

**What is the current state of the outbreak? How many residents and staff are affected?**

As of November 3, 11 residents and five Seniors' Health Centre (SHC) staff have tested positive for COVID-19. We are extremely saddened to share with you that three residents who tested positive for COVID-19 have passed away. This is a very difficult time for residents, families and SHC staff. Our deepest condolences for the loss of your loved ones. Social and emotional support is being provided for residents who are affected by the outbreak and this loss. We have a dedicated staff member on each floor along with social service workers to help provide support.

At this time, residents remain in isolation. We have put all safety precautions in place to help manage the outbreak and break the transmission cycle.

**Why weren't residents tested when you learned of the first SHC staff member who tested positive for COVID-19?**

At SHC, we follow the guidance of Toronto Public Health and our Infection Prevention and Control (IPAC) experts. The two staff members who initially tested positive were asymptomatic (no symptoms). Their positive test results were identified through surveillance testing, our voluntary proactive COVID-19 testing at SHC. When it was learned that two staff members tested positive for COVID-19, we declared a suspect outbreak, which meant cases were not acquired at SHC but had occurred in the community. The definition of an outbreak for long-term care is one case in a resident or staff member that is believed to be acquired in the facility.

Following public health and infection prevention and control (IPAC) guidance, immediate measures were taken once staff members tested positive to limit transmission to residents and staff. Anyone who came into close contact with positive staff members were immediately placed on a 14-day isolation. Testing would not have provided further protection as it would not have changed the course of the outbreak. Instead, isolation measures were put in place in an effort to stop the spread of infection.

**Will residents be re-tested during the outbreak?**

All SHC residents were re-tested on October 30. In addition to this, we are testing all residents who display symptoms, including mild ones to ensure any new positive cases are appropriately managed. Staff and physicians follow strict droplet contact precautions during all interactions with residents, including wearing a mask, visor, gown and gloves to ensure the risk level is kept to a minimum.

**What is the timeline for COVID-19 cases at SHC during the outbreak?**

On October 17, two staff members without symptoms tested positive for COVID-19. Both cases were not acquired at SHC, which did not constitute an outbreak. Following stringent public health and infection protection and control guidelines, we immediately put measures in place to protect everyone and contacted residents and families. An outbreak was declared on October 23 and to date, 11 residents and five SHC staff have tested positive for COVID-19.

**What does it mean when a case has been "resolved"?**

A resident or staff member who has tested positive for COVID-19 are generally, with a few exceptions, considered resolved 10 days after the positive test result.

**How will I know if my loved one tests positive?**



Families are contacted by a member of our team as soon as Toronto Public Health shares COVID-19 test results for a resident, or if there is a change in their loved one's health.

**Are staff members regularly tested for COVID-19?**

Yes, our staff is tested every two weeks.

**Can staff awaiting COVID-19 test results who do not have symptoms continue to work?**

**If so, why?**

Staff members awaiting test results may continue to be screened for symptoms at the main entrance and report for work if they do not have symptoms related to COVID-19. All staff, physicians and visitors to the home must wear masks and appropriate personal protective equipment (PPE) at all times while at the home to prevent the transmission of the virus from asymptomatic people.

**How are you working to contain the spread of COVID-19?**

Containing the spread of COVID-19 can be challenging particularly when COVID may be transmitted by people who are asymptomatic. Our current measures follow the best practices from public health and infection prevention and control. This includes screening of all staff and residents for symptoms twice daily, universal masking and use of face shields for all staff, increased staffing levels, an increased number of spot audits, which include daily hand hygiene and Personal Protective Equipment (PPE) walkabouts to ensure staff members are compliant. Our IPAC team helps support these frequent audits. We have a dedicated full-time IPAC staff member and hospital SWAT team who help support the audits of our building and provide education for our staff. Symptomatic residents are immediately tested and isolated separately from others as quickly as possible. Physicians and a nurse practitioner are also on site to support our efforts.

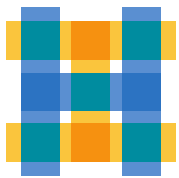
**How is the virus and outbreak management different compared to the first wave?**

The second wave is quite different in many ways. We know more about how the virus spreads and management of the virus but what makes the second wave more challenging is the much higher prevalence of community spread.

**What is being done to protect residents from further exposure?**

We work together with Toronto Public Health and our IPAC team to ensure we follow all provincial directives at our home. Extensive infection prevention and other precautionary measures are utilized, including:

- **PPE:** All provincial protocols related to PPE are in place and we have an adequate PPE supply at SHC. Staff and essential visitors are required to wear PPE, as directed by IPAC and Public Health. NYGH was the first hospital system in the province to introduce universal masking.
- **Staffing requirement:** Staff members are required to work at only one long-term care home to help prevent the spread of the virus. In addition to wearing a mask at all times, staff are actively screened and have temperature checks twice daily.
- **Cleaning processes:** Frequent, rigorous cleaning and disinfecting of all surfaces is being conducted to prevent the spread of COVID-19. We have also increased the cleaning of high touch and common surfaces. In addition, staff is now required to bring a



change of clothing to be worn after their shifts to ensure there is no risk for contamination after leaving the building.

- **Physical distancing:** We continue to practice physical distancing as much as possible.
- **Isolation protocols:** During an outbreak, all residents are isolated for 14 days and all services, including meals are provided at the bedside.

**Is there a staffing shortage now that a number of staff are off sick due to the outbreak?**

There is not a staffing shortage at SHC. Our daytime staff ratio is 1:5, evenings is 1:8 and we are increasing staffing on nights as well. We also have a full-time Personal Support Worker (PSW) to provide additional support.

**Why are residents with COVID-19 not being cared for in hospital?**

We are able to care for more serious cases through the support of our onsite physicians and nurse practitioner. Those who require emergency or hospital care will be transferred to the hospital. Should more support be required for the resident, we consult with family members and our medical director about whether their loved one should be transferred to hospital. In an outbreak situation, we are able to isolate and manage those affected.

**Some residents are still in multi-bed rooms. When will SHC be redeveloped?**

We no longer admit residents to three and four bed rooms, only semi-private or private rooms. We have submitted a proposal to the Ministry of Long-Term Care and hope to hear in the coming weeks or months about the allocation and approval of long-term care beds. Once we receive this, we will share an update with you. It will still be a few years out for a new home to be built, but we are moving forward in the process.

**What are you doing to provide social and emotional support to residents?**

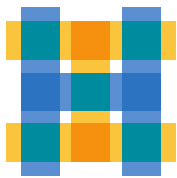
We understand the added challenges for residents and families during this difficult time. We have assigned one dedicated staff member per floor to provide face-to-face interactions as much as possible, and when safety is not compromised. We also have social service workers available for one-on-one visits. Small group activities have temporarily been cancelled but we are doing more face-to-face visits which include music, spiritual or religious care, hand massages, virtual visits and other activities.

**Can a loved one with COVID-19 participate in virtual visits (face-to-face digital phone call)?**

Yes. If the resident is not exhibiting any symptoms of COVID-19, activation staff will conduct a virtual phone call.

**Why is there no bathing/showering of residents while in isolation?**

To ensure the safety of residents and staff, we are unable to assist in the bathing of residents inside the shower area. The wetness of the environment makes it difficult for staff to wear PPE and increases the risk for transmission. Instead, bed baths are being provided for residents (which includes dry shampoo), until the isolation period is lifted, as determined by Toronto Public Health and our IPAC team.



**During bed baths, are residents being washed head to toe?**

Yes. Each time a resident has received a bed bath, our staff provides written confirmation that the resident has received a bed bath and proper trimming/cleaning of nails.

**How are meals being provided while residents are in isolation?**

All meals are being delivered to residents' rooms and staff is providing any required assistance during meal times. We bring meals to the doorway of residents' rooms to create an opportunity for more personal interactions with people.

**Why can't I visit my loved one during the outbreak?**

At this time, one designated essential visitor per resident is permitted and must attest to a negative COVID-19 result within 14 days of visiting, must pass all screening questions, receive IPAC education, and wear proper PPE while visiting. All other visits are cancelled at this time.

**How can I stay connected to my loved one during this time?**

Our program staff will reach out to families to pre-schedule virtual visits. Families may schedule two virtual visits per week.

**Can my loved one be transferred elsewhere or be temporarily discharged?**

We encourage you to do what you feel is best for your family member. You will need to balance different considerations. For example, many residents need additional support, including fall prevention strategies and cognitive support. Also, given the high rate of the virus in the community, there is a risk that your loved one may be exposed at home or in a community setting, including from other family members and grandchildren.

**What are we doing to ensure this doesn't happen again?**

We continue to conduct daily audits and circle back with teams if there are areas we can improve on. We are doing everything we can to keep your loved ones safe. There is unfortunately always a level of risk during the pandemic and we are committed to being vigilant and protecting all residents while at the home.

**How can I stay informed about what is happening at SHC?**

We will continue to inform and stay connected to families in a number of ways including our email communication, our monthly newsletter and individual phone calls. We are also committed to sharing up-to-date information with families every other day by email and phone calls until the outbreak is declared over. We are planning to hold another town hall in November if needed and will share details with you soon.

We welcome your questions and feedback related to the town hall. Your input is extremely valuable and often prompts discussion that helps benefit your loved ones, families, and SHC staff.

**How did a resident test positive if staff was wearing PPE?**

While we have been working hard to ensure staff adhere to preventive practices at all times, SHC and LTC homes across the province are experiencing higher rates of COVID-19 in the community. We have all known effective precautions in place and continue to adapt to new measures as public health and LTC requirements evolve in response to the pandemic. We are continuing to be proactive in our approach to safety. North York General Hospital and SHC

were among the first health organizations in the province to practice universal masking for staff.

**Do you have the same process for outbreak measures at SHC and NYGH?**

Yes. NYGH adheres to current public health and IPAC protocols. In addition to our hospital and SHC, NYGH is supporting about 40 organizations in our community including long-term care, retirement homes and other congregate care settings, to adopt similar best practice protocols for the prevention and management of COVID-19 outbreaks.

**Why do residents need to be in isolation for 14 days if they don't have symptoms?**

An outbreak is determined when the source of an exposure and number of people exposed is uncertain. Outbreak control measures include keeping individuals who have tested positive away from others, utilizing droplet contact precautions (mask, visors, gloves and gowns) for all residents, and rigorous cleaning and sanitization of equipment and other common areas. Testing is a valuable tool but is not considered a control measure since it only gives us a sense of what has happened and what is currently taking place. Our control measures include droplet contact precautions, isolation, good hand hygiene and enhanced cleaning of common areas at SHC.

**Will SHC stop allowing caregivers during an outbreak?**

Based on provincial direction, one essential visitor is allowed per resident. It is important for residents to see their loved ones and equally important to support visitors to protect themselves and others while on site. We have created new educational tools to reinforce our safety measures for visitors, including a new video highlighting how to safely put on and remove PPE. Visitors are also screened at our main entrance and must attest to a negative swab within two weeks of visiting.

**What does the term 'isolation' mean?**

During all interactions, staff wear masks, visors, gowns and gloves. It is recommended that residents mostly stay in their rooms. While group activities are limited there may be creative ways used to undertake enrichment activities, in some cases residents may stay two metres apart while staff wear PPE.

**Why were outdoor visits cancelled?**

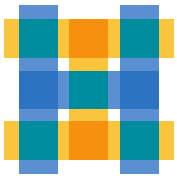
Seniors' Health Centre is located in a City of Toronto hot spot of COVID-19 activity. The cancellation of outdoor visits was a safety directive from the Ministry of Health to limit the spread of the virus in hot spot areas.

**Does SHC have extra rooms or a room for isolation?**

Currently, we are utilizing appropriate additional rooms that are equipped with call bells as isolation rooms.

**What are we doing to prevent another outbreak?**

There is considerable effort to educate, train and support staff ongoing to follow all safety procedures. We also continue to educate and support essential caregivers and families on proper precautions and our surveillance system identifies problems early on so they can be appropriately managed. In these exceptional and challenging circumstances, we are doing all we can to reduce any risks in the home. Together, we were able to get through the first wave



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and we are committed to working together to ensure the health, safety and wellbeing of all residents of SHC.