

# **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, 2023 3:58 PM

## Active

Premise	Type of Outbreak	Date Declared	Affected Area(s)	Date Resolved	Pathogen 1	Pathogen 2	Pathogen 3
Chartwell London	Respiratory	Jan 4, 2023	Pinebrook		Parainfluenza		
Strathmere Lodge	Respiratory	Jan 4, 2023	Bear Creek		RSV		
Grand Wood Park Retirement	Respiratory	Jan 4, 2023	Facility wide		Rhinovirus		
Mount Hope Centre For Long Term Care	Respiratory	Jan 3, 2023	MV4		Influenza A		
Chelsey Park Retirement Community	Enteric	Jan 2, 2023	3rd, 4th and 5th		Unknown		
Henley Place LTC Residence	Respiratory	Jan 1, 2023	Medway		RSV		
Waverley Mansion	Enteric	Dec 31, 2022	Mansion Area, Lodge Area		Unknown		
Babcock Community Care Centre	Respiratory	Dec 31, 2022	Facility wide		COVID-19		
Parkwood Institute Mental Health Care Building	Respiratory	Dec 31, 2022	H5 unit		COVID-19		
Dearness Home	Respiratory	Dec 30, 2022	1st Floor East Wing		RSV		
Sprucedale Care Centre	Respiratory	Dec 28, 2022	Maple and Cedar units		COVID-19		
Country Terrace	Respiratory	Dec 28, 2022	Evergreen. Woodcrest, Nottinghill units		COVID-19	Unknown	
Strathroy Middlesex General Hospital	Respiratory	Dec 28, 2022	2 South		COVID-19		
LHSC- Victoria Hospital	Respiratory	Dec 27, 2022	E5 Medicine		COVID-19	Influenza A	
Horizon Place	Respiratory	Dec 26, 2022	Facility Wide		COVID-19		
Extendicare	Respiratory	Dec 24, 2022	2nd Floor		RSV		
Oneida Long Term Care Home	Respiratory	Dec 21, 2022	Facility-wide		Parainfluenza		
Parkwood Institute Main Building	Respiratory	Dec 20, 2022	5B South Unit		COVID-19		
Sprucedale Care Centre	Respiratory	Dec 14, 2022	Cedar Unit		Rhinovirus		
Village of Glendale Crossing	Enteric	Oct 24, 2022	Byron		Unknown		

# **Declared Over**

				Pathogen 1	Pathogen 2	Pathogen 3
Respiratory	Dec 16, 2022	Country Unit	Jan 4, 2023	COVID-19		
Respiratory	Dec 23, 2022	5A E	Jan 3, 2023	COVID-19		
Respiratory	Dec 15, 2022	1st Floor	Jan 3, 2023	COVID-19		
Combined Enteric/Respiratory	Dec 26, 2022	Ivy Lane and Lawson Lane	Jan 2, 2023	COVID-19	Unknown	
Enteric	Dec 25, 2022	1 South	Jan 2, 2023	C. difficile		
Respiratory	Dec 22, 2022	4th floor	Jan 2, 2023	COVID-19		
Respiratory	Dec 22, 2022	MV4	Dec 29, 2022	COVID-19		
Enteric	Dec 20, 2022	1st floor	Dec 29, 2022	Unknown		
Respiratory	Dec 19, 2022	Arbour Glen	Dec 29, 2022	COVID-19		
	Respiratory Combined Enteric/Respiratory Enteric Respiratory Respiratory Enteric	RespiratoryDec 23, 2022RespiratoryDec 15, 2022Combined Enteric/RespiratoryDec 26, 2022EntericDec 25, 2022RespiratoryDec 22, 2022RespiratoryDec 22, 2022EntericDec 20, 2022	RespiratoryDec 23, 20225A ERespiratoryDec 15, 20221st FloorCombined Enteric/RespiratoryDec 26, 2022Ivy Lane and Lawson LaneEntericDec 25, 20221 SouthRespiratoryDec 22, 20224th floorRespiratoryDec 22, 2022MV4EntericDec 20, 20221st floor	RespiratoryDec 23, 20225A EJan 3, 2023RespiratoryDec 15, 20221st FloorJan 3, 2023Combined Enteric/RespiratoryDec 26, 2022Ivy Lane and Lawson LaneJan 2, 2023EntericDec 25, 20221 SouthJan 2, 2023RespiratoryDec 22, 20224th floorJan 2, 2023RespiratoryDec 22, 2022MV4Dec 29, 2022EntericDec 20, 20221st floorDec 29, 2022	RespiratoryDec 23, 20225A EJan 3, 2023COVID-19RespiratoryDec 15, 20221st FloorJan 3, 2023COVID-19Combined Enteric/RespiratoryDec 26, 2022Ivy Lane and Lawson LaneJan 2, 2023COVID-19EntericDec 25, 20221 SouthJan 2, 2023C. difficileRespiratoryDec 22, 20224th floorJan 2, 2023COVID-19RespiratoryDec 22, 2022MV4Dec 29, 2022COVID-19EntericDec 20, 20221st floorDec 29, 2022Unknown	RespiratoryDec 23, 20225A EJan 3, 2023COVID-19RespiratoryDec 15, 20221st FloorJan 3, 2023COVID-19Combined Enteric/RespiratoryDec 26, 2022Ivy Lane and Lawson LaneJan 2, 2023COVID-19EntericDec 25, 20221 SouthJan 2, 2023C. difficileRespiratoryDec 22, 20224th floorJan 2, 2023COVID-19RespiratoryDec 22, 2022MV4Dec 29, 2022COVID-19EntericDec 20, 20221st floorDec 29, 2022Unknown

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

#### 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/respinfectn">http://www.health.gov.on.ca/en/pro/programs/publichealth/flu/docs/respinfectn</a> ctrl guide ltc 2015 en.pdf