

## Policy Applies To

All Mercy Hospital staff involved in clinical care delivery. Compliance by Credentialed Specialists, contractors and other access holders who have patient contact will be facilitated by Mercy Hospital staff.

## Related Standards:

### Nga Parewa standards.

- Infection Prevention and Control Standards NZS 8134.5:2021

## Rationale:

Mercy Hospital is required to implement an outbreak management plan when risk assessment identifies the presence of a serious disease that has the potential to spread within the hospital environment or community.

## Cultural Considerations:

- **Respect for Cultural Practices:** Different cultures may have specific practices related to illness, hygiene, and healthcare. These practices will be accommodated as much as possible.
- **Language, Communication and Health Literacy:** Effective communication is crucial during an outbreak. Communication will be developed and shared in languages understood by the diverse staff and patient population
- **Community Engagement and Trust:** Involving community leaders, religious groups, and cultural organisations can enhance trust and compliance with outbreak management policies. Understanding community concerns and involving them in decision-making can improve cooperation and reduce resistance.
- **Ethical Considerations:** Some cultural beliefs may impact decisions related to quarantine, isolation, or treatment options. Infection Control principles must be discussed with patients, whānau and staff before action e.g., transmission precautions, screening and testing requirements.

## Definitions:

**Outbreak** - two or more cases of a disease giving a greater rate of infection than expected within a population over some time.

**Intervention** – The point at which an intervention is required will vary according to the risk of infection to those exposed and the transmissibility of the pathogen.

**Management** – Mercy Hospital's Infection Preventionist in conjunction with the Executive the Outbreak Management Committee and (where deemed necessary) the Infection Prevention & Control Committee will determine the nature and extent of response required in consultation with the Executive members and other stakeholders where relevant.

## Implementation

### Identification of a Potential Outbreak

An outbreak may be identified by,

- Surveillance systems
- Laboratory microbiological data
- Alert by clinical personnel
- Regional Public Health, national or international alerts

### Notification

The Infection Preventionist and the Executive must be notified and will instigate a risk assessment.

### Risk Assessment

A risk assessment is required to establish the certainty of diagnosis of the infection in question. This will involve a Microbiologist and appropriate physicians. The risks will be assessed using the following guidelines:

- Contagiousness of the disease
- Severity of the disease
- Number of people affected
- Legal requirements for notification to the Medical Officer of Health

#### *Key issues to be considered:*

- People with the infection are being appropriately cared for
- Safety of Patients
- Staff providing care are protecting their own health
- Potentially exposed persons are correctly identified and informed
- Risk of infection to others is reduced by implementing control measures

#### *Communicate and inform*

The following staff must be informed:

- Mercy Hospital Executive
- Infection Prevention & Control Committee
- Clinical Management Group
- Stakeholders – staff, contractors
- Medical Officer of Health as required
- Ministry of Health as required
- Where patients are implicated, they must be informed

### Formation of an Outbreak Committee

An Outbreak Committee is formed and may include; Microbiologist, the hospitals Infection Prevention and Control Nurse, members of the Infection Prevention & Control Committee, representatives from the affected area, Health and Safety Representatives, external experts as appropriate. The role of personnel in the Outbreak Committee is to:

- Gather information

- Plan strategy
- Communicate with Executive group
- Implement control measures. The particular approach will depend on the nature and extent of the disease. (Appendix One)
- Communicate with patients, staff, credentialed specialists, and other appropriate external agencies. Assist the CEO with media management
- Monitor and distribute personal protective equipment from pandemic supplies as required. (Appendix Two)

### Evaluation

- Debrief
- Evaluation of the efficacy of outbreak prevention and control measures will be completed by the Infection Prevention and Control Nurse, or nominated other providing a written report to the Infection Prevention and Control Committee

### Control Measures

Are determined by the Outbreak Committee. (Appendix One)

### Associated Documents

#### External

- Guidelines for the Management of Norovirus Outbreaks In Hospitals and Elderly Care Institutions, Ministry of Health, January 2009
- Guidelines for the Investigation and Control of Disease Outbreaks, Institute of Environmental Science and Research (ESR) New Zealand, 2012.
- List of Diseases Notifiable to the Medical Officer of Health, Ministry of Health, 2013
- Communicable Disease Control Manual, 2012.
- National Health Emergency Plan, Infectious Diseases, Ministry of Health, 2004.
- Infection Prevention & Control and Management of Carbapenemase-producing Enterobacteriaceae (CPE), Guidelines for health care providers in New Zealand acute and residential care facilities, Ministry of Health, 2018.
- New Zealand Influenza Pandemic Plan A framework for action, Ministry of Health, 2017.

#### Internal

- MDRO policy
- MDRO patient booklet series
- Personal Protective Equipment - Infection Control
- Transmission Based Precautions (Isolation) Policy
- Infectious Diseases - Patient Management
- Infectious Diseases - Staff Management
- Risk Management Policy
- Consent Policy
- Pandemic plan