

BOARD OF HEALTH

Gary Andresky,
President
Crystal Lake, Illinois

Edward Varga, P.E
Vice President
Richmond, Illinois

Linda Brogan, R.N.
Secretary
Woodstock, Illinois

Dallas Larson
Treasurer
Woodstock, Illinois

Thomas J. Skiba, D.D.S.,
McHenry, Illinois

Richard Gorski, M.D.,
Ringwood, Illinois

Roger McGregor
Algonquin, IL

Lyn Orphal
Crystal Lake, Illinois

Public Health Administrator
Patrick J. McNulty

Guidelines for the Control of a Suspected or Confirmed Outbreak of Viral Gastroenteritis in Long-Term Care and Assisted Living Facilities

These guidelines have been developed to help minimize the spread of viral gastroenteritis (norovirus). Norovirus is highly contagious and environmentally stable, so stringent adherence is necessary. Preventative measures should be continued for at least 7 days after the outbreak appears over, since affected persons continue to shed the virus after recovery. Additional recommendations may follow as an investigation continues or if a causative agent is identified.

Residents:

- Isolate ill residents from others by confining them to their rooms for at least 48 hours after their last symptoms of nausea, vomiting and/or diarrhea. Ideally, keep ill residents in their rooms and offer room service for meals.
- If possible, group ill individuals together within the same hall, wing or unit.
- Exclude ill residents from group activities involving well residents (meals, hair salon, parties, BINGO, cards). Group activities should be kept to a minimum or postponed until the outbreak is over.

Staff:

- Exclude both ill staff and third party contractors from working for at least 48 hours after their last symptoms of nausea, vomiting and/or diarrhea.
- Minimize flow of staff between ill and well residents. Dedicated staff should be assigned to work with either well or sick residents, but should not care for both groups. Restrict floating staff between different facilities to decrease the potential of virus transmission from one facility to another.
- Staff should wash hands thoroughly when entering and leaving every resident room.
- Staff should wear protective gloves when caring for residents who are vomiting, experiencing diarrhea or when touching potentially contaminated surfaces. Gloves should be discarded and hands washed immediately after completing patient care.
- Staff should be prepared with an adequate change of clothes should they become soiled with vomitus or fecal matter.

- Staff should wear protective masks when caring for residents who are vomiting.
- Exclude housekeeping, patient care and maintenance staff from all food service-related tasks. Exclude food handlers from all non food service-related tasks.

Food Service:

- Eliminate shared food items in the facility (i.e. cookies, cake, boxes of bulk candy and popcorn).
- Observe proper cleaning and sanitizing of dispensing utensils (including bins) related to resident water and ice service.

Housekeeping:

- **For outbreaks maintain a minimum twice daily cleaning and sanitizing routine of high touch surfaces located in all public and private rooms (doorknobs, light switches, drinking fountains, faucet handles, railings, etc.)**
- Promptly clean and sanitize common high touch surfaces using a 1:50 dilution (1/3 cup bleach/gallon of water) of chlorine bleach or a U.S. Environmental Protection Agency (EPA) approved disinfectant for use in controlling norovirus outbreaks in accordance with the manufacturer's instructions. A list of EPA approved disinfectants is available at www.epa.gov/oppad001/chemregindex.htm (scroll down and double click on List G).
- Contaminated carpets should be cleaned with detergent and hot water, then disinfected with a hypochlorite solution (if bleach-resistant) or steam cleaned.
- Housekeeping staff should wear gloves and masks when cleaning contaminated or potentially contaminated surfaces or laundry. Contaminated linen and bed curtains should be carefully placed into laundry bags (to prevent generating aerosols) and washed separately in hot water for a complete wash cycle – ideally as a half load for best dilution.

Visitors:

- Consider postponement of visitation until the outbreak is over. If visitation is allowed, visitors should go directly to the person they are visiting and not spend time with anyone else.
- Visitors should not enter the facility if they are sick.
- Visitors should wash their hands thoroughly upon entering and leaving the room or facility.

Facility:

- Post signs at all access points to alert visitors about the outbreak and to encourage thorough hand washing so that individuals do not put themselves at risk. Advise residents, visitors and staff regarding the importance of hand washing to minimize the spread of infectious disease.
- Ensure availability of adequate soap and warm running water for hand washing in all establishment (public, staff, resident) restrooms.
- Provide conveniently located waterless hand sanitizer dispensers for visitor, resident and staff use at the reception desk, and common and resident living areas for use between hand washing.
- Conduct daily wellness checks to track number and identity of any ill residents and staff and provide related census information to the Department.