

CUYAHOGA COUNTY  
BOARD OF HEALTH

YOUR TRUSTED SOURCE FOR PUBLIC HEALTH INFORMATION

**Field Investigation for a Gastroenteritis Outbreak in a Child Care Facility**

<b>Facility Name:</b>	<b>Date:</b>
<b>Facility Address:</b>	<b>Sanitarian:</b>

**Facility Information**

Total # of attendees:	Total # of staff:
Total # of ill attendees:	Total # of ill staff:
Age range of attendees:	Licensing Agency:
Total # of classrooms:	Classrooms affected:
Did the facility receive all relevant infection control guidance documents from CCBH?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	

**Possible Contributing Environmental Factors**

Were any adults ill with vomiting or diarrhea? If yes, provide details (job title, classroom, date of onset):	<input type="checkbox"/> Yes <input type="checkbox"/> No
Were any children ill with vomiting or diarrhea? If yes, provide details (classroom, date of onset):	<input type="checkbox"/> Yes <input type="checkbox"/> No
Were there any illness episodes in a common area? If yes, provide details (location, date):	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>Is the facility utilizing a disinfectant that is effective against Norovirus?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the facility prohibiting vacuuming of vomit or diarrhea?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are handwashing sinks adequately stocked with soap and paper towels?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is signage posted throughout the facility to advise of the outbreak and measures to take to limit exposure?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Were there any recent special events or offsite activities? If yes, provide details:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have group activities been temporarily suspended until the outbreak is over?	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Control Measures for Attendees**

Are children that become ill with vomiting or diarrhea immediately isolated? Describe procedures:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are ill children excluded from the facility until 48 hours after symptoms have subsided?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are children restricted from contact with children & staff from other classrooms until the outbreak is over?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has written notification of the outbreak been provided to parents?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>Does the written parent notification provide adequate guidance?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is guidance and supervision provided for children to ensure handwashing practices are adequate?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are handwashing sinks accessible for all children and adequate in number?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are children observed practicing proper handwashing?	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Control Measures for Staff**

Are staff that become ill with vomiting or diarrhea immediately sent home?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are ill staff excluded from the facility until 48 hours after symptoms have subsided?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the facility share staff with other facilities? If yes, provide details:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>Are staff dedicated to one position until the outbreak is over?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are staff trained in infection control? (handwashing, diapering, cleaning & disinfection)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is documentation of infection control training maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Were staff observed practicing proper handwashing and glove use?	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Cleaning & Disinfection**

What products are utilized for routine cleaning & disinfection?
<i>What products are utilized for cleaning vomit or diarrhea?</i>
What type of PPE do staff wear when cleaning vomit or diarrhea? <input type="checkbox"/> gloves only <input type="checkbox"/> gloves & gown <input type="checkbox"/> gloves, gown & mask

**Additional Notes:**