

Home-Specific Outbreak Plan

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Long-Term Care Services
 70 Pine Street, Bracebridge, ON P1L 1N3
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 Fax: 705-645-5319
 Email: healthservices@muskoka.on.ca
 Website: www.muskoka.on.ca

THE PINES
Long-Term Care Home
 98 Pine Street, Bracebridge, ON P1L 1N5
 Tel: 705-645-4488
 Fax: 705-645-6857



1. LTC Home Information:

The following list can be utilized to document key home contacts in the event of an Outbreak.

Alternately:

- An organizational chart with contact information may be attached to the site outbreak plan; or
- An emergency response contact list updated and utilized for other emergency response plans may also be utilized or added in this section

LTC Home Information:	
Home:	The Pines Long-Term Care Home
Total # of beds:	160
# Of units & beds/unit:	5 units/ 32 bed per unit
# Of shared occupancy rooms:	Private: 94 Total
	Basic: 66 Total
# Of rooms sharing a bathroom:	66

	NAME AND CONTACT INFORMATION	
Administrator:	Jennifer Ridgley Jennifer.ridgley@muskoka.on.ca 705-645-4488 ext. 4877	
Medical Director:	Keith Cross Keith.cross@sympatico.ca	
Director of Care:	Tara MacLellan taram.maclellan@muskoka.on.ca 705-645-4488 ext. 4805	
Assistant Director(s) of Care:	Jennifer Carriere Jennifer.carriere@muskoka.on.ca 705-645-4488 ext. 4842	Kimberly Sander Kimberly.sander@muskoka.on.ca 705-645-4488 ext. 4868
IPAC Home Lead:	Melissa Muir-Clark Melissa.muir-clark@muskoka.on.ca 705-645-4488 ext. 4752	

	NAME AND CONTACT INFORMATION
IPAC Home Lead Designate	Melissa Muir-Clark Melissa.muir-clark@muskoka.on.ca 705-645-4488 ext. 4752
Human Resources:	Charlene Hofstetter Charlene.hofstetter@muskoka.on.ca 705-645-4488 ext. 4191
Support Services Supervisor:	Steve Files Steve.files@muskoka.on.ca 705-645-4488 ext. 4804
Nutrition/Food Services/Dietary:	Scot Gray Scot.gray@muskoka.on.ca 705-645-4488 ext. 4801
Recreation Therapist/Manager/Supervisor or	Christina Rochette Christina.rochette@muskoka.on.ca 705-645-4488 ext. 4824
Physicians/NPs:	Dr. K. Phillips, Dr. V. Dechert, Dr. B. Mittal and Dr. S. Whynot Please contact the home
Pharmacy & Pharmacist:	Sherri Kidson Sheri.Kidson@carerx.ca
Courier contact for transportation of Lab samples:	Dynacare 705-205-1833
Vital Aire Contact Information or Medigas Contact Information	Homecare Oxygen 705-6455161
Staff contacts:	RN cell number 705-641-0319
Residents/Family contacts:	Internal process

2. External Communication

Local Public Health	705-645-9090 ext. 8809	After hours: 1-888-225-7851
Provincial Health Agency	Public Health Ontario General Inquiries Toll-Free: 1-877-543-8931 communications@oahpp.ca	
Ministry of Labour (if applicable)	Internal Process	

3. What will you do if there is a potential outbreak, or suspected outbreak in your home?

When the home goes into Outbreak, it requires help from the whole team. The Infection Control Lead (IPAC) or the Director of Care (DOC) will complete contract tracing and be the liaison between Public Health and the team at the Pines.

We have created a checklist with the procedures of what to do in the event of an outbreak including key contact numbers. Departmental contingency plans with respect to action plans including human resources has been developed that identifies minimum staffing needs and prioritizes critical and non-essential services based on residents' health status, functional limitations, disabilities, and essential facility operations, and considers staffing needs in outbreak and non-outbreak scenarios, and the expectation of increased staff absenteeism during outbreaks.

What are the Pines isolation procedures?

- Isolate suspected cases to their room/living quarters based on symptoms assessment by registered staff.
- Isolation precaution equipment (Personal Protective Equipment- PPE) and signage placed outside of the resident's room.
- Notify residents physician and POA/SDM (power of attorney or substitute decisionmaker)
- Contact Public Health according to the Recommendations for the Control of Outbreaks, utilizing the Enteric and Respiratory Outbreak Quick Reference Guide (see Clinical resources from Simcoe Muskoka District Health Unit) <https://www.simcoemuskokahealth.org/docs/default-source/ify->

[health-care-professionals/161013-enteric-and-respiratory-outbreak-quick-reference-sept-2016.pdf?sfvrsn=6](https://www.extendicare.com/health-care-professionals/161013-enteric-and-respiratory-outbreak-quick-reference-sept-2016.pdf?sfvrsn=6)

- Assess high or low-risk exposure status of other residents in the home area and follow guidance.

Co-horting Plan Staff:

Schedulers and the leadership team work together to review staff assignments to ensure staff co-horting for all departments to the best of our abilities without compromising care. We do this to mitigate the risk of spreading the virus/illness.

Activities staff pivot to accommodate the outbreak and provide in unit activities, small group and one on one visiting as deemed safe.

Staff in affected areas also have their own designated dining area during the outbreak to mitigate the risk of spreading the virus/illness.

Co-horting Residents:

In the dining rooms, the residents have a seating arrangement. Not only is it nice for residents to sit with the same friends each day, but this also allows for quick tracking, and we can isolate any illness quickly. Residents who sit together are considered close contacts of an ill resident. This allows us to increase symptom monitoring for those residents to provide further spread of viruses like Influenza and Covid-19.

How will you ensure that all staff are knowledgeable and able to keep themselves safe from exposure during an Outbreak?

Annually staff are required to participate in our online learning platform. This education includes, but is not limited to, safely using personal protective equipment, hand hygiene, and the different modes of transmission for virus or bacteria that can make us ill. They are also trained in personal risk assessments which allows them to assess all situations and use the appropriate protection for themselves and the residents.

Staff also have education regularly from the IPAC lead as well as nursing managers related to infection control practices. We utilize team meetings to provide education as well as coaching opportunities on unit.

The IPAC lead will attend a home area if they are declared in outbreak to provide immediate education and reminders to ensure appropriate PPE and practices are in place.

The Pines also have Resident Home Area meetings in person with to provide education, discuss any questions or concerns staff have and participate in information sharing at these times.

How to are staff kept up to date with Pines outbreaks?

Our administrative team communicates with staff via email daily during outbreaks. This information is also communicated on the Staff portal.

The Pines also have Resident Home Area meetings in person with to provide education, discuss any questions or concerns staff have and participate in information sharing at these times.

Managers are encouraged to provide staff huddles and meetings for staff to be able to ask questions and be provided with up to date information.

Who will fill ABHR?

Environmental staff and maintenance staff are key to our team and are responsible for filling our Alcohol Based hand Rub and Soap dispensers. It is also the responsibility of all staff, residents, and visitors to identify and communicate if a receptacle is empty.

Who will refill PPE stations?

This is a shared responsibility amongst the pines staff. Our IPAC lead alongside administrative staff and modified duty staff, take turns restocking the PPE during an outbreak.

Who will audit Hand Hygiene and PPE donning and doffing practices?

The Pines has a hand hygiene program Just Clean Your Hands and our Hand Hygiene Champions are part of the auditing process and providing on the spot education to staff, visitors, and residents.

Our IPAC lead and screening staff participate in our PPE auditing program. Wearing PPE and proper hand hygiene is the responsibility of all staff and auditing is that of the IPAC lead.

Who is looking at compliance rates and addressing poor compliance?

Our Director of Care addresses poor compliance and the IPAC lead continues to provide education and follow up education.

4. How will you screen for symptoms?

Residents are screened for respiratory symptoms each shift including a temperature check. Quick identification of symptoms results in decreased spreading of illness. When in an outbreak, we increase this to twice a day. Staff will vigilantly watch for signs and symptoms of infection daily. Record any symptoms that may determine the possible presence of a communicable disease outbreak on the Daily 24-hour Symptom Surveillance form. The shift RN is responsible for ensuring these screening procedures are done, and Nursing Management monitors this daily by creating a Risk Report for each day that identifies areas of concern.

The IPAC lead and nursing staff are responsible for promptly responding to illness and following the steps in #3.

There is a screener at the front door, at all times and any individual entering the building will be screened. Staff and visitors are to fill out the screening tool at the front door. Anyone with new or unexplained symptoms are not permitted to enter the home.

5. How will you control the risk of transmission in your home?

We have made changes to the ways staff work and interact, using policies, procedures, training and signage, limit the number of people in break rooms at one time (post maximum room capacity signage), schedule to stagger breaks, establish new high touch cleaning and disinfection protocols, provide education and training on proper hand hygiene and PPE use. Ensure staff for housekeeping is sufficient to meet the cleaning requirements including high touch cleaning.

No one intervention is perfect, it is the combination of many things that work together to reduce transmission and work to keep our residents and staff safe.

6. How will you determine whether your outbreak plan is working?

When the Pines is in outbreak, we have daily meetings with Public Health and the Leadership team to determine what actions need to be taken. After the outbreak is over, we debrief and ask staff and leadership what they felt went well and what can improve. Public Health also provides guidance and reports at the completion of an outbreak to provide feedback to us.

The Role of the IPAC Lead is to lead the outbreak, which includes communication with Public Health, scheduling the daily outbreak meetings, educating staff, being a resource for all and ensure we have enough PPE at all times. Our Administrator provides updates to all family, staff members and residents utilizing a variety of sources.

7. Vaccinations

All staff and residents are regularly offered education on Covid-19 vaccines as well as other vaccinations that are available within the home to help protect individuals.

Residents and staff members will continue to be offered in home Covid-19 vaccines on an ongoing basis in conjunction with current Public Health guidelines. Influenza vaccines are offered to staff members and residents each year.

All visitors are encouraged to be fully vaccinated and opportunity for caregivers to be immunized exists as well. This is arranged by our IPAC Lead in collaboration with Public Health.

8. Person(s) Most Responsible for PPE

Inventory and Tracking: Melissa Muir-Clark IPAC LEAD

Person responsible for ordering PPE: Tara Maclellan DOC

Regular supplier and Contact Information: Cardinal Health <https://shop.cardinalhealth.ca/>

Key Supply List 2 weeks' worth:

Type of PPE/Disinfectant/ABHR	Location(s)	Min Quantity	Supplier
N 95 Masks	Fran Coleman Room Pandemic supply room	2000(2 per day per person)	
Surgical/Procedure Mask	Fran Coleman Room	4000	
Isolation Gowns	Pandemic Supply Room	20 Boxes	
Protective Eye Goggles	Pandemic Supply Room	40/day	
Face Shields	Pandemic Supply Room	40/day	
Gloves	Nursing/Environmental supply room	Months' Supply	
Hand Sanitizer	Nursing/Environmental supply room-large pump supplies Pandemic Supply Room -hand pumps	300 individual pumps/months' supply large receptacles	
Disinfectant Wipes	Nursing/Environmental supply room	Months' Supply	
Swabs	Pandemic Supply Room		
Concentrated Disinfectant	Housekeeping Supply Room	Months' Supply	
ED-Everyday Disinfectant	Housekeeping Supply Room	Months' Supply	

*Annual Mask Fit Testing

*The list of staff who have been fit tested for N95 respirators is up-to-date and available including brands/models and sizes

Outbreak Plan – Snapshot

- Measures we're taking.....
- How we're ensuring staff know how to keep themselves safe from exposure
Robust education plan and auditing with coaching and feedback in the moment
- How we're screening for symptoms
Residents are screened and monitored daily including temperature checks;
Daily screening for all staff, residents, essential caregivers and visitors
- How we're controlling the risk of transmission in our home
We continue daily rapid testing for all individuals entering as well as continue to wear masks and/or appropriate PPE
- Physical distancing and separation
All staff and resident areas are set up to promote physical distancing and signage has been placed in areas to ensure maximum capacities are listed
- Cleaning
All high touch surfaces are cleaned daily with Health Canada Approved Disinfectant
- What we will do if there is a potential or confirmed Outbreak in our home
We will collaborate with Public Health and follow all current guidelines within this document.
- How we're making sure our plan is working
We debrief after each outbreak as a team and Public Health keeps in touch with us.