Gastrointestinal Illness Outbreak

Manage an outbreak in NDSL sites

All staff share the responsibility for keeping residents safe. Complete the following actions when a gastrointestinal illness outbreak is confirmed. This checklist provides general measures only – refer to the corresponding section in the <u>Guide for Outbreak Prevention & Control in Non-Designated Supportive Living Sites</u> for detailed recommendations. When applicable, follow site-specific policies.

Infection Prevention Control measures	Guide Section
Recommend confirmed and symptomatic residents remain in their room and away from others.	4.1
 Implement IPC recommendations in Figure 2: Place additional precaution signage outside room of confirmed and symptomatic residents. Wear recommended PPE. Conduct an <u>Infection Prevention and Control Risk Assessment (IPCRA)</u> prior to every resident interaction. Perform hand hygiene in accordance with <u>AHS Hand Hygiene Policy</u>. 	4.1
Use a mask and eye protection if there is a risk of sprays of bodily fluids or when caring for residents who are actively vomiting.	9.1
Administrative measures	Guide Section
☐ Notify appropriate HCW/staff and departments within the facility/unit.	5.2
☐ Place outbreak signage at the entrance of the facility/unit.	5.2
$\ \square$ Report daily to the AHS Public Health Outbreak Team as per zone process.	5.2
Assign HCW/staff to care for asymptomatic residents before symptomatic residents.	4.2
☐ Cohort HCW/staff to work only in affected or only in unaffected areas.	4.2
☐ Inform residents, families/guardians/agents of the outbreak.	5.2

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Resident restrictions	Guide Section
☐ Isolate symptomatic residents with meal service in their room for the duration of the acute illness, and until 48 hours after the last episode of vomiting or diarrhea.	9.3
☐ Alert transport staff and the receiving site to use additional precautions if a symptomatic resident is attending another site for an appointment.	9.3
Restrictions on affected facility/units	Guide Section
☐ Implement restrictions for the facility/unit as directed by the AHS Public Health Outbreak Team.	9.4 / 9.5
Group/social activities and other events	Guide Section
☐ Postpone all group activities.	9.7
☐ Consult with the AHS Public Health Outbreak Team regarding restrictions to activities if group activities are an essential part of treatment.	9.7
Nourishment areas / sharing of food	Guide Section
☐ Deliver meals to confirmed or symptomatic residents in their rooms.	9.3
☐ Continue group dining for asymptomatic residents with shared food containers/ items (such as shared pitchers of water, shared coffee cream dispensers, and salt and pepper shakers) removed.	5.8
☐ Close the kitchen/nourishment areas accessed by residents/visitors.	5.8
Visitors and Designated Family / Support Persons (DFSPs)	Guide Section
☐ Encourage visitors to postpone visiting.	5.10
☐ Recommend visitors/DFSPs limit visit to one resident only and exit the facility immediately after the visit.	5.10
☐ Recommend symptomatic visitors/DFSPs delay visit.	4.10
☐ Advise visitors/DFSPs of the importance of hand hygiene.	4.10
☐ Advise visitors/DFSPs of the potential risk of exposure to a symptomatic resident and demonstrate the use of additional PPE.	4.10
HCW/staff outbreak control measures	Guide Section
☐ Advise symptomatic HCW/staff to report illness to manager/designate and to not attend work.	4.11

☐ Ask HCW/staff to report to manager/designate of any GI symptoms and to not attend work until 48 hours after last episode of vomiting and/or diarrhea.	9.2 / 9.11
☐ Advise HCW/staff who develop symptoms at work to perform hand hygiene, inform manager/designate and leave the workplace as soon as possible.	4.11
Specimen collection	Guide Section
 Follow the AHS Public Health Outbreak Team specimen collection recommendations for symptomatic residents. Specimen collection recommendations are based on site capacity and availability for specimen collection. 	4.12
\square Ensure proper specimen collection, handling, and labelling (including EI#).	4.12
Enhanced environmental cleaning and disinfection	Guide Section
☐ Perform cleaning using PPE and recommended cleaning products.	4.13
☐ Follow recommendation in <u>Principles for Environmental Cleaning and Disinfection</u> .	4.13
 Enhance cleaning and disinfection frequency. Clean and disinfect low touch surfaces at least once per day and high touch areas at least twice per day. Immediately clean and disinfect visibly dirty surfaces. 	4.13
☐ Use a 'wipe twice' procedure (a 2-step process) to clean and then disinfect surfaces.	9.13
☐ Conduct a post isolation/additional precautions cleaning and disinfection when the outbreak is closed.	10

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