

Outbreak Preparedness

A Self Audit Tool for Long Term Care and Retirement Homes

Supplies and Testing

- **Specimen Collection and Supplies:**

- Review supply of nasopharyngeal (NP) swabs and stool kits available onsite
 - Ensure they are not expired – expired kits will be rejected by the laboratory.
- Order Supplies from Ontario Health [PPE Supply Portal](#). Designate someone to complete regular inventory checks and ordering.
- Ensure medical directives for specimen collection are in place and up to date.
- Verify the ordering clinician is correctly listed on the lab requisition (e.g., medical director, nurse practitioner or family doctor). **The ordering clinician cannot be the Medical Officer of Health.**

- **PPE:**

- Maintain a 2-week minimum supply of PPE on-site that includes medical masks, gowns, gloves, eye protection, and N95 respirators. **Note:** maintain a supply according to fit testing inventory.
 - Confirm all staff have been fit-tested for an N95 respirator within the past 2 years.
 - Maintain a record of current fit testing dates.
- Check expiry dates of PPE supply.

- **Alcohol Based Hand Rub (ABHR):**

- Discard and replace any expired ABHR.
- ABHR should have 70-90% alcohol content.
- Ensure placement of ABHR aligns with Best Practice. ([Placement Tool – PHO](#))

- **Cleaning and Disinfection:**

Name(s) of product(s) used for day-to-day cleaning and disinfection:

- _____
Ensure environmental cleaning and disinfection products(s):
 - Are not expired
 - Have a drug identification number (DIN)
 - Are effective against Norovirus and blood borne infections (HBV, HCV, HIV)
 - Are used according to the manufacturer's instructions for use (MIFU), including dilution and contact time
 - Have a contact time of less than 5 minutes
 - Are applied using a wipe or cloth, not aerosol or trigger spray
- Have a sporicidal product onsite that is effective against *Clostridioides difficile*

IPAC Audit

- **Complete the PHO Self-Audit Checklist:**

- [Public Health Ontario IPAC audit checklist for LTC/RH](#)
 - Recommended to be completed in preparation of outbreak season
- [Public Health Ontario IPAC Self-Assessment Audit for Long Term Care and Retirement Homes](#)
 - To be used more frequently (i.e., quarterly) throughout the year

- **Auditing of IPAC practices should include hand hygiene, use of PPE, and environmental cleaning and disinfection**

- **Identifying Potential Gaps:**

- Policies and procedures
 - Predetermine continuous/universal masking strategies based on organization risk assessment. If there is no strategy in place, then ensure there are established mask-friendly policies.
 - Review/update or create cleaning and disinfection procedures for resident rooms on additional precautions, including terminal cleaning.
- Education and training
 - Ensure staff are aware of role-specific IPAC responsibilities during outbreaks- i.e., restocking PPE caddies, high-touch surface cleaning/disinfection, auditing of IPAC practices, etc.
 - Make sure staff are comfortable implementing outbreak measures regardless of time of day (i.e., shifts where the IPAC lead is not present).
 - Staff are to be trained in routine practices and additional precautions, including point of care risk assessment (PCRA), PPE, hand hygiene, and cleaning and disinfection practices.
- Communication
 - Staff have been informed of what symptoms to report and when they can return to work following an illness.

*Keep completed checklists on hand for reference to review trends and gaps

Outbreak Preparation

- **Outbreak Information:**

- Review respiratory infection and gastroenteritis outbreak case definitions:
 - [Respiratory Infection Outbreaks in Institutions and Public Hospitals](#)
 - [Gastroenteritis Outbreaks in Institutions and Public Hospitals](#)
 - WDGPH Quick Reference Guide for Outbreaks:
 - [Management of Enteric Symptoms](#)
 - [Management of Respiratory Symptoms](#)
 - [Management of Ill Staff](#)

- **Review with staff:**

- How to report a potential outbreak to Wellington-Dufferin-Guelph Public Health (WDGPH):
 - congregatesetting@wdgpublichealth.ca OR 1-800-265-7293 ext.4752 (regular business hours)
 - 1-877-884-8653 (after hours, weekends and holidays)
 - How to complete and submit the line list properly.
- Have a system in place to monitor residents for signs and symptoms of any new infections.
 - If symptoms are new, worsening and/or unusual for the resident they should be tested and isolated on additional precautions.
 - Post appropriate signage on the resident door, including PPE [donning](#) and [doffing](#) posters and appropriate additional precautions sign.
 - Ensure all required PPE is available at point-of-care including gloves, gowns, medical masks and N95 respirators, eye protection and cleaning and disinfection products within expiry.
 - Review respiratory virus and gastroenteritis testing with staff and ensure they know how to properly complete a resident testing requisition to avoid specimen rejection.
 - Resident results will be sent directly from the laboratory. To register to receive faxes from the Public Health Ontario Laboratory (PHOL) contact customer service at 877-604-4567.
- Visitors and staff are notified at the beginning of an outbreak and are kept up to date regarding what control measures have been implemented.
- Internal outbreak meetings are organized to highlight IPAC practices.
 - Ensure an invitation has been extended to include WDGPH.
- Once an outbreak has been declared over, provide an opportunity for a debrief that includes feedback from staff to determine gaps and lessons learned.

- **Staff Immunization and Training**

- Long-term Care and Retirement Home staff should receive annual influenza and COVID-19 vaccination.
- Staff should also be up to date with other immunizations as per facility policy.
- Outbreak refresher training should be offered to staff annually, which includes a review of staff immunization requirements in the event of a confirmed influenza outbreak.
 - The WDGPH IPAC Hub is available to assist with any IPAC education and training.

Antivirals and Exclusions

- **Policy and Procedure:**

- **Residents**

Review, update or create a resident antiviral policy and procedure (Tamiflu and Paxlovid) which includes items such as:

- Appropriate use and dosage
- Obtaining informed consent from residents or substitute decision makers
- Obtaining a medical directive signed by the Medical Director for antiviral prophylaxis
- Advance medical orders for influenza antiviral medication for residents
- Indications for antivirals (i.e., Tamiflu) – as always clinical decisions regarding the use of medications for influenza treatment and chemoprophylaxis are at the discretion of the attending physician/health care provider
- A plan to ensure rapid access to antiviral medications as treatment is most effective when initiated within 48 hours of symptom onset

- **Staff**

Review, update or create a staff exclusion policy and procedure which can include:

- Annual education for all staff regarding the exclusion policy
- Staff antiviral options when influenza immunization is refused
- Length of exclusion when staff refuse both influenza immunization and antivirals

- **Tracking Resident and Staff Vaccination and Antivirals**

- Create a Tracking Tool to Collect:

1. Staff and resident vaccination dates (COVID-19, Influenza).
 - In the event of an influenza outbreak unimmunized staff not taking antivirals (Tamiflu) cannot come to work. This is applicable to all staff (care and non-care staff).
2. Date of last confirmed COVID-19 infection for residents (if applicable).
 - This is helpful to determine when a resident is eligible for their next COVID-19 vaccination. [NACI recommendations](#) include a minimum interval of 3 months between COVID-19 doses or after a recent test-confirmed COVID-19 infection for previously vaccinated individuals. 6 months is recommended.

- Staff Planning:

- Encourage staff to speak with their family physician as early as possible and obtain an antiviral prescription for Tamiflu if they do not plan to receive the influenza vaccine. Staff will only need to fill the prescription in the event of an influenza outbreak where antivirals are recommended.
- Identify and internally track staff refusing or unable to receive the influenza vaccine and take antivirals (Tamiflu). **Review exclusion criteria with these staff members in the event of an influenza outbreak.**
- Consider having staff sign off on the exclusion requirements in the event of an influenza outbreak where they are not vaccinated and refusing antivirals.
- Ensure all staff managing the outbreak have access to the tracking tool during the week and on weekends to ensure only eligible staff are working during an influenza outbreak.

- Cross train staff or departments to mitigate the risk of a staffing shortage during outbreaks.
- Staff Exclusion Criteria During Influenza Outbreaks:
 - Asymptomatic staff protected by either immunization (at least two weeks prior to outbreak declaration) or antivirals have no work restrictions.
 - Unimmunized staff must remain off work for the duration of the influenza outbreak unless they comply with one of the options below:

Antiviral Recommendations for Unimmunized Staff During Influenza Outbreaks

- Agree to take antivirals for the duration of the outbreak. Staff may return to work as soon as the first dose is taken and must continue taking it for the duration of the outbreak.
- As above AND receive the influenza vaccine; antivirals must continue to be taken for two weeks.
- Receive the influenza vaccine only. Staff may return to work after two weeks or when the outbreak is declared over, whichever occurs first.

Note: If asymptomatic staff refuse both influenza vaccination and antivirals, staff must be excluded from work for the duration of the outbreak. This applies to both care and non-care staff.

Resources

- [Link to Wellington Dufferin Guelph IPAC Hub resource page](#)
- IPAC Hub Contact Information – congregatesetting@wdgpublichealth.ca to request support
- [PPE ordering portal](#)
- PPE [donning](#) and [doffing](#) posters
- [Droplet Contact Precautions Sign](#)
- [Contact Precautions Sign](#)
- Letter for unvaccinated staff – Influenza Outbreaks and Antivirals
- Algorithm for IPAC lead – Influenza Antiviral and Vaccine Options