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How the Shepherds of Good Hope put the brakes on a COVID-19 outbreak

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TRENDING

For eight weeks, staff at the Shepherds of Good Hope watched and waited for the pandemic to arrive at their doorstep.

They knew it was coming.

The poor and the homeless are always visited by opportunistic crises: fentanyl, AIDS, crack, hepatitis. COVID-19, they understood, would be no different.

“We were preparing for the worst-case scenario,” says Deirdre Freiheit, president and CEO of the Shepherds.

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CEO of the Shepherds of Good Hope, Deirdre Freheit JULIE OLIVER/Postmedia

COVID-19 walked in the door unannounced in early May and slept in one of the shelter's units. One week later, on May 14, Ottawa Public Health told shelter officials that a client had tested positive for the respiratory virus.

Within days, five Shepherds' clients had been diagnosed with COVID-19.

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and many have pre-existing health conditions, such as diabetes, liver disease and chronic lung disease, which exacerbate their risk.

Layered on top of those issues are mental health problems and addictions, often rooted in personal traumas, that can make each day a challenge.

Public health officials feared that COVID-19 would travel like wildfire in the homeless population, which is concentrated around four downtown shelters. Some worried it would overwhelm the city's health care system.

Thanks to an extraordinary response, however, the outbreak at the Shepherds was extinguished before it could spread. The outbreak was officially declared over last week. No one in the city's homeless community has died from COVID-19.

“We understood early on the importance of trying to contain any sort of outbreak,” says Wendy Muckle, executive director of Ottawa Inner City Health, one of the key architects of the health care response.

The story of that response offers lessons in planning, co-ordination and care that apply well beyond the hard blocks of Murray Street.

It was in late December that Wendy Muckle first heard about a mysterious virus that was causing atypical pneumonia in China. From experience, she knew to pay attention.

“Pandemics typically hit people who are poor harder than the rich,” she says.

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Wendy Muckle, Executive Director of Ottawa Inner City Health WAYNE CUDDINGTON/jpg

Muckle has lived through SARS and H1N1 — epidemics that delivered glancing blows to the city’s homeless population. But as COVID-19 raced around the globe, Muckle and her colleagues grew increasingly worried: “By January, we were all saying to ourselves, ‘It’s coming and this one’s going to be big.’”

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A registered nurse, Muckle co-founded Inner City Health two decades ago in an effort to deliver a broad range of health services to the homeless where they lived. The agency works closely with the city's four downtown shelters: The Shepherds, The Ottawa Mission, The Salvation Army Ottawa Booth Centre and Cornerstone Housing for Women. It operates health care units in each of the facilities.

In January, Inner City Health began to prepare for the pandemic. It ordered thermometers and personal protective equipment while updating infection prevention and control protocols. One month later, Muckle recognized a more robust plan would be needed.

“Italy, I think, kind of shook all of us to the core,” she says. “It’s one thing to deal with a pandemic; it’s another thing to see a health care system collapse.”

To complicate matters, Inner City Health’s order for personal protective equipment (PPE) had been botched. A medical supplier failed to fill the order because it mistakenly believed the agency was not on the province’s allocations list for PPE, which was in such short supply that it had to be rationed. By the time the error was recognized, most of the equipment was gone.

“We started this pandemic with no masks, no gowns, no face shields,” says Muckle.


Plans from an earlier epidemic helped save the day. The Salvation Army discovered an unused pallet of N95 masks that had been bought for the H1N1 crisis. The masks had been sitting in a loading dock since 2009 — all but forgotten until the eve of the COVID-19 pandemic.

The masks — almost 10,000 of them — were shared across the downtown shelter system.

Inner City Health hired a linen service to supply fresh gowns. Volunteers supplemented those supplies by sewing thousands of gowns and facemasks, while face shields were sourced from a donor with access to a 3D printer. The Dairy Distillery, an Almonte firm that switched its production line from vodka to COVID-19 cleaning supplies, donated thousands of bottles of hand sanitizer.

A central tracking system was created so that shelters could report their PPE requirements and share supplies. Once a week, a conference call updates each shelter’s situation.

“It means that if someone is at a critical level, we can move supplies between locations,” explains Muckle. “Everybody helps everybody.”

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The Shepherds ramped up cleaning services at its shelter and four residences. Together, the facilities serve more than 400 people. The cleaning staff was tripled, and high-touch surfaces, such as faucets and doorknobs, were sanitized every 10 or 20 minutes.

“Based on what we had learned from other countries, we knew the cleaning protocols were critical,” says Freiheit.

Clients were greeted at the door by shelter staff with bottles of hand sanitizer; they stressed the importance of hand-washing, physical distancing and covering coughs.

Inner City Health placed someone on call 24-hours-a-day to help shelter staff identify and handle potential COVID-19 cases.

Clients often arrive at shelters with coughs or colds, complicating the identification of someone with COVID-19. Inner City Health advised shelter staff not to worry about a chronic cough, but to note significant changes in an individual’s condition. They also recommended that staff closely monitor clients’ temperatures since fevers were associated with 80 per cent of COVID-19 cases in other shelters.

Meanwhile, the Shepherds closed its soup kitchen because physical distancing proved impossible in the Murray Street facility, which usually fed 700 people a day. Even more were showing up during the pandemic.

“We had to figure out a better way to feed people,” says Freiheit.

A staff parking lot was quickly converted into an open-air soup kitchen with tents and picnic tables. Lines were painted on the ground to direct the required physical distancing.

“Within 10 days,” Freiheit says, “we had changed how we provided almost all of our services.”

The City of Ottawa helped finance the changes by funnelling \$1.65 million in federal and provincial grants to local homeless agencies by the end of March. The Shepherds also worked with the city to move some of its clients out of overcrowded shelters and into temporary accommodations at the Jim Durrell Recreation Centre.

Other elements of the COVID-19 preparedness plan were also put in place.

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City officials recognized the importance of the project, and quickly arranged a tour of the Routhier Community Centre. The Guigues Avenue facility was converted into a 40-bed isolation centre with Wi-Fi, nursing facilities and a portable generator within one week.

“The city moved heaven and earth to make everything work for us,” says Muckle.

Says Paul Lavigne, the city’s manager of homelessness programs and resource services: “It was the fastest thing we’ve ever organized. Everyone just dropped whatever they were doing. This was their only priority.”

The centre opened March 23, but officials quickly realized that drug users were not going to stay in isolation voluntarily if they couldn’t get access to drugs.

Inner City Health sought and received federal approval to provide opioid-addicted patients at Routhier a safe place to inject the drugs prescribed to get them through isolation. The agency received a temporary Health Canada extension to its existing controlled substances exemption. (Since 2017, Inner City Health has operated one of the province’s largest supervised injection sites, The Trailer, on King Edward Avenue.)

“You have to appreciate: We’re in the middle of a really significant opiate crisis in Ottawa,” says Muckle. “We knew we had a population of people who might not really enjoy the isolation process.”

All of the shelters pitched in to run the Routhier centre: The Mission provided the food; the Shepherds handled the laundry; the nursing team came from Inner City Health.

Readying for the worst, Inner City Health also gathered the equipment for another 40-bed isolation unit at Patro d’Ottawa that has yet to be used.

The first crack in the shelter system’s defences came at the 61-bed facility operated by Cornerstone Housing for Women. One woman was diagnosed with COVID-19 in early April, and two more a month later. All of the women were isolated at the Routhier centre.

Curiously, all three women worked in the health care system, two as personal support workers.

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At the Shepherds, the next phase of a COVID-19 response plan was triggered the moment that officials learned one of their clients had tested positive on May 14. “We kicked into gear right away,” says Freiheit.

The individual was moved to the Routhier centre, and clients in that section of the shelter were told to self-isolate. Everyone on the unit was tested for COVID-19 twice; clients were asked to stay in their rooms; meals were brought to them; everyone was asked to wear a mask.

Still, no one in the shelter has a single room, and the bathrooms are all shared. “You know at this point, you’re not eliminating risk, you’re minimizing it,” says Muckle.

Two clients tested positive for COVID-19 despite being asymptomatic. They were moved to the isolation centre along with all of their roommates.

More than 300 people — almost all of the Shepherds’ downtown clients and staff — were subsequently tested for COVID-19. A fourth client tested positive May 18, then a fifth.

The shelter’s infection response was repeated, and staff held their collective breath while waiting to see if their COVID-19 levee would hold.

Last Friday, the Shepherds emerged from the 14-day waiting period, its outbreak officially over.

“We’re tired but we’re inspired: We’ve been working around the clock, but the whole community has been outstanding,” says Freiheit, who lauded the work of staff, volunteers, clients, shelter colleagues, public health and city officials.

Muckle, too, is full of praise for the co-operative effort. “But I don’t feel like we should be complacent or patting ourselves on the back yet,” she warns. “I kind of feel like we’re tiptoeing through the minefield and we’ve made it part way across the field: I feel like we could step on a mine any day.”



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