



# Gastroenteritis Outbreak Toolkit

Guidance for Acute Gastroenteritis and Norovirus  
Outbreak Management in Long-Term Care Facilities

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# Gastroenteritis Outbreak Response Checklist

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When a gastrointestinal outbreak is identified, use this checklist as a guide to prevent further disease transmission.

## NOTIFY

- ☐ Notify Washington County Public Health of a suspect or confirmed outbreak immediately at 503-846-3594 and provide information about ill residents and staff.

## IMPLEMENT CONTROL MEASURES

- ☐ Enforce strict handwashing with soap and water (no hand sanitizer!)
- ☐ Clean and sanitize/disinfect your facility
  - Have staff use PPE
  - Use EPA-approved sanitizer or bleach solution
  - Increase surface wipe down using EPA approved sanitizer to 4 times in 24-hour period
  - Deep-clean bathrooms and frequently touched surfaces
- ☐ Isolate ill residents
- ☐ Exclude ill staff until symptom-free for 48 hours
- ☐ Exclude ill visitors until symptom-free for 48 hours
- ☐ Cohort staff assignments and equipment
- ☐ Cancel group activities (including communal eating)
- ☐ Discontinue admissions and transfers
- ☐ Notify and limit visitors (use signage)

## INSTITUTE SURVEILLANCE (Track new cases)

- ☐ Implement or continue active surveillance by documenting the symptoms and personal information of at least 10 ill residents and/or staff in the **Gastroenteritis Case Log**. After reporting the first 10 cases, report a daily count of new illnesses and hospitalizations.

## CLOSING THE OUTBREAK

- ☐ Maintain contact with Washington County Public Health for the duration of illness in your facility plus two incubation periods (generally 4 days for noro-like illness). After confirmation from Washington County Public Health, declare the outbreak over.

## When to Call Washington County Public Health

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Long-term care facilities are required to report all acute gastroenteritis outbreaks to Washington County Public Health under Oregon Administrative Rule 333-018-000.

Triggers to call Washington County Public Health:

- **Two or more residents and/or facility staff with acute gastroenteritis** (i.e., nausea, vomiting and/or diarrhea) within 3 days of each other.
- **One or more residents and/or facility staff with bloody stool** with or without a high fever.
- **Unusually high absenteeism by staff/volunteers** complaining of gastrointestinal symptoms.
- **Reports of severe illness resulting in hospitalization or death**

**Washington County Public Health Disease Control and Prevention should be immediately notified of every suspected or confirmed acute gastroenteritis outbreak in a long-term care facility.** Oregon law requires long-term care facilities to report communicable disease outbreaks to local public health authorities as soon as possible (OAR-333-018-000). Washington County Public Health will notify the Oregon Health Authority of suspected or confirmed outbreaks.

## What to Report

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When you call Washington County Public Health, you will be asked to provide the following information:

- Facility name, address, and contact information
- Total number of residents, staff, and food handlers in your facility
- Total number of **ill** residents, staff, and food handlers
- Symptoms, onset date, and duration of illness
- Number of hospitalizations and deaths
- Total number of floors, units, dining rooms, kitchens, wings and/or buildings
- Total number of **affected** floors, units, wings and/or buildings
- Number of staff who float between floors or units
- Positive lab results from any resident and processing facility

## What to Return

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1. **Gastroenteritis Case Log**
2. **Oregon Health Authority's Gastroenteritis Control Measures Report**

Washington County Public Health Disease Control and Prevention: **503-846-3594**  
This number is available to facilities to report outbreaks or request consultation  
24 hours a day, 7 days a week.

## Tri-County LTCF Gastroenteritis Outbreak Surveillance Data

Norovirus season lasts from August of one year to July of the next. In the past 7 norovirus seasons, August 2014 to July 2021, there were 198 gastrointestinal outbreaks reported in long-term care facilities (LTCFs) in the Greater Portland Area, an area that includes Clackamas, Multnomah, and Washington Counties.

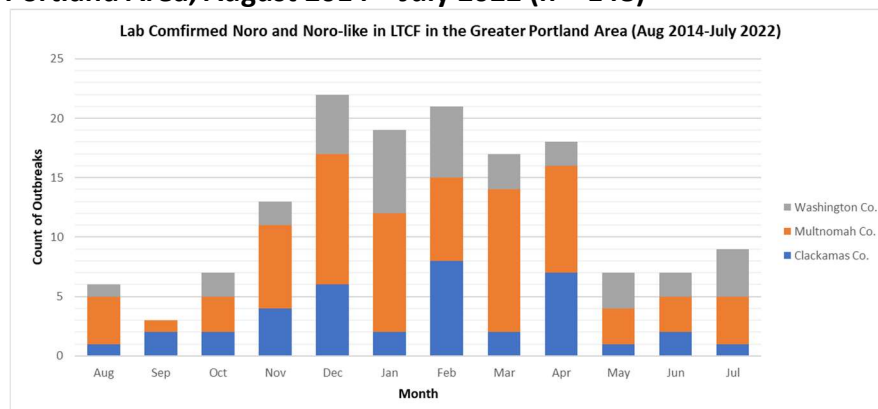
**Table 1. Acute Gastroenteritis (AGE) Outbreaks in Long-Term Care Facilities in the Greater Portland Area, August 2014– July 2022 (n = 211)**

Season	Total No. of AGE Outbreaks	% Of AGE Outbreaks Caused by Norovirus and Noro-Like	Other Etiology causing AGE ‡ (not Noro or Noro-Like)	Case Count (Noro/Noro-like)
2014-2015	17	65%	29% (Unknown), 9% (campylobacter)	337
2015-2016	41	73%	22% (Unknown), 5% (sapovirus)	721
2016-2017	40	70%	28% (Unknown), 3%(Rotavirus)	664
2017-2018	29	70%	30%(Unknown)	520
2018-2019	35	74%	20% (Unknown), 3%(Rotavirus)	772
2019-2020	23	65%	35% (Unknown)	381
2020-2021	13	38%	62% (Unknown)	185
2021-2022	13	100%	N/A	285
	<b>211</b>			<b>3865</b>

‡ Other pathogens that cause AGE outbreaks include: sapovirus, rotavirus, campylobacter. AGE LTCF outbreaks with norovirus-like symptom profiles and incubation periods no longer require laboratory-confirmation.

In the past 8 seasons, 70% of all reported Tri-County LTCF AGE outbreaks were caused by norovirus or if not laboratory-confirmed, were deemed noro-like based on symptoms and incubation, with an average of 19 norovirus/noro-like outbreaks and 284 confirmed cases in facility residents, staff, and volunteers per season. We typically see most outbreaks reported from November to April, with a peak in the winter months.

**Figure 1. Lab-Confirmed Norovirus and Noro-Like Outbreaks\* in Long-Term Care Facilities in the Greater Portland Area, August 2014 – July 2022 (n = 148)**



\*An outbreak is defined as 2 or more residents and/or facility staff with lab-confirmed norovirus or vomiting and/diarrhea within 4 days of one another (noro-like).

## Outbreak Prevention and Detection

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Most acute gastroenteritis outbreaks are caused by norovirus. If you covered a pinhead with norovirus, there would be enough viral particles to infect a 1,000 people. Due to the highly infectious nature of norovirus, it is essential to have an established outbreak response plan to combat a prolonged outbreak among facility residents and staff.

### 1. Know your baseline to detect an outbreak early.

Keep accurate, daily health records of each ill resident to be able to identify early symptoms of norovirus or other gastrointestinal illnesses. Alert Washington County Public Health when two or more facility residents and/or staff with similar acute gastroenteritis symptoms are identified within 3 days of one another.

Your facility should encourage staff members to report any acute gastroenteritis illnesses among residents immediately to your infection prevention team. For any questions about illnesses, contact Washington County Public Health.

### 2. Enforce facility staff sick policy.

Norovirus is primarily transmitted person-to-person. Ask ill staff members to stay home from work for 48 hours after gastroenteritis symptoms (i.e., vomiting and/or diarrhea) have resolved.

## Outbreak Response and Reporting

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### We think we have an outbreak. Now what?

1. **Notify** Washington County Public Health immediately about suspected gastroenteritis outbreaks at **503-846-3594** (24/7). Please leave a voice message if not answered by an operator.

### 2. Implement control measures.

Once an outbreak is identified, control measures should be implemented to prevent further spread. When thinking about appropriate control measures, remember to consider all individuals who enter your facility, including residents, staff, visitors, and volunteers.

The control measures listed here focus on norovirus outbreaks, but similar measures are helpful in controlling other acute gastroenteritis outbreaks. We encourage your facility to implement as many of the control measures listed as possible.

#### a) Personal hygiene.

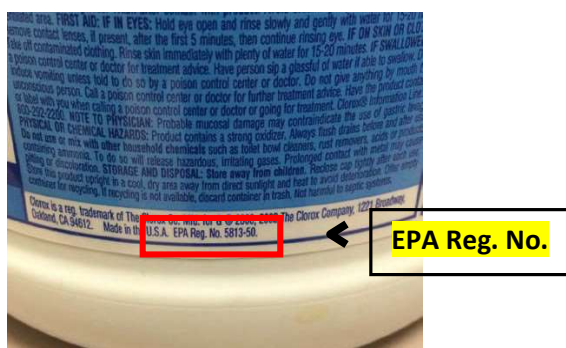
- Enforce frequent handwashing with soap and water among facility residents, staff, and food handlers. Discourage the use of alcohol-based hand sanitizers.

- Encourage the use of proper Personal Protective Equipment (PPE), such as gloves, masks, and gowns, for all staff members working directly with ill residents and/or cleaning bodily fluids (i.e., vomit or diarrheal accidents around the facility) until ill residents are symptom-free for 48 hours. This includes staff members who are handling linens and other laundry. Remove protective equipment before leaving the rooms of ill residents and wash hands with soap and water immediately.
- Ensure that food handlers are using gloves when serving ready to eat foods.

**b) Clean and sanitize/disinfect the facility.**

Your facility will first need to be cleaned and then disinfected, as outlined below.

- Clean up diarrhea and vomiting accidents promptly and appropriately. Remember to clean both the affected and surrounding area.
- Anything soaked with vomit or diarrhea should be handled using appropriate PPE (gloves, masks, gowns).
- Use a chlorine bleach solution with a concentration of 1000-5000 ppm (5-25 tablespoons of household bleach [5.25%] per gallon of water) or 1.5 cups of bleach to 1 gallon water. Use bleach solution within 24 hours of mixing, with a contact time of at least 5 minutes. Change mop heads between batches of bleach.
- You can also use a disinfectant registered as effective against norovirus by the Environmental Protection Agency (EPA). For more information, see [List G: Antimicrobial Products Registered with EPA with Claims Against Norovirus](#).
- To verify if your disinfectant is registered as effective against norovirus, send a picture of the front of the cleaner with the product name clearly visible or a close up of the EPA Reg. No., often located at the bottom of the label on the back of the bottle after the company address and copyright year, to Washington County Environmental Health.



- You can also verify whether the product is registered by visiting
  - [EPA's Pesticide Product and Label System website](#)



- Leave the surface wet for at least 5 minutes or follow the directions on the commercial cleaner to allow sufficient time for the product to kill the entire virus (allowing to air dry unless otherwise directed on the product)
- Disinfect all equipment after use with ill residents, particularly if the equipment will be used with well residents.
- Sanitize frequently touched surfaces every few hours, to include chair handles and backs (including shower chairs), door handles, counters, hand railings, bed linens (as frequent as possible), lifts, and remote controls. Consider making water fountains and ice machines less accessible.

<b>Sanitizing/Disinfecting Specific Items and Locations</b>	
<b>Bed linens, curtains, pillows with waterproof covers, and non-disposable mop heads</b>	<ol style="list-style-type: none"> <li>1. Place contaminated objects into washing machines without mixing with other objects and launder with temperatures at 140-160°F</li> <li>3. Decontaminate pillows with waterproof covers using an EPA approved disinfectant</li> </ol>
<b>Carpets, upholstery (i.e., couches) and other pillows</b>	<ol style="list-style-type: none"> <li>1. Use an absorbent material for spills</li> <li>2. Wash with hot water and soap</li> <li>3. Use an approved disinfectant for the appropriate contact time</li> <li>4. Steam cleaners may be used at 158°F for five minutes or 212°F for one minute</li> <li>5. <b>Do not use a vacuum cleaner!</b></li> </ol>
<b>Furniture, floors, and other hard non-porous surfaces</b>	<ol style="list-style-type: none"> <li>1. Remove vomit and diarrhea with an absorbent material</li> <li>2. Clean the contaminated furniture or other hard surfaces with detergent and hot water</li> <li>3. Decontaminate with an approved disinfectant.</li> </ol>
<b>Fixtures and fittings in toilet areas</b>	<ol style="list-style-type: none"> <li>1. Remove vomit and diarrhea with an absorbent material</li> <li>2. Clean with detergent and hot water</li> <li>3. Decontaminate with a bleach solution or other approved product.</li> </ol>
<b>Food contact area in the kitchen</b>	<ol style="list-style-type: none"> <li>1. Remove vomit and diarrhea with an absorbent material.</li> <li>2. Wash with soap and hot water</li> <li>3. Decontaminate the area surrounding the vomit or diarrhea accident with an approved disinfectant</li> <li>4. Allow dry 5 minutes</li> <li>5. Wash disinfectant off with soap and hot water</li> <li>6. Rinse with plain water</li> <li>7. Sanitize with 50-200 ppm chlorine or approved sanitizer for food contact surfaces</li> <li>8. Throw out any exposed food</li> </ol>

The Oregon Patient Safety Commission and the Oregon Healthcare Associated Infections Program at the Oregon Health Authority created training videos about appropriate infection prevention and cleaning for norovirus outbreaks. Videos are available in English and Spanish:

English Infection Prevention Videos: [www.bitly.com/IPTrainingVideos](http://www.bitly.com/IPTrainingVideos)

Spanish Infection Prevention Videos: [www.bitly.com/IPTrainingVideosEspanol](http://www.bitly.com/IPTrainingVideosEspanol)

Washington County Environmental Health is available for all questions related to cleaning your facility: **503-846-8722**.

**c) Isolate ill residents.**

Place all sick residents into the same room or wing. Isolate ill residents until asymptomatic for 48 hours.

**d) Exclude ill staff.**

Sick staff members, including kitchen staff, with acute gastroenteritis symptoms should not be allowed to work until asymptomatic for 48 hours. Send sick staff home.

**e) Exclude ill visitors.**

Ask sick visitors to stay home until symptom-free for 48 hours.

**f) Cohort staff assignments and equipment.**

Assign some nursing staff to work with ill residents only. Do not allow staff working with ill residents to work with well residents. Exclude non-essential and floating staff from working with ill residents. Restrict food services personnel to the kitchen. If food handlers are delivering meals to residents, reassign this role to the CNAs for the duration of the outbreak. Assign patient-care equipment to ill residents only; do not use with well residents. If you are unable to cohort equipment, make sure to properly clean and disinfect it (see above) after use with sick residents.

**g) Cancel group activities.**

Stop group activities until the outbreak is declared over. Stop all dining room services (including communal meals) and social/recreational events to prevent further spread.

**h) Discontinue admissions and transfers.**

Stop all admissions to and transfers from areas of your facility with ill residents until the outbreak is declared over by Washington County Public Health. This includes the transferring of residents without symptoms. The outbreak will be declared over when the last resident or staff member with vomiting or diarrhea has been symptom-free for 48

hours. If you must transfer an ill resident, notify the receiving facility about the illness prior to transfer.

**i) Notify visitors.**

Post notices on entrance doors to warn visitors of the outbreak (please ask us if you need a notice to use). Ask visitors to wash their hands with soap and water before entering and exiting your facility. Do not permit children or elderly visitors in the facility, particularly the rooms or wings with ill residents, until the outbreak is over.

Use the **Gastroenteritis Control Measures Report** to track all the control measures implemented by your facility during the outbreak.

**3. Test.**

Stool testing should occur if ill residents or staff visit their healthcare provider. If testing is completed on ill residents or staff, please provide the name of the provider and the date of testing.

If patients' symptoms or severity (e.g., little vomiting; presence of bloody diarrhea; illness lasting more than a couple of days) suggest the illness may not be caused by norovirus, please discuss with Washington County the possibility of laboratory testing for other potential causes and encourage ill persons to visit their medical provider.

**4. Institute surveillance.**

Fill out the **Gastroenteritis Case Log** to track type and duration of symptoms and, disease onset dates for ill residents and staff. The line list will help you know when an outbreak is ending as well as when to relax restrictions for activities and visitors. You are only required to fill out demographic (name, sex, date of birth) information for the first 10 ill cases at your facility. After that, we will need a daily count of the number of new cases that fit the case definition provided by Washington County Public Health.

Maintain contact with Washington County Public Health for the duration of illness in your facility (generally when the last case is symptom-free for 2 incubation periods or 4 days). After confirmation from Washington County Public Health, declare the outbreak over.