

OUTBREAK PREPAREDNESS AND MANAGEMENT PLAN (POLICY AND PROCEDURES)

Purpose

A written Outbreak Preparedness and Management Plan is required for compliance with the *Fixing Long-Term Care Act, 2021* and its Regulation. This Outbreak Preparedness and Management Plan is part of the outbreak management (OM) system at the Home and provides guidance for staff to respond and manage an infectious disease outbreak that presents an imminent threat to the health or well-being of residents and others attending the Home (staff, students, volunteers and visitors)

DEFINITIONS

Visitors

Essential visitors (including designated essential caregivers) and general visitors (when permitted)

Outbreak

A localized cluster of cases of an infectious disease in a Home area or the whole Home and there are links between the cases

Surveillance Outbreak

For surveillance outbreak definitions and for influenza and other respiratory infection outbreaks in institutions and hospitals, refer to the relevant disease specific [Infectious Disease Protocol](#) in Ministry of Health's [Appendix 1 – Case Definitions and Disease Specific Information](#)

Emergency

An urgent or pressing situation or condition presenting an imminent threat to the health or well-being of residents and others attending the Home that requires immediate action to ensure the safety of persons in the Home

PARAMEDIC AND SENIORS SERVICES

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Staff

Means a person who works at the Home either:

- (a) As an employee of the Region/Home. This includes unionized staff, including but not limited to CUPE 905 Long-Term Care Bargaining Unit Staff (excluding Seniors Community Program Staff), and Non-Union staff working in the Homes. This also includes any redeployed Regional staff
- (b) Has a contract or agreement with Region/Home. This includes but not limited to the Medical Director, Registered Dietician, Pharmacy Service Provider, Physiotherapist, etc.
- (c) At the Home due to a contract or agreement between the Region/Home and an employment agency or other third party. This includes agency staff (including those who may not provide direct care to residents)

Note: Education and Training exemptions apply for those in (b) and (c) who provide occasional maintenance and repair services to the Home and will not provide direct care to residents. These staff will receive information about emergency plans before commencing their services.

Student

Means a person working in the long-term care Home as part of a placement requirement of an educational program of a college or university, or as part of a training program, who does not meet the definition of “staff” or “volunteer”

Volunteer

Means a person who is part of the organized volunteer program of the long-term care Home under section 20 of the *Fixing Long-Term Care Act, 2021* and who does not receive a wage or salary for the services or work provided for that program

Policy

The key requirements of this policy are:

1. Outbreak Assessments and Declarations: Identification of one or more resident(s), staff, students, volunteers, or visitors who:
 - Present with signs and symptoms of infectious disease and who
 - Undergo testing (if testing is an option)

Must immediately trigger an outbreak assessment by the York Region Public Health Unit. York Region Public Health will determine if an outbreak is to be declared and when it is declared over

2. Outbreak Management Team: The Home’s outbreak management system will include assigning an Outbreak Management Team with clear staff roles and responsibilities.

3. **Plan Activation:** If an outbreak is declared, the Homes must activate and follow the *Outbreak Preparedness and Management Plan* according to the requirements as described in the Procedures and Roles and Responsibilities sections. This includes having an Outbreak Management Team (OMT)
4. **Equipment and Supplies:** The Homes will ensure staff have access to resources, supplies, personal protective equipment, and equipment to adequately respond to an outbreak of infectious disease
5. **Reporting:** The Home must immediately report an outbreak of a disease of public health significance or communicable disease as defined in the *Health Protection and Promotion Act* the Ministry of Long-Term Care
6. **Education and Training:** All staff, students and volunteers will be provided with education and training on the *Outbreak Preparedness and Management Plan* at orientation and annually thereafter

Procedures

This section contains procedures for the following:

- A. Activating the Outbreak Preparedness and Management Plan
- B. During an Outbreak
- C. Post Outbreak Procedures and Documentation
- D. Outbreak Management System Best Practices

A. Activating the Outbreak Preparedness and Management Plan

1. Requesting an outbreak assessment

The IPAC lead (or designate) will:

- As determined by routine surveillance data, request an outbreak assessment from York Region Public Health Unit.

Note: Do not wait until the line listing is complete to notify York Region Public Health Unit or the Outbreak Management Team

- As determined by routine surveillance data, implement control measures (applicable to the infectious disease) as part of the application of the precautionary principle at the Homes, guided by the key principles in the ethical framework and following any Ministry of Health, Ministry of Long-Term Care or Public Health Ontario guidance.

Note: The IPAC lead should discuss the control measures to be implemented at the Homes with York Region Public Health Unit.

2. Activating the Outbreak Preparedness and Management Plan:

In response to an outbreak declaration by York Region Public Health Unit, the IPAC lead (or designate) will:

- Activate the Outbreak Preparedness and Management Plan at the Home
- Ensure York Region Public Health Unit has the correct name and contact details of the IPAC lead, Director of Care and Medical Director
- Request an Investigation or Outbreak Number to assign to the investigation and to record on all laboratory submission forms (this is an eight- or nine-digit number assigned by York Region Public Health Unit) used on all forms relevant to the investigation
- Discuss with York Region Public Health Unit how specimens will be collected, stored and submitted to the laboratory. Confirm the number and frequency of laboratory specimens to be taken during the initial outbreak investigation. Clarify which residents should be tested and establish which residents should not be tested
- Clarify staff (employee, agency and contracted service providers), student, volunteer and essential visitor (including caregivers) screening and testing requirements. Clarify if general visitors are permitted and if so, under what conditions
- Review and establish a preliminary case definition for the potential outbreak. Included should be clinical signs and symptoms, time frame of onset of illness, location in the Home
- Notify the Administrator (during business hours) or the Manager-on-Call (after hours) and Outbreak Management Team Members
- Notify Joint Health and Safety Committee regarding all incidents involving staff, volunteers, visitors, and contract workers

The Administrator (or designate during business hours) or the Manager-on-Call (after hours) will:

- Inform and consult with the Director, Seniors Services on whether to activate the Incident Management System (IMS) and any other emergency plans (such as the *Contingency Staffing Plan, Food and Fluid Emergency Plan* and *Long-Term Care Emergency Communications Plan*, as required). See *Long-Term Care Emergency Plan*

B. During an Outbreak

All staff will:

- Support and respond to infectious disease control measures

Members of the Outbreak Management Team will:

- Attend OMT meetings and carry out outbreak mitigation and control responsibilities.

The IPAC lead (or designate) will:

- Identify the resources, supplies, PPE and equipment relevant to the infectious disease outbreak

The Charge Nurse (or delegate) will:

- Upon notification of incident/injury of employees, request the employee's supervisor follow the employee incident / injury process
- Upon notification of incident/injury of students, volunteers, agency staff and contracted service providers, notify the supervisor of that individual about the need to complete the *Non-Regional Incident Reporting Form*

C. Post Outbreak Procedures and Documentation

In response to an outbreak being declared over by York Region Public Health Unit, the IPAC lead (or designate) will:

- Update the Administrator (during business hours) or the Manager-on-Call (after hours) and Outbreak Management Team Members
- Ensure all emergency response equipment is replenished and cleaned
- In collaboration with Director of Care (or designate) and Administrator (or designate) develop an Outbreak Recovery Plan to resume of normal operations in the Home

Note: The Home may activate a recovery plan before deactivating the outbreak preparedness and management plan (e.g., outbreak and recovery measures may happen at the same time). In this case, York Region Public Health Unit may provide guidance on the Outbreak Recovery Plan

All staff will:

- Support and implement Outbreak recovery measures
- Continue to support and implement any Mitigation and Preparedness Control Measures that remain in place

The IPAC lead and OMT will:

- Conduct debrief(s) and other actions as required by the *Long-Term Care Emergency Recovery Plan*

The Director of Care (or designate) will:

- Follow the *Mandatory and Critical Incident Reporting Policy and Procedures*

The Charge Nurse (or designate) will:

- Report any incidents visitors and other members of the public using the *Bodily Injury Reporting Form*

A Supervisor of any employee involved in the incident (and who sustains an injury or a near miss) will:

- Follow the employee incident / injury process. All incidents must be reported through the *Online e-Incident Report Form* on the Homes' Incident Reporting System

Note: All incidents (including near misses) must be investigated by employers.

A Supervisor of a student, volunteer, agency staff or contracted service providers, involved in the incident (and who sustains an injury or a near miss) will:

- Complete the *Non-Regional Incident Reporting Form*

The Administrator (or designate during business hours) or the Manager-on-Call (after hours) will:

- In consultation with the Director, Seniors Services:
 - Deactivate the Incident Management System (IMS), if activated
 - Notify the Wellbeing Team to ensure staff supports are in place for those who experienced distress
- Communicate outbreak recovery plan details to those in the Home, as required

D. Outbreak Management System Best Practices

Ahead of respiratory season, the IPAC lead (or designate) will:

- Establish an OMT (irrespective of whether there is an outbreak) and review OMT roles and responsibilities
- Support the Home to utilize immunization tools (such as the promotion of vaccination, hosting vaccination clinics at the Home)
- Facilitate Fall Preparedness IPAC Self-Assessments and share any report or findings, as required
- Review *Healthy Workplace Policy and Procedures*

Roles and Responsibilities

IPAC Lead

- Activating the Outbreak Preparedness and Management Plan
- Identification and maintenance of resources, supplies, PPE and equipment relevant to the infectious disease outbreaks
- Managing and overseeing the IPAC program at the Home (such as convening the Outbreak Management Team (OMT) Team)
- Infectious Disease Control Measures at the Homes) as directed by York Region Public Health Unit
- Completing actions identified in the *Emergency Recovery Plan*
- Activating the Outbreak Recovery Plan

Outbreak Management Team (OMT)

- Responsible for the implementation of the IPAC program and outbreak response at the Home (such as implementing the IPAC outbreak mitigation and control measures as directed by York Region Public Health Unit)
- Carry out OMT responsibilities
- Follow any guidance provided by York Region Public Health Unit with respect to any additional measures that must be implemented to reduce the risk of infectious disease transmission in the Home

Medical Director (in addition to role in OMT)

- Advise and provide oversight on matters relating to medical care of the residents
- Ensure staffing requirements are met for physicians

IPAC Team/Committee

- Responsible for supporting the IPAC Lead to carry out all required responsibilities under the applicable legislation and standards
- Identify quality improvements to the *Outbreak Preparedness and Management Plan*

York Region Public Health Unit (as the Local Public Health Unit)

- Manage the outbreak response. As set out in the *Health Protection and Promotion Act*, local public health units have the authority and discretion to coordinate outbreak investigation, declare an outbreak based on their investigation, and direct outbreak control measures.

Note: For clarity, the local public health unit is responsible for defining the outbreak area

(for example, single affected area(s) vs. the whole Home), directing outbreak testing, and leading all other aspects of outbreak management including isolation of residents and staff, as well as declaring the end of an outbreak.

- Investigate and manage any persons under investigation, confirmed cases, and/or outbreaks in the Home. Includes resident contact tracing, follow up, and case reporting
- Provide direction on outbreak control measures to be implemented
- Provide support for case and contact/outbreak management
- Lead management of the outbreak in collaboration with LTCH, local partners, and MLTC
- Deploy PHU inspections if appropriate; may utilize powers under Section 22 or Section 13 of the *Health Protection and Promotion Act* to address communicable disease prevention/control issues e.g., enforce IPAC protocols
- Coordinate/Advise Home outbreak testing strategy in accordance with latest guidance/directive

Emergency Management Specialist

- Provide education and training on Emergency Plans
- Complete After-Action Review (AAR) as required by the *Long-Term Care Emergency Recovery Plan*

Seniors Services Education Team

- Maintain staff records of education and training

Communications Associate

- Implement the Outbreak communications plan. See *LTC Emergency Communications Plan*

Administrator (or designate during business hours) or the Manager-on-Call (after hours)

- Following consultation with the Director, Seniors Services, activate the Incident Management System (IMS) for infectious disease outbreaks, if required and deactivate when emergency is over, as required

Director of Care

- Initiate Mandatory Critical Incident System, if required

Charge Nurse

- Report any incidents with visitors and other members of the public using the *Bodily Injury Reporting Form*

Supervisor of an employee, student, volunteer or contracted service provider involved in incident

- Report any incidents with employees using the employee incident / injury process
- Report any incidents with a student, volunteer or contracted service using the *Non-Regional Incident Reporting Form*

Director, Seniors Services

- Ensure resources available to support the Homes to implement outbreak response measures
- Consult on the need to activate (or deactivate) the Incident Management System (IMS)

AUTHORITY

Fixing Long-Term Care Act, 2021; General Regulation 246/22; Health Protection and Promotion Act; Occupational Health and Safety Act; Accreditation Standards; and York Region Seniors Services Administration

Alternate formats or communications supports are available upon request by contacting newmarkethealthcentre@york.ca or maplehealthcentre@york.ca.