## Influenza Outbreak

## Manage an outbreak in LTC, DSL and hospice 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 <a href="Guide for Outbreak Prevention & Control in Long Term Care">Guide for Outbreak Prevention & Control in Long Term Care</a>, <a href="Designated Supportive Living">Designated Supportive Living</a>, and <a href="Hospice Sites">Hospice Sites</a> for detailed recommendations. When applicable, follow site-specific policies.

Infection Prevention Control measures	Guide Section
☐ Isolate confirmed and symptomatic residents.	4.1
<ul> <li>Implement IPC recommendations in Figure 2:</li> <li>Place Contact and Droplet precaution signage outside room of confirmed and symptomatic residents.</li> <li>Wear recommended PPE (including mask/respirators, gloves, gown and eye protection).</li> <li>Conduct an Infection Prevention and Control Risk Assessment (IPCRA) prior to every resident interaction.</li> <li>Perform hand hygiene and practice respiratory etiquette.</li> </ul>	4.1
$\square$ Use continuous masking and eye protection the duration of the outbreak.	5.1
Administrative measures	Guide Section
Administrative measures  Notify appropriate HCW/staff and departments within the facility/unit.	
	Section
☐ Notify appropriate HCW/staff and departments within the facility/unit.	Section 5.2
<ul> <li>□ Notify appropriate HCW/staff and departments within the facility/unit.</li> <li>□ Place outbreak signage at the entrance of the facility/unit.</li> <li>□ Report daily using the online Facility CDC Outbreak Daily Report Portal (and</li> </ul>	5.2 5.2
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☐ Alert transport staff and the receiving site to use additional precautions if a symptomatic resident is attending another site for an appointment.	5.6
Resident restrictions	Guide Section
$\square$ Follow isolation recommendations for confirmed and symptomatic residents.	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 <u>Risk Assessment Worksheet</u> and <u>Risk Assessment Matrix</u> for admissions/transfers/discharges (as per zone process).	8.5
Group/social activities and other events	Guide Section
$\square$ Allow asymptomatic residents to take part in daily activities.	5.7
☐ Follow the AHS Public Health Outbreak Team direction on whether to	5.7
continue with routine group activities.	
<ul> <li>□ Use outbreak measures such as physical distancing, masking and hand hygiene for low-risk group activities that may continue.</li> </ul>	5.7
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☐ 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 of additional PPE.	4.10
HCW/staff outbreak control measures	Guide Section
☐ Follow the AHS Public Health Outbreak Team recommendations for management of unimmunized HCW/staff.	8.11
$\hfill \square$ Advise HCW/staff of relevant work recommendations and/or restrictions.	8.11
Advise symptomatic HCW/staff to report illness to manager/designate and not attend work.	4.11
☐ Advise symptomatic HCW/staff to follow recommendations in Table C for COVID-19 at-home Rapid Antigen Testing.	4.11
☐ Advise HCW/staff who develop symptoms at work to put on a mask, inform manager/designate and leave the workplace as soon as possible.	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.	4.12
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