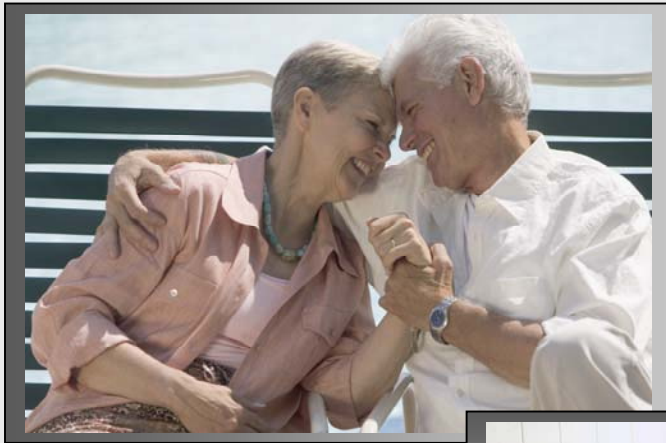


Pandemic Influenza Planning For Nursing Homes






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Pandemic Influenza

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Long-term Care Pandemic Influenza Planning Checklist

ICON KEY	
	Valuable information
	Web Resources
	Sample Tools



Planning for pandemic influenza is crucial in long-term care. A long-term care facility should review its readiness plan and incorporate pandemic influenza as a top priority.

Pandemic influenza is a global outbreak of disease that occurs when three conditions are met: (1) a new type of influenza. This is when a virus appears or “emerges” in the human population (usually due to mutation of an animal version of influenza, e.g. bird flu); (2) it causes serious illness in people; and (3) it spreads easily from person to person worldwide. Although there have not been reports of pandemic influenza, recent reports of a new influenza virus infection transmitted from birds to humans in Asia have alerted the possibility that pandemic influenza could develop, affecting all global countries. Since the public does not have pre-existing immunity to a new virus, a pandemic influenza virus is anticipated to result in a serious disease in humans.

Pandemic influenza differs from the seasonal flu. Due to frequent international travel and movement of goods, a pandemic influenza virus is anticipated to spread worldwide within three months. The influenza vaccine, which usually takes over six months to develop, produce, and distribute, may not be available if a pandemic occurs.

If a pandemic influenza virus arrives, those who have contracted the virus will be contagious two to four days before they show symptoms. According to the Centers for Disease Control and Prevention (CDC), in the early weeks of a pandemic, every person infected with the virus will infect two or three additional people, until about 30% of the population becomes ill. Depending on the virus strain, a significant number of the population may be sick enough to require hospitalization and even intensive care. A “wave” of a pandemic may last six to eight weeks, with the greatest number of people ill in the third week. States may experience two or more pandemic waves that arrive three to nine months apart. Every time a pandemic wave arrives, rates of absenteeism at workplaces may be as high as 50% during some weeks because people will be providing care for sick family members or be sick themselves. Due to the anticipated reduction in the workforce, temporary delays and shortages in essential services and supplies requires a pandemic influenza readiness plan.

Planning for pandemic influenza is critical for ensuring a sustainable healthcare response. The materials that have been developed will assist long-term care facilities in their comprehensive pandemic influenza planning. These materials have also been designed to augment existing readiness planning; and are to be adapted to meet each facilities needs and circumstances.

Additional information from state, regional, and local health departments, emergency management agencies/authorities, as well as trade organizations should be incorporated into the facility’s pandemic influenza plan.



For more information on pandemic influenza, ask the experts: www.pandemicflu.gov

What is Pandemic Influenza?

Pandemic influenza is caused by a new influenza virus that appears or "emerges" in the human population. The new virus causes serious illness because humans have no existing immunity to it. It spreads easily from person to person, causing a global outbreak of disease within a very short time. There is no influenza pandemic now, but preparation is important.

How is it spread?

Influenza viruses spread in the form of small droplets caused by coughing and sneezing. They generally spread from person to person. Many times people become infected after touching something that was recently contaminated with the virus and then touching their mouth or nose. Most adults may infect others beginning one day before they show symptoms and up to five days after becoming sick.

What are the symptoms of pandemic flu?

The most common symptoms of flu include: fever of 101 degrees Fahrenheit or greater, headache, extreme tiredness, sore throat, nausea, vomiting and diarrhea, dry cough, and muscle aches.

How do I avoid getting Influenza?

- Cover your mouth and nose when you sneeze or cough (but NOT with your hands, so you don't spread the virus. Use a tissue.)
- Wash your hands frequently (Use alcohol based gels if soap and water is not available.)
- Avoid close contact with people who are sick
- If you are sick, avoid contact with others
- Stay home until you are well

Where can I learn more?

www.pandemicflu.gov
www.cdc.gov



Facts About Pandemic Influenza

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Facts about Pandemic Influenza!

Did you know that you can directly affect the health of our elders living in long term care facilities during pandemic influenza?

You can work closely with your nursing home's pandemic planning team. Pandemic planning requires that staff, family and visitors, not accustomed to responding to health crisis, understand the actions and priorities required to prepare for and respond to these potential risks.



That's right! You can personally keep elders healthier and happier if the pandemic occurs. How, you ask? By getting an influenza vaccination, education, and getting involved.

Pandemic influenza occurs roughly every thirty years and can take place in any season.




It affects many more people than ordinary flu – a quarter or more of the population – and is associated with much higher rates of illness and death. For example, the worst flu pandemic last century – the 1918 “Spanish Flu”, caused up to 40 million deaths worldwide.

Pandemic influenza, usually associated with a higher severity of illness and consequently a higher risk of death, represents a much more serious infection than ordinary influenza.

People of all age groups may be at risk of infection with pandemic flu, not just “at risk” groups.

A vaccine against pandemic flu will not be available at the start of a pandemic. This is because the virus strain will be completely new. It will be different from the viruses that circulated the previous winter, and not predictable in the same way.

Antiviral drugs may be in limited supply. Their use depending on evidence of their efficacy that will only emerge once the pandemic is under way.

I C O N K E Y	
	Valuable information
	Web Resources
	Sample Tools

Pandemic Influenza Checklist



The following is a checklist to be used as a guide for your pandemic influenza readiness plan. The outline below encourages collaboration between infection control professionals and other departments to ensure a successful program throughout the year.

Planning Structure and Decision Making

- ❑ Identify an inter-disciplinary team to develop a pandemic influenza program. Include representation from each department i.e. physicians, nurses, administrators, and pharmacists
- ❑ Seek representation from vendors
- ❑ Assign a team member to be the *Pandemic Response Coordinator*
- ❑ Identify firm goals that include providing the maximum possible level of service to residents during a local pandemic outbreak

Points of Contact

- ❑ Create a list that encompasses pertinent points of contact such as:
 - Local Department of Health
 - Ombudsman
 - Emergency Management Agency
 - Hospital Command Center designated for your nursing home

Written Pandemic Influenza Plan

- ❑ Review national and state plans
- ❑ Generate a list of internet resources
- ❑ Identify the following:
 - Preparation
 - Communication
 - Surveillance
 - Detection
 - Response
 - Containment
- ❑ Identify Goals:
 - Decrease spread of disease
 - Mitigate disease
 - Sustain infrastructure

Surveillance and Detection in Residents and Staff

- *Pandemic Response Coordinator* to monitor federal and state public health advisories
- Develop an evaluation system for all incoming staff for signs and symptoms of pandemic influenza (*based on current surveillance methods for seasonal flu*)
- Develop an evaluation system for all new admissions for signs and symptoms of pandemic influenza (*based on current surveillance methods for seasonal flu*)
- Establish a triage center within the facility
- Designate one entrance to be the only mode of entry and exit into the nursing home
- Designate elevator and stair access to prevent in-house spread
- Monitor:
 - Nosocomial transmission of flu
 - Isolation of potentially infected individuals
 - Cohorting of potentially infected individuals

Facility Communication Plan

- Develop a communication structure to communicate with:
 - Public health authorities
 - Staff
 - Families
- Develop a list of alternate phone numbers for staff, such as cell phone numbers
- Develop a list of healthcare facilities to maintain open communication:
 - Local nursing homes
 - Local hospitals
 - Emergency medical response
 - Community organizations
- Wireless communication system within the facility to assist with in-house communication if a quarantine is issued
- Designate personnel to tend telephones in the event that office staff becomes unavailable (this enables family members to continue to have access to loved ones)

Education and Training

- Develop an education curriculum for:
 - Staff
 - Residents
 - Family
- Send “save the date” and invitations to all alerting them of the importance to attend the training
- Non-licensed staff to be pro-actively cross trained in resident care if facility reaches crisis stage or surge capacity
- Conduct preparedness exercises to evaluate the efficacy of training

Infection Control Plan

- Review the following policy and procedures:
 - Standard precautions and droplet precautions with symptomatic residents
 - Hand hygiene
 - Respiratory hygiene
 - Cough etiquette
 - Social distancing
 - Frequent decontamination of work surfaces/door handles, etc...
- Isolation and cohorting of known or suspected influenza considering the following strategies:
 - Confirming ill residents and exposed roommates
 - Placing residents with known or suspected pandemic flu together in one common area of the facility
 - Closing units
- Developing criteria for restricted/limited visitation in the event of a pandemic

Occupational Health

- Develop a policy for:
 - Managing staff with symptoms
 - Staff that become sick at work
 - When to return to work after having the flu
 - Personnel who are caretakers in their own home
 - Education to staff to self assess and report signs and symptoms of the flu
- Designate areas for staff to sleep/rest
- Designate areas for staff to have meals
- Develop a list of volunteers to provide assistance in the event of a pandemic
- Provide mental health counseling for staff

