



# Outbreak Control Package for Child Care Centres

Updated June 2024

The information in this package reflects guidance current as of June 2024. As the guidance may change, please consult with the Ministry of Health, Ministry of Education, or a Public Health Inspector for current direction.

## Part 1 – Consultation

Facility: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Facility Contact: \_\_\_\_\_ Position: \_\_\_\_\_

## Outbreak Consultation

Consultation Date: \_\_\_\_\_ Time: \_\_\_\_\_  am  pm

Reported by: \_\_\_\_\_ Position: \_\_\_\_\_

Notification received by: \_\_\_\_\_  DHCL Date: \_\_\_\_\_

Investigating ID PHI: \_\_\_\_\_ Area PHI notified:  yes  no  n/a

## Population at Risk

Number of ill children	Total children at risk	Number of ill staff	Total staff at risk

Note: Staff includes part-time staff, volunteers, students, etc.

## Outbreak Assessment

Contact the Health Department immediately when there are two or more children/staff who are linked cases and experiencing symptoms of illness.

### Respiratory outbreak

A respiratory outbreak is suspected when there are two linked cases and an outbreak may be declared when additional cases occur within a **48-hour** period.

## Enteric outbreak

An enteric outbreak will be declared when there are two or more linked "cases" within a **48-hour** period. A "case" would be any child or staff experiencing 2 or more episodes of vomiting and/or diarrhea within a 24-hour period.

A Public Health Inspector (PHI) will be assigned to manage the outbreak (or suspect outbreak).

Date of first case: \_\_\_\_\_ Time: \_\_\_\_\_  am  pm

Date of most recent case: \_\_\_\_\_ Time: \_\_\_\_\_  am  pm

Laboratory results:  yes  no  unknown/pending

If yes, results: \_\_\_\_\_ Date specimen(s) submitted: \_\_\_\_\_

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## Case Definition

Based upon the above symptoms, the **case definition** is:

Any person who attends or works at the facility and develops **or** is experiencing one or more of the following symptoms starting from \_\_\_\_\_ (onset date):

\_\_\_\_\_  
\_\_\_\_\_

Note: The case definition may change as new information is gathered.

Type of illness:  Respiratory  Enteric  Non-reportable

**Respiratory outbreak declared** Date: \_\_\_\_\_

All symptomatic children/staff are to follow direction for exclusion and assessment as per the [Ontario Self Assessment Tool](https://www.ontario.ca/self-assessment/) (https://www.ontario.ca/self-assessment/). Exclusion times may be longer than those set out in the screening tool depending on the symptoms present and/or if the centre is in outbreak.

## Exclusions Related to Respiratory Symptoms:

All children/staff with any respiratory symptoms (regardless whether an outbreak is declared) must remain home until at least **24 hours symptom-free and they have no fever**. The assigned inspector will assess whether exceptions apply. See the [Illness Exclusion Versus an Outbreak](https://www.durham.ca/en/health-and-wellness/resources/Documents/OperatingaChildCareCentre/Illness-Exclusion-Versus-Outbreak-DUHEV-600.pdf) document for further explanation (https://www.durham.ca/en/health-and-wellness/resources/Documents/OperatingaChildCareCentre/Illness-Exclusion-Versus-Outbreak-DUHEV-600.pdf).

**Enteric outbreak declared** Date: \_\_\_\_\_

### Exclusions Related to Enteric Symptoms:

All children/staff with any enteric symptoms (regardless whether they meet the definition of an enteric “case”) must remain home until at least **48 hours symptom-free and they have no fever**. The assigned inspector will assess whether exceptions apply. See the [Illness Exclusion Versus an Outbreak](#) document for further explanation.

(<https://www.durham.ca/en/health-and-wellness/resources/Documents/OperatingaChildCareCentre/Illness-Exclusion-Versus-Outbreak-DUHEV-600.pdf>).

### Assessing Food-Borne Illness:

- Is food suspected as being the cause of illness?     yes     no     not sure
- Referral made to area PHI for kitchen inspection/follow-up if food is suspected.
- Inquire whether food samples or leftovers, served 72 hours prior to onset, are available.

Note: If food is available, it must be kept on hold, under refrigeration, until the centre is advised they are no longer required. **Do not serve leftovers.**

Food samples collected:    Date: \_\_\_\_\_    Time: \_\_\_\_\_     am     pm

Food Item	Date Prepared	Date Served	Person Preparing

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### Enteric Outbreak Kits

You may be provided with enteric outbreak kits to collect stool samples from ill child(ren)/staff, if recommended by the assigned inspector. Always request permission from the child’s parent/guardian before the sample is collected/submitted, as they may receive the results. Contact the inspector as soon as kits are ready for pick up. Arrangements can be made to have kits delivered and picked up from a staff’s/child’s home upon request.

Each kit contains two vials/bottles. Please check expiry dates on all vials/bottles and do not use if expired. If expired, notify the assigned inspector immediately for replacement.

### Instructions for Collecting Stool Samples:

1. Indicate the following information on the label for **each** vial:
  - Case's name
  - Date of birth
  - Date stool was collected
2. Complete the requisition form that comes with the enteric outbreak kit and place in outer pouch of specimen bag (do not store directly with vials). Include the following information:
  - Case's name
  - Date of birth
  - Date stool was collected
  - Onset date (date that child/staff first started experiencing symptoms of illness)
  - Outbreak number (Health Inspector will provide) **2230-**\_\_\_\_\_ - \_\_\_\_\_
  - Health Card Number is not needed

Fill both vials with stool (feces) up to the line indicated on the side of the vial. It is acceptable to scrape feces from a diaper, clothing, or off the floor. If there is not enough stool to fill both vials, fill the white one first. If food poisoning is suspected, then fill the green vial first.

### Enteric Outbreak Kits

Vial	Test	Directions
White cap	Viral and Toxin e.g. Norovirus	Add stool to line indicated. <b>Replace cap tightly.</b>
Green cap	Bacterial e.g. Salmonella	Using the spoon provided, collect two to three spoons full of stool, touching areas of blood, mucus, and pus. Mix well into transport media. <b>Replace cap tightly to prevent leaks.</b>

Note: Smaller amounts of stool can be collected for each vial if only limited amounts are available.

Return filled vials to specimen bag, refrigerate immediately, and store away from food. **Do not freeze.** Wash your hands after collecting stool and handling stool kits.

3. Contact the assigned inspector for pick up. The inspector will notify the child care centre of the lab results once received.

**Note:** Nasal or throat swabs are not to be performed at the child care centre.

## Part 2 – Responsibilities and Outbreak Control Measures

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### Responsibilities of Supervisor/Person in Charge

- General coordination of the outbreak management process with the Health Department and staff.
- Review all [Routine Illness Surveillance Form\(s\)](https://www.durham.ca/en/health-and-wellness/resources/Documents/OperatingaChildCareCentre/duhev238illnesssurveillance.pdf) (https://www.durham.ca/en/health-and-wellness/resources/Documents/OperatingaChildCareCentre/duhev238illnesssurveillance.pdf)
- Transfer the outbreak cases to the [Outbreak Line Listing Form](https://view.officeapps.live.com/op/view.aspx?src=https%3A%2F%2Fwww.durham.ca%2Fen%2Fhealth-and-wellness%2Fresources%2FDocuments%2FOperatingaChildCare%2FCCC-Outbreak-Line-List-Template.xlsx&wdOrigin=BROWSELINK) which will now be used daily to track the outbreak. Send the line listing form to the assigned inspector. (https://view.officeapps.live.com/op/view.aspx?src=https%3A%2F%2Fwww.durham.ca%2Fen%2Fhealth-and-wellness%2Fresources%2FDocuments%2FOperatingaChildCare%2FCCC-Outbreak-Line-List-Template.xlsx&wdOrigin=BROWSELINK)
- Audit staff to ensure that outbreak control measures are implemented properly.
- Communication to staff and parents/guardians.

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### How to Use the Outbreak Line Listing Form

The outbreak line listing form is a tool that allows the Health Department to evaluate the progress of the outbreak, including the number of new cases that occur each day.

- List ill **staff** and **children** that satisfy the case definition on **separate** line lists (full names not required, use initials only).
- List all cases **chronologically** according to onset date.
- Do not record a case more than once.
- List individuals that may be linked to the outbreak but are not present (e.g. sick child/staff at home or hospitalized).
- List individuals that have an alternative diagnosis by a healthcare provider (diagnosis to be added to “Comments/Diagnosis” column).
- For enteric outbreaks, record the number of episodes of vomiting and/or diarrhea each individual has experienced (e.g. diarrhea x 2) in the “Comments/Diagnosis” column.
- Ensure that you fill in the “Last Date at Centre” column for each individual listed.
- Send the line list form as soon as an outbreak is declared or as directed by the inspector.  
Date received: \_\_\_\_\_
- Update and email the line list(s) **daily** (Monday to Friday) to the inspector assigned to manage the outbreak, ensuring that all personal/confidential information is removed.

Note: The [Outbreak Line Listing Form](#) can be found in the Wee Care Manual and online at [durham.ca/childcare](http://durham.ca/childcare)

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## Outbreak Control Measures

The following infection prevention and control (IPAC) measures are to be posted and implemented immediately (as applicable) and they are to remain in place until the outbreak is declared over. Certain measures are required during non-outbreak situations and these would continue after the outbreak is declared over.

### Communication / Documentation

- Advise all staff and parents/guardians of the outbreak. The facility must post an [Outbreak Control Sign](https://www.durham.ca/en/health-and-wellness/resources/Documents/IllnessInfectionDisease/DUHEV417Visitation%20RestrictionEN.pdf) at all entrances advising of the outbreak. ([https://www.durham.ca/en/health-and-wellness/resources/Documents/IllnessInfectionDisease/DUHEV417Visitation RestrictionEN.pdf](https://www.durham.ca/en/health-and-wellness/resources/Documents/IllnessInfectionDisease/DUHEV417Visitation%20RestrictionEN.pdf))

### Screening

- All individuals entering the centre must self-screen every day before arriving using the self-assessment [Ontario Self Assessment Tool](https://www.ontario.ca/self-assessment/) (<https://www.ontario.ca/self-assessment/>). Those who fail screening are not permitted into the centre and must be excluded as per direction provided by the screening tool.

### Symptomatic Individuals

Symptomatic children must be immediately separated from others in a supervised area until they can go home.

For exclusion requirements related to COVID-19, consult with your Public Health Inspector regarding the current Ministry of Health Guidance.

### PPE

- Wear gloves when contact with blood and/or body substances (e.g. diarrhea, vomitus) is likely.

### Equipment/Toy Usage and Restrictions

- Group sensory activities (i.e. water, sand, food) and the use of natural and plush/absorbent items are not permitted.
- Mouthed toys should be cleaned and disinfected immediately after the child is finished using them.
- Sunscreen should not be shared. Staff may apply sunscreen and should practice hand hygiene (e.g. washing hands before, between, and after each application).
- Label soothers, bottles, sippy cups, etc. with each child's name to prevent accidental sharing.

### Food provision

- Family style meals are permitted provided that food handlers use adequate food handling and safety practices.
  - Utensils should be used to serve food.
  - No food provided by families/outside of the regular meal provision of the program (with exceptions).
- Children should not prepare or provide food that will be shared with others.

## Cleaning and disinfection

- Clean and disinfect the space and equipment used by a sick child, as soon as possible, after the child has left the area/been picked up. Use disposable cleaning equipment, such as disposable wipes, where possible.
- Ensure proper diapering procedures are being followed and designate cleaners/disinfectants for use only at the diaper table. Follow the steps on the [Diapering Procedure](https://www.durham.ca/en/health-and-wellness/resources/Documents/OperatingaChildCareCentre/DUHEV087-DiaperingProcedureEN.pdf) poster. (<https://www.durham.ca/en/health-and-wellness/resources/Documents/OperatingaChildCareCentre/DUHEV087-DiaperingProcedureEN.pdf>)
- Contaminated items belonging to an ill child (including soiled clothing) must be sent home in a securely tied plastic bag for cleaning/laundry. Soiled items must not be rinsed or washed at the centre.
- Increase the frequency of environmental cleaning and disinfection, especially high-touch surfaces, to a minimum of twice daily (e.g. diaper change surfaces, toilet fixtures, sinks, faucets, countertops, toys, floor mats, tables, doorknobs, phones, keyboards, touch screens, computers, etc.).
- Surfaces must be cleaned (detergent, warm water, applying friction) and rinsed **prior** to disinfection. Refer to the information sheet on [Cleaning and Disinfection in Child Care Centres](https://www.durham.ca/en/health-and-wellness/resources/Documents/OperatingaChildCareCentre/DUHEV198CleaningDisinfectionEN.pdf) (<https://www.durham.ca/en/health-and-wellness/resources/Documents/OperatingaChildCareCentre/DUHEV198CleaningDisinfectionEN.pdf>)
- Reusable cloths, used to clean and disinfect surfaces, must only be used once and must be laundered prior to reuse.
- Ensure manufacturer's label instructions for cleaners and disinfectants are followed (e.g. correct dilution, appropriate uses, contact time) and check expiry dates.
- If using bleach solutions, prepare daily as per the [Cleaning and Disinfection in Child Care Centres](#) poster. During outbreaks, use a higher-level solution (5000 ppm = 10 milliliters bleach plus 90 milliliters of water, with a 10-minute contact time).  

Note: for convenience, another disinfectant, with a shorter contact time (e.g. 1-5 minutes) may be more appropriate.
- During an enteric outbreak you must provide a disinfectant product that includes a Norovirus kill claim on the product label. In the absence of an identified organism, you need to assume that Norovirus is the cause of symptoms, as it is commonly associated with enteric outbreaks in child care settings and it is extremely contagious at low doses.
- For all sanitizer/disinfectant products that require preparation/dilution, you must have appropriate test strips available to ensure that the products are mixed and maintained at the correct concentration.
- Sleeping equipment (e.g. cots, mats, cribs) and linens (e.g. cot/crib sheets, blankets) must be cleaned and disinfected/laundered daily and immediately when visibly soiled and contaminated.
- Personal belongings should be labeled and kept in each child's cubby/designated area (e.g. backpack, hats, mittens, etc.). Non-essential personal items (e.g. toys) should be minimized. Designate a space outside the centre to securely store strollers so that parents do not need to enter the centre.

## Staff and Child Movements

- Movement of staff between child care locations is not permitted (including supervisors/designates, staff, and/or students on educational placement).
- The movement of staff and placement students between rooms/licensed age groups is discouraged whenever possible to minimize potential for increased illness transmission.
- No admissions of new children are permitted.
- Movement/transitioning of children between licensed age groups/rooms is not permitted.
- Child care centre tours are to be deferred until the outbreak is over.

## Hand hygiene

- Increase the frequency of hand hygiene for children and staff. Use the [Handwashing poster](#) and [Hand Sanitizers poster](#) to ensure all the required steps are followed. Hand hygiene refers to handwashing or the use of hand sanitizer, depending upon the situation.

**Handwashing poster** - <https://www.durham.ca/en/health-and-wellness/resources/Documents/HealthyLiving/DUHEV280handwashingVer2EN.pdf>

**Hand Sanitizers poster** - <https://www.durham.ca/en/health-and-wellness/resources/Documents/HealthyLiving/DUHEV294HandSanitizerEN.pdf>

- Handwashing is required for the following:
  - after toilet use
  - after diaper changing (staff and children)
  - after contact with blood or body substances (e.g. mucous, vomit, feces)
  - before preparing and serving food
  - before and after eating snacks and meals
  - before feeding children
  - whenever hands are visibly soiled
- Hand sanitizer is permitted as long as hands are not visibly soiled. The use of hand sanitizers on infants and toddlers is not recommended. Check expiry dates on the bottles and discard hand sanitizer products if expired.
- Provide a 70 to 90 percent alcohol-based hand rub (ABHR), or other [Health Canada approved hand sanitizer](#), in each room and screening station (if applicable), stored out of children's reach. (<https://www.canada.ca/en/health-canada/services/drugs-health-products/disinfectants/covid-19/hand-sanitizer.html>)

## Staff training

- Ensure staff are trained on IPAC policies and procedures, including instructions on:
  - how to properly use PPE
  - how to properly clean and disinfect the space and equipment
  - how to ensure daily screening is completed
  - how to keep daily attendance records
  - what to do when someone becomes sick, and how and when to report an outbreak