

Apotex 5RF COVID-19 Outbreak

Final Control Measures

CASE DEFINITION

Any client or staff with lab confirmation of COVID-19.

SURVEILLANCE

1. Test new clients presenting with any one symptom compatible with COVID-19;
2. Initiate daily active surveillance for clients (IPAC) and staff (OHS) on the affected unit;

SIGNAGE AND ADDITIONAL PRECAUTIONS

3. Place suspected/confirmed cases on Special Droplet/Contact Precautions with signage on the doors;
4. Post outbreak signage on unit entrance doors & keep them shut for the duration of the outbreak;
5. Post a printed copy of the Control Measures at the nursing station;
6. Implement universal use of masking for staff, visitors, and contractors on the outbreak unit;
7. Implement use of N95 respirators for any clients on Special Droplet/Contact precautions;
8. Implement universal eye protection for staff and essential visitors when within <2m of any client;

ACCOMMODATION, COHORTING & ROOM RESTRICTIONS

9. Restrict suspected/confirmed cases to their rooms for the duration of Special Precautions;
10. Use dedicated mobile equipment in the rooms of confirmed/suspected cases, when possible;
11. Disinfect mobile equipment that cannot be dedicated, using disinfectant wipes;

APPOINTMENTS, LEAVES OF ABSENCE & GROUP ACTIVITIES

12. Determine whether clients' medical appointments should be kept, at the discretion of MRPs;
13. Schedule appointments end of day, if possible. Notify transport personnel and the receiving facility;
14. Reschedule non-urgent medical appointments and absences. Urgent appointments may continue with precautions;
15. Provide all clients who leave the home with a mask and inform them of the risk of transmission;
16. Organize recreational group activities for 4-5 well clients at a time only in the TV lounge and/or dining room;
17. Schedule recreational group activities at end of day and after activities for non-outbreak units;

18. Restrict clients from the outbreak unit from participating in any communal recreational group activities taking place outside the unit;
19. Communal dining can continue for well residents (1 client per table if feasible);

ADMISSIONS, RE-ADMISSIONS AND TRANSFERS

20. Permit new admissions to the affected unit only in consultation with IPAC;
21. Permit early client discharges and repatriations to homes in the community;
22. Permit transfers between affected and unaffected units only in consultation with IPAC;
23. Coordinate inter-facility transfers with Toronto Public Health. Notify the receiving facility;

STAFF, PRIVATE & ESSENTIAL CAREGIVERS, STUDENTS, VOLUNTEERS, AND VISITORS

24. Restrict confirmed/suspected staff/caregiver/etc. cases from the unit until cleared by OHS/TPH;
25. Permit healthy essential caregivers and general visitors, including for active client cases, ensuring proper PPE use and leave immediately after visit;
26. Permit healthy staff to work between affected and unaffected units, if feasible;
27. Permit students to work on unaffected units before moving to affected units and with confirmed/suspected cases;
28. Restrict volunteers from working on the affected unit;
29. Restrict essential caregivers from working on other unaffected units;

ENVIRONMENTAL SERVICES

30. Perform daily enhanced cleaning/disinfection in the rooms of confirmed/suspected cases;
31. Perform a terminal cleaning upon discontinuation of precautions;