



# Outbreak Management Procedure

## Aim

The aim of this procedure is to ensure that staff providing services, can recognise an outbreak, promptly inform the necessary professionals and implement basic measures in a timely manner to prevent further spread of infection.

## Linked Policies, Procedures and Written Control Documents

- National Infection Prevention and Control Manual  
<https://phw.nhs.wales/services-and-teams/harp/infection-prevention-and-control/nipcm/>
- COVID 19: Guidance for maintaining services within health and Care. Infection prevention and control recommendations.  
[Gov.uk COVID-19 infection prevention and control guidance \(publishing.service.gov.uk\)](https://www.gov.uk/government/publications/covid-19-infection-prevention-and-control-guidance)
- All Wales Standard Infection Control Precautions Policy (SICPs).  
<https://phw.nhs.wales/services-and-teams/harp/infection-prevention-and-control/nipcm/chapter-1-standard-infection-control-precautions-sicps/>
- All Wales Transmission based Precautions (TBPs)  
<https://phw.nhs.wales/services-and-teams/harp/infection-prevention-and-control/nipcm/chapter-2-transmission-based-precautions-tbps/>
- The Communicable Disease Outbreak Plan for Wales  
<https://phw.nhs.wales/topics/latest-information-on-novel-coronavirus-covid-19/the-communicable-disease-outbreak-plan-for-wales/>
- Incident Reporting Policy and Procedure  
<http://howis.wales.nhs.uk/sitesplus/888/page/54689>

## Scope

All staff employed by Public Health Wales, with particular relevance to those who work on or within clinical settings and COVID response (inclusive of those on honorary or temporary contracts, and contractors on site).

The microbiology service will follow their own specific Laboratory Standard Operating Procedure (SOP).

It is the responsibility of all employees of Public Health Wales to abide by the recommendations made within the supporting procedure document.

<b>Equality and Health Impact Assessment</b>	The Equality and Health impact Assessment has been undertaken February 2021
<b>Approved by</b>	
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<b>Accountable Executive Director/Director</b>	Executive Director of Quality, Nursing and Allied Health Professionals
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**Disclaimer**

**If the review date of this document has passed please ensure that the version you are using is the most up to date either by contacting the document author or the [Corporate Governance](#).**

<b>Summary of reviews/amendments</b>				
<b>Version number</b>	<b>Date of Review</b>	<b>Date of Approval</b>	<b>Date published</b>	<b>Summary of Amendments</b>
V1	February 2021			This procedure document is new and has been created as a complementary resource to the Outbreak management policy National guidance and policies have been updated

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## **1. Introduction**

Each Health Board and Trust in Wales must have a local policy or procedure in place outlining the arrangements for the control of an outbreak or incident in their healthcare setting.

Public Health Wales provides a diverse range of services to the public, in a variety of healthcare settings and locations. Outbreaks within Public Health Wales are extremely rare and unlikely occurrences because of the nature of the services and service users.

However, it is essential that outbreaks be recognised early and that incidents are assessed and managed in a timely and efficient manner to reduce the risk of transmission.

## **2. Aims and Objectives.**

The policy aims to ensure that staff providing services, can recognise an outbreak, promptly inform the necessary professionals and implement basic measures in a timely manner to prevent further spread of infection.

At a clinical or divisional level, early detection is key to control an escalation of an incident or outbreak. Effective communication between all parties is critical. The policy will provide a structure and appropriate advice for the prevention and management of infection across Public Health Wales.

## **3. Scope.**

This policy is primarily intended to cover outbreaks involving Staff and service users in the healthcare setting. However, it is recognised that outbreaks involving staff and/or their visitors can also occur. In these non-healthcare settings associated outbreaks, the generic Communicable Disease Outbreak Plan for Wales should be used as the primary plan for outbreak control.

## **4. Roles and Responsibilities.**

In all Health Boards and Trusts, ultimate responsibility for Infection Prevention and Control lies with the Chief Executive and delegated to the Executive Director of Quality, Nursing and Allied Health Professionals.

Within Public Health Wales, the Executive Director of Quality, Nursing and Allied Health Professionals or designated delegate (usually Assistant Director of Quality and Nursing) will chair any senior response team meetings in the event of an outbreak within Public Health Wales.

#### **4.1 The Chief Executive**

The Chief Executive has overall responsibility for ensuring infection prevention and control is a core part of Trust governance and patient safety programmes.

#### **4.2 Executive Director of Quality, Nursing and Allied Health Professionals**

The main role of the Executive Director of Quality, Nursing and Allied Health Professionals will be to chair the Outbreak Control Team (OCT), this can be designated in their absence to the Assistant Director of Quality and Nursing.

The Executive Director of Quality, Nursing and Allied Health Professionals will oversee the implementation of the advice given by the OCT and ensure provision of extra support for affected area where necessary.

#### **4.3 Consultant in Communicable Disease Control (CCDC)/ Consultant in Health Protection.**

The provision of specialist advice and support on community disease control issues

#### **4.4 Infection Prevention and Control Nurse**

The Infection Prevention and Control Nurse (IPCN) is responsible for providing specialist advice in accordance with this policy, for supporting staff in its implementation, and assisting with risk assessment where complex decisions are required.

The IPCN will ensure this policy remains consistent with the evidence-base for safe practice, and review in line with the review date or prior to this in light of new developments.

#### **4.5 Managers and programme leads**

Managers and programme Leads have the responsibility to ensure that their staff including bank and locum staff etc. are aware of this

policy, adhere to it at all times and have access to the appropriate resources in order to carry out the necessary procedures.

Managers and programme Leads will ensure compliance with this policy is monitored locally and ensure their staff fulfil their IPC mandatory training requirements in accordance with the Trust Training Needs Analysis.

#### **4.6 Staff**

All staff have a personal and corporate responsibility for ensuring their practice and that of staff they manage or supervise comply with this policy. Ensure they complete the infection prevention and control training applicable to their area of work.

#### **4.7 Outbreak Control Team (OCT)**

An Outbreak Control Team is formed to manage the outbreak and make decisions on what measures are required to bring the outbreak under control. The members of the team will vary according to the extent and severity of the outbreak/ incident.

### **5. Outbreak Management.**

An outbreak of infection can be defined as an increase in cases against the normal background levels of an organism/disease. When the background level of an organism/disease is zero, or a single case has serious potential public health consequences, one case can and should be declared as an outbreak and an Outbreak Control Team, (OCT), formed (this may be termed an incident under these circumstances).

<https://phw.nhs.wales/services-and-teams/harp/infection-prevention-and-control/nipcm/chapter-3-healthcare-infection-incidents-outbreaks-data-exceedance/>

#### **5.1 Declaration of an Outbreak**

Once alerted to an apparent increase in numbers of cases or other marker of a possible outbreak or incident within Public Health Wales, an urgent meeting will be called to establish the facts and will assess the situation and reach one of these conclusions:

- No outbreak or incident

- Minor outbreak or incident that can be managed by the IPCN and other colleagues within the organisation without the need for a formal OCT (this may include periods of increased incidence (PII))
- Outbreak or incident requiring a formal OCT
- Actual or potential major outbreak or incident with significant public health implications – need for a formal Major OCT AND immediately discuss with CCDC for consideration of invoking The Wales Outbreak Plan.

It is not possible to be prescriptive about what constitutes the need for a formal OCT as the variety of potential scenarios is extremely diverse and will be affected by local factors including the physical environment and resources of the organisation/IPCN. If a decision of 'no' or 'minor' outbreak or incident is reached this should be subject to a daily review and the IPCN should maintain a low threshold for declaring a formal OCT.

## **6. Training and/or Communication with Staff**

All staff must undergo annual online e-learning Level 1 infection prevention and control training. Clinical staff are also required to undertake Level 2 Infection prevention and control training. This training is classroom based and includes training on Healthcare Associated infection and recognition of an outbreak and its management.

However, in certain circumstance where classroom based learning cannot take place (e.g. pandemic situations), staff can complete level 2 training on line. The annual infection prevention and control programme will incorporate additional training sessions for clinical staff, to ensure they are kept up to date with current research, guidelines, policies and projects.

## **7. Monitoring and auditing.**

In line with Public Health Wales' Incident Management Policy and Procedure, where an outbreak falls into the definition of an incident it must be reported on Datix in the usual way within 24 hours of the incident coming to our notice. Any incidents that fall within the definition of a Serious Incident must also be reported to Welsh Government within 24 hours. Where a local outbreak does not meet the criteria for a Serious Incident report but is of a nature that may

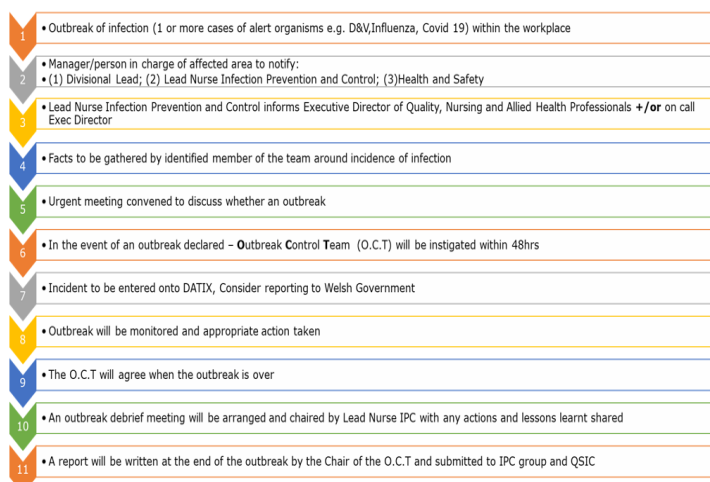


impact upon the reputation of the NHS, then a 'No Surprises' submission should be considered.

Details of how to submit such reports are included in the Policy and the Procedures. For further information, the Risk and Incidents Manager should be consulted.

All clinical areas within Public Health Wales will participate in auditing, utilising the Infection Prevention Society Quality Improvement Tools which have been adapted for use. There may be circumstances where non-clinical areas will be audited where outbreaks have been identified for example, norovirus or COVID 19 outbreaks. Results to be reported to the Infection prevention and Control Group and validation of audits will be performed by the Lead Nurse Infection Prevention and Control.

## Appendix 1 FLOW CHART FOR MANAGING OUTBREAK



## Appendix 2: Outbreak control Team (OCT)

- Executive Director of Quality, Nursing and Allied Health Professionals or designated deputy (CHAIR)
- Administrative support
- Lead Nurse Infection Prevention and Control
- Communications team
- Consultant for communicable disease control (On call)
- Consultant Microbiologist
- Epidemiologist
- Estates team including facilities.
- Health and safety representative for the division
- Occupational health if staff involved.
- Senior Clinicians/managers from area affected e.g. team manager, senior nurse, medical representation, Radiology, laboratory manager

### Core functions

- To investigate the source and cause of the incident or outbreak.
- To monitor the effectiveness of infection prevention & control measures.

- To facilitate immediate changes or actions required to bring the outbreak under control.
- To facilitate the optimal clinical care for service users and/or health and wellbeing of staff
- Review evidence of the outbreak / incident and the results of epidemiological and microbiological investigations including data collection and analysis.
- Decide the need for outside help and expertise.
- To manage the communication between relevant agencies, media, stakeholders and those with a legitimate interest in the outbreak, including Welsh Government.
- To manage the communication with service users and their families, affected staff and the team/service involved.
- To define the end of the outbreak.
- To evaluate the lessons learned and prepare a report / recommendations of the outbreak for the Infection Prevention & Control Group and the Trust.
- To provide clear guidelines for service users, relatives, staff and the public.
- Ensure that individuals with assigned individual responsibilities within the outbreak policy are executing their roles.

### **Appendix 3 Model agenda for Outbreak Control Team meeting**

**The initial agenda** for the first outbreak meeting will include:

- Agree membership and chairperson including dedicated administration support for minute taking.
- The outbreak policy and individual actions / responsibilities.
- Initial assessment of the outbreak.
- Case definition(s).
- Reporting mechanisms including Datix, Welsh Government, and RIDDOR.
- Investigation of outbreak.
- Management/control measures.
- Communication channels.
- Frequency of Outbreak Meetings.
- Date and time of next meeting?

**Subsequent agendas will include:**

- Minutes of previous meeting
- Update on actions and matters arising
- Situation report

- Investigation progress reports
- Review of control measures and effectiveness
- Review of case definition(s)
- Review of membership/extend if required
- Agreement of actions
- Communications
- Current consequences of the outbreak (harm including morbidity, death or/and impact on current services e.g. cancellations, delays)
- Date and time of next meeting

#### **Appendix 4: Checklist for Outbreak Investigation and management/Control**

<b>Outbreak Recognition</b>	<p>Team manager, Lead Nurse IPC, Executive Director of Quality, Nursing and Allied Health Professionals , Medical director, on call CCDC, Executive on call and Health and safety to be informed</p> <ul style="list-style-type: none"> <li>• Initial investigation to clarify the nature of the outbreak to be <u>scheduled within 24 hours</u></li> <li>• Preliminary meeting to discuss findings</li> </ul>
	<ul style="list-style-type: none"> <li>• Report on datix. Consider submitting no surprises/sensitive issue form to Welsh Government</li> <li>• Consider RIDDOR</li> </ul>
<b>Outbreak Declaration</b>	<p>Decision made and recorded at the end of the initial investigation and meeting regarding outbreak declaration.</p> <p><a href="https://phw.nhs.wales/services-and-teams/harp/infection-prevention-and-control/nipcm/appendices/">https://phw.nhs.wales/services-and-teams/harp/infection-prevention-and-control/nipcm/appendices/</a></p>

<b>Outbreak Control Team</b>	<ul style="list-style-type: none"><li>• OCT to be held within 48 hours of decision to convene</li></ul>
	<ul style="list-style-type: none"><li>• All departments/disciplines involved in investigation and control represented at OCT meeting (appendix 2)</li></ul>
	<ul style="list-style-type: none"><li>• Roles and responsibilities of OCT members agreed and recorded</li></ul>
	<ul style="list-style-type: none"><li>• Chair agreed and recorded</li></ul>

<p>Outbreak Investigation and Control</p>	<ul style="list-style-type: none"> <li>• Immediate actions taken on recognition</li> <li>• Control measures documented with clear timescales for implementation and responsibility <b>(Appendix 2)</b></li> <li>• Implementation monitored and reviewed at each meeting</li> </ul>
	<p>Case definition agreed and recorded</p>
	<ul style="list-style-type: none"> <li>• Describe the cases – time, place, person (from notes, charts, history)</li> <li>• Identify if there has been any change in the system that could have resulted in the outbreak (changes in people, equipment, procedures or the environment)</li> <li>• Present the data keeping all the data presentations up to date,</li> <li>• If staff are involved, examine working patterns, occupational health including vaccination history. Consider Community exposure.</li> <li>• Look at epidemiology of cases.</li> </ul>
	<p>Analytical study considered and rationale for decision recorded</p>
	<p>Investigation protocol prepared if an analytical study is undertaken</p>
<p>Communications</p>	<p>Communications strategy agreed at first OCT meeting. This must ensure that communication and information provided throughout the course of the investigation and management of the outbreak is accessible to all, including hard to reach groups. Welsh Government informed (SAI or no surprises reporting)</p>
<p>End of Outbreak</p>	<p>Outbreak declared over by OCT. Final outbreak report completed within 4 weeks of the formal closure of the outbreak</p>
	<p>Report recommendations and lessons learnt reviewed within 1 month of formal closure of the outbreak</p>
	<p>Formal report submitted to Infection prevention and control Group.</p>

