# INFECTION CONTROL INSTITUTIONAL CHECKLIST **RESPIRATORY OUTBREAK**

### Communication

- LTC team: 1-800-267-7120 ext. 1574 or LTC@eohu.ca
- Notify all residents, staff, and family of outbreak.
- Fax or email LINE LISTING to EOHU DAILY: **Fax:** 613-933-7930 Email: LTC@eohu.ca

#### **Outbreak measures**

	Begin line listing for all resident and employee cases. Update daily and fax line listing form to the Health Unit liaison.
	Isolate symptomatic residents on contact and droplet precautions, see isolation section for details.
	Reinforce the importance of hand hygiene with employees and with residents. Evaluate residents' level of cooperation and cognitive abilities and offer help when needed.
	Review basic hygiene principles (e.g. cough etiquette).
	Coordinate specimen collection and submission with the Health Unit.
	Consider limiting visitors to one resident only. Discourage visits from children < 12 years old.
	Increase routine disinfecting and cleaning with special attention to commonly touched surfaces such as door handles, handrails, sinks and toilets.
	Ensure proper use of disinfectant solution, respect contact time of product. Using a disinfectant with a DIN and a short contact time (1-3 minutes) is recommended.
	Ensure appropriate signage at all entrances and in strategic locations. Signage should provide visitors with required infection prevention and control recommendations.
	Implement universal masking in outbreak areas.
	Suspend high risk activities (large group activities, bus outings).
	Restrict non-essential visitors.
	Consult the Health Unit for admission and transfers.
Testing	
	Test all symptomatic residents according to current guidelines and advice from the Health Unit.
	Coordinate specimen collection and submission with the Health Unit.
	Specimens can be dropped off at the Health Unit <b>ONLY</b> during the following days and time (the same times as well water bottle drop off).
Req	uisitions
	Ordering Clinician: Indicate facility physician.
	<b>Patient Information:</b> Enter all the fields and ensure to indicate correct spelling of resident's name as it appears on the health card.
	Outbreak Number: Indicate number provided by your liaison.
	Testing Requested: Check off testing for COVID-19 and Respiratory Virus.









	<b>Specimen Type:</b> Indicate <b>collection date</b> . Choose NPS for Nasopharyngeal swabs or Throat and nasal for the self swab kits.		
	Location: Select institution and indicate facility name.		
	Covid Vaccination: Fill in if known.		
	Clinical Information: Indicate if resident is asymptomatic or symptomatic and enter symptoms.		
	<b>VIALS:</b> Please indicate resident full name (same as on the requisition), date of birth and collection date.		
Isola	solation		
	Place isolation carts and signage outside isolating residents' rooms. Masks, gowns, gloves, eye protection, hand sanitizer and wipes should be included in these carts.		
	Strongly encourage any non-isolated residents to wear masks when circulating in the facility.		
	Provide tray services for symptomatic and isolating residents.		
Cas	e management		
	Isolate all cases for 5 days from onset of symptoms, or from date of test if asymptomatic (whichever is earlier).		
	Residents can leave their room for walks in the immediate area or outdoors with staff wearing appropriate PPE, to support overall physical and mental well-being.		
Con	tact management:		
	Roommate close contacts who remain in the same room should be placed on additional Precautions for 5 days from the case's symptom onset given their close and ongoing exposure. Following this period, the roommate close contact should wear a well-fitting mask, if tolerated, when receiving care and when outside of their room until day 10 from the case's symptom onset.  O This may include avoiding attending group dining and group activities that involve unexposed residents where masking cannot be maintained.  O Roommate close contacts should be monitored once daily for symptoms.		
Influ	ienza Outbreaks		
	In addition to the above recommendations, the following is required for confirmed influenza outbreaks:		
	<ul> <li>Only adequately immunized employees or those on an appropriate antiviral may work.</li> <li>Offer influenza vaccination to all unvaccinated residents, employees and volunteers.</li> </ul>		
	Encourage unvaccinated family members to get vaccinated.  o Offer pneumococcal, RSV and Covid-19 vaccines to all unvaccinated residents.		
	<ul> <li>Immunized visitors permitted. Exceptions: encourage visitors to palliative patients</li> </ul>		
	to take an antiviral medication to avoid transmitting an infection that could precipitate death.		
	<ul> <li>Antiviral treatment should be considered; review recommendations with the Health Unit.</li> </ul>		
Anti	viral Use (Influenza and Covid-19 Outbreaks):		
	<b>Treatment:</b> symptomatic residents with date of onset < 48 hrs.		
	<b>Prophylaxis (influenza only):</b> asymptomatic residents, regardless of vaccination status, should receive prophylaxis dosage.		

## **Resource Links**

□ Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings, 2024
 □ Donning and Doffing PPE Signage
 □ Performing a Risk Assessment Related to Routine Practices and Additional Precautions
 □ Outbreak signage
 □ Hand washing poster
 □ Hand sanitizing poster