# RESPIRATORY OUTBREAK MANAGEMENT CHECKLIST

For Long-Term Care/Retirement Homes

**Refer to this checklist to manage your facility's outbreak as per the Ministry of Health protocols and the Windsor-Essex County Health Unit (WECHU). Retain for your records.**

| **Facility Name:** | **Outbreak #:** 2268 - - | **Date:** |
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**Outbreak Declaration:** ☐ Suspect ☐ Confirmed

**Affected Area:** Entire facility ☐ OR Name of unit(s):

"Client" refers to a resident, patient or other person being supported within the facility.

**Case definition: determined by the WECHU** (Click here or visit wechu.org)

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| ☐ Abnormal temperature | ☐ New/worsening cough | ☐ Shortness of breath |
| ☐ Nasal congestion/runny nose | ☐ Sore throat/hoarseness | ☐ Loss of taste/smell |
| ☐ Malaise/fatigue | ☐ Headache | ☐ Other: _____ |

## CONTACT

☐ Identify the designated WECHU nurse for your outbreak:

**Nurse Name**: _____ **Phone #:**

For any questions or concerns please contact your designated nurse or the Infectious Disease Department (IDP) at **519-258-2146 ext. 1420.** The WECHU business hours are from 8:30am - 4:30pm Monday to Friday. Contact the After-Hours hotline at **519-973-4510** to speak with on-call personnel outside of WECHU business hours.

## IMMEDIATE PRECAUTIONS

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| If a client is symptomatic: *Expanded steps available below | Individual should remain in their room. |
| | Implement **additional precautions** (i.e., contact/droplet). |
| | Provide the necessary **medical assessments.** |
| | **Test** for COVID-19 and other respiratory illness. |

## TESTING & SPECIMEN COLLECTION

☐ Ensure your facility has non-expired nasopharyngeal specimen (NP) collection kits, stored in a location that is known and accessible to staff. Additional specimen kits can be ordered online, see PHO's Kit and Test Ordering Instructions webpage to request these tests.

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| ☐ | Test all symptomatic individuals | **COVID-19**: All clients who test positive for COVID-19 by rapid test should complete parallel testing by MRVP. |
| | | **Multiplex Respiratory Virus Panel (MRVP):** Collect **up to four** MRVP swabs per outbreak. For MRVP, obtain specimens from clients with the most representative symptoms of the suspected illness prior to starting antibiotics. See PHO's Respiratory Virus (including influenza) web page for more information. See **FLUVID** below. |
| | | **FLUVID:** After four MRVP swabs, you may continue testing symptomatic individuals using FLUVID. |
| ☐ | Lab requisitions | Complete lab requisition form in its entirety (ensure facility name and address on form). Include outbreak number and at least **2 client identifiers** on **both sample and requisition form.** |
| | | Arrange for delivery to the lab within 72 hours – ensure you refrigerate the sample in a dedicated specimen fridge. |

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| **LINE LISTS** | | |
| ☐ | Create a line list of clients who belong to the outbreak (click here to download the line list or visit wechu.org).<br>Include only clients who meet the case definition on the line list. | |
| ☐ | Update and fax line lists **daily** to WECHU **by 10:00 am** to **519-977-5097.** | |
| **COMMUNICATION** | | |
| ☐ | **Post outbreak signage at all entrances of building.** | |
| ☐ | Notify all staff (including the house physician, facility pharmacist, DOC, etc.), students, volunteers, client families, and visitors of the outbreak.<br>The WECHU will send your facility an **Advisory Notice** to reflect the current outbreak.<br>An **Outbreak Notification** will be posted on the WECHU website alerting other health care facilities and agencies of current outbreak in your facility. | |
| ☐ | Convene a multidisciplinary Outbreak Management Team (OMT) and meet daily to review the status of the outbreak and support infection control efforts across the various departments (i.e., Nursing, Dietary, Environmental, House Physician etc.). | |
| **PUBLIC HEALTH INSPECTOR** | | |
| ☐ | Identify the designated Public Health Inspector (PHI) from WECHU for your facility:<br>**PHI Name**: _____ **Phone #:** 519-258-2146 ext._____<br>Your Public Health Inspector (PHI) may reach out to conduct a site visit and meet with the IPAC lead/OMT. | |
| **IPAC MEASURES** | | |
| ☐ | Refer to WECHU IPAC Hub website and the Ministry of Health documents for additional resources related to outbreak control measures:<br>Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings – February 2025 or as current.<br>Appendix 1: Ontario Public Health Standards, Respiratory Infection Outbreaks in Institutions and Public Hospitals – September 2024 or as current.<br>Appendix 1: Ontario Public Health Standards, Coronavirus Disease 2019 (COVID-19) – October 2024 or as current. | |
| ☐ | Case Control Measures | Symptomatic clients should remain in their rooms and cohort cases (i.e., limit movement between clients in outbreak area and non-outbreak areas) were possible. |
| | | Refer to Section 1.3 of the *Outbreak Quick Guide 6.0* for more information. |
| ☐ | Additional Precautions | All positive cases should be placed on **droplet and/or contact precautions** in addition to routine practices. Refer to Public Health Ontario for more information on additional precautions. |
| | | **Post additional precautions signage on the door of case rooms.** |
| ☐ | Staff/Student/ Volunteers | Minimize movement of staff/students/volunteers between affected and unaffected areas as much as possible (i.e., cohort staff). |

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| ☐ Control Measures | Exclude ill staff/students/volunteers **until symptoms have been improving for 24 hours and no fever present** or longer if indicated by your facilities internal policies.<br>Upon return to work, staff should mask and avoid caring for highest risk residents for **10 days** from symptom onset or specimen collection date (whichever is earlier). |
| | Refer to your institutional policy regarding **unvaccinated** staff/students/volunteers during influenza outbreaks. **Exclusion is strongly recommended** if unvaccinated and not on antiviral prophylaxis. Offer vaccination. |
| ☐ Visitor Control Measures | Restrict visitors to essential caregivers on affected units. |
| | Ensure those who do visit:<br>• Are screened for signs and symptoms of illness<br>• Practice vigilant hand hygiene<br>• Visit clients in their rooms and avoid communal areas<br>• Visit only one client; do not mingle with other clients<br>• Use appropriate PPE especially if providing direct care |
| | Ill visitors should be advised not to visit while they are ill and wait until symptoms have ended. |
| | Provide visitors with the WECHU pamphlet "What Visitors Need to Know" during an outbreak. |
| ☐ Enhanced Environmental Cleaning | Increase frequency of cleaning and disinfecting of high touched areas and surfaces to entire facility **a minimum of twice daily** (e.g., washrooms, handrails, tabletops, chair arm rests, doorknobs, etc.). |
| | Choose products with proven efficacy against identified pathogens. Follow the manufacturer's directions on proper concentration and contact times. For more information, refer to PHO's Best Practices for Environmental Cleaning - November 2025 or as current. |
| | Dedicate use of equipment, when possible, to the ill client or clean and disinfect between use as per manufacturer's directions (e.g., wheelchairs, lifts, scales, blood glucose meters, BP cuffs, thermometers, etc.). |
| | Limit movement of equipment/supplies through affected areas. |
| ☐ Hand Hygiene | Ensure proper handwashing is maintained by clients and staff by providing ample supply of soap and 70-90% alcohol-based hand sanitizers. |
| | Implement the use of alcohol-based hand rubs in areas where sinks are not readily available. |
| ☐ PPE | Ensure proper PPE, for example, masks (N95 where applicable), gloves, gowns, eye protection are available and accessible throughout the facility. |
| | **Wear proper masks, goggles and/or face shield** when providing care within two meters of case/suspect case.<br>*Dispose mask after **single use** and clean and disinfect goggles. |
| | Perform hand hygiene before applying and after removal of gloves.<br>*Discard immediately after use and wash hands. |
| | Wear **gowns** only if skin or clothing likely to be contaminated during care. |
| | Provide a **container for soiled PPE/linen**: |

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| | | • If the container is located *inside* the client room, the container must be a **minimum of 6ft** or more away from the client's bed.<br>• If not possible, place the container *outside* the room a **minimum of 6ft** away from any clean linen.<br>*Ensure alcohol-based hand sanitizer is available by the container. |
| ☐ | Audit | Increase audits of staff practices (e.g. hand hygiene, cleaning, use of PPE, etc.). |
| ☐ | Dietary | Sick clients should receive meals (tray service) in their room.<br>*Ensure the staff who deliver meals are practicing proper hand hygiene in between rooms and wearing appropriate PPE. |
| ☐ | Activities | Discontinue group outings from the affected unit/floor. |
| | | Reschedule communal meetings or large group activities on the affected unit/floor (or entire facility if outbreak is determined to be facility wide). Meetings or activities may proceed in non-affected units/floors. |
| | | Conduct on-site programs in client/resident/patient rooms, if possible. |
| | | Asymptomatic or well clients on affected units may continue to participate in small group activities (i.e. physiotherapies, OT) on the unit only; proper precautions should be taken, and the outbreak unit should be visited last. |
| | | Exceptions regarding non-outbreak units/floors should be discussed with the OMT involving outside groups such as entertainers, volunteer organizations, and community groups. |
| ☐ | Admissions/ Readmissions & Transfer | Limit, if possible, when a new outbreak has been declared. For specific guidance on admissions/readmission/transfers, refer to **Section 3.5 and 3.6** of the Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings – February 2025 or as current. |
| ☐ | Medical/Other Appointments | If possible, reschedule non-urgent appointments until the outbreak is over. |
| | | Symptomatic clients/residents/patients should wear a mask (as tolerated for respiratory illnesses) and the receiving facility should be notified of the outbreak. |
| **ANTIVIRALS** | | |
| ☐ | For influenza and COVID-19, determine eligibility of antivirals for residents and staff. Refer to **Appendix B: Antivirals/Therapeutics** of the Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings – February 2025 or as current. | |
| **Signature and Designation:** | | **Date:** |