Influenza Outbreak

Manage an outbreak in NDSL sites

All staff share the responsibility for keeping residents safe. Complete the following actions when an influenza outbreak is confirmed. This checklist provides general measures only – refer to the corresponding section in the <u>Guide for Outbreak Prevention & Control in Non-Designated Supportive Living Sites</u> for detailed recommendations. When applicable, follow site-specific policies.

| Infection Prevention Control measures | Guide Section |
|---|------------------|
| ☐ Recommend confirmed and symptomatic residents remain in their room and away from others. | 4.1 |
| Implement IPC recommendations in Figure 2: Place Contact and Droplet precaution signage outside room of confirmed and symptomatic residents as per facility policy. Wear recommended PPE (including mask/respirators, gloves, gown and eye protection). Conduct an Infection Prevention and Control Risk Assessment (IPCRA) prior to every resident interaction. Perform hand hygiene and practice respiratory etiquette. | 4.1 |
| \square Use continuous masking and eye protection for the duration of the outbreak. | 5.1 |
| Administrative measures | Guide Section |
| ☐ Notify appropriate HCW/staff and departments within the facility/unit. | 5.2 |
| ☐ Place outbreak signage at the entrance of the facility/unit. | 5.2 |
| ☐ Report daily using the online Facility CDC Outbreak Daily Report Portal (and to IPC as per zone process). | 5.2 |
| Assign HCW/staff to care for asymptomatic residents before symptomatic residents. | 4.2 |
| $\hfill \Box$ Cohort HCW/staff to work only in affected or only in unaffected areas. | 4.2 |
| ☐ Inform residents of the outbreak. | 5.2 |
| ☐ Alert transport staff and the receiving site to use additional precautions if a symptomatic resident is attending another site for an appointment. | 5.6 |

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| Resident restrictions | Guide Section |
|---|------------------|
| Recommend that confirmed and symptomatic residents remain in their rooms with Contact and Droplet precautions until: symptoms have improved; AND the resident is feeling well enough to resume normal activities; AND the resident has been free of fever for 24 hours without the use of fever reducing medication. | 8.3 |
| ☐ Follow site processes for provision of oseltamivir (Tamiflu) treatment for confirmed and symptomatic residents. | 8.3 |
| ☐ Follow site processes for provision of oseltamivir (Tamiflu) prophylaxis for asymptomatic residents regardless of immunization status. | 8.3 |
| Restrictions on affected facility/units | Guide Section |
| ☐ Implement restrictions for the facility/unit as directed by the AHS Public Health Outbreak Team. | 8.4 |
| ☐ Use Risk Assessment Worksheet and Risk Assessment Matrix for admissions/transfers/discharges (as per zone process). | 8.5 |
| Group/social activities and other events | Guide Section |
| ☐ Allow asymptomatic residents to take part in daily activities. | 5.7 |
| ☐ Follow the AHS Public Health Outbreak Team direction on whether to continue with routine group activities. | 5.7 |
| ☐ Use outbreak measures such as physical distancing, masking and hand hygiene for low-risk group activities that may continue. | 5.7 |
| \square Postpone high-risk group activities (such as singing and bus outings). | 5.7 |
| Nourishment areas / sharing of food | Guide Section |
| ☐ Deliver meals to confirmed or symptomatic residents in their rooms. | 5.8 |
| ☐ Use single serve items and discontinue family style dining if recommended by the AHS Public Health Outbreak Team. | 5.8 |
| Visitors and Designated Family / Support Persons (DFSPs) | Guide Section |
| ☐ Encourage visitors to postpone visiting. | 5.10 |
| ☐ Recommend visitors/DFSPs wear a mask while in common areas. | 5.1 |
| ☐ Recommend symptomatic visitors/DFSPs delay visit. | 4.10 |
| ☐ Advise visitors/DFSPs of the importance of hand hygiene. | 4.10 |

| Advise visitors/DFSPs of the potential risk of exposure to a symptomatic resident and demonstrate the use additional PPE. | 4.10 |
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| HCW/staff outbreak control measures | Guide Section |
| ☐ Follow the AHS Public Health Outbreak Team recommendations and site specific policies for management of unimmunized HCW/staff. | _{e-} 8.11 |
| ☐ Advise HCW/staff of relevant work recommendations and/or restrictions. | 8.11 |
| Advise symptomatic HCW/staff to report illness to manager/designate ar not attend work. | nd 4.11 |
| □ Advise symptomatic HCW/staff to follow recommendations in Table C fo COVID-19 at-home Rapid Antigen Testing. | r 4.11 |
| ☐ Advise HCW/staff who develop symptoms at work to put on a mask, info manager/designate and leave the workplace as soon as possible. | rm 4.11 |
| Specimen collection | Guide Section |
| Follow the AHS Public Health Outbreak Team specimen collection recommendations for symptomatic residents. Specific direction will be provided on the number and type of specimens to collect. Specimen collection recommendations are based on site capacity ar availability for specimen collection. | 4.12 nd |
| Ensure proper specimen collection, handling, and labelling (including Elf when specimen collection is recommended by the AHS Public Health Outbreak Team. | () 4.12 |
| Enhanced environmental cleaning and disinfection | Guide Section |
| ☐ Perform cleaning using PPE and recommended cleaning products. | 4.13 |
| ☐ Follow recommendations in <u>Principles for Environmental Cleaning and Disinfection</u> . | 4.13 |
| Enhance cleaning and disinfection frequency. Clean and disinfect low touch surfaces at least once per day and hig touch areas at least twice per day. Immediately clean and disinfect visibly dirty surfaces. | h 4.13 |
| \square Conduct a post isolation/additional precautions cleaning and disinfection | 10 |