

High-Level Summary of Outbreak Control Measures for LTCHs, RHs, CLSs

Outbreak Definitions		Suspect	Confirmed	
		Respiratory	<ul style="list-style-type: none"> Two patient/resident cases of acute respiratory infection (ARI) with symptom onset within 48 hours with an epidemiological link (e.g., unit, floor) suggestive of transmission in the setting AND testing is not available or all negative. 	<ul style="list-style-type: none"> Two or more patient/resident cases of test-confirmed acute respiratory infection (ARI) with symptom onset within 48 hours and an epidemiological link (e.g., unit, floor) suggestive of transmission within the setting. OR Three or more patient/resident cases of ARI with symptom onset within 48 hours and an epidemiological link suggestive of transmission within the setting AND testing is not available or all negative.
Enteric		Suspect	Confirmed	
		<ul style="list-style-type: none"> If an outbreak is suspected, notify your local health unit to support you with the investigation and management. 	<ul style="list-style-type: none"> Two or more cases of gastroenteritis with a common epidemiological link with initial onset within a 48-hour period. 	
Outbreak Type		Long-Term Care & Retirement Homes	Congregate Living Settings	
Case Management	COVID-19	Case Isolation		
		<ul style="list-style-type: none"> At least 5 days from symptom-onset and until symptoms improving for 24 hrs (48 hrs if gastrointestinal symptoms) and no fever. After discontinuation of isolation, case should wear a well-fitted mask when receiving care or outside of their room until day 10 from symptom onset. If case cannot tolerate a mask, they should remain in isolation for 10 days from symptom onset. 	<ul style="list-style-type: none"> At least 5 days from symptom-onset or specimen collection date (whichever is applicable/earlier) and until symptoms are improving for 24 hrs (48 hrs if gastrointestinal symptoms) and no fever. Until at least day 10, case should wear a mask at all times, except when eating & sleeping, during which times they should physical distance where possible. 	
		Additional Precautions		
		<ul style="list-style-type: none"> Droplet + Contact: Mask, eye protection, gown, and gloves. Universal Masking: Consider for all suspect and confirmed COVID-19 outbreaks. 		
		Assessment & Monitoring		
		<ul style="list-style-type: none"> Assess cases twice daily to identify new and worsening symptoms. 		
		Antivirals		
		<ul style="list-style-type: none"> Consult with the resident physician or pharmacist about treatment of COVID-19 cases. 		
		Respiratory (non-COVID-19)	Case Isolation	
			<ul style="list-style-type: none"> 5 days from symptom-onset date or until symptom-free, whichever is sooner. May be extended at investigator's discretion. Residents are encouraged to wear a well-fitted mask, if tolerated, when receiving care and when outside of their room until day 10 from symptom onset. 	
Additional Precautions				
<ul style="list-style-type: none"> Droplet + Contact: Mask, eye protection, gown, and gloves. Universal Masking: Consider for all suspect and confirmed respiratory outbreaks. 				
Assessment & Monitoring				
<ul style="list-style-type: none"> Assess cases at least once daily to identify new and worsening symptoms. 				
Antivirals				
<ul style="list-style-type: none"> Consult with the resident physician or pharmacist about treatment of influenza cases. 				
Enteric	Case Isolation			
	<ul style="list-style-type: none"> Until 48 hours after symptom resolution. Note: The duration of isolation should be extended to 72 hours after symptom resolution for Norovirus outbreaks. 			
	Additional Precautions			
	<ul style="list-style-type: none"> Contact: Gown & gloves. Note: Medical mask & eye protection should be used if there is a risk of aerosolization (i.e. projectile vomiting or explosive diarrhea). 			
Outbreak Type		Long-Term Care & Retirement Homes	Congregate Living Settings	
Contact Management	Respiratory (Including COVID-19)	Roommate Close Contacts	Asymptomatic Close Contacts (COVID-19)	
		<ul style="list-style-type: none"> Monitor once daily for symptoms, twice daily if feasible and close contact of COVID-19. Roommates who remain in the same room as the case - on Additional Precautions for 5 days from the case's symptom onset. Mask if tolerated while receiving care and when outside of room for 10 days from the case's symptom onset. Use of physical barriers to create 	<ul style="list-style-type: none"> Instruct to wear a mask at all times, except for eating and sleeping, and distance from others for 7 days from last exposure to the case. Cohort separately from non-exposed residents and isolate and test promptly if symptoms start. 	

		<p>separation between case and roommate is recommended (i.e. curtain, cleanable barrier).</p> <ul style="list-style-type: none"> ✓ Roommates who can be moved to a separate room from the case - on Additional Precautions for one incubation period (5 days if pathogen unknown). Mask if tolerated while receiving care and when outside of their room for 7 days from the case's symptom onset. 	
		<p>Non-Roommate Close Contacts</p> <ul style="list-style-type: none"> ✓ Monitor once daily for symptoms. ✓ Strongly encourage to wear a mask if tolerated when receiving care and when outside of their room for 7 days following last exposure. 	
		<p>Antivirals</p> <ul style="list-style-type: none"> ✓ Initiate antiviral prophylaxis for well residents during confirmed influenza outbreaks, per PHU direction/facility policy. ✓ Important: Only some settings are eligible for antiviral prophylaxis during influenza outbreaks. Antiviral prophylaxis should be addressed in facility policies to ensure there are no delays in providing medication during an outbreak. ✓ For more information, refer to Appendix B in the Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings. 	
Symptomatic Staff	Type of Illness	Long-Term Care & Retirement Homes & Congregate Living Settings	
	Respiratory	<ul style="list-style-type: none"> ✓ Staff with new & unexplained respiratory symptoms should be directed to self-isolate until symptoms have been improving for 24 hours and no fever present. 	
	Gastroenteritis	<ul style="list-style-type: none"> ✓ Staff with new & unexplained enteric symptoms should be directed to self-isolate until 48 hours after symptoms resolve. This may be modified if the pathogen is known. 	
Outbreak Testing	Outbreak Type	Long-Term Care & Retirement Homes	Congregate Living Settings
	Respiratory	<ul style="list-style-type: none"> ✓ Refer to PHOL test information index for more information on specimen collection, storage, and transportation: Respiratory Outbreaks 	<ul style="list-style-type: none"> ✓ Consult with your local PHU for outbreak testing recommendations.
	Enteric	<ul style="list-style-type: none"> ✓ Refer to PHOL test information index for more information on specimen collection, storage, and transportation: Enteric Outbreaks. 	
Working at Other Facilities	Outbreak Type	Long-Term Care & Retirement Homes & Congregate Living Settings	
	All Outbreaks (except influenza)	<ul style="list-style-type: none"> ✓ Well staff that work in multiple settings/locations should advise the other settings/locations of the outbreak to determine if they should continue working in multiple places. 	
	Influenza	<ul style="list-style-type: none"> ✓ The influenza vaccination status or antiviral use status of unvaccinated staff should be considered in the decision. Generally, vaccinated staff and staff who are taking antivirals may work at multiple facilities. 	
Outbreak Resolution	Outbreak Type	Long-Term Care & Retirement Homes & Congregate Living Settings	
	Respiratory	<p>Whichever is longer:</p> <ul style="list-style-type: none"> ✓ 8 days after symptom onset in last resident case <p style="text-align: center;">-OR-</p> <ul style="list-style-type: none"> ✓ 3 days from the last day of work of an ill staff case if they worked while infectious. 	
	Enteric	<ul style="list-style-type: none"> ✓ 48 hours from symptom resolution in the last case. <p style="text-align: center;">-OR-</p> <ul style="list-style-type: none"> ✓ No new cases after one incubation period plus one infectious period. 	
Outbreak Review	<ul style="list-style-type: none"> ✓ What was handled well and what could be improved in managing future outbreaks? ✓ Identify recommendations for future preventive actions and/or necessary policy/protocol changes. ✓ Identify possible reasons for the outbreak and steps to prevent similar outbreaks in the future. 		

Reference: [Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings Ministry of Health Effective: October 2024](#)