



# OUTBREAK STATUS REPORT

Middlesex-London Health Unit

*Last Updated: February 5, 2021 6:18 PM*

For more information or to report an outbreak, contact:  
The Infectious Disease Control Team  
Middlesex-London Health Unit  
519-663-5317 ext. 2330

## Active

Premise	Type of Outbreak	Date Declared	Affected Area(s)	Date Resolved	Pathogen 1	Pathogen 2	Pathogen 3
Dearness Home	Respiratory	Feb 5, 2021	3E & 3W		COVID-19		
Chartwell Parkhill	Respiratory	Feb 4, 2021	Country Unit		COVID-19		
Westmount Gardens	Respiratory	Feb 3, 2021	Lily, Daisy, Yellow Rose Units		COVID-19		
Henley Place LTC Residence	Respiratory	Jan 30, 2021	Victoria Unit		COVID-19		
Kensington Village Retirement	Respiratory	Jan 27, 2021	5th, 6th & 7th Avenue		COVID-19		
Chelsey Park Retirement Community	Respiratory	Jan 8, 2021	3rd, 5th Floor		COVID-19		
Chelsey Park	Respiratory	Jan 2, 2021	LTCH- Facility		COVID-19		
Extendicare	Respiratory	Dec 26, 2020	3rd Floor		COVID-19		
Middlesex Terrace	Respiratory	Dec 23, 2020	Facility		COVID-19		

## Declared Over

Premise	Type of Outbreak	Date Declared	Affected Area(s)	Date Resolved	Pathogen 1	Pathogen 2	Pathogen 3
LHSC- University Hospital	Respiratory	Jan 15, 2021	Emergency Department	Feb 4, 2021	COVID-19		
Oneida Long Term Care Home	Respiratory	Jan 5, 2021	Facility	Feb 2, 2021	COVID-19		
Mount Hope Centre For Long Term Care	Respiratory	Dec 22, 2020	MV4	Feb 2, 2021	COVID-19		
Country Terrace	Respiratory	Dec 8, 2020	Facility	Feb 2, 2021	COVID-19		
Glendale Crossing	Respiratory	Jan 9, 2021	Lambeth, Westminster	Feb 1, 2021	COVID-19		
Peoplecare Oak Crossing	Respiratory	Jan 19, 2021	Red Oak	Jan 30, 2021	COVID-19		
Longworth Retirement Residence	Respiratory	Jan 16, 2021	Facility	Jan 30, 2021	COVID-19		

This information is to be used as a guide and is intended to help you prevent infections and outbreaks in your facility. The decision regarding who can work at a facility rests with that facility, but should take into account the need for adequate staffing levels and the risk of infection from staff working at multiple facilities. For more information please visit <https://www.healthunit.com/outbreak-resources>

### Enteric Outbreaks

- Staff members/volunteers from facilities in outbreak should not work at your facility until at least 48 hours have elapsed since they last worked at the affected facility. This period can be modified if the causative agent is known.
- Staff members/volunteers who are experiencing gastrointestinal illness should not work at any facility until they have been symptom-free for at least 48 hours. Good hand hygiene should be reinforced with returning staff members/volunteers.
- Staff should change to a clean uniform between facilities and before leaving the affected facility.

**(Source: Control of Gastroenteritis Outbreaks in Long-Term Care Homes: A Guide for Long-Term Care Homes and Public Health Unit Staff, 2013).** <https://www.healthunit.com/outbreak-resources>

### *Clostridium difficile* Outbreaks

- Provided that all required infection control practices are in place, staff can work at both affected and unaffected facilities without restrictions.

Residents/patients with suspected or confirmed *Clostridium difficile*-associated diarrhea (CDAD) can be transferred within the health care system; however, the receiving facility must be notified and be able to comply with the recommended infection control precautions. *Clostridium difficile* is suspected in a resident/patient who develops diarrhea and has been in a facility experiencing a *Clostridium difficile* outbreak. Initiate Isolation rapidly and stool samples should be collected. **(Source: Annex C: Testing, Surveillance and Management of Clostridium difficile In All Health Care Settings, January 2013).**

<https://www.healthunit.com/outbreak-resources>

### Respiratory Outbreaks (non-influenza)

- Staff members/volunteers from facilities in outbreak should not work at your facility until at least 72 hours have elapsed since they last worked at the affected facility. For outbreaks attributable to Respiratory Syncytial Virus (RSV), Parainfluenza virus, Human metapneumovirus, and Adenovirus consider lengthening this time period to 5 days.

Staff members/volunteers who are experiencing respiratory symptoms should not work at any facility until 5 days from onset of symptoms or until symptoms have resolved. For outbreaks attributable to RSV, lengthen this time period to 8 days. Good hand hygiene should be reinforced with returning staff members/volunteers. **(Source: A Guide to the Control of Respiratory Infection Outbreak in Long-Term Care Homes, Ministry of Health and Long-Term Care, November, 2015).** [http://www.health.gov.on.ca/en/pro/programs/publichealth/flu/docs/resp\\_infectn\\_ctrl\\_guide\\_ltc\\_2015\\_en.pdf](http://www.health.gov.on.ca/en/pro/programs/publichealth/flu/docs/resp_infectn_ctrl_guide_ltc_2015_en.pdf)

### Influenza Outbreaks

- The Health Unit recommends that you ask non-immunized staff/volunteers who are from facilities in outbreak, and who are not on an appropriate antiviral drug, to refrain from working at your facility until it has been at least 72 hours since they last worked at the affected facility.
- Staff members/volunteers who are experiencing respiratory/ influenza symptoms should not work at any facility until 5 days from onset of symptoms or until symptoms have resolved, whichever time period is shorter. Good hand hygiene should be reinforced with returning staff members/volunteers.

**(Source: A Guide to the Control of Respiratory Infection Outbreak in Long-Term Care Homes, Ministry of Health and Long-Term Care, November, 2015).** [http://www.health.gov.on.ca/en/pro/programs/publichealth/flu/docs/resp\\_infectn\\_ctrl\\_guide\\_ltc\\_2015\\_en.pdf](http://www.health.gov.on.ca/en/pro/programs/publichealth/flu/docs/resp_infectn_ctrl_guide_ltc_2015_en.pdf)