

## Community Viral Respiratory Illness (VRI) Case, Cluster and Outbreak Containment Toolkit

Case Definition:	
New or Worsening Cough <u>or</u> Fever <b>PLUS</b> one of the following symptoms:	
<ul style="list-style-type: none"> <li>• Chills</li> <li>• Shortness of Breath</li> <li>• Runny or Stuffy Nose</li> </ul>	<ul style="list-style-type: none"> <li>• Sore Throat, Hoarseness</li> <li>• Difficulty Swallowing</li> <li>• Swollen or Tender Glands in the Neck</li> </ul>
<ul style="list-style-type: none"> <li>• Loss of Taste or Smell</li> <li>• Body Aches/headache</li> <li>• Severe Weakness or Fatigue</li> </ul>	
<b>Single Case: One Client identified with new symptoms consistent with VRI (COVID-19, RSV, Influenza).</b>	
<b>VRI Cluster: Two or more healthcare-associated VRI (<u>excluding influenza – see page 4</u>) cases identified on a single unit in a 7-day period</b>	
<b>1. Notification and Line List</b>	<ul style="list-style-type: none"> <li>• Frontline staff: initiate a paper line list to keep track of symptomatic clients.</li> <li>• Site leadership: initiate an <a href="#">electronic line list</a> to keep track of symptomatic clients.</li> <li>• Follow the directions on the instructions tab of the electronic line list to password protect your file.</li> <li>• Email the Ambulatory and Community team to notify that you have identified symptomatic client(s). The Ambulatory and Community team works Monday to Friday – they will respond by the following business day:               <ul style="list-style-type: none"> <li>○ <a href="mailto:ICP-ambulatorycommunity@vch.ca">ICP-ambulatorycommunity@vch.ca</a></li> </ul> </li> <li>• Have client vaccine status available; please provide date of last COVID and influenza vaccines.</li> <li>• Email questions to: <a href="mailto:ICP-ambulatorycommunity@vch.ca">ICP-ambulatorycommunity@vch.ca</a></li> <li>• Site leadership to review <a href="#">Community VRI Communication Algorithm</a>.</li> <li>• If you believe you have met outbreak definition (lab confirmed Influenza only), please follow the VRI Case Communication Algorithm to determine whom to contact and follow directions on page 4 of this toolkit.</li> </ul>
<b>2. Additional Precautions</b>	<ul style="list-style-type: none"> <li>• Place symptomatic clients on <a href="#">Droplet and Contact Precautions</a>.</li> <li>• Maintain precautions for:               <ul style="list-style-type: none"> <li>○ <b>INFLUENZA/COVID 19:</b> Until <b>5 days</b> have passed from onset of symptoms <b>and</b> there is symptom improvement <b>and</b> resolution of fever for 24 hours without the use of fever reducing medication.</li> <li>○ <b>RSV:</b> Until <b>7-days</b> post symptom onset <b>and</b> 24-hours after symptoms resolve.</li> <li>○ <b>Clients testing negative for VRI:</b> Remove from precautions <b>24 hours</b> after improvement in symptoms <b>and</b> resolution of fever for 24 hours without the use of fever reducing medication.</li> </ul> </li> <li>• Place <a href="#">Droplet and Contact Precautions</a> and <a href="#">donning sign</a> at entrance to client’s room in a visible location.</li> <li>• Place <a href="#">doffing sign</a> in the doffing zone inside the client’s room.</li> </ul>

	<ul style="list-style-type: none"> <li>• Assess unaffected clients twice daily for signs and symptoms of VRI. <ul style="list-style-type: none"> <li>○ If any clients are unwell, they should be clinically assessed and tested if they meet VRI case definition.</li> </ul> </li> <li>• If VRI-suspected or confirmed and <a href="#">Performing AGMP</a> place client on <a href="#">Airborne and Contact Precautions</a> for the duration of the AGMP. <ul style="list-style-type: none"> <li>○ For clients in multi-bed rooms, create a barrier by drawing curtains or closing the door for the duration of the procedure, if possible.</li> </ul> </li> </ul>
<p><b>3. VRI Testing</b></p>	<ul style="list-style-type: none"> <li>• Collect specimens only for clients that meet case definition unless otherwise directed by MHO, Medical Microbiologist, or delegate.</li> <li>• Collect <a href="#">PCR nasopharyngeal swab</a> or <a href="#">swish and gargle</a>.</li> <li>• Required specimen labelling (<b>must have</b> at least 2 patient identifiers): <ul style="list-style-type: none"> <li>○ Client’s first and last name, <b>AND</b> PHN or MRN or birthdate</li> <li>○ specimen type (i.e., nasopharyngeal)</li> <li>○ collection date and time</li> </ul> </li> <li>• Complete the <a href="#">VCH-Outpatient Requisition</a> for each sample sent to VGH lab (see <a href="#">sample completed requisition</a>).</li> <li>• The following fields on the VCH Outpatient Requisition <b>must</b> be completed: <ul style="list-style-type: none"> <li>○ Ordering Practitioner Name (MRP), Address, Phone, MSP Billing #, copy to Practitioner/Site Name.</li> <li>○ Client: Name, PHN, Date of Birth.</li> <li>○ Site address where client located.</li> <li>○ Date and Time of collection.</li> <li>○ Staff signature and date.</li> <li>○ In the “Other Tests” section, write: Influenza/COVID testing, AND specimen type (i.e., nasopharyngeal).</li> </ul> </li> <li>• Follow requirements for Transportation of Dangerous Goods: <ul style="list-style-type: none"> <li>○ <a href="#">SOP – Transportation of Dangerous Goods – Coronavirus (COVID-19) Specimen Learning Hub – Transportation of Dangerous Goods – Specimens by Ground</a></li> </ul> </li> <li>• It is the responsibility of the site to send specimens to Vancouver General Hospital Laboratory using your established courier service, taxi service or by dropping samples off. Samples should be couriered to: <p style="margin-left: 40px;">Vancouver General Hospital  Medical Microbiology Lab Receiving  855 West 12<sup>th</sup> Avenue  Jim Pattison Pavilion  Vancouver BC V5Z 1M9</p> </li> <li>• Samples are received Monday-Sunday (including Statutory Holidays) between 0700-2200.</li> <li>• Alert site leadership when specimens sent to the lab – method of delivery and the date and time the specimens were picked up should be noted in the line list in the comments section.</li> <li>• Order <a href="#">flocked nasopharyngeal swabs</a> from VCH supply chain (ePro #00090607).</li> </ul>
<p><b>4. Communication and Coordination</b></p>	<ul style="list-style-type: none"> <li>• Site leadership to schedule their own internal meetings – identify attendees, admin support and meeting space on site.</li> <li>• Site leadership to identify means of communication with frontline staff (e.g., huddles, communication binders, communication boards, staff notices or emails).</li> </ul>

<b>5. Admissions and Transfers</b>	<ul style="list-style-type: none"> <li>Do not move asymptomatic clients that have already been exposed to roommates with active symptoms or confirmed VRI unless directed by MHO, delegate, IPAC Physician or IPAC.</li> <li>Do not admit or move asymptomatic clients into rooms on Droplet and Contact precautions unless the client has recently recovered from COVID/RSV (lab confirmed). Consult with IPAC if you are uncertain.</li> </ul>
<b>6. Clients</b>	<ul style="list-style-type: none"> <li>Restrict movement of symptomatic clients outside of their rooms as much as possible.</li> <li>Provide tray service (in-room meals) for clients on Droplet and Contact precautions.</li> <li>Invite symptomatic clients to mask in common areas and/or when they must leave their room.</li> <li>Encourage diligence in hand washing and use of alcohol-based hand rub (ABHR).</li> <li>For clients who are asymptomatic, review immunizations and offer vaccine to those not yet immunized when vaccine is available.</li> <li>For client transfers to emergency/acute care, notify receiving site and paramedics of VRI activity in the facility.</li> <li>Set up in room garbage and linen/laundry hampers.</li> <li>Ensure meals and beverages are covered in transport.</li> <li>Ensure overbed tables are available for clients to dine in their room where needed.</li> <li>No shared food.</li> </ul>
<b>7. Staff Cases</b>	<ul style="list-style-type: none"> <li>Staff who develop symptoms at home to follow up with their own healthcare provider.</li> <li>VCH staff to report work absence to VCH Absence Call Line (1-866-924-4297).</li> <li><a href="#">Staff return to work</a> when: <ul style="list-style-type: none"> <li>Resolution of fever for 24 hours without the use of fever reducing medication <b>and</b></li> <li>Symptoms improve and feel well enough to work.</li> </ul> </li> </ul>
<b>8. Additional Cleaning</b>	<ul style="list-style-type: none"> <li>Consult with the Infection Prevention and Control Practitioner to determine if there is a need for enhanced cleaning.</li> </ul>
<b>9. Masking</b>	<ul style="list-style-type: none"> <li>Follow current Provincial Mask Policies for Healthcare Facilities.</li> </ul>
<b>10. PPE</b>	<ul style="list-style-type: none"> <li>Follow <a href="#">Donning</a> and <a href="#">Doffing</a> procedures for PPE use.</li> <li>Reinforce staff to their use point of care risk assessment for PPE use.</li> <li>Use N95 respirator for confirmed or suspected cases when performing an <a href="#">aerosol generating medical procedure</a> (e.g. CPAP/BIPAP/ Nebulizer therapy).</li> </ul>
<b>11. Supplies</b>	<ul style="list-style-type: none"> <li>Identify where extra supplies are kept.</li> <li>Ensure there is an adequate supply of: gowns, gloves, masks, eye protection, disinfectant wipes and ABHR.</li> <li>Assign restocking of supplies of the PPE cart and daily clean of the PPE cart.</li> <li>Ensure an adequate amount of testing supplies are available (ePro# 00090607).</li> </ul>
<b>12. Visitors</b>	<ul style="list-style-type: none"> <li>Support visitors with donning and doffing.</li> <li>Symptomatic visitors should not enter the facility unless for compassionate or exceptional circumstances.</li> <li>Any adjustments to visitor protocols are at the discretion of the MHO.</li> </ul>
<b>13. Group Activities</b>	<ul style="list-style-type: none"> <li>Group activities may continue.</li> </ul>

	<ul style="list-style-type: none"> <li>○ Symptomatic clients may not participate in group activities.</li> </ul>
<b>14. Discontinuing Droplet and Contact Precautions</b>	<ul style="list-style-type: none"> <li>● When Droplet and Contact precautions can be discontinued, coordinate “additional precautions clean” when the client is not occupying the room.</li> <li>● Offer client a bath/shower and clean clothing when ready to discontinue additional precautions.</li> <li>● Remove additional precaution signage after environmental cleaning is complete.</li> <li>● Identify on the list when Contact Plus/Droplet precautions have been discontinued.</li> </ul>

## Case Definition:

New or Worsening Cough or Fever **PLUS** one of the following symptoms:

<ul style="list-style-type: none"> <li>● Chills</li> <li>● Shortness of Breath</li> <li>● Runny or Stuffy Nose</li> </ul>	<ul style="list-style-type: none"> <li>● Sore Throat, Hoarseness</li> <li>● Difficulty Swallowing</li> <li>● Swollen or Tender Glands in the Neck</li> </ul>	<ul style="list-style-type: none"> <li>● Loss of Taste or Smell</li> <li>● Body Aches/headache</li> <li>● Severe Weakness or Fatigue</li> </ul>
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## Influenza Outbreak Definition:

**Two or more confirmed cases of lab confirmed Influenza on a unit in a 7-day period**

<b>1. Notification and Line List</b>	<ul style="list-style-type: none"> <li>● Frontline staff: notify nurse in charge, manager or designate of symptomatic clients.</li> <li>● Frontline staff: initiate a paper line list (updated daily) to keep track of symptomatic clients.</li> <li>● Site leadership: to email <a href="#">electronic line list</a> of symptomatic clients daily until outbreak declared over to: <ul style="list-style-type: none"> <li>Monday to Friday: <ul style="list-style-type: none"> <li>○ <a href="mailto:MHOandCDNurseOnCall@vch.ca">MHOandCDNurseOnCall@vch.ca</a></li> <li>○ <a href="mailto:Covid19@vch.ca">Covid19@vch.ca</a></li> <li>○ <a href="mailto:ICP-ambulatorycommunity@vch.ca">ICP-ambulatorycommunity@vch.ca</a></li> <li>○ <a href="mailto:VCHMedMicroIPAC@vch.ca">VCHMedMicroIPAC@vch.ca</a></li> </ul> </li> <li>Saturday, Sunday and STATs: <ul style="list-style-type: none"> <li>○ <a href="mailto:MHOandCDNurseOnCall@vch.ca">MHOandCDNurseOnCall@vch.ca</a></li> <li>○ <a href="mailto:COVID-19@vch.ca">COVID-19@vch.ca</a></li> <li>○ <a href="mailto:ICP-ambulatorycommunity@vch.ca">ICP-ambulatorycommunity@vch.ca</a></li> <li>○ <a href="mailto:VCHMedMicroIPAC@vch.ca">VCHMedMicroIPAC@vch.ca</a></li> <li>○ <a href="mailto:ICP-ChargeRN@vch.ca">ICP-ChargeRN@vch.ca</a></li> <li>○ Call ICP In-Charge: 604-220-5813</li> </ul> </li> </ul> </li> <li>● ICP to email or call the MHO when outbreak definition met.</li> <li>● Site leadership to review <a href="#">Community VRI Communication Algorithm</a></li> </ul>
<b>2. Additional Precautions</b>	<ul style="list-style-type: none"> <li>● Place symptomatic clients on <a href="#">Droplet and Contact precautions</a></li> <li>● Maintain precautions: <ul style="list-style-type: none"> <li>○ <b>Influenza Positive:</b> Until <b>5 days</b> have passed from onset of symptoms <b>and</b> there is symptom improvement <b>and</b> resolution of fever for 24 hours without the use of fever reducing medication.</li> </ul> </li> </ul>

	<ul style="list-style-type: none"> <li>○ <b>Clients Testing Negative for VRI:</b> remove from precautions <b>24 hours</b> after improvement in symptoms <b>and</b> resolution of fever for 24 hours without the use of fever reducing medication.</li> <li>● Place <a href="#">Droplet and Contact precautions</a> and <a href="#">donning sign</a> at entrance to client’s room in a visible location.</li> <li>● Place <a href="#">doffing sign</a> in the doffing zone inside the client’s room</li> <li>● Do not admit or move asymptomatic clients into rooms on Droplet and Contact precautions unless the client has recently recovered from lab confirmed Influenza.</li> <li>● Initiate daily screening of all clients on the affected unit.</li> <li>● Place close contacts on Droplet and Contact precautions for <b>3 days.</b></li> <li>● If Influenza is suspected or confirmed and <a href="#">performing AGMP</a> place on <a href="#">Airborne and Contact precautions</a> for the duration of the AGMP.             <ul style="list-style-type: none"> <li>○ For clients in multi-bed rooms, create a barrier by drawing curtains or closing the door for the duration of the procedure, if possible.</li> </ul> </li> </ul>
<p><b>3. VRI Testing</b></p>	<ul style="list-style-type: none"> <li>● Follow steps on page 2 for VRI testing.</li> </ul>
<p><b>4. Outbreak Declaration</b></p>	<ul style="list-style-type: none"> <li>● Outbreak declaration is at the discretion of the MHO.</li> <li>● <a href="#">Outbreak Management Team</a> leader (usually a member of the site leadership team) to communicate details of the outbreak with program staff and ensure implementation of containment measures contained within this toolkit.</li> <li>● Cohort staff to work only in affected area, where resources permit. If cohorting not possible, staff are encouraged to attend to asymptomatic individuals first, before moving on to symptomatic individuals</li> <li>● Exclude volunteers/students/companions unless required for operational purposes.</li> <li>● If volunteers, students, or companions are operationally required, site leadership to discuss with public health for direction.</li> <li>● If volunteers, students, or companions are permitted to work, use appropriate PPE, follow routine practices, and minimize contact with isolated clients.</li> </ul>
<p><b>5. Group Activities</b></p>	<ul style="list-style-type: none"> <li>● Group activities are at the discretion of the MHO.</li> <li>● The ICP will consult with the MHO and/or delegate for direction on group activities.</li> </ul>
<p><b>6. Communication</b></p>	<ul style="list-style-type: none"> <li>● Notify <a href="#">Outbreak Management team</a> of the outbreak status.</li> <li>● Outbreak meetings at the request of the MHO and/or delegate, medical microbiologist, ICP or site leadership.             <ul style="list-style-type: none"> <li>○ ICP to schedule, chair and take minutes for outbreak meetings (based on the Community Teams area of coverage)</li> </ul> </li> <li>● Site leadership to notify non-facility staff, professionals, and other service providers of the Public Health recommendations and to communicate any closures, cancelled services, and/or temporary restrictions.             <ul style="list-style-type: none"> <li>○ This may include volunteers, clergy, Handy DART, oxygen service, BC Ambulance, paid companions, students, food service staff, and others.</li> </ul> </li> </ul>
<p><b>7. Clients</b></p>	<ul style="list-style-type: none"> <li>● Restrict movement of symptomatic clients outside of their rooms as much as possible.</li> <li>● Provide tray service (in room meals) for clients on Droplet and Contact precautions.</li> <li>● Invite symptomatic clients to mask in common areas and/or when they must leave their room.</li> </ul>

	<ul style="list-style-type: none"> <li>• Encourage diligence in hand washing and use of alcohol-based hand rub (ABHR).</li> <li>• For clients who are asymptomatic, review immunizations and offer vaccine to those not yet immunized when vaccine is available.</li> <li>• For client transfers to emergency/acute care, notify receiving facility and paramedics of facility outbreak status.</li> <li>• Set up in room garbage and linen/laundry hampers.</li> <li>• Ensure meals and beverages are covered in transport.</li> <li>• Ensure overbed tables are available for clients to dine in their room where needed.</li> <li>• No shared food.</li> </ul>
<b>8. Staff</b>	<ul style="list-style-type: none"> <li>• Staff who develop symptoms at home to follow up with their own healthcare provider.</li> <li>• VCH staff to report work absence to VCH Absence Call Line (1-866-924-4297).</li> <li>• <a href="#">Staff return to work</a> when: <ul style="list-style-type: none"> <li>○ Resolution of fever for 24 hours without the use of fever reducing medication <b>and</b></li> <li>○ Symptoms improve and feel well enough to work.</li> </ul> </li> </ul>
<b>9. Masking</b>	<ul style="list-style-type: none"> <li>• Follow current Provincial Mask Policies for Healthcare Facilities.</li> </ul>
<b>10. Admissions and Transfers</b>	<ul style="list-style-type: none"> <li>• Restriction of admissions, transfers, shared dining, and group activities at the discretion of the MHO.</li> <li>• New admissions and re-admissions/transfers can be considered on a case-by-case basis with the MHO: <b>Mon-Fri 0800-1600: 604-675-3800 or Weekends/STATS: 604-675-3900</b></li> </ul>
<b>11. Supplies/PPE</b>	<ul style="list-style-type: none"> <li>• Identify where extra supplies are stored.</li> <li>• Ensure there is an adequate supply of: gowns, gloves, masks, eye protection, disinfectant wipes and ABHR.</li> <li>• Ensure an adequate amount of testing supplies are available (ePro# 00090607).</li> <li>• Assign restocking of supplies of the PPE cart and daily clean of the PPE cart.</li> <li>• Use N95 respirator for confirmed or suspected cases when performing an <a href="#">aerosol generating medical procedure</a> (CPAP/BIPAP/ Nebulizer therapy).</li> </ul>
<b>12. Visitors</b>	<ul style="list-style-type: none"> <li>• Any adjustments to visitor protocols are at the discretion of the MHO.</li> <li>• Support visitors with donning and doffing.</li> <li>• Symptomatic visitors should not enter the facility unless for compassionate or exceptional circumstances.</li> </ul>
<b>13. Enhanced Cleaning</b>	<ul style="list-style-type: none"> <li>• Consult the ICP to determine recommendations for enhanced cleaning.</li> <li>• Site leadership to initiate enhanced cleaning in the affected areas of the site at the direction of the ICP.</li> </ul>
<b>14. Influenza Treatment and Chemoprophylaxis</b>	<ul style="list-style-type: none"> <li>• If <b>OSELTAMIVIR (Tamiflu)</b> is advised by the MHO, call Pharmacy to initiate MRP orders: Name: _____ Contact #: _____ <ul style="list-style-type: none"> <li>○ Have current weights ready to fax to pharmacy.</li> <li>○ If no recent creatinine level is available, give first dose of Oseltamivir (Tamiflu™) and order STAT creatinine for subsequent dosing.</li> <li>○ <a href="#">Physician Pre-printed Orders for Tamiflu</a></li> <li>○ <a href="#">Influenza Immunization Order</a></li> <li>○ <a href="#">Staff Influenza Prophylaxis Letter</a></li> </ul> </li> </ul>

	<ul style="list-style-type: none"> <li>○ If a facility is in urgent need of <b>OSELTAMIVIR (Tamiflu)</b> and their community pharmacy is unable to supply the antiviral due to supply challenges, please contact Lower Mainland Pharmacy Services (LMPS) at <a href="mailto:PHAFHAPharmacyPurchasers@fraserhealth.ca">PHAFHAPharmacyPurchasers@fraserhealth.ca</a>.             <ul style="list-style-type: none"> <li>▪ They are open 7:00 am to 14:45 pm Mondays to Fridays.</li> </ul> </li> </ul>
<p><b>15. Discontinuing Droplet and Contact Precautions</b></p>	<ul style="list-style-type: none"> <li>• When Droplet and Contact precautions can be discontinued, coordinate “additional precautions clean” when the client is not occupying the room.</li> <li>• Offer client a bath/shower and clean clothing when ready to discontinue additional precautions.</li> <li>• Remove additional precaution signage after environmental cleaning is complete.</li> <li>• Identify on the list when Contact Plus/Droplet precautions have been discontinued.</li> </ul>
<p><b>16. Calling Outbreak Over</b></p>	<ul style="list-style-type: none"> <li>• MHO will consider calling the outbreak over for Influenza outbreaks when <b>6 days</b> have passed since <b>onset</b> of symptoms in the last case.</li> <li>• Discuss discontinuation of antiviral medication with the MRP.</li> <li>• Leadership to complete the “<a href="#">Influenza-Like-Illness Outbreak Report Form</a>” and email to <a href="mailto:VCHFacilityOutbreakBulletin2@vch.ca">VCHFacilityOutbreakBulletin2@vch.ca</a> and <a href="mailto:ilioutbreak@bccdc.ca">ilioutbreak@bccdc.ca</a></li> <li>• ICP to coordinate a post-outbreak debrief with affected facility to evaluate the management of the outbreak.</li> </ul>