



OUTBREAK STATUS REPORT

Middlesex-London Health Unit

Last Updated: December 27, 2022 7:46 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
LHSC- Victoria Hospital	Respiratory	Dec 27, 2022	E5 Medicine		COVID-19	Influenza A	
Horizon Place	Respiratory	Dec 26, 2022	Facility Wide		COVID-19		
McGarrell Place	Respiratory	Dec 26, 2022	Ivy Lane Unit, Lawson Lane		COVID-19	Unknown	
Strathroy Middlesex General Hospital	Enteric	Dec 25, 2022	1 South		C. difficile		
Extendicare	Respiratory	Dec 24, 2022	2nd FL West Wing		RSV		
Parkwood Institute Main Building	Respiratory	Dec 23, 2022	5A E		COVID-19		
Earls Court Village	Respiratory	Dec 22, 2022	4th floor		COVID-19		
Mount Hope Centre For Long Term Care	Respiratory	Dec 22, 2022	MV4		COVID-19		
Oneida Long Term Care Home	Respiratory	Dec 21, 2022	Facility-wide		Parainfluenza		
Dorchester Terrace	Enteric	Dec 20, 2022	2nd, 3rd and 1st Floor		Unknown		
Parkwood Institute Main Building	Respiratory	Dec 20, 2022	5B South Unit		COVID-19		
Strathmere Lodge	Respiratory	Dec 19, 2022	Arbour Glen		COVID-19		
Chartwell Parkhill	Respiratory	Dec 16, 2022	Country Unit		COVID-19		
Kensington Village	Respiratory	Dec 15, 2022	1st Floor		COVID-19		
Sprucedale Care Centre	Respiratory	Dec 14, 2022	Cedar Unit		Rhinovirus		
Village of Glendale Crossing	Combined Enteric/Respiratory	Oct 24, 2022	Westminster, & Brighton; Byron enteric		COVID-19	Unknown	

Declared Over

Premise	Type of Outbreak	Date Declared	Affected Area(s)	Date Resolved	Pathogen 1	Pathogen 2	Pathogen 3
Henley Place LTC Residence	Respiratory	Nov 26, 2022	Victoria	Dec 26, 2022	COVID-19		
Craigwiel Gardens	Respiratory	Dec 8, 2022	Facility-wide	Dec 21, 2022	Influenza A		

Declared Over

Premise	Type of Outbreak	Date Declared	Affected Area(s)	Date Resolved	Pathogen 1	Pathogen 2	Pathogen 3
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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