

## Influenza Outbreak Management Checklist for Long Term Care Facilities During an outbreak

I. Communication	N/A	Completed	Date	Initials
1. Notify Medical Director and/or facility administration				
2. Meet with key staff to coordinate control measures				
3. Notify residents and staff of outbreak. Provide information on influenza symptoms & prevention measures				
4. Report suspected or confirmed outbreak to Public Health, call (206) 296-4774 or fax Report of Influenza Outbreak form to (206) 296-4803				
5. Report resident influenza-associated deaths to Public Health				
6. Report outbreak to Licensor WA DOH DSHS 1-800-562-6078				
II. Control Measures	N/A	Completed	Date	Initials
1. Implement daily influenza-like illness assessments on residents, staff & visitors				
2. Order lab testing for residents with influenza-like illness <ul style="list-style-type: none"> <li>• Use rapid influenza diagnostic tests with caution. Rapid tests provide quick results but have limited sensitivity and can produce both false positive and false negative results</li> <li>• Consider use of RT-PCR tests. These are more sensitive and specific with low likelihood of false positive or false negative results</li> </ul>				
3. Track ill residents and staff by completing line list				
4. Remove symptomatic staff from work and refer for evaluation by clinician				
5. Provide antiviral treatment to all residents, unless contraindicated, who have suspected or confirmed influenza. Follow CDC dosing guidelines, including <ul style="list-style-type: none"> <li>• Treatment should not wait for laboratory confirmation</li> <li>• Antiviral treatment works best when started within 48 hours of symptom onset</li> </ul>				
6. Provide antiviral chemoprophylaxis to all non-ill residents, unless contraindicated, follow CDC dosing guidelines, including: <ul style="list-style-type: none"> <li>• Priority should be given to residents on same unit or floor as ill resident</li> <li>• Administer prophylaxis to prevent illness for minimum of 2 weeks, and continue for at least 7 days after last known case is identified</li> </ul>				
7. Consider offering antiviral chemoprophylaxis to unvaccinated staff who provide care to residents at high risk of complications				
8. Vaccinate residents and staff <ul style="list-style-type: none"> <li>• Offer influenza vaccine to all previously unvaccinated residents and staff</li> </ul>				
9. Post outbreak notices on all entrances of facility. Limit non-essential visitors				
10. Cancel group activities, parties and events				

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<ul style="list-style-type: none"> <li>Consider closing common dining room and serving meals in resident rooms</li> </ul>				
<b>III. Infection Control</b>	N/A	Completed	Date	Initials
1. Implement Standard & Droplet Precautions on ill residents <ul style="list-style-type: none"> <li>Continue precautions for 7 days after illness onset or 24 hours after resolution of fever; whichever is longer</li> <li>Confine ill residents to their rooms; serve meals in their rooms</li> <li>Require ill residents to wear a face mask if they must leave their rooms</li> </ul>				
2. Provide personal protective equipment (gloves, gowns, face masks) for staff use				
3. Increase environmental cleaning <ul style="list-style-type: none"> <li>Clean and disinfect shared equipment (blood pressure monitor) and high touch areas (light switch, door handle, hand rail, etc.)</li> <li>Use an EPA registered disinfectant and follow manufacturer's instructions</li> </ul>				
4. Emphasize respiratory etiquette and hand hygiene <ul style="list-style-type: none"> <li>Establish and maintain hand hygiene stations stocked with tissues, alcohol based hand sanitizer, face masks</li> <li>Post "Cover Your Cough" and "Stop Germs, Stay Healthy" posters in resident and staff areas</li> </ul>				
5. Limit admissions <ul style="list-style-type: none"> <li>Admit asymptomatic new or returning residents to unaffected units</li> <li>Ensure new or returning residents with acute respiratory illness be medically evaluated before admission to determine appropriate placement</li> </ul>				
6. Minimize staff movement from areas of the facility with ILI to areas without ILI <ul style="list-style-type: none"> <li>If possible, designate staff to units with ILI and keep staff from floating between units</li> </ul>				
7. Exclude ill staff from work for at least 24 hours after resolution of fever without the use of fever reducing medications				
8. Exclude ill visitors from facility				
<b>IV. Education</b>	N/A	Completed	Date	Initials
1. Provide training to all staff on <ul style="list-style-type: none"> <li>signs and symptoms of influenza in elderly</li> <li>hand hygiene and respiratory hygiene</li> <li>Standard and Droplet precautions</li> </ul>				
2. Educate residents, their families, and visitors about influenza, including <ul style="list-style-type: none"> <li>hand hygiene and respiratory hygiene</li> <li>Flu vaccine information</li> <li>provide influenza fact sheet</li> </ul>				