

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: January 4, 2022 8:46 PM

Active

Premise	Type of Outbreak	Date Declared	Affected Area(s)	Date Resolved	Pathogen 1	Pathogen 2	Pathogen 3
Oakcrossing Retirement Living	Respiratory	Jan 4, 2022	Facility-wide		COVID-19		
Kensington Village Retirement	Respiratory	Jan 4, 2022	Highbury area		COVID-19		
Arbor Trace Alzheimer's Special Care Center	Respiratory	Jan 4, 2022	Facility-wide		COVID-19		
Kensington Village	Respiratory	Jan 4, 2022	1st Floor		COVID-19		
Parkwood Institute Main Building	Respiratory	Jan 3, 2022	4 Bruce Elgin		COVID-19		
Westmount Gardens	Respiratory	Jan 3, 2022	Daisy Unit		COVID-19		
Earls Court Village	Respiratory	Jan 2, 2022	1st and 3rd floors		COVID-19		
McGarrell Place	Respiratory	Jan 1, 2022	Facility-wide		COVID-19		
LHSC- University Hospital	Respiratory	Jan 1, 2022	7IP Clinical Neurosciences - 100 Wing, 202,220-232		COVID-19		
Meadow Park Care Centre	Respiratory	Jan 1, 2022	Facility-wide		COVID-19		
Chartwell Parkhill	Respiratory	Jan 1, 2022	Countryside Unit		COVID-19		
Babcock Community Care Centre	Respiratory	Dec 31, 2021	Facility - wide		COVID-19		
Peoplecare Oak Crossing	Respiratory	Dec 31, 2021	White Pine		COVID-19		
LHSC- Victoria Hospital	Respiratory	Dec 31, 2021	PICU		COVID-19		
Parkwood Institute Main Building	Respiratory	Dec 31, 2021	3 Kent/Essex		COVID-19		
Dearness Home	Respiratory	Dec 29, 2021	5E, 5W, 4E, Oakdale and 2W		COVID-19		
Henley Place LTC Residence	Respiratory	Dec 29, 2021	Medway, Victoria and Fanshawe Units		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		
Mount Hope Centre For Long Term Care	Respiratory	Dec 25, 2021	SM1and MV5		COVID-19		

Active

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Longworth Retirement Residence	Respiratory	Dec 25, 2021	2nd Floor		COVID-19		
Village of Glendale Crossing	Respiratory	Dec 25, 2021	Facility-wide (COVID); Lambeth (unknown)		COVID-19	Unknown	
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, Evergreen Unit		COVID-19		
Westmount Gardens	Enteric	Dec 13, 2021	Apple Blossom, Daisy		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 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

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