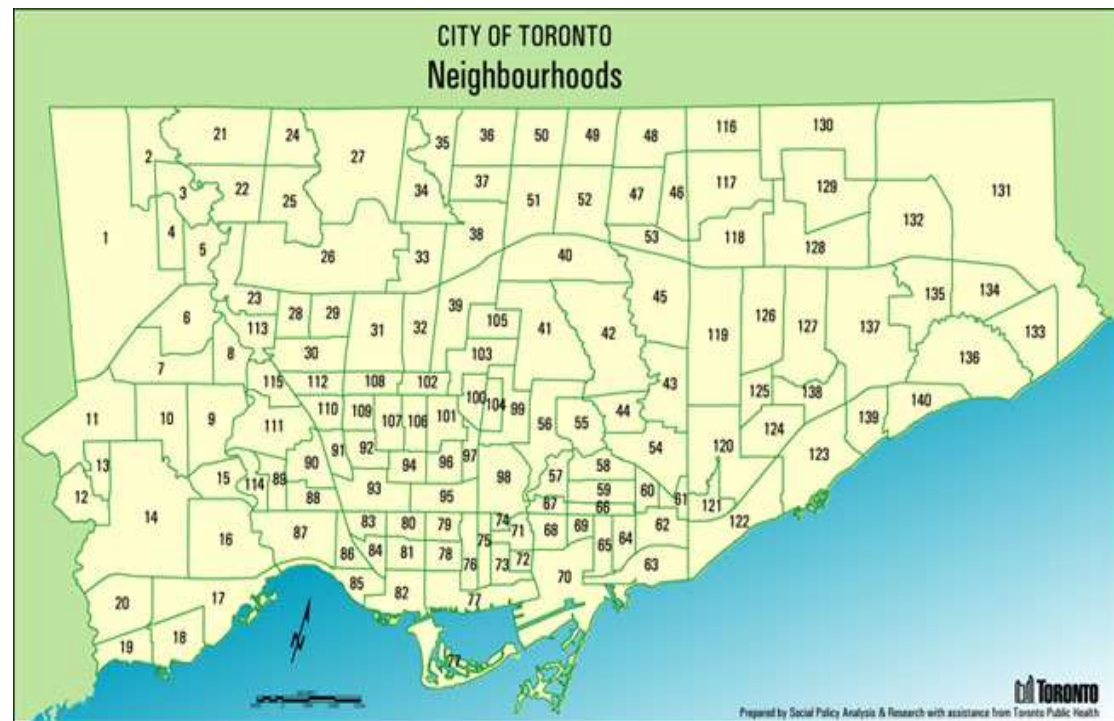


Ontario Long-Term Care COVID-19 Commission

**Remarks from Dr. Eileen de Villa,
Medical Officer of Health, Toronto Public Health**

October 26, 2020

- Largest local public health agency in Canada
- ~2000 Staff
- Reports to the Board of Health, the City of Toronto
- Population served ~3 million
- 140 Neighbourhoods



Toronto Public Health Role in Long-Term Care

- 89 Long-Term Care Homes (LTCH) in Toronto
 - ~20-30 FTE support LTCH (and other congregate settings) during “normal times”
 - ~200 staff currently assigned to the COVID -19 LTCH/retirement homes team



Public Health Units through the Public Health Standards are required to:

- Provide case management and support during outbreaks
- Assist homes with their Long-Term Care Homes Act requirement to implement an Infection Prevention and Control Program (IPAC)
- Inspect and manage outbreaks related to food safety

Role of Long-Term Care Homes & the Ministry of Long-Term Care

Long-Term Care Homes through the Long-Term Homes Care Act Regulation 79/10 s.229 are required to:

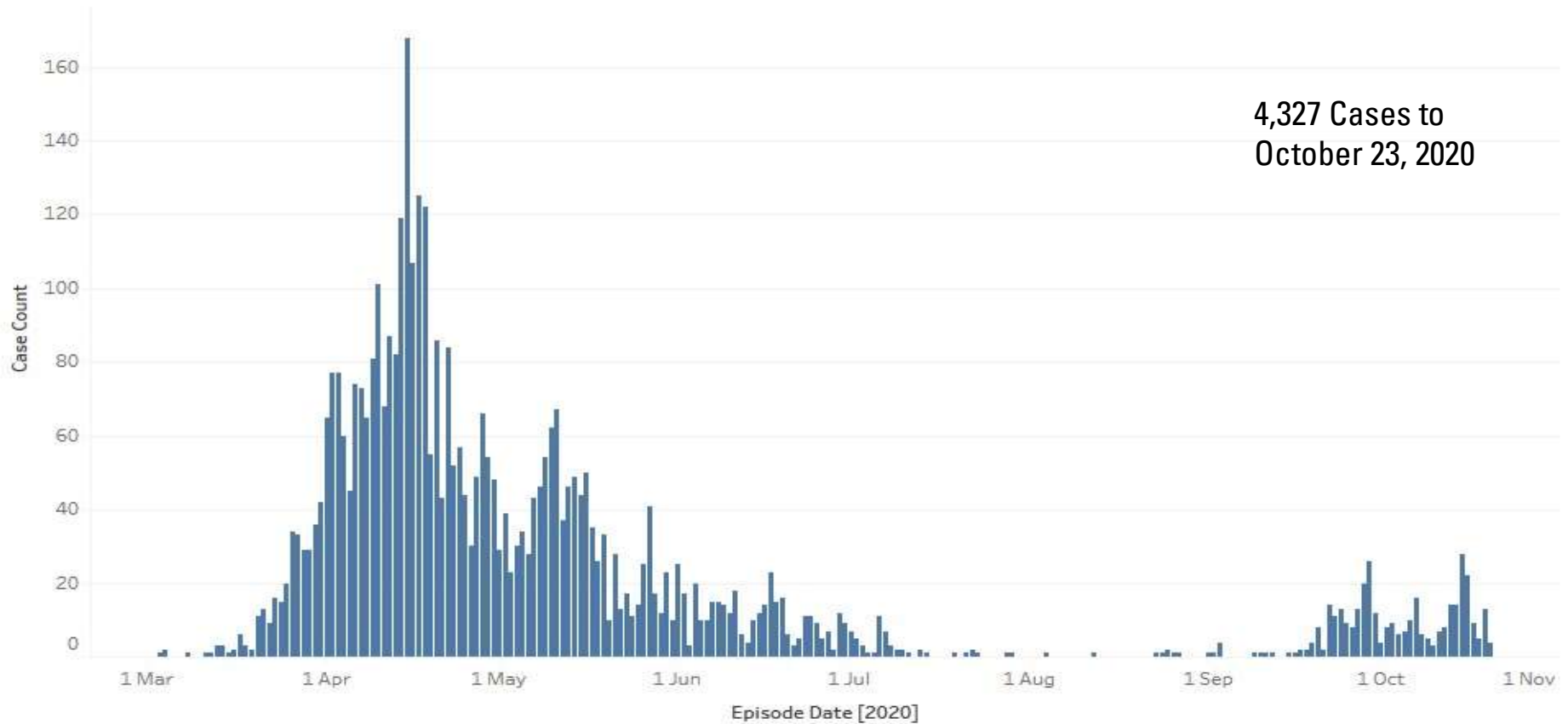
- Implement an Infection Prevention and Control Program (including designated staff, information gathering, surveillance, outbreak management and communication)

Ministry of Long-Term Care through the Long-Term Care Homes Act is required to:

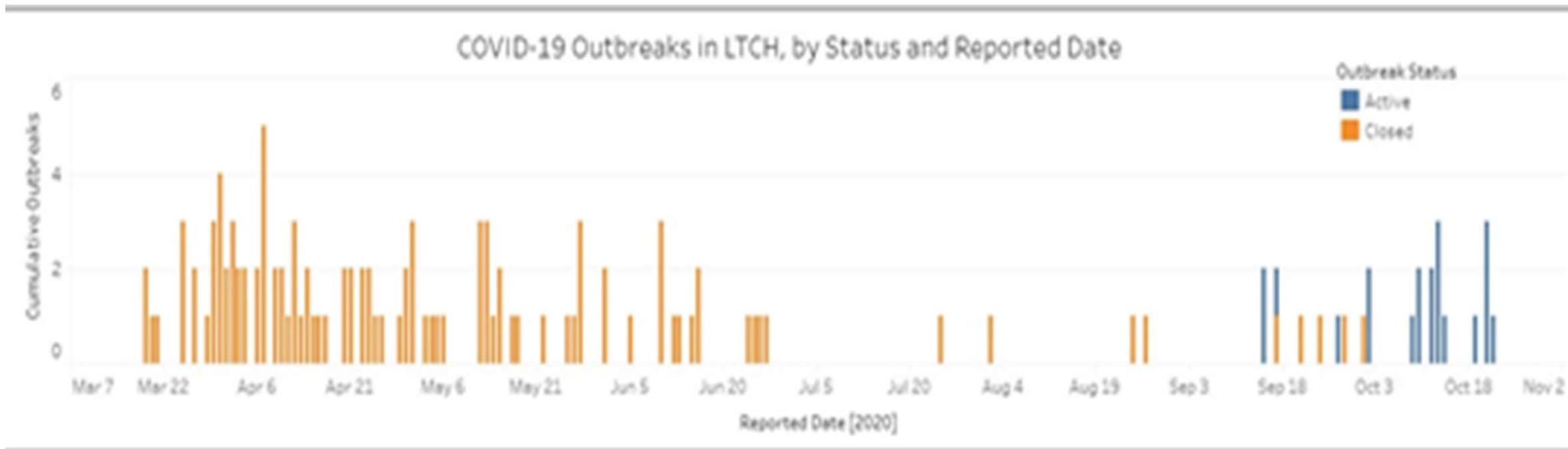
- Inspect Long-Term Care Homes to ensure effective implementation of their Infection Prevention and Control Program

- January 25: First confirmed COVID-19 case in Toronto
- February: Focus on reducing community spread through fulsome case and contact management
- Early March: First Case in LTCH
- March 15: First Outbreak in LTCH

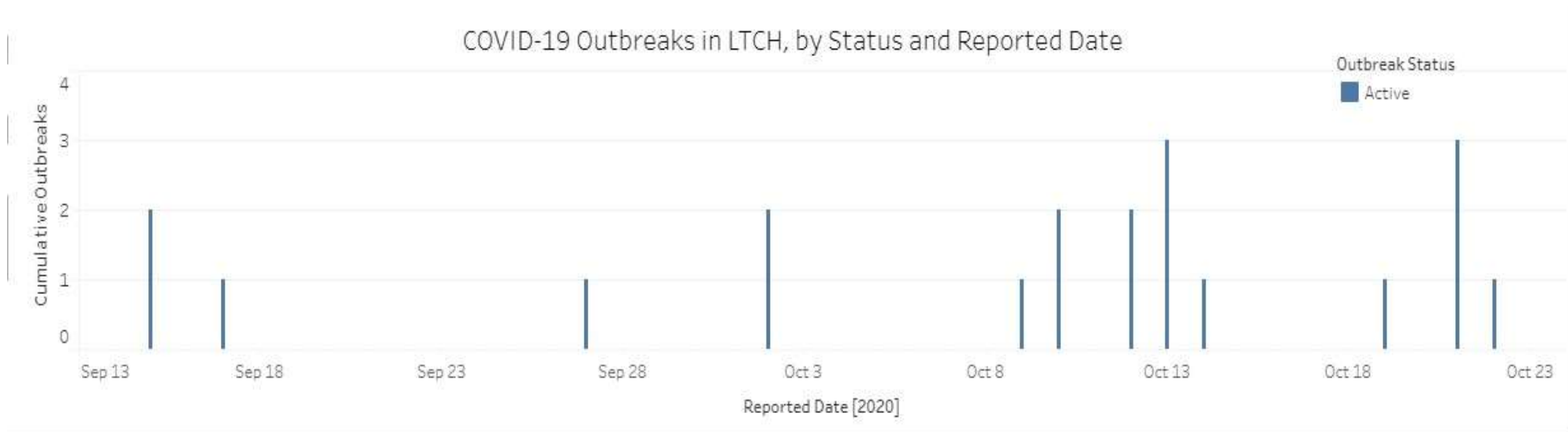
Long-Term Care Case Counts: Toronto



Long-Term Care Outbreaks: Toronto



Long-Term Care Outbreaks: Fall 2020



- Long-Term Care Homes in Toronto are variable (e.g. size range 28 beds – 400 beds)
- Outbreak experiences vary across homes, based of their unique circumstances and characteristics

- Need for role clarity among health system partners
- Lack of dedicated infection prevention and control support
- Need for coordinated testing strategy
- Aging physical structures / infrastructure challenges

1. Strengthen and Fund Infection Control and Outbreak Measures:

- Commit to implement IPAC program and outbreak control measures.
- Fund and train on-site infection control lead staff to be accountable to deliver the program.

2. Review and Inspect IPAC and Outbreak Measures:

- In the short term review current status of IPAC program in LTCHs, and provide feedback on training, prevention, outbreak management and physical changes.
- In the long term regularly inspect and evaluate LTCH to ensure infection control and outbreak management measures are achieving IPAC goals.

3. Strengthen Staffing and Training:

- IPAC program must include basic training for all staff.
- At base-line all staff need appropriate skills (medical, nursing, environmental specific to LTC) and ability to scale up.

4. Improve physical structure and infrastructure of LTCHs

- e.g. physical lay out for cohorting and isolation
- e.g. ensure properly functioning HVAC and that it meets established standards

5. Clarify Roles and External Partner Support:

- Clarify the roles of health system partners e.g. Ministry of Health and Ministry of Long-Term Care
- Provide a comprehensive testing strategy during outbreaks and other times
- Ensure effective cohorting and isolation, where not possible have health care partnerships in place to decant residents

Overall Goal: Mitigate the size and health impact of LTCH outbreaks through accountability for:

- Proactive measures
- Effective training & practices
- Commitment to inspection and improvement.