## **Guidance for Food Services in Outbreaks**

## Personal Care /Group/Residential Homes

| For Dining Room (always follow Public Health's recommendations) |   |
|---|---|
| Fatas   |   |
| Entrance  | <ul> <li>Encourage proper hand hygiene prior to entering the dining room.</li> <li>Alcohol-based hand sanitizer should be available prior to entering the dining room,</li> </ul>                             |
| and   | <ul> <li>Alcohol-based hand sanitizer should be available prior to entering the dining room,</li> <li>or if necessary, dispensed by staff to incoming residents (depending on expected</li> </ul>             |
| Screening   | compliance of residents).   |
|   | <ul> <li>Promote good respiratory hygiene (cover all coughs and sneezes).</li> </ul>  |
|   | Screen residents for illness prior to entering the dining room. Any ill residents must stay in  |
|   | their rooms and receive tray service (unless it is known that the illness is not infectious in  |
|   | nature).  |
|   | All known COVID-19 positive residents should receive tray service to their room whether   |
|   | symptomatic or not.   |
| Social  | Encourage physical distancing of 2 metres:  |
| Distancing  | <ul> <li>Diners sharing a room may share a table.</li> </ul>  |
|   | Do not overcrowd dining room:   |
|   | <ul> <li>Consider having two sittings.</li> </ul>   |
|   | <ul> <li>If dividers are used, they should be cleaned and disinfected after each meal sitting.</li> </ul>   |
|   | Ensure dividers are not interfering with airflow or posing a hazard to residents and staff.   |
|   | Implement measures to ensure residents:   |
|   | <ul> <li>Go directly to their table and do not congregate in the entrance area, and</li> </ul>  |
|   | Return to their rooms in a timely manner; no loitering.   |
|   | Consider allowing healthy residents to have a "buddy" for mealtimes in dining room where  |
|   | applicable. This pair/group would be set for the duration of the outbreak and should not be   |
| Faad  | changed. It allows people to have a dining partner and some socialization.  |
| Food  | Remove all communal food (fruit bowl, snacks, coffee, etc.) from self-serve. Have staff serve instead.  |
| Service   |   |
|   | <ul> <li>Remove commonly touched items from tables (e.g., salt and pepper, napkins, vases, etc.).</li> <li>Single-service packets of condiments can be given directly to each resident rather than</li> </ul> |
|   | self-serve in a bulk container. Staff may also portion or serve condiments to residents.  |
|   | <ul> <li>Discard unused packets served to residents.</li> </ul>   |
|   | If staff are assisting residents with eating, they should perform hand hygiene prior to assisting   |
|   | and before assisting any other resident. Hand sanitizer may be used if hands are not visibly  |
|   | soiled.   |
|   | Where possible, pre-set tableware to minimize resident contact with multiple sets of cutlery  |
|   | and plates.   |
| Other   | Close dining rooms or restrict resident access when not in use.   |
| Precautions   | Clean and disinfected surfaces following each meal service, including chairs (including the   |
|   | underneath edge of the chair seat), tables, and railings.   |
|   | Close common washrooms in dining areas. Remind residents to use washroom facilities in  |
|   | their rooms prior to meals.   |
|   | Stagger mealtimes according to cohort (i.e., staggered to let residents on a single wing or   |
|   | floor eat at one time; if someone becomes ill, it is easier to identify cohorts, isolate, and   |
|   | contact trace.)   |

