

Influenza Outbreak Preparation and Management

Throughout the Influenza Season

Offer influenza vaccines to all new admissions and staff from the beginning of October to the end of March

Post a sign at all building entrances discouraging anyone who has any respiratory symptoms (cough, runny nose, fever) from visiting

Ensure hand gel stations are located throughout facility at all common areas, elevators, front door entrances & nursing stations.

Start daily monitoring for flu symptoms among residents, staff, and visitors. Continue monitoring until the end of flu season.

Throughout influenza season, perform enhanced cleaning with bleach wipes of all hand rails, dining room chairs, salt & pepper shakers, other condiment containers, room door knob, and any other objects touched by multiple people.

BEFORE an Outbreak

- Provide influenza vaccine to all residents & staff members who work in your facility
- At the beginning of flu season, provide a letter to families and independent living residents about the facility's flu protocols, flu symptoms, and who should be notified in the event of illness.
- Influenza testing should occur when any resident has signs and symptoms of influenza-like-illness, regardless of whether it is influenza season or not. This is especially important when 2 or more residents develop respiratory illness within 72 hours of each other.

DURING an Outbreak

- Notify Public Health when there is a confirmed or suspected influenza outbreak (2 or more ill residents OR 1 laboratory confirmed positive case)
- Implement standard and droplet precautions for all residents with suspected or confirmed influenza.
- Symptomatic residents should be treated and remain isolated in their rooms.
Treatment should not wait for laboratory confirmation.
- Start chemoprophylaxis for non-ill residents.
- Limit group activities and consider closing the dining room if possible.
- Discourage or limit visitors during the outbreak
- Restrict personnel movement from areas of the facility having illness to areas not affected by the outbreak.
- Staff will use face masks and gloves in ill resident's rooms.
- Antiviral chemoprophylaxis can be considered or offered to unvaccinated staff members who provide care to persons at high risk of complications from influenza.
- Avoid new admissions or transfers to areas with symptomatic residents.

AFTER an Outbreak

- Complete the "after outbreak" Public Health form