

## LTC Viral Gastrointestinal (GI) Case and Outbreak Containment Toolkit Leadership

This toolkit provides guidance related to viral gastrointestinal illness (e.g. Norovirus, Rotavirus, and Adenovirus) only.

If gastrointestinal illness is caused by another enteric pathogen (e.g. Escherichia coli (E. coli), Salmonella etc.) consult with the MHO or designate as recommendations may be different.

For gastrointestinal infection caused by Clostridioides difficile (C. diff), please contact your ICP and follow established clinical pathways for treatment and management.

One to Two resident(s) identified with new symptoms consistent with Viral GI	
<b>GI Case definition</b> <ul style="list-style-type: none"> <li>● 2 or more episodes of diarrhea (Bristol stool chart 6 or 7) within a 24 hr. period, above what is considered normal for that individual <b>OR</b></li> <li>● 2 or more episodes of vomiting within a 24 hr. period, <b>OR</b></li> <li>● 1 episode each of vomiting and diarrhea within a 24 hr. period, <b>OR</b></li> <li>● 1 episode of bloody diarrhea, <b>OR</b></li> <li>● lab confirmation of a known enteric pathogen with at least one symptom compatible with a GI infection (e.g. nausea, vomiting, diarrhea, abdominal pains, bloody stools or tenderness)</li> </ul>	
<b>Notification and Line List</b>	Leadership/ site to notify Infection Control Practitioner of new cases, symptoms and unit via email <a href="mailto:ICP-LTC@vch.ca">ICP-LTC@vch.ca</a> <ul style="list-style-type: none"> <li>● Frontline staff to record newly symptomatic residents on <a href="#">paper line list</a>.</li> <li>● Review <a href="#">GI Communication Algorithm</a></li> </ul>
<b>Additional Precautions</b>	<ul style="list-style-type: none"> <li>● Place symptomatic residents that meet the case definition on <a href="#">Contact Plus Precautions</a>, include mask and eye protection when vomiting present.</li> <li>● Maintain precautions until <b>48 hours</b> after symptoms have resolved.</li> </ul>



	<ul style="list-style-type: none"> <li>● Place Contact plus and <a href="#">donning sign</a> at entrance to door in a visible location. Place <a href="#">doffing sign</a> in the doffing zone inside the room.</li> <li>● Follow care plan to manage symptomatic <a href="#">Wandering Residents</a>.</li> <li>● Review <a href="#">Supporting Residents Experiencing Responsive Behaviours</a></li> <li>● Close contacts of symptomatic residents are reviewed on a case-by-case basis, (roommates or tablemates where a resident may have had an episode of emesis or uncontained loose stool thus exposing other residents).</li> <li>● Where possible dedicate toileting facilities and consider using a disposable containment system such as a commode/bedpan liner (see Appendix A for products).</li> <li>● Dedicate equipment where possible - clean and disinfect shared equipment using a <a href="#">2-step process</a> after each use.</li> <li>● Refer to the <a href="#">IPAC Diseases and Conditions table</a> for additional information regarding specific enteric pathogens.</li> </ul>
<b>Hand Hygiene</b>	<ul style="list-style-type: none"> <li>● Soap and water hand washing is the preferred practice.</li> <li>● If a hand hygiene sink is not available at point of care, staff to perform hand hygiene with ABHR and then immediately proceed to a hand hygiene sink to perform soap and water hand hygiene</li> </ul>
<b>Symptom Screening</b>	<ul style="list-style-type: none"> <li>● Increase symptom screening of all residents to <b>twice daily</b> on the affected unit until <b>4 days</b> from last resident symptom resolution</li> <li>● Record resident symptoms in the clinical record including date, time, number and type of episodes using the <a href="#">Bristol Stool Chart</a> (e.g. Type 6 or 7).</li> </ul>
<b>Cleaning &amp; Disinfection</b>	<ul style="list-style-type: none"> <li>● Dedicate reusable equipment or use single use items where possible and clean and disinfect (two-step process) all shared items after every use.</li> <li>● Consider initiate enhanced cleaning and disinfection of dining areas</li> </ul>
<b>Group Activities</b>	<ul style="list-style-type: none"> <li>● Residents on Contact Plus and/or Droplet precautions may not attend group activities.</li> <li>● Asymptomatic residents may participate in off unit activities</li> </ul>
<b>GI Monitoring - Staff</b>	<ul style="list-style-type: none"> <li>● Encourage staff to self-monitor for symptoms and stay home when symptomatic.</li> <li>● If staff experience nausea, vomiting or diarrhea at work they should:             <ul style="list-style-type: none"> <li>➢ Notify their leader or charge nurse</li> <li>➢ Avoid further resident contact</li> <li>➢ Transfer essential duties and go directly home</li> <li>➢ Close toileting facilities used by the symptomatic staff member until cleaned and disinfected</li> </ul> </li> <li>● Exclude ill staff from working in any health care facility until they are symptom free for <b>48 hours</b>.</li> </ul>



- Exclude ill food-handler staff from working in any health care facility until they are symptom free for **72 hours**.

## Gastrointestinal Outbreak Definition:

**Three or more residents that meet the case definition for Viral GI cases on the same unit or ward within a 4-day period.**

### GI Case definition

- 2 or more episodes of diarrhea (Bristol stool chart 6 or 7) within a 24 hr. period, above what is considered normal for that individual **OR**
- 2 or more episodes of vomiting within a 24 hr. period, **OR**
- 1 episode each of vomiting and diarrhea within a 24 hr. period, **OR**
- 1 episode of bloody diarrhea, **OR**

lab confirmation of a known enteric pathogen with at least one symptom compatible with a GI infection (e.g. nausea, vomiting, diarrhea, abdominal pains, bloody stools or tenderness)

### Notification and Line list

- Leadership to start an [electronic line](#) list of symptomatic residents and staff.
- Front line staff to continue using the [paper line list](#) for unit staff to keep track of symptomatic residents.
- Review [GI Communication Algorithm](#)
- Email the line list daily (Monday to Friday excluding weekends and stats) until outbreak declared over to:
  - [CDEHO@vch.ca](mailto:CDEHO@vch.ca)
  - [ICP-LTC@vch.ca](mailto:ICP-LTC@vch.ca)
  - [VCHMedMicroIPAC@vch.ca](mailto:VCHMedMicroIPAC@vch.ca)
  - [LTCEOC@vch.ca](mailto:LTCEOC@vch.ca)

### Outbreak Declaration

- When outbreak definition is met, Infection Control Practitioner (ICP) to contact the MHO/Delegate to declare the outbreak.
    - Email [MHOandCDNurseOnCall@vch.ca](mailto:MHOandCDNurseOnCall@vch.ca) and [CDEHO@vch.ca](mailto:CDEHO@vch.ca).
      - ICP to include the layout of the home and unit, number of beds and number of staff.
  - Close the affected floor/unit/ward or facility to new admissions, re-admissions or transfers.
  - For medically necessary admissions or transfers, site to call the MHO and/or designate to review and discuss.
- Mon-Fri 0800-1600: 604-675-3800 or 604-675-3900**



	<p><b>After Hours, Weekends and STAT Holidays: 604-527-4893</b></p> <ul style="list-style-type: none"> <li>● Site leadership to inform priority access and receiving facility and service providers (e.g. paramedics; contracted transfer services) of the resident and outbreak status of the unit for transfers to acute care.</li> <li>● Post <a href="#">Outbreak Notification signage</a> at the facility entrance and/or floor/unit/ward advising visitors about the outbreak.</li> <li>● <b>Monday to Friday</b> - MHO /EHO to notify the BCCDC Public Health Laboratory of facility status.</li> <li>● <b>Saturday, Sunday and Statutory Holidays</b> – ICP to notify the BCCDC Public Health Laboratory of facility status.</li> <li>● Identify a site based outbreak management leader.</li> </ul>
<p><b>Communication</b></p>	<ul style="list-style-type: none"> <li>● ICP will coordinate outbreak meeting if requested by MHO, DOC or ICP</li> <li>● Outbreak management leader to schedule internal meetings with the <a href="#">Outbreak Management Team (OMT)</a>.</li> <li>● OMT lead to notify EVS and Food services manager, families and site of outbreak status</li> <li>● Site to develop communication pathways.</li> <li>● Site to identify a means of communication with frontline staff (e.g. huddles, communication binders, communication boards, staff notices, emails and Key messages).</li> <li>● Site to notify non-facility staff, professionals, and other service providers of the Public Health recommendations and to communicate any closures, cancelled services, and/or temporary restrictions (e.g. volunteers, clergy, Handy DART, oxygen service, BC Ambulance, paid companions, students, food service staff, hair salon and others).</li> <li>● Consider developing a distribution list for easy and timely notification.</li> </ul>
<p><b>Laboratory Specimens</b></p>	<ul style="list-style-type: none"> <li>● Collect specimens for symptomatic individuals who meet case definition and send specimens to BCCDC Public Health Laboratory.</li> <li>● Complete the <a href="#">BCCDC Public Health Laboratory Gastrointestinal Disease Outbreak Requisition</a> for each sample sent to the lab, indicate Viral / Bacterial Outbreak Test (do not use SAF vial) and use the VCH CDC MIYS # as ordering practitioner. VCH CDC Control MIYS as ordering practitioner.</li> <li>● MHO/EHO (Monday- Friday) or ICP (weekends &amp; stats) will provide the outbreak identification and the MIYS # for BCCDC requisitions</li> <li>● Once laboratory testing has confirmed the enteric pathogen of <u>2</u> separate samples, no further sampling is required. Any additional testing must be approved/requested by MHO. CD EHO will follow up with special request to BCCDC PHSA Lab.</li> <li>● Order sample containers from the BCCDC Public Health Laboratory using the following requisition linked <a href="#">here</a>.</li> <li>● It is the responsibility of the site to send specimens to the BCCDC Provincial Health Laboratory using your established courier service, taxi service or by dropping samples off.</li> <li>● Samples are received Monday – Sunday (including Statutory Holidays) between 0700-2300</li> </ul>



	<ul style="list-style-type: none"> <li>● Samples should be shipped or dropped off to Specimen Receiving or Specimen Drop-box at : <b>BCCDC Public Health Laboratory Central Processing and Receiving</b> <b>655 West 12<sup>th</sup> Avenue</b> <b>Lane Level (at rear of building)</b> <b>Vancouver BC</b></li> </ul>
<b>Cohorting Staff</b>	<ul style="list-style-type: none"> <li>● Cohort staff to affected area where possible.</li> <li>● When cohorting is not possible, staff to move from asymptomatic to symptomatic residents.</li> <li>● Allied staff to provide support in unaffected units prior to working in affected areas of the home.</li> </ul>
<b>Resident Cases</b>	<ul style="list-style-type: none"> <li>● Place symptomatic residents on <a href="#">Contact Plus</a> precautions include mask and eye protection when vomiting present.</li> <li>● Maintain precautions until <b>48 hours</b> after symptoms have resolved.</li> <li>● Increase monitoring of all residents on the affected unit to <b>twice-daily</b> screening until <b>4 days</b> from last resident symptom resolution</li> <li>● Assess residents daily in unaffected areas.</li> <li>● Review close contacts of symptomatic residents on a case-by-case basis, (roommates or tablemates where a resident may have had an episode of emesis or uncontained loose stool thus exposing other residents).</li> <li>● Restrict movement of symptomatic residents outside of their rooms as much as possible and create management plans for those who wander.</li> <li>● Do not move asymptomatic roommates.</li> <li>● Do not admit or move asymptomatic residents into rooms on Contact Plus precautions.</li> <li>● Provide tray service (meals to room) for residents on precautions.</li> <li>● Support residents to perform hand hygiene before and after meals, after toileting and after an episode of diarrhea and/or vomiting.</li> <li>● Encourage staff to clean and disinfect bedrails and over bed tables when delivering meals and when providing care.</li> <li>● Use <a href="#">disposable hygienic products</a> for symptomatic residents</li> </ul>
<b>Group Activities</b>	<ul style="list-style-type: none"> <li>● Residents on Contact Plus and/or Droplet precautions may not attend group activities.</li> <li>● Following discussion with MHO either decrease size or discontinue group activities. Incorporate hand hygiene at the beginning and end of all activities.</li> <li>● No shared food.</li> </ul>
<b>Staff Cases</b>	<ul style="list-style-type: none"> <li>● Staff who develop symptoms at home to follow up with their own healthcare provider.</li> </ul>



	<ul style="list-style-type: none"> <li>● VCH staff to report work absence to the Provincial Workplace Health Call Centre (1-866-922-9464)</li> <li>● Non-VCH staff report to: _____</li> <li>● Symptomatic HCWs are <b>excluded</b> from work:             <ul style="list-style-type: none"> <li>➢ Exclude <u>ill staff</u> from working in any health care facility until they are symptom free for <b>48 hours</b>.</li> <li>➢ Exclude <u>ill food-handler</u> staff from work in any health care facility until they are symptom free for <b>72 hours</b>.</li> </ul> </li> <li>● Staff who are <b>asymptomatic</b> may work at other facilities and should inform alternate work sites re: status of the outbreak.</li> </ul>
<b>Cleaning &amp; Disinfection</b>	<ul style="list-style-type: none"> <li>● Dedicate reusable equipment or use single use items where possible and clean and disinfect (two-step process) all shared items after every use.</li> <li>● Initiate enhanced cleaning and disinfection on affected floors/units/wards.</li> <li>● Clean dining room tables before meal time</li> <li>● Sites to ensure a Health Canada approved product effective against non-enveloped viruses is used or use a cleaning product and bleach as the disinfectant (1000ppm) 1:50 ratio of bleach solution (4 teaspoons (20mL) of domestic 5.25% bleach to 1 liter of water), commonly used disinfectant</li> <li>● EHO will assess the kitchen</li> </ul>
<b>Supplies</b>	<ul style="list-style-type: none"> <li>● Identify a site supply lead: _____</li> <li>● Order sample containers from the BCCDC Public Health Laboratory using the following requisition linked <a href="#">here</a>.</li> <li>● <a href="#">Set-up PPE carts</a>.</li> <li>● Ensure there is an adequate supply of gowns, gloves, masks, eye protection, disinfectant wipes and ABHR.</li> <li>● Use formula of 25 PPE changes per day, per resident on precautions (includes gloves, gown, mask, eye protection).</li> <li>● Develop a process for restocking supplies in the PPE cart and <u>twice daily clean</u> of the PPE cart; identify a person responsible and assign this task daily.</li> <li>● Ensure staff have access to supplies on the unit and know where and how to access them.</li> <li>● Owned and operated sites to order through e Pro.</li> <li>● Contracted and private sites to order PPE and supplies using established processes.</li> </ul>
<b>Visitors</b>	<ul style="list-style-type: none"> <li>● <a href="#">Follow MoH guidance for visitors in LTC</a>. Any adjustments to visitor protocols are at the discretion of the MHO.</li> <li>● Inform non-essential staff/visitors of the presence of outbreak and associated risks.</li> <li>● Provide education to visitors'/family caregivers about precautions, hand hygiene and PPE donning/doffing.</li> <li>● Symptomatic visitors should not enter the facility unless for compassionate or exceptional circumstances.</li> </ul>
<b>Staff Break Rooms</b>	<ul style="list-style-type: none"> <li>● Have disinfectant wipes and alcohol-based hand rub (ABHR) available to use.</li> </ul>



	<ul style="list-style-type: none"> <li>● If wearing a mask, change on entry to break space.</li> <li>● If operationally feasible, cohort staff from affected area(s) to a single break space.</li> <li>● <a href="#">Break Room Poster</a></li> <li>● Remove common touch items from break spaces.</li> <li>● Avoid sharing of food/ food items.</li> <li>● Staff fridge should be emptied, cleaned and disinfected.</li> <li>● Recommend food handler staff have dedicated washroom facilities for duration of the GI outbreak.</li> </ul>
<b>Laundry</b>	<ul style="list-style-type: none"> <li>● Follow established site-specific sanitation plan.</li> <li>● Set up a process for in room personal laundry and laundry hampers for residents on precautions.</li> <li>● Ensure hampers are impervious to prevent leakage of body fluids.</li> <li>● Identify a process to clean and disinfect carts/bins used to transport laundry prior to exiting unit</li> <li>● Use Point of Care Risk Assessment (PCRA) when handling laundry and garbage.</li> <li>● Handle soiled laundry with minimum agitation.</li> </ul>
<b>Meals</b>	<ul style="list-style-type: none"> <li>● Group dining for unaffected residents to continue unless directed otherwise by the MHO and/or if resident chooses to eat in their room.</li> <li>● Tray service for all residents on Contact Plus precautions. Disposables are not necessary unless operationally required.</li> <li>● Encourage and support residents to perform hand hygiene prior to meals.</li> <li>● Set up a process for meal delivery to units (facilities may need a meal wagon to deliver meals, consider using a closed wagon).</li> <li>● Identify a process to clean and disinfect carts used to transport meals after each use</li> <li>● Cover meal and beverages carts during transport.</li> <li>● Ensure there are over bed tables for residents to dine in their room.</li> <li>● Consider the need for extra kitchen staff for meal plating for locations with serveries.</li> <li>● For sites using the new model of care for breakfast (e.g. self-serve), develop a plan for tray service for breakfast.</li> <li>● No shared food.</li> </ul>
<b>Discontinuing Precautions</b>	<ul style="list-style-type: none"> <li>● Coordinate “additional precautions clean” with the resident(s) bath/shower when Contact Plus precautions are discontinued.</li> <li>● Remove additional precaution signage when environmental cleaning is complete.</li> <li>● Identify additional precautions have been discontinued on line list.</li> </ul>
<b>Calling an outbreak over</b>	<ul style="list-style-type: none"> <li>● MHO/EHO will call an outbreak over once <u>2 incubation periods (96 hours)</u> have passed following resolution of symptoms in the last case.</li> </ul>





	<ul style="list-style-type: none"> <li>● ICP to coordinate an <a href="#">outbreak debrief</a> to review lessons learned and share with OMT.</li> <li>● Site leader informs priority access the outbreak has ended.</li> <li>● DOC to complete the <a href="#">Outbreak Summary Report</a> and fax or email to CD EHO team.</li> </ul>
<p><b>Resources</b></p>	<ul style="list-style-type: none"> <li>● Set up room according to the <a href="#">Infection Control Best Practice Guideline: Preparing Rooms on Additional Precautions.</a></li> </ul> <p>Lab information</p> <ul style="list-style-type: none"> <li>● Follow the specimen guidance for collection, storage and transport as outlined in the BCCDC e-lab manual by following the <a href="#">link</a> and typing in Gastrointestinal Disease Outbreak Investigation in the search bar.</li> <li>● <a href="#">BC Chlorine Dilution Calculator</a></li> <li>● <a href="#">Health Canada Drug Product Database Online Query</a></li> </ul>





## Appendix A

Product	Description	Photo	Brand	Supply Chain Ordering Information
Emesis Bag w/ Absorbent Powder	Portable emesis bag with absorbent inner lining to help solidify emesis and enable disposal in garbage.		<a href="#">Hygie Canada</a>	PeopleSoft Item #: 00105357 20/Package
Vernagel Super Absorbent Powder	Polymer based powder that absorbs fluids (e.g. urine, blood, feces, vomit) into a semi-solid state enabling safer disposal.		<a href="#">Vernacare</a>	PeopleSoft Item #: 00078234 100/Box



<p>Commode Liner/Large Emesis Basin Disposable Pulp Fibre</p>	<p>Disposable bed pan/commode liner</p>		<p><a href="#">Vernacare</a></p>	<p>PeopleSoft Item #: 00068954 100/Case</p>
<p>Hygienic Bedpan/Commode Cover</p>	<p>Disposable cover for bedpan/commode for effective management/containment of body waste at point of care.</p>		<p><a href="#">Hygie Canada</a></p>	<p>PeopleSoft Item #: 00095514 20/Box</p>

