

October 3, 2022

MEMO TO: Retirement Home Licensees
FROM: Jacqueline Cureton, Assistant Deputy Minister, Seniors and Accessibility Policy, Programs and Strategic Partnerships, Ministry for Seniors and Accessibility
SUBJECT: Fall 2022 Preparedness

As we approach the beginning of fall, I would like to thank you for your continued dedication and efforts in keeping retirement home operations running smoothly and for continuing to support and care for residents.

The Ministry for Seniors and Accessibility (MSAA) is pleased to note that Ontario managed through the seventh wave of COVID-19 without implementing broad public health measures and is now preparing for potential impacts this coming Fall/Winter respiratory season. During the Fall/Winter season, we anticipate there will be a continued need to respond to COVID-19, and we anticipate this will be coupled with a resurgence of seasonal respiratory illnesses, such as influenza (flu).

Respiratory illnesses pose a higher risk of infection and serious outcomes for older adults living in congregate settings, such as retirement homes. It is important for retirement home licensees to be prepared to prevent and respond to a higher prevalence of respiratory outbreaks this Fall and Winter. This memo outlines key actions that are advisable for licensees to ensure readiness.

1. Infection Prevention and Control (IPAC)

While the great majority of retirement homes have extremely high COVID-19 vaccination rates amongst residents, continued adherence to IPAC measures is crucial to **addressing the risk of outbreaks and spread of respiratory diseases**. Retirement homes have IPAC obligations under the [Retirement Homes Act, 2010 \(RHA\)](#), which include ensuring an IPAC program is in place for the home, and that all staff and volunteers have received the necessary IPAC training.

Furthermore, as instructed by the Chief Medical Officer of Health (CMOH) in a memo to the Retirement Homes Regulatory Authority (RHRA) on June 11, 2022, retirement homes must continue to follow the measures in two COVID-19 guidance documents:

- *Ministry of Health's (MOH) COVID-19 Guidance: Long-Term Care Homes and Retirement Homes for Public Health Units (MOH's Guidance for PHUs)*

- *MSAA's COVID-19 Guidance Document for Retirement Homes in Ontario*

As stated in the CMOH memo to the RHRA, these two documents constitute guidance, advice, or recommendations given to retirement homes by the CMOH, which the licensee of a retirement home shall ensure are followed in the retirement home in accordance with clause 27(5) (0.a) of O. Reg. 166/11 under the RHA.

Additionally, [MOH's Guidance for PHUs](#) recommends that retirement homes conduct [self-audits](#) every two weeks when the home is not in outbreak to identify potential gaps in IPAC best practices.

IPAC leads in retirement homes who need additional support are encouraged to work with their local PHU or contact their local IPAC Hub for IPAC services, including:

- Education and training
- Coaching/mentoring
- Support for assessments and audits
- Support to implement IPAC recommendations (e.g., from external audits).

To find out how to get connected with your local IPAC Hub or for additional information, please contact: IPACHubs@ontario.ca.

2. Vaccination

COVID-19 Vaccines

As outlined in MSAA's [COVID-19 Guidance for Retirement Homes](#), licensees are strongly encouraged to continue promoting COVID-19 vaccines/boosters to residents, staff, and visitors. Given that preliminary evidence suggests that infection and/or vaccine-acquired immunity wanes over time, both [NACI](#) and the Ministry of Health are strongly recommending a COVID-19 bivalent vaccine booster (bivalent vaccine) this fall for high-risk groups, including those living in retirement homes. [As per NACI](#), staying up to date with COVID-19 vaccines/boosters is an effective way to prevent severe outcomes, including hospitalizations and death due to COVID-19.

As of September 12, 2022, individuals living and working in retirement homes who are 18 years of age and over are eligible to receive the bivalent vaccine at a recommended interval of six months or at a minimum interval of three months (84 days) since their last dose, regardless of the number of COVID-19 boosters they have received. Since the bivalent vaccine is being offered as a booster dose, those who receive it must have completed a primary series. Starting on Monday, September 26, the province expanded its rollout of the bivalent vaccine to all other Ontarians aged 18 and over.

With the bivalent vaccine now available in Ontario, retirement homes are encouraged to obtain resident consent for the vaccine and should work with PHUs as soon as possible to establish plans for vaccine administration. This will help ensure that residents, staff, and essential caregivers have protection in advance of an early fall respiratory season.

Retirement homes that are set up for independent administration of COVID-19 vaccines are encouraged to work with their local PHU to finalize plans and ensure the adequacy of relevant vaccine ancillary supplies for administering the bivalent vaccine.

For retirement homes that are unable to independently administer the vaccine, please consider other methods for on-site vaccination for residents, in collaboration with the local PHU, such as working with:

- The co-located or near-by long-term care home to support vaccine administration
- The local PHU or [local pharmacy](#) to arrange for a vaccination clinic
- GO-VAXX and Mobile Clinic Teams who can be contacted through govaxx@ontario.ca for the Greater Toronto Area and/or provincialhhrsupport@ontario.ca for other locations

If your retirement home is able to help other retirement homes administer the bivalent vaccine and would like to do so, please contact MSAA at: RHInquiries@ontario.ca.

If, after working with the local PHU and considering other resources, retirement homes do not have a plan to administer vaccinations on-site, they should contact MSAA at RHInquiries@ontario.ca to seek support.

Influenza Vaccine

Similarly, promotion of the influenza (flu) vaccine is important this coming Fall/Winter respiratory season to prevent significant flu outbreaks and severe illness in retirement home residents who are at a higher risk of severe outcomes from influenza (flu). As a reminder, the influenza (flu) vaccine may be given simultaneously, the same day, before or after the COVID-19 vaccine.

Licensees are also reminded of their obligations under the RHA, which include ensuring that residents, staff, and volunteers receive information about the advantages of an annual flu vaccination and where the vaccination is available.

Retirement homes not participating in the MOH's [2022-2023 Universal Influenza Immunization Program \(UIIP\)](#) are strongly encouraged to develop a plan to administer the flu vaccine to residents, staff, and essential caregivers. This could include supporting onsite vaccine administration by working with the local PHU or making arrangements with a local pharmacy or other local health providers (e.g., family health team, nurse practitioners, etc.).

3. Paxlovid Antiviral Treatment

Licensees are highly encouraged to share information with residents about how to access antiviral treatments, including [Paxlovid](#). Based on [Ontario Health's](#) advice, antivirals can offer increased protection and limit the severity of COVID-19 when taken early in the course of an infection. Individuals aged **70 and over** are among the higher

risk groups eligible to be tested and assessed for [Paxlovid](#) as they are at higher risk of progressing to severe disease. A patient handout translated into multiple languages is available from [Ontario Health](#) as an additional resource.

In order to access Paxlovid, residents can visit a [clinical assessment centre](#) or contact their primary care provider. To be considered for antiviral treatment, the resident must have:

- Tested positive for COVID-19 (by polymerase chain reaction (PCR) or rapid antigen test)
- Been assessed by a health care provider to determine if antiviral treatment is appropriate

Treatment for antivirals must be started **within five days of COVID-19 symptoms** in most cases. [Paxlovid antiviral suitability](#) depends on the clinical risk of the individual and **does not act as a supplement to COVID-19 vaccines/boosters**.

Residents can also call Health Connect Ontario at 811 or 1-866-797-0007 (toll-free TTY) for more information on antiviral treatments, assistance, or eligibility for virtual care options.

4. Accessing Rapid Antigen Tests and Emergency Supplies of Personal Protective Equipment (PPE)

A new integrated order management system called the [PPE Supply Portal \(PSP\)](#) has been established to facilitate orders for rapid antigen tests and emergency supplies of PPE (excluding PCR swabs).

The PSP is a simple, online self-serve ordering tool that can be accessed 24/7. The tool features convenient, efficient, and simple ordering through an account that will maintain organizational information, meaning the retirement home will not need to re-enter this information every time an order is made. It also gives retirement homes the ability to use their order history to quickly reorder, edit products for a new order or track whether previous orders have shipped.

All licensed retirement homes have been pre-registered for the PSP. This means that a profile reflecting each licensee's name, address, and other relevant details has been created and may be edited, as needed. When a licensee first logs into the portal, they will receive an email stating that an online account has been created. Please follow the link provided in that email to reset the home's password and activate the account. A [user guide](#) with detailed instructions on how to navigate the new portal is also available. MSAA will provide additional information to support on-boarding to the new portal in the coming weeks.

Please note beginning November 2022, any retirement home seeking to order rapid antigen tests will be required to create an online account with the new portal. Licensed

retirement homes that **do not register for the new portal** will no longer receive push orders for rapid antigen tests in November 2022.

As a reminder, licensees are required to ensure that antigen tests provided to them are used only for the purposes of the Provincial Antigen Screening Program. They are not to be resold or distributed to any other organization. By receiving tests through this program, homes must continue to adhere to the terms and conditions established for the program.

If you have any questions, feedback or concerns specifically about the new ordering process, please email SCO.Supplies@ontario.ca.

5. Staffing Contingency and Fall Planning

It is expected that the upcoming Fall/Winter respiratory season will impact human resource capacity across the province, including retirement homes. As a reminder, operators should encourage staff to [stay home](#) when they are sick and to follow public health guidance for [return to work](#).

To support preparedness for critical staffing shortages, MSAA highly encourages licensees to review the [RHRA Self-Assessment Checklist](#) and become familiar with key considerations when developing a staffing contingency plan including:

- Changing the scheduling of work or shifts and collecting information about availabilities of staff for alternative shifts
- Conducting skills and experience inventories of staff to identify viable alternative roles (i.e., cross training staff to work in multiple departments)
- Identifying local college/university/high school students that can provide support
- Providing appropriate training or education as needed to staff and volunteers

In addition to the RHRA Self-Assessment Checklist, the RHRA has released a set of fall planning resources that may be of interest to retirement home operators. Some of those resources include:

- [COVID-19: Infection Prevention and Control Checklist for Long-Term Care and Retirement Homes](#)
- [COVID-19: Outbreak Reporting Tip Sheet](#)
- Infection Prevention and Control CAM
- Infection Prevention and Control (IPAC) Guidelines

As always, MSAA is available to support licensed retirement homes if there are any questions related to this memo. Please contact us at RHInquiries@ontario.ca.

We sincerely appreciate the continued efforts made by licensed retirement homes during the pandemic and thank you for your continued progress to support the health and safety of retirement home residents.

Sincerely,

Original signed by

Jacqueline Cureton

- c: Nancy Matthews, Deputy Minister, Ministry for Seniors and Accessibility
- Dr. Barbara Yaffe, Associate Chief Medical Officer of Health, Office of the Chief Medical Officer of Health
- Jay O'Neill, Chief Executive Officer and Registrar, Retirement Homes Regulatory Authority
- Cathy Hecimovich, Chief Executive Officer, Ontario Retirement Communities Association
- Lisa Levin, Chief Executive Officer, AdvantAge Ontario