

Pandemic Response Planning Checklist for Long-term Care Facilities

This checklist has been developed to help you plan your response to an influenza pandemic, as it might affect your facility. The checklist is divided into three sections:

- Critical to your response is your ability to continue to do business. The first section of the checklist deals with **Business Continuity Planning**. A business continuity plan, developed to respond to a pandemic, will help you prepare for other disease outbreaks or emergencies.
- The second section of the checklist addresses **influenza protocols**, including infection control. During a pandemic you will need to be prepared to provide enhanced infection control and cleaning services.
- The third and last section of the checklist deals with issues that are specific to an **influenza pandemic** or other widespread, serious disease outbreak.

Refer to the Vancouver Coastal Health Pandemic Response Plan. Important information for planners in long-term care facilities can be found at: www.vch.ca/pandemic

Specific chapters of the plan that you may find useful are:

Chapter 4: Infection Control: http://www.vch.ca/pandemic/docs/ch04_infection_control.pdf

Chapter 7: Medical Management and Health Care Settings:

http://www.vch.ca/pandemic/docs/ch07_medical_management.pdf

Chapter 12: Handling the Deceased: http://www.vch.ca/pandemic/docs/ch12_handling_deceased.pdf

The VCH self-care guide for pandemic influenza, "Look after yourself: how to care for yourself and those you care about" is available at: http://www.vch.ca/pandemic/docs/Look_after_yourself.pdf

1. Business Continuity Planning

An influenza pandemic will cause disruption throughout society for several months. It is expected that large numbers of people will become ill and may be away from work. A business continuity plan will help you maintain your facility's essential services in the face of staff absenteeism.

- Have you identified your essential services? Include payroll, systems maintenance, communications systems, support services, client services.
- What services can you discontinue/postpone? Identify services that may be postponed or discontinued for the duration of the pandemic wave in order to free up resources.
- Consider how you will maintain your essential services when you don't have enough staff? 15 – 35% of your workforce may become ill and even more of your workforce may be absent at any one time. Staff may stay home from work because they are ill or to take care of ill family members.
- Have you identified recently retired health care workers or casual staff who may be available to assist with resident care during a pandemic?
- Identify supplies and equipment that are essential to the provision of your services. How will you deal with disruptions to the supply chain? Are there supplies that you can stockpile for use in a pandemic, such as gloves, masks, cleaning supplies, etc.?

- Have you developed policies to address liberal, non-punitive sick leave? Be aware of current recommendations for when staff may return to work after illness during a pandemic. Refer to national and provincial guidelines.
- Have you established procedures to cover employees or volunteers who become ill at work? See: http://www.vch.ca/pandemic/docs/ch04_infection_control.pdf
- Have you developed policies to cover the kinds of work volunteers may undertake during a pandemic?
- Have you designated someone to co-ordinate pandemic planning and to produce a written Business Continuity/Pandemic Plan?
- Have you designated someone to co-ordinate staff training and education about pandemic influenza?

2. Influenza Protocols

(Refer to the **VCH Flu Binder 2006 - 07: Influenza Immunization Program and Influenza Outbreak Management Protocol** for guidance.) www.vch.ca/flu

Protocols in place for responding to seasonal outbreaks of influenza will provide the basis for the response to a pandemic influenza.

The goals of an institutional influenza plan are:

- a) To prevent influenza illness and complications in residents and staff
 - b) Timely diagnosis and appropriate management of influenza infection in patients
 - c) Timely diagnosis and management of an influenza outbreak within the facility
 - d) To provide care for ill residents within the facility, without transfer to another facility.
- Have you developed protocols for annual influenza vaccination of residents (and their family members or key contacts), staff, physicians and volunteers?
 - Have you developed protocols to ensure that residents have received pneumococcal vaccine?
 - Have you developed protocols for identifying, preventing and controlling influenza outbreaks, including designation of an individual responsible for surveillance for influenza-like illness?

3. Planning for Pandemic Response

During an influenza pandemic, demand for health services will exceed the capacity of the system to respond as usual and it will be necessary to manage patients within the facility rather than transfer them to an acute care facility. A physical area for acute care may need to be designated within the long-term care facility, where closer monitoring and more intensive nursing care can be provided and where parenteral therapy and oxygen therapy may be given.

- What level of care will you be able to provide to residents who are acutely ill? Consider your capacity to provide:
 - Diagnostic services
 - Oxygenation
 - Chest X-ray
 - Medications, such as antipyretics, analgesics, antibiotics, IV therapy/hypodermoclysis
- What plans have you made to provide enhanced care to residents who may not be able to be accommodated in an acute care facility?
- Where will you provide more intensive care? Designate an area for the care of acutely ill residents.

- Have you developed plans for the discharge of stable patients from the “acute care area” to free up resources for those needing more intensive care?
- Have you planned for the need for increased infection control/enhanced cleaning during an influenza pandemic?
- Have you developed plans for limiting visitor or family access during a pandemic?
- Have you developed and discussed with family members plans to discharge residents to the care of family members during a pandemic?
- During a pandemic, there may be a significant increase in the number of deaths, sufficient to overwhelm the capacity of local morgues and funeral homes. Have you considered end-of-life issues such as:
 - Ethical issues
 - Pronouncing death
 - Provision of post-mortem care
 - Disposition of bodies
 - Grieving families
 - Psychosocial supports for staff
- Have you shared your pandemic planning preparations with sister facilities and associations?

