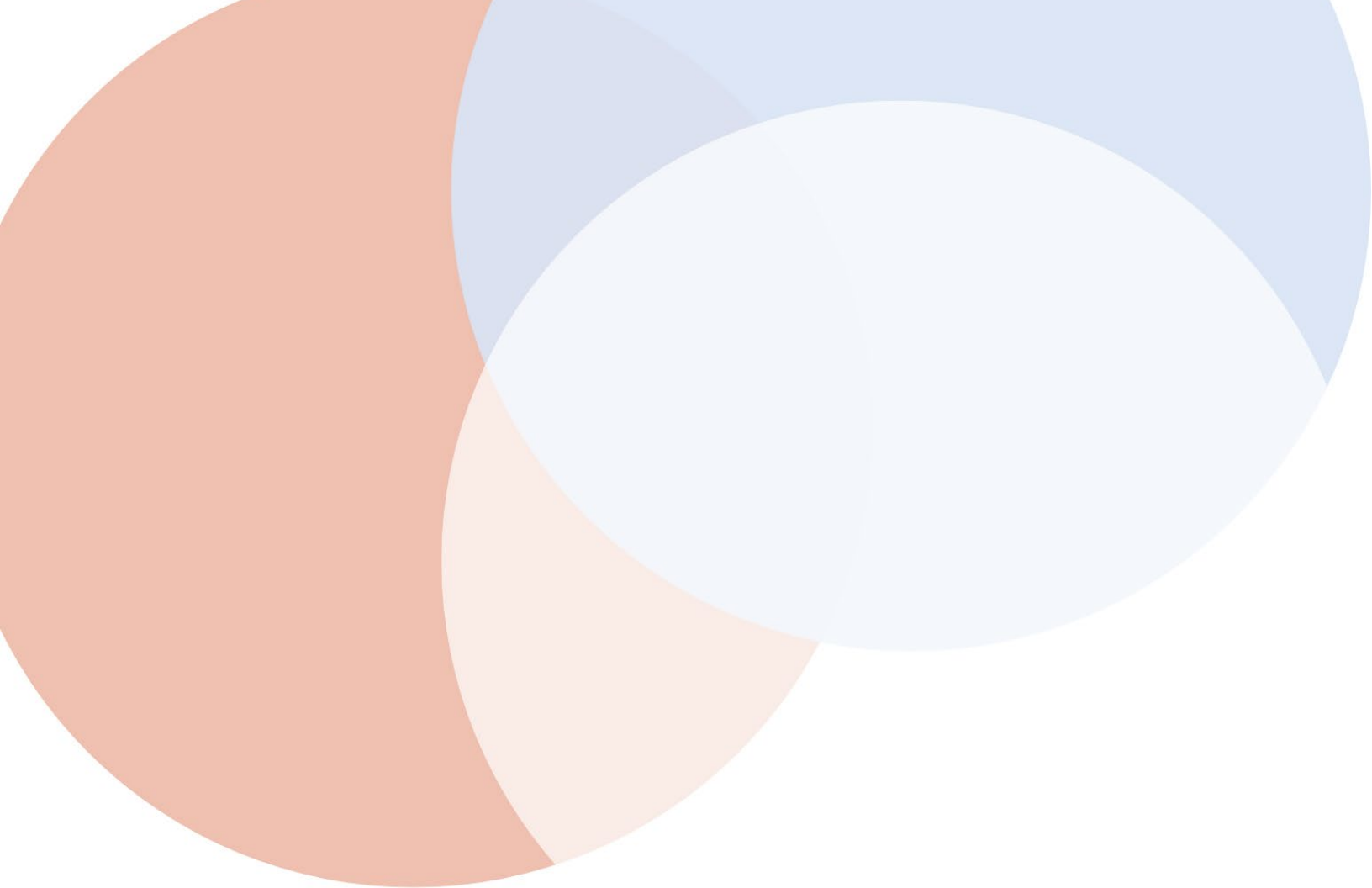




BC COMMUNICABLE DISEASE HANDBOOK

FOR HOUSING AND SOCIAL SERVICE PROVIDERS

A guide to help housing and social service providers
prepare and respond to communicable diseases



Land Acknowledgement

The contributors to this document gratefully acknowledge that we live and work on the unceded, traditional and ancestral lands of hundreds of Indigenous Peoples and Nations across what is now known as British Columbia (BC), each with their own unique traditions, history and culture.

Homelessness/houselessness among Indigenous Peoples is a consequence of Canada's history of colonization, and resulting trauma, ongoing oppression, racism and discrimination. We are committed to strong Indigenous partnerships and relationships based on principles of decolonization and reconciliation, to improve services for Indigenous Peoples.

Resources used in development:

Interior Health: [Homeless & Emergency Winter Response Shelter Health Handbook for Providers](#)

Alberta Health: [Guide for Outbreak Prevention and Control in Shelter Sites](#)
[Shelter Outbreak Checklist](#)

BC Housing: [Sample Policies and Procedures for Emergency Shelters](#)

[Bedbug Information for Emergency shelters](#)

Toronto Public Health: [Infection Prevention and Control Guide for Homelessness Service Settings](#)

Provincial Infection Control Network of BC:
[Personal Protective Equipment \(PPE\) Posters](#)

Resources for further learning:

Ontario Public Health:
[IPAC for Non-clinical staff](#)

This handbook will be updated as new communicable disease information and guidelines are available.

Find an online copy here:

(to be filled in by organization)

Resources Used in Development:

We extend sincere thanks to the following housing providers and members of the BC Health Authorities who contributed to and reviewed this handbook. Their valuable comments and suggestions strengthened the quality of its contents.

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Definitions

Body substances: Includes blood and body fluids, such as urine (pee), stool (poo), vomit, snot or mucus, semen, saliva.

Cleaning: The physical removal of dirt and germs from surfaces. This is done with water, soap/detergents and physical action (e.g. friction and rubbing).

Client: Any person who uses housing or shelter services.

Contamination: The presence of germs on hands or surfaces.

Cross-contamination: The transfer of germs from a contaminated source to a clean source.

Disinfection: The process of using chemicals or heat to kill most germs on surfaces or objects. This is done with chemical products called disinfectants.

Exposure (to communicable disease): When a person or place has been in contact with an infectious agent (e.g. bacteria or virus). If a person is exposed, they may or may not get sick.

Gastrointestinal illness: Illness with symptoms such as diarrhea, vomiting, nausea, abdominal pain, abdominal cramping.

Genitals: Includes sexual or reproductive organs such as the penis, vagina, testes, vulva, labia and cervix.

Germ: Also known as a microorganism or infectious agent. A germ is capable of causing an infection (e.g. bacteria, fungus, parasite, virus or prion).

Hand sanitizer: Also known as alcohol-based hand rub (ABHR). This is a liquid, gel or foam formula that contains alcohol which is used to reduce the number of germs on hands in situations when the hands are not visibly soiled.

Infection: The entry and growth of a germ in host. Infections may or may not cause symptoms.

Outbreak: A sudden rise in the number of people infected by a certain disease in a defined community group, specific time period or geographical area. Outbreaks are only declared by Communicable Disease Public Health once certain criteria are met.

Prevention measures: Steps to be used at all times with all clients to prevent and control the spread of germs.

Respiratory etiquette: Personal actions (e.g. covering the mouth when coughing, care when throwing away used tissues) that help prevent the spread of germs that cause respiratory illness.

Respiratory illness: Illness with symptoms such as sore throat, coughing, sneezing, runny nose, tiredness (fatigue).

Sharps: Objects that can cause punctures or cuts (e.g. needles, blades, glass).

Purpose of this Handbook

This handbook provides staff at shelters and supportive housing sites in BC with practical resources in two key areas:

- Prepare for and prevent the spread of communicable diseases
- Respond to communicable disease illness and outbreaks on site

Homelessness and precarious housing are associated with increased risks of communicable diseases.

These include:

- Viral respiratory illness (e.g. COVID-19, influenza (flu))
- Gastrointestinal illness (e.g. norovirus, Shigella)
- Tuberculosis
- Sexually transmitted and blood borne infections (e.g. syphilis, HIV, hepatitis C)
- Pest infestations

Supportive housing and shelter sites play an important role in preventing and controlling the spread of communicable diseases.

This handbook builds on existing guidance from BC health authorities. It incorporates feedback from BC supportive housing providers after COVID-19 pandemic debriefs and through ongoing engagement.

The goal is to provide guidance that:

- works across supportive housing settings in BC
- can be used in a supportive housing context
- is helpful for supportive housing staff

1. Communicable Diseases

Communicable diseases are illnesses that can spread between people through germs like bacteria, viruses, parasites and fungi. They can spread in many different ways:

How do communicable diseases spread?

			
People who are infected • By touch • Having sex • Droplets when someone coughs or sneezes • Blood and body fluids (e.g. saliva, mucous) • Feces (poop)	Insects or animals • Bites (e.g. ticks, mosquitos, bats, dogs) • Touching infected animals • Touching animal body fluids	Surfaces or air • Surfaces or objects we touch that have germs on them • The air we breathe (e.g. tuberculosis, chickenpox)	Food or water • Infected food like meat, vegetables • Drinking water that's contaminated

See the next sections to learn more about specific diseases that may be common at shelters:

- [Respiratory viruses](#)
- [Gastrointestinal Illness](#)
- [Tuberculosis \(TB\)](#)
- [Sexually Transmitted Infections \(STI\)](#)

2. Managing illness and outbreaks

If people are sick at your site:

1. Notify your site supervisor.
2. If you have a higher than normal number of people having symptoms, check the table below to determine if you should reach out to your Communicable Disease Public Health Contacts to report the illnesses.

Be prepared to provide your Public Health Contact with key information:

- The symptoms reported by people who are sick
- How many people are sick
- When the illnesses started
- If there are any possible explanations for the symptoms of any clients

Once illness has been identified at your site, the [TPH Illness Monitoring Log](#) is available for use.

Type of Illness

When to Call Public Health

Respiratory Illness



- **When the situation is not improving** (after taking the measures outlined in the [Respiratory Illness section](#))
- **When people are severely sick**, and have declined care or many have been hospitalized.

Gastrointestinal Illness



3 or more staff and/or clients with NEW onset of the following symptoms:

- 3 or more episodes of diarrhea and/or vomiting within 4 days
- Any episode of bloody diarrhea

Other Unusual Illness



Sites may call Public Health regarding diseases that may benefit from further advice and/or investigation, including:

- Group A Streptococcus
- Red Measles
- Mumps
- Pertussis (Whooping Cough)
- Meningitis
- Mpox (previously called monkeypox)
- Hepatitis
- Any other illnesses of concern
- An unusual number of clients with rash illness within a 10-day period

2.1 Prepare Staff and the Site

There are many steps you can take to prepare for illness and outbreaks at your site.

Communicable Disease Prevention and Outbreak Plan:

- ☐ **1. Read** and be informed about outbreak prevention and planning. See Staff Education Resources in this handbook.

- ☐ **2. Assign** staff member(s) (site manager/supervisor) at your site to be your Outbreak Prevention and Management Lead.

Lead Name: _____ Date assigned: _____

Lead Name: _____ Date assigned: _____

- ☐ **3. Keep a list** of contacts in healthcare and Public Health. Use “[Key Health Contacts](#)” template in this handbook.

Find the list here: _____

- ☐ **4. Use posters** with communicable disease information if illness is circulating at your site (e.g. [extra measures at this site](#), [how to clean hands](#), [Personal Protective Equipment \(PPE\)](#), [disease-specific posters](#)).

Find posters here: _____

- ☐ **5. Have PPE** (personal protective equipment like masks, gowns, gloves) available for staff and clients.

Find Personal Protective Equipment (PPE) supplies here: _____

- ☐ **6. Keep cleaning supplies** and procedures available:

- If possible, use store bought disinfectants with a drug identification number (DIN) on the bottle (e.g. Clorox, Lysol, Fantastik, Microban, Zep, etc.)
- If preparing your own solution using household (5.25%) bleach, follow instructions on the label or as follows.

Regular cleaning: 1 litre of water (4 cups) per 20 mL (4 teaspoons) bleach

For blood or body substances: 1 litre of water (4 cups) per 125ml (half cup) bleach

Find cleaning supplies and procedures here: _____

- ☐ **7. Attend routine meetings** with Health Authority partners to keep up to date on communicable diseases in your area.

- Share the name of your site lead to your Public Health team as required

- ☐ **8. Review and update** this Outbreak Plan steps 1-7 annually.

2.2 Prevent and Manage Outbreaks

Only the Public Health team can tell you if there is an “outbreak” at your site, based on their assessment of the cases.

Everyday actions to prevent outbreaks at your site:

CHECK:

- ☐ **Hand hygiene** protocols, posters, and supplies are in place
- ☐ **Cleaning/disinfecting** procedures and supplies are in place

PREPARE STAFF:

- ☐ **Watch out** for any unusual patterns of illness
- ☐ **Encourage** staff to follow the site’s staff illness policy
- ☐ **Recommend** staff get vaccinated for flu and COVID-19 and have access to their vaccination records

MANAGE CLIENTS:

- ☐ **Watch out** for any unusual patterns of illness
- ☐ **Give medical masks** to clients with respiratory symptoms (e.g. sneezing, coughing, runny nose)
- ☐ **Identify spaces** that can be used to isolate clients with symptoms (if possible) or use physical distancing measures by maintaining 2 meters (6 feet) between clients
- ☐ **Be ready** to transport clients with serious illness to health care facilities (See: [Key Health Contacts](#))
- ☐ **Recommend** clients get vaccinated for flu and COVID-19 and have access to their vaccination records

CONTACT:

- ☐ **Know** when to contact your Public Health team (see: [Key Health Contacts](#)) for support when needed (e.g. 3 persons with gastrointestinal illness within 4 day period)
- ☐ **Give** your Public Health team key information about the illness:
 - The symptoms reported by people who are sick
 - How many people are sick
 - When the illnesses started
 - Any possible explanations for the symptoms of any clients
 - Track and Report: if more clients are ill with the same symptoms (optional to use the [TPH Illness Monitoring Log](#))
- ☐ **Create** a plan with your Public Health team on what information can be shared with clients

During an Outbreak:

What to do During an Outbreak

Remember, only Public Health can declare an outbreak.

If Public Health declares an outbreak:

COORDINATE:

- ☐ **Confirm** key contact names and meetings with your Public Health leads
- ☐ **Report** to your Public Health leads if more clients are ill with the same symptoms
- ☐ **Tell** BC Housing or other Association contacts of situation
- ☐ **Share** updates with staff and clients

PREPARE STAFF:

- ☐ **Put** your [outbreak plan](#) into action
- ☐ **Display** posters and signs for staff and clients
- ☐ **Use appropriate personal protective equipment (PPE)** when caring for symptomatic clients or when cleaning
- ☐ **Report** new or worsening symptoms, and get tested as directed by Public Health
- ☐ **Keep up preventative actions:** handwashing, physical distancing, increased cleaning, masking, and keeping up-to-date with vaccinations

MANAGE CLIENTS:

- ☐ **Isolate** symptomatic clients as directed by Public Health
- ☐ **Limit** visitors and group activities/events
- ☐ **Support** recommended testing of clients (on or offsite based on Public Health direction)
- ☐ Transport clients with serious illness to health care facilities
 - Notify facility and transporters of possible outbreak
- ☐ **Encourage** clients to report new or worsening symptoms
- ☐ **Encourage** hand hygiene and respiratory etiquette (cleaning hands, covering coughs and throwing away used tissues)
- ☐ **Encourage** clients to get vaccinated as recommended for influenza (flu) and COVID-19

After an Outbreak:

What to do After an Outbreak

☐ 1. Public Health will determine when an outbreak is over

☐ 2. Work on preventing another outbreak by following the “[Everyday Actions to Prevent Outbreaks at your Site](#)”

☐ 3. Review with staff and update your [Communicable Disease Prevention and Outbreak Plan](#) with details on:

What went well?

What did we learn?

What would we do differently?

Were there any broader problems outside of our organization?
e.g. trouble contacting Public Health, slow responses from other organizations.

Who is going to follow up to address the identified problems?

Assigned follow up name and date: _____

2.3 Key Health Contacts

Complete the following table with names (as available) in your Health Authority.

Last updated on: _____

Role	Name Phone Email Fax	Comments
Communicable Disease Public Health Team		
• Respiratory Illnesses		
• Gastrointestinal Illnesses		
• Other Illnesses		
Local Mental Health Team		
Harm Reduction Supply Access		
• Safer Injection/Smoking Supplies		
• Take Home Naloxone kits and Facility Boxes		
• Overdose Prevention Site Resources		
• Health Authority Harm Reduction Coordinator		
Primary Care Provider associated with site (if available)		
Nearby Emergency Department		
Urgent and Primary Care Centre		
Cultural or Indigenous Liaison		
Other (Specify)		
Other (Specify)		

3. Prevention Measures

Infection prevention and control measures help prevent the spread of communicable disease in all settings. Here are some key prevention measures:

Prevention Measures for Communicable Disease

- ☐ **Wash your hands** with soap or use hand sanitizer often, especially after using the washroom, blowing your nose and before eating
- ☐ **Stay away** from others when you are feeling sick
- ☐ **Get vaccinated** to protect against infectious diseases
- ☐ **Practice good respiratory etiquette:**
 - Cover your coughs and sneezes with your elbow or a tissue
 - Discard tissues into trash can right away after use
 - Wear a mask when sick
- ☐ **Avoid sharing:**
 - **food, drinks**, utensils, cigarettes, smoking supplies
 - **personal items** like toothbrushes, towels, razors
 - **needles** or other drug injection supplies
- ☐ **Practice safer sex** and use condoms to protect against sexually transmitted infections

3.1 Vaccinations

Getting vaccinated is one of the most effective ways to prevent communicable disease. In BC, some vaccines are available for free for your clients, including:

Vaccine	When to Get
Flu shot (influenza)	1 dose every year
COVID-19	As recommended by public health
Pneumococcal	1 dose, one time
Tetanus/diphtheria	1 dose every 10 years If pregnant, 1 dose in every pregnancy
Note: This list may not be up-to-date or complete. Visit HealthLinkBC for full information.	

Your clients may be eligible for some other routine vaccines if they have not already received them, depending on their medical status and other risks such as drug use. Check the links to see eligibility:

- [Measles, mumps and rubella \(MMR\)](#)
- [Hepatitis A](#)
- [Hepatitis B](#) (Free if born in 1980 or later)
- [Chickenpox / Varicella](#)

Staff are recommended to get their yearly flu shot, COVID-19 vaccines, measles, mumps and rubella (MMR), and tetanus/diphtheria vaccines.

The most up to date vaccination information can be found here: [Recommended vaccines for adults | HealthLinkBC](#)

Clients and staff should follow guidance from their health care provider.

3.2 Cleaning and Disinfection

Infection prevention and control measures help prevent the spread of communicable disease in all settings. Here are some key prevention measures:

Cleaning and Disinfection in Supportive Housing Settings	
When and what to clean	• Clean visibly dirty surfaces right away (e.g. spills) • Clean high touch surfaces daily (e.g. light switches, door knobs, chairs, counters, electronics, washrooms) • Clean other surfaces regularly (e.g. general cleaning of floors)
How to clean	1. Read and follow all manufacturer instructions for cleaning and disinfecting products 2. Clean first, then disinfect. i. For cleaning, use soap or detergent and water. ii. For disinfecting, use a disinfectant available at stores. 3. Wipe from cleaner to dirtier areas, and from top to bottom (e.g. low touch to high touch areas) 4. Only put clean cloths into cleaning or disinfectant solution (do not double-dip) 5. If cleaning up body substances, wear gloves and if there is a possibility of splashing, wear a gown and eye protection. For body substances, use a disinfectant with higher concentration bleach solution (e.g. ½ cup of bleach to 4 cups of water, or 125 ml of bleach to 1 litre of water). 6. When cleaning, look out for sharp objects and handle/dispose of them appropriately.

Follow additional guidance in your site's cleaning and disinfection protocols. More tools [from Toronto Public Health](#) are available:

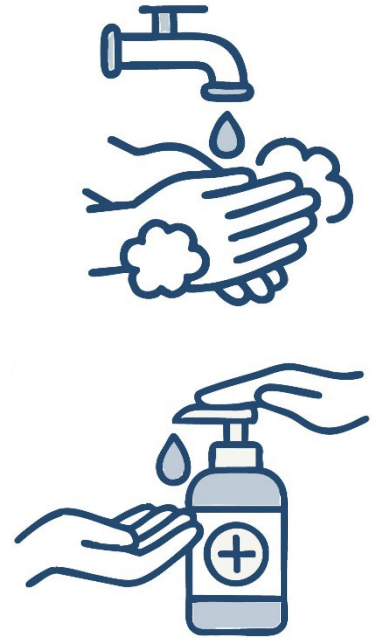
- [Tool 9: Room Cleaning/Disinfecting Checklist](#)
- [Tool 10: Floor Cleaning Checklist](#) (page 46)
- [Tool 11: Bathroom Cleaning/Disinfecting Checklist](#)
- [Tool 12: General Cleaning and Disinfecting Tips](#)
- [Tool 14: Cleaning and Disinfecting Sleeping Mats](#)
- [Tool 15: Linen and Laundry Tips](#)
- [Tool 16: Cleaning up Body Substances](#)

For handling and disposing sharps or needles:

Review the [BC Housing Provider Guide for a Contractor Safety Program](#) (Page 50) and the links to [WorkSafe BC's Controlling Exposure](#) guidance (Page 77).

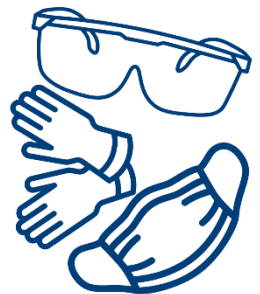
3.3 Hand Hygiene

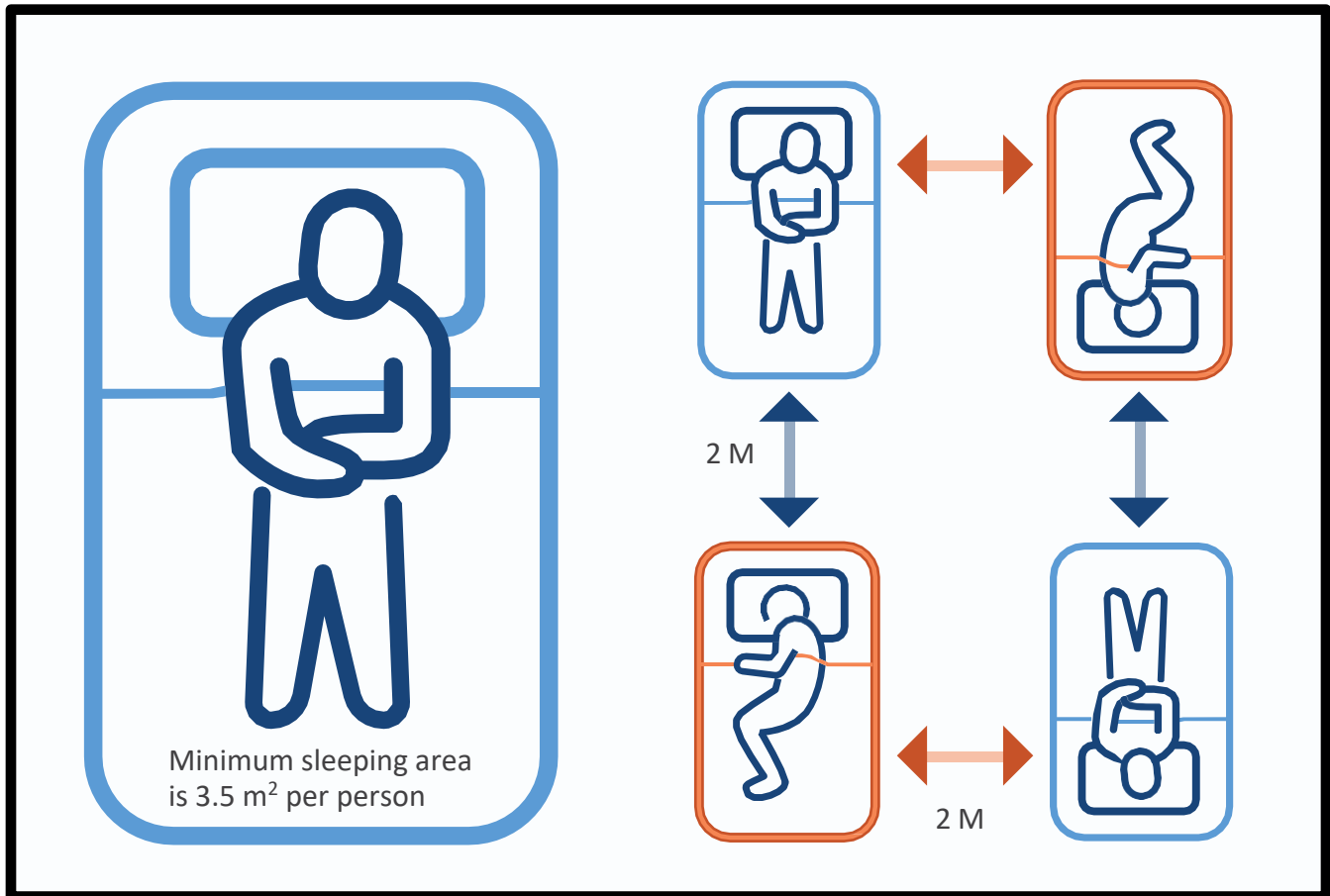
- Clients and staff should clean their hands with soap and water or use hand sanitizer
- **Clean your hands often, especially:**
 - After using the washroom
 - Before eating
 - After coughing/sneezing
 - After blowing your nose
 - After touching an animal
 - Before and after looking after wounds or cuts
- If your hands look dirty, wash them with soap instead of using hand sanitizer
- **Dry your hands** with paper towel or hand dryers (do not reuse towels)
- Put up handwashing and hand sanitizer posters in your site
- See posters in the Appendices on [how to wash your hands](#) and [how to use hand sanitizer](#)



3.4 Masking & Personal Protective Equipment (PPE)

- Wear a mask if you are sick and cannot stay away from others, and as a personal choice.
- Wear PPE as recommended by Public Health for specific diseases or as per cleaning protocol.
- Train staff on wearing PPE properly and use these posters in the Appendices:
 - [How to wear a mask](#)
 - [Putting on PPE](#) (Donning)
 - [Taking off PPE](#) (Doffing)





3.5 Spacing and Air Flow

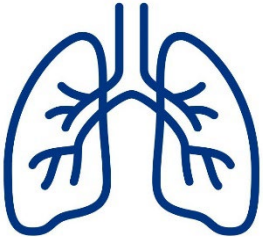
- Follow [BC Housing Shelter Design Guidelines](#) for requirements around rooming and sleeping spaces
- Be aware of your site's approved occupancy limits and washroom requirements
- Be sure that heating ventilation and air conditioning (HVAC) systems are in good working order
- If weather or air quality permits, open windows and doors for fresh air

3.6 Food Safety

Follow your site's established food safety policies and plans.

Policies and plans can be found here: _____

4. Respiratory Illness

Viral Respiratory Infections	
What they are	Infection caused by a virus that affects the respiratory system (e.g. nose, throat, lungs) Examples: • Flu (influenza) • COVID-19 • RSV (respiratory syncytial virus) 
Symptoms	• New or worsening cough • Shortness of breath • Sore throat • Runny nose/nasal congestion • Fever/chills 
How they spread	• From person to person (e.g. coughs, sneezes, singing, talking) • Crowded, closed spaces with poor air flow and ventilation • Touching contaminated surfaces

Learn more about Respiratory Illness:

- Poster on Respiratory Illness in poster section of [Appendices](#)
- HealthLinkBC: [Handling Respiratory Illnesses](#)
- Health Canada: [Respiratory Viruses](#)

4.1 How to Prevent Respiratory Illness

Prepare for and prevent respiratory illness on site:

☐ **Keep a list** of contacts in healthcare and Public Health. Use “[Key Health Contacts](#)” template in this handbook

☐ **Follow prevention measures.** Practice and encourage habits that reduce the risk of getting sick, such as:

Hand Hygiene

- Wash hands with soap and water when:
 - Hands look dirty
 - After using the bathroom
 - Before eating or preparing food
- Hand sanitizers can be used in other situations

Respiratory Etiquette

- Cover your coughs with your sleeve or a tissue
- Throw away used tissues into trash right away
- Wear a mask when sick

☐ **Keep supplies** like hand soap, hand sanitizer, and masks available in easy to access locations

☐ **Follow** cleaning and disinfection protocols for your site

- Regularly clean and disinfect high-touch surfaces such as doorknobs and washrooms

☐ **Follow** your site’s sick day policy when staff are experiencing symptoms of illness

☐ **Keep respiratory illness guidelines** and posters available for staff and clients for when a respiratory illness is detected

4.2 How to Manage Respiratory Illness

Admission to shelter:

Clients should not be denied access to shelters based on illness. The risk of a person who has an illness transferring their illness to another client can be reduced with infection control measures. In certain instances, Public Health may give a different recommendation, including the following situations:

- A Public Health order during a pandemic
- A case-by-case basis for a person being followed by Public Health who requires specific management

In these situations, other arrangements will be made for the person who is sick. However, there is currently no need to deny entry on an individual health basis, unless directed otherwise by your local Public Health office.

What to do when Respiratory Illness is increasing at your Site:

- ☐ **Identify client(s)** experiencing symptoms (e.g. new or worsening cough, shortness of breath, sore throat, runny nose/nasal congestion, fever/chills)

- ☐ **Promote physical distancing** if possible and practical for your site:
 - Separate room for sick clients
 - Distancing beds by 2 metres
 - Moving chairs further apart in common areas
 - Using physical barriers between beds, arranging adjacent beds head to toe

- ☐ **Watch for** potential spread among staff and clients

- ☐ **Wear personal protective equipment (PPE)** when interacting with symptomatic clients (e.g. mask and gloves) and follow additional PPE guidance from your Public Health team

- ☐ **Keep supplies** like masks, hand sanitizer, and hand hygiene sinks available for everyone

- ☐ **Discourage sharing** of items that touch the mouth (e.g. drinks, food, utensils, cigarettes, smoking supplies)

- ☐ **Consider enhanced cleaning** and disinfecting protocols:
 - Prioritize cleaning and disinfecting common areas where people gather and high-touch areas (e.g. elevators, common amenity spaces, doorknobs, countertops, bathroom surfaces) a minimum of **3 or more times per day**
 - Use an appropriate disinfectant for contaminated surfaces:
 - If possible, **use store bought disinfectants** with a drug identification number (DIN) on the bottle (e.g. Clorox, Lysol, Fantastik, Microban, Zep, etc.)
 - If preparing your own solution, follow instructions on the label or as follows:
Regular cleaning: 1 litre of water (4 cups) per 20 mL (4 teaspoons) bleach
For blood or body substances: 1 litre of water (4 cups) per 125ml (half cup) bleach

- ☐ **Increase air flow**, ventilation, and air filtration if possible (e.g. changing HEPA filters, increasing central air conditioning, opening windows)

- ☐ **Help get medical care** for people who are sick as needed or requested (e.g. physician connected to shelter, walk-in clinic, emergency room)

When to call Public Health for Respiratory Illness

Your local Public Health office is available to take your calls if you have any questions or concerns. Viral respiratory illness is common and seasonal. Outside of a pandemic, there is no mandated requirement to call Public Health for respiratory illness symptoms.

However, **please call when the situation at your site is not improving (after taking the measures outlined in this handbook), or when people are severely sick and have declined care or many people have been hospitalized.**

5. Gastrointestinal Illness

Gastrointestinal Illness	
What they are	An infection caused by a bacteria or virus which irritates the stomach. Sometimes called “stomach flu”, but is not caused by the influenza or “flu” virus. Examples: • E. coli • Norovirus • Salmonella • Shigella • Cholera • C.difficile 
Symptoms	• Stomach cramping • Unexplained vomiting • Diarrhea (2 or more times above baseline) • Fever/chills 
How they spread	• From person to person (e.g. coughs, sneezes, singing, talking) • Drinking/eating contaminated food or drinks • Contact with things with the vomit or stool of a sick person • Swimming or bathing in contaminated water • Infrequent or improper handwashing after using the toilet • Sharing cigarettes, straws, utensils or pipes • Sex activities where your mouth is on someone’s bum or you put your mouth on something that has been in someone’s bum

Learn more about Gastrointestinal Illness:

- Poster on Gastrointestinal illness in poster section of [Appendices](#)
- HealthLinkBC: [Gastroenteritis in Adults and Older Children](#)

5.1 How to Prevent Gastrointestinal Illness

Prepare for and prevent Gastrointestinal Illness on site:

- ☐ **Keep a list** of contacts in healthcare and Public Health. Use “[Key Health Contacts](#)” template in this handbook.

- ☐ **Follow prevention measures.** Practice and encourage habits that reduce the risk of getting sick:
 - Wash hands with soap and water when:
 - Hands are visibly soiled or after using the bathroom
 - Before eating or preparing food
 - Alcohol-based hand sanitizer can be used in other situations
 - Avoid sharing drinks, food, utensils, cigarettes, and smoking supplies
 - Ensure proper safe handling of food (refer to infographic in handbook)

- ☐ **Keep supplies** like hand soap, alcohol-based hand sanitizer, and masks in easy to access locations.

- ☐ **Follow** your site protocols on routine cleaning and disinfection
 - Have a spill kit ready. Including a higher concentration disinfectant for when blood or body fluids are present (e.g. vomit, diarrhea)

- ☐ **Follow** your site’s sick day policy when staff are experiencing symptoms of illness

- ☐ **Keep guidelines and posters** for Gastrointestinal Illness management available for staff and clients for when Gastrointestinal Illness is detected.

5.2 How to Manage Gastrointestinal Illness

Admission to shelter

Clients should not be denied access to shelters based on illness. The risk of a person with an illness transferring their illness to another client can be reduced with cleaning and distancing measures. In certain instances, Public Health may give a different recommendation, including the following situations:

- A Public Health order during a pandemic
- A case-by-case basis for a person being followed by Public Health who requires specific management

In these instances, there will be other arrangements made for the person who is unwell. However, there is currently no need to deny entry on an individual health basis, unless directed otherwise by your local Public Health office.

What to do when Gastrointestinal Illness is Increasing at your Site:

- ☐ **Identify** client(s) experiencing common symptoms of Gastrointestinal Illness (e.g. stomach cramping, vomiting, diarrhea, fever/chills).
- If 3 or more clients and/or staff are experiencing symptoms within a 4-day period, please call your local Public Health office for guidance on infection control measures.

-
- ☐ **Encourage** staff and clients to wash hands frequently
 - Ensure hand sinks have adequate supply of hot and cold water, liquid hand soap, and paper towel

-
- ☐ **Separate** clients with illness from clients who are not sick when possible and practical:
 - Have a separate washroom for clients who are ill
 - Let clients who are unwell eat meals at separate times or in a separate room
 - Never have people who are unwell prepare meals or serve food for others
 - Limit client handling of shared food and utensils
 - Avoid sharing drinks, food, utensils, cigarettes, or smoking supplies with people who are unwell

-
- ☐ **Wear personal protective equipment (PPE)** if coming into contact with body substances (e.g. gloves and if there is a possibility of splashing, wear a gown and facial protection) and follow additional PPE guidance from your Public Health team.

-
- ☐ **Watch** for potential spread among staff and clients.
 - Report additional symptomatic clients and/or staff to Public Health

-
- ☐ **Start extra cleaning** and disinfecting protocols by:
 - Prioritize cleaning and disinfecting common areas where people gather and high-touch areas (e.g. common amenity spaces, doorknobs, countertops, bathroom surfaces) a minimum of 3 or more times per day
 - Wash and dry clothing and bedding using high heat settings
 - Utilizing an appropriate disinfectant that can kill norovirus for contaminated surfaces:

Regular cleaning: 1 litre of water (4 cups) per 20 mL (4 teaspoons) bleach

For blood or body substances: 1 litre of water (4 cups) per 125ml (half cup) bleach

-
- ☐ **Help get medical care** for people who are sick as needed or requested (e.g. physician connected to shelter, walk-in clinic, emergency room, see: [Key Health Contacts](#))

When to call Public Health for Gastrointestinal Illness

Call your local Public Health office if **3 or more clients and/or staff are experiencing gastrointestinal illness symptoms within a 4-day period**. Be ready to discuss:

- The number of people affected
- The symptoms the people have
- When the symptoms started
- Whether the symptoms are getting better or worse

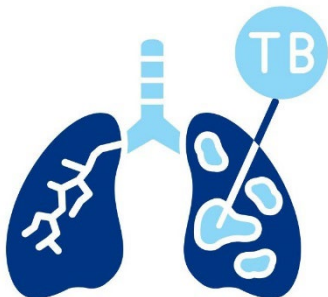
Your local Public Health office may declare a Gastrointestinal Illness outbreak and advise on next steps. They may advise on:

- Specific cleaning protocols
- How to separate clients who are sick
- How to prevent the spread of illness
- Cancellation of large group activities if necessary.

Your local Public Health office is available to take your calls if you have any questions or concerns.

Please call during daytime hours whenever you have concerns regarding groups of severe or unusual illness or would like help to manage the spread of illness at your site.

6. Tuberculosis (TB)

Tuberculosis (TB)	
What it is	TB is a disease caused by bacteria that affects the lungs, and can affect other parts of the body like bones, kidneys and the brain. TB is curable and treatment is available for free in BC. Examples: • TB infection (when people don't have symptoms and can't spread TB) • TB disease (when people have symptoms and can spread TB) Note: The measures in this handbook are for TB disease. • Extrapulmonary TB (TB in organs other than the lungs) 
Symptoms	• Coughing up blood • Swollen lymph nodes • Fever • Shortness of breath or chest pain • Extreme fatigue or tiredness • Unexplained weight loss • Drenching night sweats
How it spreads	• Through the air • When an person who is infected coughs, sneezes or talks

Learn more about Tuberculosis (TB)

- Poster on TB in poster section of [Appendices](#)
- BCCDC Information: [Tuberculosis](#)
- HealthLinkBC: [Tuberculosis](#)

6.1 How to Manage Tuberculosis (TB)

Client(s) – What clients should do if they have TB:

- ☐ **Stay** in their room.
- ☐ **Follow prevention measures**, including cleaning hands often and respiratory etiquette (covering coughs and sneezes, wearing a mask).
- ☐ **Try not to** take part in group activities.
- ☐ **Get** medical help as needed.

Staff – What to do if someone has TB:

- ☐ **Inform Public Health**
 - If client reports TB diagnosis
 - If site is concerned for a client having TB specific symptoms (e.g. client coughing up blood, having night sweats)
- ☐ **Work to prevent** the spread by:
 - Providing a separate room for affected person if possible
 - Encouraging hand hygiene and respiratory etiquette among clients and staff
- ☐ **Watch** for potential spread among staff and clients.
 - If a staff member is affected, they should stay home

Public Health – What to expect from Public Health if someone has TB:

- ☐ **Recommend** isolation of person with TB symptoms
- ☐ **Recommend** use of appropriate personal protective equipment (PPE)
- ☐ **Testing** may be recommended and coordinated through your local Public Health office if deemed necessary (assessed on a case-by-case basis)

7. Sexually Transmitted Infections (STI)

Sexually Transmitted Infections (STI)	
What they are	STIs are caused by bacteria, viruses or parasites passed between people during sexual activity. Examples: • HIV, Syphilis, Chlamydia, Gonorrhea, HPV/Genital warts, Genital herpes, Hepatitis A, B and C
Symptoms	Symptoms vary by disease, but some common symptoms include: • Pain when peeing • Lumps or growths around genitals • Unusual discharge or bleeding from genitals • Rashes  Some STIs don't have symptoms or may appear after weeks or even years.
How they spread	• Having sex without condoms or other forms of protection • Oral, genital or anal sex • Blood or genital fluids like semen or discharge • Skin to skin contact

Learn more about STIs:

- [BCCDC Smart Sex Resource](#)
- [BCCDC STI information](#)
- [HealthLinkBC: Sexually Transmitted Infections \(STIs\)](#)

7.1

How to Manage Sexually Transmitted Infections (STI)

When to get tested

Clients or staff should get tested for STIs when they:

- Have symptoms
- Had sex with someone who has an STI
- Have new or casual sexual partners

What to do if a Client may have an STI

☐ **Inform** the client that they should get tested and seek health care. They can go to a:

- Sexual health clinic: [Clinic Finder for BC](#)
- Walk-in clinic or any doctor's office
- Hospital for emergencies

☐ **Keep condoms** available for free for clients, if possible.

Learn more about safer sex methods: [Preventing STIs SmartSex Resource](#)

☐ **Discourage** sharing drug-use supplies

8. Other Infections

Residents may present with other common infections that are spread from person to person.

If suspected, call your Public Health Contact for guidance on:

- Group A Streptococcus
- Measles

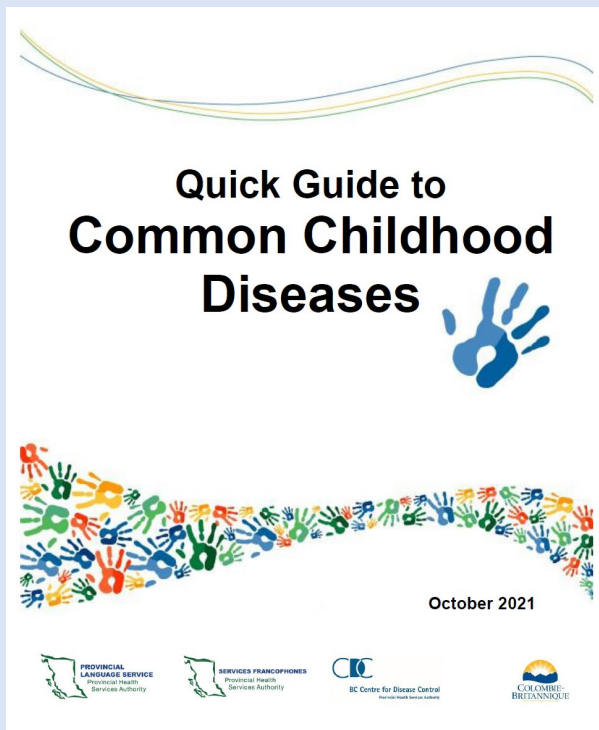
Other concerns for your site may be:

- Chicken pox (Varicella) or shingles
- Scabies
- Lice
- Whooping Cough
- Pink eye

For more information, “A Quick Guide to Common Childhood Diseases” by the BCCDC and the BC Ministry of Health is a good resource which can also be used for adults.

Go to the online copy: [Quick Guide to Common Childhood Diseases](#) (updated in 2021)

For illnesses related to pests (e.g. lice, scabies, bed bugs), also refer to [BC Housing Pest Control Policies and Procedures](#) (Page 44)



Quick Guide to Common Childhood Diseases includes

- Basic facts about the infectious disease or infestation
- A list of some of the signs and symptoms
- How the illness or infestation spreads
- The length of time from when a person is first exposed to the illness or infestation to when the first symptoms appear
- The time period during which an infected person is able to spread the illness or infestation to others
- Information on whether or not the person needs to be excluded from the school or child care centre
- Strategies to decrease the spread of the illness or infestation within a group setting.

Animal contact or exposure:

Public health follows up on certain types of animal contact that can cause disease in people, such as contact with a bat.

If someone may have had contact with a bat, help them get medical care (e.g. physician connected to shelter, walk-in clinic, emergency room) or call your Public Health Contact for guidance.

For more information on illness related to animals, refer to [Staying Healthy Around Animals | HealthLinkBC](#) and [Rabies | BCCDC](#)

9. Minimizing risk when preventing communicable disease

When taking steps to reduce the spread of communicable disease it is important for you to ensure these steps are not unintentionally causing harm to clients.

***Health Authority Guidance takes into consideration minimizing harm to clients and their direction should be followed when providing support to a site.**



Consider the following:

Risk:

- Are people sick at your site?
- What type of illness is circulating?
- Was the client at your site while sick or contagious?
- Can you lower the risk of spreading the illness? (e.g. masks, cleaning, distancing)
- Are clients in your site immunocompromised?
- What are your site policies for when clients are sick?

Client Experience:

- How will this impact clients?
- Are their basic needs being met?
- Can they follow directions and recommendations to prevent spread of disease?

Setting:

- Are weather events impacting the safety of client (heat, cold, smoke)?
- Are supplies available to prevent the spread? (cleaning supplies, masks, hand washing, etc.)
- Does site have a heating ventilation and air conditioning (HVAC) system or ability to increase ventilation

Appendices

Disease-specific Posters

- A. Respiratory Illness
- B. Gastrointestinal Illness
- C. Tuberculosis

General Communicable Disease Prevention Posters

- D. Extra Measures in Place at this Site
- E. How to Wear a Mask
- F. Putting on Personal Protective Equipment (PPE)
- G. Taking off Personal Protective Equipment (PPE)
- H. How to Hand Wash
- I. How to Hand Sanitize

Additional Resources

- J. Table of Additional Print Resources
- K. Staff Education Resources (template)
- L. Practice Scenarios (template)

Toronto Public Health (TPH) Tools

- [Tool 9: Room Cleaning/Disinfecting Checklist](#)
- [Tool 10: Floor Cleaning Checklist](#) (page 46)
- [Tool 11: Bathroom Cleaning/Disinfecting Checklist](#)
- [Tool 12: General Cleaning and Disinfecting Tips](#)
- [Tool 14: Cleaning and Disinfecting Sleeping Mats](#)
- [Tool 15: Linen and Laundry Tips](#)
- [Tool 16: Cleaning up Body Substances](#)
- [Tool 17: Illness Monitoring Log](#)

Additional Print Resources

Printable Posters	
Dish Washing - 4 Steps	https://www.interiorhealth.ca/sites/default/files/PDFS/dishwashing-four-steps.pdf
Cover Your Cough poster	https://www.toronto.ca/wp-content/uploads/2017/11/9929-tph-cover-your-cough-poster-eng-Dec-2012-aoda.pdf
Personal Toolkit to help protect you and your family during cold and flu season	http://www.bccdc.ca/Health-Info-Site/Documents/Respiratory/Toolkit_respiratory.pdf
Healthlink BC Resources	https://www.healthlinkbc.ca/

Resources to Support Site Planning	
Worksafe BC: Communicable Disease Prevention Resources	www.worksafebc.com/en/covid-19/covid-19-prevention
Worksafe BC: Communicable Disease Prevention: A guide for employers	www.worksafebc.com/en/resources/health-safety/books-guides/com-municable-disease-prevention-guide-employers?lang=en

Staff Education Resources

Orientation Recommendations

Use this section to fill in the recommended education resources for your staff, including this handbook and any additional site protocols or trainings.

1. General

2. Respiratory Illnesses

3. Gastrointestinal Illnesses

4. Infection Prevention and Control Measures

5. Personal Protective Equipment (PPE)

6. Cultural Safety

7. Trauma informed Practices

8. Outbreak Prevention and Planning

Practice Scenarios

The scenario templates below are created to support sites with becoming familiar with the content in the handbook.

Scenario 1: Gastrointestinal Illness (Shigella)

Staff in the supportive housing/shelter hot lunch food program report that several residents have symptoms of diarrhea, abdominal cramping and bloody stools. Four residents have come forward with symptoms. One resident (Resident A) has become quite dehydrated and is reporting vomiting and fever.

How would you support their concerns?

Another one of the residents (Resident B) volunteers in the kitchen as a dishwasher. He has been off sick for 3 days and says he won't be able to make his shifts for the rest of the week.

What do you do when you have staff sick, while at work or calling in sick?

What are your immediate steps, who do you think you should pull in to help with the situation?

How do you check if anyone else at the site is sick?

What do you do with the residents/clients that are sick?

How do you communicate updates on the situation and any extra measures that are needed at the site to staff, supervisors and clients/residents?

When do you need to report to Public Health? Do you know who to call at Public Health? What do you tell them?

What prevention measures and actions should you take? Identify the checklists in this handbook that can help guide you.

What posters should be displayed?

Scenario 2: Respiratory Illness

Shelter residents have been complaining to the night staff about a resident (Resident C) who is coughing all night and disrupting their sleep. He is up and down from the shared washroom coughing up phlegm and the dirty tissues are littering the washroom and dormitory floor. Resident C has stated he will not go to the doctor or hospital. Night staff are hesitant to take action, they don't want to see him turned away from the shelter services. Staff would prefer to support the client in house as much as possible. The day shift supervisor finds out about Resident C from his disgruntled roommates. He has been staying in the shelter for over a week in a 6 person dorm room.

How would you support their concerns?

What are your immediate steps, who do you think you should be pulled in to help with the situation?

What inquiries should the supervisor make? What information should be gathered? Are there any actions to be taken to support the roommates?

How do you communicate updates on the situation and any extra measures that are needed at the site to staff, supervisors and clients/residents?

How would staff encourage/support the resident to seek and access care?

How do you check if anyone else at the site is sick and/or monitor other residents for symptoms? What do you do with the residents/clients that are sick?

What supports should staff have in this situation?

When do you need to report to Public Health? Do you know who to call at Public Health? What do you tell them?

What prevention measures and actions should you take? Identify the checklists in this handbook that can help guide you.

What posters should be displayed?

Scenario 3: Tuberculosis (TB)

Resident D has been in the shelter since Jan 2022 to present. She was recently hospitalized (May 1 - 28), due to chronic cough with blood and significant weight loss where she was diagnosed with TB. Resident A returned to the shelter after discharge from hospital on May 29.

The site capacity is 50 residents, and all residents dine in a communal area. The living area is communal as well, and the rooms consist of either 2 or 4 beds.

On May 10, while Resident D was still hospitalized, the health authority connected with the shelter to inform them of the potential TB exposure. Public health provided information about TB and discussed the potential for on-site testing.

To identify exposures, the site was informed by Public Health to get their staff and resident list from Jan to May 1, 2023, including staff and residents who may not be at the shelter anymore.

Public Health would arrange on-site testing for residents and clients who were potentially exposed. Testing will occur on June 27 and 29 (8 weeks after exposure).

After being informed of the exposure and recommended testing, some of the residents express fear related to potentially contracting TB and are upset that the testing won't be taking place sooner.

How would you support their concerns?

What are your immediate steps, who do you think you should be pulled in to help with the situation?

What inquiries should the supervisor make? What information should be gathered? Are there any considerations taken around the roommates?

How do you communicate updates on the situation and any extra measures that are needed at the site to staff, supervisors and clients/residents?

How would staff encourage/support the resident to seek and access care?

How do you check if anyone else at the site is sick and monitor other residents for symptom development? What do you do with the residents/clients that are sick?

What supports should staff have in this situation?

What prevention measures and actions should you take? Identify the checklists in this handbook that can help guide you.

What posters should be displayed?

Scenario Template: _____

Add your own scenario - use this tool to discuss a situation that has occurred at your site.

How would you support their concerns?

What are your immediate steps, who do you think you should pull in to help with the situation?

How do you check if anyone else at the site is sick?

What do you do with the residents/clients that are sick?

When do you need to report to Public Health? Do you know who to call at Public Health? What do you tell them?

What prevention measures and actions should you take? Identify the checklists in this handbook that can help guide you.

What posters should be displayed?

We Value Your Feedback!

You are invited to participate in an open survey at any time after using any section of the BC Housing Communicable Disease (CD) Handbook.

Your insights will help us improve the handbook and inform future revisions. The survey is open to all users and provides an opportunity to share your experiences, suggestions, and any challenges encountered. Your input is essential in ensuring the handbook remains a relevant and effective resource.

Click below for the survey:

<https://surveys.vch.ca/Survey.aspx?s=3bcc59d1ad0b4fd588703bda35365c2b>

Posters

The following pages include colour and black and white copies of posters for your site to use as needed.

Infections caused by a virus that affect the respiratory system (e.g. nose, throat, lungs)

Examples: Flu (influenza), COVID-19, RSV (respiratory syncytial virus)

Symptoms



Shortness of breath



Sore throat



Runny nose/
nasal
congestion



Fever/
chills

Length of illness



Respiratory illnesses can last from a few days to a few weeks. Coughs can last even longer.

How to prevent respiratory illnesses



Hand Hygiene: wash hands with soap and water or use hand sanitizer when:

- Hands look dirty
- After using the bathroom
- Before eating or preparing food



Respiratory etiquette:

- Cover your coughs with your sleeve or a tissue
- Throw away used tissues into trash right away
- Wear a mask when sick

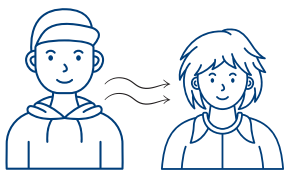


Avoid touching your face: especially your eyes, mouth and nose



Get your flu and COVID-19 vaccinations

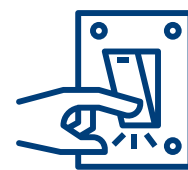
How Respiratory Illnesses spread



From person to person (e.g. coughs, sneezes, singing, talking).



Crowded, closed spaces with poor air flow and ventilation.



Touching contaminated surfaces.

Respiratory Illnesses



BC Centre for Disease Control
Provincial Health Services Authority

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Avoid touching your face: especially your eyes, mouth and nose

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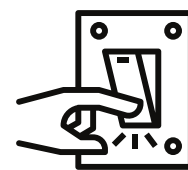
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Touching contaminated surfaces.

Respiratory Illnesses



BC Centre for Disease Control
Provincial Health Services Authority

What to do if you are sick



Stay home or away from others if you are sick.



If you have to be near others, wear a mask and try and keep space between you and others



Clean your hands often and practice good respiratory etiquette.



Don't share items that touch the mouth (drinks, food, utensils, cigarettes, smoking supplies)

Go to an urgent care clinic or emergency department if you:



- Find it hard to breathe
- Have chest pain
- Can't drink anything
- Feel confused
- Feel very sick

Keep spaces safe

Regularly clean and disinfect



Increase cleaning of high touch surfaces (door knobs, remote controls, light switches, railings, washrooms, counters, etc.)

Open windows for ventilation



Open windows, if the weather permits, to encourage better ventilation

Learn more

Call HealthLink at 8-1-1

Speak to staff if you have questions or concerns about respiratory illnesses at your site.

Respiratory Illnesses



BC Centre for Disease Control
Provincial Health Services Authority

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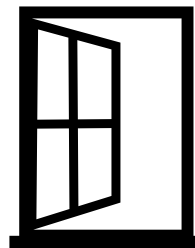
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Learn more

Call HealthLink at 8-1-1

Speak to staff if you have questions or concerns about respiratory illnesses at your site.

Gastrointestinal Illnesses

Gastrointestinal illnesses are infections which irritate the stomach and may cause nausea, vomiting, diarrhea, or fever. Sometimes called “stomach flu”, it is not caused by the influenza or “flu” virus.

They can be easily spread from person to person. Gastrointestinal illness outbreaks happen year-round but are more common in the colder months.

What to know

- People who are ill do not need to isolate.
- Illness can last for 2 days or more.
- Some people with mild illness may recover on their own.
- Some people become severely ill and may need treatment to recover.

How Gastrointestinal Illnesses spread

- Germs can transfer from the person who is ill by saliva, vomit or poop.
- Even very small amounts can be enough to cause illness.
- The germs can live on surfaces that others touch or use and then get sick.
- This can be through food and drink, sharing objects like cigarettes or pipes, surfaces that are not cleaned enough or sex activities that involve the anus.

Prevention



WASH
HANDS



CLEAN
SURFACES



HANDLE
FOOD SAFELY



SHOWER
REGULARLY

Symptoms



Stomach
cramps



Diarrhea



Vomiting



Fever

Gastrointestinal Illnesses

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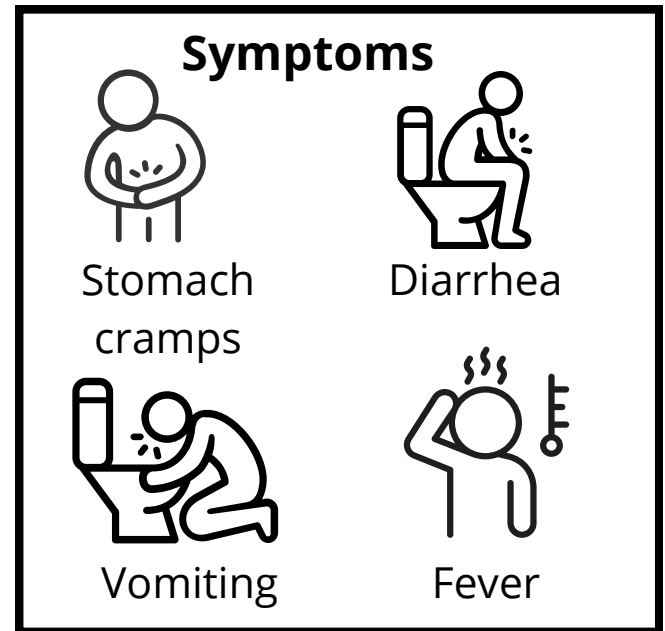
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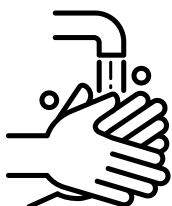
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Prevention



WASH
HANDS



CLEAN
SURFACES



HANDLE
FOOD SAFELY



SHOWER
REGULARLY

What to do if you are sick



See a health-care provider if you have bloody diarrhea, or severe diarrhea.

Drink plenty of clear fluids such as water or broth.



Wash your hands well and often with soap and warm water, especially after using the washroom, and before eating or preparing food and drinks.

A health-care provider may recommend testing to find out if you need antibiotic treatment. Always take your medications as prescribed and complete the full course of your prescription.



Separate soiled laundry and avoid shaking it out. Wash soiled laundry and bedding with regular detergent and hot water, followed by machine drying.

If you work or volunteer in a food setting, **do not work** until you are symptom-free for at least **48 hours**.

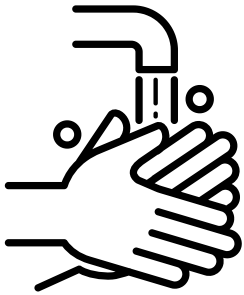
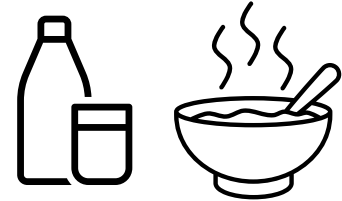


What to do if you are sick



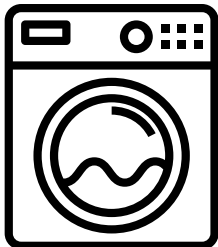
See a health-care provider if you have bloody diarrhea, or severe diarrhea.

Drink plenty of clear fluids such as water or broth.



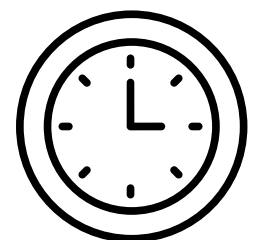
Wash your hands well and often with soap and warm water, especially after using the washroom, and before eating or preparing food and drinks.

A health-care provider may recommend testing to find out if you need antibiotic treatment. Always take your medications as prescribed and complete the full course of your prescription.



Separate soiled laundry and avoid shaking it out. Wash soiled laundry and bedding with regular detergent and hot water, followed by machine drying.

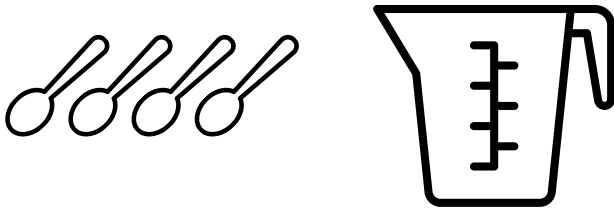
If you work or volunteer in a food setting, **do not work** until you are symptom-free for at least **48 hours**.



Cleaning Guidelines

REMEMBER, CLEAN FIRST, THEN DISINFECT

Routine cleaning and disinfection



4 teaspoons of bleach in one litre of water.

For regular cleaning, wash hard surfaces with an all-purpose cleaner and hot water. Then disinfect by using a solution of 4 teaspoons of household bleach mixed with 1 litre of water. Then air dry.

Clean and disinfect high-touch surfaces, common spaces, and washrooms at least **three times a day**.



Spill Cleanup Kits

Have spill kits available for staff, volunteers, and residents to use for cleaning up vomit or stool. Spill kits should include:

- Garbage bags and tape for closing
- Disposable gloves, Paper towels, Cloth, Detergent
- Bleach or disinfectant (1 cup bleach + 10 cups water)
- Bucket & Mop

NOTE: Make sure to clean and disinfect mops, cloths, and brushes after being used to clean body fluid spills.

Remind everyone to wash their hands with soap and water or use alcohol-based hand sanitizer.

Washrooms

Make sure washrooms are clean, available and have toilet paper, soap, paper towels, and sinks with hot and cold running water.

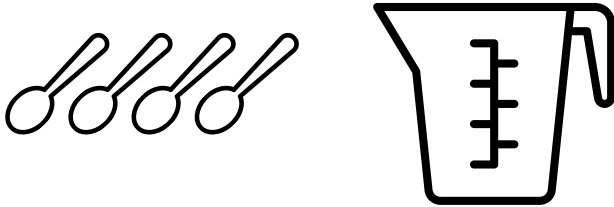


If washrooms must be shared, provide wipes to people who are sick and encourage them to wipe down the washroom after use.

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Tuberculosis Infections (TB)

Tuberculosis is a lung infection that is spread when someone coughs or sneezes the bacteria into the air.

You can get it by inhaling air containing the Tuberculosis bacteria.

You usually need to be in close contact with someone who has Tuberculosis.

Tuberculosis usually affects the lungs, but it can also affect other body parts.

How Tuberculosis spreads

- Coughing
- Sneezing
- Sharing smokes/ pipes

What to do if you are sick

If you think you might have Tuberculosis or if you've been around someone who has it, it's a good idea to see a health care provider.

You may be asked to:

- Have a skin test
- Go for a chest x-ray
- Give phlegm samples

Symptoms



Extreme fatigue



Fever



Unexplained weight loss



Coughing for over 3 weeks



Drenching night sweats



Shortness of breath or chest pain



Coughing up blood



Swollen lymph nodes

Getting treated for Tuberculosis

Cough and other symptoms can be caused by a variety of things. If you have Tuberculosis, it is treatable and your doctor might want you to take antibiotics. Make sure you take your medications as prescribed and finish the full course of your prescription.

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Extra measures in place at this site

Date:

Site:



- If you don't feel well, please let staff know.
- Masks are available if you are sick or choose to wear one.
- Avoid sharing foods and personal items.



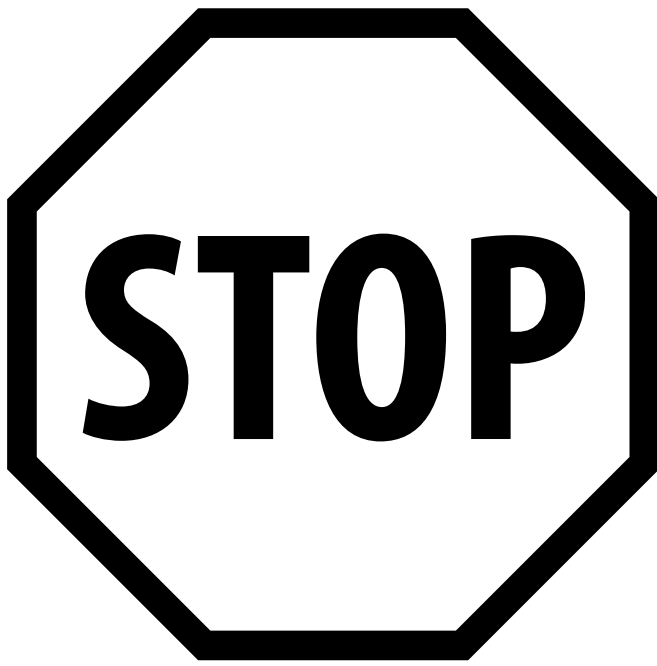
Clean your hands often:

- When you enter and leave a room
- After using the washroom
- Before eating or touching your face

Questions?

Ask a staff member.

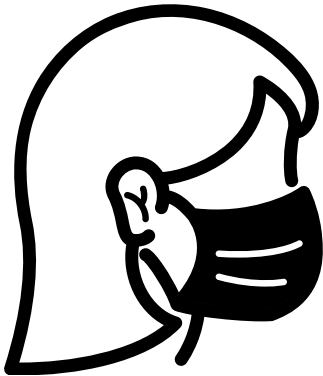
**Thank you for helping to stop
the spread!**



Extra measures in place at this site

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Thank you for helping to stop the spread!

How to wear a mask

1. Clean your hands

Use hand sanitizer or soap and water



2. Check your mask

Check the mask to make sure it's not damaged. Replace it if it's wet, dirty or ripped. Ensure colour side of the mask faces outwards.



3. Wearing your mask



Mold the metal strip to your nose



Loop the straps around your ears.



Pull the mask under your chin.



Press the metal strip again to fit on your nose.

Ensure the mask covers your mouth and nose fully without any gaps. Do not touch the front of the mask, if you do, clean your hands.

4. Taking off your mask



Clean your hands.



Gently remove the mask using both ear loops.



Throw in bin.



Clean your hands.

How to wear a mask

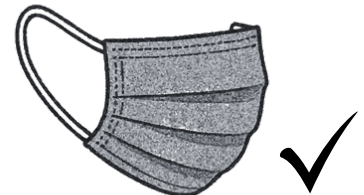
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Personal Protective Equipment



BC Centre for Disease Control
Provincial Health Services Authority

Put on Personal Protective Equipment (PPE) in this order

If a specific type of Personal Protective Equipment (PPE) will not be used, skip to the next step.

Make sure there is no damage on PPE (e.g., rips and tears).

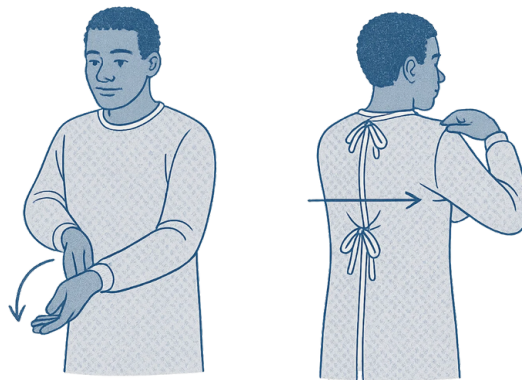
1. Clean your hands

Use hand sanitizer or soap and water



2. Put on the gown

Pull on the gown from the front and tie the ties.



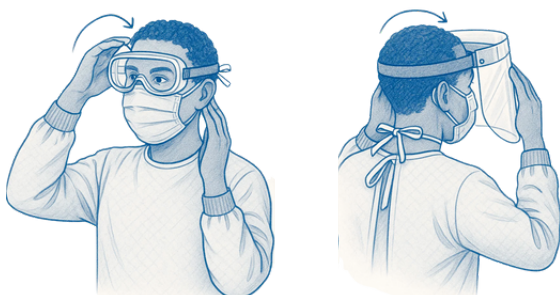
3. Put on the mask

Pull the mask down under your chin. Press down the metal nose bridge.



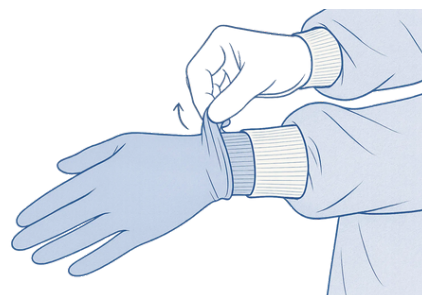
4. Put on eye protection

Use the straps to put on face-shield or goggles over your eyes.



5. Put on the gloves

Extend gloves to cover the cuffs of the gown.



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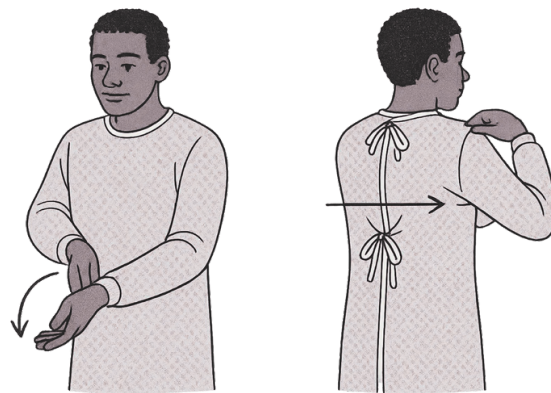
1. Clean your hands

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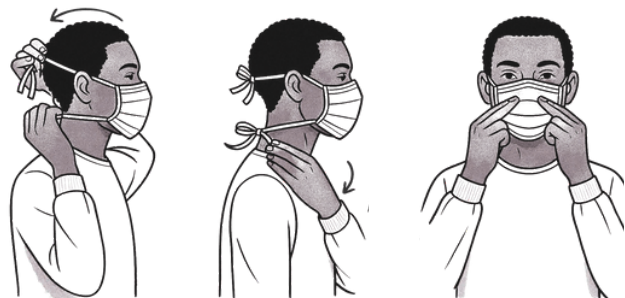
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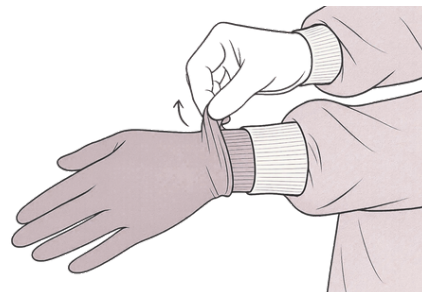
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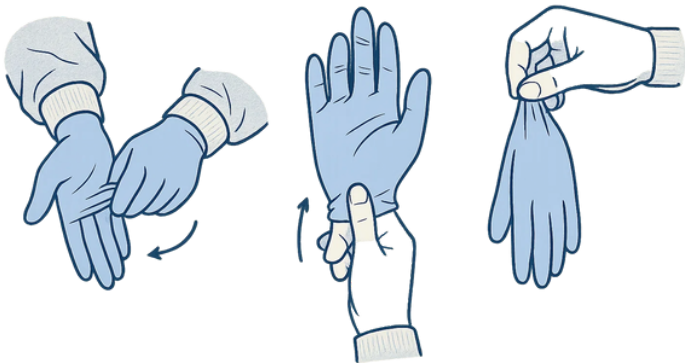
Clean your hands after each step

Use hand sanitizer or soap and water



1. Take off gloves

- 1st glove: Pinch the glove and peel away from the hand.
- 2nd glove: Insert one or two fingers under the cuff. Peel away from the inside out.
- Throw in bin.
- Clean your hands.



2. Take off gown

- Undo neck ties, undo back or waist ties.
- Touching only the inside of the gown, pull gown away from neck and shoulders.
- Turn gown inside out and roll into a bundle.
- Launder (if reusable) or discard (if disposable).
- Clean your hands.



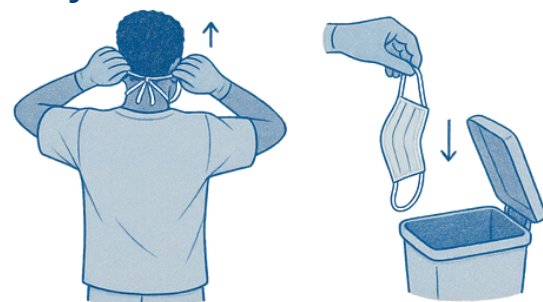
3. Take off eye protection

- Grasp the straps slightly upwards and then away from head and face.
- Clean your hands.



4. Take off mask

- Without touching the front, gently remove the mask from behind by holding both ear loops or ties.
- Throw in bin
- Clean your hands.



Personal Protective Equipment



BC Centre for Disease Control
Provincial Health Services Authority

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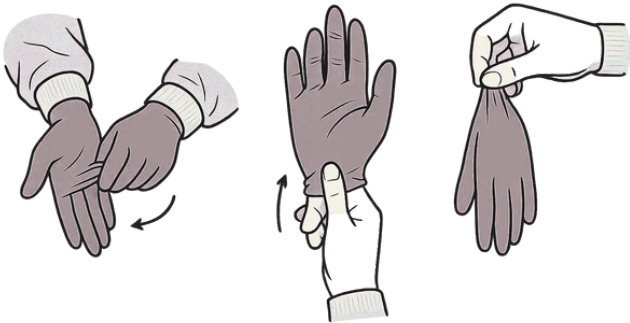
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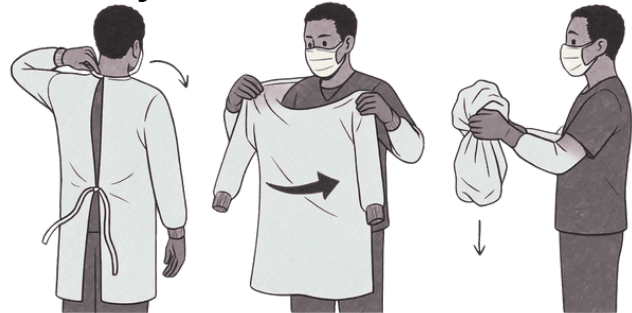
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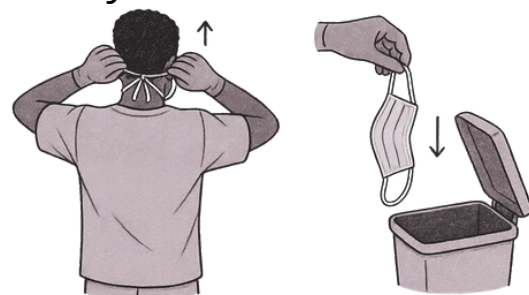
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How to Hand Wash

1



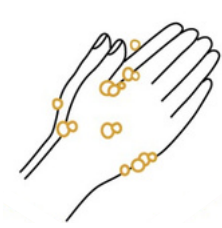
Wet hands with warm water.

2



Apply soap.

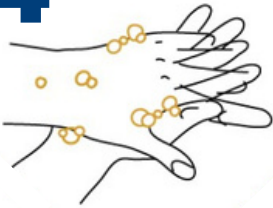
3



Lather soap and rub palm to palm.

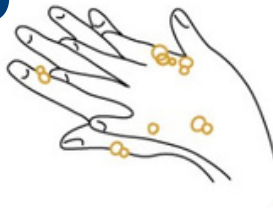
Lather hands for a total of 30 seconds.

4



Rub in between and around fingers.

5



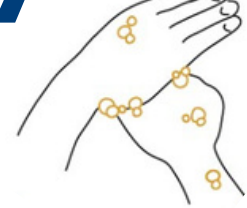
Rub back of each hand with palm of other hand.

6



Rub fingertips of each hand in opposite palm.

7



Rub each thumb clasped in opposite hand.

8



Rinse thoroughly under running water.

9



Pat hands dry with paper towel.

10



Turn off tap using paper towel.

Your hands are now clean.

How to Hand Wash

1



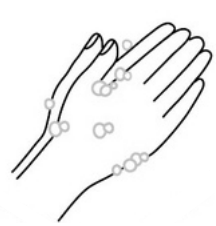
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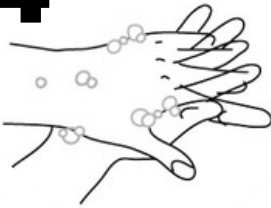
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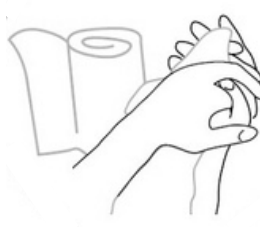
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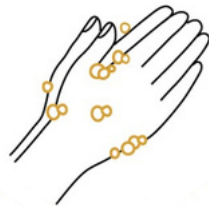
How to Clean Your Hands Using Hand Sanitizer

1



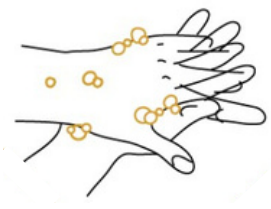
Apply loonie size of product to palms of dry hands.

2



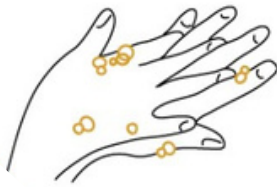
Rub hands together, palm to palm.

3



Rub in between and around fingers and wrists.

4



Rub fingertips of each hand in opposite palm.

5



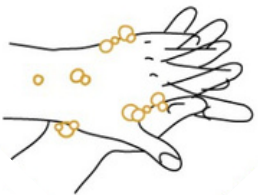
Rub nail beds of each hand in opposite palm.

6



Rub each thumb clasped in opposite hand.

7



Rub hands for 15 to 20 seconds until dry. Do not use paper towels.

8



Once dry, your hands are now clean.

Your hands are now clean.

How to Clean Your Hands Using Hand Sanitizer



BC Centre for Disease Control
Provincial Health Services Authority

1



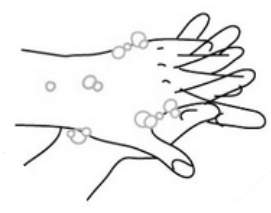
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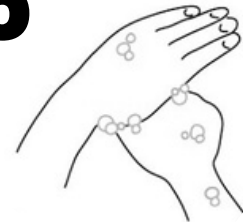
Rub fingertips of each hand in opposite palm.

5



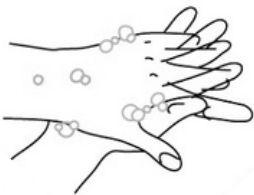
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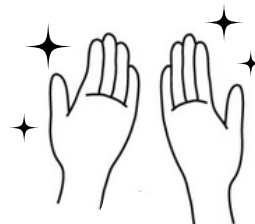
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