

## Hospital 4 West Respiratory Syncytial Virus (RSV) Outbreak

**Final Control Measures****CASE DEFINITION**

Any clients and staff presenting with any one respiratory symptom, with lab confirmation;

**SURVEILLANCE**

1. Test new clients presenting with any one symptom compatible with RSV;
2. Initiate daily active surveillance for clients (IPAC) and staff (OHS);

**SIGNAGE AND ADDITIONAL PRECAUTIONS**

3. Place suspected/confirmed cases on Regular Droplet/Contact Precautions with signage on the doors;
4. Post outbreak signage on unit entrance doors & keep them shut for the duration of the outbreak;
5. Post a printed copy of the Control Measures at the nursing station;
6. Implement universal use of masking for staff, visitors, and contractors on the outbreak unit;
7. Implement universal eye protection for staff and essential visitors when within <2m of any client;
8. Use 'clustered care' and keep entries into the rooms of suspected/confirmed cases to a minimum;

**ACCOMMODATION, COHORTING & ROOM RESTRICTIONS**

9. Cohort active cases, when necessary/practical/feasible;
10. Restrict active cases to their rooms for the duration of precautions;
11. Use dedicated mobile equipment in the rooms of active cases, when possible;
12. Disinfect mobile equipment that cannot be dedicated, using disinfectant wipes;

**APPOINTMENTS, LEAVES OF ABSENCE & GROUP ACTIVITIES**

13. Determine whether clients' medical appointments should be kept, at the discretion of MRPs;
14. Schedule appointments end of day, if possible. Notify transport personnel and the receiving facility;
15. Suspend community leaves of absence for the duration of outbreak;
16. All group activities are discontinued on the affected unit and close client gathering spaces (e.g., TV lounge);

## **ADMISSIONS, RE-ADMISSIONS, TRANSFERS, DISCHARGES**

17. Continue admissions to the affected unit, as long as new admissions can be placed into private rooms;
18. Permit early client discharges and repatriations to homes in the community;
19. Coordinate inter-facility transfers with Toronto Public Health. Notify the receiving facility;

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

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

## **ENVIRONMENTAL SERVICES**

26. Perform daily enhanced cleaning/disinfection in the rooms of active cases;
27. Perform a terminal cleaning upon discontinuation of precautions.