



CAHF'S READY, SET, GO!

H1N1

**Refer to websites at the end of this fact sheet (as identified by numbers) when utilizing this document*

GET READY!

- Update your facility's infection control plans, policies and procedures with the most current long-term care (LTC) guidance (see California Department of Public Health's (CDPH) AFL (5/19/09) for Infection Control of H1N1 in a LTC Setting¹, the Centers for Disease Control and Prevention's (CDC) Interim Guidance for Infection Control of H1N1 in Healthcare Setting², and for nursing homes refer to CMS' F441³ and CMS S&C Letter 09-36⁴).
- Update your pandemic disaster plan to ensure it addresses pandemic influenza (see CAHF's Pandemic Influenza Workbook for Long Term Care⁵).
- In-service all staff on basic infection control (i.e. hand washing and respiratory etiquette), transmission-based precautions (i.e. airborne and droplet, refer to CDC's Guideline for Isolation Precaution in Hospitals⁶), the symptoms of Novel H1N1 (i.e. fever, cough, sore throat, runny or stuffy nose, body aches, headache, chills and fatigue) and the need to stay home when they are sick for 7-days after onset of symptoms or 24-hours after all symptoms subside.
- Review supplies of gowns, hand sanitizers, surgical masks, gloves, eye goggles or face shields, N95 respirators, analgesics and antiviral medications. Consider stockpiling several weeks' worth of infection control supplies and medicines.
- Be prepared to medically screen, train, and fit-test direct care staff to use N95 respirators (see CAHF's Model Respiratory Protection Program⁷).
- Be prepared for cancellation of day programs, schools, and other community restrictions that may impact your residents/clients.

GET SET!

- Stay up-to-date on the progression of pandemic H1N1 in your community. Visit the CDC⁸, CDPH⁹ and your local health department's websites regularly.
- Conduct effective surveillance to ensure that you identify febrile respiratory illnesses among your staff and residents as soon as possible. H1N1 is widespread around the state, so it is important to do careful surveillance and screening of staff, residents, and visitors (see L&C's recommendations for the prevention and control of influenza in long-term care facilities¹⁰).
- Plan for an efficient influenza vaccine delivery; both seasonal (available late summer/early fall) and H1N1 vaccine delivery (available in fall). Healthcare workers are priority group for H1N1 vaccination, and your workplace may be a distribution point for these vaccines.
- Know who the "high risk" groups are for complications from H1N1. These include pregnant women, those with asthma, COPD, diabetes, chronic cardiovascular disease and immune-compromised persons.

GO!

- H1N1 in your community may require quarantines and school closures. Follow Public Health advisories closely and plan for increased staff absenteeism.
- An "Outbreak" is one case of confirmed influenza in a long-term care facility. Make sure to report suspected H1N1 cases to your local public health department and follow their advice for testing and antiviral treatment. Report the first confirmed H1N1 case in your facility to Licensing and Certification Program at the California Department of Public Health.
- Emphasize basic infection control, implement transmission-based precautions, educate staff, residents, and visitors on the symptoms of H1N1 and stress the company policy of requiring employees to stay home when they are ill.

(See page 2 for more guidelines in this section)



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GO! (CONTINUED)

- In the event of an outbreak of acute febrile respiratory illness follow CDPH’s Recommendations for the Prevention and Control of Influenza in California Long-Term Care Facilities, (per recommendations released in 2008-2009¹⁰) with the addition that:
 1. Current recommendations for the use of antiviral medication should be followed as long as antivirals are available;
 2. N95 respirators should be used for respiratory protection in place of surgical masks until H1N1 Flu has been ruled out or an alternative diagnosis has been established; and
 3. Coordinate and arrange with your local health department for testing of ill residents and staff as quickly as possible.

HELPFUL WEBSITES & RESOURCES:	
1 CDPH Infection Control for Novel H1N1 A in a LTC Setting	www.cahfdownload.com/cahf/dpp/CDPH_AFL_Update_Influenza_LTC_HCSettings.pdf
2 CDC Interim Guidance for Infection Control for Care of Patients with Confirmed or Suspected Novel Influenza A (H1N1) Virus Infection in a Healthcare Setting	www.cdc.gov/h1n1flu/guidelines_infection_control.htm
3 CMS Interpretative Guidelines for F441 Infection Control	www.cahfdownload.com/cahf/dpp/R51SOMA.pdf
4 CMS S&C Letter 09_36 H1N1 Flu – State Survey Agency Guidance	www.cdc.gov/flu/professionals/infectioncontrol/healthcaresettings.htm
5 CAHF’s Pandemic Influenza Workbook for Long-Term Care	www.cahfdownload.com/cahf/dpp/piwb082207FINAL.pdf
6 CDC’s Guideline for Isolation Precaution in Hospitals	www.cdc.gov/flu/
7 CAHF’s Model Respiratory Protection Program	www.cahfdownload.com/cahf/dpp/CAHF_MRPP.pdf
8 CDC H1N1 What’s New	www.cdc.gov/h1n1flu/whatsnew.htm
9 CDPH – H1N1 Information for Healthcare Professionals	www.cdph.ca.gov/HealthInfo/discond/Pages/H1N1HealthPros.aspx
10 CDPH’s Recommendations for the Prevention and Control of Influenza in California Long-Term Care Facilities, 2008-2009	www.cahfdownload.com/cahf/dpp/LNC-AFL-08-33Attachment.pdf
CDC H1N1 Flu, Preparing for Vaccination with Novel H1N1 Vaccine	www.cdc.gov/h1n1flu/vaccination/public/vaccination_qa_pub.htm
Cal/OSHA Guidance for Employers and Employees on H1N1	www.cahfdownload.com/cahf/dpp/Cal-oshaguidanceswineflu.pdf

CAHF appreciates your thoughts and would like to ask for any disaster related suggestions or “Positive Practices” that you may have. Our goal is to use “Lessons Learned” and “Successful Applications” to help educate other facilities within our Long-Term Care Community.

Let’s work as a T.E.A.M.: Together Everyone Achieves More!

What disaster or event would you like CAHF’s Disaster Preparedness Program to use for a “Ready, Set, Go” Disaster Planning Topic? Contact us at 916.441.6400.