

Declaring Acute Care Outbreaks Over



This guidance applies to acute care and other care settings outside of long term care (LTC) and congregate living sites.

Outbreaks can be declared over as follows:

An outbreak may be declared over when two incubation periods have passed (i.e. 28 days) from the **last date that others were potentially exposed to a case during the communicable phase of illness¹** in an acute care outbreak setting. (The case may be a healthcare worker (HCW), a patient, or a visitor who was present in the care setting during the communicable phase of illness, and recommended personal protective equipment was not used by others thus resulting in a potential exposure)

BUT

In some **select instances**, the outbreak may be declared over after one incubation period (i.e. 14 days) from the **last date that others were potentially exposed to a case during the communicable phase of illness¹**. (The case may be a healthcare worker (HCW), a patient, or a visitor who was present in the care setting during the communicable phase of illness, and recommended personal protective equipment was not used by others thus resulting in a potential exposure.)

These instances are:

- When the trigger to declare the outbreak was a single patient hospital-acquired case where case investigation has identified the most likely source, and contact tracing has been completed for the patients and HCWs and visitors, and no additional cases were identified; AND the results of serial prevalence testing are known.

OR

- When the trigger to declare the outbreak was two or more HCW cases where there is evidence of transmission (from HCW, patient or visitor) in the workplace AND these transmission events have been identified, and contact tracing is complete for patients and HCWs and visitors for each of the COVID-19 cases, and no subsequent transmission events have been identified, AND the results of prevalence screening, if done, are known.

OR

- On a case-by-case basis depending on the individual scenario as agreed upon by key stakeholders (IPC/WHS/MOH/Site Command Post) of the Outbreak Management Team.

NOTE: The above instances do not apply in settings where acute care and long term care (LTC) are combined in a facility (e.g. staff may be working in both areas).

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Unit On Watch can be lifted if 14 days has elapsed since:

- The patient case is placed on [Contact and Droplet precautions](#), **OR**
- The last date a HCW case in the communicable phase of illness¹ was on the unit with risk of exposures to others, **OR**
- The last date a visitor case in the communicable phase of illness¹ was on the unit with risk of exposures to others.

AND

- There are no new cases in patients and/or HCWs on the unit in the 14-day follow-up period.

¹ The communicable phase of illness includes the pre-symptomatic phase (48 hours before first symptom onset). If the HCW was asymptomatic or pre-symptomatic and was wearing continuous masking coupled with appropriate hand hygiene at all times at work, this would not be considered as an exposure risk to others. The communicable period lasts until 10 days after symptom onset or until these symptoms have improved AND afebrile for 24 hours, without the use of fever-reducing medications, whichever is longer or from the date a positive specimen was collected in the case of those who remain asymptomatic after testing irrespective of continuous masking and hand hygiene.