

## Suspect Case Checklist (Influenza, COVID-19, and/or other Respiratory Illness)

The following checklist outlines measures to be implemented by the Care Community when there are symptomatic client(s) and/or staff

**NOTE:** This checklist is to be used for sites that are **NOT** currently on Enhanced Monitoring or Outbreak

For the purposes of this document, the term **client** is used to represent residents, tenants, seniors, elders, or other terms used to describe a person that resides in the Care Community

Suspect Case Initial Steps	
Symptomatic client(s) and/or staff	
	<p><b>Testing</b></p> <ul style="list-style-type: none"> <li>• LTC nursing staff obtain a NP swab to test <b>symptomatic</b> client                             <ul style="list-style-type: none"> <li>○ PCR is the preferred test especially during influenza season (<a href="#">Tool 11</a>)</li> <li>○ If RAT is used and is negative and symptoms persist, re-test 48 hours later using PCR test</li> <li>○ PCR test will pick up other respiratory viruses (influenza and RSV), RAT will only detect COVID-19</li> </ul> </li> </ul> <p><b>NOTE:</b> Please ensure all requested testing is indicated on the requisition forms. For example: If a nasopharyngeal swab is collected for a client, please select COVID-19, Influenza and RSV on the requisition form and/or any other testing recommended by the client’s most responsible provider</p> <ul style="list-style-type: none"> <li>• When a RAT is collected and positive (<b>No confirmatory PCR testing is required</b>)                             <ul style="list-style-type: none"> <li>○ If unable to obtain a NP swab, a saline gargle sample may be appropriate</li> <li>○ For Instructions on how to collect a nasopharyngeal swab or saline gargle sample see <a href="#">Specimen Collection Process</a></li> <li>○ The swab/gargle should be obtained as soon as possible and sent to BCCDC</li> </ul> </li> <li>• Label requisition “LTC” to ensure prioritized testing</li> <li>• <b>No testing of asymptomatic clients or staff unless directed by Public Health</b></li> <li>• No reporting to Public Health is required until a positive, known pathogen, has been identified</li> </ul> <p><b>Symptom screening:</b></p> <ul style="list-style-type: none"> <li>• Care Community to have a low threshold for testing any symptomatic clients or staff</li> <li>• All clients on the affected unit/floor with no symptoms should continue with daily screening</li> <li>• All staff encouraged to self-screen for <a href="#">RI symptoms</a></li> </ul>
Symptomatic Staff	
	<ul style="list-style-type: none"> <li>• Staff who are symptomatic <u>prior</u> to coming to work are to stay home and get tested</li> <li>• Staff that present to work with symptoms, or begin to experience symptoms during their shift are to inform supervisor and get tested if able to do so</li> <li>• See <a href="#">Staff Checklist</a> for return to work guidance</li> </ul>
Symptomatic Clients	
	<ul style="list-style-type: none"> <li>• <b>Test and isolate</b> the client within their room, to minimize exposure risk to other clients and staff</li> <li>• If client is taken out of their room, provide a surgical/medical mask to the client if tolerated and assist in cleaning their hands as required</li> <li>• Symptomatic clients awaiting test results should be provided meals in their room during isolation</li> </ul>

Care Community Follow Up	
	<p><b>Initiate <a href="#">Droplet Precautions</a></b> for the symptomatic clients</p> <ul style="list-style-type: none"> <li>• Only essential Aerosol Generating Procedures (AGP) should be performed</li> <li>• All AGP require donning a N95 respirator. This is in addition to eye protection, gown and gloves. Follow <a href="#">Aerosol Generating Procedure- Standard Operating Procedure</a> regarding appropriate PPE</li> <li>• <b>N95 respirator is not required for Droplet Precautions only</b></li> </ul>
	Post <b>droplet signage</b> at the door of the affected client's room (see <a href="#">Droplet Precautions Poster</a> )
	<p><b>Ambassadors</b></p> <ul style="list-style-type: none"> <li>• Present at Care Community entrances to perform active screening on visitors for signs and symptoms of illness</li> <li>• Ambassadors will provide medical masks to everyone entering a resident care area and will direct everyone to perform hand hygiene upon entry</li> </ul>
	<p><b>Visitation</b> is allowed when there are suspect cases on a unit</p> <ul style="list-style-type: none"> <li>• Visitors will be screened for signs and symptoms of illness by an ambassador at Care Community entrance. Visitors who are unwell should be encouraged not to visit unless deemed necessary</li> <li>• Visitors must follow appropriate infection Control measures (e.g., Droplet Precautions)</li> <li>• Visitors should follow current provincial masking guidance/direction. Masking is required when it is directed by FH Public Health</li> </ul>
	<p><b>Masking &amp; PPE</b></p> <ul style="list-style-type: none"> <li>• HCWs, visitors, contractors and volunteers should practice continuous medical masking in resident care areas. A resident care area is any area in a LTC/AL that is accessible to residents.</li> <li>• Masking is required when it is directed by FH Public Health</li> </ul>
	Place <b>personal protective equipment</b> and <b>hand hygiene</b> station outside the room for staff use prior to entering the room – see personal protective equipment for recommended precautions ( <a href="#">Tool 18</a> )
	<p><b>Hand hygiene:</b> Staff should follow meticulous hand hygiene practices following the 4 moments of hand hygiene and when doffing PPE</p> <ul style="list-style-type: none"> <li>• Instruct, educate, and enable all clients to clean their hands before eating, after toileting and before coming out of their room (<a href="#">Tool 15</a>)</li> </ul>
	<p><b>Cohort staff:</b> Cohort staff assignment as much as possible</p> <ul style="list-style-type: none"> <li>• Staff working with symptomatic clients should avoid working with clients who are asymptomatic</li> <li>• As much as possible, staff providing care/treatment to multiple clients within the Care Community should begin with unaffected units/clients and progress to affected units/clients</li> <li>• The same principle will also apply to housekeeping staff</li> </ul>
	<p>Dedicate <b>equipment</b> for the symptomatic client (e.g., thermometer, BP cuff, stethoscope, and commode) as much as possible</p> <ul style="list-style-type: none"> <li>• Equipment that cannot be dedicated must be cleaned and disinfected (using Accel intervention wipes, Cavi wipes or Sani Cloth) before subsequent reuse.</li> <li>• Provide disinfectant wipes</li> </ul>

	<ul style="list-style-type: none"> <li>Refer to Health Canada Approved Disinfectants <a href="#">(Tool 20)</a></li> </ul>
	<p><b>Cleaning:</b> Inform housekeeping of the need for enhanced cleaning (<a href="#">Tool 19</a>)</p> <ul style="list-style-type: none"> <li>Twice daily cleaning of the affected unit/floor including high-touch surfaces (doorknobs, faucets in bathrooms, communal areas, dining rooms, gyms, recreational therapy rooms, shared equipment).</li> <li>Use 0.5% accelerated hydrogen peroxide wipes or bleach wipes</li> </ul>
	<b>Notify</b> client's primary care provider to determine if further assessment and treatment is indicated
	<b>Notify</b> client's family/substitute decision-maker regarding the situation, if needed
	<b>Notify</b> leaders for the Care Community (Director of Care/AL Site Manager and/or Facility Care Community Director)
<b>Test Result Follow Up</b>	
<b>Negative for COVID-19, Influenza, RSV and/or Other RI pathogens</b>	
	<ul style="list-style-type: none"> <li><b>Clients</b> – may be removed from isolation and Droplet Precautions once asymptomatic</li> <li>All additional measures implemented can be discontinued</li> </ul>
<b>Positive for Influenza</b>	
	<p>Refer to the following checklist:</p> <ul style="list-style-type: none"> <li><a href="#">Influenza One Case Check List (Resident) or</a></li> <li><a href="#">Influenza Outbreak Control Measures Checklist (Influenza A and B)</a></li> <li>Complete and/or update Tool 27 (client) with results and send to <a href="#">Public Health</a></li> </ul>
<b>Positive for Influenza and RSV</b>	
	<p>Refer to the following checklist:</p> <ul style="list-style-type: none"> <li><a href="#">Influenza One Case Check List (Resident) or</a></li> <li><a href="#">Influenza Outbreak Control Measures Checklist (Influenza A and B)</a></li> <li>Complete and/or update Tool 27 (client) with results and send to <a href="#">Public Health</a></li> </ul>
<b>Positive for COVID-19</b>	
	<p>PCR Positive for COVID-19 or Rapid Antigen Test (RAT) positive for COVID-19</p> <ul style="list-style-type: none"> <li><b>Client case(s)</b>, refer to <a href="#">Enhanced Monitoring and/or Outbreak Declared Checklist</a> – One (or more) Positive COVID-19 Resident Case</li> <li>Complete and/or update Tool 27 (client) with results and send to <a href="#">Public Health</a></li> </ul>
<b>Positive for COVID-19 and Influenza or RSV</b>	
	<p>PCR Positive for COVID-19 <b>and</b> influenza or RSV</p> <ul style="list-style-type: none"> <li><b>Client case(s)</b>, refer to: <ul style="list-style-type: none"> <li>a. COVID-19: <a href="#">Enhanced Monitoring and/or Outbreak Declared Checklist</a> – One (or more) Positive COVID-19 Resident Case</li> <li>b. Influenza: <a href="#">Influenza One Case Check List (Resident) or Influenza Outbreak Control Measures Checklist (Influenza A and B)</a></li> </ul> </li> <li>Complete and/or update Tool 27 (client) with results and send to <a href="#">Public Health</a></li> </ul>
<b>Positive for RSV and/or Other Respiratory Illness</b>	
	<p>Refer to the following checklist:</p> <ul style="list-style-type: none"> <li><a href="#">Other Respiratory Illness (Non-Influenza/Non Covid-19)</a></li> </ul>