



Guidance on outbreaks of influenza (flu) in care homes

Do 2 or more residents or staff have the following symptoms?



Fever of
37.8°C
or above



New onset or acute worsening of one or more of these symptoms:

- cough
- hoarseness
- runny nose or congestion
- shortness of breath
- sore throat
- wheezing
- sneezing
- chest pain



Sudden decline in physical or mental ability

If you notice 2 or more residents or staff meeting these criteria, occurring within 2 DAYS (48 HOURS), in the same area of the care home **you might have an outbreak**. Consider influenza as an alternative diagnosis in residents with suspected chest infection



Contact your community infection control team (CICT) or PHE health protection team (HPT) immediately and take the infection control measures listed here



What the CICT or HPT will do:

- work with care home staff and GPs to identify the cause of the outbreak
- advise on infection control measures
- work with GPs to advise on treatment and prevention

INFECTION PREVENTION AND CONTROL MEASURES

All residents and staff should be offered seasonal flu vaccination each year

Hand hygiene and protective clothing

- ensure that liquid soap and disposable paper towels are available at all sinks
- wash hands thoroughly using liquid soap and water before and after any contact with residents
- provide 70% alcohol hand rub for visitor use and supplementary use by staff
- staff should wear single-use plastic aprons and gloves as appropriate when dealing with affected residents. The HPT will advise on the use of surgical masks. Dispose of all these as infectious waste

Cleaning and waste disposal

- provide tissues and no-touch bins for used tissue disposal in public areas
- provide tissues and covered sputum pots for affected residents. Dispose of these as infectious waste
- wash residents' clothes, linen and soft furnishings on a regular basis, and keep all rooms clean

Clean surfaces of lockers, tables & chairs, televisions and floors etc frequently. Always clean hoists, lifting aids, baths and showers thoroughly between patients.

Reducing exposure

- consider closing the home (and any day care facility) to new admissions if the HPT confirms an outbreak
- residents should not transfer to other homes/attend external activities
- residents should only attend out-patient or investigation appointments where these are clinically urgent
- care for residents with symptoms in single rooms until fully recovered and for at least 5 days after the symptoms started
- affected residents should remain in their rooms as far as possible. Discourage residents with symptoms from using common areas
- as far as possible staff should work in different teams: one team caring for affected residents and the other caring for unaffected residents
- agency and temporary staff in contact with residents with symptoms should not work elsewhere (e.g. in a local acute care hospital, or other care home) until 2 days after last exposure
- staff and visitors with symptoms should be excluded from the home until fully recovered
- the elderly, very young and pregnant women, who are at greater risk from the complications of flu, should be discouraged from visiting during an outbreak
- inform visiting health professionals of the outbreak and rearrange non urgent visits to the home, if possible
- inform the hospital in advance if a resident requires urgent attendance at hospital