

March 12, 2020

Dear Long Term Care Facility Managers and Directors of Care:

As you have been informed, there is an outbreak of COVID-19 at the Lynn Valley Care Centre Lodge in North Vancouver. A second outbreak has also been confirmed at Hollyburn House Care Centre in West Vancouver. We know that many staff work at multiple long-term care facilities.

As part of outbreak control measures, we are requiring that staff working at the **Lynn Valley Care Centre Lodge or Hollyburn House Care Centre** refrain from working in other health care settings **until the outbreak is over**. This applies to all staff who worked in the Lynn Valley Care Center **Lodge** after February 14 and all staff who worked in Hollyburn House Care Centre after March 3.

This restriction does not apply to physicians, paramedics, laboratory technicians or other health care professionals who provide visiting health services to LTC residents.

Please note that Lynn Valley Care Centre has a “Lodge” area and a “Manor” area. This exclusion does **not** apply to those staff who have worked **only** in Lynn Valley Care Centre **Manor**.

You may also have staff who have family members who live in Lynn Valley Care Centre or Hollyburn House. There is no need to exclude staff who visit family in the Lynn Valley Care Center Manor. There is also no need to exclude staff who attended the family meeting held Saturday March 7th at the Lynn Valley Care Center “Garden Room” or who have not visited their families within the Lodge since Feb 14th.

We know that many of you are taking steps to prevent an outbreak in your facility. Please remember that patients have a **legal right to receive visitors**. We recommend that:

1. Friends and family with any respiratory or gastro-intestinal illness do not visit
2. Wherever possible, visits by friends and family are limited to a single resident in any facility

We would also like to take this opportunity to provide the following recommendations to enhance protection for your facilities at this time:

Cleaning

- Immediately begin **enhanced cleaning** of high touch surfaces, at least two times per day in line with typical practices during an outbreak of respiratory illness (examples include door knobs, faucets, etc). Please see the VCH Influenza-like-Illness (ILI) protocol for long term care (<http://ipac.vch.ca/outbreaks>) for guidance. Standard hospital-grade disinfectants approved by PICNET for enveloped viruses are sufficient.

Testing

- Swab **all residents** with new or worsening upper or lower respiratory symptoms, even if there is just a **single resident** who is ill. In most cases COVID-19 presents with respiratory symptoms and fever, but as with influenza, we recommend testing residents with symptoms which may be milder or atypical, including sore throat, shortness of breath and headache.
- The same throat and nasopharyngeal (NP) swabs used for influenza are used to test for COVID-19. While an NP swab (red COPAN) is preferred, a throat swab (blue COPAN) is also adequate.

- Follow the same processes for collecting and sending swabs as for influenza. The swabs should be sent to the BCCDC for testing. Minimizing transit time of swabs is critical for receiving timely results. If you anticipate delays in specimen transit to BCCDC, please call Public Health to discuss alternative options, 604-675-3900 (8:30am to 4:30pm, Monday-Friday) or 604-527-4893 (after hours and weekends).

Isolation and outbreak protocols

- **Immediately isolate** all residents with new or worsening respiratory symptoms, even if there is just a **single resident** who is ill. If there are two or more ill residents, contact Public Health immediately 604-675-3900 (8:30am to 4:30pm, Monday-Friday) or 604-527-4893 (after hours and weekends).
- If a resident is diagnosed with COVID-19, Public Health will follow up immediately with the facility to assist in management and contact tracing. Residents with a diagnosis of COVID-19 do not need to be moved to acute care unless their clinical status requires it.

Staffing measures

- Emphasize that staff with a new or worse cough should not be working. If symptomatic after returning from travel to an [affected area](#), they should be tested before returning to work. Affected areas change frequently; guidance is available from the BCCDC and Public Health Agency of Canada (see links under “Further information”).
- Asymptomatic staff returning from specific high-risk areas (at this time Iran and Hubei Province, China) should have already received instructions at the Canadian border on self-isolation for 14 days. No other asymptomatic returning travelers are currently asked to self-isolate, including health care workers and/or facility staff. However, asymptomatic returning travelers are asked to self-monitor for symptoms, and to stay home and call 811 if symptoms develop.
- We recommend that Long-Term Care facilities plan for business continuity should staff members require isolation and be unable to attend work.

Infection control

- Review and re-train staff on infection control procedures, including hand hygiene and donning and doffing personal protective equipment. Maintaining appropriate infection control practices is critical to limiting the spread of COVID-19 within your facility.
- Current evidence strongly suggests COVID-19 is spread by droplets and direct contact. Please see BCCDC’s website for provincial infection control guidance, including the appropriate personal protective equipment when caring for a person with COVID-19 or a person under investigation for COVID-19: [www.bccdc.ca/health-professionals/clinical-resources/novel-coronavirus-\(covid-19\)](http://www.bccdc.ca/health-professionals/clinical-resources/novel-coronavirus-(covid-19))
- We also recommend providing continuous guidance to residents on respiratory hygiene/cough etiquette.

- Because current evidence does not suggest that COVID-19 has airborne spread, N95 masks should not be routinely required unless a patient is undergoing aerosol generating medical procedures.

Supplies

- We strongly recommend you work with your existing suppliers to identify your supply needs for the coming months and develop a plan to ensure you have adequate supplies of personal protective equipment and other relevant items. It is not possible to order supplies from Vancouver Coastal Health that are ordinarily ordered from other suppliers.

Visitors

- Immediately enhance symptomatic screening measures for visitors to the facility. Ill visitors, including visitors with any degree of respiratory symptoms, **should not be permitted to visit.**
- If an urgent visit is necessary from a visitor with symptoms (e.g. due to rapidly declining health status of a resident), please arrange for a mask for the visitor in advance to protect the health of others in the facility, and provide clear instructions on the requirement to wear it.

Further information can be found in the following resources:

- BC Centre for Disease Control: [www.bccdc.ca/health-professionals/clinical-resources/novel-coronavirus-\(covid-19\)](http://www.bccdc.ca/health-professionals/clinical-resources/novel-coronavirus-(covid-19))
- Public Health Agency of Canada: www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection.html
- Definition of affected area: www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/health-professionals/covid-19-affected-areas-list.html

Sincerely,



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