# Influenza Outbreak Daily Actions Checklist

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| **Daily Influenza Checklist: complete daily during outbreak** | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Date:** | | | | |  | | |  | | |  | | |  | | |  | | |  | | |  | |
| **Date of first symptoms:** |  | **Completed by (initials):** | | |  | | |  | | |  | | |  | | |  | | |  | | |  | |
| **Number of new symptomatic residents today:** | | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |
| **Total number of symptomatic residents today:** | | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |
| **Confirmed cases of influenza today:** | | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |
| **Total cases possible /confirmed (total number of affected residents to date):** | | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |
| **Are any residents giving cause for concern due to outbreak infection?** | | | | Y/N | | | Y/N | | | Y/N | | | Y/N | | | Y/N | | | Y/N | | | Y/N | | |
| **Number of new symptomatic staff today:** | | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |
| **Total number of staff affected to date:** | | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |
| **Resident Placement:** doors to symptomatic residents rooms are closed and signage is clear (if appropriate); where possible, symptomatic and asymptomatic residents are kept apart and common areas are closed | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |
| **All residents** have been told about the outbreak, advised to avoid common areas, reminded to practice good respiratory/cough hygiene and frequent hand hygiene, and have been given the ‘Influenza - Information for residents and visitors’ leaflet | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |
| **Resident care:** Care assessments are completed for today; any concerns have been raised with the GP | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |
| **Resident care:** Antibiotic/antiviral prescribing for all residents has been reviewed with the GP and administered as required | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |
| Inter-care facility **transfers** (if clinically essential) have been pre-agreed with HPT; receiving units have been informed | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |
| **Relatives/carers** of residents discharged to home care have been advised of the situation | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |
| **Care Worker practices:** Sufficient staff are on duty for all areas; staff on duty are all asymptomatic | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |
| **Care Worker practices**: Where possible, staff are allocated to care for symptomatic or non symptomatic residents, but not both | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |
| There are sufficient **supplies** of PPE (glove, aprons, masks), ABHR, liquid soap, disposable towels and tissues | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |
| There is sufficient dedicated care **equipment** (i.e. washbowls, commodes, lifting equipment) | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |
| All communal resident care **equipment** has been cleaned following use and is in a ready-for-next-resident use condition | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |
| All **areas** are clutter free and bins have been emptied and are easily accessible for residents to dispose of tissues | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |
| Affected areas have been disinfected as per the **enhanced cleaning** protocol (1000 ppm av cl/all frequently touched surfaces) | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |
| Following any resident discharges, and prior to admitting a new resident, a **terminal clean** of the room/area has been carried out | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |
| Residents and visitors have been updated about any restrictions or changes to **visiting** policy | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |
| All changes to outbreak status have been **communicated** to staff/relatives and residents within the facility | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |
| **A terminal clean of the wider facility has been organised with the HPT once all persons have been symptom-free for at least 48 hours** | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |

For ongoing monitoring until outbreak is under control.