



## Preventing H1N1 Influenza (Flu)

### A Guideline for Homeless Shelters, Emergency Shelters and Transitional Facilities

The purpose of this document is to help staff to prevent or reduce transmission of H1N1 influenza (flu). Shelter staff and volunteers have an important role in protecting clients and the community from contagious diseases such as flu. At this time, the primary means to reduce spread of influenza is to:

- Separate staff and clients with flu-like illness from non-ill clients
- Practice hand washing, and
- Use cough etiquette

#### How to tell if it's flu

Infections with influenza can cause a wide range of illness, from mild to severe. People with H1N1 influenza almost always have cough and fever, commonly have sore throat, muscle aches, joint pain, fatigue, or headache, and sometimes have nausea, vomiting or diarrhea. Older adults and people with weakened immune systems (due to illness or medication) may not have a fever. Often, fever comes on quite suddenly. When H1N1 is known to be going around in a community, it is likely that the symptoms described are due to H1N1.

Almost always...	Commonly...	Sometimes...
<ul style="list-style-type: none"> <li>• Fever</li> <li>• Cough</li> </ul>	<ul style="list-style-type: none"> <li>• Sore throat</li> <li>• Muscle aches</li> <li>• Joint pain</li> <li>• Headaches</li> <li>• Fatigue</li> </ul>	<ul style="list-style-type: none"> <li>• Nausea</li> <li>• Vomiting</li> <li>• Diarrhea</li> </ul>

#### Screening for flu and getting medical care

Upon arrival, clients and visitors should routinely be asked about symptoms of flu-like illness. Staff should watch for flu symptoms in all clients and visitors. Shelters should try to have a thermometer and ask clients who appear unwell if they can take their temperature. Where taking temperatures in the shelter is not possible for people with flu-like symptoms, they should be sent for medical assessment where temperature can be taken.

Anyone with flu-like illness should be kept separate from those who are well.

It is essential for those at increased risk of severe respiratory illness to get care

quickly. Antiviral treatment such as Tamiflu, is most effective to prevent serious illness if taken within 48 hours after symptoms start. However, if people present after 48 hours, treatment will still be considered. People with the following characteristics may be at increased risk for severe respiratory illness and should be sent for medical care:

- Children under 5 years
- Persons over 65 years
- Chronic diseases (lung including asthma, heart, kidney, central nervous system including neuromuscular diseases, endocrine system including diabetes)
- Immune disorders or immunosuppression (such as cancer patients on treatment, autoimmune diseases or rheumatologic diseases on TNF inhibitors or corticosteroids, transplant patients, HIV infection)
- Pregnancy
- Smoking, substance abuse, alcoholism
- Obesity or malnutrition
- Persons of Aboriginal ancestry

Make advance arrangements with local health care providers to provide care to persons identified by the shelter as having flu-like illness, either off or on site. If your efforts to make advance arrangements are unsuccessful or your advance arrangements break down, call Health Links – Info Santé for assistance at 788-8200. Consider client transportation needs. Consider if reminders to take antiviral medications are necessary, and how this will be done.

Visitors should be screened for current flu-like illness. Visitors who have current flu-like symptoms should be discouraged from visiting. If visiting is required, the ill visitor should be given a facemask and asked to wash their hands.

Clients should be screened for severe signs and symptoms. Get medical care as soon as possible if severe symptoms of flu are present. Clients should wear a facemask during transfer to a hospital or health care provider. Severe signs and symptoms include:

- Difficulty breathing, shortness of breath, breathing faster than usual
- Pain or pressure in the chest or abdomen
- Blueness of the lips or skin
- Confusion
- Severe or persistent vomiting
- Severe weakness to dizziness
- Dehydration or no urination for 12 hours

### **Clients with flu-like illness**

- A client with flu-like illness should immediately be moved to a room separate from non-ill clients and staff. If a separate room is not available,

- clients with flu-like illness may share a room with other clients who have or are recovering from, flu-like illness. If possible, use a large, well-ventilated room specifically for sick persons with beds at least 6 feet apart and use temporary barriers between beds, when possible.
- Sick persons should avoid common areas. Clients with flu-like illness should avoid contact with those who are not ill.
  - Clients with flu-like illness who must leave their rooms, or who are in the presence of those who are not ill, should wear a facemask, especially when they have a cough. They should also receive repeat instruction on observing respiratory etiquette and hand hygiene. Clients with flu-like illness should wash their hands before being in the presence of those who are not ill.
  - Provide sick clients with access to fluids, tissues, plastic bags for immediate disposal of used tissues, and a convenient way to wash their hands and/or use hand sanitizers.
  - A dedicated staff person should help clients with flu-like illness who have physical disabilities that makes it difficult for them to perform effective hand washing.
  - Where support services exist (e.g., supportive housing facilities), facilities should arrange for one person to care for clients with flu-like illness, provide food, and assist with daily needs. This caregiver should wear a facemask when providing care to ill clients, and remove the mask and perform hand washing upon leaving the room.
  - Immunocompromised peers should avoid assisting clients with flu-like illness.

## PREVENTION AND CONTROL

### General prevention recommendations

- Encourage hand washing and cough etiquette.
- Adequate supplies of hand washing soap and single use hand drying supplies or equipment (e.g., disposable towels, air dryers) must be available at all times in food service and dining areas, bathrooms, and other areas where toileting or food service may occur.
- Make hand sanitizers available throughout the facility, especially where food is prepared or eaten.

### Housing

- Attempt to maintain at least a two-meter separation between the heads of all beds.
- Consider arranging beds so that clients lie head-to-toe (or toe-to-toe), whichever will provide the greatest distance between faces.
- Sheets or curtains can be used to create temporary barriers between beds.

## Cleaning

- Housekeeping – ‘Sick’ areas (bathrooms, sleeping areas, etc.) and high-touch surfaces require increased housekeeping emphasis. Conduct regular (at least twice daily) cleaning of bathroom facilities and high touch surfaces (e.g., toys, sports equipment, tabletops, faucets, door handles, computer keyboards, telephones, service counters). Staff should practice thorough hand washing after performing housekeeping duties in ‘sick’ areas and prior to resuming other activities.
- Wash and dry clothes and bedding as you normally do. Line or air-drying can be used to dry items when machine drying is not possible. If there are no laundry facilities onsite, soiled items can be bagged (using plastic bags) and taken offsite for washing and drying.
- No special disinfectants or waste handling practices are needed. Regular household or commercial cleaning products and the usual standards of waste handling are adequate. Dishes, clothing, and sheets used by an individual with flu-like illness can be washed using ordinary detergent and water.

## Food Service

- When there are persons with flu-like illness around, discontinue salad and sandwich bars, ‘family-style’ service, and buffets. Use servers only.
- Dining areas, including tables, should be wiped down after each use with cleaning products you would normally use.
- Reusable supplies such as drinking cups and eating utensils should not be kept in common areas where they may become contaminated. Consider single-use disposable cutlery and eating utensils in locations where clients serve themselves.

## RESTRICTIONS AND EXCLUSIONS

- Clients or staff with flu-like illness should be excluded from group activities and should not go into the community, except to seek medical care. If these clients must leave the shelter, try to provide them with tissues, other care items and food and beverages to avoid infecting others while standing in food lines
- Staff members with flu-like-illness should be sent home. They should not go into the community while they are sick, except to seek medical care.
- If possible, cancel the ill client’s appointments at other agencies, group sessions, transfers between shelters, etc. For those appointments that are medically necessary, such as dialysis or chemotherapy, call the receiving facility ahead of time to notify them of the client’s flu-like illness status. The client should wear a facemask during his/her entire medical visit.
- Try to minimize the number of visitors entering or leaving the facility and postpone or restrict activities involving visitors when clients are experiencing flu-like illness. Limit the number of visitors a client sick with flu has.

- If a visitor has flu-like illness, they should be prevented or discouraged from visiting. If a visit is absolutely necessary, the ill visitor should be asked to wear a facemask and wash their hands upon arriving and leaving.

Consult with Health Links-Info Santé at 788-8200 for health care advice as needed. Access emergency services if an individual is acutely ill and requires immediate medical attention.

Please contact your local community health office and ask to speak with a public health nurse if you have questions about flu prevention. Community health office phone numbers are listed on page 9 of the Winnipeg Health Services Directory (blue pages in the middle of your Winnipeg MTS White Pages telephone book).

Related Sources:

- Individual and Community Based Measures to Help Prevent Transmission of Influenza-Like-Illness (ILI) in the Community, Including the Pandemic Influenza (H1N1) 2009 Virus, Public Health Agency of Canada, [http://www.phac-aspc.gc.ca/alert-alerte/h1n1/hp-ps-info\\_health-sante-eng.php](http://www.phac-aspc.gc.ca/alert-alerte/h1n1/hp-ps-info_health-sante-eng.php)
- State of New York Department of Health, Guidance for Shelters on Novel H1N1 Flu, June 18, 2009
- Interim Guidance for Homeless and Emergency Shelters on the Novel Influenza A, (H1N1) Virus, Centres for Disease Control and Prevention, USA Centres for Disease Control