Recommendations for Controlling an Outbreak of Viral Gastroenteritis in a Long Term Care Facility

You can take steps to limit the spread of viruses that cause gastroenteritis, most commonly norovirus. Closely adhere to the following recommendations since these viruses are very contagious and very hardy. Educate your staff about these guidelines and make sure they comply. Unless noted, follow these recommendations for at least seven days after the last ill person no longer has symptoms.

General Recommendations

- Immediately call a Board of Health epidemiologist (weekdays: 404-508-7986 or 404-508-7851; after hours: 404-294-3700) when two or more residents or staff begin experiencing vomiting and/or diarrhea within a three-day period. This might indicate the start of an outbreak. (Georgia law requires the reporting of all outbreaks to the local health department.) Remain in close contact with the epidemiologist throughout the outbreak.
- Promptly isolate residents with gastrointestinal symptoms (vomiting, diarrhea, fever and/or abdominal pain). Keep ill residents in their rooms for 72 hours after vomiting and/or diarrhea cease.
- Have staff report all fecal and vomiting accidents to their supervisor. Log all such events, including date, time, location (including room number), people affected and clean-up personnel.
- Restrict visitation. Post a sign at the main entrance advising family and friends not to visit if they are ill or are experiencing vomiting and diarrhea. Especially discourage visits by children. Inform those who do choose to visit that they should wash their hands upon entering and leaving the resident’s room.
- Ensure that residents and staff wash their hands more often than usual. Wash hands with soap and water for at least 20 seconds. Wash between the fingers and the backs and palms of the hands. Scrub nail beds. Dry hands with paper towels and then use a towel to turn off the faucet and open the door. Do not rely on alcohol-based hand sanitizers during an outbreak of gastrointestinal illness since they are not effective against norovirus and similar viruses.
- Monitor staff and residents to ensure hand washing is frequent and thorough. Maintain vigilance with verbal and written reminders. Consider posting signs.
- Hands should be washed:
  - Before . . .
    - Entering the kitchen
    - Preparing food or a drink
    - Eating or drinking
    - Entering a resident’s room
    - Dispensing medication
    - Getting ice from an ice machine
  - After . . .
    - Using the bathroom
    - Handling dirty dishes
    - Eating, drinking or smoking
    - Leaving a resident’s room
    - Cleaning
    - Having physical contact with someone (including shaking hands)
    - Handling paper items (like money and forms)

Food Service Recommendations

- Ensure employees wear gloves while preparing food, handling ready-to-eat foods and handling serving utensils, silverware, plates and glasses. Change gloves frequently and wash hands between glove changes.
- Consider closing the dining room and serving meals to residents in their rooms.
- Discontinue all self-service options such as salad and ice cream bars.
- Do not refill drink glasses. Use a clean glass each time.
- Clean and sanitize the inside of dish and glass washers with a recommended disinfectant (see p. 3).
- Do not allow residents to get ice from a shared ice machine.

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Food Service Recommendations (continued)
- Use disposable ice buckets and drinking cups in all resident rooms. Discard them between occupants.
- Ensure that staff wear gloves when getting ice from ice machines.
- Discard the ice in all ice machines weekly, then clean and sanitize the machines.
- If a fecal or vomiting accident occurs in a food preparation or food service area:
  - Carefully remove the stool or vomit and clean the area.
  - Thoroughly clean all food contact surfaces. Next, rinse thoroughly with clean water and disinfect using a food-grade disinfectant (see p. 3).
  - Destroy all exposed food within 25 feet of the accident and any food handled by the ill person.

Patient Care and Employee Health Recommendations
- Ensure staff are using precautions when caring for a patient with an active gastrointestinal illness, including wearing gowns, gloves and a mask.
- Monitor staff for signs of illness and promptly send ill staff home.
- Adopt and enforce a sick leave policy that allows staff to stay home when ill.
- Maintain a log of sick residents and staff. The log should include name, date of birth, date of symptom onset, description of symptom(s), resident’s room number or staff person’s job title, duration of illness, hospitalization location and dates (if applicable), staff person’s date of return to work and similar illness in household contacts or visitors. Provide updates to the Board of Health as requested.
- Minimize movement of staff between affected and unaffected areas. If you must move staff from an affected area to an unaffected area, allow a 48-hour buffer between shifts.
- Dedicate essential staff to the affected ward and do not allow them to work in other areas.
- Require that all staff with nausea, vomiting or diarrhea notify their supervisor and remain off duty for at least 72 hours after their symptoms end. This includes staff without direct resident contact, such as office workers.
- If, due to staffing shortages, ill staff members must return to work within 72 hours after their symptoms end, restrict them to the affected wards and instruct them to be vigilant about good hygiene. Food handlers must never return to work within 72 hours.

Basic Cleaning Recommendations
- Using a recommended disinfectant (see p. 3), frequently clean and sanitize high-touch areas such as:
  - toilet seats, hand rails and faucet and tub knobs
  - drinking fountain buttons and push bars
  - door knobs, locks, handles and push plates
  - telephones
  - elevator buttons
  - light switches
  - thermostats
  - remote controls
  - tables and chairs
  - stair and balcony railings
  - drawer handles
  - pens and markers
  - game pieces
- At least hourly, clean and sanitize the door handles of all restrooms, classrooms and eating areas during periods of frequent use.
- Clean and sanitize floors daily. Do not buff floors, as this might make the virus airborne and increase the likelihood of transmission.
- Use disposable cleaning cloths or paper towels. Use one cloth in each resident room and a separate cloth in each toilet area. Discard a cloth once it is visibly soiled.
- Dispose of vacuum cleaner bags between uses. Do not vacuum stool or vomit.
- Inspect common areas, outdoor spaces such as patios, the parking lot and the surrounding area for evidence of fecal or vomiting accidents.

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**Detailed Cleaning Recommendations**

- Treat all stool and vomit as if it were contaminated with a highly infectious organism.
- Close or cordon off the accident area for at least one hour and open all windows.
- Ensure that all accidents are handled by staff that are properly trained and protected for such clean-ups. Consider having a specially trained cleaning team available at all times.
- To clean and sanitize:
  1. Put on a disposable mask, gloves and apron, as well as an eye shield.
  2. Use paper towels to soak up excess liquid. Put them and all solid waste directly in to a biohazard waste bag, seal and discard.
  3. Clean the soiled area with detergent and hot water, using disposable cloths.
  4. Wash hands thoroughly.
  5. Disinfect the contaminated area with a recommended disinfectant (see below). In the case of vomit, the contaminated area is within a 25-foot radius of the incident.
  6. Dispose of mask, gloves, apron and cloths in a biohazard waste bag.
  7. Wash hands thoroughly.
- Wash items such as clothing and bedding with bleach in a washing machine set on hot and dry in a dryer set on hot.
- Remove items that cannot be washed such as mattresses and furniture. Sanitize using a disinfectant (see below) and steam clean. Do not remove an item if the stool or vomit exceeds one quart in volume. Instead, treat the item in place by wrapping it in heavy gauge plastic and sterilizing it. Or, discard following routine solid waste disposal procedures.
- Do not vacuum stool or vomit from carpeting. Instead, clean with a carpet detergent and hot water. Disinfect (see below). Next, steam clean the area at 158°F for five minutes or 212°F for one minute.
- Clean all upholstered furniture that is near the accident site but not directly affected. Use detergent, hot water and disposable cloths, then sanitize using a disinfectant (see below). Let air-dry (in the sun for at least three hours, if possible).

**Disinfectant Recommendations**

- It is extremely important to use a product that is effective against norovirus.
- A chlorine bleach solution is the recommended disinfectant.
  - Prepare a fresh dilution of bleach every day. See instructions in box below.
  - Spot test before applying to a visible surface, since chlorine bleach can damage fabrics and other items.
  - Leave solution on surface for 10 to 20 minutes, then rinse with clean water.
  - Start a new bottle of bleach every 30 days, since an open bottle loses its effectiveness.

<table>
<thead>
<tr>
<th>The required bleach concentration depends on the surface to be disinfected</th>
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<tbody>
<tr>
<td>For stainless steel, food/mouth contact items and toys</td>
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<tr>
<td>Concentration: 200 parts per million (ppm)</td>
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<tr>
<td>1 tablespoon of bleach in 1 gallon of water (1:250 dilution)</td>
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<tr>
<td>For non-porous surfaces, tile floors, countertops, sinks, toilets, doorknobs and railings</td>
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<tr>
<td>Concentration: 1,000 ppm</td>
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<tr>
<td>1/3 cup of bleach in 1 gallon of water (1:50 dilution)</td>
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<tr>
<td>For porous surfaces and wood floors</td>
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<tr>
<td>Concentration: 5,000 ppm</td>
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<tr>
<td>1 and 2/3 cups of bleach in 1 gallon of water (1:10 dilution)</td>
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Disinfectant Recommendations (continued)
- Visit the Environmental Protection Agency’s (EPA’s) website for a list of other disinfectants that are effective against norovirus: http://www.epa.gov/oppad001/list_g_norovirus.pdf. When considering a product to use in a food preparation or service area, make sure the label states it is approved for such use. Follow product label instructions. Consult the manufacturer with any questions.

Additional Recommendations
If new cases of illness arise after following the above recommendations:
- Clean toilets between each use with a disinfectant (see p. 3).
- Prohibit all visitation and cancel all activities.
- Isolate all residents in their rooms (regardless of whether they have symptoms).
- Close the dining room and serve meals in residents’ rooms.
- Avoid transferring a sick resident to an unaffected ward. If a transfer is necessary, take isolation precautions.
- When possible, group ill residents together.
- Close the affected ward(s).

Norovirus Testing
The Georgia Public Health Laboratory provides free norovirus testing. The purpose is to determine the cause an outbreak, not to diagnose individual patients.

The epidemiologist investigating your outbreak may request stool specimens from residents and/or staff. If so, you will receive collection kits and instructions. Within 48 hours after the onset of symptoms, collect 10 to 50 ml of each person’s stool in the container from the kit. Keep samples in a refrigerator until picked up. (If you cannot collect a stool sample in the first 48 hours of illness, collect one as soon as possible. Norovirus might be detectable in a sample collected up to seven days after symptoms begin.)