

Do residents or staff have any of the following symptoms (new or worsening)?

- Fever* (of 37.8°C or above)
- Cough* (with or without sputum)
- Loss of or change in sense of smell or taste* (Anosmia)
- Sore throat
- Runny nose or congestion
- Sneezing
- Hoarseness
- Shortness of breath
- Wheezing

OR

Sudden decline in physical or mental ability without other known cause, eg delirium, new onset confusion, reduced alertness, reduced mobility, or diarrhoea.

* COVID-19 symptoms

If there are **two or more** residents or staff with symptoms occurring within **14 days**, in the same area of the care home,

YOU MIGHT HAVE AN OUTBREAK

If not already done, please contact their GP(s) and the Public Health Agency Duty Room (0300 555 0119) on the same day and take the infection control measures listed below.

The Public Health Agency will:

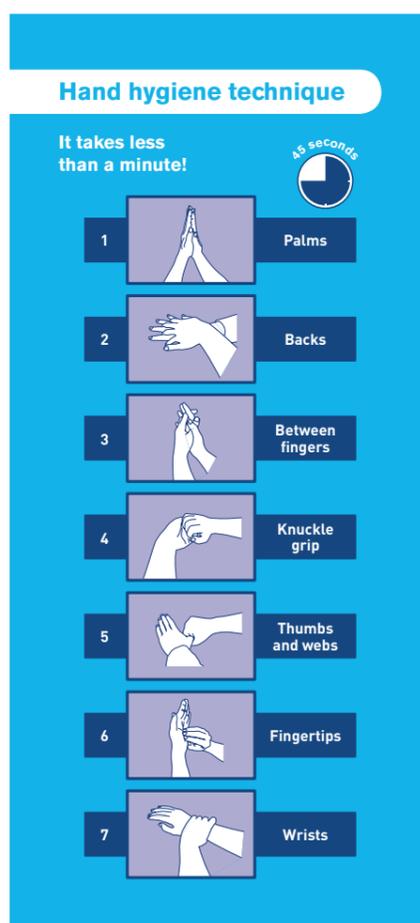
- identify the cause of the outbreak;
- guide control measures;
- work with care home staff to identify where to obtain clinical support, testing, PPE and other important information.

Outbreak and infection control measures

Refer to PHA guidance for more detailed information

Hand hygiene and personal protective equipment

- Ensure that liquid soap and disposable paper towels are available at all hand wash sinks.
- Wash hands thoroughly using liquid soap and water, using the 'seven step technique'. Do this:
 - 1 Before patient contact
 - 2 Before a clean/aseptic procedure
 - 3 After body fluid exposure risk
 - 4 After patient contact
 - 5 After contact with patient surroundings
- Staff should wear single use plastic aprons, gloves and surgical masks when caring for residents. Eye protection may be required under certain circumstances. For detailed advice see www.pha.site/PPE



Cleaning and waste disposal

- Increase cleaning of the environment. Pay special attention to touch points and shared equipment eg hoists.
- Encourage using tissues to catch coughs and sneezes. Bin the tissue and kill germs by washing hands thoroughly with soap and water.
- Provide tissues and covered sputum pots for affected residents.
- Dispose of these and personal protective equipment as clinical waste.
- Provide foot-operated bin for used tissue disposal in public areas.
- Ensure proper cleaning and replacement of oxygen/nebuliser equipment.
- Affected residents laundry should be treated as infected.

Reducing exposure

- Isolate or cohort affected residents until 14 days from onset of symptoms.
- Follow social distancing and shielding guidance for unaffected residents.
- Admissions/transfers to the nursing home from a HSCT facility should only take place following a risk assessment on a case-by-case basis in line with current guidelines.
- No day centre attendance.
- No group activities, such as therapies, games, hairdressing.
- No outpatient appointments unless deemed essential.
- Staff should work in separate teams: one team caring for affected residents and the other caring for unaffected residents.
- Agency and temporary staff should shower and put on a clean uniform before moving to another facility to complete a shift.
- Exposed staff should not attend external training.
- Staff with COVID-19 symptoms should be excluded from the home until 7 days from onset of symptoms.
- Visiting should be restricted.
- Identify hand hygiene point, with soap and water, for visitors on entering and leaving home. This practice must be reinforced during an outbreak.
- Nursing home should alert the Northern Ireland Ambulance Service if a resident requires transfer to a HSCT facility.

Public Health Agency duty room 0300 555 0119.