



Phase 1: Initiated Monday, March 16, 2020
(with a plan to reconsider operations for Monday, April 6)

- All in-house on-site groups and 1:1 counselling cancelled
- All agency work, all ICM/Outreach services being delivered remotely when possible; safety standards communicated for when/if workers need to have urgent client community contact (e.g. six feet separation—no PPE needed, handwashing, hand sanitizer, etc.)
- Pandemic rating of all active clients reviewed to identify clients with a 'red' rating as priority, as well as identification of clients with no electronic means to communication, CTO clients and NCR clients, clients needing IM injections
- Written communication with all clients who have not been contacted (mailed, hand delivered)
- Nursing team developed plan/protocol for providing IMs in the community
- Sub-groups initiated to lead and plan for ongoing needs in priority areas:
 1. Food Security
 2. Finance (taxi chits, gift cards)
 3. Medication and Infection Control
 4. Harm Reduction
 5. Social Isolation (staff and client needs)
 6. Courier, Mail
 7. Fax, Reception
 8. Housing
 9. Communications
 10. Other areas to be identified

Phase 2: Planning for the Foreseeable Future – ongoing
Province releases list of essential services Tuesday, March 24, that includes the work of CMHA Ottawa.
IMMEDIATE FOCUS ON PLANNING FOR NEEDS OF ACTIVE CLIENTS



As of Friday, March 27, we have 1,007 active clients registered in CRMS – does not include the IASP program.

Expectations as we move forward as an essential service for active clients: this includes ICMs, outreach workers, housing coordinators, group, peers, and 1:1 counsellors.

Refer to Decision Tree for client contact – expectation March 27:

- Expectation for each worker is to develop their unique ‘caseload’ plan that assesses status and identifies outstanding needs of their clients using Brief Checklist. Priority is to address ongoing basic supply needs of clients (e.g. food, phones to ensure communication, medication, etc.) and to undertake overall assessment of client wellness.

Refer to Brief Checklist: March 30 v4

- Continue to work remotely whenever possible through team/resource group structure.
- Identify clients that they have not been able to directly communicate with OR clients that workers identify (after their electronic communication) as still needing a community visit in order to meet these needs.

Refer to Decision Tree for community visits: Monday, March 30 v3

- This decision tree includes the protocols identified for each of the possible community living environments of our clients.

ALL COMMUNITY VISITS MUST BE APPROVED BY YOUR MANAGER AND MUST FOLLOW OUR EXISTING PROTOCOLS:

Review G: ICOVID-19 Resources for all Staff > COVID info PLEASE READ

Please note: Patrick has created signage to place in your car dash noting “Essential Service” for when you are moving about in the community for CMHA. Please have CMHA photo identification on your person.