

Manual: Emergency	Approved by: Infection Prevention and Control Practitioner	Emergency Plan: Code Silver	PLAN #: EMERG - I - 10a
O: Mar/21	CODE SILVER Outbreak Management Plan		Page 1 of 33
Revised: Nov/22; Aug/23; Jan/22; Jan/24; Feb/24			

Reviewed: Dec/23

INTRODUCTION

- This emergency Code Silver plan outlines measures for dealing with, responding to and preparing for an outbreak of a **communicable disease of public health (PH) significance** (reportable) at **Bob Rumball Home for the Deaf (BRHD)**.^{i ii iii}
 - An outbreak is reported to Simcoe Muskoka District Health Unit (SMDHU) and Ministry of Long-Term Care (MLTC):^{iv}
 - To prevent and control an infection that is making residents and/or staff sick;
 - To implement *infection* control measures quickly to prevent more illness in resident and staff populations;
 - To obtain an outbreak number for laboratory (lab) testing from SMDHU;
 - To utilize the expertise and support of SMDHU; and
 - Because it is required by legislation, including the Ontario Regulation (ss. 115(1)1.)^v under the *Fixing Long-Term Care Act, 2021* (FLTCA); and as required under the *Health Protection and Promotion Act, 1990* (HPPA).
 - For a list of **Diseases of PH Significance**,^{vi} refer to “**Appendix A**” of this plan. Fact sheets are available on each disease by clicking on the specific disease within the **resource link**.
 - Any disease of PH significance must be **reported** to SMDHU, who provides a “**Disease of Public Health Significance Reporting Form**”.^{vii}

Outbreak Case Definition

- “A case definition lists the criteria of who should be classified as a case **and** added to the line list.”^{viii}
- For SMDHU’s “**Enteric and Respiratory Outbreak Quick Reference**” refer to **Appendix B**.
- For case definitions, please refer to the **PIDAC document** titled “*Recommended Case Definitions for Surveillance of Health Care-Associated Infections in Long-Term Care Homes*”.^{ix}

The Code Silver plan includes, but is not limited to: ^x

- The Lead for co-ordinating the “Outbreak Management” activities
- Consultation
- Record Retention
- Hazards and Risks of an Outbreak (communicable disease and disease of PH significance)
- Outbreak Supplies and Equipment
- **Activation of the Outbreak Plan ~ Specific Roles and Responsibilities / lines of authority**, including:
 - that SMDHU is the only authority to declare the outbreak, and declares that the outbreak is over at BRHD;
 - the necessity for clear and timely communication throughout the outbreak emergency, including with persons living, working and volunteering at BRHD, and with the entities that may be involved in or provide emergency services in responding to the emergency ^{xi}
- Activities after the Outbreak is declared over
- Training / Retraining

Manual: Emergency	Approved by: Infection Prevention and Control Practitioner	Emergency Plan: Code Silver	PLAN #: EMERG - I - 10a
O: Mar/21	CODE SILVER Outbreak Management Plan		Page 2 of 33
Revised: Nov/22; Aug/23; Jan/22; Jan/24; Feb/24			

- Related Policies and Plans
- Appendices

LEAD FOR CO-ORDINATING THE “OUTBREAK MANAGEMENT” ACTIVITIES

The **Infection Prevention and Control Practitioner (IPACP)**,^{xii} who is the Assistant Director of Nursing and Personal Care (ADONPC) at BRHD, or their **designate** is the lead person responsible to ensure:^{xiii}

1. The Code Silver - **Outbreak Management Plan** is **tested annually**, including arrangements with the entities that may be involved in or provide emergency services to BRHD.^{xiv}

Note:

*If conducting a **Mock Emergency Test**, you **must notify the appropriate emergency entities at least 24 hours PRIOR** to conducting the Mock Test, as per the non-emergency contact numbers. The entities/entity will likely inquire as to the mock emergency details, e.g., date, time, type of test, and other external entities involved, as appropriate.*

2. The Code Silver - **Outbreak Management Plan is evaluated and updated**, including the **updating** of all emergency **contact information of the entities**:
 - (a) at least **annually**, and
 - (b) **within 30 days** of the **Outbreak Management Plan** being activated and declared over.^{xv}

Any **changes to the Code Silver - Outbreak Management Plan** will be identified and the following notified of the changes:

- The staff, volunteers and students, by notification and training as appropriate;
- The RC and FC if any, by providing an update at their respective meetings; and
- The entities, by providing a copy of the updated emergency plan for their review and feedback.^{xvi}

In evaluating and updating the plan as required BRHD will ensure that the entities involved in an emergency response, are offered an opportunity to provide feedback.^{xvii}

3. To chair the **Outbreak Management Team** meetings.

Notes: *The purpose of the OMT is to provide direction and assist in managing the Outbreak.*^{xviii}
SMDHU provides an “Agenda/Minutes - OMT Meeting” template.^{xix}

BRHD’s Outbreak Management Team (OMT) includes, but is not limited to the following members:

- IPACP / ADONPC
- The Director of Nursing and Personal Care (DONPC); (*back-up for the IPACP*)
- Administrator
- Manager of Nutrition and Environmental Services
- SMDHU (Medical Officer of Health) Representative
- Medical Director
- Social Services Manager / Volunteer Co-ordinator
- Pharmacist (Silver Fox Pharmacy)
- Laboratory Services (e.g., Life Labs)
- Administrative Assistant

Manual: Emergency	Approved by: Infection Prevention and Control Practitioner	Emergency Plan: Code Silver	PLAN #: EMERG - I - 10a
O: Mar/21	CODE SILVER Outbreak Management Plan		Page 3 of 33
Revised: Nov/22; Aug/23; Jan/22; Jan/24; Feb/24			

- PSW Supervisor
- Resident Care Supervisor

CONSULTATION ^{xx}

The following will be consulted when developing and/or updating the Code Silver – **Outbreak Management Plan**:

- BRHD staff, including the registered nursing staff, and managers
- The Residents’ Council (RC) and the Family Council (FC), if any; ^{xxi} and
- The relevant external **entities**, as appropriate: ^{xxii xxiii}
*(Refer to current Emergency and Non-emergency **contact info** at front of Emergency Manual, which is reviewed and updated as necessary annually by IPACP. ^{xxiv})*
 - **SMDHU** ~ Outbreak reporting; declares outbreak; declares outbreak over; daily contact during outbreak. SMDHU is invited to participated in developing, updating, testing, evaluating and reviewing this emergency plan. ^{xxv}
 - **Medical Director**, Dr. Kelley Wright ~ Medical orders for resident care, e.g., antivirals, change in medication times to BID, where appropriate, etc.
 - **Life Labs** ~ testing supplies, test reports etc.,
 - **Public Health Ontario** – Outbreak Labs ~ reporting
 - **Silver Fox Pharmacy** (SFP) - Ensure residents have timely access to all drugs that have been prescribed for them, including antivirals, etc.
***Note:** Follow EMERG-I-02 ~ Code Green Appendix 8 – Drug Provision Plan, including SFP policy #13.8, as required. ^{xxvi}*
 - **IPAC Hub** - Royal Victoria Hospital (RVH) ~ IPAC resource
 - **Paramedic services** ^{xxvii} (Transport of residents – Staff to ensure notification of outbreak & resident health status prior to resident transfer.)
 - **Pro Resp** (oxygen supplies and equipment)
 - **Barrie & Area Ontario Health Team (OHT)** [formerly the LHIN] ^{xxviii} ~ IPAC resource
 - **Ministry of Long-Term Care** – monitors outbreak activities, including request of reports
 - **North Simcoe Muskoka (NSM) Hospice Palliative Care Network** (NSMHPCN) ~ Palliative Care and End-of-Life service for residents, if required during outbreak
 - **Coroner** ~ notification and potential investigation in resident death during outbreak ^{xxix}

RECORD RETENTION: BRHD will keep a record of the **testing** of the Code Silver Plan that is activated in response to an outbreak (mock or actual); of **changes made to improve the plans;** ^{xxx} **consultations,** ^{xxxi} and the current **contact information** for relevant entities that may be involved in the emergency plans. ^{xxxii}

Emergency Manual Location: A copy of the Code Silver Plan is available in the BRHD’s Emergency Manual located in the front vestibule, and in each Care Centre (CC). In addition, BRHD’s emergency plans are located in the Home’s computer system on the “S” drive, and on the BRHD website. Physical copies of the plan are made available upon request. ^{xxxiii}

Manual: Emergency	Approved by: Infection Prevention and Control Practitioner	Emergency Plan: Code Silver	PLAN #: EMERG - I - 10a
O: Mar/21	CODE SILVER Outbreak Management Plan		Page 4 of 33
Revised: Nov/22; Aug/23; Jan/22; Jan/24; Feb/24			

HAZARDS and RISKS of an OUTBREAK ^{xxxiv}

- “Infectious diseases are caused by different types of germs. These include bacteria, viruses, parasites, or fungus that can be **spread to humans** in a variety of ways. Infectious diseases can pose a serious health risk, particularly for children, the elderly, and those with weak immune systems. It’s important to identify infectious diseases and stop their spread as soon as possible.” ^{xxxv}

An outbreak of a communicable disease of PH significance^{xxxvi} at BRHD may:

- expose a greater number of persons to the disease, e.g., those who live, work or visit at BRHD, including their families and other persons to which they contact;
- negatively affect the health of the individual who contracts the disease, e.g., physically up to and including death, socially through isolation for a period of time, and financially through loss of income;
- increase absenteeism of caregivers/staff, resulting in less care and services for residents; and
- lead to an epidemic, and pandemic.

Note: *The World Health Organization (WHO) defines:*

- an **epidemic** as “the occurrence in a community or region of cases of an illness . . . clearly in excess of normal expectancy” (Porta 2014).
- A **pandemic** is “an epidemic occurring over a very wide area, crossing international boundaries, and usually affecting a large number of people” (Porta 2014). *Pandemics are, therefore, identified by their geographic scale rather than the severity of illness. For example, in contrast to annual seasonal influenza epidemics, pandemic influenza is defined as “when a new influenza virus emerges and spreads around the world, and most people do not have immunity” (WHO 2010).*^{xxxvii}

- **To minimize the hazards and risks associated with an infectious outbreak,** BRHD implements appropriate measures including but not limited to:

- Promote residents, staff and caregivers to stay up to date with immunizations
- **Conduct all PAC audits weekly during an infectious outbreak,** ^{xxxviii} including the **Enhanced cleaning and disinfecting audit** (INF-V-02a).
 - Conduct **BRHD’s hand hygiene and PPE audit** (INF-II-27a) **monthly** when **not** in an outbreak;^{xxxix}
 - Conduct the following audits **quarterly** when **not** in an outbreak
 - PHO “**Auditing of Personal Protective Equipment (PPE) Use**”.^{xl} ;
 - Public Health Ontario’s (PHO) “**Self-Assessment Audit**”^{xli} ,
 - **IPAC Supplies - Inventory Audit** (INF-VI-03), and
 - Any other required IPAC audit, to ensure compliance with IPAC routines and practices.

Notes: *Results of the IPAC audits conducted, will be kept for at least 30 days and upon request, will be shared with inspectors from the public health unit (PHU), Ministry of Labour, Immigration, Training and Skills Development (MLITSD), and Ministry of Long-Term Care (MLTC).*

- IPAC training/retraining of staff and others, as required
- Take steps for early identification of outbreaks ^{xlii} including:
 - conduct infection surveillance in residents, and staff, and identify symptoms on the “Daily Infection Signs and Symptoms Tracking Form”.^{xliii}

Manual: Emergency	Approved by: Infection Prevention and Control Practitioner	Emergency Plan: Code Silver	PLAN #: EMERG - I - 10a
O: Mar/21	CODE SILVER Outbreak Management Plan		Page 5 of 33
Revised: Nov/22; Aug/23; Jan/22; Jan/24; Feb/24			

- suspect an outbreak based on outbreak case definitions,^{xliv} and
- initiate action for outbreak management
 - Implement BRHD IPAC policies and procedures Routine Practices and Additional Precautions (INF-II-118)
 - Notify and follow the advice of SMDHU

Note: *In the event of an outbreak follow the “Activation of the Outbreak Management Plan” as outlined in the chart below.*

OUTBREAK SUPPLIES and EQUIPMENT^{xlv}

- Minimum 4-wk supply, including:
 - PPE e.g., medical masks, respirators N-95 or equivalent, eye protection (face shields/goggles), gowns, gloves
 - alcohol-based hand rub (ABHR) / hand sanitizer. **Note:** *hand-sanitizer containers are on the wall outside resident bedrooms and throughout the Home, for ease of use.*
 - Environmental Inventory – disinfectant wipes, chemicals, trash bins and bags
- Mask fit-testing supplies
- **Resource materials ~**
 - SMDHU Outbreak Resources,^{xlvi} e.g., line lists, reporting, checklists, signage, Outbreak Forms (Respiratory / Enteric / General). Template for Agenda / Minutes Outbreak Management Team (OMT) meetings; Professional Development training slides, Family / Visitor Outbreak pamphlets and guide; and Clinical Resources.
 - BRHD IPAC policies and procedures (INF_II-xx); IPAC Evaluations (Quarterly and Annual) Templates (INF-IV-01 / INF-VI-02); Audit Tools / Checklist (e.g., hand hygiene and PPE; environmental checklists;
 - Emergency Manual with:
 - Emergency / non-emergency contact numbers; and this Code Silver Plan (EMERG-II-10a);
 - BRHD’s Food and Fluid Emergency Plan^{xlvii} found in EMERG-I-02 ~ Code Green, Appendix 9.
 - Silver Fox Pharmacy’s (SFP) policy #13.8, which is the Drug Provision Plan followed in an outbreak.^{xlviii} The Drug Provision Plan can be found in EMERG-I-02 ~ Code Green Appendix 8.
 - Public Health Ontario (PHO) and PIDAC Best Practice Guidelines^{xlix}, and MLTC IPAC resource material (e.g., gastroenteritis outbreaks^l)

Manual: Emergency	Approved by: Infection Prevention and Control Practitioner	Emergency Plan: Code Silver	PLAN #: EMERG - I - 10a
O: Mar/21	CODE SILVER Outbreak Management Plan		Page 6 of 33
Revised: Nov/22; Aug/23; Jan/22; Jan/24; Feb/24			

ACTIVATION OF THE PLAN ⁱⁱ *

ROLES AND RESPONSIBILITIES ⁱⁱⁱ

- “IPACP” in the following chart refers to the “Infection Prevention and Control Practitioner”. The IPACP is the primary Lead during an Outbreak and initiates action in a suspected or confirmed outbreak. Action includes directing other staff as applicable to complete tasks as assigned. ^{liii}
- **Note: The staff member identified to perform the task may be substituted with their designate.**
- The info contained in the following chart is based on the SMDHU “Outbreak Management for LTC & Retirement Homes” ^{liv}

<p>IPACP: The IPACP is the primary Lead during an outbreak and initiates action in a suspected or confirmed outbreak. Action includes directing other staff as applicable to complete tasks as assigned.</p> <p>Staff: Staff members are assigned to specific tasks as outlined in the chart. Staff members should ensure residents maintain a 6' separation. The Spa at end of affected resident's unit may be used to... ^{liii}</p>	Assigned “A” +/or Completed “C” by []
--	--

<p>IPACP: The IPACP is the primary Lead during an outbreak and initiates action in a suspected or confirmed outbreak. Action includes directing other staff as applicable to complete tasks as assigned.</p> <p>Staff: Staff members are assigned to specific tasks as outlined in the chart. Staff members should ensure residents maintain a 6' separation. The Spa at end of affected resident's unit may be used to... ^{liii}</p> <ul style="list-style-type: none"> • Note: Separate surveillance line-lists are to be used for resident and staff cases. [] • Note: For instructions to complete line lists: https://www.simcoemuskokahealth.org/docs/default-source/ify-health-care-professionals/161013-filling-out-a-line-list-sept-2016.pdf?sfvrsn=4 	Assigned “A” +/or Completed “C” by []
---	--

Manual: Emergency	Approved by: Infection Prevention and Control Practitioner	Emergency Plan: Code Silver	PLAN #: EMERG - I - 10a
O: Mar/21	CODE SILVER Outbreak Management Plan		Page 7 of 33
Revised: Nov/22; Aug/23; Jan/22; Jan/24; Feb/24			

<ul style="list-style-type: none"> • <u>Outbreak line-list to be used on each Care Centre</u>. • <u>Note: SMDHU will follow up on external contact tracing as necessary.</u> <p>Use outbreak Fax cover sheet “Daily Line Listing Summary”</p> <ul style="list-style-type: none"> ○ ○ ○ 	□
--	---

<ul style="list-style-type: none"> • (Refer to OMT membership above); • (Provides a guide for OMT meeting) <p>Notes</p> <ul style="list-style-type: none"> • Only SMDHU can declare an outbreak status; and declare the end of an outbreak at BRHD. • SMDHU will notify IPAC Hub and Hub rep will contact IPACP. 	□
---	---

<p>Direct RN/RPN to:</p> <ul style="list-style-type: none"> • outside affected resident’s bedroom /unit, as appropriate, (e.g., • • <p>Notes:</p> <p>. Do not overstock as supplies cannot be used on alternate persons post isolation.</p>	□
--	---

Manual: Emergency	Approved by: Infection Prevention and Control Practitioner	Emergency Plan: Code Silver	PLAN #: EMERG - I - 10a
O: Mar/21	CODE SILVER Outbreak Management Plan		Page 8 of 33
Revised: Nov/22; Aug/23; Jan/22; Jan/24; Feb/24			

<p>. Refer to BRHD's Masking and PPE policies <i>INF-II-30, 33, 36, 39 re Gloves, masks/respirators, eye protection & gowns</i>; . and</p> <p>. Encourage resident(s) to wear a mask if able (<i>INF-II-117</i>).</p> <ul style="list-style-type: none"> • [REDACTED] • [REDACTED] • [REDACTED] • when entering affected resident's room. [REDACTED] • [REDACTED] • [REDACTED] • [REDACTED] • Notify the affected resident's POA/SDM for personal care, family representative, & ensure [REDACTED] 	
---	--

<p>[REDACTED]</p> <ul style="list-style-type: none"> • [REDACTED] • [REDACTED] (<i>Visitor Policy INF-II-115</i>), [REDACTED] <ul style="list-style-type: none"> ○ [REDACTED] ○ Ensure all non-essential contracted services are cancelled. • [REDACTED] MLTC [REDACTED] <p>Notes: MLTC may conduct inspection, either with SMDHU or on their own; SMDHU or MLTC may issue orders depending on risk including setting up a management takeover, e.g., by hospital. Both MLTC & SMDHU will conduct outbreak monitoring daily for statistics.</p> <p>[REDACTED]</p> <ul style="list-style-type: none"> • [REDACTED] (<i>Derek Rumball</i>) • [REDACTED] (<i>Refer to Appendix C; and SMDHU signage ^(xi)</i>) <ul style="list-style-type: none"> ○ [REDACTED] • [REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none"> • [REDACTED] <ol style="list-style-type: none"> 1. “Outbreak Management: A Guide for residents, families and visitors”: [REDACTED] 2. “Outbreaks: What you need to know to protect yourself and your loved one”: (<i>Refer to Appendix D – copy and print as required</i>) 	<p>[REDACTED]</p>
--	-------------------

Manual: Emergency	Approved by: Infection Prevention and Control Practitioner	Emergency Plan: Code Silver	PLAN #: EMERG - I - 10a
O: Mar/21	CODE SILVER Outbreak Management Plan		Page 9 of 33
Revised: Nov/22; Aug/23; Jan/22; Jan/24; Feb/24			

Assigned "A" +/-or Completed "C" by
<p>Direct RN/RPN to:</p> <ul style="list-style-type: none"> Notify affected resident's (if different from the Medical Director); e.g., COVID-19, or EOL Order Set physician/ PA's orders Resident's and interventions: and update if significant change to resident's

Assigned "A" +/-or Completed "C" by
<ul style="list-style-type: none"> (residents, staff, others)
<ul style="list-style-type: none"> (single rm preferred, if resident has a roommate, and affected resident cannot be isolated, ensure 2 metres/6' distance is maintained from affected resident); & (Refer to: SMDHU Outbreak Resources Signage ^{lxiii}; and Policy INF-II-118 – Routine Practices & Additional Precautions for explanation and signage).

Manual: Emergency	Approved by: Infection Prevention and Control Practitioner	Emergency Plan: Code Silver	PLAN #: EMERG - I - 10a
O: Mar/21	CODE SILVER Outbreak Management Plan		Page 10 of 33
Revised: Nov/22; Aug/23; Jan/22; Jan/24; Feb/24			

<ul style="list-style-type: none"> • <u>Review the Home's policies and procedures for the management of infectious diseases, including the Code Silver Outbreak Management Plan, and ensure they are up to date.</u> 	□
---	---

<ul style="list-style-type: none"> • <u>Review the Home's policies and procedures for the management of infectious diseases, including the Code Silver Outbreak Management Plan, and ensure they are up to date.</u> <p><i>SMDHU Outbreak Management Checklist forms are available for:</i></p> <p>. Respiratory/COVID-19: <u>Respiratory/COVID-19 Outbreak Management Checklist</u></p> <p>, Enteric: <u>Enteric Outbreak Management Checklist</u></p> <p><i>Additional SMDHU resources include, e.g.: requisition forms with instruction, line lists, resident initial reporting form, "Additional Precaution" signage; & "Disease of PH Significance Reporting Form" ^{lxv}</i></p> <ul style="list-style-type: none"> • <u>Review the Home's policies and procedures for the management of infectious diseases, including the Code Silver Outbreak Management Plan, and ensure they are up to date.</u> (Refer to p.14 "Auditing") • <u>Review the Home's policies and procedures for the management of infectious diseases, including the Code Silver Outbreak Management Plan, and ensure they are up to date.</u> 	□
---	---

<ul style="list-style-type: none"> • <u>Review the Home's policies and procedures for the management of infectious diseases, including the Code Silver Outbreak Management Plan, and ensure they are up to date.</u> <p>INF-II-27 <u>Influenza Protocol</u> INF-II-115 <u>COVID-19 Cohorting</u></p> <ul style="list-style-type: none"> • <u>Review the Home's policies and procedures for the management of infectious diseases, including the Code Silver Outbreak Management Plan, and ensure they are up to date.</u> • <u>Review the Home's policies and procedures for the management of infectious diseases, including the Code Silver Outbreak Management Plan, and ensure they are up to date.</u> • <u>Review the Home's policies and procedures for the management of infectious diseases, including the Code Silver Outbreak Management Plan, and ensure they are up to date.</u> (Refer to Cohorting for COVID-19 INF-II-120, & endnote Ref ^{lxvii}) <ul style="list-style-type: none"> ○ <u>Review the Home's policies and procedures for the management of infectious diseases, including the Code Silver Outbreak Management Plan, and ensure they are up to date.</u> ○ <u>Review the Home's policies and procedures for the management of infectious diseases, including the Code Silver Outbreak Management Plan, and ensure they are up to date.</u> • <u>Review the Home's policies and procedures for the management of infectious diseases, including the Code Silver Outbreak Management Plan, and ensure they are up to date.</u> , review the Home's plans/policies for <u>Employee Medical Form MRC-104; COVID-19 Vaccination and Management Policy for Workers: INF-II-19; Influenza Protocol: INF-II-16; Management of Staff, Students, Volunteers exposed to COVID-19 INF-II-122 ^{lxviii}</u> 	□
--	---

Manual: Emergency	Approved by: Infection Prevention and Control Practitioner	Emergency Plan: Code Silver	PLAN #: EMERG - I - 10a
O: Mar/21	CODE SILVER Outbreak Management Plan		Page 12 of 33
Revised: Nov/22; Aug/23; Jan/22; Jan/24; Feb/24			

<ul style="list-style-type: none"> • <u>Refer to Appendix E.2. "Algorithm for Admissions and Transfers".</u> <p>Notes:</p> <ul style="list-style-type: none"> • Residents are not restricted from entry. • Residents may choose not to return to Home if their room is in an outbreak area. • <u>Refer to Appendix E.2. "Algorithm for Admissions and Transfers".</u> of the Home's outbreak and the affected resident's disease status. <ul style="list-style-type: none"> ○ <u>Refer to Appendix E.2. "Algorithm for Admissions and Transfers".</u> ○ <u>Refer to Appendix E.2. "Algorithm for Admissions and Transfers".</u> ○ <u>Refer to Appendix E.2. "Algorithm for Admissions and Transfers".</u> 	
<p>Ensure</p> <ul style="list-style-type: none"> • <u>Refer to Appendix E.2. "Algorithm for Admissions and Transfers".</u> • <u>Refer to Appendix E.2. "Algorithm for Admissions and Transfers".</u> <ul style="list-style-type: none"> ○ <u>Refer to Appendix E.2. "Algorithm for Admissions and Transfers".</u> • <u>Refer to Appendix E.2. "Algorithm for Admissions and Transfers".</u> (separate one for residents and staff). • <u>Refer to Appendix E.2. "Algorithm for Admissions and Transfers".</u> 	

	Assigned "A" +/or Completed "C" by
<ul style="list-style-type: none"> • <u>Refer to Appendix E.2. "Algorithm for Admissions and Transfers".</u> <ul style="list-style-type: none"> ○ <u>Refer to Appendix E.2. "Algorithm for Admissions and Transfers".</u> ○ <u>Refer to Appendix E.2. "Algorithm for Admissions and Transfers".</u> ○ <u>Refer to Appendix E.2. "Algorithm for Admissions and Transfers".</u> ○ <u>Refer to Appendix E.2. "Algorithm for Admissions and Transfers".</u> ○ <u>Refer to Appendix E.2. "Algorithm for Admissions and Transfers".</u> • <u>Refer to Appendix E.2. "Algorithm for Admissions and Transfers".</u> <ul style="list-style-type: none"> ○ <u>Refer to Appendix E.2. "Algorithm for Admissions and Transfers".</u> • <u>Refer to Appendix E.2. "Algorithm for Admissions and Transfers".</u> <ul style="list-style-type: none"> ○ <u>Refer to Appendix E.2. "Algorithm for Admissions and Transfers".</u> 	

Manual: Emergency	Approved by: Infection Prevention and Control Practitioner	Emergency Plan: Code Silver	PLAN #: EMERG - I - 10a
O: Mar/21	CODE SILVER Outbreak Management Plan		Page 13 of 33
Revised: Nov/22; Aug/23; Jan/22; Jan/24; Feb/24			

	Assigned "A" +/-or Completed "C" by
<p>DONPC and MNES –</p> <p>Ensure</p> <ul style="list-style-type: none"> • Ensure residents' basic care needs are met. <ul style="list-style-type: none"> ○ Ensure residents' basic care needs are met. • Residents not in isolation encouraged to keep distance (2m./6'); as well as • (Cohorting Policy INF-II-120); Note: Map of Home in front of Emergency Manual; Staff Contingency Plan in Pandemic Plan, e.g., call-in for additional shifts, work longer shifts, agency staff use, as needed. ^{lxxiii} • possible. (Refer to "Communal Dining Precautions During Pandemic" DTY <p>Notes:</p> <ul style="list-style-type: none"> ○ Dietary and nursing supervisors should review with nursing and dietary staff the process for putting meals on trays (cover); transport to resident's rooms; set-up; supervision/assistance in room; disposal; and pick up of trays. ○ Ensure review of PCRA and appropriate additional precautions as required. ○ As needed, refer to Food and Fluid Emergency Plan EMERG-I-02 (Code Green Appendix 9) – e.g., for Emergency Menu during Outbreak. ^{lxxiv} <ul style="list-style-type: none"> • [Suppliers for both nursing [NUR-X-01] and environmental services [ENV-X-01] including PPE and replace as needed, ABHR, disinfectant wipes and spray, etc.] Note: ○ ○ • conducts "terminal" (Resident Room Terminal Clean Policy (ENV-V-05) 	

Manual: Emergency	Approved by: Infection Prevention and Control Practitioner	Emergency Plan: Code Silver	PLAN #: EMERG - I - 10a
O: Mar/21	CODE SILVER Outbreak Management Plan		Page 17 of 33
Revised: Nov/22; Aug/23; Jan/22; Jan/24; Feb/24			

○ arrange for updating training/retraining of staff as required (as outlined below).	
--	--

	Assigned "A" +/or Completed "C" by
<ul style="list-style-type: none"> • [Redacted] • [Redacted] • [Redacted] Checklist for Code Silver ~ Outbreak Management Plan [Redacted] 	

TRAINING – Outbreak Plan ^{xc}

- BRHD staff, volunteers, and students will receive training on emergency plans during their orientation, and at least **annually** thereafter.^{xci}
- The training will be based on that staff member’s responsibilities, prior to that person performing his/her responsibilities.^{xcii}
Note: In the event of an emergency or exceptional unforeseen circumstances, e.g., the new employee is being orientated on-site with another employee, the emergency training must be provided within one week of when the person begins performing their responsibilities.^{xciii}

STAFF RETRAINING ^{xciv}

- All staff will receive annual retraining / reassessment on the Emergency Plan through Surge Learning and related Qs and As.^{xcv xcvi} If staff at that time, or at any time are assessed as requiring further retraining, this will be done by the employee’s supervisor in a manner considered appropriate, e.g., repeating the training, 1:1 etc..^{xcvii}
- During the annual testing of the emergency procedure, any staff assessed as requiring further training will be retrained, based on his/her responsibilities during the emergency procedure.^{xcviii}

RELATED POLICIES / PLANS

- BRHD’s IPAC Policies and Procedures on the S Drive (INF-II-xx)
- BRHD’s Code Silver: Epidemic / Pandemic Plan (EMERG-II-10b)
- BRHD’s Code Green: Evacuation, including:
Appendix 8 – Drug Provision Plan with Silver Fox Pharmacy policy #13.8.^{xcix}
Appendix 9 - Food and Fluid Emergency Plan ^c

Manual: Emergency	Approved by: Infection Prevention and Control Practitioner	Emergency Plan: Code Silver	PLAN #: EMERG - I - 10a
O: Mar/21	CODE SILVER Outbreak Management Plan		Page 18 of 33
Revised: Nov/22; Aug/23; Jan/22; Jan/24; Feb/24			

RESOURCES

- **SMDHU Portal**^{ci}
 - Outbreak Resources, factsheets and health faxes
 - PHO: **Influenza Antiviral Treatment**^{cii} (2021)
 - NACI: **An Advisory Committee Statement (ACS) National Advisory Committee on Immunization (NACI) Canadian Immunization Guide Chapter on Influenza and Statement on Seasonal Influenza Vaccine for 2021–2022**^{ciii}
 - SMDHU: **PHO and PIDAC Best Practice Guidelines**^{civ}
 - E.g., Best Practices in all Health Care Settings: Hand Hygiene, Routine and Additional Precautions, and Environmental Cleaning
 - **OPH Standards: Resource Documents**^{cv}
 - Recommendations for the Control of Respiratory Infection Outbreaks in Long-Term Care Homes, 2018
 - Recommendations for the Control of Gastroenteritis Outbreaks in Long-Term Care Homes, 2018

APPENDICES

Appendix A - Diseases of Public Health Significance – Tool Kit^{cvi cvii}

Note: To obtain additional pertinent information on each disease, bring up the original document using the endnote link ^{cviii} and click on the specific disease’s embedded link.

Appendix B - Enteric and Respiratory Outbreak Quick Reference^{cix}

Appendix C - Outbreak Signage - Stop: Visitors Please Read; Outbreak Declared^{cx}

Note: Additional signage available using same endnote reference.

Appendix D - Outbreaks: What you need to know to protect yourself and your loved one^{cxii} (pamphlet)

Note: Another good resource is: “**Outbreak Management: A Guide for residents, families and visitors**”: <https://www.simcoemuskokahealth.org/docs/default-source/ify-health-care-professionals/161013-ltc-resident-and-family-outbreak-management-booklet-2016.pdf?sfvrsn=4>

Appendix E.1. - Repatriation Algorithm for Residents to a LTCH in Outbreak^{cxii} (**SMDHU Sample**)

Appendix E.2. - **If a COVID-19 outbreak** ~ Resident Admissions and Transfers^{cxiii}

Note: Also found in BRHD’s “Visitor Policy” (INF-II-115).

Appendix F- Code Silver Test Report and Evaluation ~ Outbreak Management Plan

Appendix G - Checklist for Code Silver ~ Outbreak Management Plan

Note * Please make a copy of the “Activation of the Plan” section of this plan (pages 5-15 inclusive) for the Command Centre Bag.

Manual: Emergency	Approved by: Infection Prevention and Control Practitioner	Emergency Plan: Code Silver	PLAN #: EMERG - I - 10a
O: Mar/21	CODE SILVER Outbreak Management Plan		Page 19 of 33
Revised: Nov/22; Aug/23; Jan/22; Jan/24; Feb/24			

Appendix A: SMDHU Communicable Diseases of PH Significance – Tool Kit cxiv

Timely reporting of Diseases of Public Health Significance is mandated and essential for their control. If you suspect or have confirmation of the following specified Diseases or their etiologic agents, (as per Ontario Regulation 135/18 and amendments under the Health Protection and Promotion Act, R.S.O. c.H.7) please report them to the local Medical Officer of Health.

Note: Diseases **bolded** (and influenza in institutions) should be reported immediately to the Medical Officer of Health. Other diseases can be reported by the next working day by fax, phone, or mail.

- **Acquired Immunodeficiency Syndrome (AIDS)**
- **Acute flaccid paralysis (AFP)**
- **Amebiasis**
- ▶ **Anthrax**
- **Blastomycosis**
- ▶ **Botulism**
- ▶ **Brucellosis**
- **Campylobacter enteritis**
- **Carbapenemase-producing Enterobacteriaceae (CPE)**
- **Chancroid**
- **Chickenpox (Varicella)**
- **Chlamydia trachomatis infections**
- **Cholera**
- **Clostridium difficile associated disease (CDAD) outbreaks in Public Hospitals**
- **COVID-19 (Novel Coronavirus)**
- ▶ **Creutzfeldt-Jakob Disease, all types**
- **Cryptosporidiosis**
- **Cyclosporiasis**
- ▶ **Diphtheria**
- **Echinococcus multilocularis**
- **Encephalitis, including:**
 - 1. Primary Viral
 - 2. Post-infectious
 - 3. Vaccine-related
 - 4. Subacute sclerosing panencephalitis
 - 5. Unspecified
- **Food poisoning, all causes**
- ▶ **Gastroenteritis, institutional & public hospital outbreaks, *Gardis***
- **Gonorrhoea**
- ▶ **Group A Streptococcal disease, invasive**
- **Group B Streptococcal disease, neonatal**
- ▶ **Haemophilus influenzae disease, invasive, all types**
- ▶ **Hantavirus pulmonary syndrome**
- ▶ **Hemorrhagic fevers, including:**
 - ▶ 1. Ebola virus disease
 - ▶ 2. Marburg virus disease
 - ▶ 3. Lassa Fever
 - ▶ 4. Other viral causes
- ▶ **Hepatitis, viral:**
 - ▶ 1. Hepatitis A
 - ▶ 2. Hepatitis B
 - ▶ 3. Hepatitis C
- **Influenza**
- **Legionellosis**
- **Leprosy**
- **Listeriosis**
- **Lyme disease**
- ▶ **Measles**
- **Meningitis, acute**
 - 1. bacterial
 - 2. viral
 - 3. other
- ▶ **Meningococcal disease, invasive**
- ▶ **Monkeypox**
- **Mumps**
- **Ophthalmia neonatorum**
- **Paralytic shellfish poisoning (PSP)**
- **Paratyphoid Fever**
- **Pertussis (Whooping Cough)**
- ▶ **Plague**
- **Pneumococcal disease, invasive**
- ▶ **Poliomyelitis, acute**
- **Psittacosis/Qunitosis**
- **Q Fever**
- ▶ **Rabies**
- ▶ **Respiratory infection outbreaks in institutions & public hospitals**
- **Rubella**
- **Rubella, congenital syndrome**
- **Salmonellosis**
- ▶ **Severe Acute Respiratory Syndrome (SARS)**
- **Shigellosis**
- ▶ **Smallpox**
- **Syphilis**
- **Tetanus**
- **Trichinosis**
- **Tuberculosis**
- **Tularemia**
- **Typhoid Fever**
- **Verotoxin-producing E. coli infection indicator conditions including, Haemolytic Uraemic Syndrome (HUS)**
- **West Nile Virus Illness**
- **Yersiniosis**





Enteric and Respiratory Outbreak Quick Reference

Suspect Enteric Outbreak Definition	Suspect Respiratory Outbreak Definition
<ul style="list-style-type: none"> • Two suspected cases of infectious gastroenteritis in a specific area, such as a home, unit, or floor within 48 hours -or- • When more than one unit has a case of gastrointestinal illness within 24 hours. -or- 	<ul style="list-style-type: none"> • Two cases of Acute Respiratory Illness (ARI) occurring within 48 hours in a geographic area (e.g. unit, floor) -or- • More than one unit having a case of ARI within 48 hours -or- • One laboratory-confirmed case of influenza
Suspect an Outbreak?	
<ol style="list-style-type: none"> 1. Start line lists: one for residents and one for staff. 2. Contact your SMDHU liaison, as early in the day as possible, or ext. 5925 or 705-721-7520 to consult. 3. Fax the line list to 705-725-8007 for discussion with your liaison. 4. Create a case definition with your liaison. 5. Implement Outbreak Control Measures. 6. Collect specimens: Enteric: Use outbreak stool kit, fill all containers Respiratory: Use Nasopharyngeal (NP) Swabs. 7. Fill out lab requisition and obtain an outbreak number from the liaison. 8. Arrange with liaison for specimen pick up to go to the Public Health Laboratory. 9. Ensure adequate Personal Protective Equipment (PPE) is available for staff and visitors. 10. Notify partners: CCAC, nursing agencies, local hospital ER and the ICP. 	
Outbreak Control Measures	
<ol style="list-style-type: none"> 1. Isolate ill residents in their rooms and exclude ill staff and volunteers from work 2. Enteric: 48 hours symptom free or in consultation with ICP or SMDHU liaison 3. Respiratory: 5 days from onset of symptoms or when symptoms have resolved whichever is shorter 4. Increase hand hygiene practice for residents and staff 5. Enhance cleaning and disinfecting of all commonly touched surfaces 6. Post outbreak signage at all entrances to the facility and outside each isolated room 7. Limit visitors from entering the facility or affected unit 8. Use Personal Protective Equipment (PPE) gloves, gowns, and/ or masks when entering an ill resident's rooms 9. Cohort staff providing care to ill residents 10. Reschedule non-urgent appointments and notify receiving facility that you are in an outbreak 11. Cancel communal activities and meetings 12. Dedicate non-critical resident care equipment to ill residents (i.e. commode) 13. Provide health teaching to staff and residents regarding outbreak control measures 14. Hold Outbreak Management Team meetings daily 	

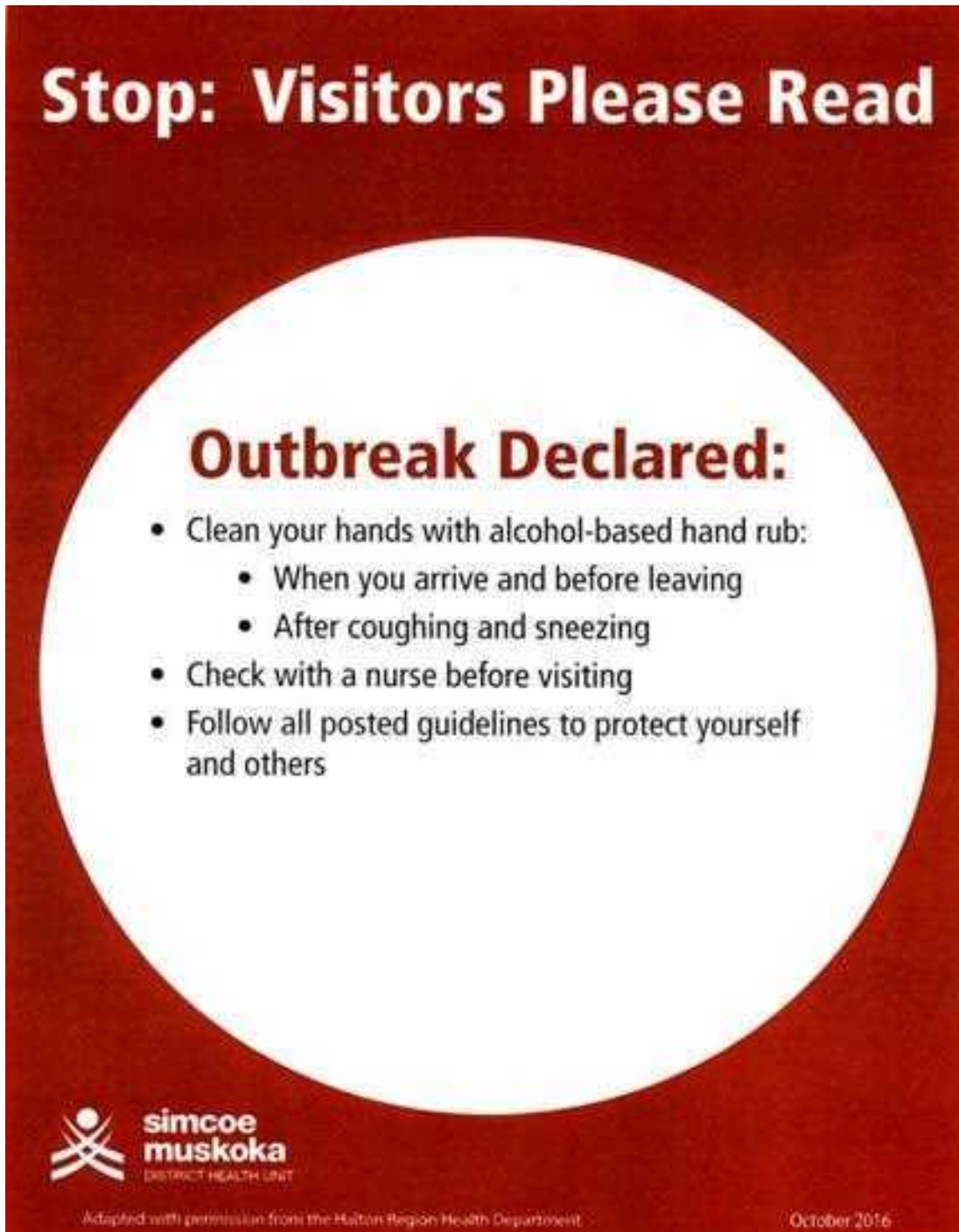
SMDHU Contact Numbers
 Days (between 0830 hrs--1630 hrs): 705-721-7520 ext. 5925
 After hours On-Call (between 1630 hrs--0830 hrs.)
 Weekends and Holidays: 1-888-225-7851.

Manual: Emergency	Approved by: Infection Prevention and Control Practitioner	Emergency Plan: Code Silver	PLAN #: EMERG - I - 10a
O: Mar/21	CODE SILVER Outbreak Management Plan		Page 20 of 33
Revised: Nov/22; Aug/23; Jan/22; Jan/24; Feb/24			

Appendix B: Enteric and Respiratory Outbreak Quick Reference (SMDHU) ^{cxv}

Manual: Emergency	Approved by: Infection Prevention and Control Practitioner	Emergency Plan: Code Silver	PLAN #: EMERG - I - 10a
O: Mar/21	CODE SILVER Outbreak Management Plan		Page 21 of 33
Revised: Nov/22; Aug/23; Jan/22; Jan/24; Feb/24			

Appendix C: Outbreak Signage – Stop: Visitors Please Read; Outbreak Declared □□□□□
Note: Additional signage available using same endnote reference.



Manual: Emergency	Approved by: Infection Prevention and Control Practitioner	Emergency Plan: Code Silver	PLAN #: EMERG - I - 10a
O: Mar/21	CODE SILVER Outbreak Management Plan		Page 22 of 33
Revised: Nov/22; Aug/23; Jan/22; Jan/24; Feb/24			

Appendix D: Outbreaks: What you need to know to protect yourself and your loved one ^{cxvii}

p.1 of 2.



Communicable Disease Program
 15 Sperling Drive Barrie, ON L4M 5K9
705-721-7520
or 1-877-721-7520
www.smdhu.org

OUTBREAKS

WHAT YOU NEED TO KNOW
TO PROTECT YOURSELF
AND YOUR LOVED ONE

Information for Families and Visitors to
the Health Care Facility



Adapted with permission from the Grey Bruce Health Unit

JAN 2017

Manual: Emergency	Approved by: Infection Prevention and Control Practitioner	Emergency Plan: Code Silver	PLAN #: EMERG - I - 10a
O: Mar/21	CODE SILVER Outbreak Management Plan		Page 23 of 33
Revised: Nov/22; Aug/23; Jan/22; Jan/24; Feb/24			

Appendix D: Outbreaks: What you need to know to protect yourself and your loved one ^{cxviii}

p.2 of 2.

WHAT YOU NEED TO KNOW AND WHY?

Outbreaks in long term care homes (LTCH) or retirement homes can disrupt the lives of the residents as well as visitors and staff. Measures are put into place to prevent the spread of illness, especially among residents who are frail may be more likely to get sick. If the spread of illness is decreased, the outbreak will be over sooner.

WHAT IS AN OUTBREAK?

An outbreak is a sudden increase of illness among residents and staff.

There are two common types of outbreaks in health care facilities.

1. Respiratory Infections (colds or influenza)
2. Gastrointestinal or enteric infections (vomiting and/or diarrhea)



WHAT HAPPENS DURING AN OUTBREAK?

Facilities consult with public health to put appropriate infection prevention and control measures in place to decrease the spread of illness to other residents and staff. Staff also collect specimens for laboratory testing.

CONTROL MEASURES INCLUDE:



- Isolating ill residents in their rooms
- Keeping well residents on their unit
- No group activities/outings
- Increased housekeeping /cleaning
- Hand hygiene
- Limiting visitors
- Non urgent medical appointment may be postponed
- Transfers /New admissions are not recommended.

YOU WILL BE ASKED TO:

1. Wash your hands with soap and water or use hand sanitizer for 15 seconds:
 - a) Before Entering and Exiting the building
 - b) Before and After you visit a resident.
2. Visit a resident in their room.
3. Visit **ONLY** one resident and leave immediately afterwards. If both parents are in the home, visit the healthy resident first. Please do not mingle with other residents within the home.
4. Wear Personal Protective Equipment (PPE)
 - PPE is a barrier used to protect you and your loved one from illness.
 - You may be asked to wear some or all of the listed PPE, depending on the type and status of the outbreak, including gloves, gowns, mask and goggles.
 - The home will provide both signage and PPE. PPE is single use and should be removed and placed in a trash bin before you exit the resident's room.



HOW TO PREVENT ILLNESS?

- Stay home if you are feeling ill.
- Wash your hands with soap and water or use hand sanitizer for 15 seconds.
- Help protect your loved one by getting a **flu shot** every year.
- Limit the foods you bring to the facility. Spoiled food at the bed side can cause illness.

NOTIFICATION OF AN OUTBREAK

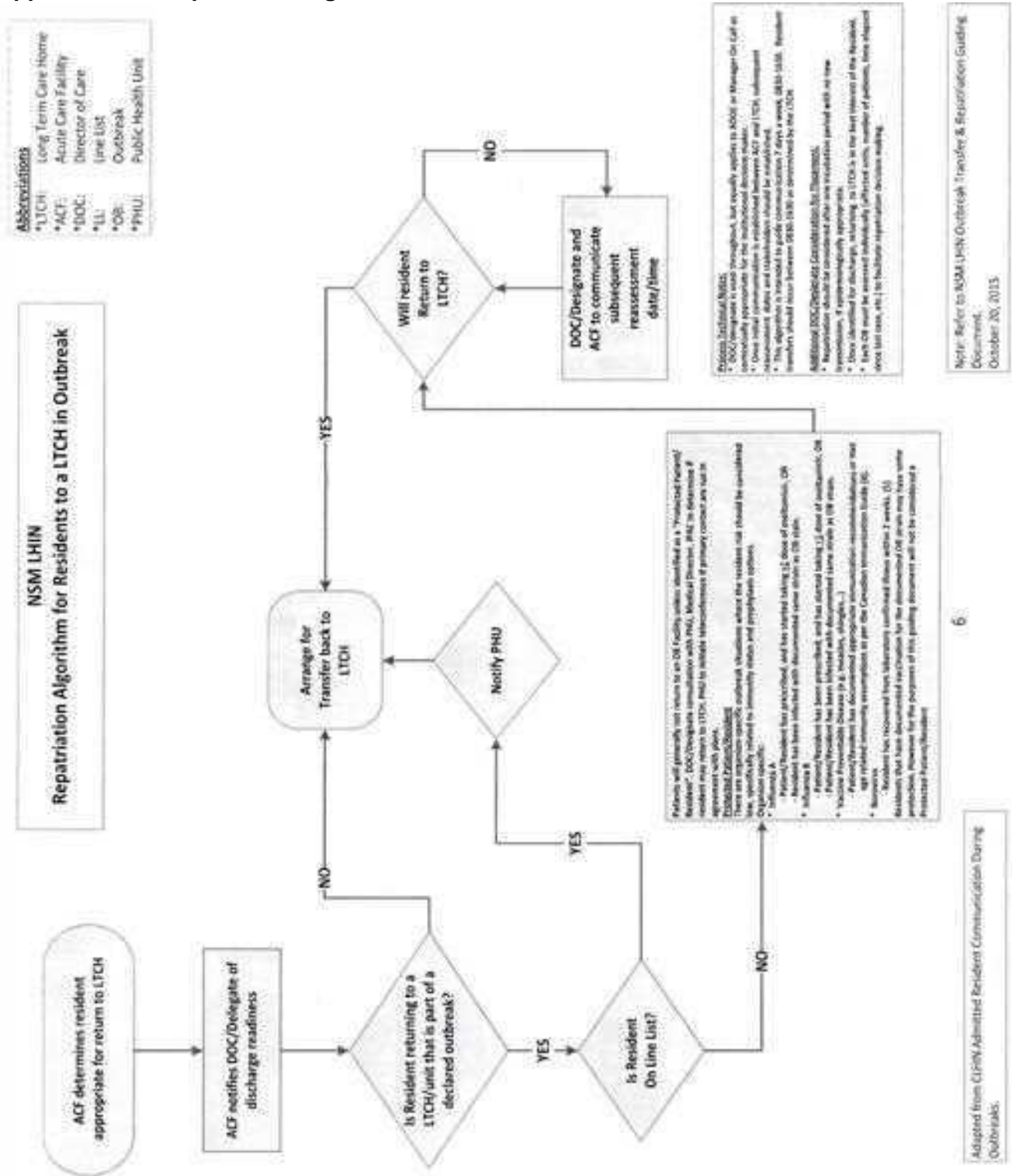
- Signage posted at the entrance to the home and/or the unit involved.
- The home may contact all resident families.

Note:

Another good resource is: **“Outbreak Management: A Guide for residents, families and visitors”**: <https://www.simcoemuskokahealth.org/docs/default-source/jfy-health-care-professionals/161013-ltc-resident-and-family-outbreak-management-booklet-2016.pdf?sfvrsn=4> ;

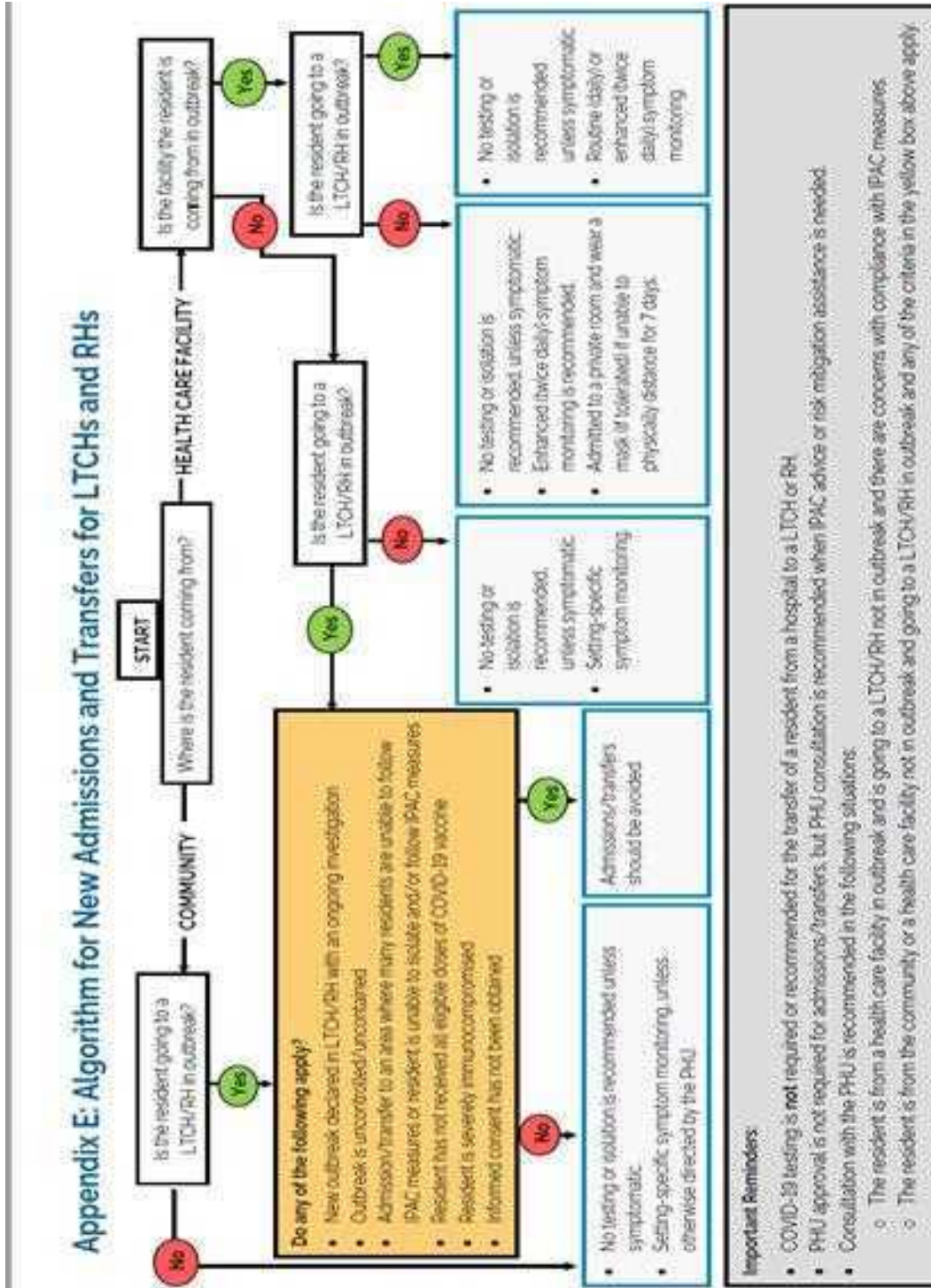
Manual: Emergency	Approved by: Infection Prevention and Control Practitioner	Emergency Plan: Code Silver	PLAN #: EMERG - I - 10a
O: Mar/21	CODE SILVER Outbreak Management Plan		Page 24 of 33
Revised: Nov/22; Aug/23; Jan/22; Jan/24; Feb/24			

Appendix E.1: Repatriation Algorithm for Residents to a LTCH in Outbreak ^{cxix}



Manual: Emergency	Approved by: Infection Prevention and Control Practitioner	Emergency Plan: Code Silver	PLAN #: EMERG - I - 10a
O: Mar/21	CODE SILVER Outbreak Management Plan		Page 25 of 33
Revised: Nov/22; Aug/23; Jan/22; Jan/24; Feb/24			

Appendix E.2: If a COVID-19 outbreak ~ Resident Admissions and Transfers ^{CXX}



Manual: Emergency	Approved by: Infection Prevention and Control Practitioner	Emergency Plan: Code Silver	PLAN #: EMERG - I - 10a
O: Mar/21	CODE SILVER Outbreak Management Plan		Page 28 of 33
Revised: Nov/22; Aug/23; Jan/22; Jan/24; Feb/24			

IPAC should complete this form for all Code Silver outbreaks. This form should be completed by the IPAC Lead or a designated IPAC member. The form should be completed within 72 hours of the outbreak starting. The form should be completed in the presence of the IPAC Lead or a designated IPAC member. The form should be completed in the presence of the IPAC Lead or a designated IPAC member.

IPAC Lead	IPAC Member	IPAC Member
IPAC Lead	IPAC Member	IPAC Member
IPAC Lead	IPAC Member	IPAC Member
IPAC Lead	IPAC Member	IPAC Member
IPAC Lead	IPAC Member	IPAC Member
IPAC Lead	IPAC Member	IPAC Member

IPAC should complete this form for all Code Silver outbreaks. This form should be completed by the IPAC Lead or a designated IPAC member. The form should be completed within 72 hours of the outbreak starting. The form should be completed in the presence of the IPAC Lead or a designated IPAC member. The form should be completed in the presence of the IPAC Lead or a designated IPAC member.

Person's name who experienced	IPAC Lead	IPAC Member

IPAC should complete this form for all Code Silver outbreaks. This form should be completed by the IPAC Lead or a designated IPAC member. The form should be completed within 72 hours of the outbreak starting. The form should be completed in the presence of the IPAC Lead or a designated IPAC member. The form should be completed in the presence of the IPAC Lead or a designated IPAC member.

Note: The IPAC should retain a copy of this test report and evaluation.

The remainder of the evaluation is to be completed by the IPAC with the Management Team

IPAC should complete this form for all Code Silver outbreaks. This form should be completed by the IPAC Lead or a designated IPAC member. The form should be completed within 72 hours of the outbreak starting. The form should be completed in the presence of the IPAC Lead or a designated IPAC member. The form should be completed in the presence of the IPAC Lead or a designated IPAC member.

- IPAC should complete this form for all Code Silver outbreaks. This form should be completed by the IPAC Lead or a designated IPAC member. The form should be completed within 72 hours of the outbreak starting. The form should be completed in the presence of the IPAC Lead or a designated IPAC member. The form should be completed in the presence of the IPAC Lead or a designated IPAC member.
- IPAC should complete this form for all Code Silver outbreaks. This form should be completed by the IPAC Lead or a designated IPAC member. The form should be completed within 72 hours of the outbreak starting. The form should be completed in the presence of the IPAC Lead or a designated IPAC member. The form should be completed in the presence of the IPAC Lead or a designated IPAC member.
- IPAC should complete this form for all Code Silver outbreaks. This form should be completed by the IPAC Lead or a designated IPAC member. The form should be completed within 72 hours of the outbreak starting. The form should be completed in the presence of the IPAC Lead or a designated IPAC member. The form should be completed in the presence of the IPAC Lead or a designated IPAC member.

IPAC should complete this form for all Code Silver outbreaks. This form should be completed by the IPAC Lead or a designated IPAC member. The form should be completed within 72 hours of the outbreak starting. The form should be completed in the presence of the IPAC Lead or a designated IPAC member. The form should be completed in the presence of the IPAC Lead or a designated IPAC member. (Refer to recommendations as listed above, and any additional recommendations that were received.)

IPAC Lead	IPAC Member	IPAC Member
IPAC Lead	IPAC Member	IPAC Member
IPAC Lead	IPAC Member	IPAC Member

Manual: Emergency	Approved by: Infection Prevention and Control Practitioner	Emergency Plan: Code Silver	PLAN #: EMERG - I - 10a
O: Mar/21	CODE SILVER Outbreak Management Plan		Page 31 of 33
Revised: Nov/22; Aug/23; Jan/22; Jan/24; Feb/24			

Endnotes

- ⁱ Fixing Long-Term Care Act (FLTCA), 2021, s.90.
- ⁱⁱ O Reg. 246/22 ss. 268. (4).1. i. under the FLTCA.
- ⁱⁱⁱ O Reg. 246/22 ss. 268. (2).
- ^{iv} <https://www.simcoemuskokahealth.org/docs/default-source/jfy-health-care-professionals/190822-outbreak-management-orientation.pdf?sfvrsn=0>
- ^v O. Reg. 246/22: GENERAL (ontario.ca)
- ^{vi} <https://www.simcoemuskokahealth.org/docs/default-source/topic-infectiousdisease/diseases-of-ph-significance-final.pdf?sfvrsn=2>
- ^{vii} <https://www.simcoemuskokahealth.org/docs/default-source/topic-infectiousdisease/disease-of-public-health-significant-reporting-form.pdf?sfvrsn=0>
- ^{viii} <https://www.simcoemuskokahealth.org/docs/default-source/jfy-health-care-professionals/190822-outbreak-management-orientation.pdf?sfvrsn=0>
- ^{ix} PIDAC. <https://www.publichealthontario.ca/-/media/Documents/H/2017/hai-ltc-surveillance-case-definitions.ashx?rev=-1&la=fr>
- ^x O Reg. 246/22 ss.268. (5).3.
- ^{xi} O. Reg. 246/22 ss. 268. (3).
- ^{xii} O. Reg. 246/22 ss. 269. (3).
- ^{xiii} O. Reg. 246/22 ss. 268. (3).
- ^{xiv} O. Reg. 246. ss.268. (10)(a).
- ^{xv} O. Reg.246/22 ss.268. (8).
- ^{xvi} O. Reg.246/22. ss.268. (5) 3.
- ^{xvii} O Reg. 246/22 ss.268. (9).
- ^{xviii} O Reg. 246/22 ss.269. (1). (f).
- ^{xix} https://www.simcoemuskokahealth.org/docs/default-source/jfy-health-care-professionals/omt-agenda-minutes-institutional_fillable.pdf?sfvrsn=8
- ^{xx} O. Reg. 246/22 ss.268. (3).
- ^{xxi} O. Reg. 246/22 ss.268. (3)(c).
- ^{xxii} O. Reg. 246/22 ss.268. (3)(a).
- ^{xxiii} O. Reg. 246/22 ss.269. (4) 4-5.
- ^{xxiv} O. Reg.246/22. ss.268. (12).
- ^{xxv} O. Reg. 246/22 ss.269. (2).
- ^{xxvi} O. Reg. 246/22 ss.268. (4) 7.
- ^{xxvii} <https://www.simcoe.ca/paramedicservices/Pages/Station-Locations.aspx>
- ^{xxviii} <https://www.doctorkelleywright.com/>
- ^{xxix} <https://www.ontario.ca/page/office-chief-coroner-and-ontario-forensic-pathology-service>
- ^{xxx} O. Reg.246/22. ss.268. (10)(d).
- ^{xxxi} O. Reg. 246/22 ss. 268. (3).
- ^{xxxii} O. Reg.246/22 ss.268. (3)(4)4 and 5.
- ^{xxxiii} O. Reg.246/22 ss.268. (7).
- ^{xxxiv} O. Reg. 246/22. ss.268. (3)(b)
- ^{xxxv} <https://www.simcoemuskokahealth.org/Topics/InfectiousDiseases>
- ^{xxxvi} <https://www.simcoemuskokahealth.org/JFY/HPPortal/PCPCategories/InfectiousDiseases/Disease-of-Public-Health-Significance>
- ^{xxxvii} <https://www.who.int/teams/environment-climate-change-and-health/emergencies/disease-outbreaks#:~:text=Environmental%20factors%20influencing%20the%20spread,diseases%20prone%20to%20cause%20epidemics>
- ^{xxxviii} Ministry of Long-Term Care. (MLTC). COVID-19 Guidance Document for Long-term Care Homes in Ontario. Requirements for Long-term Care Homes with respect to COVID-19. November 2023. [COVID-19 guidance document for long-term care homes in Ontario | ontario.ca.](https://www.ontario.ca)
- ^{xxxix} MLTC. IPAC Standard. Rev. Sept. 2023. Section 10.4 d) i.
- ^{xl} https://www.publichealthontario.ca/-/media/Documents/A/2021/auditing-ppe-use-health-care-form.pdf?rev=ae9f3a2317954ca9a53f3d9901d9c8f0&sc_lang=en
- ^{xli} PHO's COVID-19: Self-Assessment Audit Tool for Long-Term Care Homes and Retirement Homes. <https://www.publichealthontario.ca/-/media/Documents/I/2023/ipac-self-assessment-audit-tool-ltcrh.pdf>
- ^{xlii} [161013-steps-to-early-identification-of-outbreaks-2016.pdf \(simcoemuskokahealth.org\)](https://www.simcoemuskokahealth.org/161013-steps-to-early-identification-of-outbreaks-2016.pdf)
- ^{xliiii} <https://ipac-canada.org/photos/custom/pdf/LTCSurveillanceToolkit.pdf> p.15
- ^{xliv} PIDAC. <https://www.publichealthontario.ca/-/media/Documents/H/2017/hai-ltc-surveillance-case-definitions.ashx?rev=-1&la=fr>
- ^{xlv} O. Reg. 246/22. ss.268. (4)3.

Manual: Emergency	Approved by: Infection Prevention and Control Practitioner	Emergency Plan: Code Silver	PLAN #: EMERG - I - 10a
O: Mar/21	CODE SILVER Outbreak Management Plan		Page 32 of 33
Revised: Nov/22; Aug/23; Jan/22; Jan/24; Feb/24			

- xlvi <https://www.simcoemuskokahealth.org/JFY/HPPortal/ResourcesTools/OutbreakResources.aspx#3791d414-226f-409c-8048-a6f643cb9f6e#47bb1a56-ff9b-4709-a5cb-abc5b1e7a761#e5df669c-4450-4147-a7c7-89cec70ee6d5>
- xlvii O. Reg. ss.268 (4)6.
- xlviii O. Reg. 246/22 ss.268. (4) 7.
- xlivx [Public Health Ontario and PIDAC Best Practice Guidelines \(simcoemuskokahealth.org\)](#)
- l https://health.gov.on.ca/en/pro/programs/publichealth/oph_standards/docs/reference/Control_Gastroenteritis_Outbreaks_2018_en.pdf
- li O. Reg. 246/22. ss.268. (5)1.
- lii O. Reg. 246/22. ss.268. (5).1. and 4.
- liii O. Reg. 246/22 ss.268. (5)2.
- liv <https://www.simcoemuskokahealth.org/docs/default-source/jfy-health-care-professionals/190822-outbreak-management-orientation.pdf?sfvrsn=0>
- lv O. Reg. 246/22 ss. 269. (1) (a).
- lvi https://ipac-canada.org/photos/custom/pdf/LTCSurveillanceToolkit_.pdf p.15
- lvii O. Reg. 246/22. ss. 268. (6).
- lviii O. Reg. 246/22. ss. 269. (1).(e).
- lix O. Reg. 246/22. ss. 268. (6).
- lx O. Reg. 246/2. ss.115. (1)5.
- lxi <https://www.simcoemuskokahealth.org/docs/default-source/jfy-health-care-professionals/161206-surveillance-posters-2016.pdf?sfvrsn=4>
- lxii <https://www.alberta.ca/assets/documents/edc-school-reentry-poster-do-not%20enter.pdf>
- lxiii <https://www.simcoemuskokahealth.org/docs/default-source/jfy-health-care-professionals/ipachub-additional-precautions-signs.pdf?sfvrsn=0>
- lxiv [SMDHU. Outbreak Resources \(simcoemuskokahealth.org\)](#). October 2022.
- lxv <https://www.simcoemuskokahealth.org/docs/default-source/jfy-health-care-professionals/reportable-diseases/disease-of-public-health-significant-reporting-form.pdf?sfvrsn=0>
- lxvi O. Reg. 246/22. ss. 269. (1), (b).
- lxvii https://www.publichealthontario.ca/-/media/documents/ncov/ltrh/2020/11/covid-19-outbreak-cohorting-ltch.pdf?sc_lang=en#:~:text=Overview%20of%20Cohorting%20During%20a%20COVID%2D19%20Outbreak&text=Residents%20are%20to%20remain%20physically,those%20within%20the%20same%20cohort.&text=Staff%20should%20remain%20in%20a%20single%20cohort%20per%20shift.
- lxviii O. Reg. 246/22. ss. 269. (1).(d).
- lxix <https://www.publichealthontario.ca/-/media/documents/b/2018/bp-environmental-cleaning.pdf>
- lxx O. Reg. 246/22. ss. 269. (1).(e).
- lxxi <https://www.simcoemuskokahealth.org/docs/default-source/jfy-health-care-professionals/nsm-lhin-resp-gastro-outbreak161215-transfer-repatriation-guiding-document-no.pdf?sfvrsn=0>
- lxxii O. Reg. 246/22. ss. 268. (6).
- lxxiii O. Reg. 246/22. ss. 269. (1). (c).
- lxxiv O. Reg. ss.268. (4) 6.
- lxxv https://www.publichealthontario.ca/-/media/Documents/A/2021/auditing-ppe-use-health-care-form.pdf?rev=ae9f3a2317954ca9a53f3d9901d9c8f0&sc_lang=en
- lxxvi [PHO's COVID-19: Self-Assessment Audit Tool for Long-Term Care Homes and Retirement Homes.](#)
<https://www.publichealthontario.ca/-/media/Documents/I/2023/ipac-self-assessment-audit-tool-ltrh.pdf>
- lxxvii <https://www.simcoemuskokahealth.org/docs/default-source/jfy-health-care-professionals/161013-respiratory-outbreak-summary-report-sept-2016fc3ad75f97be6bc38c2dff0000a8dfd8.pdf?sfvrsn=4>
- lxxviii O. Reg. 246/22. ss. 268. (6).
- lxxix O. Reg. 246/22 ss.268. (9).
- lxxx O. Reg.246/22. ss.268. (9).
- lxxxi O. Reg.246/22. ss.268. (9)
- lxxxii O. Reg. 246. s.115. (1)1.
- lxxxiii O. Reg.246/22. ss.268. (13) (c).
- lxxxiv O. Reg.246/22. s.268. (13).
- lxxxv O. Reg.246/22. ss.268. (13) (b).
- lxxxvi O. Reg.246/22. ss.268. (13)(a).
- lxxxvii O. Reg.246/22. ss.268. (13)(a).
- lxxxviii O. Reg.246/22. ss.268. (8)(b).
- lxxxix O. Reg.246/22. ss.268. (10) (d).
- xc O. Reg.246/22. ss.268. (14) (a)(b).

Manual: Emergency	Approved by: Infection Prevention and Control Practitioner	Emergency Plan: Code Silver	PLAN #: EMERG - I - 10a
O: Mar/21	CODE SILVER Outbreak Management Plan		Page 33 of 33
Revised: Nov/22; Aug/23; Jan/22; Jan/24; Feb/24			

- ^{xc}i FLTCA, ss. 82. (2) 8; and ss.82. (4).
- ^{xcii} FLTCA ss.82. (6).
- ^{xciii} FLTCA, ss, 82. (3).
- ^{xciv} O. Reg.246/22. s.260.
- ^{xcv} O. Reg.246/22. ss.260. (1).
- ^{xcvi} O. Reg.246/22. ss.268. (14) (a)(b).
- ^{xcvii} O. Reg.246/22. ss.260.(3).
- ^{xcviii} O. Reg.246/22. ss.260. (3)(b).
- ^{xcix} O. Reg. 246/22 ss.268. (4) 7.
- ^c O. Reg. ss.268 (4)6.
- ^{ci} <https://www.simcoemuskokahealth.org/JFY/HPPortal>
- ^{cii} <https://www.publichealthontario.ca/-/media/documents/f/2020/fact-sheet--antiviral-medications-influenza.pdf?la=en>
- ^{ciii} <https://www.canada.ca/content/dam/phac-aspc/documents/services/publications/vaccines-immunization/canadian-immunization-guide-statement-seasonal-influenza-vaccine-2021-2022/naci-2021-2022-statement.pdf>
- ^{civ} <https://www.simcoemuskokahealth.org/jfy/hpportal/pcpcategories/infectionpreventionandcontrol/phoandpidac.aspx>
- ^{cv} https://www.health.gov.on.ca/en/pro/programs/publichealth/oph_standards/reference.aspx
- ^{cvi} <https://www.simcoemuskokahealth.org/docs/default-source/topic-infectiousdisease/diseases-of-ph-significance-final.pdf?sfvrsn=2>
- ^{cvii} <https://www.simcoemuskokahealth.org/JFY/HPPortal/PCPCategories/InfectiousDiseases/Disease-of-Public-Health-Significance>
- ^{cviii} <https://www.simcoemuskokahealth.org/docs/default-source/topic-infectiousdisease/diseases-of-ph-significance-final.pdf?sfvrsn=2>
- ^{cix} <https://www.simcoemuskokahealth.org/docs/default-source/jfy-health-care-professionals/161013-enteric-and-respiratory-outbreak-quick-reference-sept-2016.pdf?sfvrsn=6>
- ^{cx} SMDHU. [Outbreak Resources \(simcoemuskokahealth.org\)](https://www.simcoemuskokahealth.org). October 2022.
- ^{cxii} <https://www.simcoemuskokahealth.org/docs/default-source/jfy-health-care-professionals/161013-family-and-visitor-outbreak-pamphlet-2016.pdf?sfvrsn=4>
- ^{cxiii} MOH. https://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/LTCH_RH_guidance_PHU.pdf Appendix E-Algorithm for Admissions and transfers for Long-Term Care Homes and Retirement Homes.
- ^{cxiv} <https://www.simcoemuskokahealth.org/docs/default-source/topic-infectiousdisease/diseases-of-ph-significance-final.pdf?sfvrsn=2>
- ^{cxv} <https://www.simcoemuskokahealth.org/docs/default-source/jfy-health-care-professionals/161013-enteric-and-respiratory-outbreak-quick-reference-sept-2016.pdf?sfvrsn=6>
- ^{cxvi} SMDHU. [Outbreak Resources \(simcoemuskokahealth.org\)](https://www.simcoemuskokahealth.org). October 2022.
- ^{cxvii} <https://www.simcoemuskokahealth.org/docs/default-source/jfy-health-care-professionals/161013-family-and-visitor-outbreak-pamphlet-2016.pdf?sfvrsn=4>
- ^{cxviii} <https://www.simcoemuskokahealth.org/docs/default-source/jfy-health-care-professionals/161013-family-and-visitor-outbreak-pamphlet-2016.pdf?sfvrsn=4>
- ^{cxix} <https://www.simcoemuskokahealth.org/docs/default-source/jfy-health-care-professionals/nsm-lhin-resp-gastro-outbreak161215-transfer-repatriation-guiding-document-no.pdf?sfvrsn=0> p.6.
- ^{cxix} MOH. https://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/LTCH_RH_guidance_PHU.pdf Appendix E-Algorithm for Admissions and transfers for Long-Term Care Homes and Retirement Homes.
- ^{cxix} O. Reg. 246/22 ss.268. (9).
- ^{cxixii} O. Reg.246/22. ss.268. (10)(a).
- ^{cxixiii} O. Reg. 246/22 ss.268. (9).
- ^{cxixiv} [161013-respiratory-outbreak-summary-report-sept-2016fc3ad75f97be6bc38c2dff0000a8dfd8.pdf \(simcoemuskokahealth.org\)](https://www.simcoemuskokahealth.org/docs/default-source/jfy-health-care-professionals/161013-respiratory-outbreak-summary-report-sept-2016fc3ad75f97be6bc38c2dff0000a8dfd8.pdf)
- ^{cxixv} O. Reg.246/22. ss.268. (9).
- ^{cxixvi} O. Reg. 246/22. ss.168. (2) 6. ii.
- ^{cxixvii} O. Reg.246/22. ss.268. (8).
- ^{cxixviii} O. Reg.246/22. ss.268. (10) (d).
- ^{cxixix} O. Reg.246/22. ss.268. (8).
- ^{cxixxx} O. Reg.246/22 ss.268. (8).
- ^{cxixxi} O. Reg.246/22 ss.268. (13).