MICHIGAN HOME HEALTH ASSEMBLY INFECTION CONTROL SUBCOMMITTEE RECOMMENDATIONS

FOR HOME HEALTH PROVIDERS PREPARE FOR AN INFLUENZA PANDEMIC

The recommendations expand upon the checklist released in March, 2006 from the United States Department of Health & Human Services. Please review the Pandemic Influenza checklist released March 3, 2006 as you read the committee's comments as it follows the numbered list. This check list can be found at www.pandemicflu.gov

Following the checklist will be resources available to you during the development of your agencies plan.

Expanded Checklist By Point:

1. Structure for planning and decision making.

- Membership of the planning team should include professional representatives from all departments.
- Identify a point of contact from you local public health department and or affiliated hospital related to infection control.
- The pandemic influenza plan and bioterrorism plan can be one policy due to the similar actions.

2. Development of a written pandemic influenza plan.

- You need to network with your affiliated hospitals department as they develop your policies. This relationship can benefit you by avoiding duplication of services and make your community agencies aware of your limitations for surge capacity.
- Verify your local county and hospital response plan.

3. Elements of an influenza pandemic plan.

- a) A plan is in place for monitoring for pandemic influenza in the population vou serve.
- The CDC web site is easily accessed for monitoring waves of influenza as they occur and it is recommended some one be assigned the responsibility of monitoring this web site in your agency.
- Some counties maintain current case numbers that would be very helpful. Check with your local health department for information they will make available to you.
- Review your agencies current plan for surveillance of illness with staff and patients. Incorporating a higher level of surveillance than you are accustomed to will use more resources. As you look at the surveillance consider writing the plan

to implement the higher level of surveillance only when there is a significant threat to the public health resulting in an influx of infectious patients. You will probably want to reference your agencies "Communicable Disease Reporting Procedure" while working on this area.

b) A communication plan has been developed and includes the following information:

- Public health contact in county, state and local emergency management.
- Consider involving other health providers in your area as part of your response and coordination.

c) Develop a training and education program for all agency staff.

- May want to consider this an annual mandatory inservice.
- Consider developing a handout to include in Start of Care Packets on pandemic flu that includes transmission, precautions infection control in the home. You also may want to consider including the measures the home care staff will utilize while taking care of patients in the home. (Contact and Droplet Precautions)

e) An infection control plan is in place and includes the following:

• There are three web sites listed in this area that have good information you can utilize

f) An occupational health plan has been developed that includes the following:

- Review sick leave policies with an emphasis on when personnel who are symptomatic, but well enough to work, will be permitted to work. There are some suggestions on the CDC web site that can be helpful.
- Consider involving parish nurses, mental health team, and social workers provide counseling to agency staff.
- As part of your training and education to agency staff encourage them to develop a plan for their family that includes the care for dependent minors in case of school closures.
- Strongly encourage staff to obtain a flu shot. You will want to keep count and record as part of your employee surveillance

g) A vaccine and antiviral use plan has been developed.

- Check the web sites given on the HHS checklist and book mark them. Stay tuned your local health departments.
- For agencies who are involved in administering annual flu clinic keep in mind you may be called upon for administration of vaccine if one was made available.

f) Issues related to surge capacity during pandemic are addressed.

- Surge capacity calculation is critical part of a pandemic plan. Example of formula to use that anticipates forty percent of your staff off:
- Cross training office staff can be very helpful in reducing the impact to your agencies during times of absenteeism.

Additional resources helpful in pandemic planning:

• Government Web Sites:

www.hhs.gov/pandemicflu/plan www.pandemicflu.gov, www.cdc.gov/flu/weekly/fluactivity.htm, www.cdc.gov/flu/professionals/diagnosis/ www.cdc.gov/flu/professionals/training/

www.cdc.gov/ncidod/sars/guidance/i/pdf/i.pdf

www.cdc.gov/flu/professionals/infectioncontrol/ www.cdc.gov/ncidod/dhqp/gl_isolation standard.html www.cdc.gov/flu/professionals/vaccination/ www.prepare.org www.fema.gov www.ready.gov

- List Serve Weekly Updates www.bt.cdc.gov/coca/callinfo.asp
- Other Web Sites www.redcross.org
- Reference Books

Meehan Arias, Kathleen, Moore Soule, Barbara. <u>The APIC/JCAHO Infection Control Workbook.</u> Joint Commission Resources, 2006.

Rhinehart, Emily, McGoldrick, <u>Infection Control in Home Care and Hospice</u>, 2nd. Ed. Jones and Bartlett Publishers, 2006.

- Martin, Dezzani Sharon (2006). Avian Flu Should We Worry in Home Healthcare? *Home Healthcare Nurse* vol.24, January, 38-47.
- Consultant

Mary McGoldrick (Friedman), MS, RN, CRNI Home Care and Hospice Consultant Home Health Systems, Inc. Phone 800 961 7122 www.homecareandhospice.com H:\MHHA IC\PandemicMHHA.doc