

Outbreak Communication

# of active resident cases: 3	Date of Report: November 26, 2024	Outbreak Type: <input checked="" type="checkbox"/> Respiratory <input type="checkbox"/> Enteric	Causative Agent: COVID-19	End Date: TBA
	Case Definition: Any staff/res with 2 or more of: cough, nasal congestion, chills and/or sore throat on or after November 12, 2024 without another known cause. As of 11/17/2024 respiratory case definition is home wide.			

	RSSC	RS2	RS3	RS4	WV2	WV3	WV4	WV5
Sick	2	0		1			0	
Resolved	10	2		4			12	
TOTAL	12	2		5			12	
COVID +	10	0		0			0	

ACTION PLAN:

- All **staff** and **visitors** entering **R1** will wear clean hands, an N95 respirator, and a disposable face shield.
- All **staff** and **visitors** entering any other home area will enter with clean hands and a clean surgical mask.
- Full droplet/Contact PPE is *required* to enter an ill resident's room (for any length of time) – for both confirmed and suspected cases. This is for visitors and staff.
- Eye protection is required when within 6 feet of an ill resident.
- N95 will be stored on the PPE carts at the entrance to each RHA.
- Ill residents will be isolated using **Droplet/Contact precautions**. This requires a commode at the bedside if sharing a bathroom.
- **STAFF COHORT: Full-time/regular staff will care for ill residents as much as is reasonably possible.** The RPN will dedicate two staff to care for isolated residents at the start of each shift.
- Ill residents must be isolated and tested.
- Staff who work in the affected area are not permitted to work in another healthcare setting for the duration of the outbreak.
- PPE must be donned before entering the resident's room and be removed before exiting.
- Adhere to the 4 Moments for Hand Hygiene.
- Staff **MUST** perform a symptom self-assessment prior to reporting to work as per policy.
- Equipment must be cleaned/disinfected between each resident use with a hospital-grade disinfectant (Oxivir TB).
- Admissions/readmissions to O/B areas will be postponed.
- Routine practices must be applied to every episode of care. Perform a Point of Care Risk Assessment (PCRA) prior to EVERY interaction with EVERY resident. If Additional Precautions are in place, ensure the additional precautions are followed.
- Residents who leave the RHA (to smoke, for example) must wear a surgical mask and proceed directly outside. Help residents put on a mask and clean their hands before leaving and upon return.
- All non-emergent resident appointments will be rescheduled.
- Programs will be RHA-based for outbreak areas with no cross-portering. No ill residents may attend programs.
- **Stock PPE caddies as indicated on the back of this alert without exception.**
- **The Link Hallway is reserved for staff working an O/B RHA.**



