

## General Outbreak Management

## **Facility Operator Checklist**

Conduct a point of care risk assessment and initiate additional (isolation) precautions for symptomatic residents. Consult with your outbreak response lead when completing the checklist or if you have any questions.

Facility Name:				Assessment Date:
		Y	N/A	N (provide details)
Reporting/Notification	1. Verify all cases meet case definition and outbreak definition has been met.			
	<ol> <li>Notify Public Health of suspected outbreak according to algorithms.</li> </ol>			
	3. Notify senior management of facility.			
	4. Notify all site staff and Home Care Coordinator (if applicable).			
	<ol> <li>Notify physician lead/medical director or designate for facility.</li> </ol>			
	<ol> <li>Notify infection control staff (if applicable).</li> </ol>			
	<ol> <li>Notify housekeeping that enhanced cleaning and disinfection are required.</li> </ol>			
	<ol> <li>Discuss outbreak infection control measures &amp; restrictions with weekend &amp; evening staff.</li> </ol>			
	9. Provide outbreak information sheets for clients, visitors, and families.			
Outbreak Management	10. Most up-to-date Outbreak Management Guidelines present onsite or accessed here:			
	11. Staff aware & educated on outbreak management guidelines.			
	12. Staff aware of tracking forms & fan- out information for outbreak.			
	<ol> <li>Staff know that tracking forms are to be completed daily &amp; know number to fax them to.</li> </ol>			
	<ol> <li>Adequate supplies are available</li> <li>e.g. PPE, linens, disinfectants, alcohol based hand rubs).</li> </ol>			
	15. Outbreak signage posted.			
	16. Sample kits with requisition forms available.			
	17. Staff know how to complete lab requisition forms.			
	<ol> <li>Review cases with outbreak response lead to determine if cases meet definition.</li> </ol>			

		Y	N/A	N (provide details)
	19. Staff know when transporting a resident to advise EMS and receiving hospital that their facility is undergoing an outbreak.			
	20. Staff have been advised to report symptoms of illness to their supervisor.			
	21. Staff know to contact outbreak response lead regarding admissions, transfers and/or discharges.			
	22. Staff are aware of the admissions /transfers risk assessment form.			
	23. Admissions & transfers have been restricted during the outbreak.			
Staffing	24. Cohort staff as much as possible. If not possible, recommended work flow is from well residents to ill residents to minimize transmission.			
	25. All staff present have either been asymptomatic or have been symptom free for > 48 hours (GI) or work restrictions recommended by Public Health are being followed (respiratory).			
	26. Staff understand additional precautions and PPE required.			
Personal Hygiene	27. Proper hand hygiene observed. Washing with soap and water is preferred with gastrointestinal outbreaks.			
	28. PPE is available to use when entering precaution rooms.			
	29. PPE is single-use only.			
Ре	30. Alcohol based hand rubs contain at least 70% alcohol.			
	31. Soiled linen handled with minimum agitation.			
Cleaning & disinfecting	<ol> <li>Staff handle soiled laundry wearing appropriate PPE (masks, gowns, gloves, eye protection).</li> </ol>			
	33. Patient contact surfaces & high touch surfaces cleaned & disinfected at least twice a day.			
	34. Disinfectant used has a label claim for Norovirus or is an accelerated hydrogen peroxide product or bleach.			
	35. Cleaning and disinfecting products have not exceeded their shelf life.			
	36. Disinfectants are used at correct dilution and staff are able to monitor dilution.			
	37. Rooms of clients on additional precautions (isolation) are cleaned last.			
	38. Equipment used to clean & disinfect an additional precaution (isolation) room is used only once & then discarded or cleaned & disinfected.			

	Y	N/A	N (provide details)
39. Vacuum cleaners, floor buffers, and			
floor cleaning machines that can			
aerosolize microorganisms are not			
used during the outbreak.			
40. Areas contaminated with vomit or			
feces are immediately cleaned &			
disinfected.			
41. Shared client care equipment is			
cleaned & disinfected prior to use by			
a different client.			
42. Clients are restricted to their rooms			
for timelines specified by Public			
Health.			
43. When client is ready to be taken off of			
additional precautions (isolation),			
housekeeping is contacted, so that			
cleaning is coordinated with resident			
personal hygiene.			
44. Clients on additional precautions			
(isolation) may be bathed in common tub rooms if cleaning and disinfection			
steps are followed.			
45.Client or family assumes			
responsibility for cleaning/disinfecting			
items that environmental services			
cannot support.			
46. Pets have been restricted from the			
facility.			
47. Group activities & outings have been			
cancelled.			
48. Do not over stock rooms with client			
care supplies.			
49. Personal services (e.g. hair dressing,			
foot care) have been cancelled in			
affected unit. Ideally hair dressing is			
to be cancelled but if they wish to			
remain open, the hair dresser must			
follow the requirements in the Central			
Zone Guidelines for Hair Salons			
during an Outbreak.			
50. Close tuck shop if in affected unit.			
51. Visitors who have been ill with			
gastrointestinal symptoms in the last			
48 hours are restricted.			
52. Visitors are provided with outbreak			
information sheet.			
53. Visitors of ill clients have been			
instructed in proper use of PPE and			
hand hygiene.			
54. Visitors are not visiting more than one			
resident.			
55. Commodes are to be dedicated for ill			
clients who share bathrooms (GI).			
56. All common or bulk food items have			
been discontinued.			
57. Staff are dishing out condiments or			
single-serving packages are being			
used.			

	Y	N/A	N (provide details)
58. Designated unit staff deliver meal trays to rooms of clients on additional precautions (isolation) and to follow additional precautions.			
59. Staff perform hand hygiene before and after meal tray delivery.			
60. Self-serve buffet lines have been closed.			
61. Tables in common dining areas are pre-set.			
62. All dining areas are sanitized after meals.			
63. Clients leaving the facility have been advised not to visit a children's facility, hospital or another senior's facility.			
64. Use of common activity items (e.g. games, puzzles, shared computers, etc.) are discontinued during the outbreak.			
65. Shared reading materials (e.g. books, magazines) are removed or discarded.			

## Comments/Action Taken: