

Respiratory Outbreaks

Facility Name: Out	break #:
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Case Definition:

Res	piratory Outbreak Management Checklist	Date Initiated yy/mm/dd
1.	Notify members of facility Outbreak Management Team (OMT) and facility medical advisor if applicable. Set up initial OMT meeting. (Section 3 of the MOHLTC Guide to the Control of Respiratory Infection Outbreaks in Long-Term Care Homes, 2014.)	
2.	Health Unit notification – CD team 1-877-721-7520 X8809 (8:30-16:30 M-F) OR (p.26,33) 1-888-225-7851 (w/e, holidays & after hrs.)	
3.	Implement General Infection Control Measures: (p. 31, and section 4)	
	a) Ensure all supplies are readily available (ABHR, PPE, including gowns, face protection, etc.) (section 4.1.2 and 4.1.3 p 41-46)	
	 Symptomatic residents/patients with an ARI are placed on droplet/contact precautions as soon after symptoms are identified. (section 4.2.2 on p. 49) 	
	c) Ongoing surveillance of asymptomatic residents/patients (p.25 and 37)	
	d) Collect immunizations rates: staff/residents/patients (section 2.1.1; appendix 9)	
	e) Hand Hygiene – Review importance of HH to staff/volunteers, residents/patients and visitors (section 4.1.2 on p 41)	
	 f) Patient/resident movement within the facility – for essential purposes only – patient/resident should wear mask, as tolerated. (p. 49-50) 	
	 g) Discuss plans for antivirals, vaccination, exclusion policy and staffing contingency plans (as appropriate) (Section 4.6 and appendix 9) 	
4	Review Line List Documentation (separate lists for resident/patients and staff). Daily update of new and resolved cases faxed to health unit. (Box 7 p. 30 and Box 9 p. 37)	
5.	Cohort staff/patients/residents, as a facility is able. (section 4.3.4 on p. 52)	
6.	Review control measures for staff and volunteers such as reporting of respiratory illness, excluding ill staff/volunteers, recommendations regarding working in other facilities. (Section 4.3 p. 51-52)	
7.	Defer Admissions and Readmissions and Transfers. (Section 4.2.1 on p. 48)	
8.	Notify relatives. Modify visitor access. Educate visitors re. precautions and only visiting one resident/patient. Post sign indicating outbreak. (Section 4.4 on page 52-53)	
9.	Notify local hospital (Infection Control and Emergency Dept.), CCAC, Nursing agencies, contracted service providers and Ministry of Labour as applicable, LTCHs & hospitals contact MOHLTC through Critical Incident System. Retirement Homes call RHRA. (page 35 of the Guide)	
10.	Contact Patient Transfer Authorization Centre (for LTCH and hospitals) 1-866-869-7822	
11.	Cancel/Reschedule social activities and communal meetings/functions on affected unit/floor (section 4.4.3. on p. 53-54)	
12.	Enhanced cleaning of high touch surfaces/multi-use equipment (Section 4.5)	
13.	Specimen collection: Number of kits on site Expired? ☐ Yes ☐ No Confirm # of samples (max 4). Ensure proper labeling of samples and requisitions Call CD Team for arrangement of pick-up of specimens. (p. 32-33 of the Guide)	
Reviewed with: Reviewed by:		
Dat	e: Copy faxed to faci	lity: □ Yes □ No

Revised: October 2015