

Assess



Diagnose



Identify Outcomes



- Pertinent Healthy People 2010 Leading Health Indicators:**
- Environmental Quality
 - Mental Health
 - Immunization
 - Responsible Sexual Behavior
 - Access to Health Care

Nursing Practice

1. Review outbreak form/referral when received from Public Health Nursing Supervisor (PHNS), and on the Nursing Practice Management System (NPMS). Document Date/Time/Signature on referral when received from PHNS.
2. Analyze report for:
 - a. Lab data
 - b. Disease
 - c. Symptoms (duration)
 - d. Date of onset
 - e. Incubation period
 - f. Source
3. Assess for other facility needs or concerns unrelated to the outbreak.
 - g. Mode of transmission
 - h. Period of communicability
 - i. Specific treatment
 - j. Control measures
 - k. Number of staff/clients affected
 - l. Size/type of facility
 - m. Name of facility liaison

1. Verify the medical diagnosis and determine the priority of action:
 - a. Review Section/Page D1-D2 of the Public Health Nursing Practice Manual for priority per Acute Communicable Disease Control (ACDC) or determine priority in consultation with the PHNS as needed. Document priority selected.
2. Consider the facility's need for nursing interventions based on the medical diagnosis.
3. Consider the facility's need for nursing intervention to promote health, facilitate well-being, foster healing, alleviate suffering, and improve quality of life.

Outcome Objective:

1. Prevent the spread of communicable diseases within families, communities, health facilities, or other sites.

Nursing Practice:

1. Determine and document specific health needs/goals for the facility.

Other References

- Health Education Materials
- Public Health Nursing Practice Manual
- ACDC Manual (B-73)
- Control of Communicable Disease Manual

Plan



Implement



Evaluate

Plan for the following Public Health Nursing Interventions:

1. Disease and Health Event Investigation:

- a. Review ACDC Manual (B-73) for:
 - Symptoms, incubation period, source, mode of transmission, period of communicability, specific treatment, & control measures
- b. Obtain educational and resource materials.
- c. Obtain specimen containers if applicable.
- d. Elicit epidemiological data.
- e. Determine if outbreak exists at initial visit.
- f. Request outbreak number from registrar if needed and if no outbreak, refer back to PHNS.
- g. Establish liaison for facility if not already done.
- h. Relate outbreak to time, place, person (when?, where?, who?).
- i. Analyze probable causative factor (how?, why?).
- j. Analyze actual/potential for spread of disease.
- k. Take appropriate action in the event of sensitive occupation or situation (see B-73).
- l. Develop a case definition.
- m. Evaluate extent of illness in clients/staff/community.
- n. Conduct environmental assessment (hand washing facilities, bathrooms, laundry, trash, kitchen, etc.).

- o. Review staffing: staff assignment/case relationship, staff/client ratio, number of employees & clients, total capacity
 - p. Review and institute appropriate control measures.
 - q. Document on epidemiological form.
 - r. Complete line listing of cases involved.
 - s. Maintain a desk card on outbreaks that require more than one-month follow-up for resolution.
 - t. Initiate a medical record.
- 2. Case Management:**
- a. Implement a facility management plan based on interpretation of findings.
 - b. Notify public health laboratory about the outbreak after obtaining outbreak number from the registrar, name of the facility, and number of anticipated specimens.
- 3. Surveillance:**
- a. Monitor case/contacts until cleared/closed.
 - Submit specimens as indicated.
 - b. Monitor facility for further outbreaks.
- 4. Health Teaching/Counseling:**
- a. Educate staff, clients and/or families regarding symptoms, source, incubation period, mode of transmission, period of communicability, & precautions needed to prevent spread of infection per the B-73.

- b. Discuss the need for case/contacts to have evaluation/clearance and explain procedures.
 - c. Provide instruction on appropriate specimen collection (if applicable).
 - d. Educate staff and administrators on control measures.
- 4. Collaboration:**
- a. Collaborate with the AMD in writing the recommendations to the facility for outbreak control.
- 6. Referral and Follow-up:**
- a. Review control measures, treatment, and/or prophylaxis recommendations of the AMD with the facility administrator or designee in the form of a written letter from the AMD.
 - b. File Foodborne Illness report (H-26) with the Morbidity Unit if illness relates to a commercial establishment or product outside of the facility.
 - c. Contact the Los Angeles County Environmental Health Food & Milk Program (626-430-5400) if applicable.
- 7. Other:**
- a. Plan interventions needed to assist the facility with needs and concerns unrelated to the outbreak.

1. PHN interventions are implemented as stated in the plan.
2. Document all consultations, collaborations, interventions and facility encounters on the epidemiological form(s), and/or in the medical record/NPMS.

1. Evaluate the effectiveness of the interventions on the health of the contacts:
 - a. Verify and document facility compliance with the recommendations.
2. Evaluate adherence by the facility to the recommendations for control.
3. Determine action for non-adherent facility:
 - a. Consult with PHNS.
4. Complete investigation forms:
 - a. Submit interim reports as needed until case is closed.
 - b. Submit final report within 10 days of closure or timeframe agreed upon in consultation with PHNS.
5. Document in the NPMS:
 - a. Complete Consumer/Community Service module and file hard copy in the medical record.
6. Evaluate client satisfaction:
 - a. Give client satisfaction form to the facility/agency representative for completion and submission in a pre-addressed, stamped envelope.