OUTBREAK

Enteric Outbreak Control Measures Checklist

Facility:_____

Date Outbreak Declared:_____

Date: _____

Outbreak #:_____

Health Unit Contact:_____

Infectious Diseases Program intake line: 613-345-5685 ext 2222

IMMEDIATE CONTROL MEASURES FOR OUTBREAK

(not yet declared but facility is monitoring situation):

- □ Isolation of ill residents/patients and use appropriate PPE + encourage hand hygiene.
- □ Notify staff of potential outbreak.
- □ Start Line Listing of ill residents/patients and staff and fax to secure fax line 613-345-5777.
- □ Collect stool specimens to send to Public Health Lab.
- □ Notify the Leeds, Grenville and Lanark District Health Unit of potential outbreak by calling 613-345-5685 ext 2222 or after hours 613-345- 5685 and ask for the On Call Manager.

Refer to <u>Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings</u>, <u>2025</u> for detailed outbreak management and control measures.

Stool Specimen Collection:

- □ Check expiry dates on kits.
- □ Collect stool specimens from **THREE** residents/patients most recently ill and who meet the case definition (3 kits, 2 vials per kit).
- □ Note: Requisition must be fully completed and specimens must have a minimum of two patient identifier (full name and health card number or date of birth). Include the following:
 - » Specific test(s) requested: (e.g. enteric bacterial culture, gastroenteritis-stool .viruses); Do not put in "enteric OB testing" as this may result in cancellation or incorrect test assignment
 - » Outbreak number
 - » Date of collection

Control Measures for Residents/Patients:

- □ Restrict cases to their room for **48 hours** after symptoms have resolved.
- □ Encourage hand hygiene.
- □ III residents/patients receive meals in their rooms.
- Do not share equipment between residents/patients if possible OR thoroughly clean and disinfect between use.
- Roommates do not share toilet facilities with ill residents/patients.
- □ Contact Precautions in place:
 - » Gloves and gowns when providing direct care.
 - » If Norovirus is suspected, or if vomiting is a defining symptom, masks/eye protection should be considered when resident/patient care activities are likely to generate splashes or sprays of stool and/ or vomit.

Control Measures for Staff and Volunteers:

- □ Emphasize the importance of hand hygiene.
- □ Provide education to staff on routine practices, additional precautions, environmental cleaning and disinfection.
- □ Cohort staffing if possible.
- □ Report illness to charge person; list symptoms and onset date.
- Exclude ill staff, students and volunteers for 48 hours after symptoms have resolved.
- □ Some infectious agents have longer exclusion periods. Consult with Health Unit.
- □ Food can be contaminated by an infected food handler. Exclude all food services staff with symptoms.
- □ Staff/volunteers who work in more than one facility should notify the facility **NOT** in outbreak and follow their policy regarding exclusion.
- During an outbreak, food samples may need to be submitted for testing. Retain 200g ready-to-eat food samples (refer to Control of Gastroenteritis Outbreaks in LTCH's for further information).

Control Measures for Visitors:

- □ Notification of visitors through signage (at entrances and resident/patient rooms).
- □ Notification of all agencies contracted to work in the facility.
- □ III visitors not permitted in the facility.
- □ Encourage well visitors to reschedule their visit if possible; if necessary, instruct visitor to:
 - » Clean hands before and after visit.
 - » Use appropriate PPE for direct care of ill residents/patients.
 - » Visit only one resident/patient, clean hands and exit facility.

Environmental Cleaning:

- □ Increase frequency of cleaning and disinfection of high touch surfaces.
- □ Increase cleaning and disinfection of ill resident/patient's immediate environment.
- □ Promptly clean and disinfect surfaces contaminated by stool and vomit.
- □ Clean soiled carpets and soft furnishings with hot water and detergent, or steam clean vacuum cleaning is not recommended.
- □ Use of appropriate products for disinfection (i.e. product must have an appropriate virucidal claim for Norovirus, sporicidal claim for *C. difficile* and with a resonable contact time (example: 1 minute)
 - » For list of Hospital Grade Disinfectants, see Best Practices for Environmental Cleaning for Prevention and Control of Infections in All Health Care Settings, check Public Health Ontario website for most up to date version.

Admissions, Re-admission, and Transfers:

- □ Re-admission of cases only if appropriate accommodation and precautions in place.
- □ Consult with Health Unit for all admissions, re-admissions/transfers to another LTCH.
- □ Transfers to hospital; notify Hospital Infection Control Practitioner.

Medical Appointments:

□ Re-schedule non-urgent appointments.

Communal Activities:

- □ Communal meetings and activities on the affected unit/floor should be rescheduled.
- □ Where the outbreak is on two or more units/floors the Outbreak Management Team should consider restricting meetings and activities in the entire facility.

Reference:

Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings, 2024



For more information, please call 1-800-660-5853 or visit our website at www.healthunit.org