

# OUTBREAK

## Respiratory Outbreak Control Measures Checklist

Facility: \_\_\_\_\_ Date: \_\_\_\_\_

Date Outbreak Declared: \_\_\_\_\_ Outbreak #: \_\_\_\_\_

Health Unit Contact: \_\_\_\_\_

Infectious Disease Program intake line: 807-625-8318

### IMMEDIATE CONTROL MEASURES FOR OUTBREAK

- Isolate symptomatic residents, implement droplet precautions and encourage hand hygiene.
- Notify staff of potential outbreak.
- Start Line Listing of symptomatic residents and staff and fax separately to secure fax line: **807-625-4822**.
- Collect Nasopharyngeal (NP) Specimens to send to Public Health Lab, ideally within 48 hours of symptom onset.
- Notify the Thunder Bay District Health Unit of potential outbreak by calling **807-625-8318** or after hours 807-625-1280 and ask for ID on call.

### Nasopharyngeal (NP) Specimen Collection:

- Check expiry dates on swabs and ensure residents name, collection date, and date of birth are on all specimen containers.
- Collect NP MRVP swabs on up to FOUR symptomatic residents. FLUVID testing will be performed on residents/staff beyond the first four during institutional outbreaks.
- Complete all sections of requisition – and select the “COVID-19 Virus AND Respiratory Virus” box in section 5.
- Include outbreak number provided by PHU on requisition.
- Ensure collection swab is capped **tightly** before placing into biohazard bag, and place requisition in outside pocket.
- Refrigerate sample, and arrange for transport to PHL within 72hrs of collection.

### Control Measures for Residents:

- Isolate symptomatic residents on Droplet / Contact Precautions.
- Encourage hand hygiene practices and have alcohol-based hand rub available.
- Do not share equipment between residents if possible OR thoroughly clean and disinfect between use.
- Cohort residents whenever possible.

### Control Measures for Staff and Volunteers:

- Provide education to staff on routine practices, additional precautions, environmental cleaning and disinfection.
- Cohort staffing if possible. Consider assigning staff to a single unit.
- Report illness to charge person; list symptoms and onset date.

- Exclude ill staff, students and volunteers from the facility.
- Staff/volunteers who work in more than one facility should notify the facility NOT in outbreak and follow their policy regarding exclusion.

### **Control Measures for Visitors:**

- Notification of visitors through signage (at entrances and resident rooms).
- Notification of all agencies contracted to work in the facility.
- Ill visitors are not permitted in the facility.
- Encourage vaccination where applicable.
- Encourage well visitors to reschedule their visit if possible; if necessary, instruct visitor to:
  - » Clean hands before and after visit.
  - » Use appropriate PPE for direct care of ill residents.
  - » Visit only one resident, clean hands and exit facility.

### **Environmental Cleaning:**

- Increase frequency of cleaning and disinfection of high touch surfaces.
- Increase cleaning and disinfection of ill resident's immediate environment.
- Promptly clean and disinfect surfaces contaminated by stool and vomit.
- Use appropriate products for cleaning and disinfection as per PHO Best Practices for Environmental Cleaning for Prevention and Control of Infections in All Health Care Settings

### **Admissions, Re-admission, and Transfers:**

- Admissions/transfers/return from absence decisions may be made in consultation with TBDHU and the OMT.
- Notify Hospital Infection Control Practitioner if transferring resident to hospital.

### **Medical Appointments:**

- Re-schedule non-urgent appointments.

### **Communal Activities:**

- Cancel or postpone large gatherings and group outings.
- Small gatherings for well residents only, consult with Health Unit.
- Conduct on-site programs such as physiotherapy for isolated residents in their rooms if possible.

### **Additional Control Measures for Influenza:**

- Offer antiviral prophylaxis to all residents and start within 48hrs of symptom onset for maximum effectiveness.
- Offer influenza immunization to non-immunized residents.
- Staff who refuse influenza vaccination should be given the option of taking antiviral medications in order to continue their duties within the facility.

Please note: treatment decisions are the responsibility of the attending physician.  
For antiviral medication information, refer to the "Control of Respiratory Infection Outbreaks in Long-Term Care Homes, 2018" or most recent document.