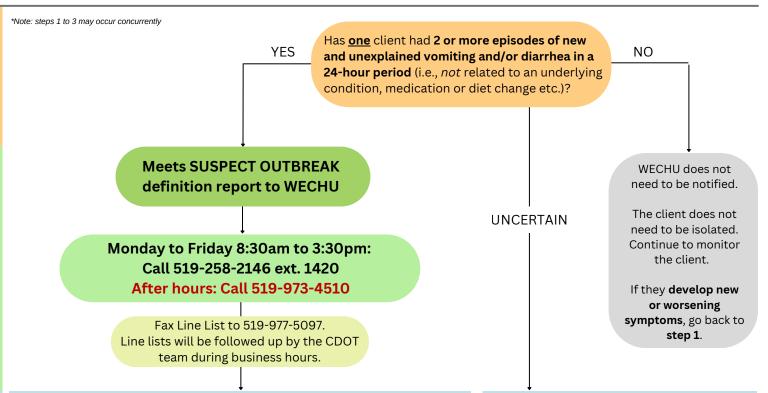
Enteric Outbreak Management Algorithm for CLS





- The ill client should be placed on additional precautions in a private room. If a private room is not available, implement additional precautions and the following measures: 1) draw the curtain 2) dedicate equipment 3) dedicate toileting facilities.
- Use contact precautions: gown and gloves. Staff may need to add a
 mask and eye protection based on their Point of Care Risk
 Assessment (PCRA) if the client is actively vomiting/uncontrolled
 diarrhea.
- <u>If</u> the client has <u>any</u> of the following symptoms (such as vomiting or diarrhea) <u>in addition to respiratory symptoms</u> follow the <u>Outbreak</u>
 <u>Quick Guide 5.0</u> for additional IPAC measures: runny nose or nasal congestion, sneezing, sore throat, muscle pain, fatigue, cough, chills, headache, or shortness of breath.
- Use a disinfectant that is effective against Norovirus as well as enhanced cleaning and disinfection.
- Review <u>Recommendations for Outbreak Prevention and Control in</u> <u>Institutions and CLS</u> and <u>Enteric Outbreak Management Checklist</u>.

- Place the client on additional precautions for 24 hours to monitor for new or worsening symptoms and encourage to stay in their room.
- **Consult** with the client's health care provider (HCP) for an assessment.
- If new or worsening symptoms develop, go to step 1.
- Use contact precautions or as determined by staff PCRA when providing direct care or interacting with the client's environment.
- If no new or worsening symptoms
 develop and/or if there is an alternate,
 non-infectious diagnosis, additional
 precautions may be discontinued and
 testing is not recommended.
- · Refer the client to their HCP for lab test to identify cause of illness.
- **Food Samples**: Retain a minimum of 200g samples of food, labeled and in a frozen state for collection and testing by a Public Health Inspector. Food samples can be kept for up to 10 days.
 - Note: If causative agent is Norovirus, food samples will not be submitted for testing.

Acute Respiratory infections

- Refer to <u>Recommendations for Outbreak</u>
 <u>Prevention and Control in Institutions and Congregate Living Settings.</u>
- Case Management: Page 51.
- Contact Management: Page 52.
- Antivirals: Client should consult with their HCP.

Viral Gastronteritis (e.g. Norovirus) or Unknown Pathogen

- Case Management: until 48 hours after the last episode of vomiting or diarrhea.
- Contact Management: Not required.

Other Pathogens

 Refer to Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings Table 8.1 (pages 73-84) for disease-specific information.

It is the responsibility of the facility to follow and implement all measures as set out in the <u>Recommendations for Outbreak Prevention and Control in Institutions</u> and <u>Congregate Living Setting</u> (February 2025, or as current). If there are any discrepancies between this resource and the guidance, the directions from the guidance should be followed. Consult WECHU for outbreak questions.