

April 19, 2024

MEMO TO: Retirement Home Operators and Licensees
FROM: Michèle Sanborn, Assistant Deputy Minister
Policy, Programs and Strategic Partnerships Division
Ministry for Seniors and Accessibility
SUBJECT: Update Regarding New Ministry of Health Outbreak Prevention and
Control Guidance

I am writing to provide you with an update on the new guidance document recently released by the Ministry of Health (MOH) entitled *Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings* (Outbreak Prevention and Control Guidance). The Outbreak Prevention and Control Guidance is an amalgamation of the following MOH documents:

1. *COVID-19 Guidance for Public Health Units: Long-Term Care Homes, Retirement Homes, and Other Congregate Living Settings;*
2. *Control of Respiratory Infection Outbreaks in Long-Term Care Homes, 2018; and*
3. *Recommendations for the Control of Gastroenteritis Outbreaks in Long-Term Care Homes, 2018.*

The release of the MOH's Outbreak Prevention and Control Guidance will have the following implications for the retirement home sector:

New Direction for Retirement Homes to Follow the Outbreak Prevention and Control Guidance

To accompany the release of the Outbreak Prevention and Control Guidance, the Chief Medical Officer of Health (CMOH) has replaced the memo to the Retirement Homes Regulatory Authority (RHRA) dated June 10, 2022, with a new memo dated April 19, 2024 which requires retirement homes to follow the policies, procedures, and preventative measures in this new guidance document. This document includes guidance, advice, or recommendations, which should be followed as such, in accordance with clause 27(5) (0.a) of O.Reg. 166.11 under the *Retirement Homes Act, 2010*.

The MOH's new Outbreak Prevention and Control Guidance was created for Public Health Units (PHUs) to use as guidance for preventing and supporting the management of suspected and confirmed COVID-19, respiratory and gastroenteritis outbreaks in institutions and other congregate living settings (CLS). However, institutions and other CLSs (including long-term care homes and retirement homes) can use this document for guidance purposes to inform their policies and procedures regarding the prevention and management of outbreaks. Institutions and CLSs can also find links to outbreak management related best practices and other technical documents. Please note that, due to the wide-ranging nature of CLSs, not all information under each section will apply to every setting, including retirement homes.

Although the Outbreak Prevention and Control Guidance is intended to be a best practice guide for institutions and CLSs, there may be instances during an outbreak where retirement homes must adhere to the requirements directed by their local PHU (e.g., restrictions on social activities). Pursuant to section 29.2 of the Health Protection and Promotion Act R.S.O. 1990, c H.7, [...] *a medical officer of health may make an order requiring a public hospital or institution to take any actions specified in the order for the purposes of monitoring, investigating and responding to an outbreak of communicable disease at the hospital or institutions.* In all other instances outside of an outbreak, the MOH Outbreak Prevention and Control Guidance is to be interpreted as **recommendations**.

Continued Direction for Retirement Homes to Follow the Ministry for Seniors and Accessibility's (MSAA) COVID-19 Guidance for Retirement Homes in Ontario

In addition, the CMOH memo requires retirement homes to follow sector specific guidance issued by MSAA to retirement homes which includes the *MSAA COVID-19 Guidance for Retirement Homes in Ontario*. This guidance is meant to provide complementary sector specific direction and may include guidance, advice, requirements (e.g., masking) or recommendations which should be followed as such. This document is to be considered in addition to any direction provided by the MOH or the CMOH, and will continue to be updated, as needed, based on the advice of the MOH and the level of risk to the sector.

To support your review and understanding of MOH's new Outbreak Prevention and Control Guidance, we have enclosed a chart in Appendix A summarizing significant sections for retirement homes to consider implementing. In addition, we have attached the new CMOH memo and revised MSAA COVID-19 Guidance.

Finally, we'd like to encourage retirement homes to refresh their knowledge on foundational IPAC practices (e.g., environmental cleaning, point of care risk assessment, personal protective equipment, and hand hygiene) by reviewing resources that can be found on Public Health Ontario's [website](#). Implementing foundational IPAC practices is critical during non-outbreak periods to support retirement homes in the prevention of outbreaks and to be prepared in the event that an outbreak occurs. For support with implementing IPAC best practices we encourage you to reach out to your local IPAC Hub. If you are unaware of who that is, please contact IPACHubs@ontario.ca.

I thank you for your dedication in ensuring retirement home operations run smoothly, while prioritizing the safety and well-being of both residents and staff.

If you have any questions, please contact our team at RHinquiries@ontario.ca.

Sincerely,

Original signed by

Michèle Sanborn

c: Melissa Thomson, Deputy Minister, MSAA and MLTC
Marsha Pinto, Director, Retirement Homes Branch, MSAA
Dr. Barbara Yaffe, Associate Chief Medical Officer of Health, OCMOH

Dr. Michelle Murti, Associate Chief Medical Officer of Health, OCMOH
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

Appendix A: Summary of Significant COVID-19 Related Sections for Retirement Homes from the Ministry of Health's Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings Document
 (Please see guidance document for more information on other respiratory and gastroenteritis outbreaks)

Infectious Disease Measures	Section	Description
Outbreak Preparedness Plan	Section 2, including Appendix A	<ul style="list-style-type: none"> • Recommends that CLSs develop Outbreak Preparedness Plans to support the operationalization of the recommendations outlined in the guidance document, and to develop contingencies as appropriate to their setting in accordance with any setting-specific guidance. • Provides additional outbreak resources to support the development of an Outbreak Preparedness Plan.
IPAC Audits	Section 5	<ul style="list-style-type: none"> • Recommends that the IPAC designate in CLSs conduct weekly IPAC self-audits for the duration of an outbreak.
Vaccination	5.2	<ul style="list-style-type: none"> • Recommends that new admissions to CLSs who are not up to date with their COVID-19 vaccinations be offered a complete series of a COVID-19 vaccination or their remaining eligible doses as soon as possible.
Therapeutics	Appendix B	<ul style="list-style-type: none"> • Recommends that an outbreak plan include measures that will expedite the administration of antiviral medication for staff and residents. This plan should include measures to ensure rapid access to antiviral medications from local pharmacies.
Hand Hygiene	3.1	<ul style="list-style-type: none"> • Provides detailed recommendations for hand hygiene and notes that hand hygiene should be performed in accordance with Public Health Ontario's Best Practices for Hand Hygiene in All Health Care Settings, 4th Edition.
Personal Protective Equipment	3.1	<ul style="list-style-type: none"> • Provides detailed best practices and recommendations for infection prevention and control (IPAC) and personal protective equipment (PPE) for residents and administrative measures for managing a suspect outbreak.
Environmental Cleaning and Disinfection	3.12	<ul style="list-style-type: none"> • Recommends that CLSs perform daily cleaning of common areas, high touch areas twice a day, dirty surfaces immediately and surfaces and items near residents that are more vulnerable more often. Further instructions are provided on different cleaning approaches. • Recommends that CLSs have written policies and procedures for routine cleaning and disinfection as well as enhanced environmental cleaning and disinfection during an outbreak with specific requirements on what to include.

Infectious Disease Measures	Section	Description
Ventilation and Filtration	5.12	<ul style="list-style-type: none"> • Recommends that in general, ventilation with fresh air and filtration can improve indoor air quality over time by diluting and reducing potentially infectious respiratory aerosols. • Indoor spaces should be as well ventilated as possible, through a combination of strategies: natural ventilation (e.g., by regular opening of windows and doors), local exhaust fans, (e.g., bathroom exhaust fan), or centrally by a heating, ventilation, and air condition (HVAC) system.
Admissions and Transfers	3.5	<ul style="list-style-type: none"> • Recommends that CLSs consult with the public health unit (PHU) if the CLS is in outbreak or if the resident comes from an institution that is in or suspected of an outbreak.
Case and Contact Management	Section 5C and D	<ul style="list-style-type: none"> • Provides general recommendations for IPAC measures, resident restrictions, admissions and transfers, social activities, visitors, environmental cleaning and more during outbreaks.
COVID-19 Outbreak Management	Section 5	<ul style="list-style-type: none"> • Provides recommendations for IPAC measures, resident restrictions, admissions and transfers, social activities, visitors, environmental cleaning and more during confirmed COVID-19 outbreaks.