

Knowledge Summary: Plan for COVID-19 and Non-COVID-19 Care

Learning Together: Emergency Shelters and Substance Use Centres
March 2022



About Learning Together

The COVID-19 pandemic widened existing care and health gaps in emergency shelters and substance use centres. In February 2021, [Healthcare Excellence Canada](#), in collaboration with the [BC Patient Safety & Quality Council](#) and the [Canadian Centre on Substance Use and Addiction](#), launched the [Learning Together: Emergency Shelters and Substance Use Centres Program](#) to share real-time learnings across these care settings. This was a response to an urgent need to quickly improve supports for underserved people and those who care for them.

Knowledge summaries

Emergency shelters and substance use centres have had to adapt to changing public health measures while still responding to multiple ongoing public health emergencies, including the housing and drug toxicity crises.

Recognizing the complex intersections between these emergencies, six promising practices were identified to guide pandemic response and preparedness and share 'lessons learned' across the sector.

These promising practices are covered in a series of three knowledge summaries: people in the workforce, preparation and prevention, and plan for COVID-19 and non-COVID-19 care.

Plan for COVID-19 and non-COVID-19 Care

Planning for COVID-19 and non-COVID-19 care, in terms of consistent access to quality care, was identified as a promising practice with four key areas for improvement:

- Ensuring all clients have a current, person-centred, integrated care plan and access to programming.
- Supporting access for all clients to high-quality primary healthcare or substance use treatment plan that can be delivered in place during the outbreak.
- Establishing a contingency for prioritizing critical and non-essential services.
- Providing psychosocial supports for clients during an outbreak.



Knowledge you can use

Here are some practices that were found to be effective by those working in the sector (emergency shelters and substance use centres) and facing the demands of the pandemic:

- Focusing on trauma-informed, culturally safe, relationship-centred care for harm reduction to improve care delivery ([learn more](#)).
- Embedding a community of care by accepting substance use, understanding trauma, and recognizing the complex needs of clients to improve the quality of care they receive ([learn more](#)).
- Providing medical and palliative care, through a mobile street and shelter palliative care program, to improve quality of life, pain and symptom management, and emotional/psychological/psychosocial support ([learn more](#)).
- Leveraging expertise and resources in the sector by joining a network of organizations to achieve change in the face of initial, current and anticipated challenges of the COVID-19 pandemic ([learn more](#)).

Webinars

For more information on how to plan for consistent access to quality COVID-19 and non-COVID-19 care, check out these recordings and recaps of past Learning Together webinars.

Harm Reduction with the [Dr. Peter Centre](#) highlights strategies for providing person-centred harm reduction services during the pandemic and in times of crisis. Watch the webinar [here](#) or read the webinar summary [here](#).

Equitable Care: [The Palliative Education and Care for the Homeless \(PEACH\) Program](#) showcases strategies used by the PEACH program to support those experiencing homelessness and how this program has been adapted during the COVID-19 pandemic. Watch the webinar [here](#) or read the webinar summary [here](#).

Pivoting Quality Care Delivery during the Pandemic

The Learning Together program highlighted an innovative peer-run and peer-led service that, through a toll-free phone line, provides remote supervised consumption services to people who are using substances alone. This collaborative initiative between people who use substances, Dr. Monty Ghosh, Grenfell Ministries and the Brave Technology Co-op, known as the National Overdose Response Service (NORS), makes overdose support available to people in Canada 24/7.

The idea for the NORS initiative originated from someone with living experience of substance use who shared with Dr. Ghosh that their practice when using substances alone was to call a friend who could dispatch emergency services in the event of a suspected overdose.

Recognizing the increasing number of people who are using substances alone during COVID-19, the NORS initiative illustrates an innovative way to provide consistent access to quality care that leverages the experiences and expertise of those who use substances. Watch the webinar [here](#) or read the webinar summary [here](#) to learn more.

Strategies for Change: Exploring the Anticipated Challenges of COVID-19 Recovery

shares strategies for change and adaptation in the context of the initial, current and anticipated challenges of the COVID-19 pandemic for those working in the homelessness sector. Watch the webinar [here](#) or read the webinar summary [here](#).

Strategies for Sustainability: How to Sustain Gains during Pandemic Recovery introduces the concept of sustainability and showcases strategies for sustaining promising practices as the anticipated challenges of COVID-19 recovery unfold. Watch the webinar [here](#) or read the webinar summary [here](#).

More Resources

- [ICHA: PEACH Program](#)
- [TOO LITTLE, TOO LATE: How we fail vulnerable Canadians as they die and what to do about it](#)

Healthcare Excellence Canada works with partners to spread innovation, build capability, and catalyze policy change so that everyone in Canada has safe and high-quality healthcare. Through collaboration with patients, caregivers and people working in healthcare, we turn proven innovations into lasting improvements in all dimensions of healthcare excellence. Launched in 2021, HEC brings together the Canadian Patient Safety Institute and Canadian Foundation for Healthcare Improvement. HEC is an independent, not-for-profit charity funded primarily by Health Canada. The views expressed herein do not necessarily represent the views of Health Canada.