

## Influenza Outbreak Readiness for LTCHs and RHs

The Health Unit usually begins to distribute vaccines the week after Thanksgiving. SMDHU will inform you when the Influenza order forms are available or call 705-721-7520 ext. 8806.

### 1. General Preparations

- a. Place vaccine orders.
- b. **Early** and comprehensive influenza immunization campaign for staff, residents and families.
- c. Forms developed.
- d. Ensure you have respiratory and enteric specimen collection kits and they are not expired or expiring shortly
- e. Ensure nursing staff for ALL shifts know where outbreak resources are (line lists, Outbreak checklist, contact info, sample kits).
- f. Review the outbreak resources with nursing staff on all shifts so they know how to use outbreak resources (case definition for an outbreak, line lists, sample collection and kits).
- g. Confirm nursing staff on all shifts have a way to access to list of who is vaccinated for staff and residents.
- h. Outbreak policies up to date and available.

### 2. Vaccine plan for residents

- a. Document consents/refusals of resident **vaccination**.
- b. Education provided. (see resources below)
- c. Document if a resident consents to antiviral (Tamiflu) if a lab confirmed outbreak is declared and recommended by the Medical Officer of Health occurs.
  - i. Standing order for antiviral, for each resident, IN CASE a lab confirmed Influenza outbreak is declared.
  - ii. Documentation of creatinine clearances.

### 3. Vaccine plan for ALL staff

- a. Document vaccination status for staff.
- b. Doctor's declaration form for staff medically contraindicated for influenza vaccine.
- c. Staff will be directed to start Tamiflu IF there is a confirmed Influenza outbreak and they are NOT vaccinated (or were vaccinated less than 14 days previous). **No Immunization + No Tamiflu = not working**.
  - i. Documentation that staff are aware of consequences of not being vaccinated.
  - ii. Recommend un-immunized staff get pre-authorized prescriptions for Tamiflu IN CASE of an outbreak. Letter to physician can be provided.

#### 4. Education Plan

Education for residents/family/staff; such as, but not limited to (*see resources below*)

**\*\* We recommend all staff / residents / families and friends get their flu shot to provide protection to themselves and each other.**

- i. 2 weeks are needed after the shot before they are protected;
- ii. The vaccine is not always effective in preventing influenza in older adults. But it is effective in lessening how severe the illness is, if they do become infected.
- iii. Getting the vaccine makes them less likely to pass the infection to someone else, if they are exposed themselves. Also, we can share influenza to others 24hours before we start to have symptoms.
- iv. In an Influenza OB, **all residents** will be offered Tamiflu, AS LONG as their Dr orders it. We know that the vaccine is not as effective for people over 65, so if we know they have been exposed (such as in an outbreak) we recommend Tamiflu for all, EVEN if they were vaccinated.
- v. Staff should not work when they have symptoms of a respiratory infection.
  1. Residents will be required to stay in their room while there are sick to prevent others from getting sick.
  2. Families and friends are asked not to visit if they are not feeling well.
- vi. In an Influenza OB, un-immunized **staff** must provide/pay for their own Tamiflu.
- vii. If IMMUNIZED for at least 2 weeks, and an influenza outbreak occurs, staff can work at your facility and anywhere else **as long as** they remain symptom free.
- viii. If UN-IMMUNIZED, and there is an influenza outbreak in your facility, they cannot work in your facility until they begin Tamiflu.
- ix. To work somewhere else, they can work as soon as they start the antiviral **OR** wait 3 days from the last day they worked in the Outbreak facility **AND** as long as they remain symptom free.

**CALL SMDHU** if you **SUPECT an OUTBREAK**. Consultation may help to prevent an outbreak.

During business hours 705-721-7520 or 1-877-721-7520 ext. 8809

After hours/weekend/holidays Call Centre 1-888-225-7851

## Outbreak Definitions –

### Enteric

A “**case**” is any resident with 2 or more episodes of vomiting and/or diarrhea in a 24 hour period without a non-infectious cause. (e.g. laxative).

“**Suspect Outbreak**” is 2 cases in the same geographical area (unit/floor) in 48 hours.

“**Confirmed Outbreak**” is three or more cases in a specific area within a four-day period, or three or more units/floors having a case of infectious gastroenteritis within 48 hours.

### Respiratory

A “**case**” is any resident with 2 or more acute respiratory symptoms that are new or not explained by medical reasons such as allergies, COPD, medications, aspiration, etc. Pneumonia cluster should also be reported as it may be caused by a virus/bacteria. There may be an issue with transmission (influenza) or common source (*Legionella*)

“**Suspect Outbreak**” is 2 cases of ARI occurring within 48 hours in the same geographic area. (e.g. unit/floor)

- OR more than one unit/floor having a case of ARI within 48 hours.
- OR One lab confirmed case of Influenza.

“**Confirmed Outbreak**” is two cases of ARI within 48 hours, at least one of which must be laboratory-confirmed

- OR Three cases of ARI (laboratory confirmation not necessary) occurring within 48 hours in a geographic area (e.g., unit, floor)
- OR More than two units having a case of ARI within 48 hours

If an Influenza outbreak occurs, SMDHU will ask for the following information:

**(Weekend/night staff** should also know how to provide the following);

- 1. # immunized staff and residents? (i.e. 51/58 residents; 65/66 staff)
- 2. What is the plan for residents to receive anti-viral medication (such as Tamiflu)?
- 3. How will you immediately exclude all un-immunized staff until they start an antiviral?
- 4. Do you have outbreak specimen kits? Are they expired?
- 5. Do you know how to get a sample from a resident (swab?)
- 6. Fax a copy of your Line list and complete an Outbreak Management checklist together?
- 7. Number of residents in each affected unit.

## **RESOURCES –**

[HealthFAX for Universal Influenza Immunization program](#), including order forms for vaccine.

### **Influenza Vaccine**

- [Weekly Influenza News](#)
- [HCP 2018-2019 Influenza Vaccination FAQ \(PHO\)](#)
- [National Advisory Committee Statement on Immunization \(NACI\) 2018-2019 season](#)

2018/2019 Universal Influenza Immunization Program MOHLTC Fact Sheets

- [6 months to 17 years](#) of age
- [18 to 64 years of age](#)
- [Over 65 years of age](#)

### **Other Useful Resources**

- [www.smdhu.org/manageoutbreaks](http://www.smdhu.org/manageoutbreaks)
- [Immunization Communication Tool](#)
- [Outbreak Management: A Guide for Residents, Families and Visitors](#)
- [Outbreaks: Pamphlet for Families and Visitors](#)

### **Posters & other good stuff**

[Ontario MOHLTC - Let's Get Fluless Campaign](#)

[Health Canada](#)

[Immunize Canada](#)

[Recommendations for the Control of Respiratory Infection Outbreaks in Long-Term Care Homes, 2018](#)