

Quick Reference: Low/Level One Outbreak Management Team (OMT) Daily Meetings	
Site:	Unit:
Date:	
Confirm that Outbreak Checklist has been initiated.	
Review outstanding issues from last meeting.	
Current Outbreak Status	
Review update to RI/GI Surveillance Tool in last 24 hours - Residents and staff: new cases, total cases	
	Number:
# Transfers to emergency/acute in last 24 hours	
# Admissions to acute in last 24 hours	
# Residents in acute ready to return once outbreak status lifted (n/a if no admissions)	
# Vacant beds today as a result of outbreak	
Program reports:	
<p>Infection Prevention and Control: For IH owned and operated facilities collaborates with facility most responsible person and MHO to review the outbreak situation and provide education e.g. outbreak definition, lab specimen collection, control measures in place, PHSa lab notification, ensure the RI and GI Outbreak Report Forms are completed correctly etc. The ICP declares the outbreak over as per the RI and GI Guidelines in consultation with the MHO when necessary. The ICP completes an Outbreak summary report following a debrief with staff.</p>	
<p>Communicable Disease Unit: Provides consultation to P3 and private facilities regarding implementation of facility outbreak guidelines</p>	
<p>Acute Care Representative: provide updates on acute care congestion including number of patients waiting in Emergency Department, number of Alternate Level of Care (ALC) Not for placement and ALC for Placement (ALCP), number waiting for short stay services/ PTH, staffing levels</p>	
<p>Community Care Representative: Provide updates on number of First Appropriate Bed (FAB) clients, staffing levels, capacity to manage referrals for Home Health services</p>	
<p>Nursing: Cohorting or alternate plan update; staffing concerns</p>	
<p>list of required vaccines and/or antivirals required, supply, laundry and pharmacy needs, change in food services</p>	
<p>Pharmacy: Update on vaccination and antiviral supply (n/a for GI)</p>	
<p>Allied: Confirm group services and non-urgent therapy are discontinued. Update staff cohorting ability. Prepare to re-allocate staff to other areas in the building or other programs: acute or community.</p>	
<p>Recreation & Volunteer: Confirm outside programming, outings and group programs have been cancelled; staff cohorting for unit specific individualized programming and any volunteer updates</p>	
<p>Housekeeping: Cohorting update; confirm increase housekeeping in accordance with outbreak guideline, work routine changes; staffing, supplies and equipment concerns</p>	
<p>Dietary: Cohorting or alternate plan update; staffing concerns</p>	
<p>Laundry: Summarize increased supply needs from all programs and advise provider</p>	
<p>Plant: Cohorting update; delays in service?</p>	
<p>Scheduling: Staffing issues in next 24 hours and plan to mitigate; total # staff off ill</p>	
<p>Other Services/programs updates as applicable: (e.g. Unit clerks, JOSH, Communications, Logistics, Human Resources)</p>	
	Number:
Access: Update on vacant beds	
Acute: Update on impact to acute care (individuals waiting admission?)	
<p>Community: Confirm cancellation of clients for Respite and/or Adult Day Services. Update on impact to home health</p>	
<p>Communication plan: Update communication board (who?)</p>	
<p>Summarize equipment and supply needs for administrative clerk to order</p>	
Issues to elevate prior to next meeting:	
	Date:
Potential date to lift Outbreak status:	
Complete RI and GI Outbreak Form and forward to CDU and ICP	
RI and GI Outbreak Report Form 823076	
9/27/2017	

*Communicate directly with your supervisor on summary of information and escalate issues/barriers as applicable