

# **OUTBREAK STATUS REPORT**

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

Middlesex-London Health Unit

### Last Updated: December 29, 2021 8:59 PM

## Active

Premise	Type of Outbreak	Date Declared	Affected Area(s)	Date Resolved	Pathogen 1	Pathogen 2	Pathogen 3
Henley Place LTC Residence	Respiratory	Dec 29, 2021	Medway, Victoria and Fanshawe Units		COVID-19		
Dearness Home	Respiratory	Dec 29, 2021	5E, 5W, 4E, 2E, and Oakdale		COVID-19		
Country Terrace	Respiratory	Dec 28, 2021	Nottinghill Unit		COVID-19		
Elmwood Place	Respiratory	Dec 27, 2021	Facility-wide		COVID-19		
Middlesex Terrace	Respiratory	Dec 26, 2021	3rd Floor		COVID-19		
Craigwiel Gardens	Respiratory	Dec 26, 2021	Facility-wide		Rhinovirus		
Village of Glendale Crossing	Respiratory	Dec 25, 2021	Facility-wide (COVID); Lambeth (unknown)		COVID-19	Unknown	
Mount Hope Centre For Long Term Care	Respiratory	Dec 25, 2021	SM1		COVID-19		
Longworth Retirement Residence	Respiratory	Dec 25, 2021	2nd Floor		COVID-19		
Sisters of St. Joseph	Respiratory	Dec 24, 2021	Facility-wide		COVID-19		
Extendicare	Respiratory	Dec 24, 2021	2nd & 3rd Floor		COVID-19		
Parkwood Institute Main Building	Respiratory	Dec 23, 2021	3A-East		COVID-19		
Chartwell London	Respiratory	Dec 18, 2021	Magnolia, Pinebrook		COVID-19		
McCormick Home	Respiratory	Dec 14, 2021	Memory Lane		COVID-19		
Westmount Gardens	Enteric	Dec 13, 2021	Apple Blossom, Daisy		Unknown		

# **Declared Over**

Premise	Type of Outbreak	Date Declared	Affected Area(s)	Date Resolved	Pathogen 1	Pathogen 2	Pathogen 3
Chelsey Park	Respiratory	Dec 16, 2021	2nd Floor	Dec 26, 2021	RSV		
Peoplecare Oak Crossing	Respiratory	Dec 13, 2021	Norway Spruce	Dec 24, 2021	Unknown		

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

#### **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

#### 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). <a href="http://www.health.gov.on.ca/en/pro/programs/publichealth/flu/docs/resp\_infect\_ctrl\_guide\_ltc\_2015\_en.pdf">http://www.health.gov.on.ca/en/pro/programs/publichealth/flu/docs/resp\_infect\_ctrl\_guide\_ltc\_2015\_en.pdf</a>