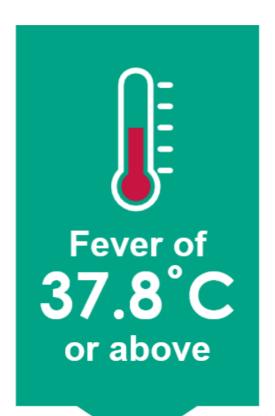
# Outbreaks of influenza (flu) in care homes

Do 2 or more residents or staff have any of the following symptoms within 2 days (48 hours) of one another?





New onset or acute worsening of one or more of these symptoms:

- cough
- runny nose or shortness of congestion

- hoarseness
- breath
- congestion breath sore throat wheezing
- sneezing chest pain
- loss or change of taste/smell



Sudden decline in physical or mental ability

If so, you might have an outbreak of flu or another respiratory infection.



Isolate residents with symptoms, send staff with symptoms home.

Contact your Health Protection Team (HPT) via the online Report an Outbreak tool or your local infection control team/public health team (follow your local outbreak plan).

The HPT will advise you on:

- 1. Infection prevention and control, including isolation and cohorting of affected residents
- 2. Testing for flu, COVID-19 and other viruses
- 3. Antivirals for flu these are most effective when started early.

# **Important:**

All residents and staff should be offered seasonal flu vaccination every year Appropriate infection control measures should be maintained all year round

#### Infection Control during an Outbreak of Influenza in a Care Home

#### Hand Hygiene and Protective Clothing

- ensure that liquid soap and disposable paper towels are available at all sinks
- wash hands thoroughly using liquid soap and water before and after any contact with residents
- provide 70% alcohol hand rub for visitor use and supplementary use by staff
- staff should wear single use surgical face masks, single-use plastic aprons and gloves as appropriate when caring for affected residents
- dispose of all these as infectious waste

### Cleaning and Waste Disposal

- provide tissues and no-touch bins for used tissue disposal in public areas
- provide tissues and covered sputum pots for affected residents. Dispose of these as infectious waste
- wash residents' clothes, linen and soft furnishings on a regular basis, and keep all rooms clean
- clean surfaces of lockers, tables & chairs, televisions and floors etc frequently
- always clean hoists, lifting aids, baths and showers thoroughly between patients

### Reducing Exposure of Unaffected Residents – Actions for Residents

- consider limiting admissions to the home (or a section of the home) if the HPT confirms an outbreak (subject to a risk assessment)
- residents should not transfer to other homes/attend external activities
- residents should only attend out-patient or investigation appointments where these are clinically urgent
- care for residents with symptoms in single rooms until fully recovered and for at least 5 days after the symptoms started
- affected residents should remain in their rooms as far as possible
- discourage residents with symptoms from using common areas

## Reducing Exposure of Unaffected Residents – Actions for Staff and Visitors

- as far as possible staff should work in different teams: one team caring for affected residents and the other caring for unaffected residents
- agency and temporary staff in contact with residents with symptoms should not work elsewhere (e.g. in a local acute care hospital, or other care home) until 2 days after last exposure
- staff and visitors with symptoms should be excluded from the home until fully recovered
- the elderly, very young and pregnant women, who are at greater risk from the complications of flu, should be discouraged from visiting during an outbreak
- inform visiting health professionals of the outbreak and rearrange non urgent visits to the home, if possible
- inform the hospital in advance if a resident requires urgent attendance at hospital