

Summary of Changes

Respiratory Infection (RI) Outbreak Guidelines for Health Care Facilities

September 2018

Instructions to replace documents:

- This replaces Respiratory Infection (RI) Outbreak Guidelines for Health Care Facilities October 2017
- Please remove and recycle any printed copies of the previous guidelines

N = New R= Revised		Section(s) Revised
Overall Guidelines	R	<ul style="list-style-type: none"> • Modified format and order of guidelines to be more similar to GI Outbreak Guidelines
	N	<ul style="list-style-type: none"> • Changed name as guidelines incorporate guidance for acute care health settings as well as residential
Introduction	R	<ul style="list-style-type: none"> • Added section called “Links” to document and this is listed here.
	R	<ul style="list-style-type: none"> • Application of guidelines now includes IH Acute Care Facilities.
Section I – General Principles and Pre- Outbreak Preparation	R	<ul style="list-style-type: none"> • Renamed from Pre-Outbreak Preparation
Section I – I Pre- Outbreak Preparation	R	<ul style="list-style-type: none"> • Now a subsection • Added clarifying details • Provided Residential Care specific direction • Added helpful links for reference
Section I – II Create an Outbreak Management Team (OMT)	R	<ul style="list-style-type: none"> • Re-organized and updated purpose for clarity and added job titles to be consistent with IH Outbreak Management Plan. • Clarified intended roles of OMT, including the Most Responsible Person chairing and leading meetings.
	N	<ul style="list-style-type: none"> • Links to tools for Outbreak Management team (OMT) tools added.
Section I – III Surveillance	N	<ul style="list-style-type: none"> • Created new section, based on the previous Section 2 A. Surveillance for Illness (now removed)
Section I – V Antivirals	R	<ul style="list-style-type: none"> • Antiviral details changes and modification for clarity. • Provided residential care and acute care specific direction.
	N	<ul style="list-style-type: none"> • Acute care specific direction added.
Section I – VI When to use Anti-Viral Medication	R	<ul style="list-style-type: none"> • Health Care Worker wording changes for clarity. • Moved statement regarding when HCW can return to work after starting antiviral medications to Exclusion of unimmunized Well HCW in Scenario A direction.

N = New R= Revised		Section(s) Revised
		<ul style="list-style-type: none"> Under Surveillance of Side Effects from Antivirals, updated the reporting of particular or unusual concerns no longer include the ICP.
Section 2 – Outbreak Detection, Declaration and Investigation	R	<ul style="list-style-type: none"> Renamed from Outbreak Detection and Consultation Reformatted and re-organized information to improve clarity and ease of use.
Section 2 – I Recognition	N	<ul style="list-style-type: none"> New section, based on previous section 2
Section 2 – II Definitions	R	<ul style="list-style-type: none"> Reformatted to include RI case definition and RI outbreak definition RI Case definition updated to include the need for additional symptoms (based on draft PICNet guidelines).
Section 2 – III Declaring an Outbreak	R	<ul style="list-style-type: none"> Moved section to appear prior to “Reporting an outbreak” Reformatted to provide residential care and acute care specific direction. Removed definitions of scenarios as the information was duplicated in Section 3.
Section 2 – IV Reporting an Outbreak	R	<ul style="list-style-type: none"> Reformatted direction for clarity between initial reporting and daily reporting Reformatted direction to provide residential care and acute care specific direction Added contact information for acute care sites to report on weekends and holidays. (Medical Microbiologist)
Section 2 – V Notification of Partners	R	<ul style="list-style-type: none"> Wording changes and additions for clarity.
Section 2 – VI Roles and Responsibilities	N	<ul style="list-style-type: none"> Clarified that Most Responsible Person would lead the OMT meetings in addition to organizing. Moved role of completing RI and GI outbreak to the Most Responsible Person from Nursing staff. Added roles and responsibilities for Medical Director of IPAC or designate.
	R	<ul style="list-style-type: none"> Clarified roles and responsibilities of Infection Control practitioner and differentiated for residential care and acute care.
Section 2 – VII Collection and Transportation of Specimens	N	<ul style="list-style-type: none"> Added a comment that testing may be available at IH labs, and to check with local lab. Added this section based on previous section 2 D – Identifying Causative Organism and Section 6 B – Resources.
Section 3 – Outbreak	N	<ul style="list-style-type: none"> Added wording regarding direction for outbreaks in acute care



N = New R= Revised		Section(s) Revised
Management		facilities
	R	<ul style="list-style-type: none"> Removed section on declaring outbreak over as specific direction is found within the specific management scenarios.
Section 3.1 Management in Residential Care Settings	N	<ul style="list-style-type: none"> New Formatting to provide structure for outbreak management directions in residential care and acute care settings.
Section 3.1 – I Routine Practices	N	<ul style="list-style-type: none"> Added section to provide direction
Section 3.1 – II Scenario A 3.0 – III Staff	R	<ul style="list-style-type: none"> Updated wording for clarity
Section 3.1 II Scenario A 5.0 – Cohort Staff	R	<ul style="list-style-type: none"> Re-organized information for clarity and added link to Staff Influenza Immunization and Exclusion Policy.
Section 3.1 – II Scenario A 10.0 – Exclusions of unimmunized Well HCW's	R	<ul style="list-style-type: none"> Moved statement about starting work after first dose of antiviral medication to this section from "When to Use Antivirals".
Section 3.1 – II Scenario A 11.0 – Restrict admissions and Transfers	R	<ul style="list-style-type: none"> Adding link to Standard Operating Procedures
Section 3.1 – II Scenario A 16.0 – Declaring the outbreak over	N	<ul style="list-style-type: none"> Adding direction to consult with CD Unit or ICP to make arrangements if outbreak could be declared over on a weekend or holiday.
Section 3.1 – III Scenario B 3.0 - III staff	R	<ul style="list-style-type: none"> Wording changes for clarity
Section 3.1 III Scenario B 10.0 - Restrict Admissions and Transfers	R	<ul style="list-style-type: none"> Reorganized information for ease of use.



N = New R= Revised		Section(s) Revised
Section 3.1 – III Scenario B 16.0 - Declaring the Outbreak Over	N	<ul style="list-style-type: none">• Adding direction to consult with CD Unit or ICP to make arrangements if outbreak could be declared over on a weekend or holiday.
Section 3.1 – IV Scenario C 2.0 - III Staff	R	<ul style="list-style-type: none">• Wording changes for clarity
Section 3.1 – IV Scenario C 4.0 – Cohort Staff	R	<ul style="list-style-type: none">• Reorganized information for clarity
Section 3.2 – Outbreak Management in Acute Care Settings	N	<ul style="list-style-type: none">• New section to provide specific direction for acute care facilities.
Section 6 – B Tools for outbreak Management and Reporting	N	<ul style="list-style-type: none">• Link to the newly developed Acute Care RI Outbreak Quick Reference guide.