



OPERATIONAL DIRECTIVE

Enquiries to: OzFoodNet Staff — **OD number:** OD 0465/13
Communicable Disease Control Directorate
Phone number: 9388 4811 or 9388 4872 **Date:** 24 Oct 2013
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Subject: **Guidelines for the prevention and management of gastroenteritis outbreaks in residential care facilities**

INTRODUCTION

Gastroenteritis outbreaks are relatively common in institutional settings including residential care facilities (RCFs), hospitals, childcare centres and schools. Based on reports to the Communicable Disease Control Directorate (CDCD), residential aged care facilities are the most frequently identified institutional setting for outbreaks of gastroenteritis and norovirus is the commonest cause of these outbreaks.

Residents in long-term care facilities represent a vulnerable population and commonly experience high attack rates during viral gastroenteritis outbreaks. Several factors contribute to this, including the low infectious dose of norovirus (<10 viral particles required for transmission), persistence of the virus in the environment and prolonged viral shedding after recovery, in the context of shared toileting and eating facilities among residents who are often immobile, incontinent and/or immunocompromised.

Control of norovirus (and occasionally rotavirus) outbreaks requires consistent implementation of infection control measures. Transfer of residents or patients between institutions and hospitals has important implications for infection control at the receiving hospital/institution or for the health of the individual, depending on whether the transferee has gastroenteritis, or there is an outbreak at the receiving institution.

Because of these issues, the Department has developed *Guidelines for the prevention and management of gastroenteritis outbreaks in residential care facilities*.

AIM

The aim of this Operational Directive is to:

- state the purpose of the *Guidelines*.
- describe the requirements for reporting to the Department of Health.
- clarify the roles of the various sections of the Department of Health and local government in the public health follow-up and management of outbreaks in RCFs.

The purpose of the Guidelines

In response to this public health issue, the Department of Health developed the *Guidelines for the management of gastroenteritis outbreaks in residential care facilities* in 2008. A revised second edition of the *Guidelines* has been produced in 2013, and is the subject of this Directive. The

Guidelines are a tool to aid early recognition of and timely and effective response to gastroenteritis outbreaks. They are intended as a guide for all staff members working within RCFs. There is a large emphasis on early identification of the outbreak and appropriate infection control, as well as a section on collection of specimens for laboratory testing. Easy to use checklists and a quick reference flow chart have been incorporated into the *Guidelines*. They also contain other resources such as posters, signage and forms to assist staff during an outbreak. An electronic copy of the *Guidelines* can be downloaded from:

http://www.public.health.wa.gov.au/3/1471/2/gastroenteritis_in_residential_care_facilities.pm

REQUIREMENTS FOR REPORTING OUTBREAKS TO THE DEPARTMENT OF HEALTH

Staff at RCFs are responsible for monitoring and managing outbreaks within their own facility. They are encouraged to notify the Department of Health, via their local Public Health Unit (PHU) staff, of the following:

1. When a gastroenteritis outbreak occurs in the facility (using the *Initial notification form*).
2. Daily summary numbers of ill residents and staff, their symptoms and the results of laboratory tests (using the *Daily cumulative case summary form*).
3. If they have concerns about managing the outbreak, including escalating case numbers.
4. The occurrence of particular sentinel events, as listed below, should be reported within 24 hours:
 - a. death of a resident or staff member who is part of the outbreak
 - b. any sudden increase in number of cases over a 24 hour period
 - c. When greater than 50% of residents or 20% of staff are affected
 - d. a pathology result that identifies any of the following specific enteric infections or associated toxins:

Salmonella; Campylobacter; Clostridium perfringens; Shiga/Vero toxin-producing E. coli (STEC, VTEC); Listeria; Staphylococcus aureus; Bacillus cereus.

If any of the sentinel events occur on a weekend or a public holiday (only), the Department of Health's on-call duty officer should be contacted on 9328 0553.

5. Final numbers and the results of all laboratory tests once the outbreak is over (using the *Final case summary form*).

ROLES OF THE VARIOUS SECTIONS OF THE DEPARTMENT OF HEALTH

Outbreak information is collected by WA Health to:

- Monitor the occurrence of gastroenteritis outbreaks in residential settings.
- Help to determine the most likely cause of the outbreak and its means of transmission (for example, bacterial and food-borne versus viral and person-to-person spread) and to offer outbreak management advice to the RCF accordingly.
- Determine if an environmental health investigation is warranted to help identify the source, contain the outbreak and prevent further transmission, particularly where a food-borne source is suspected.
- Assist with the development of future public health policy.

WA Health reports information on outbreaks of gastroenteritis in residential aged care settings to the Commonwealth Department of Health and Ageing.

PUBLIC HEALTH UNIT STAFF

1. PHU staff may provide infection control advice to the RCF and review practices if there is an escalation of case numbers or if the outbreak is prolonged.
2. Upon receipt of a report of a food handler with gastroenteritis at the facility, PHU staff should follow-up to ensure that the food handler has been excluded from work appropriately as per the Exclusion Guidelines for Patients with Enteric Infections and Their Contacts (OD 0303/10).
3. PHU staff should report all sentinel events (see above) to OzFoodNet staff at CDCD by phone or email, as they arise.
4. PHU staff should notify OzFoodNet staff at CDCD if a foodborne outbreak is suspected. Indications that an outbreak may be foodborne include isolation of a foodborne pathogen, outbreaks where diarrhoea is the only or dominant symptom, and outbreaks where cases mainly have onset dates over one or two days. PHUs may assist in the investigation of suspected foodborne outbreaks in collaboration with CDCD, the Food Unit and local government, if appropriate.
5. The PHU should forward an *Initial notification form* and most recent *Daily cumulative case summary form* for all outbreaks to OzFoodNet staff at CDCD at the end of specified fortnightly periods, for reporting to the Commonwealth Department of Health and Ageing.
6. The *Final case summary form* should be forwarded to OzFoodNet staff at CDCD at the conclusion of each outbreak, along with all pathology results.

THE COMMUNICABLE DISEASE CONTROL DIRECTORATE AND OZFOODNET

1. CDCD should provide a summary of outbreaks in RCFs to the Commonwealth Department of Health and Ageing on a fortnightly basis, and as requested.
2. Upon receipt of notification of any potentially foodborne pathogen isolated from specimens taken from cases in an outbreak, or when a foodborne outbreak is suspected based on epidemiological evidence, OzFoodNet staff should contact the Food Unit. OzFoodNet will conduct a foodborne outbreak investigation in collaboration with the RCF, PHU, the Food Unit and local government officers as appropriate, according to the *Guidelines for the Environmental Health Investigation of a Food-borne Outbreak*: http://www.public.health.wa.gov.au/3/1627/2/foodborne_disease_outbreak_investigation.pm.

THE FOOD UNIT

The Food Unit will collaborate with CDCD and local government Environmental Health Officers in conducting an environmental investigation where indicated for a suspected foodborne outbreak.

FORMS

Copies of the required forms can be found at: http://www.public.health.wa.gov.au/3/1471/2/gastroenteritis_in_residential_care_facilities.pm.

More information

For more information contact OzFoodNet, CDCD, on (08) 9388 4811 or 9388 4872, or the relevant PHU (see below).

Department of Health Public Health Units:

Outside the Perth metropolitan area

Public Health Unit	Phone	Fax
Coastal and Wheatbelt (Northam)	9622 4320	9622 4342
Goldfields (Kalgoorlie)	9080 8200	9080 8201
Great Southern (Albany)	9842 7525	9842 7534
Kimberley (Broome)	9194 1630	9194 1631
Midwest (Geraldton)	9956 1985	9956 1991
Pilbara (South Hedland)	9158 9222	9158 9253
South West (Bunbury)	9781 2355, 9781 2359	9781 2382

In the Perth metropolitan area

Public Health Unit	Phone	Fax
North Metropolitan	9222 8588	9222 8599
South Metropolitan	9431 0200	9431 0223

Professor Bryant Stokes
A/DIRECTOR GENERAL
DEPARTMENT OF HEALTH WA

This information is available in alternative formats on request for a person with a disability.