



INFLUENZA

*Preparing for
Influenza
Season*

“

WE'VE BECOME SO USED TO THE IDEA OF THE FLU – IT SEEMS ALMOST LIKE THE COMMON COLD TO US, DOESN'T IT? – THAT NO ONE BUT THE HISTORIANS SEEMS TO KNOW THAT A HUNDRED YEARS AGO IT DIDN'T EXIST.

— STEPHEN KING

”

Learning Objectives

- The learner will understand the role of the frontline worker/unit/facility in an influenza outbreak.
- The learner will be able to name decluttering activities that can reduce the risk of transmission.





What is the Seasonal Flu?

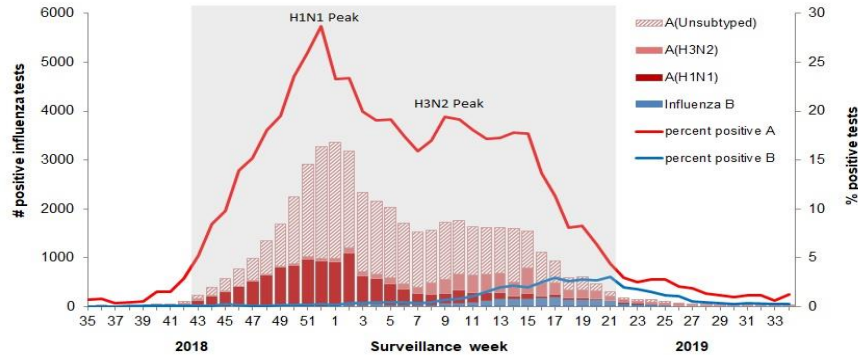
There has been a lot of focus on COVID but we may be managing Influenza season at the same time

- Seasonal influenza (flu) is a common and highly contagious respiratory infection that affects the nose, throat and lungs.
- The flu strains change from year-to-year, that is why it is important to get an annual flu shot
- Most people recover from the flu in about a week, but some people – including the elderly with chronic health conditions are at greater risk of serious complications such as pneumonia

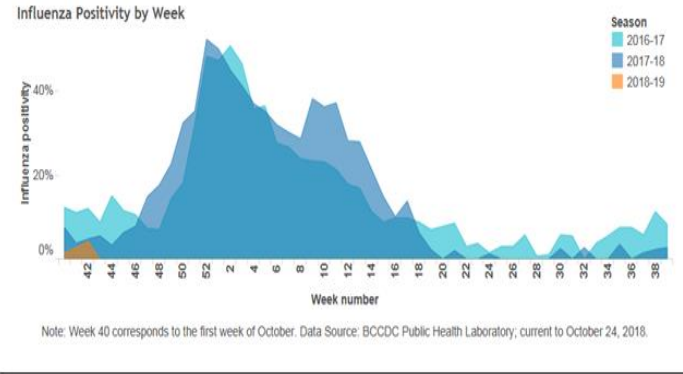
In Canada, the flu season typically occurs between November and April. It peaks about mid to end of December.



Canada



BC



Number of positive influenza tests and percentage of positive tests, by type, subtype and report week, Canada, weeks 2018-(August) to 2019- (August)

Signs and Symptoms



Influenza

- New or worsening cough with fever (>38 C)
- Sore Throat
- Arthralgia (joint pain)
- Myalgia (muscle pain)
- Headache
- Prostration (physical or/and mental exhaustion)



Covid-19

- Cough** (or worsening cough)
- Fever
- Sore Throat
- Rhinorrhea (runny nose)
- Headache
- Shortness of breath
- Other atypical symptoms

Present very similar

Prevention

Immunization



Hand-Hygiene
Practices



Respiratory Etiquette



Preparing

Seasonal Checklist | Declutter | Know your PPE

01

Declaring an Outbreak/Confirmed Outbreak

Influenza Like Toolkit | Tracking List | ICP/CD/OMS/Site & Unit Role

02

Declaring and Outbreak Over

Outbreak Cleaning

03

1. PREPARING



Influenza like illness Checklist for Long Term Care



Seasonal influenza is a serious cause of illness, disability and death in residents of care facilities. Among vaccine-preventable diseases, influenza causes by far the most deaths. Seniors and others in long-term care are frequently more vulnerable to influenza than the general population, because of their own compromised health status and the nature of congregate living and care giving.

Infection prevention and control best practice, monitoring for influenza-like illness in your facility and effective management helps prevent influenza illness and outbreaks in your facility.

This document outlines in checklist format tasks to complete during influenza season.

For any COVID-19 information, please refer to Island Health COVID material online.

Tasks to complete at the beginning of Influenza Season

Those interested in becoming a peer immunizer should be made aware that BC Centre for Disease Control (BCCDC) has courses to assist in maintaining best practice competencies for Influenza immunizations.

For affiliates: Order vaccine for the facility (all residents and staff) and ensure that vaccine from the previous season has been discarded.

- Immunization residents**- Consent for health care is implied on admission to the facility. As with administration of any medication, a conversation regarding the influenza vaccine and prophylaxis should take place between the resident and/or designated representative, and the nurse.
 - Obtain doctor's orders and/or consent for vaccinations, anaphylaxis treatment and antiviral prophylaxis (Oseltamivir) for all current residents and any new admissions during the influenza season (e.g. November to April).
 - Document resident vaccination in the resident's medical record and on a Seasonal Influenza Recording sheet (for a template, see Influenza Vaccine Usage forms under the Community Vaccine Providers page at islandhealth.ca).
 - Defer vaccination of those with acute febrile illness until symptoms resolve.
 - Prepare a list of residents who have not been vaccinated so they may be easily identified if an outbreak occurs.
 - All facilities must provide their local health unit and/or IPAC with influenza vaccination coverage data for residents and staff. Only summary data is required, not individual records (see online form at www.viha.ca/flu).
- Immunization staff**:
 - Occupational Health and Safety manages immunization records in Island Health.
 - **For affiliates**: All health care facilities must maintain annual records of staff influenza vaccination status.
 - This includes name, date of birth, position (job), where in the facility they work and date of influenza vaccination.
 - Obtain informed consent for employee vaccinations.
 - Defer vaccination of those with acute febrile illness until symptoms resolve.
 - Staff should be instructed to retain a written record of their immunization provided by their immunization provider. This record may be requested by the employer at any time.

Nov 3, 2020



Seasonal Checklist

- Checklist to prepare for the outbreak season
- Implement every fall
- On the intranet and internet
- For both owned and operated, and affiliates

Declutter

Clutter in hallways,
nursing stations,
medication/bath/resident
rooms results in:

*Increased potential for
transmission*



*The ability to effectively
clean surfaces*

Declutter Cont'd



Common Area



Linen and
Lakeside Carts



Resident Room



Bathing



Storage

Declutter – Common Areas

- Keep hallways clear – Keep items to one side of the hallway
- Garbage cans should be placed in resident rooms, not in the hallways

- Keep the number of items on horizontal surfaces to a minimum so the surface can easily be disinfected daily

Declutter – Linen and Linen (Lakeside) Carts

Linen

- Soiled linen is to be placed in a linen bag at point of care if possible
 - Soiled linen is NOT to be placed on the bedside table, the floor or in the sink.
 - Place linen on waterproof pad if unable to bring linen cart in
- Store soiled linen hampers in resident rooms (or the soiled utility rooms)
- Cloth bags are sufficient unless the soiled linen is “saturated” or “dripping”.
- Fill the bags only 2/3 full to prevent injuries.

Linen Carts

Linen carts are discouraged. The exposed linen on a cart is considered contaminated.

If used:

- Must be out of the hallway after am/pm care
- All items removed once daily and the linen cart cleaned before restocking

Declutter – Resident Room

- Keep over bed tables clear
- No supplies at the sinks
- Bathroom
 - No personal supplies in a multi-bed room Bathroom
 - Do not store commodes if possible

- Assign individual personal products for each resident.
- Avoid overstocking residents rooms with supplies that may not be required.
 - Ask families to only bring in what is needed until their next visit
 - If possible, dedicate a space outside the room to store family purchased items (label them)

Declutter – Bathing

- Never share personal care items such as creams and lotions, clippers between residents
- In the tub room, only store enough towels that will be used in one day

Declutter – Storage

- Devices that need to be cleaned ideally should be labeled “soiled” and stored in a space identified specifically for soiled equipment
- Clean devices should be stored in a space designated for “clean” only
- Clean need to be identified as clean
 - If in doubt, devices should be treated as soiled and cleaned
- Store clean items at least 1 m from any dirty areas/items



Soiled Room

- There is to be NO clean supplies in a soiled room except temporary storage related to the bedpan washer



Know Your PPE

- Ensure all staff have been provided with education each fall
 - Use the Donning/Doffing Audit tool
 - Where are you storing your masks?
 - Ensure signage on how to use your mask appropriately is placed where staff see it
- Where are you storing your goggles/face shield
- Ensure staff is using PPE appropriately
 - Are they over using gloves
 - Are they removing their gloves at point of care

Name of Staff: _____

Date: _____

Audit to be performed by trained auditors. Connect with an Infection Control Practitioner or a CNE to receive training.

For all staff providing care or entering the space of a resident with additional precautions.

This includes: RN, LPN, HCA, SW, OT, PT, AW, Food Service, Housekeeping

| Donning Technique | | Initial |
|------------------------------------------------|----------------------------------------------------------|---------|
| 1. Hand Hygiene | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 2. Gown on front-to-back | | |
| a. Tie behind neck | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| b. Wrap behind back and tie at waist | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 3. Mask on | | |
| a. Form-fit to bridge of nose | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| b. Pulled down under chin | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 4. Goggle/Face shield on | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 5. Hand Hygiene | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 6. Gloves on | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| a. Cuffs of gloves pulled over sleeved of gown | <input type="checkbox"/> Yes <input type="checkbox"/> No | |

| Dooffing Technique | | Initial |
|--------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|---------|
| 1. Untie waist | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 2. Cross hands, tug and tear tie at neck | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 3. Use gloved hand against outside of gown to remove sleeve and glove of 1st hand | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 4. Use ungloved hand against inside of gown to remove sleeve and glove of 2nd hand | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 5. Roll gown gently down front of body, ensuring inside-out | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 6. Continue to roll gown inside out | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 7. Dispose of gown and gloves together gently | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 8. Hand Hygiene | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 9. Remove goggles/face shield (<i>must be cleaned in the utility room</i>) (see footer for cleaning & disinfecting steps) | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 10. Hand Hygiene | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 11. Remove Mask | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| a. Discard in garbage | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 12. Hand Hygiene | <input type="checkbox"/> Yes <input type="checkbox"/> No | |

Cleaning and Disinfecting steps for goggles and face shields:

Using a Accel or Oxivir Tb wipe:

- A. Carefully wipe surfaces in the following order:
- i. the inside of the goggles/face shield,
 - ii. the head band and
 - iii. the outside of the goggles/face shield

B. Hang to dry

C. **Note:** Surfaces must remain wet for **1 minute**

D. If there are streaks visible after drying, surfaces can be wiped with a damp cloth.

PPE Audit Tool

Auditor's name: _____ Auditor's signature: _____ Date: _____

Submit completed form to Care Manager/Coordinator or Supervisor



What is Different This Year?

- Staff to use COVID-19 Response Protocol for anyone presenting with respiratory illness
 - Procedure is the same: place on droplet/ contact and assess roommates for symptoms
- Follow the ILI algorithm once Covid is eliminated for all respiratory symptoms
- All algorithms in the toolkit have been updated

Reference Tools

The following PDF documents are informational tools for use during an outbreak of Influenza or Influenza-like Illness. ILI toolkit available on intranet and internet

- [Influenza like Illness Toolkit Island Health](#)

- [Influenza like Illness Toolkit Affiliate](#)
 - [Influenza Information Sheet for Patients and Visitors](#)
[Did you know...Influenza](#)
[Recommendations for Booking Entertainment in Residential Care](#)
[Influenza Vaccination & Prophylaxis Tracking Sheet](#)
[ILI Patient Tracking List](#)
[Influenza Like Illness Outbreak Management](#)
[Residential Services Influenza Screening Tool Protocol](#)
[Creatinine Results on LTC Residents](#)



2. Declaring an Outbreak/ Confirmed Outbreak

Declaring an Outbreak

- IPAC/CD will determine if your unit meets the definition of an outbreak
 - For Island Health, if an outbreak is declared, the ICP will inform the OMS leader who will set up an OMS meeting
 - Affiliates will get guidance from CD via phone as required



Outbreak Management Structure (OMS)



Island Health Facilities

- Structure to ensure a clear, reliable, integrated, and timely response to the outbreak
- Involves daily meetings
- Discussion includes environmental cleaning, dietary service, visitor restrictions, admission and transfers, staffing, supplies and any other issues arising from the outbreak

IPAC Team

- Review cases and declare the outbreak
- Notify OMS leader or site director
- Review the line list daily in am
- Identify index case
- Identify source of any ongoing transmission
- Review control measures
- Review results of audits (HH, Environmental)
- Provides summary of outbreak
- Education as required

CD Team

- Liaison between MHO recommendations and the facility
- Review cases and declares the outbreak
- Review the line listing daily
- Identify index case
- Review control measures at onset of outbreak
- Provide summary report to responsible MHO and may provide recommendations to facility
- Assist in locating resources for site to manage outbreak

Unit/Site

- Report number of staff sick calls
 - IH: report to the manager and occupational health
 - Affiliates: report to CD nurse daily
- Site communication
- Signage for site and room
- Notification of new suspect or confirmed cases to CD/IPAC
- Support education on the site
- Initiate the prophylactic and treatment medication as directed by CD/IPAC

Treatment - Tamiflu



Contact the pharmacy to make sure they are prepared



All the serum creatinine testing required is done



Treatment doses for symptomatic residents must come from the resident's GP, not the MHO/MM as it is for prophylactic dosing.

A diverse group of seven healthcare professionals, including nurses and doctors, are smiling and standing in a line outdoors. They are wearing blue scrubs or white lab coats. The background is a bright, slightly blurred outdoor setting, possibly a hospital courtyard.

Heroes

Frontline Healthcare workers

- Ensure the unit is clear of clutter
- Observe all residents for symptoms daily
- Maintain a line list of symptomatic cases in the outbreak and inform CD/IPAC daily
- Report any gaps in control measures to Infection Prevention and Control/CD
- Know how to use PPE properly



3. Declaring an Outbreak Over



Declaring an Outbreak Over

An Influenza outbreak will only be declared over by an ICP in consultation with the MM for Island Health facilities or the CD Program in consultation with the MHO for affiliates.

Outbreaks will be declared over either: 8 days from the start of the symptoms in the last resident. 4 days after the start of symptoms in a staff member (affiliate).

This time can be extended but not shortened by the IPAC team or CD program.

Recommend a debrief at the site level after each outbreak and feedback should be provided to the staff

Outbreak Cleaning

- Outbreak cleaning must take place before reopening the unit (guideline on internet and intranet)

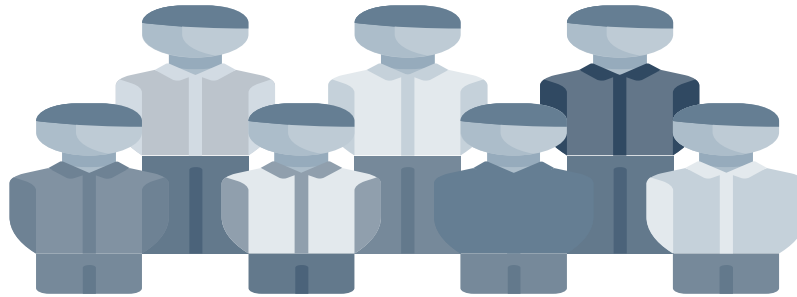


CONCLUSIONS

Work together as a team and proper use of PPE and infection control principles makes a difference



What We Have Experienced So Far



Wearing a mask does work

THANK YOU!

Do you have any questions?

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RESOURCES

PHOTOS:

<https://www.google.com/url?sa=i&url=https%3A%2F%2Fbettersleep.org%2Fblog%2Fsleep-when-youre-sick%2F&psig=AOvVaw32UGfiRe-7ZiTZLcU7T-oy&ust=1603914311323000&source=images&cd=vfe&ved=0CAIQjRxxqFwoTCPI0js3E1ewCFQAAAAAdAAAAABA>

<https://www.google.com/url?sa=i&url=https%3A%2F%2Fglobalnews.ca%2Fnews%2F6905692%2Fcoronavirus-cleaning-poisonings%2F&psig=AOvVaw2KXhBm0N2FwJbJnbJwRWNb&ust=1604767679410000&source=images&cd=vfe&ved=0CAIQjRxxqFwoTCNCZnOSv7uwCFQAAAAAdAAAAABA>

<https://www.thestand.org/2020/05/buy-union-made-meals-for-frontline-healthcare-workers/>

<https://wild941.com/2020/07/28/things-you-should-never-clean-with-disinfecting-wipes/>

<https://www.google.com/url?sa=i&url=https%3A%2F%2Fwww.smartguy.com%2Funit-appliance&psig=AOvVaw0SqiBCnjTY6MLrYMSUvfyt&ust=1604772153321000&source=images&cd=vfe&ved=0CAIQjRxxqFwoTCNC9uqPA7uwCFQAAAAAdAAAAABAD>

<https://www.google.com/url?sa=i&url=https%3A%2F%2Fwww.trenchrossi.com%2Falertas-legais%2Fcorretagem-de-seguros-deixa-de-ser-uma-atividade-regulada-no-brasil%2F&psig=AOvVaw137k47oTImCiohLX-H-Of&ust=1604772238841000&source=images&cd=vfe&ved=0CAIQjRxxqFwoTCKCa0MvA7uwCFQAAAAAdAAAAABAN>

<https://www.google.com/url?sa=i&url=https%3A%2F%2Fwww.nurseonboard.ca%2Fsupport-for-families-of-seniors.html&psig=AOvVaw0qjKOW3AHi44r1sE31MIDP&ust=1604772403482000&source=images&cd=vfe&ved=0CAIQjRxxqFwoTCNizgJ3B7uwCFQAAAAAdAAAAABAP>

<https://www.google.com/url?sa=i&url=https%3A%2F%2Fwww.diabetes.co.uk%2Fgene-research.html&psig=AOvVaw2DITjIcnqJeA-Uwv6JqfFo&ust=1604772474835000&source=images&cd=vfe&ved=0CAIQjRxxqFwoTCICQ7bzB7uwCFQAAAAAdAAAAABAR>

<https://www.google.com/url?sa=i&url=https%3A%2F%2Fwww.rcn.org.uk%2Fnorthern%2Fsearch%3FCurrentPage%3D23&psig=AOvVaw2WV-EDbxYe3fkYSEa-wmZg&ust=1604772596662000&source=images&cd=vfe&ved=0CAIQjRxxqFwoTCCKT7PIfB7uwCFQAAAAAdAAAAABAD>

https://www.google.com/url?sa=i&url=https%3A%2F%2Fwww.freshmind.no%2Fsingle-post%2F2019%2F08%2F17%2FGud-er-alles-Far&psig=AOvVaw3yknxFz_Gc97iHvCA8u_l-&ust=1604772670121000&source=images&cd=vfe&ved=0CAIQjRxxqFwoTCJD175rC7uwCFQAAAAAdAAAAABAD