

PHE SW care home planning checklist for seasonal influenza (flu)

Date completed	Completed by	
Actions to prepare for cases of seasonal flu	✓	✓
Flu vaccination		
1. Ensure that all your residents are vaccinated against flu. This should be arranged through their GP each autumn.		
2. Ensure that all staff involved in patient care (including all women at any stage of pregnancy) have received their seasonal flu vaccine in the autumn before any outbreaks of flu. <ul style="list-style-type: none"> • As an employer you should make arrangements for your staff to be vaccinated. • In addition to the employer's scheme, staff are also able to obtain flu vaccination as a "carer" through their GP or local pharmacy. If using this system, they should take with them some form of identification that shows they work as a carer e.g. ID badge, recent pay slip, letter from employer. • Please ensure your staff are aware of their eligibility for influenza vaccination. We advise you to identify local pharmacies participating in the scheme and inform staff so that they are aware of the options available to obtain their vaccine. 		
3. Please keep a record of your staff and resident vaccination		
4. Further information is in the Flu vaccination leaflet "Who should have it and why" available at https://www.gov.uk/government/publications/flu-vaccination-who-should-have-it-this-winter-and-why		
Renal impairment		
5. Do any of your residents or staff have chronic renal impairment and if so, please keep a record of this together with their Creatinine Clearance or Urea & Electrolyte (U&E) blood results (if available). [This is so that if an outbreak occurs, the correct antiviral and dose can be prescribed without delay]		
Respiratory hygiene & infection control precautions		
6. Ensure infection control policies are up to date, read and followed by all staff. <p>Please see Winter Readiness Pack https://www.england.nhs.uk/south/info-professional/public-health/infection-winter/</p> <p>This includes posters such as Catch it, Bin it, Kill it; hand hygiene, general guidance on Infection Prevention Control, guidance on recognition and management of individual infectious diseases and outbreaks</p>		

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7. Ensure that liquid soap and disposable paper towels are available, and/or alcohol-based hand rub in every room and communal areas, and stock levels are adequately maintained.		
8. Ensure that Personal Protective Equipment (PPE) is available i.e., disposable gloves, aprons, surgical masks.		
9. Ensure linen management systems are in place as well as clinical waste disposal systems including foot operated bins.		
10. Ensure appropriate isolation is available for residents/staff with symptoms for a minimum of 5 days after the onset of symptoms or until fully recovered. Single cases should be isolated in their bedroom or, if there are two or more cases, consider cohorting them in a separate floor or wing of the home.		
11. If possible and safe to do so, use alcohol gel in places where hand washing facilities are not available (e.g. entrances/exits, residents' lounge, dining room), and maintain supplies in view of increased use.		
12. Maintain adequate levels of cleaning materials in anticipation of increased cleaning (e.g. disposable cloths, detergent).		
Reporting to the local health protection team		
15. Early recognition of an influenza/respiratory illness/chest infections outbreak amongst staff and/or residents is vital (i.e. two or more cases linked by time and place).		
16. Outbreaks of influenza/respiratory illness/chest infections should be reported promptly to the local health protection team (HPT).		
17. Refer to influenza (flu) Integrated Care Plan (ICP) for further action. This is provided by the local HPT and details actions to implement		