



Outbreak Number			
Facility Name:			
Address:			
City:		Postal Code:	
IPAC Lead/Designate:		Phone #:	
Attendees:			

Date Outbreak Declared: (yyyy/mm/dd)		Date Checklist Reviewed: (yyyy/mm/dd)	
Pathogen Identified:		Date Reported: (yyyy/mm/dd)	
Define Outbreak Area(s):			
Case Definition:			

Immediate Control Measures

- ☐ 1. Isolate ill residents/patients. Restrict well residents to unit and monitor for symptoms
- ☐ 2. Notify staff of potential outbreak & complete the required forms for Renfrew County and District Health Unit (RCDHU) at <https://www.rcdhu.com/for-professionals/health-care/>
 - ☐ a. Start line list of ill residents/patients
 - ☐ b. Fax line list and initial outbreak notification form to RCDHU at 613-735-3067
 - ☐ c. Call RCDHU to report respiratory outbreak at 613-732-3629 ext. 977. If after hours or weekends, call 613-735-9926.
- ☐ 3. Receive outbreak number from RCDHU (this may occur on Monday if the outbreak is declared on a weekend)
- ☐ 4. Check swab expiry dates. For more PCR Test Kits, complete a [website request](#) from RCDHU
- ☐ 5. Complete multiplex testing on first 4 symptomatic residents, label specimens and lab requisition forms. Include MOH as requesting physician. Refer to the PHO laboratory guidance. <https://www.publichealthontario.ca/en/Laboratory-Services/Test-Information-Index/Virus-Respiratory>
- ☐ 6. Post signage at entrances to notify visitors of an outbreak

Fax #: **613-735-3067**

Outbreak Phone #: **613-732-3629 x 977** After Hours Phone #: **613-735-9926**

Outbreak Email Address for Non-Urgent Matters: **outbreak@rcdhu.com**



Control Measures for Residents/Patients

- ☐ 1. Place well stocked PPE cart outside residents' door and signage on door indicating additional precautions and donning/doffing instructions, test for COVID-19 and other respiratory viruses, and monitor once daily for symptoms. Refer to PIDAC https://www.publichealthontario.ca/en/About/External-Advisory-Committees/PIDAC-IPCPHO_guidance.
- ☐ 2. After discontinuation of additional precautions, residents should wear a well fitted mask if tolerated when receiving care and outside of their room until day 10 of symptom onset.
- ☐ 3. Allow symptomatic residents/patients to attend medically necessary appointments. It is recommended that they wear a mask. The receiving facility should be notified of the outbreak so that appropriate precautions can be taken. Long Term Care Homes must obtain a Medical Transfer (MT) Authorization Number from the Provincial Transfer Authorization Centre (PTAC). Life threatening emergencies do not require authorization
- ☐ 4. Encourage small gatherings for well residents only. Symptomatic residents should not participate in social gatherings with unaffected residents.
- ☐ 5. **If Respiratory:**
 - ☐ Place case on droplet and contact precautions until 5 days after the onset of acute illness or until symptoms have resolved (whichever is shorter)
 - If COVID-19:**
 - ☐ Place case on additional precautions for at least 5 days from symptom onset. If after 5 days, symptoms are improving and no fever is present, additional precautions can be discontinued.
 - If Influenza:**
 - ☐ Plan to begin antivirals quickly for influenza outbreaks because treatment is most effective if started within 48hrs of symptom onset. Prophylaxis should begin as soon as possible to stop progression of the outbreak. (Medical orders for antivirals should be obtained from their own medical staff)
 - ☐ Offer immunization to unimmunized residents

Control Measures for Staff and Volunteers

- ☐ 1. Symptomatic staff should stay at home and not go to work; staff should report being ill to their employer. Begin a line list that meets the case definition.
- ☐ 2. Educate staff/volunteers on the importance of hand hygiene, routine practices, additional precautions, environmental cleaning, and disinfection including a Personal Risk Assessment. <https://www.publichealthontario.ca/en/Health-Topics/Infection-Prevention-Control/Hand-Hygiene>
- ☐ 3. Complete audits on hand hygiene and donning/doffing PPE

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☐ **4. If Respiratory or COVID-19:**

☐ Exclude ill staff until respiratory symptoms have been improving for 24 hours (48 hours for gastrointestinal symptoms) and no fever is present. Staff should adhere to workplace measures for 10 days following illness to reduce risk of transmission.

If Influenza:

- ☐ Offer influenza immunization to all unvaccinated staff/volunteers
- ☐ Encourage antiviral prophylaxis until two weeks after vaccination for unvaccinated staff and volunteers. (note that it takes about two weeks to develop antibodies for the best protection) Consult their individual health care provider for decisions surrounding antivirals.
- ☐ Inform unimmunized staff that during an influenza outbreak they may be given the option of taking antivirals for the duration of the outbreak to continue their workplace duties. The RCHDU and facility will determine staffing needs on a case-by-case basis if staff are unable or refuse to take antivirals.

If staff are working in other facilities during influenza outbreak:

Unimmunized staff not receiving prophylactic therapy should wait for one incubation period (3 days) from the last day that they worked at the outbreak facility prior to working in a non-outbreak facility, to ensure they are not incubating influenza (if permitted in internal policies of non-outbreak facility).

Refer to: <https://www.ontario.ca/files/2025-02/moh-recommendations-for-outbreak-prevention-and-control-in-institutions-and-cls-en-2025-02-28.pdf>

- ☐ **5.** Plan for staff cohorts to care for asymptomatic residents before symptomatic residents when possible; assign staff to a floor/unit that either contains or does not contain active cases.
- ☐ **6.** Notify outside agency staff contracted to work in the facility of the outbreak.

Control Measures for Visitors

- ☐ **1.** Recommend ill visitors/caregivers not to enter the facility
- ☐ **2.** Direct visitors/caregivers to go to the reception desk prior to visiting residents.
- ☐ **3.** Encourage general visitors to postpone all non-essential visits within the outbreak area for the duration of the outbreak.
- ☐ **4.** Inform essential caregivers/visitors visiting symptomatic residents to wear PPE and to perform hand hygiene.

Environmental Cleaning

- ☐ **1.** Increase frequency of cleaning and disinfection of high touch surfaces
- ☐ **2.** Increase cleaning and disinfection of ill resident/patient's immediate environment
- ☐ **3.** Promptly clean and disinfect surfaces contaminated by stool and vomit

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- ☐ 4. Dedicate routine equipment to individual residents if possible. If the equipment is shared, disinfect before it is used for another resident.
- ☐ 5. Use appropriate products for cleaning and disinfection – refer to [Best Practices for Environmental Cleaning for Prevention and Control of Infections in All Health Care Settings](#) (check Public Health Ontario website for the most up- to-date version)
- ☐ 6. Ensure cleaning staff use gloves and masks prior to entering the room of an ill resident. Eye protection should be used within 2 meters of ill residents. Gowns can be used to protect uncovered skin and clothing if splashing is likely to occur. Remove PPE once task is completed upon exiting room. Hand hygiene should be performed after PPE is removed.

Communication and Declaring Outbreak Over

- ☐ 1. Declare the outbreak over in consultation with RCDHU.
(RCDHU will provide the facility with an Outbreak Withdrawal Notification letter for their records).
- ☐ 2. Deciding an outbreak over generally follows this example: no new resident cases in the 8 days from the onset of symptoms of the last resident case, **OR** 3 days from the last day worked of an ill staff (whichever is longer). This “8-day rule” is based on the period of communicability (5 days) and an incubation period (3 days) for influenza and in general may apply to many other respiratory viruses associated with respiratory infection outbreaks as well.

Date (yyyy/mm/dd)

IPAC Lead/Designate Signature

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