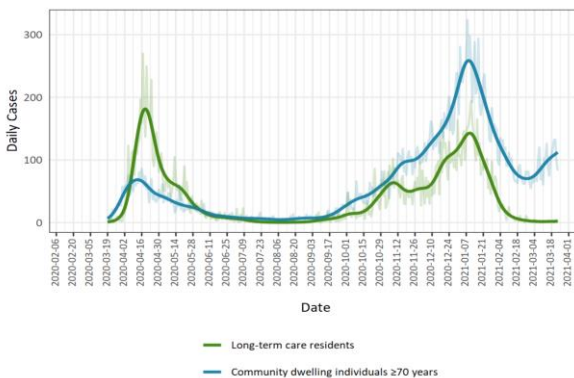


COVID-19 Update

	Ont. cases	Deaths	LTC cases	LTC deaths	% LTC deaths
September 15	40,383	2,872	3,274	1,854	64.6%
February 25	298,569	6,944	14,955	3,864	55.6%
March 24	336,070	7,280	15,017	3,892	53.5%
Sep 15 – Feb 11 (2 nd wave)	295,687	4,408	11,743	2,038	46.2%

<https://www.ontario.ca/page/how-ontario-is-responding-covid-19#section-0>



Whereas cases for seniors in the community are increasing, the incidence in LTC is negligible, and continues to flatten. LTC residents were especially vulnerable to the first wave of COVID-19 because of pre-existing conditions such as understaffing, outdated facilities and lack of IPAC preparedness. PHO data demonstrates the success of vaccination along with testing and other public health measures.

The Canadian mortality figure for “care homes” of 82% originates in the International LTC Policy Network report of May 2, 2020. Updated reports from the same organization show that mortality in the second wave was under 60%. In Ontario, it is less than 50%.

[International LTC Policy Network](#)

ONTARIO BUDGET - Yesterday’s budget announcement by Finance Minister, Peter Bethlenfalvy, includes Ontario's plan to fix long-term care—to “address decades of neglect and help those waiting to get into long-term care”. Over the next four years \$933M, for a total of \$2.6B, will support building 30,000 new long-term care beds. Existing homes will receive \$246 million to improve living conditions. As previously promised, the average direct daily care will increase to four hours a day. This 4.9B investment over four years requires more than 27,000 new positions, including personal support workers (PSWs) and nurses. [Ont 2021 Budget](#)



The virtual [Medical Director Course](#) occurs over eight, 2-hour interactive sessions. The Winter Term concludes on March 29. Registration is open for the Spring Term, which begins on April 8. To register:

[Online Registration Link – Spring Term](#)

This Group Learning program has been certified by CFPC for up to 48 Mainpro+ credits. For more information, contact office@oltcc.ca.

RAPID ANTIGEN TEST

In most homes, weekly PCR testing for all staff, contractors and clinicians is replaced by the rapid antigen test, or antigen point-of-care testing. In high prevalence areas (Yellow/Orange/Red/Grey) antigen POCT should be performed 2-3 times per week. For low prevalence areas (Green), antigen POCT should be performed 1-2 times per week. Any symptomatic individual or COVID-19 contact requires a PCR testing instead of antigen POCT. In general, individuals who have previously been infected with and recovered from COVID-19 should not undergo repeat testing/antigen testing, unless otherwise directed. All public health measures and guidelines including screening of all individuals continue to be followed. Antigen POCT should not be conducted in an outbreak setting, unless directed by the local public health unit and being conducted in addition to PCR testing.

[MOH Antigen POCT Guidance, Mar 19](#)

Routine testing of staff is required to screen out infected providers who are asymptomatic or presymptomatic and prevent them from bringing the virus into long-term care homes. In a brief this week, the Ontario COVID-19 Science Advisory Table stated that evidence is lacking to show that screening asymptomatic individuals prevents outbreaks in LTC homes and noted the potential harms of using these tests to screen staff likely outweigh the benefits. Doris Grinspun, CEO of the Registered Nurses' Association of Ontario, said frequent rapid antigen tests not only don't prevent outbreaks, but they also take an "exorbitant amount of time" away from caring for residents. Screening may impose barriers to physicians coming into the home to provide in person care. Other potential harms of testing, as indicated by the Scientific Advisory Table are:

- discomfort to staff required to receive frequent nasopharyngeal swabs
- testing fatigue, staff may put off getting tested when symptomatic until their regularly scheduled screen test
- potential for staff to lower their compliance with other public-health measures if they test negative
- staff shortages can be exacerbated by false positives
- staff leaving the sector, especially if they aren't paid for their time to get tested.

[Screening a waste of time? G&M, Mar 23](#)

OLTCC welcomes your opinion on screening, how to keep residents safe while tackling the harmful effects of prolonged isolation, office@oltcc.ca

OCTOBER 2021						
SUN	MON	TUE	WED	THU	FRI	SAT
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

www.free-printable-calendar.com

OLTCC has now opened the Call for Workshops and the Call for Posters for the 2021 Virtual Conference - October 2021

The Call for Workshops deadline is April 9

The Call for Posters deadline is August 27



Link for Workshops submissions: [Practical Pearls in LTC, Workshop submission](#)

Link for Poster submissions: [Practical Pearls in LTC, Poster submission](#)