

# COVID-19 Social Care Guidance

This guide is for health and social care providers supporting people exposed to social risks that impact health, caused or exacerbated by COVID-19. It is intended as guidance and should not replace clinical judgement.



## ASK YOUR PATIENTS/CLIENTS

**Suggested script:** COVID-19 is impacting some people more than others. We are checking in on many of our patients/clients about issues that are important for health and well-being, so we can help people get the assistance they need.

1. Will you or your household **find it hard to pay for basic expenses** in the next 4 weeks?
2. Is there a risk you or your household **won't have food or be able to pay for food** in the next 4 weeks?
3. Are you currently **homeless or at risk of losing your housing** in the next 4 weeks?
4. Are you **alone, and do not have family/friends who can help you** during this time?
5. Do you have concerns about your (or your children's) **physical safety**?

*Caution if asking in a context where an abuser could overhear*

*Note: Families with children face specific challenges and have access to specific benefits during COVID-19*

**Developing a clear follow-up plan with the patient/clients has been shown to dramatically increase the likelihood of connecting to a social resource.**








## RESOURCES

**If these questions have identified needs, resources can be found at:**

- Upstream Lab COVID-19 Social Resource Connector [upstreamlab.org/covid19/](http://upstreamlab.org/covid19/)
- The CEP COVID-19: Social Care Guidance <https://link.cep.health/covidsdoh>
- [211.ca](http://211.ca) resource hub

## Framework and approach

The following principles for engaging in conversation with patients/clients are grounded in empathy and non-judgmental care and can help ensure your interaction is as client-centred as possible.

 <b>Crisis Management</b>	 <b>Motivational Interviewing</b>	 <b>Anti-Oppression and Anti-Racism Practice</b>	 <b>Strength-Based Problem-Solving</b>	 <b>Trauma-Informed care</b>
<ul style="list-style-type: none"> <li>• Validate concerns and evaluate severity of crisis</li> <li>• Stabilize, reassure &amp; ensure safety</li> </ul>	<ul style="list-style-type: none"> <li>• Explore discrepancies between goals/values and behaviour</li> <li>• Avoid direct confrontation and adjust to patient/client resistance</li> <li>• Support self-efficacy and optimism</li> </ul>	<ul style="list-style-type: none"> <li>• Respect differing views and ways of knowing</li> <li>• Provide non-judgmental, culturally safe care</li> <li>• Ensure shared decision-making with patient/client</li> </ul>	<ul style="list-style-type: none"> <li>• Start with what is important to patient/client and focus on strengths</li> <li>• Acknowledge each patient/client has potential and resilience to create their change</li> </ul>	<ul style="list-style-type: none"> <li>• Consider the role of individual and intergenerational trauma</li> <li>• Promote safety, trustworthiness, choice, collaboration, and empowerment</li> </ul>

**Consider the following potential barriers as you co-develop a plan with your patient/client:**

- access to phone, internet
- literacy and English proficiency
- comfort with using technology, websites
- ability to leave home if needed

**Additional resources to help assess vulnerable populations**

- CEP Poverty Tool. Available <https://cep.health/clinical-products/poverty-a-clinical-tool-for-primary-care-providers/>
- Goel R. A social history tool using the IF-IT-HELPS mnemonic. Available <https://cep.health/clinical-products/poverty-a-clinical-tool-for-primary-care-providers>



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