# of active resident cases: Resp – 0	Date of Report: 2/10/2025	Outbreak Type: ⊠Respiratory ⊠Enteric	Causative Agent: INFLUENZA A NOROVIRUS	End Date: TBA		
Gastro – 4	Case Definition:		(an diamh an in a 24h ann anniad an a	n often lan 25, 2025		
	Gastro - Any staff or resident of FH with two episodes of vomiting and/or diarrhea in a 24hour period on or after Jan 25, 2025. Resp: Any staff or resident of R4 with respiratory symptoms on or after January 27 th , 2025.					

Outbreak Communication & Control Measures

	RSSC	RS2	RS3	RS4	WV2	WV3	WV4	WV5
Sick with Respiratory Symptoms				0				
Sick with Enteric Symptoms	1	2		1				
Outbreak Control Measures in Place	✓	✓	✓	✓	✓	✓	✓	✓
TOTAL								

FOR EVERYONE ENTERING/WORKING THE BUILDING:

- <u>Staff working on R4 MUST be vaccinated or taking Tamiflu to be eligible to work on this RHA. Submit proof of purchase to Lori Rowsell BEFORE</u> your next shift.
- All staff and visitors to the home will enter with clean hands and a clean surgical mask.
- Visitors should postpone all non-essential visits to residents within the outbreak area where possible.
- Ill residents will be isolated using Droplet & Contact precautions. This requires a commode at the bedside if sharing a bathroom.
- Full Droplet & Contact PPE is *required* to enter an ill resident's room (for any length of time) for both confirmed and suspected cases. This is for visitors and staff.
- Staff who work in the affected area are not permitted to work in another healthcare setting for the duration of the outbreak.
- PPE must be donned **before entering** the resident's room and be removed **before exiting**.
- Adhere to the 4 Moments for Hand Hygiene.
- Staff MUST perform a symptom self-assessment prior to reporting to work as per policy*.
- Visitors must not enter the home if they have symptoms (cough, fever, sore throat, runny nose, vomiting, loose bowels, or any other symptoms which may be contagious to others)
- Equipment must be cleaned/disinfected between each resident use with a hospital-grade disinfectant (Oxivir TB).
- Routine practices must be applied to every episode of care. Perform a Point of Care Risk Assessment (PCRA) prior to EVERY interaction with EVERY resident. If Additional Precautions are in place, ensure the additional precautions are followed.
- No food or drink may be stored or consumed in clinical spaces on the RHA. Use the cupboard labelled for staff use in each RHA dining room. Food/drink found at the desk will be discarded.

RESIDENT CARE				
• Eye protection is required when within 6 feet of an	• Residents leaving the RHA (to smoke, for ex.) will wear			
isolated resident (if res is non-compliant with iso face shields may be required at all times on the RHA.	a mask and proceed directly outside. Help residents put on a mask/clean their hands before leaving and			
	upon return.			
• Commode at bedside for the ill residents who share a	All non-emergent resident should be rebooked to			
bathroom	prevent carrying illness into the community			
 Full droplet/Contact PPE is <i>required</i> to enter an ill resident's room (for any length of time) for both confirmed and suspected cases 	STAFF COHORT: Full-time/regular staff will care for ill residents as much as is reasonably possible			
Residents must be assessed for symptoms of illness daily	• Inform ES when iso is D/C so the room can be cleaned.			

	ENVIRONMENTAL SERVICES				
•	High-touch surfaces to be clean & disinfected, and	•	Resident laundry will be delivered by the housekeeper		
	documented twice per shift				
•	Cleaning should always occur cleanest to dirtiest	•	Chlorox 360 resident room once isolation is D/C		
•	No change in laundry wash/handle procedure	•	Clean red/grey bins when iso D/C		
•	ALL home areas must complete 2 passes of high-				
	tough surface cleaning, regardless of the number of				
	cases. Even if there are zero cases, this must be				
	completed during a home wide outbreak.				

	RESIDENT PROGRAMS/ADMISSIONS/PHYSIO				
RHA-based programs with no cross-portering No home wide group activities			No home wide group activities		
•	Café will be closed; café cart may visit unaffected	•	Admit to non-outbreak areas first; admissions to O/B		
	RHAs		floors will be considered case-by-case		
•	Tours may continue if there are no active cases	•	PTA to visit affected area last		

NUTRITION SERVICES			
• Isolated to take meals in their rooms with disp	osable • Offer residents hand hygiene before meals and snacks		
trays/dishes/cutlery, etc.			
• Kitchen Aide will not enter any isolation rooms	•		

RECEPTION				
 No guest meals until outbreak is declared over 	No Nevada ticket sales			
 Residents should not congregate at reception 	 All visitors to sign in/out and are encouraged to wear a mask 			

	SCHEDULING				
•	 GASTRO: ask all staff who call in sick, "Yes or no, do you have any vomiting or loose bowels?" Forward details to IPAC 		Resp: ask all staff who call in sick, "Yes or no, do you have any cough, fever, chills, sore throat, or runny/stuffy nose?" Forward details to IPAC		
•	Await manager approval to schedule additional staff on the outbreak floor.	•			