Fall Forum 2020: Outbreak Management

Long Term Care and Retirement Homes
Outline

- Case definitions and outbreaks
- Key resources
- Contacting Public Health
- Enteric management
- Testing
- Outbreak declaration
- Droplet and contact precautions
- New admissions and readmissions
- Physical distancing – residents with cognitive impairments

- Cohorting
- Admissions and transfers
- Visitors
- Environmental services
- Restrictions
- Declaring outbreak over
- Facility responsibilities
- Public Health responsibilities
Commonality in approach for all three outbreak types

Case Definition and Outbreak Definition

Case (meets case definition)

Investigation

Suspect Outbreak

Confirmed Outbreak (meets outbreak definition)
Elements of an outbreak

• Testing/specimen collection
• Length of isolation or work exclusion required
• Personal Protective Equipment (PPE) required
• Visitor restrictions
• Requirements for staff working at other facilities
• Guidelines for admissions and transfers during the outbreak
• Guidelines for short-stay absences and outpatient visits
• Activity guidelines and restrictions
• Treatment recommendations
# Review Outbreak Quick Reference – case and outbreak definitions

<table>
<thead>
<tr>
<th>Enact</th>
<th>Upper Respiratory Tract Infection</th>
<th>Influenza</th>
<th>COVID-19</th>
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</thead>
<tbody>
<tr>
<td><strong>Case Definition</strong></td>
<td>2 or more episodes of diarrhea (e.g. loose/watery bowel movements) within a 24-hour period, OR</td>
<td>2 or more respiratory symptoms</td>
<td>1 symptomatic resident or staff with a typical or atypical COVID-19 illness</td>
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<td>2 or more episodes of vomiting within a 24-hour period, OR</td>
<td>2 or more respiratory symptoms</td>
<td>COVID-19 Swab including Multiplex for residents only (PULVIA)</td>
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<td>3 or more episodes of diarrhea AND 1 or more episodes of vomiting within a 24-hour period.</td>
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<td><strong>Testing</strong></td>
<td>stool sample collected as per Health Protection Investigation direction</td>
<td>COVID-19 Swab including Multiplex for residents only (PULVIA)</td>
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<td>COVID-19 Swab collected ASAP</td>
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<td><strong>Confirmed Outbreak Definition</strong></td>
<td>Within 48 hours:</td>
<td>Note: Multiplex will only be completed on the first 4 persons in any given OIH investigation</td>
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<td>2 or more cases meeting the case definition with a common epidemiological link (e.g. specific unit or floor, same caregiver)</td>
<td>Within 48 hours:</td>
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<td>2 cases, one of which must be lab-confirmed, OR</td>
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<td>3 cases in a geographic area (unit, floor, OR)</td>
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<td>More than 2 units with a case</td>
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<tr>
<td><strong>Suspect Outbreak</strong></td>
<td>Within 48 hours:</td>
<td>Note: Multiplex will only be completed on the first 4 persons in any given OIH investigation</td>
<td>1 confirmed symptomatic positive result in a staff member or resident</td>
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<td>2 or more cases meeting the case definition with a common epidemiological link (e.g. specific unit or floor, same caregiver)</td>
<td>Within 48 hours:</td>
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<td>2 cases, one of which must be lab-confirmed, OR</td>
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<td>More than 2 units with a case</td>
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<tr>
<td><strong>Investigation</strong></td>
<td>One lab confirmed case of influenza (where and other symptomatic residents)</td>
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<tr>
<td><strong>Isolation &amp; PPE</strong></td>
<td>EpiEct Contact (gloves, gown, mask, eye protection)</td>
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<td></td>
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<td>EpiEct Contact (gloves, gown, mask, eye protection)</td>
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<tr>
<td><strong>Length of Isolation</strong></td>
<td>Until asymptomatic for 48 hours</td>
<td>Until an organism is isolated, all symptomatic persons will be isolated as suspected for COVID-19 and the facility will be under investigation for COVID-19</td>
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<td>5 days (or until asymptomatic for 48 hours), whichever is shorter</td>
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<td><strong>Length of Outbreak</strong></td>
<td>8 days after last onset (isolated organism may impact length of outbreak)</td>
<td>10 days or longer depending on severity and symptom resolution</td>
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<td>8 days after last onset (isolated organism may impact length of outbreak)</td>
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<td>As per Directive #3, all clients in isolation shall not be allowed to leave isolation.</td>
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<td><strong>Visitor Restriction</strong></td>
<td>None, but must adhere to posted infection control measures</td>
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<tr>
<td><strong>Staff working at other facilities</strong></td>
<td>Staff encouraged to work at only one facility as per MOH/LOC Directive #3, if not able</td>
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<td>Staff encouraged to work at only one facility as per MOH/LOC Directive #3, if not able</td>
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<td></td>
<td>Not recommended or wait at least 1 incubation period between facilities. For Norovirus, wait at least 48 hours between facilities</td>
<td>Not recommended or wait at least 3 days between facilities</td>
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<td><strong>Admission/Re-admissions status</strong></td>
<td>Suspended until OR cleared</td>
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<td>Suspended until OR cleared</td>
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<td><strong>Ill staff</strong></td>
<td>Off work until asymptomatic for 45 hours</td>
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<td>Off work for 5 days from onset of or until asymptomatic for 45 hours, whichever sooner AND a negative COVID-19 test</td>
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<td>Off work for 5 days from onset of or until asymptomatic for 45 hours, whichever sooner AND a negative COVID-19 test</td>
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<tr>
<td><strong>Transfer to hospital</strong></td>
<td>Advise hospital and transport until outbreak status</td>
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<td>Advise hospital and transport until outbreak status</td>
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<tr>
<td><strong>Transfer to another facility</strong></td>
<td>Not recommended until OR over and consultation with Public Health</td>
<td>Not recommended until OR under control and consultation with Public Health</td>
<td>Not recommended until OR under control and consultation with Public Health</td>
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<tr>
<td><strong>Treatment</strong></td>
<td>Depends on isolated organism</td>
<td>Supports</td>
<td>Consult with Public Health re: antimicrobial modification</td>
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</tbody>
</table>
Key resources

Ministry of Health and Long Term Care Resources

Public Health Ontario Resources
When to call Public Health

• Any staff or resident illness meeting case definition
• Surveillance for investigations and outbreaks
• Consultation/questions

Respiratory Reporting and Information Line
519-575-4400 x5506
Surveillance, identification and reporting

• Routinely monitor staff and residents for symptoms (enteric and respiratory)
• Record disease surveillance data (electronic or paper)
• Review surveillance data on a continuous basis to identify disease clusters and outbreaks (i.e., increases above baseline levels) in staff and/or residents
• Report any potential illness identified to the facility infection control lead
• Initiate an outbreak line list when illness is identified
• Contact Public Health whenever there is an unexplained increase in enteric or respiratory staff/resident illness
Outbreak line listing

• Complete a separate line listing for staff and resident cases
• Report the completed line listing to Public Health daily
• Remember to fill out the comments section to report any significant events such as hospitalizations
Specimen collection and transportation

- Testing conducted by Long Term Care (LTC) Home or Retirement Home (RH) staff
- Public Health mobile testing option for COVID-19 only
  - if LTC/RH unable to test – mobile can be requested
  - Community Paramedicine Program typically performs tests within 48hrs
  - medical courier to be arranged by Public Health
  - Public Health will contact the home when results are available
Testing for influenza, COVID-19 and other respiratory viruses

- Up to 4 swabs per outbreak:
  - Influenza rapid testing
  - COVID-19 testing
  - Multi-virus respiratory panel
- One NP swab per resident required
- Additional swabs sent for symptomatic residents – COVID-19 testing only
Completing test requisitions

• Select appropriate lab requisition
• Complete all sections
• Ordering Clinician – Dr Wang, MOH
• Outbreak number – will be provided by Public Health
Lab requisition
Specimen prep and pick up

• Use two patient identifiers on specimen that match the requisition
• Mark swabs: “for Public Health pick up”
• Refrigerate specimens
• Call Public Health to schedule courier pick up 519-575-4400 ext. 5506
Outbreak declaration

- Specifies type of outbreak
- Actions to manage the outbreak

1. **Verbal Declaration**

2. **Outbreak Declaration Letter**
Outbreak measures: droplet and contact precautions

• Droplet and contact precautions
• Resident accommodation
• Environment and equipment
• PPE
  • mask
  • eye protection/face shield
  • long-sleeved gown
• Gloves
• Review the Public Health Ontario Fact Sheet
Physical distancing – residents with cognitive impairments

• Other residents and staff should be encouraged to remain two metres apart from the resident.
• Staff should wear appropriate PPE.
• The resident should be encouraged to wear a mask, if tolerated:
  • non-medical mask if not ill or in isolation as a new admission or,
  • surgical/medical mask if resident is ill or in an outbreak area.
• Encourage frequent hand washing for resident using liquid soap or an alcohol-based hand rub.
• If an ill resident refuses or is unable to self-isolate, places they sit and objects they touch should be cleaned and disinfected afterwards.
• Ensure frequently touched surfaces and objects are cleaned and disinfected at least twice a day and when they look dirty:
  • examples include: doorknobs, elevator buttons, light switches, counters, hand rails, touch screen surfaces, keypads and table tops.
Outbreak measures: cohorting

**Cohorting** is the practice of grouping residents based on their risk of infection or whether they have tested positive for a microorganism.

- Resident cohorting
- Staff cohorting

Review Public Health Ontario document for Cohorting in Outbreaks
New admissions and re-admissions

- Not in outbreak
- Sufficient staffing
- Admission occurs within 24 hours of a negative COVID test result
- Incoming residents must isolate for 14 days after arriving AND receive a negative COVID test at the end of their isolation
- Incoming residents who previously tested positive and were cleared of COVID do not need to isolate
- No more than two residents per room
Outbreak measures: admissions and transfers

• No new admissions
• No re-admissions
• Absences; short stay and temporary
Outbreak measures: visitors

• Essential visitors only permitted
• Droplet contact precautions required
Outbreak measures: environmental services

• Staff guidelines
• Personal Protective Equipment (PPE)
• Cleaning and disinfection products
• Cleaning and disinfection methods
• Medical equipment
• Housekeeping carts and equipment
• Laundry
Restrictions within the outbreak areas

**Meals**
- Restrict communal dining in the outbreaks areas
- Ill residents should be served meals in their rooms

**Activities**
- Communal activities should be discontinued
- Day programs should be cancelled
- Remove all common touch items that cannot be cleaned and disinfected from the shared areas (e.g. books, puzzles)

**Animals and Pets**
- Suspend visitation of animals to the outbreak area
Outbreak over declaration

- Depends on causative agent/type of outbreak declared
- Outbreak over letter provided at end of outbreak
- Outbreak debrief
Facility responsibilities

• Assign a designated Public Health contact and a back up
• Communicate between internal departments
• Communicate with Public Health on a daily basis and to report any new cases or other pertinent events
• Monitor human health resources and PPE
• If required, collect stool or other samples as directed by Public Health
Facility responsibilities- continued

• Follow outbreak management best practices as outlined by Public Health and Public Health Ontario

• Monitor the outbreak activity and adjust outbreak management practices as needed to control the spread of the outbreak

• Maintain and report an up to date line listing to Public Health daily to the attention of the Public Health Inspector assigned to your outbreak investigation
Public Health responsibilities

• Provide recommendations on outbreak management
• Arrange for specimen transport to Public Health Ontario Lab and supply stool collection kits to the facility
• Provide information on outbreak pathogens as necessary to staff, families, and others
• Report results received from Public Health Ontario Lab.
• Conduct inspections as needed for food safety and infection prevention and control
For more information, please contact the Respiratory Reporting and Information Line

519-575-4400 x5506