

Gastrointestinal Illness Outbreak

Checklist for supportive living accommodations

This checklist provides general measures for controlling gastrointestinal (GI) illness outbreaks. Refer to the [Guide for Outbreak Prevention & Control in Supportive Living Accommodations](#) for detailed recommendations. When applicable, follow site-specific policies.

Isolate symptomatic or confirmed residents (refer to section 5.1)

- Wash hands with soap and water.
- Conduct an Infection Prevention and Control Risk Assessment prior to every resident interaction and use personal protective equipment (PPE).
- Identify newly symptomatic or confirmed residents.
- Isolate symptomatic or confirmed residents until 48 hours after the last episode of vomiting and/or diarrhea:
 - Diarrhea only: Use Contact precautions.
 - Vomiting with or without diarrhea: Use Droplet and Contact precautions.

Communicate and coordinate (refer to section 5.2)

- Inform HCW/staff, residents, family/guardians and partners of the outbreak.
- Post outbreak signs at the site/unit entrance.
- Direct staff/HCW to stay home until 48 hours after the last episode of vomiting and/or diarrhea and to report symptoms to the manager/designate.
- Report daily to the AHS Public Health Outbreak team as per zone process.
- Direct staff/HCW to care for asymptomatic residents before symptomatic and confirmed residents.
- Cohort staff/HCW to work only in affected areas or only in unaffected areas.

Complete outbreak environmental cleaning and disinfection (refer to section 5.3)

- Increase cleaning and disinfection frequency in all areas.
- Immediately clean and disinfect visibly dirty surfaces.

- Perform cleaning and disinfection wearing PPE and use a disinfectant that kills GI illness viruses.
- Clean and disinfect resident room, moving from clean to dirty. Clean bathroom last.
- Handle soiled linen and laundry safely.

Plan safe activities for residents who are not isolating (refer to section 5. 4)

- Postpone/cancel all group activities unless there are extenuating circumstances.
- Consult with the AHS Public Health Outbreak team regarding restricting group activities if they are an essential part of treatment.

Plan safe visits (refer to section 5. 5)

- Provide safe visiting guidance to visitors.
- Demonstrate how to use PPE if visiting an isolating resident.
- Advise visitors of risk of exposure to illness and to practice hand hygiene before and after visiting.

Admission, transfers and discharge restrictions (refer to section 3. 6 and 3.7)

- Implement restrictions as directed by the AHS Public Health Outbreak team for the site/unit.
- Use the *Risk Assessment Matrix* and the *Risk Assessment Worksheet* as per zone process.

Use food service modifications (refer to section 3. 8)

- Initiate outbreak modifications for food service.
- Provide meal service to isolating residents in their rooms.

Specimen collection (refer to section 3. 9)

- Collect specimens as directed by the AHS Public Health Outbreak team.
- Ensure proper specimen collection, handling and labeling, including the outbreak EI number.