Outbreak Communication & Control Measures

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| # of active resident cases:**8** | **Date of Report:**3/24/2025 | **Outbreak Type:**[x] Respiratory [ ] Enteric | **Causative Agent:****Human Coronavirus OC43** | **End Date:****TBA** |
| **Case Definition:** Any resident of Fairhaven – Riverside 3 who develops two or more of the following symptoms: cough, fever, nasal congestion, hoarse voice on or after March 14th, 2025 without another known cause. |

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|  | **RSSC** | **RS2** | **RS3** | **RS4** | **WV2** | **WV3** | **WV4** | **WV5** |
| **Sick with Respiratory Symptoms** |  |  | **8** |  |  |  |  |  |
| **Sick with Enteric Symptoms** |  |  |  |  |  |  |  |  |
| **Outbreak Control Measures in Place** |  |  | **✓** |  |  |  |  |  |
| **TOTAL** |  |  |  |  |  |  |  |  |

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| **FOR EVERYONE ENTERING/WORKING THE BUILDING:*** All **staff** and **visitors** to R3will enter with clean hands and a clean surgical mask.
* Visitors should postpone all non-essential visits to residents within the outbreak area where possible.
* Ill residents will be isolated using **Droplet & Contact precautions**. This requires a commode at the bedside if sharing a bathroom.
* 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.
* 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.
* Visitors/staff must not enter the home if they have symptoms (cough, fever, sore throat, runny nose, vomiting, loose bowels, or any other symptoms which may be contagious to others).
* Equipment must be cleaned/disinfected between each resident use with a hospital-grade disinfectant (Oxivir TB).
* 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.
* No food or drink may be stored or consumed in clinical spaces on the RHA. Use the cupboard labelled for staff use in each RHA dining room. Food/drink found at the desk will be discarded.
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| RESIDENT CARE |
| * Eye protection is required when within 6 feet of an isolated resident (if res is non-compliant with iso face shields may be required at all times on the RHA.
* May use surgical mask IF: confirmed OC43 positive AND is covid-19 negative.
 | * Residents should remain on the RHA. If leaving the RHA (to smoke, for ex.) encourage to wear a mask and proceed directly outside. Help residents put on a mask/clean their hands before leaving and upon return.
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| * Commode at bedside for the ill residents who share a bathroom
 | * All non-emergent resident should be rebooked to prevent carrying illness into the community
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| * Full droplet/Contact PPE is *required* to enter an ill resident’s room (for any length of time) for both confirmed and suspected cases
 | * STAFF COHORT: Full-time/regular staff will care for ill residents as much as is reasonably possible
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| * Residents must be assessed for symptoms of illness daily (POC Task for RPNs)
 | * Inform ES when iso is D/C so the room can be cleaned.
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| * Residents with symptoms must be isolated and tested immediately.
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| ENVIRONMENTAL SERVICES |
| * High-touch surfaces to be cleaned, disinfected, and documented twice per day **(to start 3/19/2025)**
 | * Resident laundry will be delivered by the housekeeper
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| * Cleaning/disinfection must occur cleanest to dirtiest
 | * Chlorox 360 resident room once isolation is D/C
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| * No change in laundry wash/handle procedure
 | * Clean/disinfect red/grey bins when iso D/C
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| * R3 must complete 2 passes of high-tough surface cleaning, regardless of the number of cases. Even if there are zero cases, this must be completed during a home wide outbreak.
 | * Full droplet/Contact PPE is *required* to enter an ill resident’s room (for any length of time) for both confirmed and suspected cases
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| RESIDENT PROGRAMS/ADMISSIONS/PHYSIO |
| * RHA-based programs with no cross-portering
 | * Home wide activities will proceed in non-O/B area
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| * Tours may continue to non-affected RHAs
 | * Admit to non-outbreak areas first; admissions to O/B floors will be considered case-by-case
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| * PTA to visit affected area last
 | * No salon services for R3 residents
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| NUTRITION SERVICES |
| * Isolated to take meals in their rooms with disposable trays/dishes/cutlery, etc.
 | * Offer residents hand hygiene before meals and snacks
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| * Kitchen Aide will not enter any isolation rooms
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| RECEPTION |
| * No guest meals in R3 until outbreak is declared over
 | * All visitors to sign in/out and are strongly encouraged to wear a mask
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| SCHEDULING |
| * **RESP:** ask all staff who call in sick, “Yes or no, do you have any a cough, fever, sore throat, or nasal congestion?” **Forward details to IPAC**
 | * Await manager approval to schedule additional staff on the outbreak floor.
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