Phone: (925) 313-6740





## Acute Gastroenteritis Outbreak Management Checklist for Healthcare and Congregate Living Facilities

This document details local reporting requirements and guidance summaries from the Centers for Disease Control and Prevention (CDC), the Department of Social Services (DSS), and the California Department of Public Health (CDPH) in the event of a suspected gastrointestinal illness outbreak.

Please review and quickly implement this checklist of outbreak control measures. Rapid implementation will help prevent additional illness among residents and staff members and reduce overall facility disruptions.

The following situations are reportable to Contra Costa Public Health and should trigger a facility response:

- 1. One resident with laboratory-confirmed gastrointestinal illness, OR
- 2. A cluster of gastrointestinal illness (2 or more residents and/or staff members) within 48-hours (2 days)

<u>Acute Gastrointestinal Illness</u> = 1 or more symptoms of nausea, vomiting, non-bloody diarrhea, or abdominal discomfort

Please review the material and provide real-time training with all staff involved in carrying out the job duties which have been grouped by focus area in the checklist below.

Focus Area	Outbreak Intervention	Follow -Up ☑	Notes
1. Communication			
a.	Notify the facility Administration and/or Medical Director		
	Notify the facility Infection Control		
c.	Report an Outbreak of Acute Gastrointestinal (GI) illness to Contra Costa Public Health at 925-313-6740. <u>OR</u> Report an Outbreak (non-COVID) to Public Health		
d.	Report Outbreak to your Licensing and Certification agency (CDPH or CDSS)  (https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/DistrictOffices.aspx)  (https://www.cdss.ca.gov/Portals/9/CCLD/ASC.pdf)		
e.	Do not transfer patients out of your facility unless a <u>higher level of care</u> is needed. If a transfer is needed, notify the transporting agency and receiving facility of your outbreak.		
f.	No new admissions and transfers to your facility until there are no new cases in residents and employees for at least 4 days (96 hours). *Readmissions are always allowed		
g.	Post signs at all entrances for visitors and staff stating "Gastroenteritis Outbreak "and recommend washing hands with soap and water when they arrive and leave. Sample signage: Contact Plus Precautions		
h.	Designate a restroom where visitors can wash their hands.		
i.	It is recommended that ill residents have "Well checks" 2-3 times per day or more often per facility protocol. If a resident's condition worsens, alert the family/conservator.		
2. Infection Control			
	Confine symptomatic residents to their isolation room until <b>2 days</b> ( <b>48 hours</b> ) at minimum after symptoms cease.		
b.	Place symptomatic residents in a single occupancy room with 'Contact Plus Precautions'.  Personal Protective Equipment (PPE) should be worn by all employees when entering isolation rooms:  1) Gown 2) Gloves 3) Remove gown, and gloves then perform hand hygiene before leaving patient room.  Sample Isolation Sign: Contact Plus Precautions		
C.	Perform hand hygiene (washing) using soap and water immediately <b>before</b> putting on gloves and <b>after</b> removing the gown and gloves.  *Hand sanitizer is NOT effective against gastroenteritis		
	When possible, place dedicated equipment in isolation rooms. If not possible, clean and disinfect equipment before use with another resident.  ***Equipment includes, but is not limited to, the following:  BP Cuffs  Commodes  Stethoscopes  Wheelchairs  Thermometers  Therapy Equipment ***  Mailboxes		
3. Facility Control Measures			

	Focus Area	Outbreak Intervention	Follow -Up ☑	Notes
	a.	Discontinue community dining until <b>4 days (96 hours)</b> after the last identified case; serve meals to resident's rooms. Avoid serving meals to visitors. All water stations/snack bowls/self-serve coffee should be served by staff only (Hand hygiene before and after use place food-grade disinfecting wipes near dispensers).		
	b.	Cancel or postpone <u>all</u> group activities (including water activities, such as swimming in a pool or spa) until at least four <b>days</b> (96 hours) after the last identified case.		
	c.	Screen visitors, volunteers, and employees for GI symptoms. If symptomatic, instruct them to stay home until symptom-free for at least <b>2 days (48 hours).</b>		
	d.	Remove <u>all</u> symptomatic employees from work.		
	e.	Assist residents in hand washing with soap and water before meals and after toileting.		
	f.	moved from the affected unit or placed with a new roommate.		
	g.	Discontinue the "floating" of all employees from the affected unit to an unaffected unit.		
4.	Daily Reporting			
	a.	Complete line list for all <b>symptomatic residents</b> and employees		
	b.	Update and email the line lists daily.		
5.	Management of Kitchen & Food Handlers	NOTE: Complete the following section if any kitchen/serving employee worked while symptomatic.		
	a.	Remove <u>all</u> symptomatic kitchen/serving employees from work and instruct them to stay home until symptom-free for at least <b>2 days</b> (48 hours).  □ ACD staff- Collaborate with Environmental Health as needed.		
	b.	Dispose of <u>all</u> ready-to-eat food that may have been contaminated or handled by a symptomatic kitchen employee.		
	C.	Temporarily close the kitchen when a symptomatic food handler is identified. Sanitize with a 1:5 bleach solution all food preparation areas and kitchen surfaces. *Bleach solution shelf life is 24 hours		
6.	Environmental Cleaning & Laundry	NOTE: Norovirus can survive in a dried state on surfaces at room temperature for up to 21-28 days  • See Environmental Cleaning Resource: <a href="https://waterandhealth.org/resources/posters/#norovirus">https://waterandhealth.org/resources/posters/#norovirus</a>		
	a.	Clean and disinfect vomit and fecal spillages promptly. Employees		
	b.	must wear proper PPE (e.g., isolation gown, gloves, and mask).  Increase the cleaning frequency of hard, non-porous, high-touch surfaces to three times per day with a commercial disinfectant or 1:5 bleach solution.  *** High-touch surfaces include, but are not limited to: doorknobs, bed rails, call lights, bedside tables, commodes, toilets, phones, keyboards/mouse, hallway rails, elevator buttons, and faucets***		

	Focus Area		Outbreak Intervention	Follow -Up	Notes
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		C.	Use 1:5 bleach solution or EPA-registered disinfectants effective		
			against Norovirus (EPA List G) *Bleach solution shelf life is 24		
			hours. (https://www.epa.gov/pesticide-registration/list-g-epas-		
			registered-antimicrobial-products-effective-against-norovirus)		
		d.	Soiled carpets and soft furnishings: clean with hot water and		
			detergent or steam clean. Dry vacuuming is not recommended (it		
			can aerosolize the virus).		
		e.	\		
			prevent contamination and transmission. Place it immediately into a dirty laundry hamper.		
		f.	Use disposable cleaning cloths and mop heads.		
			Ideally use one wipe/cloth per one surface.		
7.	Lab Testing				
		a.	Specimens should be collected as soon as possible after the onset		
		h	of illness up to 7 days.  Collect stool samples from at least 3 symptomatic residents and/or		
			employees.		
		C.	Specimens should be stored at refrigeration temperature until ready		
			to transport to a lab. Store stool in a tightly closed container.  Do not place specimens where food or medication is stored.		
			(Contact Public Health for assistance if this is problematic.)		
8.	Outbreak		(Contact : abite : realist for abolication in time to problem attention		
	Resolution				
		a.	applicable.		
		b.	Monitor for symptoms of new GI illness among all residents and		
			employees until <b>at least</b> one week following the last onset of illness.		
		C.	Employees and residents should continue handwashing with soap		
			and water before eating and after using the bathroom. The virus may remain in stool for two or more weeks after recovery.		
			may remain in stool for two of more weeks after recovery.		

If a site visit occurred, please address all checked follow-up items needing improvement. Once complete, email a signed and dated copy of this checklist upon outbreak closure to your assigned Public Health Nurse or fax it to the Contra Costa Public Health—Communicable Disease Programs at (925)-313-6465.

Signature:		Date:	
	(Facility Representative)		

## Resources

## **Educational & Training Materials:**

- Real-Time Training Video: Clean Up After Someone with Norovirus Vomits or has Diarrhea (CDC)
  - https://youtu.be/TAkH4jakLYA
- Registered List of Products Effective Against Norovirus (List G) (EPA)
   https://www.epa.gov/pesticide-registration/list-g-epas-registered-antimicrobial-products-effective-against-norovirus
- Poster: Stop Norovirus For Elderly Residents (CDC) https://www.cdc.gov/norovirus/images/stop-norovirus-lg.jpg
- 4) Other Posters: Norovirus
  - Cleaning-up and Disinfection for Norovirus,
  - Helping the Spread of Norovirus,
  - Help Prevent the Spread of Norovirus ("Stomach Bug"),
  - Clean-up and Disinfection for Norovirus ("Stomach Bug")

https://waterandhealth.org/resources/posters/#norovirus

5) Norovirus – Fact Sheet for Food Handlers https://www.cdc.gov/norovirus/downloads/foodhandlers.pdf

## **Guidance Documents:**

1) Recommendations for the Prevention and Control of Viral Gastroenteritis Outbreaks in California Long-Term Care Facilities - California Department of Public Health (CDPH, 2006) <a href="https://www.cdph.ca.gov/Programs/CHCQ/HAI/CDPH%20Document%20Library/PCofViralGastroenteritisOutbreaks">https://www.cdph.ca.gov/Programs/CHCQ/HAI/CDPH%20Document%20Library/PCofViralGastroenteritisOutbreaks</a> ADA.pdf