

Vomit and Diarrheal Accident Clean Up Procedure

1. The person in charge will designate a staff member to lead cleanup and assign appropriate staff to aid in cleanup.
2. Promptly block off the accident with chairs, "Just Mopped" signs, etc.
3. Remove all ill individuals, unnecessary staff and guests. Keep everyone out of the affected area until cleanup is complete.
4. Virus particles can settle on surfaces up to 25 feet away from the event. All exposed food within this area must be discarded. All surfaces will need to be cleaned and disinfected.
5. Obtain the "Clean Up Kit" from its stored location. The kit will contain disposable gloves, disposable aprons, disposable shoe covers, disposable masks, kitty litter, paper plates, trash bags, wire twist ties, paper towels, spray bottle, bucket and unopened container of bleach (or other sanitizer effective against Norovirus).
6. Put on apron, shoe covers, mask and gloves.
7. Place kitty litter directly on any liquid matter and allow it to soak up any fluids.
8. Using paper plates and paper towels clean up the kitty litter and carefully dispose of into a trash bag.
9. Remove gloves and also dispose into trash bag, twisting it closed. Wash hands and put on new gloves.
10. Apply straight bleach onto the affected area and allow to remain wet for at least 10 minutes. Wipe dry using paper towels. Dispose of paper towels into trash bag, twisting it closed.
11. Make a mixture of sanitizing spray by adding bleach to the bleach (sanitizer) line marked on the spray bottle provided. Finish filling with water to the fill line marked on the spray bottle. Spray all affected surfaces within the area. Allow to remain wet for 10 minutes. Wipe dry using paper towels. Dispose of paper towels and then gloves into the trash bag, closing it with a wire twist tie.
12. Wash hands and put on new gloves. Place trash bag containing absorbed material inside a second trash bag and twist closed.
13. Fill bucket with plain water. Rinse off all sprayed surfaces using wet paper towels and allow to air dry. Dispose of paper towels into the second trash bag, twisting it closed.
14. Remove apron, gloves, and then mask and also dispose into the second trash bag. Close bag with wire twist tie. Directly dispose of the doubled trash bag containing vomit/fecal matter and all clean up supplies directly into trash dumpster.
15. Wash hands thoroughly with soap and water.
16. Assign staff to thoroughly sanitize frequently touched surfaces in all relevant guest/patron/client areas by spraying surfaces with the 10% bleach sanitizer solution, allowing surfaces to remain wet for 10 minutes, wiping dry and rinsing with water using paper towels while wearing gloves. Discard paper towels and gloves into the regular trash. Wash hands thoroughly with soap and water.
17. Restock "Clean Up Kit" and return it to its stored location.

Employee Sickness Reporting Procedure

Employees will not be allowed to work in the kitchen if they have symptoms of: vomiting, diarrhea, jaundice, sore throat with fever, or an infected wound on the hands, wrists or arms unless protected with an impervious cover.

Employees will be excluded from the premises if they have been diagnosed by a health care provider to have: Campylobacter, Cryptosporidium, Cyclospora, Entamoeba histolytica, shiga toxin-producing Escherichia coli, Giardia, Hepatitis A, Norovirus, Salmonella spp., Salmonella Typhi, Shigella, Vibrio cholerae or Yersinia or have been exposed to a person involved with or diagnosed with Norovirus, E. coli, Salmonella Typhi, or Hepatitis A.

Employees must report to the person in charge if they have any of these symptoms, have been in contact with or received a diagnosis of a foodborne illness.

The person in charge will notify the Logan County Health District at (937)651-6206 of any employee who has been diagnosed with or exposed to someone who has been diagnosed with a foodborne illness.

I, _____, have been informed and trained on the Vomit and Diarrheal Accident Clean Up and Employee Sickness Reporting Procedures.

Employee Signature: _____

Policy Effective Date: _____

Date: _____

Document Revision Date: _____