



## Toronto Voluntary Isolation Centre responds to community need and reduces spread of COVID-19

**When community members were told by health authorities that they needed to isolate, many responded with questions such as “Where? How? How do I do that in my home when I have five people in a one-bedroom?” People needed a place they could go to isolate away from others to reduce the spread of COVID-19 in their homes. The Toronto Voluntary Isolation Centre was developed in response to this need. Flexible processes, respectful partnerships and well-supported staff were instrumental in reducing the risk of COVID-19 transmission and protecting community members.**

### Responding to needs for isolation support

Toronto Public Health is well-informed about the housing crisis in Toronto. A lack of accessible and affordable housing contributes to housing insecurity, which can result in people experiencing homelessness, living on the street or in encampments, or living in crowded conditions. In each of these settings, communicable or infectious disease management is significantly more challenging.

While conducting case and contact management during the COVID-19 response, Toronto Public Health staff would inform individuals that they needed to self-isolate. Many people responded with “Where? How? How do I do that in my home when I have five people in a one-bedroom?” Community members were also reaching out to the COVID-19 Hotline, a phone line for isolation support, wondering how they could cook, get their groceries, get to the shower or access shared living spaces when they needed to isolate but were living

This Equity in Action story is distilled from an interview with Sandy Zidner, Manager, Child Health and Development, and Rachael Markovsky, Manager, Communicable Disease Control, at Toronto Public Health. The interview took place in January 2023, and its details should be considered within the context of that time period.

with others. These phone calls revealed that people needed a place to go to safely isolate away from others during the pandemic. Hospitals weren't an option. In response, Toronto Public Health requested federal funding for a site that could support this need, and the Toronto Voluntary Isolation Centre (TVIC) was created.

In September 2020, TVIC opened to provide people who tested positive for COVID-19 with a place to isolate to reduce COVID-19 transmission in their homes. People could also stay at the centre if they were at risk of COVID-19 infection after being in contact with someone who had tested positive. TVIC developed criteria to determine who was eligible to access the centre, if they chose to, which prioritized the safety of community members and staff.

### Getting the centre up and running

With funding in place, Toronto Public Health had to determine how to operationalize an isolation centre. As this was new territory, staff conducted literature reviews and key informant interviews to learn from what had been done elsewhere. The team also spoke with the City of Toronto's Shelter Support and Housing Administration since they had already implemented an isolation site for people accessing shelter services who tested positive.

Toronto Public Health was the lead agency for TVIC and thus responsible for funding, day-to-day operations at the centre and reporting. The team engaged key partners including Corporate Real Estate Management, Toronto Paramedic Services, Corporate Security and Shelter Support and Housing Administration within the City of Toronto. As the Shelter Support and Housing Administration already had a partnership with the Silver Hotel Group, having set up the isolation site to support community members who access shelter services, we were able to build on that relationship.

### Navigating partnerships with humility and respect

Each partner brought their own expertise to the centre to fill the various roles that were needed on site. This kind of centre had not existed before, there was no manual, and it was important to keep reminding ourselves of this. It was critical to be open to ideas and respect diverse experience and expertise.

For example, Toronto Paramedic Services was already conducting COVID-19 testing for the community and they had protocols in place, so they directed how this would work at TVIC. They developed a plan, and the team worked together to operationalize it. We developed documents together to detail the roles and responsibilities of each partner and how the team would work together.

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Open communication was crucial to working collaboratively. To facilitate this, every morning, 7 days per week, we held a huddle with all partners in the hotel lobby — 6 feet apart — to go over any issues or challenges we had faced and problem-solved together, as well as share successes. Even the hotel owners would call us during the day or stop by to check in and help us troubleshoot any issues together.

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### Getting people into the centre by tackling barriers

Once the isolation centre was open, we had to navigate challenges to ensure TVIC was being used by community members who needed it. We received feedback from people using the site that other community members weren't aware that our centre existed. We also received feedback about the phone line people used to request a stay at the centre. When demand was high, people would be placed on hold and, after an hour, their call would be dropped. Sometimes, there would be such a backup of calls that people couldn't get through at all.

In response, a partnership was formed with the COVID-19 Assessment Centre and a direct referral pathway from the assessment centre was developed for those who needed a safe place to isolate while awaiting test results. We also created a direct referral pathway for the COVID-19 Equity Action group, a group of about 10 partner agencies working in areas of the city where health inequities have been identified. This helped streamline some of processes with local community health centres and engage community members who needed our services.

We developed another critical partnership with the University Health Network Women's College Hospital to support people who were traveling into Toronto for care. People who tested positive for COVID-19 and who needed to be in Toronto for a few days for cancer treatment or transplant care stayed at the isolation centre while attending their hospital appointments before returning home. This response was the result of relationships as an associate medical officer of health learned about this need in a meeting with community partners.

### Adapting services as community needs evolve

Adaptability and flexibility were really important to meeting community needs. There were only a few Toronto Public Health staff members working at the centre, two doing formal intakes and one supporting bookings, so there were limitations in how quickly people could get to the centre. When demand increased during the many COVID-19 waves, staff working on the COVID-19 Hotline were trained to collect the basic minimum information from community members to determine if they qualified for a stay at the centre. There were



## Toronto Voluntary Isolation Centre

If you or someone you live with has COVID-19 & need a private space to self-isolate



**Provides free, comfortable, safe & secure accommodations**



**Rest & recover without worrying about exposing others**



**Offers healthy meals & snacks throughout your isolation period**



**Call the COVID-19 Hotline at 416-338-7600 for more information**

only one or two instances throughout TVIC's existence where someone couldn't get to the centre that same day.

We adapted our approaches as we heard feedback, tried new ways of doing things and listened to the expertise around the table. Respecting our partners' diverse knowledge and skills allowed us to work effectively as a team. Allowing partners autonomy in their work at the site helped everyone feel good about coming to work and the people they worked with.

### **Adaptability and flexibility were really important to meeting community needs.**

#### **Assessing the centre's impact through evaluations**

Throughout the project, we built in time to hear from people using our centre through satisfaction surveys. We took their feedback seriously, and improvements were made to meet community members' needs. Examples of these changes include creating a playroom for young children, a smudging room, and a prayer place, and altering protocols so couples and families could stay together.

With the support of Public Health Ontario, we also conducted an evaluation to improve processes at the centre and to explore if the centre helped reduce the spread of COVID-19 in people's homes. Over 80% of people said staying at TVIC helped prevent the spread of COVID-19 in their homes. Sometimes, as people were leaving the centre, they would say to staff "Thank you so much; nobody at home got COVID" or "I was able to protect my mother" or "I was able to protect my kids" or "Thank you for letting us come." That feedback was a powerful reminder that we were doing something really important.

#### **Supporting staff to support community members**

Managing an isolation centre was not something anyone had previously done as public health staff, but the amazing team that was developed was the backbone of TVIC. When more staff were needed, they were selected based on their interest and their skills. It was a priority to ensure there was enough time to support the TVIC team as supporting staff can often be overlooked by other demands, such as data collection and financial reports, during an emergency situation. It takes time and emotional energy to support a team in navigating challenges and frequent changes, but the value of this cannot be underestimated.

It was challenging for the TVIC team to be on site every day while many public health staff were able to work from home. We made sure to develop a comprehensive safety plan as we did not want a COVID-19 outbreak at TVIC. There was also a strong focus on providing staff support, whatever that may look like. The TVIC philosophy was that if you look after your team members, they will look after the community.

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#### **Leveraging lessons to sustain flexible, collaborative approaches**

When we look back at how many people we helped (over 2200 individuals), all the processes we came up with and revised, and all the feedback we've received from people who stayed at the centre, we feel proud of what we've accomplished. The lessons from these efforts will be applicable to other public health issues and events in the future.

On a final note, there are stories from this response that demonstrate the severity of the housing crisis in Toronto and the challenges that people were navigating as they tried to follow isolation guidelines. The TVIC team found the following three stories very impactful.

The team provided support to many international students throughout the pandemic who were navigating housing inequities such as crowded living conditions. For example, there was one situation where two students who didn't have a relationship with one another were sharing not only a room but a bed. Each of the students requested a stay at TVIC after developing COVID-19 symptoms and testing positive.

There was a young man who called us from inside of a closet he had been isolating in. He had been afraid to leave the closet because other people in the home had tested positive for COVID-19 and there was nowhere for him to go. These examples were eye-opening as they demonstrate how influential social determinants of health such as housing are to people's well-being.

In the third situation, which really stood out for us all, the TVIC team worked with a taxi company until well after midnight to find a gentleman who did not have a home and was out in a snowstorm. The isolation site for individuals who access the shelter system was full and could not take him in; however, TVIC had a space so he stayed the night. Being willing to do what needed to be done allowed the team to put community members' needs first. Each of these examples illustrates the complexity of conditions people are navigating.

As someone said, desperate times call for desperate measures, and COVID-19 provided the opportunity to try something totally outside the box. Because our focus was on flexibility and meeting people's needs, TVIC had the privilege of meeting their needs in new and different ways. Everyone had a role to play, and all partners stepped up. We are proud of this initiative and are grateful to have met and established relationships with people we'll never forget, both within and outside of our organization.

## LESSONS LEARNED:

### Public health can meet community needs by:

- 1 Taking time to understand needs by listening to community members' feedback and by building reciprocal relationships with community agencies.
- 2 Being flexible in their approaches. This can include trying something different or thinking outside the box.
- 3 Showing humility and respecting the expertise of collaborating partners.
- 4 Making time to support program staff. When staff are well supported by leadership, they can look after community members well.

#### NEWS RELEASE

[Toronto's COVID-19 voluntary isolation centre officially opens](#)

#### KEYWORDS

COVID-19, Equity, Public Health, Collaboration, Partner with Other Sectors, Housing

To learn more about the initiative described in this story, contact the National Collaborating Centre for Determinants of Health, at [nccdh@stfx.ca](mailto:nccdh@stfx.ca).

Do you have an idea for an Equity in Action story? If you have heard of other health equity-promoting COVID-19 pandemic response initiatives in Canada that we should share, please let us know.