



OUTBREAK RECOMMENDATIONS FOR LONG-TERM CARE AND RETIREMENT HOMES

The following is a summary of
Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings,
Ministry of Health, Effective: October 2024

Outbreak Definitions

Suspect Respiratory Infection Outbreak:

- Two resident cases of acute respiratory infections (ARI) occurring within 48 hours with any common epidemiological link (e.g., unit, floor)

Confirmed Respiratory Infection Outbreak:

- Two resident cases of test confirmed acute respiratory infections (ARI) within 48 hours with any common epidemiological link (e.g., unit, floor), **OR**
- Three resident cases of acute respiratory infections (laboratory confirmation not necessary) occurring within 48 hours with any common epidemiological link (e.g., unit, floor)

Confirmed Gastroenteritis Outbreak:

- **Two or more** cases meeting the case definition with a common epidemiological link (e.g., specific unit or floor, same caregiver) with initial onset within a 48-hour period

To be defined as a case of infectious gastroenteritis, **at least one** of the following must be met:

- **Two or more** episodes of diarrhea (i.e. loose/watery bowel movements) within a 24-hour period; **OR**
- **Two or more** episodes of vomiting within a 24-hour period; **OR**
- **One or more** episodes of diarrhea AND one or more episodes of vomiting within a 24-hour period

Note: Symptoms must not be attributed to another cause (e.g. medication side effects, laxatives, diet or prior medical condition)

Reporting to Public Health

Contact Grey Bruce Health Unit when any outbreak is suspected or identified

Grey Bruce Health Unit 519-376-9420 Ext: 6 Fax: 519-376-4152 infectiousdiseases@publichealthgreybruce.on.ca

- ☐ Implement infection prevention and control measures immediately
- ☐ Fax Line listing of Residents and Staff to 519-376-4152
- ☐ Obtain Outbreak Number from Public Health

Symptomatic Resident Restrictions

- ☐ Isolate symptomatic residents in their room:
 - **Respiratory**: until 5 days after the onset of symptoms or when symptoms resolve (whichever is shortest)
 - **COVID-19**: until 10 days after the onset of symptoms and until symptoms have been improving for 24 hours (or 48 hours if gastrointestinal symptoms) and no fever present.
 - Resident may leave their room if following criteria met:
 - It has been at least 5 days from onset of symptoms **AND**
 - They are asymptomatic or their symptoms are improving for 24 hours, and no fever present **AND**
 - They wear a mask independently and consistently at all times outside their room (not join in activities where mask cannot be worn such as group dining)
 - **Gastroenteritis**: until 48 hours after symptoms have resolved
- ☐ Implement Additional Precautions
- ☐ Place signage outside affected resident rooms, on the door, indicating Additional Precautions required
- ☐ Receive treatments (physiotherapy, occupation therapy) in their rooms
- ☐ May leave their room in ways that minimize spread of infection (one-to-one support, wear PPE, use ABHR, physical distancing, avoid touching surfaces)
- ☐ Symptomatic residents are not recommended to participate in in-person group or social activities

IPAC Measures

- ☐ Active screening of HCWs/staff, visitors, essential caregivers and residents
- ☐ Reinforce Routine Practices (hand hygiene, PPE, point of care risk assessments)

Administrative Measures

- ☐ Inform HCWs, staff, residents, families and essential caregivers of outbreak
- ☐ Notify all relevant partners of outbreak

Confirmed Outbreaks:

- ☐ Initiate OMT meetings
- ☐ Signage posted on all entrances to the home advising of outbreak

Group/Social Activities and Events

- ☐ Discontinue group activities in affected units
- ☐ OMT to discuss group activities for asymptomatic residents (and who are not roommates of symptomatic residents)

Nourishment Areas

- ☐ Tray service for symptomatic and those on Additional Precautions

Confirmed Outbreaks:

- ☐ Communal dining conducted to ensure outbreak unit is cohorted from unexposed units
- ☐ Close buffet lines and have food plated by staff
- ☐ Encourage staggered eating times
- ☐ Pre-set tables with utensils
- ☐ Single service/disposable utensils (depending on severity of outbreak)
- ☐ Limit/close communal food or snacking areas
- ☐ Individually wrapping snacks and use of single packet condiments

Visitors and Essential Caregivers

- ☐ General visitors should postpone non-essential visit
- ☐ Essential caregivers are not to be restricted from visiting (but limits may be required)
- ☐ Essential caregivers/visitors are required to comply with masking/PPE requirements during outbreaks or if resident is on Additional Precautions

HCW/Staff Control Measures

- ☐ Symptomatic staff to self-isolate at home, not to return to work until:
 - **Respiratory:** symptoms have been improving for 24 hours and no fever present.
For 10 days after symptom onset staff should wear a mask and, where possible, avoid caring for residents at highest risk of severe respiratory illness
 - **COVID-19:** symptoms have been improving for 24 hours (48 if gastro symptoms) and no fever present.
For 10 days after symptom onset staff should wear a mask and, where possible, avoid caring for residents at highest risk of severe respiratory illness
 - **Gastroenteritis:** until 48 hours after symptoms have resolved (disease-specific exclusions may apply)
- ☐ Staff to wear PPE as determined by risk assessment
- ☐ Cohort HCWs/staff to care for asymptomatic residents before symptomatic residents when possible
- ☐ Consider minimizing movement of HCWs/staff between units/floors

Specimen Collection

- ☐ Ensure correct collection and labelling of specimens and lab requisition forms
 - Label specimen at minimum with resident's name, date of birth and date of collection
 - Complete all fields on lab requisition, ensure information on requisition and specimen label are the same
 - Ensure outbreak number is on lab requisition
- ☐ <https://www.publichealthontario.ca/en/Laboratory-Services/Test-Information-Index>

Enhanced Environmental Cleaning and Disinfection

- ☐ Clean and disinfect:
 - Twice daily (minimum): High touch surfaces, HCW/staff equipment, treatment areas, dining areas, lounge areas
 - Once daily: low touch surfaces (e.g. shelving, windowsills)
 - Immediately for any visibly dirty surfaces
- ☐ Dedicate non-critical equipment (e.g. stethoscope, blood pressure cuffs) or clean and disinfect between residents
- ☐ Adhere to manufacturer's instructions for use (preparation, storage and contact time) of cleaners and disinfectants

Respiratory

- ☐ Universal masking in the outbreak area
- ☐ Roommate Close Contacts:
 - Ideally placed in a separate room to isolate. Otherwise use physical barriers (e.g., curtains or a cleanable barrier, commode if shared bathroom) to create separation between case and roommate
 - Roommate close contacts who remain in the same room should be placed on Additional Precautions for 5 days from the case's symptom onset. Following this period, the roommate close contact should wear a well-fitting mask, if tolerated, when receiving care and when outside their room until day 10 from first day of symptoms of the case.
 - Monitor once daily for symptoms
- ☐ Other Close Contacts:
 - Monitor once daily for symptoms
 - Strongly encouraged to wear well-fitting mask, if tolerated, and physically distance from others for 7 days from last exposure
 - Encouraged to wear well-fitted mask, if tolerated, when receiving care
- ☐ Specimen collection: test symptomatic residents for COVID-19 and other respiratory pathogens as soon as possible
- ☐ Use measures such as physical distancing, masking, hand hygiene and enhanced surveillance for low-risk group activities
- ☐ Physical distancing in communal areas/dining areas where possible

COVID-19

- ☐ Universal masking in the outbreak area
- ☐ Positive resident cases: determine if antivirals are within goals of care and eligibility
- ☐ PPE when providing direct care or interacting with suspect or confirmed case of COVID-19: eye protection, gown, gloves, well-fitted medical mask or N-95 respirator
- ☐ Roommate Close Contacts:
 - Ideally placed in a separate room to isolate. Otherwise use physical barriers (e.g., curtains or a cleanable barrier, commode if shared bathroom) to create separation between case and roommate

- Roommate close contacts who remain in the same room should be placed on Additional Precautions for 5 days from the case's symptom onset. Following this period, the roommate close contact should wear a well-fitting mask, if tolerated, when receiving care and when outside their room until day 10 from first day of symptoms of the case.
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 - Strongly encouraged to wear well-fitting mask, if tolerated, and physically distance from others for 7 days from last exposure
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- ☐ Specimen collection: test symptomatic residents for COVID-19 and other respiratory pathogens as soon as possible
- ☐ Enhanced symptom assessment of all residents in outbreak area (minimum once daily)
- ☐ Group activities for cohorts may resume at the discretion of the health unit/OMT
- ☐ Weekly IPAC audits (hand hygiene, PPE usage and cleaning and disinfection) conducted and reviewed by OMT

Influenza

- ☐ Universal masking in the outbreak area
- ☐ Antiviral prophylaxis should be offered and initiated to asymptomatic residents as soon as influenza outbreak is declared and continued until outbreak is declared over
- ☐ Antiviral treatment to be considered if symptoms develop in resident
- ☐ Unimmunized staff (or those vaccinated less than 2 weeks) may resume work as soon as taking antiviral prophylaxis
- ☐ Asymptomatic staff protected by immunization or antivirals have no restrictions to work at other homes
- ☐ Specimen collection: test symptomatic residents for COVID-19 and other respiratory pathogens as soon as possible

Gastrointestinal

- ☐ New admissions generally not advised
- ☐ Institution to institution transfers not recommended but to be evaluated by OMT and homes on a case-by-case basis
- ☐ Follow proper hand hygiene before after feeding assistance
- ☐ Residents have opportunity to perform hand hygiene before and after meals
- ☐ Use hard surface disinfectant with proper efficacy and reasonable contact time
- ☐ If the laundry machine has been used to clean soiled (vomit, diarrhea) laundry, a bleach cycle of the laundry machine is recommended to be run (without laundry) before washing the next load
- ☐ Specimen collection: appropriate samples may be collected from symptomatic residents

Duration of Outbreak

Criteria for declaring an outbreak over is determined in consultation with OMT and Public Health
It is Public Health's role to declare an outbreak over

Respiratory, Influenza and COVID-19

- ☐ No new cases have occurred in 8 days from the onset of symptoms of the last resident case or 3 days from the last day of work of an ill HCW/staff, whichever is longer

Gastrointestinal

- ☐ 48 hours from symptom resolution in last case or
- ☐ No new cases after one infectious period plus one incubation period (e.g. Norovirus can be over 5 days after last case onset)

For more information, please visit us at:

<https://www.publichealthgreybruce.on.ca/Your-Health/Infectious-Diseases/Professional-Resources/Outbreak-Management>

Ontario. Ministry of Health. Recommendations for outbreak prevention and control in institutions and congregate living settings. Toronto, ON: King's Printer for Ontario; 2024.

<https://www.ontario.ca/files/2024-10/moh-recommendations-for-outbreak-prevention-and-control-in-institutions-and-clis-en-2024-10-23.pdf>