Scabies Outbreak Management Checklist

For use in conjunction with Management of Scabies in Residential Care Guideline

	Immediate	24 hours	2–7 days	7–10 days	Ongoing	Closure
OMT	☐ Confirm outbreak definition met ☐ Notify IPC lead or person responsible for IPC ☐ Convene outbreak management team (OMT) ☐ Commence line list	☐ Daily outbreak management team (OMT) meetings ☐ Update line list	☐ Daily outbreak management team (OMT) meetings ☐ Update/maintain line list	☐ Daily outbreak management team (OMT) meetings ☐ Update/maintain line list		☐ Outbreak closed after 12 weeks with no new cases ☐ Outbreak management team (OMT) finalise closure ☐ Outbreak management review – outcomes and actions
Infection Prevention	☐ Isolate case/s as possible ☐ Implement contact precautions for cases until 24hrs post treatment ☐ Commence line listing ☐ Dedicated equipment to cases as possible	☐ Change linen for case/s and resident contacts day of treatment ☐ Clean risk areas daily and affected areas twice daily ☐ Cohort HCW and residents where appropriate ☐ RCH outbreak and precaution signage ☐ Plastic bag/contain items that cannot be washed (soft furnishings, personal clothing and shoes) for at least 72hrs	☐ Remove scabies cases post 24hrs treatment from isolation ☐ Maintain isolation and contact precautions for suspected or confirmed crusted scabies ☐ Change linen again for cases and resident contacts day 2 ☐ Clean risk areas daily and affected areas twice daily ☐ Scabies and precautions education to HCW, residents, representatives	☐ GP/NP review isolation and contact precautions for crusted scabies ☐ Change linen for cases and resident contacts day 8 ☐ Clean risk areas daily and affected areas twice daily ☐ Scabies and precaution education to HCW	☐ Annual scabies and precaution education to HCW, residents, representatives	☐ Terminal clean ☐ Steam clean, soft furnishings, upholstery furnishings, carpets
Assessment	☐ Identify risk areas in residential care home (RCH) ☐ Assess type of scabies (scabies, crusted scabies) ☐ Obtain skin scrapings for microbiological analysis	☐ Identify contacts (residents and frequent visitors) at risk ☐ Identify healthcare workers (HCW) at risk	☐ Identify new contacts (residents and frequent visitors) at risk ☐ Identify new HCW at risk	☐ Identify new contacts (residents and frequent visitors) at risk ☐ Identify new HCW at risk ☐ Review persistent or worsening symptoms for possible treatment failure	☐ Maintain ongoing resident skin assessment ☐ Review persistent or worsening symptoms for possible treatment failure ☐ Maintain thorough routine cleaning schedules	
Treatment	☐ Engage GP/medical practitioner /nurse practitioner (NP) ☐ Commence planning for concurrent treatment for cases and contacts. Consider unit wide treatment in dementia specific areas.	☐ Seek consent for treatment for cases and contacts ☐ Treat case/s and contacts (HCW, residents, frequent visitors) – day 1 ☐ Record treatment administration	☐ Engage GPs/NPs ☐ Seek consent for treatment for new resident contacts ☐ Treat new contacts ☐ Record treatment administration	☐ Repeat treatment for resident cases and contacts – day 7 ☐ Ensure compliance with repeat treatment for HCW and frequent visitors – day 7 ☐ Record treatment administration		
Communication		☐ Letter to residents/families/representatives ☐ Correspondence to HCW and outline outbreak plans ☐ Correspondence with GPs/NPs, other visiting health and service providers	☐ Update HCW, residents, families/representatives	☐ Update HCW, residents, families/representatives	☐ Update HCW, residents, families/representatives	☐ Update HCW, residents, families/representatives ☐ Correspondence with GPs/NPs, other visiting health and service providers
Logistics		☐ Contact pharmacy re medication supply and availability ☐ Review HH & PPE supplies and ensure stock ☐ Review cleaning, waste and laundering supplies and ensure stock ☐ Review staffing levels and roster increased coverage for care, cleaning and laundering	☐ Increase HCW for care response ☐ Increase laundry and cleaning services ☐ Business manager to review financial implications	☐ Ensure adequate HH & PPE supplies ☐ Review cleaning, waste and laundering supplies and ensure stock ☐ Increase HCWs for care response ☐ Increase laundry and cleaning services		
Surveillance		☐ Skin checks for all facility residents throughout outbreak ☐ Self skin checks for HCW and frequent visitors throughout outbreak. Encourage HCW to report symptoms.	☐ Continued monitoring of contacts/facility	☐ Continued monitoring of contacts/facility for 12 weeks	☐ Continue monitoring residents for cases for 8 weeks after outbreak closure* ☐ Self skin checks for HCW ongoing	

** If a new case of scabies is identified, inform the outbreak management team and recommence immediate actions.*