 Elizabeth St. Containers are located in three guest bathrooms in the shelter, the public bathroom on Level 1 and on the external north west wall of the building.

TGHS does not take an abstinence only or zero tolerance approach to substance use. If a guest is suspected of using (drugs or alcohol) at the time of entry, the volunteer or SSL staff must be vigilant to assess a guest's behaviour.

You may want to ask yourself:

Is the guest being respectful to others?

Is the volume of their voice acceptable?

Is the guest being respectful to the building?

Can the guest walk? How steady are they on their feet?

Does the guest pose a health risk for themselves or anyone else in the shelter space (staff, volunteers guests)?

If you feel that the guest may not be safe to enter into the shelter other considerations may be made.

You may ask the guest to leave for a specific period of time and return when the shelter is not so busy, or to give them an opportunity to collect themselves.

If entering the guest to the shelter is not an option; a good practice could be to offer the guest some type of food provision to take with them.

Naloxone is a medication that is administered to reduce fatal opiate/opioid overdose. Staff and volunteers are encouraged to administer Naloxone to persons suffering from opiate/opioid overdose at the earliest possible time to minimize chances of death.

**In a case of suspected overdoses. Call 911 Immediately.**

You will find a Naloxone kit on the immediate left, inside wall of the shelter office door.

Naloxone: an opioid receptor antagonist and antidote for opioid overdose produced in intramuscular, intranasal and intravenous forms.

Opiates: Naturally derived from the poppy plant, such as heroin and opium.

Opioids: Synthetic opiate drugs such as fentanyl, morphine, buprenorphine, codeine, hydromorphone, hydrocodone, oxycodone, methadone and oxycodone.

Opioid Overdose: an acute condition including but not limited to extreme physical illness, decreased level of consciousness, respiratory depression coma, or death resulting from the consumption or use of an opioid, or another substance with which an opioid was combined, or that a layperson would reasonably believe to be an opioid-related drug overdose that requires medical assistance.

Information that a subject is suffering from an opioid overdose includes, but is not limited to:

1. Pinpoint pupils, even in a darkened environment;
2. Depressed or slow respirations;
3. Difficulty breathing (labored breathing, shallow breaths);
4. Blue skin, lips or fingernails;
5. Decreased pulse rate;
6. Low blood pressure;

7. Loss of alertness (drowsiness);
8. Unresponsiveness;
9. Evidence of ingestions, inhalation, and injection (needles, spoons, tourniquets, needle tracks, bloody nose, etc.)
10. Blood-shot eyes; and,
11. Past history of opioid use/abuse.

**In a case of suspected overdoses. Call 911 Immediately.**

## **Laundry**

TGHS provides guests with the means to launder their clothing and bedding materials. There is one set of washing and drying machines available to guests, staff and volunteers.

When a new guest is admitted, the guest is required to launder their belongings at point of arrival.

If there are complaints that a guest's clothing and fabric materials are presenting issues to others in the shelter space (odors, bugs) the guest will be asked to launder their belongings.

Only the use of laundry soap (pods) provided in house by TGHS will be permitted to use with washing machines. No exceptions will be made for the use of other soaps and products. If alternatives are requested in the name of health and/allergens discretions must be made by the Shelter Operations Manager.

Any overnight guest (at the discretion of SSL staff) may do their laundry from 8PM to 11PM.

Inhouse laundry, including bedding, towels and other necessities will be conducted by the SSL staff from 11PM until 6AM.

Volunteers may do their laundry provided that all guests and in-house needs are met prior. Volunteer laundry will be accessed at the discretion of SSL staff.

Access to emergency clothing can be arranged to accommodate guest needs.

## **Showers**

Depending on shelter usage there may be a high demand for shower times. Showers are encouraged to be taken during the evening.

Evening showers are permitted starting at 8PM and no later than 11PM time. Shower duration is limited to 20 minutes.

Showers for new incoming guests may be granted at any time at the discretion of the Shelter Operations Manager or the SSL staff.

Special consideration for requests from families and children will be respected regarding shower usage.

To ensure safety during shower time, a staff or volunteer may knock and conduct a wellness check

## **Infection Prevention and Control**

Prevention and control of infections are necessary to allow TGHS volunteers and guests to stay healthy and to reduce the risk of infection for everyone, including not only volunteers and guests, but also our families, friends and the community at large.

It is every Ontario resident's legal responsibility to reduce the risk of exposure and infection. In particular, timely reporting of communicable diseases is mandated and essential for their control. In our area, reporting is made to the Simcoe Muskoka District Health Unit in Barrie 721-7520 x8809 (after hours number is 1-888-225-7851). A list of reportable diseases is provided in **Appendix A** of this manual.

## **Risk Factors**

At the Guesthouse our guests often have numerous risk factors that make them more susceptible to infections and disease. Risk factors include drug or alcohol dependency, lack of education, homelessness, mental illness, and poverty.

The TGHS effectively manages common emergency shelter challenges such as bed bugs and head lice. However, it is important to know that bed bugs and lice do not transmit disease.

These risk factors wear down our guests' spirits as well as their physical bodies leaving them especially vulnerable to infection and disease. It is difficult for them to stay healthy and fight infection and disease because of the challenges in maintaining good hygiene. Our guests develop a poor immune response and are thus more susceptible to disease. It is difficult for them to get nutritious food, exercise, and follow-up health care services for emerging medical issues. And finally, when people live together and share sleeping and bathroom facilities, they contact those who already have an infection, resulting in sharing an infection. Adding the risk factors mentioned above only magnifies the likelihood of an infection arising.

## **What we can all do to prevent the spread of infection and disease:**

- frequent hand washing by guests, volunteers and staff
- flu shots – to better equip the immune system
- food safety training
- frequent sanitization of food preparation surfaces and table tops
- clean washrooms
- clean linens and bagging used linens for laundry
- appropriate and immediate first aid treatment
- sharps disposal containers
- strive to maintain 2 1/2 feet (3/4 meter) between beds
- appropriate barriers for volunteers and staff such as latex gloves
- encouraging dental hygiene and professional dental care

- staying home when sick
- discourage sharing of clothing
- sweep and clean the floors
- if an infection or disease is suspected, ensure appropriate medical attention is provided



# Communications Log

## COMMUNICATION LOG

Starting Day of: \_\_\_\_\_

<u>Opening Checklist</u>	
Fire Exit Route is clear.....	<input type="checkbox"/>
Phone works.....	<input type="checkbox"/>
Tables washed <u>uv</u> .....	<input type="checkbox"/>

Maximum guests this shift		Shift Description
M	F	
		<b>Breakfast Shift</b>
		<b>Number of Incident Reports</b>
		<b>Dinner Shift</b>
		<b>Number of Incident Reports</b>

Cont./Starting Day of: \_\_\_\_\_

<b>M</b>	<b>F</b>	<b>Evening Shift</b>
<b>Number of Incident Reports</b>		
<b>M</b>	<b>F</b>	<b>Night Shift</b>
<b>Number of Incident Reports</b>		
<b>M</b>	<b>F</b>	<b>Drop In Shift</b>
<b>Number of Incident Reports</b>		

## Volunteer Log In

# Volunteer Shift Log In

Starting Day Of: \_\_\_\_\_

Shift	Name (Print)	Time In	Time Out
<b>Breakfast Shift</b>			
Volunteer			
Volunteer			
<b>Dinner Shift</b>			
Front Desk <b>Lead Staff</b>			
Volunteer			
<b>Evening Shift</b>			
<b>Lead Staff</b>			
Volunteer			
<b>Overnight</b>			
<b>Lead Staff</b>			
Volunteer			
<b>Drop-In Shift</b>			
Volunteer / Staff			
<b>Notes:</b>			

## Incident Report

### GUESTHOUSE INCIDENT REPORT

**Date of incident:** \_\_\_\_\_ **Author of report:** \_\_\_\_\_

**Persons involved:** \_\_\_\_\_

\_\_\_\_\_

**Details of incident:**

**Action taken:**

**Team Leader Report/Action:**

## Deviation Report

### GUESTHOUSE DEVIATION REPORT

Date of deviation \_\_\_\_\_ Author of report: \_\_\_\_\_

Persons involved: \_\_\_\_\_

Details of deviation:

Rationale (why did you deviate?):

Supervisor Report/Action:

# Overnight Guest Sign In

**Team Leader:** \_\_\_\_\_

**Volunteer:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## Overnight Guest Sign In

<b>Guest Room Number</b>	<b>Guest Name / Comments</b>
Room A1	
Room A2	
Room A3	
Room A4	
Room B5	
Room B6	
Room B7	
Room B8	
Room C9 (Female)	
Room C10 (Female)	
Room D11	
Room D12	
Room D13	
Room D14	
Room D15	
Room E16 (Female)	
Room E17 (Female)	
Room 18 (Single/Volunteer)	







# Appendices

## Appendix A – Communicable Disease Reporting



Simcoe Muskoka District Health Unit  
**Communicable Disease Program**  
 15 Sperling Drive Barrie, ON L4M 6K9

Phone: (705)721-7520 ext. 8809  
 After hours: 1-888-225-7851  
 Fax: (705) 733-7738

# Communicable Disease Reporting

Timely reporting of communicable diseases is mandated and essential for their control. If you *suspect* or have confirmation of the following specified Reportable Diseases or their etiologic agents, (as per Ontario Regulation 559/91 and amendments under the *Health Protection and Promotion Act, R.S.O. c.H.7*) please report them to the local Medical Officer of Health.

### REPORTABLE COMMUNICABLE DISEASES

Note: Diseases highlighted (and influenza in institutions) should be reported immediately to the Medical Officer of Health by telephone. Other diseases can be reported by the next working day by fax, phone, or mail.

Acquired Immunodeficiency Syndrome (AIDS)	Group B Streptococcal disease, neonatal	Psittacosis/Ornithosis
Amebiasis	<b>Haemophilus influenzae b disease, invasive</b>	<b>Q Fever</b>
<b>Anthrax</b>	<b>Hantavirus pulmonary syndrome</b>	<b>Rabies</b>
<b>Botulism</b>	<b>Hemorrhagic fevers, including:</b>	<b>Respiratory infection outbreaks in institutions</b>
<b>Brucellosis</b>	1. Ebola virus disease	<b>Rubella</b>
Campylobacter enteritis	2. Marburg virus disease	Rubella, congenital syndrome
Chancroid	3. Other viral causes	Salmonellosis
Chickenpox (Varicella)	<b>Hepatitis, viral</b>	<b>Severe Acute Respiratory Syndrome (SARS)</b>
Chlamydia trachomatis infections	1. <b>Hepatitis A</b>	<b>Shigellosis</b>
<b>Cholera</b>	2. Hepatitis B	<b>Smallpox</b>
<b>Clostridium difficile associated disease (CDAD) outbreaks in Public Hospitals</b>	3. Hepatitis C	Syphilis
<b>Cryptosporidiosis</b>	4. Hepatitis D (Delta hepatitis)	Tetanus
<b>Cyclosporiasis</b>	Herpes, neonatal	Transmissible Spongiform Encephalopathy, including:
Cytomegalovirus infection, congenital	Influenza	1. Creutzfeldt-Jakob Disease, all types
<b>Diphtheria</b>	<b>Lassa Fever</b>	2. Gerstmann-Straüssler-Scheinker Syndrome
<b>Encephalitis, including:</b>	<b>Legionellosis</b>	3. Fatal Familial Insomnia
1. Primary, viral	Leprosy	4. Kuru
2. Post-infectious	<b>Listeriosis</b>	Trichinosis
3. Vaccine-related	Lyme disease	Tuberculosis
4. Subacute sclerosing panencephalitis	Malaria	<b>Tularemia</b>
5. Unspecified	<b>Measles</b>	<b>Typhoid Fever</b>
<b>Food poisoning, all causes</b>	<b>Meningitis, acute</b>	<b>Verotoxin-producing E. coli infection indicator conditions including:</b>
<b>Gastroenteritis, institutional outbreaks</b>	1. bacterial	<b>Haemolytic Uraemic Syndrome (HUS)</b>
<b>Giardiasis, except asymptomatic cases</b>	2. viral	<b>West Nile Virus Illness</b>
Gonorrhoea	3. other	Yellow fever
<b>Group A Streptococcal disease, invasive</b>	<b>Meningococcal disease, invasive</b>	Yersiniosis
	Mumps	
	Ophthalmia neonatorum	
	<b>Paratyphoid Fever</b>	
	Pertussis (Whooping Cough)	
	<b>Plague</b>	
	Pneumococcal disease, invasive	
	<b>Poliomyelitis, acute</b>	