

# General Directorate of Infection Prevention and Control (GDIPC)

## Outbreak Management Department

### Response and Intervention Division

### Hospital Outbreak Management Action Plan

Status of the Outbreak Management Plan

Region : \_\_\_\_\_

Hospital : \_\_\_\_\_

|                |  |
|----------------|--|
| Done           |  |
| Ongoing        |  |
| Not done       |  |
| Not applicable |  |

| Action   | Recommendation   | Responsibility                                     | Time Frame       | Status |         |          |                |
|--|--|--|------------------|--------|---------|----------|----------------|
|  |  |  |                  | Done   | Ongoing | Not Done | Not Applicable |
| <b>1. NOTIFY</b> GDIPC / Outbreak Management Department and the Regional Coordinator | Use the designated Google Form for the Outbreak Notification   | IPC Head h/<br>Hospital<br>Outbreak<br>Coordinator | <b>IMMEDIATE</b> |        |         |          |                |
| <b>2. IMPLEMENT</b><br><b>IPC Measures</b><br><b>IMMEDIATELY</b>                     | - Review MOH Guideline and IPC Policies  | IPC Staff and<br>the Unit Nurses                   | <b>IMMEDIATE</b> |        |         |          |                |
| <b>3. ACTIVATE</b><br>the Outbreak Management Team (OMT)                             | -Review the Outbreak Management Team roles<br>- Documentation of Minutes Meeting<br>- OMT regular meetings until the end of the outbreak | IPC Head   | <b>IMMEDIATE</b> |        |         |          |                |

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| <b>4. INFORM<br/>the Infection Control<br/>Committee</b>                     | <ul style="list-style-type: none"> <li>- Inform during the coming ICC meeting and ask for an urgent meeting if necessary</li> <li>-</li> </ul>   | IPC Head   | <ul style="list-style-type: none"> <li>-On the specified regular meeting</li> <li>-On need and demand</li> </ul> |  |
| <b>5. DETERMINE<br/>the Criteria of MDROs</b>                                | <ul style="list-style-type: none"> <li>-Review the lab results</li> <li>-Review MOH/CDC guideline</li> <li>-Consult the ID doctor</li> </ul>   | IPC Staff /<br>ID Consultant                               |  |  |
| <b>6. SCREEN<br/>the Newly – Admitted Patients<br/>in the critical areas</b> | <ul style="list-style-type: none"> <li>- Contacts Screening</li> <li>- MRSA</li> <li>- CRE / Gram Negative Bacteria</li> <li>- Other organisms when Indicated</li> </ul>   | IPC Staff / Unit<br>Head Nurse                             |  |  |
| <b>7. REVIEW<br/>The Previous Culture<br/>Positive Results</b>               | <ul style="list-style-type: none"> <li>- Monthly Microbiological Results</li> <li>-Culture log book documents</li> </ul>   | Hospital IPC<br>Staff/ Regional<br>Outbreak<br>Coordinator |  |  |
| <b>8. ISOLATE<br/>the Patients</b>   | <ul style="list-style-type: none"> <li>-Contact isolation in separate rooms or Cohort Isolation</li> <li>- Place a precaution sign at the entrance of the infected patient's rooms with approved MOH color coding</li> </ul>             | Unit Head<br>Nurse and<br>IPC Staff                        | <b>IMMEDIATE</b>   |  |
| <b>9. DECLONIZE<br/>the Patients</b>   | <ul style="list-style-type: none"> <li>-According to the type of microorganisms</li> <li>-Review MOH/CDC guideline</li> <li>-Review the materials required (Chlorohexidine, Disposable Oral Hygiene Kit, Insertion Line Kits)</li> </ul> | Nursing Staff /<br>IPC Staff                               |  |  |

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| <b>10. PROMOTE Patients Hygiene</b>                            | Daily or According to the known IPC Policies  | Nursing Staff / IPC Staff                             | Daily or according to the IPC Policies |  |
| <b>11. STICK to Aseptic Technique Practices and Procedures</b> | <ul style="list-style-type: none"> <li>-Review the IPC policies of lines insertion and blood cultures extraction / catheters insertion / ventilators</li> <li>-Audit the Respiratory Therapist's regarding IPC practices.</li> </ul>  | IPC staff / Treating Physician / Nursing Staff        |  |  |
| <b>12. NOTIFY the Receiving Department</b>                     | <ul style="list-style-type: none"> <li>- Fill the Transfer form</li> <li>- Check the cases' files to know if they were previously transferred from another department or hospital</li> <li>- Cases' status (infected, colonized)</li> <li>- Required precaution type (contact precaution) in addition to standard precaution</li> </ul> | IPC Staff and Head Nurse                              | Whenever transferring the patient      |  |
| <b>13. LIMIT the Overcrowding of ICU</b>                       | <ul style="list-style-type: none"> <li>-Limit the admission when needed</li> <li>-Long-stay patients may be transferred to long term care hospital</li> </ul>   | IPC Staff / Unit Head / Outbreak Regional Coordinator |  |  |
| <b>14. TRACE Contacts of the Patients</b>                      | - Prepare the Contact Lists (Patients /Healthcare workers)  | IPC Staff   |  |  |
| <b>15. CALCULATE Nurse: Patient Ratio</b>                      | -1: 1 or 1:2 nursing staff: patient ratio in critical area  | Head Nurse / Medical Director/ IPC Staff              |  |  |

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| <b>16. ASSIGN<br/>Infection Control Personnel<br/>per Shifts</b>                         | -Audit and follow up the infection control implementations in the unit during every shift until the outbreak closed   | IPC Staff /<br>Medical<br>Director  |   |  |
| <b>17. AVAIL<br/>Infection Prevention and<br/>Control Supplies (PPEs)</b>                | -Check proper quantities and quality<br>- All sizes of (gloves -gowns – mask) should be provided<br>-follow up the practice of donning and doffing of PPES                          | Head Nurse /<br>IPC Staff<br>/Medical<br>Supplies<br>Department<br>Head           |   |  |
| <b>18. PROVIDE<br/>Environmental Disinfectants<br/>Products (quantities and quality)</b> | -Approved MOH disinfectants<br>-Apply Proper contact time for disinfectant<br>-Activate the roles and responsibilities of the environmental cleaning                                | IPC Staff/<br>Unit Head<br>Nurse /<br>Housekeeping<br>supervisor                  |   |  |
| <b>19. PERFORM<br/>routine and terminal cleaning<br/>when Indicated</b>                  | -According to the IPC's cleaning and disinfection policies<br>-Inform the housekeeping supervisor to terminally clean the unit<br>-Use check list for routine and terminal cleaning | IPC Staff/<br>Unit Head<br>Nurse<br>/Housekeeping<br>Supervisor /ER<br>Supervisor | -According to the Cleaning Schedule of the Room.<br>-After the Discharge of the patients. |  |
| <b>20. COLLECT<br/>environmental<br/>samples for cultures<br/>during the outbreak</b>    | -Proper samples collection<br>-Report (Number of samples / Positive results /Sites of collection...etc.)  | Link Nurse /<br>Microbiology<br>Lab Personnel                                     |   |  |

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| <b>21. REVISE<br/>the waste management</b>                          | -Review updated policies and implement waste management policy<br>-Continuously train the housekeepers staff  | Head of Support Services<br>Department/IPC Staff      |  |  |
| <b>22. DISCARD<br/>disposable items</b>                             | -Review Quantities and quality of disposable items (oral hygiene care and central line kit) and skin disinfectants available in the unit (suction tubes, Ambu bag, Swabs ...etc.) | IPC Staff/Unit Head Nurse/<br>Storage Department Head |  |  |
| <b>23. APPLY<br/>the fundamental engineering control principles</b> | -Detect problems in machines / infrastructure / renovation / new building.  | Engineering Department Head /<br>IPC Staff            |  |  |
| <b>24. CHECK<br/>infrastructure of the Unit</b>                     | -Review the unit's design<br>-Review MOH/GCC/CDC Guideline for spacing according to IPC criteria.   | IPC Personnel /<br>Engineering Department             |  |  |
| <b>25. RESTRICT<br/>visitors and unauthorized personnel</b>         | -Implement visitor restriction policy on e.g.: relatives, trainees, medical students...etc.   | IPC Staff /<br>Security Department                    |  |  |
| <b>26. EDUCATE AND TRAIN<br/>the Healthcare Workers (HCWs)</b>      | - Newly hired and old staff in the unit by e.g.: On job training, online training or simulation...etc.  | IPC Staff / ID Consultant                             |  |  |

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| <b>27. REPORT</b><br>against any HCW who is not following the IPC recommendations             | -Report to the High Authority of the no-compliant HCW.  | IPC Staff / Head of the Unit                           |  |  |
| <b>28. CHECK</b><br>the medication preparation  | -Check medication preparation area in the unit and Pharmacy   | IPC Staff / Head of pharmacy                           |  |  |
| <b>29. CONSULT</b><br>Public Officers/ Occupational Health Clinic or any relevant departments | -Vaccination<br>-Restriction from work<br>- Screening   | Public Department / Occupational Health Clinic Officer |  |  |
| <b>30. REVIEW</b><br>the Hand Hygiene Compliance Rate for the previous 3 months               | -Monitor the adherence to best practice of hand hygiene according WHO Forms<br>-Report to the High Authority regarding the non-compliant staff            | IPC Staff  |  |  |
| <b>31. REVIEW</b><br>the Surveillance for the previous 3 months                               | -Review the infection rate (VAP-CALBSI-CAUTI)<br>-Check the proper bundles for implementation and documentation<br>-Review insertion line and ventilators | IPC Staff  |  |  |

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| <b>32. REVIEW<br/>the Antibiotic Stewardship<br/>Program</b>         | <ul style="list-style-type: none"> <li>- Review antibiotic policy according MOH Antimicrobial Guideline</li> <li>-Do not use antibiotics to treat colonized cases</li> <li>-Implement antibiotic restriction policy</li> <li>-Strict implementation of ASP</li> </ul> | ID Consultant/<br>Treating<br>Physician/<br>Pharmacist/<br>IPC Staff |  |  |
| <b>33. REVIEW<br/>the last ICA evaluation<br/>score</b>              | <ul style="list-style-type: none"> <li>-Review the ICA evaluation score</li> <li>-Detect weak points</li> </ul>   | IPC Staff /<br>Outbreak<br>Regional<br>Coordinator                   |  |  |
| <b>34. REVIEW<br/>Core Components</b>                                | <ul style="list-style-type: none"> <li>-Review the core component score</li> <li>-Detect weak points in the unit</li> </ul>   | IPC / Outbreak<br>Regional<br>coordinator                            |  |  |
| <b>35. SEND<br/>the Follow - up reports and<br/>the Final Report</b> | <ul style="list-style-type: none"> <li>-Outbreak management plan status update</li> <li>-Detailed and complete final report</li> </ul>  | Infection<br>Preventionists /<br>Outbreak<br>Regional<br>Coordinator |  |  |
| <b>36. Do Molecular Typing</b>                                       | <ul style="list-style-type: none"> <li>-Arrange with Microbiology lab to save the patients specimen for molecular typing if available or send to reference lab</li> </ul>   | Infection<br>Preventionists /<br>laboratory<br>Specialist            |  |  |
| <b>OTHERS .....</b>  |   |  |  |  |

**1. Head of the Infection Prevention and Control Department:**

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**Mobile No:** \_\_\_\_\_

**E-mail :** \_\_\_\_\_

**Signature :** \_\_\_\_\_

**2.Outbreak Coordinator:**

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**Mobile No:** \_\_\_\_\_

**E-mail :** \_\_\_\_\_

**Signature :** \_\_\_\_\_

**Date :** \_\_\_\_\_