

POLICY	INFECTION PREVENTION AND CONTROL PROGRAM: OUTBREAK IDENTIFICATION, PREVENTION AND MANAGEMENT
SECTION	HEALTH AND SAFETY
ESTABLISHED LAST REVISED	July 2009 April 2011

POLICY

Brain Injury Services has in place evidence based infection prevention and control protocols for enteric outbreak, febrile respiratory illnesses outbreak and influenza outbreak associated organisms to reduce the chance of an infectious outbreak and limit the extent and impact of an outbreak if one occurs.

An outbreak will be declared on the direction of the public health department or consulting medical professionals.

An enteric outbreak is suspected when there are two or more cases with similar signs and symptoms (such as nausea, vomiting or diarrhoea) in the same geographical area in a 24 hour period, with no evidence of a non-infectious cause such as change in medication or laxative use.

A febrile respiratory illness outbreak is suspected when there are two or more cases of an acute respiratory tract illness identified within 48 hours in one geographic area.

Symptoms may include:

- abnormal temperature
- productive cough (new)
- runny nose/sneezing
- nasal congestion/stuffy nose
- sore throat
- chills
- hoarseness/difficulty swallowing- dry cough (new)
- myalgia (pain or tenderness of muscles)
- malaise
- headache (new/unusual)
- decreased appetite

An influenza outbreak will be declared if there is one medically/laboratory confirmed case of influenza OR two cases of acute respiratory tract illness occurring within 48 hours in the same geographic area (e.g. residence, office) OR the identification of more

than one case of acute respiratory illness within 48 hours in different locations in the agency.

A respiratory outbreak caused by other organisms (e.g. Legionella, Chlamydia) will be declared if there are two cases of acute respiratory tract illness occurring within 48 hours in the same geographic area OR more than one case of acute respiratory illness within 48 hours in different locations in the agency.

Surveillance for respiratory and enteric symptoms will be enhanced during the influenza season and when influenza activity has been reported in the local community. Surveillance will help to identify early signs of infections, monitor possible clusters of infections, prevent outbreaks, and/or identify potential outbreak in early stages to institute control measures as soon as possible.

Employees will refer to the Infection Prevention and Control Manual for clinical case definitions and descriptions of illnesses, symptoms and transmission.

PROCEDURE

1. Employees must follow routine practices at all times and wear the appropriate personal protective equipment as directed by posted signage.
2. Employees must clean and disinfect their personal working space and surroundings on every shift.
3. Employees must clean and disinfect all agency and client equipment after each use.
4. Employees must be aware of symptoms of respiratory and enteric illnesses. These symptoms must be new, different from the client's normal presentation (e.g. if they have a chronic cough) or acutely worse. Employees will arrange for clients to receive immediate medical attention and diagnosis.
5. Once there is a confirmed diagnosis, the employee must complete the Infection and Reportable Disease form and forward it to the location supervisor and management co-chair of the JOHSC.
6. The management co-chair will notify the executive director and provide information and instructions to each location. Staff working at the identified location will receive the appropriate training for each confirmed diagnosis. The executive director will notify the board depending on the extent of the outbreak.
7. During passive surveillance signage will be posted at all location entrances to encourage self screening for staff, clients and visitors.

8. During active surveillance signage will be posted at all locations and a screening form will be completed by all visitors. Documentation will reflect visitor's name and any noted symptoms. Visitors will be asked to leave if there are any present symptoms. Clients will be regularly screened by employees for symptoms.
9. During an outbreak employees must promptly report any symptoms or illness (including influenza-like illness, febrile respiratory illness, gastrointestinal illness/diarrhoea, or contagious skin diseases such as conjunctivitis) to supervisors. The supervisor will complete the Infection and Reportable Disease form and forward a copy to the management co-chair of the JOHSC.
10. The management co-chair of the JOHSC will notify the public health office of any reportable diseases, any suspect or actual outbreak or cluster of clients with respiratory or enteric illness, and/or an employee or client who has a new cough, fever AND a travel history to a country with a health alert or contact with someone with a travel history to a country with a health alert.

References

Health Protection and Promotion Act (HPPA)

Enteric Outbreak Resource Binder, Regional Infection Control Networks Central South

Long-Term Care Homes & Retirement Homes Infection Prevention and Control Manual, Simcoe Muskoka District Health Unit, February 2007