

Tool 30: Preventive Measures for Asymptomatic Staff during an Influenza Outbreak

Expectations regarding preventive measures for unaffected staff members (including contracted staff, volunteers, and students) during an influenza outbreak are contained in the Provincial Influenza Control Policy, the BC Care Community Influenza Immunization Policy, and its Question & Answer document

All staff, vaccinated or unvaccinated, should consider the following recommendations:

- Adherence to recommended infection prevention and control practices during outbreak
- Should practice continuous medical masking in resident care areas. A resident care area is any area in an LTC/AL that is accessible to residents.
- Extra vigilance in self-assessment (watch for signs and symptoms) and reporting at first signs of new cough or other signs and symptoms compatible with Influenza-Like Illness (ILI)
- In some situations, arrangements for early anti-influenza treatment at first sign of ILI may be recommended by their most responsible health care practitioner.
- Unvaccinated staff: recommended to take anti-influenza medication in the event of an outbreak
 - Staff members who will be using anti-influenza medication will need to obtain a prescription from their MRP
- Offer influenza vaccine to all non-immunized staff without medical contraindication to the vaccine (As per the BCCDC vaccine product information)
- Staff members who are pregnant or have other health conditions that put them at higher risk of complications from Influenza infection may want to consult with their most responsible provider (MRP)

Direct links to the specific documents are:

- Provincial Influenza Control Policy: [Additional Influenza Information - Province of British Columbia \(gov.bc.ca\)](https://www2.gov.bc.ca/gov/content/health/diseases/communicable/influenza/influenza_control_policy.htm)

Unusual Situations: Management as Recommended by Public Health for Asymptomatic Staff:

In some situations (e.g., influenza vaccine not yet available, low rates of immunization coverage, inability to provide acceptable resident care due to staff shortage related to illness or potential exclusion), special considerations may be required and will be worked out in consultation between Care Community Administration, the Care Community Director, and Public Health