

ENTERIC OUTBREAK MANAGEMENT CHECKLIST

For Congregate Living Settings

Refer to this checklist to manage outbreaks as per the Ministry of Health's protocols and the Windsor-Essex County Health Unit (WECHU) recommendations. Retain for your records.

Setting Name:		Outbreak #:	Date:		
2268					
Outbreak Declaration: ☐ Suspect ☐ Confirmed					
Affected Area: Entire living setting ☐ OR Name of unit(s)/floors(s):					
Case definition: determined by the WECHU (Click here or visit wechu.org)					
•		omiting	□ Diarrhea		
☐ Chills		amps	□ Nausea		
☐ Malaise/fatigue ☐ He		eadache	□ Other:		
CONTACT					
Identify the designated WECHU nurse for your outbreak:					
Nurse Nam	ie:	Phone #: 5	19-258-2146 ext		
	·	•	r the Infectious Disease Prevention		
(IDP) department at 519-258-2146 Ext 1420. The WECHU business hours are from 8:30am - 4:30pm Monday to Friday. Contact the After-Hours hotline at 519-973-4510 to speak with on-call personnel					
	HU business hours.	110tilile at 313-373-4310 to	speak with on-can personner		
IMMEDIATE ACTIONS					
If someone residing	Immediately self-isolate t	he individual.			
in the setting is	Implement additional precautions (i.e., contact/droplet), if possible.				
symptomatic:	Provided the necessary medical assessments.				
*More information available below	Test to determine specific illness.				
		TESTING			
	Ensure there is a plan in place to test individuals residing in the setting for pathogens in accordance with				
internal policies and procedures. Refer to the PHO's <u>Kit and Test Ordering Instructions</u> webpage for mor information on enteric illness testing.					
Consult with your WECHU outbreak nurse and a primary care provider for more information on specific					
test types and lab requisitions.					
LINE LISTS					
	Create a line list of ill individuals who belong to the outbreak (click here to download the line list or visit				
wechu.org).					
•	*Only include those on the line list who meet case definition (see above).				
Update and fax line lists <u>daily</u> to WECHU <u>by 10:00 am</u> to fax (519)-977-5097.					
COMMUNICATION					
☐ Post outbreak si	gnage at all entrances of bu	uilding.			
	Notify all staff, students, volunteers, families, and visitors of the outbreak. The WECHU will send your setting an Advisory Notice to reflect the current outbreak.				
	An Outbreak Notification will be <u>posted on the WECHU website</u> alerting others of a current outbreak in a				
congregate living not be disclosed	ng setting, however identifying details such as the name of the setting and the address will d.				



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	Convene an Outbreak Management Team (OMT) and meet daily to review the status of the outbreak and communicate updates to the WECHU.					
	PUBLIC HEALTH INSPECTOR					
	PHI Name:	he designated Public Health Inspector (PHI) from WECHU for your setting, if applicable: Name: Phone #: 519-258-2146 ext ic Health Inspector (PHI) may reach out to conduct a site visit.				
	IPAC OUTBREAK MEASURES					
	Refer to WECHU IPAC Hub website and the Ministry of Health documents for additional resources related to outbreak control measures: Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings — October 2024 (or as current) Appendix 1: Ontario Public Health Standards, Gastroenteritis Outbreaks in Institutions and Public Hospitals — May 2022 or as current					
	Outbreak Education	Provide education to those in the setting about outbreak control measures, such as proper use of masks, cleaning hands, and reporting new symptoms to staff.				
	Case Control Measures	Isolate those who are symptomatic and cohort cases (i.e., limit movement of individuals between outbreak areas and non-outbreak areas) were possible. Refer to Section 7.3 of the <i>Infection Prevention and Control (IPAC) and Outbreak Management in Congregate Living Settings</i> document for more information on outbreak control measures by outbreak type.				
	Additional Precautions	All positive cases should be placed on contact precautions in addition to routine practices. Droplet precautions may be required based on PHO's <u>Risk Assessment</u> <u>Related to Routine Practices and Additional Precautions</u> . Refer to Section 2.0 of the <i>Infection Prevention and Control (IPAC) and Outbreak Management in Congregate Living Settings</i> document or <u>PHO's Routine and Additional Precautions</u> webpage for more information. Post additional precautions signage on the door of case rooms, when possible.				
	Staff/ Students/ Volunteers Control Measures	Minimize movement of staff/students/volunteers between outbreak and non-outbreak areas as much as possible (i.e., cohorting staff).				
		Exclude ill staff/students/volunteers for at least 48 hours after their last symptom or longer if indicated by internal policies. NOTE: If a specific illness is known, disease-specific exclusions apply.				
		If dietary staff become ill while working, discard all ready-to-eat food they prepared while on shift.				
	Dietary	Ensure there is a dining policy in place to separate exposed and unexposed individuals.				
		Provide in-room tray service meals within the outbreak area, if available. Ensure the staff who deliver meals are practicing proper hand hygiene in between rooms.				
		DO NOT dispose of food samples until speaking with your PHI or WECHU nurse.				
_	Visitor Control Measures	Restrict visitors to essential caregivers on affected units.				
		Ensure those who do visit:				



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		 Visit individuals in their rooms and avoid communal areas 		
		 Visit only one individual; do not mingle with others 		
		Use appropriate PPE especially if providing direct care		
		Ill visitors should be advised not to visit while they are ill and wait until symptoms have ended.		
	Increased Environmental Cleaning	For more information, refer Section 5.1 of the <i>Infection Prevention and Control (IPAC)</i> and Outbreak Management in Congregate Living Settings document or to PHO's <u>Best Practices for Environmental Cleaning – April 2018</u> or as current.		
	Hand Hygiene	Ensure proper handwashing is maintained by everyone in the setting by providing ample supply of soap and 70-90% alcohol-based hand sanitizers (e.g., where sinks are not readily available).		
		Ensure proper PPE, for example, masks (N95 where applicable), gloves, gowns and eye protection, are available and accessible throughout the setting.		
	PPE	 Provide a container for soiled PPE/linen: If the container is located <i>inside</i> the individual's room, the container must be a minimum of 6ft or more away from the individual's bed. If not possible, place the container <i>outside</i> the room a minimum of 6ft away from any clean linen. 		
		*Ensure alcohol-based hand sanitizer is available by the container. Refer to Section 2.0 and Section 7.3 of the <i>Infection Prevention and Control (IPAC) and Outbreak Management in Congregate Living Settings</i> document for more information on the required PPE for a respiratory outbreak.		
	Audit	Increase audits of staff practices (e.g. hand hygiene, cleaning, use of PPE, etc.).		
	Activities	Reschedule communal activities in the affected area. *Visits by outside groups (e.g., entertainers, community groups, etc.) are not permitted during an outbreak.		
	Admissions/ Readmissions & Transfers	Limit, if possible, when a new outbreak has been declared. For specific guidance on admissions/readmission, refer to Section 8.5 and 8.6 (page 73-74) of the Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings – October 2024 or as current.		
	Medical/Other Appointments	If possible, reschedule non-urgent appointments until the outbreak is over.		
_	nature and ignation:	Date:		