


## Strathmere Lodge

	Manual	Infection Control
	Policy Number	ICO001
	Original Date	February 28, 2018
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	Issued By	IPAC Lead , Director of Care
	Approved By	Administrator

### OUTBREAK MANAGEMENT – ENTERIC ILLNESS

#### POLICY:

Vigilance will be practised in surveillance for gastrointestinal/enteric illness. Facility will follow guidelines and direction from the Ministry of Health and Public Health regarding any enteric outbreaks.

#### PURPOSE:

To do the least harm to the residents. To protect the health of residents and staff.

#### PROCEDURE:

1. For any resident with enteric symptom and/or fever suggestive of an infectious disease, staff are directed to use contact precautions, which includes gown and gloves.

Case Definition	<ul style="list-style-type: none"> <li>• 2 or more episodes of diarrhea* or watery stool within a 24-hour period; OR</li> <li>• 2 or more episodes of vomiting within a 24-hour period; OR</li> <li>• 1 episode of diarrhea* or watery stool and 1 episode of vomiting within a 24-hour period; OR</li> <li>• Laboratory confirmation of a known gastrointestinal pathogen and at least one symptom compatible with gastrointestinal infection (e.g., nausea, vomiting, diarrhea, or abdominal pain or tenderness)</li> </ul>
Probable Case Definition	<ul style="list-style-type: none"> <li>• 1 episode of either vomiting or diarrhea* in the absence of another cause - e.g. no laxative, other bowel disorder*</li> </ul>

2. If a resident has symptoms, they are to be isolated immediately, and contact precautions initiated. Residents sharing basic accommodation rooms will isolate and test as per MLHU Enteric Outbreak Control Measures.
3. Staff are required to wear appropriate PPE when providing care for residents in isolation with suspected or confirmed enteric illness and are to remove their personal protective equipment and wash their hands before caring for other residents.
4. Ongoing surveillance to identify new cases will be done at least daily, if not twice per day following MOH/Public Health guidelines.
5. A resident line listing will be initiated and will be updated by the Infection Prevention and Control (IPAC) Lead or designate with new information and communicated to the health unit contact person on a daily basis. The updated information may require changes to the outbreak management routines in place. Some control measures may be lifted, some additional measures may be put in place.
6. A staff line listing form will also be initiated including all appropriate information. The line listing will be updated by the IPAC Lead or designate with new information and communicated to the health unit contact person on a daily basis. Facility will follow guidelines as per Ministry of Health/Public Health in regards to screening of staff.
7. If two or more residents meeting the case definition with a common epidemiological link with initial onset within a 48 hour period, an outbreak will be declared.
8. The IPAC Lead will notify Ministry of Long Term Care via Critical Incident Reporting system of outbreak and will amend CI once outbreak is declared over.

9. General outbreak management routines will be implemented which may consist of the following:
- posting notification signs at all entrances to the facility informing others of the outbreak situation within the facility. During a pandemic, all visitor access will be restricted to essential visitors only and those whose loved ones are deemed end of life.
  - restricting ill residents to their rooms
  - restricting resident interaction between affected and unaffected units
  - reinforcing the need for good hand washing/hand disinfection before and after providing care, sanitizing when entering/exiting resident rooms as well.
  - enhanced environmental cleaning of objects that are in high traffic areas including all washrooms, handrails, tables, doorknobs etc. The chemical concentration of the sanitizers must be appropriate.
  - Additional measures as deemed appropriate by the Public Health and Ministry of Health.
  - Should a staff member contract the enteric illness that facility is currently in outbreak with (must experience physiological changes), a Section 5 for the Ministry of Labour must be completed and faxed to them within 48 hours [see Section 5 on share file], WSIB Form 7 will also be completed and submitted.
  - Should an outbreak be declared, a representative from Unifor & ONA will be notified of outbreak
  - JH&SC will be notified of outbreak as per OH&S Act. Please refer to OH&S Act for details of what is to be included in report to JH&SC and trade unions.
  - If an employee works at 2 facilities and there is a respiratory outbreak, the employee may continue to work at both facilities provided they shower and change uniforms before entering each home.
  - If an employee becomes ill with enteric/gastrointestinal symptoms, they must remain off work until they have been symptom free for 48 hours with no fever.
  - Visitors will be screened and expected to follow current interventions/procedures in place to deal with current outbreak.
  - Visitors will be permitted to continue with visits on unaffected home areas. General visitors should postpone all non-essential visits to residents within the outbreak area for the duration of the outbreak.
10. The IPAC Lead will convene the Outbreak Management Team (OMT) at the onset of an outbreak, regularly throughout an outbreak and after an outbreak to debrief. The OMT will consist of the IPAC Lead, Director of Resident Care, The Assistance Director of Resident Care, Administrator, Medical Director and Management.

**The outbreak will be declared over as per direction from Public Health. Strathmere Lodge IPAC Lead will communicate this decision to the unit charge nurse and management.**

**EVALUATION:**

Policy and procedure will be reviewed annually by IPAC Lead and updated with new information when available from the Public Health and the Ministry of Health. The IPAC Lead will consult with Infection Control and Professional Advisory Committee.

This policy also appears in the Emergency Plans Manual.