

The Pines Long-Term Care Home

1.

Overview:

- Total Beds: 160
- Units: 5 units with 32 beds each
- Room Types:
 - Private: 94
 - Basic (Shared): 66
- Rooms Sharing a Bathroom: 66

2. Core IPAC Definition

- **Infection Prevention and Control (IPAC):** A set of evidence-based practices and procedures designed to prevent or reduce the transmission of microorganisms to healthcare providers, patients, residents, and visitors.
- **Personal Protective Equipment (PPE):** Includes gloves, masks, gowns, and eye protection used to prevent exposure to infectious agents.
- **Hand Hygiene:** Refers to any action of cleaning hands to remove visible soil and kill transient microorganisms. This can be done using *soap and water* or *alcohol-based hand rubs (ABHR)*.
- **Environmental Cleaning and Disinfection:** Regular cleaning of surfaces and equipment to reduce contamination risks.
- **Isolation:** *Separating individuals who are contagious* to prevent the spread of disease—commonly used in hospitals or during outbreaks.
- **Outbreak:** In long-term care (LTC) settings, an outbreak is typically defined as two or more residents or staff developing similar symptoms of an infectious illness within a short time frame and having an epidemiological link, such as living or working in the same unit or area.
- **High-Touch Surface:** A high-touch surface is any area or object that is frequently touched by hands and is therefore more likely to become contaminated with microorganisms.
- **Enteric symptoms:** Signs of illness affecting the digestive system, like diarrhea, vomiting, or stomach pain.
- **Respiratory symptoms:** Signs of illness affecting the lungs and airways, like coughing, sneezing, or shortness of breath.

HEALTH SERVICES DEPARTMENT

Long-Term Care Services

70 Pine Street, Bracebridge, ON P1L 1N3

Phone: 705-645-2100 **Toll-Free:** 1-800-461-4210 (within 705)

Fax: 705-645-5319

Email: healthservices@muskoka.on.ca

Website: www.muskoka.on.ca

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Fax: 705-645-6857



- **CQI:** Continuous Quality Improvement Committee, a mandated committee from the Ministry of Long-Term Care that is focused on quality improvement in the home.

Key Contacts:

Role	Name	Email	Phone
Administrator	Jennifer Ridgley	jennifer.ridgley@muskoka.on.ca	705-645-4488 ext. 4877
Medical Director	Keith Cross	keith.cross@sympatico.ca	—
Director of Care	Dallas Miller	dallas.miller@muskoka.on.ca	705-645-4488 ext. 4805
IPAC Lead & Designate	Stephanie Albert, RPN	stephanie.albert@muskoka.on.ca	705-645-4488 ext. 4752
Human Resources	Natalie Brake	natalie.brake@muskoka.on.ca	705-645-4488 ext. 4191
Support Services Supervisor	Steve Files	steve.files@muskoka.on.ca	705-645-4488 ext. 4804
Nutrition/Food Services	Scot Gray	scot.gray@muskoka.on.ca	705-645-4488 ext. 4801
Recreation Therapist	Christina Rochette	christina.rochette@muskoka.on.ca	705-645-4488 ext. 4824
Physicians/NPs	Dr. Cross, Dr. Dechert, Dr. Hammell, Dr. Whynot	—	Contact the home
Pharmacy	Sherri Kidson	sherri.kidson@carerx.ca	—
Courier (Lab Samples)	Dynacare	—	705-205-1833
Oxygen Provider	Homecare Oxygen	—	705-645-5161

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Staff Contact Lines:

- Cedar, Oak, Spruce: 705-645-4488 ext. 4825
- Maple, Birch: 705-645-4488 ext. 4845
- RN Cell Phone Numbers: 705-641-0319 or 705-394-2997

3. External Communications

Resident/Family Contact: Internal process

- Internal Communication process

Local Public Health:

- Contact: Cheryl Leavens
- Email: cheryl.leavens@smdhu.org
- Phone: 705-721-7520 or 1-877-721-7520 ext. 7282
- After Hours: 1-888-225-7851

Provincial Health Agency:

- Public Health Ontario
- Email: communications@oahpp.ca
- Toll-Free: 1-877-543-8931

Ministry of Labour:

- Internal Communication process

4. Outbreak Response Procedures

 Initial Detection & Monitoring

- Daily symptom monitoring for all residents.
- RN/RPN assesses any suspected cases.
- Public Health contacted for guidance when ≥ 1 symptomatic resident is identified.
- Outbreak declared if ≥ 2 related illness cases are confirmed.

 Isolation Procedures

- Suspected residents are isolated in their rooms.
- Isolation signage, PPE, and laundry/garbage kits placed in the room.
- Notify physicians and SDM/POA.
- Appropriate testing, examples include: COVID PCR, multi-viral swab, stool specimen.
- Enhanced cleaning by environmental team (twice daily high-touch surfaces).
- Dietary team provides tray service to isolated residents.

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Staffing & Cohorting

Staff Cohorting:

- DOC/ADOC and Leadership Team adjust schedules to prevent cross-unit contamination.
- One PSW is assigned to isolated residents to reduce spread.
- Contingency plans are implemented to increase staffing as needed.
- Separate staff break room set up if outbreak escalates.

Resident Cohorting:

- Residents grouped by home area to limit interactions.
- Fixed seating in dining rooms for easier contact tracing.
- Close contacts monitored for symptoms.

Staff Education & Safety

- Monthly IPAC in-services on PPE, hand hygiene, transmission modes, and risk assessment.
- Orientation training includes outbreak protocols and equipment use.
- Annual online training with knowledge testing.
- Regular home area meetings with Q&A sessions.
- On-the-spot coaching by IPAC Lead.
- Leadership support during outbreaks.

Communication & Updates

- Daily outbreak updates sent by IPAC Lead or Nurse Manager.
- Updates posted on Staff Portal.
- Families notified via email or Family Portal.

Supplies & Maintenance

- **ABHR & Soap:** Refilled by environmental and maintenance staff.
- **PPE Stations:** Stocked by IPAC Lead, Champions, and assigned PSWs. Night staff top up carts for day shift.
- Staff responsible for using appropriate PPE based on risk assessment.

Auditing & Compliance

- “Just Clean Your Hands” program with Hand Hygiene Champions.
- Daily and weekly audits by IPAC Lead and Leadership team.
- On-the-spot education during audits.
- Non-compliance addressed by managers and reviewed by CQI committee.
- Performance reviews include compliance evaluation.

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5. Symptom Screening Procedures

- **Residents:**
 - Screened daily for respiratory symptoms.
 - During outbreaks: screening increases to **twice daily**.
 - Temperature checks are conducted **each shift**.
- **Staff & Visitors:**
 - Required to **self-screen** using signage at the entrance.
 - Symptomatic staff must report to their **manager and IPAC Lead** for further direction.
- **Response Team:**
 - IPAC Lead and nursing staff promptly assess and respond to illness.
 - Follow isolation and testing protocols outlined in section #3.

6. Transmission Control Measures

- **Environmental Controls:**
 - Upgraded high-touch cleaning and disinfection equipment.
 - Enhanced housekeeping staffing to meet cleaning demands.
 - **Education & Training:**
 - Ongoing staff education on hand hygiene and PPE use.
 - Reinforcement of infection control practices.
 - **Safe Return to Work:**
 - Staff must consult IPAC Lead before returning.
 - **Enteric symptoms:** 48 hours symptom-free.
 - **Respiratory symptoms:** 24 hours fever-free or symptom improvement.
 - **Post-symptom masking:** 10 days.
 - Symptomatic staff must avoid shared staff areas.
- These guidelines are subject to changes by Public Health guidelines
- **Layered Approach:**
 - Emphasis on multiple interventions working together to reduce transmission.

7. Evaluating Outbreak Plan Effectiveness

- **Daily Outbreak Meetings:**
 - Held with Public Health and Leadership Team during outbreaks.
- **Post-Outbreak Debrief:**
 - Staff and leadership provide feedback on successes and areas for improvement.

- Public Health offers ongoing recommendations.
- **Roles & Responsibilities:**
 - **RN/RPN:** Daily symptom surveillance, immediate isolation, reassessment in 24 hours.
 - **IPAC Lead:** Data analysis, communication, meeting coordination, PPE supply management.
 - **Administrator:** Updates to families, staff, and residents.

8. **Vaccination Protocol**

- **Staff & Residents:**
 - Regularly offered vaccines per **Public Health** guidelines.
 - Ensures timely protection against circulating illnesses.

9. **PPE Management & Supply Planning**

Responsible Personnel

- **Inventory & Tracking:** Stephanie Albert, RPN, IPAC Lead 
stephanie.albert@muskoka.on.ca |  705-645-4488 ext. 4752
- **Ordering PPE:** Stephanie Albert, RPN, LTC-CIP & Dallas Miller, DOC 
dallas.miller@muskoka.on.ca |  705-645-4488 ext. 4805

Regular Supplier

- **Supplier:** Cardinal Health
- **Ordering Portal:** [Cardinal Health Canada](https://www.cardinalhealth.ca)

Key PPE Supply List (2 Weeks' Worth)

To maintain readiness for a two-week outbreak scenario, the following PPE items should be stocked in sufficient quantities:

Type of PPE/Disinfectant/AB HR	Location(s)	Min Quantity	Supplier
N95 Masks	PPE supply cupboards on Cedar,	2000(2 per day per	Cardinal

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Type of PPE/Disinfectant/AB HR	Location(s)	Min Quantity	Supplier
	Spruce, Birch. Nursing and Environmental Supply Room Axillary Room (across from Nursing and Environmental supply room)	person)	Health
Surgical/Procedure Mask	PPE supply cupboards on Cedar, Spruce, Birch. Nursing and Environmental Supply Room Axillary Room (across from Nursing and Environmental supply room)	4000	Cardinal Health
Isolation Gowns	PPE supply cupboards on Cedar, Spruce, Birch. Nursing and Environmental Supply Room	20 Boxes	Cardinal Health
Protective Eye Goggles	PPE supply cupboards on Cedar, Spruce, Birch. Nursing and Environmental Supply Room	40/day	Cardinal Health
Face Shields	PPE supply cupboards on Cedar, Spruce, Birch. Nursing and Environmental Supply Room	40/day	Cardinal Health

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Type of PPE/Disinfectant/AB HR	Location(s)	Min Quantity	Supplier
Gloves	Nursing/Environmental supply room	Months' Supply	Cardinal Health
Hand Sanitizer	Nursing/Environmental supply room-large pump supplies Pandemic Supply Room -hand pumps	300 individual pumps/months' supply, large receptacles	Cardinal Health
Disinfectant Wipes	Nursing/Environmental supply room	Months' Supply	Cardinal Health
Swabs	Pandemic Supply Room & on-unit treatment rooms	N/A	Dynacare & Public Health
Concentrated Disinfectant	Housekeeping Supply Room	Months' Supply	Cardinal Health
ED-Everyday Disinfectant	Housekeeping Supply Room	Months' Supply	Cardinal Health

*Annual Mask Fit Testing

*The list of staff who have been fit tested for N95 respirators is up-to-date and available including brands/models and sizes

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10. Outbreak Plan – Snapshot

Measures We're Taking

- Daily passive screening and illness follow-up with staff.
- Safe return-to-work conversations guided by public health protocols.
- Twice-daily respiratory screening for residents during outbreaks.
- Masks available at all times; mask-friendly policy in place.
- Resident hand hygiene program with regular auditing.
- Robust outbreak protocols aligned with ministry and public health guidance.

Staff Safety & Education

- Monthly **IPAC educational in-services** conducted during shifts.
- Annual mandatory training via online learning platforms.
- Mask fit testing and consistent availability of PPE supplies.

Symptom Screening

- **Residents:** Screened and monitored daily per current Public Health guidance.
- **Staff & Visitors:** Required to self-screen before entering the home.

Transmission Control Measures

- A layered approach combining:
 - Staff and family education
 - Hand hygiene audits and coaching
 - Enhanced Environmental Cleaning
 - Daily Symptom Screening
- No single measure is relied upon—it's the synergy that protects our home.

Cleaning Protocols

- All high-touch surfaces cleaned daily with **Health Canada-approved disinfectants**.
- During outbreaks: cleaning frequency increases to **twice daily**.

Outbreak Response

- Immediate collaboration with **Public Health**.
- Full compliance with current **Public Health and Ministry guidelines**.
- Activation of outbreak protocols, including isolation, testing, and cohorting.



Evaluating Effectiveness

- Post-outbreak **CQI debrief meetings** with leadership and staff.
- Review of Public Health feedback and implementation of recommended remediations.

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