



Nulsen Group  
Influenza Pandemic  
Management Plan

## Contents

Background.....	4
Purpose .....	4
Definitions .....	4
Influenza (Flu) .....	5
What is Influenza?.....	5
What are the symptoms?.....	5
How does influenza spread? .....	5
Infection control.....	5
Treatment.....	6
Public health response .....	6
Influenza pandemic .....	6
Standard infection control .....	7
Personal Protective Equipment.....	7
Who’s in Charge .....	8
Nulsen’s Approach.....	8
Pandemic Stages .....	9
Table 2: Guide to implementation for communication .....	10
Table 3: Guide to implementation for infection control measures .....	11
Table 4: Guide to implementation for social distancing measures .....	14
PET Responsibilities .....	17
Table 5: Roles and responsibilities of PET during the Preparedness stage.....	17
Table 6: Roles and responsibilities of PET during the Standby stage .....	18
Table 7: Roles and responsibilities of PET during the Targeted Action stage .....	19
Table 8: Roles and responsibilities of PET during the Stand down stage.....	20
Appendices .....	21
Appendix 1: Influenza Fact Sheet .....	21
Appendix 2: Flow chart for initial outbreak response.....	22
Appendix 3: 5 Moments of hand hygiene .....	23
Appendix 4: PET Evaluation Form.....	24
Appendix 5: House to House Transfer Form.....	25
Appendix 6: Observation report sheet.....	27
Appendix 7: Contact List.....	28
Appendix 8: Memo .....	29
Appendix 9: Alert Notices .....	30
Appendix 9: Posters .....	33
The flu and you .....	33

DOC Number:

Author: Safety Department

Date of Issue: 26/02/2020

Stop the Spread of Germs .....	36
How to wash and dry hands with soap and water .....	37
How to clean hands using an alcohol-based liquid or hand scrub .....	38
How to fit and remove a surgical mask .....	39
Cough etiquette and respiratory hygiene .....	40
How to fit and remove PPE .....	41
How to fit and remove a p2 Respirator .....	42
How to fit and remove protective eyewear .....	43
How to fit and remove a protective gown .....	44
How to fit and remove protective gloves.....	45
Travel health .....	46

## Background

This plan provides the framework for influenza preparedness and response for Nulsen Group.

This plan has been developed in line with guidance from both the Commonwealth and State Departments of Health. This plan has been developed to align with the Australian Health Management Plan for Pandemic Influenza 2014. This plan for Nulsen provides summary background information, but focuses on local planning and action within Nulsen and the disability sector generally. This management plan has been prepared to ensure that as far as possible the Association will be able to maintain services and render assistance to other disability organisations where possible during an influenza outbreak.

## Purpose

This plan provides practical information for preventing, preparing for, defining and managing outbreaks of influenza and pandemic in all service areas of Nulsen.

The objectives of this management plan are to ensure that arrangements are in place with Nulsen that will;

- Reduce the spread of the virus
- Limit the morbidity and mortality from influenza
- Adopt a multi-agency approach and mobilize available capacity and skills of all staff and volunteers
- Ensure assessment of all symptomatic persons rapidly and seek prompt treatment with antiviral and other medicines if indicated and appropriate
- Ensure the continued delivery of essential services for people with influenza
- Ensure utilization of other public/private health measures such as robust infection control
- Make targeted and effective use of potentially scarce healthcare skills, facilities and resources
- Apply accurate and timely information to all relevant parties, where necessary, the wider community.

## Definitions

<b>Influenza (the flu)</b>	A highly contagious disease of the respiratory tract caused by the influenza virus
<b>Influenza Type A</b>	A virus that occurs in humans and animals
<b>Influenza Type B</b>	A virus that only occurs in humans
<b>Epidemic</b>	A sudden increase in the incidence of a disease affecting a large number of people and spreading over a large area.
<b>Pandemic</b>	Epidemic on a global scale. Only Type A influenza viruses have been known to cause pandemics

DOC Number:

Author: Safety Department

Date of Issue: 26/02/2020

## Influenza (Flu)

### What is Influenza?

Influenza is not the same as the common cold. Influenza (Flu) is a common, highly contagious virus that affects the respiratory system and can cause severe illness and life-threatening complications. The virus can cause a mild to serious illness and even death in young children, older adults and vulnerable people. Getting the flu vaccine is your best protection against the flu.

### What are the symptoms?

Typical symptoms in adults include;

- Sudden onset of fever
- Headache
- Runny nose
- Cough
- Fatigue
- General aches and pains
- Nose, throat and lung congestion

Other symptoms include;

- Chills
- Aching behind the eyes
- Loss of appetite
- Sore throat

A bout of flu typically follows this pattern;

**Day 1-3:** sudden appearance of fever, headache, muscle pain and weakness, dry cough, sore throat and sometimes a stuffy nose

**Day 4:** Fever and muscle aches decrease. Hoarse, dry or sore throat, cough and possible mild chest discomfort become more noticeable. You may feel tired or flat.

**Day 8:** Symptoms decrease. Cough and tiredness may last one to two weeks or more

### How does influenza spread?

The flu virus spreads through the air as droplets when someone coughs, sneezes or talks. You can also catch the flu from touching a contaminated surface with the flu virus on it and then touching your mouth, eyes or nose. It is estimated that the flu contributes to over 3000 deaths in Australia each year.

### Infection control

#### *PPE*

Staff should wear gloves, protective glasses, gown (apron if no gown available), face mask and shoe covers when assisting residents with influenza to reduce their risk on coming in to contact with the disease.

#### *Hygiene*

Wash hands often, especially after coughing, sneezing, blowing your nose and before you prepare food. Cover mouth when coughing and dispose of used tissues.

### *Cleaning*

Regularly clean surfaces that the infected person has been in contact with, with a cleaning agent.

### **Treatment**

There is a flu vaccine that protects people against the flu virus and the common complications of infection.

Usually someone with influenza will recover naturally within 2-7 days in other cases your doctor may prescribe antiviral medication to fight the infection.

The recommended treatment for mild to moderate flu is to;

- Take paracetamol to help reduce fever and head and muscle aches
- Get plenty of rest
- Drink plenty of fluids
- Eat healthy food

### **Public health response**

Influenza is a notifiable disease to the Department of Health in Western Australia.

## **Influenza pandemic**

An influenza pandemic occurs when a new influenza virus emerges and spreads around the world, and most people do not have immunity. Viruses that have caused past pandemics typically originated from animal influenza viruses.

Influenza outbreaks are common in group settings including residential care facilities, hospitals, child care centres and schools. Influenza occurs in seasonal epidemics across most of Australia each year.

Influenza outbreaks cause discomfort and distress to service users/residents and staff. Accommodation services are considered to be high risk environments for influenza due to communal living arrangements and continual close proximity of service users/residents and staff. Service users/residents are at especially high risk due to the high prevalence of chronic medical conditions which can therefore cause serious illness and even death.

In the case of a pandemic, the Association will be guided in the first instance by the Department of Health. Both State and Commonwealth Governments have community management plans in place and these will further direct our response. In relation to the Disability Sector, the Association will work closely with the Disability Services Commission and other non-government agencies to restrict the spread of the disease and assist with the management of outbreaks across the disability sector.

Further co-operation will be provided to Local Government Authorities, Emergency Services and Police Services.

DOC Number:

Author: Safety Department

Date of Issue: 26/02/2020

## Standard infection control

Standard infection control precautions should be practiced at all times. Standard management by Support Workers for suspected illnesses include;

- Perform hand hygiene frequently
- Strict adherence to standard precautions
- Implement proper precautions for all cases
- Wear a surgical mask and protective eyewear to protect mouth, eyes and nose when in close contact with symptomatic residents (personal prescription glasses are considered inadequate)
- Wear a gown and gloves for direct contact with symptomatic residents
- Symptomatic residents to wear surgical mask when outside of their room
- Nebulisers SHOULD NOT be used unless no alternative method of medication delivery is available.
- Aerosol generating procedures should be performed in single rooms with the door closed and support workers gloved and masked with protective eyewear and gowned.
- Additional precautions are recommended by the Department of Health during an influenza outbreak and will be adhered to by all Nulsen staff.
- 

## Personal Protective Equipment

In a pandemic influenza situation, personal protective equipment supplies may quickly become depleted as individuals panic and wear it unnecessarily. It is therefore essential that it is worn appropriately as indicated below.

PPE should be worn to protect staff from contamination with body fluids and thus reduce the transmission of influenza. PPE must be readily accessible and should be put on when providing support or nursing care to residents/service users with influenza like symptoms either in their own home, a clinical area or when being transported to Dr's or hospital.

**Table 1: PPE**

	<b>Entry to cohort area but no resident/service user contact</b>	<b>Close resident/service user contact (&lt; 1 meter)</b>	<b>Aerosol generating procedures/treatments</b>
<b>Hand hygiene</b>	Yes	Yes	Yes
<b>Gloves</b>	No (d)	Yes (e)	Yes
<b>Plastic Apron</b>	No (d)	Yes	No
<b>Gown</b>	No	No (f,g)	Yes (g)
<b>Surgical Mask</b>	Yes (h)	Yes (h)	No

DOC Number:

Author: Safety Department

Date of Issue: 26/02/2020

<b>FFP 3 respirator</b>	No	No	Yes
<b>Eye protection</b>	No	Risk Assess	Yes

## Who's in Charge

The Commonwealth Department of Health and ageing is the lead agency for advice on a pandemic. In WA the Department of Health through their public units will be responsible for managing infectious disease emergencies.

In the event of a pandemic in Western Australia Nulsen's Pandemic Emergency Team (PET) will whenever possible work cooperatively with Commonwealth and State Government, Local Government Authorities, Emergency Services, Disability Services Commission and other disability support organisations.

Nulsen's Pandemic Emergency Team is made up of the following people

### **Chair Person**

Daniel Reid

### **Deputy Chair Person**

Sarah Attrill

### **Pandemic Coordinator**

Gordon Trewern

Caroline Watt

Lucy Henry

Bridget Harvey

Graham Holman

### **Media Management**

Danica Wieman

## Nulsen's Approach

This plan takes an emergency management approach as its framework, and acknowledges the importance of managing an influenza pandemic as any other hazard within an ongoing cycle of activities that include;

1. Prevention
2. Preparedness

DOC Number:

Author: Safety Department

Date of Issue: 26/02/2020

3. Response
4. Recovery

The above steps are consistent with the Australian Health Management Plan for Pandemic Influenza, which allows Nulsen Group to maintain a consistent approach with Australian and Western Australian agencies.

## Pandemic Stages

**Image 1: Australian and World Health Organisation (WHO) periods and phases of pandemic influenza a proposed response strategy.**

Prevention		
Preparedness		<ul style="list-style-type: none"> <li>Establish pre-agreed arrangements by developing and maintaining plans;</li> <li>Research pandemic specific influenza management strategies;</li> <li>Ensure resources are available and ready for rapid response;</li> <li>Monitor the emergence of diseases with pandemic potential, and investigating outbreaks if they occur.</li> </ul>
Response	Standby	<ul style="list-style-type: none"> <li>Prepare to commence enhanced arrangements</li> <li>Identify and characterise the nature of the disease (commenced in Preparedness); and</li> <li>Communicate to raise awareness and confirm governance arrangements.</li> </ul>
	Action	<p>Action is divided into two groups of activities:</p> <p>Initial (when information about the disease is scarce)</p> <ul style="list-style-type: none"> <li>Prepare and support health system needs;</li> <li>Manage initial cases;</li> <li>Identify and characterise the nature of the disease within the Australian context;</li> <li>Provide information to support best practice health care and to empower the community and responders to manage their own risk of exposure; and</li> <li>Support effective governance.</li> </ul> <p>Targeted (when enough is known about the disease to tailor measures to specific needs.)</p> <ul style="list-style-type: none"> <li>Support and maintain quality care;</li> <li>Ensure a proportionate response;</li> <li>Communicate to engage, empower and build confidence in the community; and</li> <li>Provide a coordinated and consistent approach.</li> </ul>
	Standdown	<ul style="list-style-type: none"> <li>Support and maintain quality care;</li> <li>Cease activities that are no longer needed, and transition activities to seasonal or interim arrangements;</li> <li>Monitor for a second wave of the outbreak;</li> <li>Monitor for the development of antiviral resistance; and</li> <li>Evaluate systems and revise plans and procedures.</li> </ul>
Recovery		

**Table 2: Guide to implementation for communication**

Measures	Preparedness	Standby	Initial action	Targeted action : Low CS	Targeted action: moderate CS	Targeted Action: High CS	Stand-down	Practicalities
Education material prepared for staff	See appendices							
Inform staff, service users and families of potential influenza breakout		Inform relevant parties						
			<b>Continue alerts relevant for all levels of transmissibility</b>					
Re-establish PET Team		Establish						Coordinate a consistent and effective approach
Liaison with DOH		DOH to confirm the outbreak	DOH to provide guidance	Continued guidance	Continued guidance	Continued guidance		All cases of Influenza are to be reported to the Department of Health Western Australia
Liaison with DSC & other disability organisations			Closures of disability workplaces and activities to be advised					
Pet Team advises if outbreak is							PET team will monitor for a second wave	PET will support staff to return from pandemic to

DOC Number:

Author: Safety Department

Date of Issue: 26/02/2020

over							of the outbreak	normal business services while maintaining quality care and support
Remove internal and public notices							If outbreak is over	
Review process							PET Team to meet to evaluate and revise the pandemic response of Nulsen	Identify opportunities for improvement
Psychological support							Nulsen's EAP available to all staff	

**Table 3: Guide to implementation for infection control measures**

Measures	Preparedness	Standby	Initial action	Targeted action : Low CS	Targeted action: moderate CS	Targeted Action: High CS	Stand-down	Practicalities
Flu Vaccine	Encourage all staff and residents to have a Flu vaccine when provided by Nulsen							

DOC Number:

Author: Safety Department

Date of Issue: 26/02/2020

	annually							
Infection control policy and procedures in place	Accessible to all staff							
Stock pile PPE in pandemic box at each site	Not to be opened until instructed							Effectiveness is dependent upon compliance/correct usage
Supply PPE, fact sheets, recording and information kits to all service sites		Supply all service sites						Pandemic box at each site to be opened Ensure PPE is compliant with standard infection control precautions
Continued infection control methods and re training	Included in induction and constantly reinforced by RSM and Nursing team	For all staff where appropriate						

DOC Number:

Author: Safety Department

Date of Issue: 26/02/2020

Implement DOH recommended infection control requirements (see 'Prevention and Management of Influenza Outbreaks' by Public Health Department')								Additional PPE to be supplied  Maintain quality care
			<b>The intensity of the infection control measures increases as transmissibility increases.</b>					
Cleaning and sanitisation		Preparation for increased cleaning and sanitisation requirements	Increased cleaning and sanitisation of all surfaces potentially contaminated by infection people including clothing	Continue	continue	continue	Sanitise all services and the return to normal cleaning routine	
			<b>The intensity of infection control measures increases as transmissibility increases.</b>					
Return to standard infection control measures and maintain							If outbreak is over and no residents are unwell	

DOC Number:  
 Author: Safety Department  
 Date of Issue: 26/02/2020

**Table 4: Guide to implementation for social distancing measures**

Measures	Preparedness	Standby	Initial action	Targeted action : Low CS	Targeted action: moderate CS	Targeted Action: High CS	Stand-down	Practicalities
Manage initial cases			Seek medical advice and diagnosis. Isolate suspected confirmed cases (see appendicies)					
Commence monitoring of influenza like illness and follow required actions	Identify and characterise the nature of the disease	Commence	Continue monitoring	Continue monitoring	Continue monitoring	Continue monitoring		
Daily monitoring of residents and staff		Staff to monitor themselves and residents for symptoms	If symptoms present follow pandemic plan					Recording and information kits to be completed on monitoring residents. Staff to self-identify and seek medical advice
Isolation and transfer of residents			3 or more people in one location	Isolate suspected/confirmed patients	Isolate/segregate confirmed patients	Isolate/segregate patients		PET Team will identify high risk

DOC Number:

Author: Safety Department

Date of Issue: 26/02/2020

			with influenza like symptoms in 72 hours may require isolation and/or transfer					residents and the need for transfer and isolation
Isolation/stay at home for staff			Immediately on noticing influenza like symptoms staff are to voluntarily isolate themselves	Continue to encourage staff to stay at home/work from home in voluntary isolation	Continue	Continue		Work from home not feasible for all staff  Disruption to workplace  High impact on workplace absenteeism
Non-urgent procedures and activities to be scaled back								If moderate CS is reached non-urgent activities to be scaled back as high staff absenteeism is likely.
Close Nulsen community services and redeploy staff into					Need for this step will be decided upon by PET Team			

DOC Number:

Author: Safety Department

Date of Issue: 26/02/2020

accommodation services where needed								
PET Team takes control of operations of Social Distancing			Control taken				Control will return to normal upon stand down	
Assess return to work for staff members who were infected							Staff to be cleared by a GP and provide a medical certificate to return to work	
Collation of records							Records will be collected	

DOC Number:  
 Author: Safety Department  
 Date of Issue: 26/02/2020

## PET Responsibilities

**Table 5: Roles and responsibilities of PET during the Preparedness stage**

Preparedness roles	The role of the PET Team:
Overarching role:	Prepare Nulsen Group to adapt to the demands and circumstances of an influenza pandemic. Develop guidelines to ensure they are useful and easily understood across the organisation. Provide advice on the feasibility and impact of the pandemic control measures.
<b>PET</b>	
Roles and responsibilities	Build a clear understanding by all team members that will be involved in the response and outline their roles and responsibilities
<b>Surveillance</b>	
Seasonal influenza surveillance	Participate in routine influenza surveillance, reporting any confirmed cases to DOH
Group at increased risk of influenza complications	Identify residents who are more likely to be at risk. Consider staff that are at risk and possible methods of protection.
Pandemic preparedness and response planning documents	Development of a pandemic preparedness and response plan and ensure they are reviewed and updated regularly.
<b>Infection Control</b>	
Policies and Procedures	Ensure infection control policies and procedures are in place and accessible to all staff
Guidelines	Implement up-to-date infection control guidelines
Personal Protective Equipment (PPE)	Maintain respiratory hygiene products appropriate for infection control and ensure local agreements and arrangements are in place for stockpile requirements for PPE
<b>Health Workforce</b>	
Immunisation	Provide education on the seasonal influenza vaccination and encourage vaccination by all staff on Nulsen's vaccination days
<b>Medical Countermeasures Stockpiles</b>	
Establish stockpiles	Ensure Pandemic boxes (stockpiled PPE) is available in every home for standby and increase PPE input into the home during targeted action
<b>Communication</b>	

DOC Number:

Author: Safety Department

Date of Issue: 26/02/2020

Education material	Develop education material on influenza and send out to all relevant parties (see appendices for examples)
--------------------	--

**Table 6: Roles and responsibilities of PET during the Standby stage**

<b>Standby Roles:</b>	<b>The Role of the PET Team</b>
Overarching Role:	Prepare personnel and resources for changes in demand and service use that may be required to manage the pandemic.
<b>Surveillance</b>	
Domestic surveillance	Support detection of the first cases of influenza and report to DOH – identify an outbreak within in Nulsen Group
International Surveillance	Be aware of a pandemic that has occurred internationally and raise awareness when necessary
<b>Infection Control</b>	
Infection control standards	Confirm application of standard infection control standards and advise of implementation of DOH recommended infection control requirements (see ‘Prevention and Management of Influenza Outbreaks’ by Public Health Department’)
PPE	Prepare stocks of PPE for use and revise usage practices. Provide information and support education to all staff regarding use of PPE, hand hygiene and standard infection control procedures (see appendices)
Nursing	Ensure nursing are aware of the status of the pandemic and take advice on prevention from them
Information recording	Supply all sites with recording sheets (see appendices) and instruct them to commence monitoring of influenza like symptoms
<b>Public Health Measures</b>	
Residents accessing the community	Prepare arrangements for residents who may contract influenza while participating in community
Visitors	Request visitors to accommodation services to stay away at this time if they have influenza like symptoms or have been in contact with someone with influenza like symptoms
<b>Immunisation</b>	
Pandemic vaccination program	Obtain pre-consent from resident guardians to have the influenza vaccine when the new strain is identified and the vaccination is made available.

DOC Number:

Author: Safety Department

Date of Issue: 26/02/2020

	Encourage staff to participate in the vaccination program.
<b>Public Communication</b>	
Consistent messaging	Communicate with all relevant parties about anticipated risks and encourage behaviours which contribute positively to managing the risk of infection, such as PPE, hand hygiene, mask wearing and vaccination
Department of Health	Liaison with DOH for guidance on the strain of influenza, control measures and when a pandemic has commenced

**Table 7: Roles and responsibilities of PET during the Targeted Action stage**

<b>Initial Action and Targeted Action Roles</b>	<b>The Role of the PET Team</b>
Overarching Role:	Maintaining business continuity for essential services and/or deliver pandemic measures and distribute information. Make decisions based on the organisations behalf. Maintain consistent and constant communication with all relevant parties regarding the pandemic.
<b>Surveillance</b>	
International Surveillance	DOH will advise of confirmed cases and when a pandemic is occurring
Domestic Surveillance	Identify confirmed cases at Nulsen Group and notify DOH – advise DOH of an outbreak at Nulsen Group
At risk Groups	Identify and monitor at risk groups
<b>Infection Control</b>	
Infection control standards	Ensure all sites are maintaining standard infection control and have implemented DOH recommended infection control requirements
PPE	Maintain respiratory hygiene products for infection control and other PPE for all staff. Provide information and education regarding usage of PPE and hand hygiene
Immunisation pandemic program	Provide immunisation services to high risk patients and staff
Cleaning and sanitisation	Inform all sites of the need for increased cleaning and sanitisation of all surfaces potentially contaminated by infected people including clothing
<b>Medical Countermeasures Stockpiles</b>	

DOC Number:

Author: Safety Department

Date of Issue: 26/02/2020

Deployment	Control distribution and use of stockpile items such as PPE. Provide information on how and when to use it correctly so it is not being overused and will deplete quickly.
<b>Communication</b>	
Consistent messaging	Communication with all relevant parties about risk and encourage behaviours with contribute positively to manage the risk of infection such as wearing PPE and hand hygiene.
Department of Health	All cases of influenza are to be reported to the Department of Health
Other Disability Organisations	Liaison with other disability organisations for closure of workplaces and activities.
<b>Isolation</b>	
Isolation/transfer of residents	PET will decide if and when it is necessary to transfer or isolate infected residents

**Table 8: Roles and responsibilities of PET during the Stand down stage**

Stand down Roles	The Role of the PET Team
Overarching Role:	
<b>Communication</b>	
Stand down of activities	Explain reasoning for stand down to all relevant parties and manage transition of services back to normal arrangements
Psychological support	Provide support and the Employee Assistance Program to all affected staff
<b>Surveillance</b>	
Second Wave	Monitor for a second wave or change in virus
<b>Review</b>	
Evaluation	Evaluate how the team responded and managed the Pandemic and implement changes as needed.

DOC Number:

Author: Safety Department

Date of Issue: 26/02/2020

## Appendices

### Appendix 1: Influenza Fact Sheet

# INFLUENZA



## WHAT IS INFLUENZA?

Influenza is not the same as the common cold. Influenza (Flu) is a common, highly contagious virus that affects the respiratory system and can cause severe illness and life-threatening complications. The virus can cause a mild to serious illness and even death in young children, older adults and vulnerable people. Getting the flu vaccine is your best protection against the flu.

## WHAT ARE THE SYMPTOMS?

<p><b>Typical symptoms in adults include;</b></p> <ul style="list-style-type: none"><li>- Sudden onset of fever</li><li>- Headache</li><li>- Runny nose</li><li>- Cough</li><li>- Fatigue</li><li>- General aches and pains</li><li>- Nose, throat and lung congestion</li></ul> <p><b>Other symptoms include;</b></p> <ul style="list-style-type: none"><li>- Chills</li><li>- Aching behind the eyes</li><li>- Loss of appetite</li><li>- Sore throat</li></ul>	<p><b>A bout of flu typically follows this pattern;</b></p> <p><b>Day 1-3:</b> sudden appearance of fever, headache, muscle pain and weakness, dry cough, sore throat and sometimes a stuffy nose</p> <p><b>Day 4:</b> Fever and muscle aches decrease. Hoarse, dry or sore throat, cough and possible mild chest discomfort becomes more noticeable. You may feel tired or flat.</p> <p><b>Day 8:</b> Symptoms decrease. Cough and tiredness may last one to two weeks or more.</p>
---	--

## HOW DOES INFLUENZA SPREAD?

The flu virus spreads through the air as droplets when someone coughs, sneezes or talks. You can also catch the flu from touching a contaminated surface with the flu virus on it and then touching your mouth, eyes or nose. It is estimated that the flu contributes to over 3000 deaths in Australia each year.

## INFECTION CONTROL

**PPE:** Gloves, face mask, apron, protective eyewear

**Hygiene:** Wash hands often, especially after coughing, sneezing, blowing your nose and before you prepare food. Cover mouth when coughing and dispose of used tissues.

**Cleaning:** Regularly clean surfaces that the infected person has been in contact with, with a cleaning agent.

## TREATMENT

There is a flu vaccine that protects people against the flu virus and the common complications of infection.

Usually someone with influenza will recover naturally within 2-7 days in other cases your doctor may prescribe antiviral medication to fight the infection.

The recommended treatment for mild to moderate flu is to;

- Take paracetamol to help reduce fever and head and muscle aches
- Get plenty of rest
- Drink plenty of fluids
- Eat healthy food

Influenza is a notifiable disease to the Department of Health in Western Australia

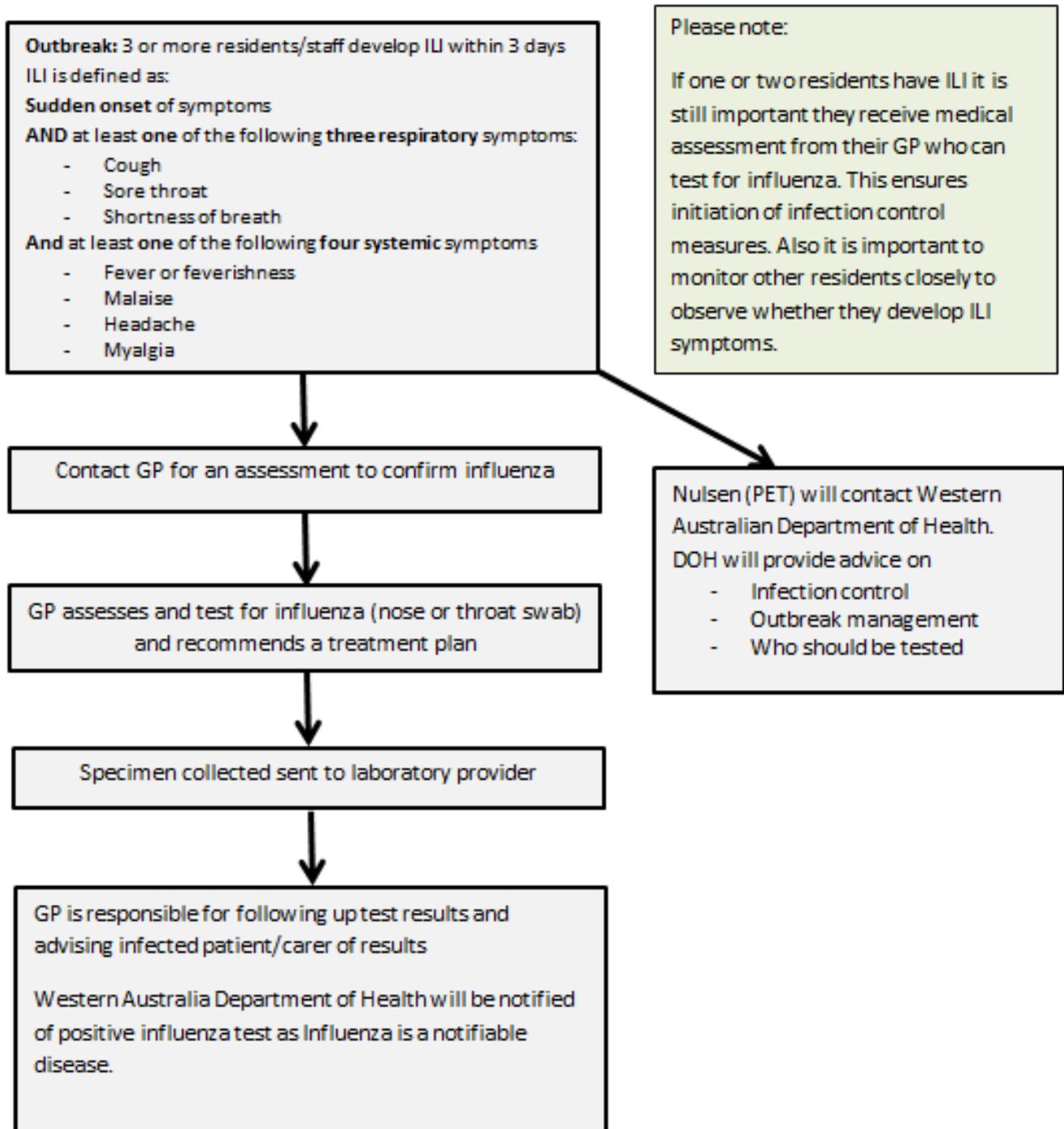
DOC Number:

Author: Safety Department

Date of Issue: 26/02/2020

## Appendix 2: Flow chart for initial outbreak response

What to do when a suspected outbreak of influenza-like illness (ILI) is identified (3 or more residents/staff develop ILI in the same 3 days)



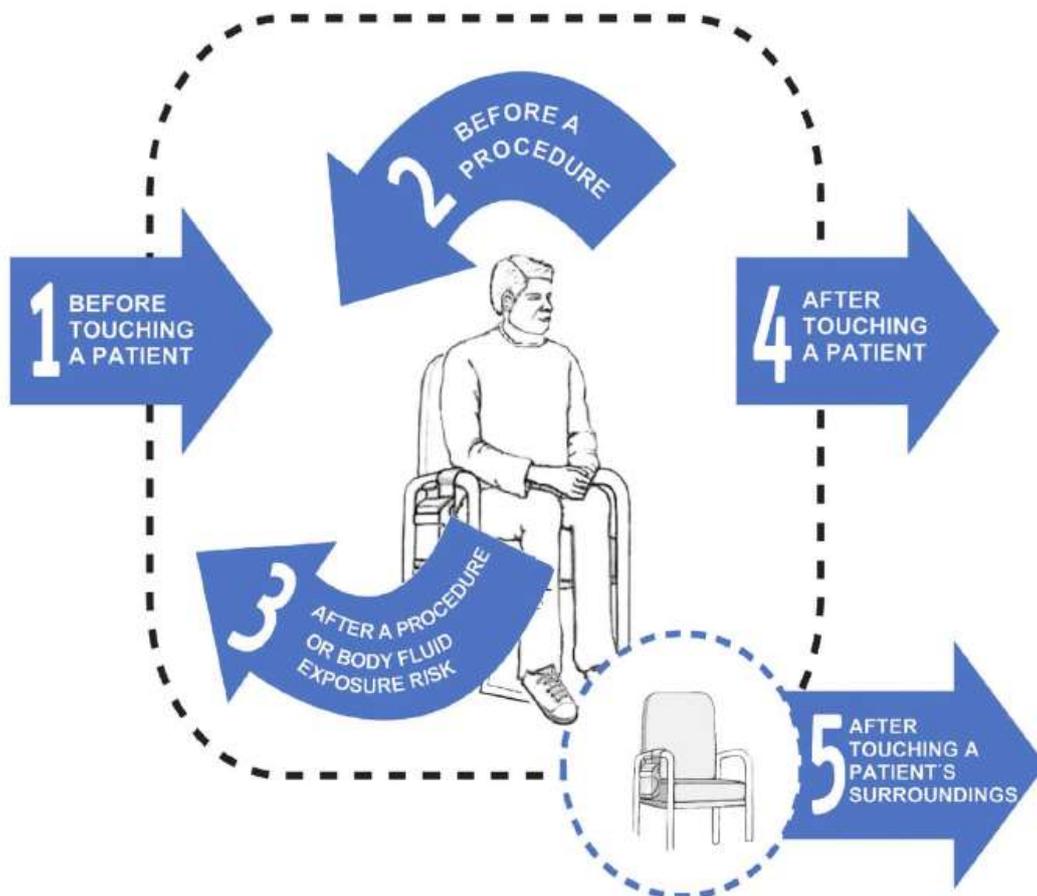
DOC Number:

Author: Safety Department

Date of Issue: 26/02/2020

## Appendix 3: 5 Moments of hand hygiene

1.	<b>Before touching a patient</b>	<b>When:</b> Clean your hands before touching a patient and their immediate surroundings <b>Why:</b> To protect the patient against acquiring harmful germs from the hands of the health care worker
2.	<b>Before a procedure</b>	<b>When:</b> Clean your hands immediately before a procedure <b>Why:</b> To protect the patient from harmful germs (including their own) from entering their body during a procedure
3.	<b>After a procedure or body fluid exposure risk</b>	<b>When:</b> Clean your hands immediately after a procedure or bodily fluids exposure risk <b>Why:</b> To protect the health care worker and the healthcare surroundings from harmful patient germs
4.	<b>After touching a patient</b>	<b>When:</b> Clean your hands after touching a patient and their immediate surroundings <b>Why:</b> To protect the health care worker and the health care surroundings from harmful patient germs
5.	<b>After touching a patients surroundings</b>	<b>When:</b> Clean your hands after touching any objects in a patients surroundings when the patient has not been touched <b>Why:</b> To protect the health care worker and the healthcare surroundings from harmful patient germs



## Appendix 4: PET Evaluation Form

### Pandemic Emergency Team Evaluation

What did we do well?

What can we improve?

Task to be done	Person Responsible	Time Frame for Completion	Completion Date

## Appendix 5: House to House Transfer Form

Facility name:

Type:

Address:

Phone:

**NOTE: Medications must be dispensed in blister pack**

Surname:	First Name:	Date of Birth:	Gender:
Health Fund:	Health Fund No:	Health Fund Cover:	
Medicare No:	Centrelink No:		

Allergies:	
Primary Diagnosis:	
Secondary Diagnosis:	
Relevant Medical Information:	
Other Relevant Medical Information:	

Night Time Hospital Admission:

Does the Primary Contact need to be notified?	
---	--

Staff to complete this section:

Date:	Time:
Emergency Contact Name:	
Items sent with client: Yes/No	Details:
<b>This document will be used for Resident house-to-house transfers during a pandemic and will be distributed by Administration when required</b>	

Mobility:	<input type="checkbox"/> Independent	<input type="checkbox"/> Some Assistance	<input type="checkbox"/> Full Assistance	Aids Required:			
Transfers:	<input type="checkbox"/> Independent	<input type="checkbox"/> Some Assistance	<input type="checkbox"/> Full Assistance/hoist	Aids Required:			
Activities of daily living, e.g. showering, toileting, dressing	<input type="checkbox"/> Independent		<input type="checkbox"/> Some Assistance	<input type="checkbox"/> Full Assistance			
Diet:	<input type="checkbox"/> NBM	<input type="checkbox"/> PEG	<input type="checkbox"/> Oral	<input type="checkbox"/> Normal	<input type="checkbox"/> Soft	<input type="checkbox"/> Minced	<input type="checkbox"/> Smooth
Fluids:	<input type="checkbox"/> Regular		<input type="checkbox"/> Level 150	<input type="checkbox"/> Level 400	<input type="checkbox"/> Level 900		
Bladder:	<input type="checkbox"/> Continent	<input type="checkbox"/> Incontinent	<input type="checkbox"/> Catheter		Last Voided:		
Bowels:	<input type="checkbox"/> Continent		<input type="checkbox"/> Incontinent		Last Opened:		
Receptive Communication:	<input type="checkbox"/> Limited	<input type="checkbox"/> Functional	<input type="checkbox"/> No difficulties		Aids:		

DOC Number:

Author: Safety Department

Date of Issue: 26/02/2020

<b>Expressive Communication:</b>	<input type="checkbox"/> Non-speaking	<input type="checkbox"/> Limited	<input type="checkbox"/> No difficulties	<b>Aids:</b>
<b>Cognition:</b>	<input type="checkbox"/> Unimpaired	<input type="checkbox"/> Impaired	<b>Behaviour management:</b>	
<b>Other comments (e.g. vision, hearing, dentures, caps/crowns, pressure areas, dressings, special treatment or concerns)</b>				





**Communicable disease control Directorate**

Phone: 9222 0255

After hours emergency phone: 9328 0553

Fax: 9222 0254

Postal address: PO Box 8172, Perth Business Centre WA, 6849

Email: [cdc@health.wa.gov.au](mailto:cdc@health.wa.gov.au)

- All cases of influenza residing in regional areas should be reported to the appropriate regional Public Health Unit;  
[https://healthywa.wa.gov.au/Articles/A\\_E/Contact-details-for-population-public-health-units](https://healthywa.wa.gov.au/Articles/A_E/Contact-details-for-population-public-health-units)

## **Appendix 8: Memo**

DOC Number:

Author: Safety Department

Date of Issue: 26/02/2020

**CONTENT SHOULD BE SPECIFICALLY DESIGNED FOR THE TYPE OF INFLUENZA INFLUENCING THE PANDEMIC.**

## **Appendix 9: Alert Notices**

DOC Number:  
Author: Safety Department  
Date of Issue: 26/02/2020



**ATTENTION**

**ALL VISITORS**

Please check with the  
Residential Services  
Manager before entering the  
home.

Thank you

Nulsen Management



## **ATTENTION ALL VISITORS**

There have been a number of cases of respiratory illness/influenza within the Association recently. We are trying to prevent this illness from spreading.

**Visitors are advised that there is a risk of acquiring this respiratory illness/influenza by visiting this Accommodation Service at this time.**

If you have recently been ill, have symptoms of any respiratory illness now (fever, sore throat, cough, muscle and joint pain, tiredness/exhaustion) or have been in contact with someone who is ill we strongly advise you not to enter this Accommodation Service.

**If you choose to visit at this time, please visit only the resident you have come to see, wash your hands with soap and water before and after the visit and then leave as soon as possible.**

Thank you for your co-operation

Nulsen Management

## Appendix 9: Posters

### The flu and you



**the  
flu  
and  
you**

**Help stop the spread ...**

***Cover your  
mouth and nose  
when you cough  
or sneeze***



Australian Government  
Department of Health

For further information read *The flu and you* brochure,  
visit [www.health.gov.au](http://www.health.gov.au) or free call 1800 004 599

DOC Number:

Author: Safety Department

Date of Issue: 26/02/2020



**the  
flu  
and  
you**

**Help stop the spread ...**

***Wash  
your hands  
properly  
and regularly***



Australian Government  
Department of Health

For further information read *The flu and you* brochure,  
visit [www.health.gov.au](http://www.health.gov.au) or free call 1800 004 599



the  
**flu**  
and  
you

**Help stop the spread ...**

***Dispose of  
used tissues  
in the bin***



Australian Government  
Department of Health

For further information read *The flu and you* brochure,  
visit [www.health.gov.au](http://www.health.gov.au) or free call 1800 004 699

# Stop *the spread of* flu germs

Cover your mouth and nose with a tissue when you cough or sneeze



Put your used tissue in a lined rubbish bin or in a plastic bag



Wash and dry your hands often, especially after coughing or sneezing – use soap or hand gel



Stay away from others if you're sick



[www.health.govt.nz/influenza](http://www.health.govt.nz/influenza)

Protect your family/whānau from inFLUenza

The Ministry of Health acknowledges the support of Secondary Public Health, Capital & Community Health, Sport and Recreation, and the Health Research and Services Division.

100 health promotion agency

New Zealand Government

MINISTRY OF HEALTH

www.moh.govt.nz

© Crown Copyright 2019. All Rights Reserved.

# How to wash and dry hands with soap and water



During the lather, pay particular attention to the backs of hands and fingers, fingernails, fingertips and the webbing between fingers.

Hand hygiene is crucial in reducing transmission of infections. It includes both hand washing with plain or antimicrobial soap and water, and use of alcohol-based products (gels, rinses, foams) containing an effluent that do not require the use of water.

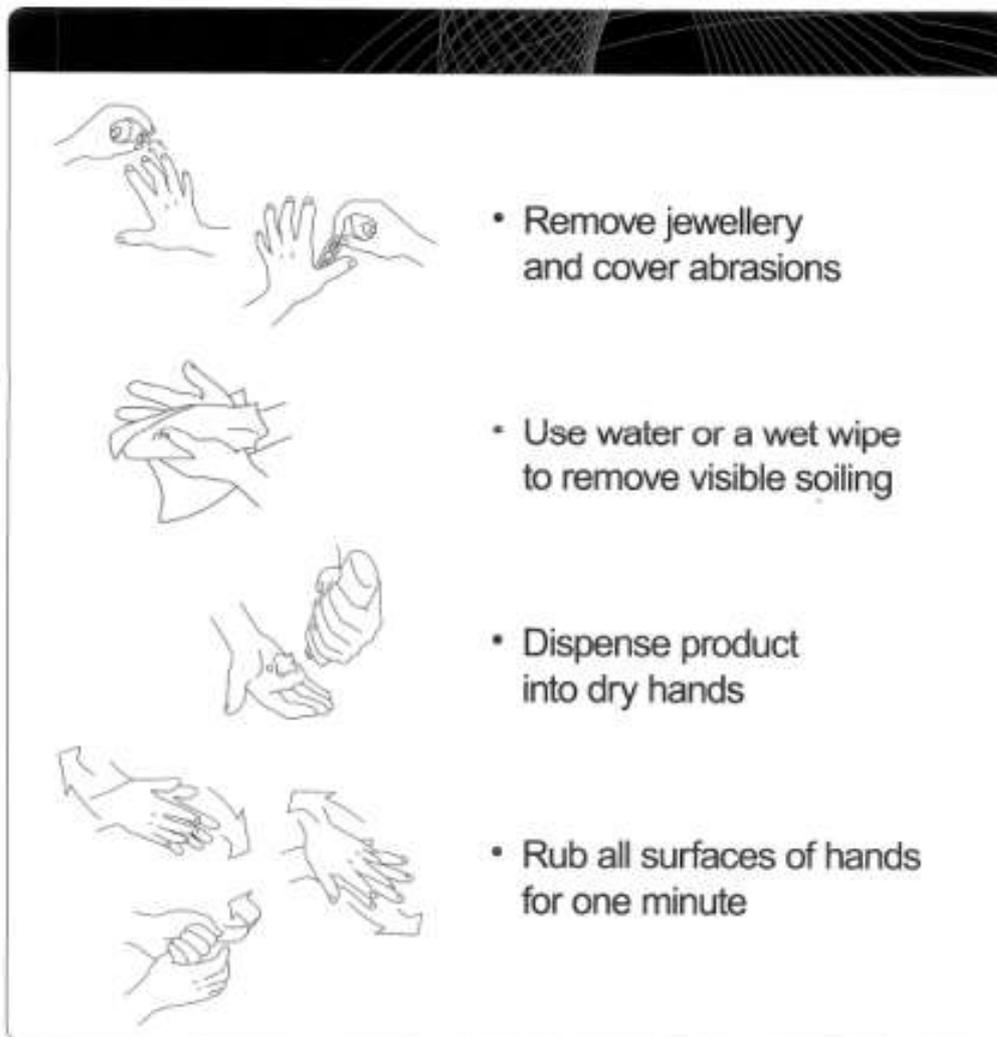
If hands are visibly soiled or contaminated with respiratory secretions, wash hands with soap (either non-antimicrobial or antimicrobial) and water.

In the absence of visible soiling of hands, approved alcohol-based products for hand disinfection may be used. Ensure you have facilities for hand washing (i.e. sinks with warm and cold running water, plain or antimicrobial soap, and disposable paper towels) and hand disinfection (i.e. alcohol-based products) readily accessible.



An Australian Government Initiative

# How to clean hands using an alcohol-based liquid or hand scrub



When rubbing, pay particular attention to the backs of hands and fingers, fingernails, fingertips and the webbing between fingers.



An Australian Government Initiative

# How to fit and remove a surgical mask

## Fitting a surgical mask



- Position mask over mouth and nose



- Fasten ties or tapes above and below ears at back of head

## Removing and disposing of mask



- With clean hands, untie or break ties at back of head



- Remove mask by only handling at the ties, then discard in appropriate waste



- Wash hands

When worn by a sick person, surgical masks limit the spread of droplets produced through talking, coughing or sneezing



Australian Government  
Department of Health and Ageing

# Cough etiquette and respiratory hygiene

## Cover your cough



- When coughing or sneezing, use a tissue to cover your nose and mouth
- Dispose of the tissue afterwards
- Wear a surgical mask, if possible

## Wash your hands



- After coughing, sneezing or blowing your nose, wash your hands with soap and water
- Use alcohol-based liquids, gels or wipes if you do not have access to soap and water

Remember hand washing is the single most effective way to reduce the spread of germs that cause respiratory disease.

Anyone with signs and symptoms of a respiratory infection, regardless of the cause, should be instructed to cover their nose/mouth when coughing or sneezing; use tissues to contain respiratory secretions; dispose of tissues in the nearest waste receptacle after use; and wash their hands afterwards.



An Australian Government Initiative

# How to fit and remove personal protective equipment in the correct order



Fit in this order

- Wash hands or use alcohol-based rub
- Respirator
- Goggles
- Gown
- Gloves

Remove in this order

- Gloves
- Wash hands or use alcohol-based rub
- Goggles
- Gown
- Respirator
- Wash hands or use alcohol-based rub

During removal of personal protective equipment, hands should be washed immediately after removing any item which is visibly soiled.

# How to fit and remove a P2 respirator

## Fitting a P2 respirator

P2 respirators are available in several different designs, and only one is shown here.



- Position respirator over mouth and nose



- Position tapes above and below ears at back of head



- Fit snugly at bridge of nose and under chin by using the adjusters

Check the respirator each time it is put on or adjusted. Occasionally test the fit of respirator using a test kit.

## Removing and disposing of respirator



- With clean hands, grasp tapes at back of head and remove by only handling the tapes, then discard in appropriate waste



- Wash hands

When fitted correctly, a P2 respirator offers protection from diseases spread by droplet and airborne transmission.

P2 respirators are available in several different designs, and only one is shown here.



Australian Government  
Department of Health and Ageing

# How to fit and remove protective eyewear

## Fitting goggles or face shield



- Position mask or face shield over face and eyes
- Adjust fit if necessary

## Removing and disposing of goggles



- With clean hands, remove eyewear by handling sides or back only
- Discard or reprocess and store appropriately
- Wash hands

Some goggles and protective eyewear can be cleaned and disinfected for re-use. Refer to manufacturer's instructions.



Australian Government  
Department of Health and Ageing

# How to fit and remove a protective gown

## Fitting gown



- Put on the gown so that your front and arms are fully covered and gown opening is at the back
- Fasten ties at the neck and at the back
- Tuck gown sleeves under glove cuffs

## Removing and disposing of gown



- With clean hands, untie or break ties at the back and neck
- Roll gown into bundle and discard in appropriate waste
- Wash hands
- Touching only the inside of the gown, pull from neck and shoulders, then arms, turning inside out as gown is removed



# How to fit and remove protective gloves

## Fitting gloves

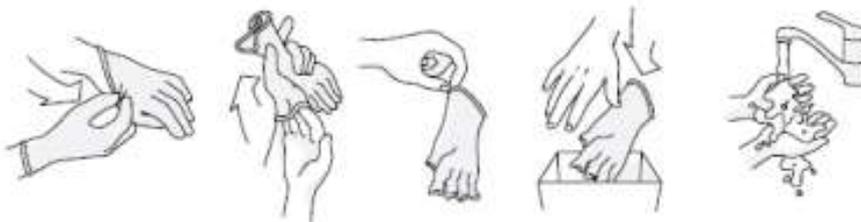


- Remove jewellery, cover abrasions, then wash and dry hands



- Fit gloves, adjusting at the cuffs

## Removing and disposing of gloves



- Remove by gripping at cuffs
- Immediately dispose of gloves in appropriate waste
- Wash hands

Replace gloves after contact with a person or infected area, or if the gloves become contaminated or damaged.

Wearing of gloves in some situations may be a practical measure to reduce the spread of infection, especially in health care environments or as a part of a cleaning regime.



Australian Government  
Department of Health and Ageing

# Travel Health

Have you recently arrived or returned from overseas?

Do you have a fever, bad cough, trouble breathing, or otherwise feel unwell?  
Please see a doctor about your symptoms.



- When you see a doctor, tell them about your symptoms and that you have been overseas, without waiting to be asked



- Cover your nose and mouth with a tissue when coughing or sneezing



- Throw the tissue away in a bin afterwards and then wash your hands with soap and water



Australian Government  
Department of Health and Ageing