



CHECKLIST FOR THE CONTROL OF GASTROENTERITIS OUTBREAKS

- Contact Algoma Public Health (APH) when there is an increase in ill residents at the facility. Discuss if the outbreak definition is met and receive outbreak number from your assigned public health inspector (PHI).
- Notify appropriate personnel about the outbreak (ex. the hospital when residents are being transferred, all staff at the facility, Ministry of Long-Term Care, Retirement Home Regulatory Authority, family members etc.).
- Develop a preliminary case definition in consultation with APH.
- Begin a separate line list for ill residents and ill staff. Complete and submit the line list every day via email to your aligned PHI. If you are unable to reach your PHI, it can be emailed to ehclerical@algotmapublichealth.com or faxed to 705-541-7346.
- Discuss stool specimen collection, labeling and testing procedures with APH. Ensure the outbreak number is put on all samples and [requisition forms](#). For information on specimen collection please review the [Public Health Ontario website](#).
- Schedule an outbreak management team meeting. Refer to the [Control of Gastroenteritis Infection Outbreaks in long-Term Care Homes \(MOHLTC, 2018\)](#) for specific details about what this meeting should entail.
- Encourage ill residents to stay in their rooms (ex. provide tray service).
- Place appropriate precaution signs on doors of ill resident's rooms. This signage is available on the APH website.
- Post signs at entrances of the facility and/or the affected unit/area and share messaging as appropriate discouraging unnecessary visits during the outbreak.
- Provide appropriate personal protective equipment (PPE) to staff and visitors (ex. PPE carts at entrance to ill resident's rooms).

Blind River
P.O. Box 194
9B Lawton Street
Blind River, ON P0R 1B0
Tel: 705-356-2551
TF: 1 (888) 356-2551
Fax: 705-356-2494

Elliot Lake
ELNOS Building
302-31 Nova Scotia Walk
Elliot Lake, ON P5A 1Y9
Tel: 705-848-2314
TF: 1 (877) 748-2314
Fax: 705-848-1911

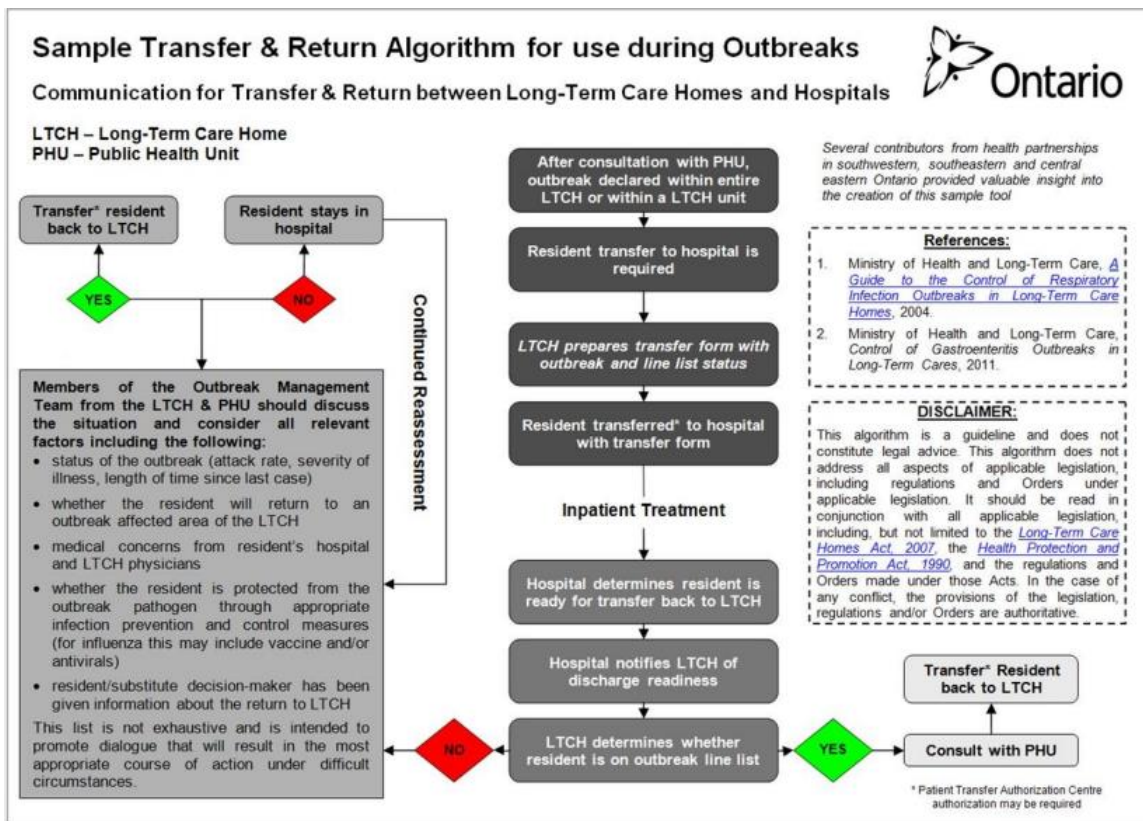
Sault Ste. Marie
294 Willow Avenue
Sault Ste. Marie, ON P6B 0A9
Tel: 705-942-4646
TF: 1 (866) 892-0172
Fax: 705-759-1534

Wawa
18 Ganley Street
Wawa, ON P0S 1K0
Tel: 705-856-7208
TF: 1 (888) 211-8074
Fax: 705-856-1752

- ❑ Require anyone providing direct care to ill residents to wear the necessary PPE (gloves and gown for contact precautions plus mask and eye protection for droplet-contact precautions). Post signage depicting proper donning and doffing process at each isolation room.
- ❑ Ensure staff adhere to routine practices and additional precautions where required.
- ❑ Complete hand hygiene and environmental cleaning audits.
- ❑ Cohort staff/volunteers by assigning some staff to look after ill residents and others to look after well residents only or assign staff to dedicated units/floors.
- ❑ Enhance environmental cleaning/disinfection:
 - Ensure the disinfectant chosen is appropriate for the suspected outbreak agent (ex. has a Norovirus kill claim). Ensure it is used according to manufacturer's instructions (ex. dilution and contact time).
 - Increase routine cleaning and disinfection of all high-touch surfaces (ex. door handles, handrails, light switches etc.).
 - Increase cleaning and disinfection of all surfaces in the ill resident's immediate environment.
 - If possible, dedicate reusable equipment to ill residents.
 - Ensure shared resident equipment is cleaned and disinfected after each use.
 - Discard disposable equipment immediately after use (before leaving the room).
 - Promptly clean and disinfect surfaces contaminated by stool and vomit.
- ❑ Staff/volunteers with symptoms should not enter the facility and should remain off work for at least 48 hours after symptoms have resolved. If a causative agent is known, disease-specific exclusions may apply.
- ❑ Recovering staff/volunteers returning to work should care only for ill residents.
- ❑ Enhance visitor monitoring:
 - Ensure visitors are aware of their risk of infection.
 - Educate visitors on performing hand hygiene appropriately.
 - Recommend that while visiting, they avoid communal areas and visit only one resident at a time and wear PPE as needed.
 - Visitors must not enter the facility if they have gastrointestinal symptoms, respiratory symptoms, or another communicable disease.
- ❑ Reschedule meetings and discontinue group outings on the affected unit/floor, or the entire home if the outbreak spreads to multiple floors/units. Do not permit visits by

outside groups (ex. entertainers). Conduct on-site programs (ex. physiotherapy, foot care) in resident rooms when possible.

- Restrict resident movement to and from the facility. Admissions are not recommended but can be discussed on a case-by-case basis with APH. Use the following algorithm for transfers or residents between home and hospital during an outbreak:



- Once numbers of ill residents start to decrease, declaring the outbreak over can be discussed between the facility and APH. The outbreak can only be declared over by APH. Generally gastrointestinal outbreaks are declared over after five days of no new cases dependent on causative agent of the outbreak.