Introduction
Effective prevention of communicable diseases in RCHEs will not only safeguard the health of the residents and the staff, but will also reduce the chance of hospitalization. The peak season of influenza usually falls in the winter between January and March. During the surge periods, demand on hospital services was significantly higher especially for the elderly. In 2013/14, an enhanced winter surge program for prevention of influenza outbreak in RCHEs was introduced to reduce the pressure of hospitalization.

Objectives
(1) to develop measures and enhance knowledge of staff working in RCHEs to prevent influenza outbreak; (2) to monitor the compliance on prevention of influenza outbreak; (3) to reduce hospital admission due to influenza outbreak.

Methodology
The infection control audits took place at 70 private RCHEs in HKEC from Dec 2013 to May 2014. CGAT nurses conducted the surprise on-site audit biweekly. Convenient sampling was adopted by randomly selecting frontline RCHE staff for the audit. Audit tool was developed by HKEC CGAT to assess the compliance of staff working in RCHEs in six main areas: environmental precaution, hand hygiene, caring of residents with influenza like (ILI) symptoms as well as cleanliness of staff uniform and individualized feeding utensils. CGAT nurses would assess by observation or ask RCHE staff. Coaching, education and feedback were given to the RCHE staff after the assessment so as to enhance their performance. The study also retrospectively compared the admission rate and influenza outbreak occurred over the past three years' winter surge period.
**Result**

743 audits were conducted with an average of 11 audits at each home. The mean compliance rate over 11 audits was 84.7%. Among those six assessment areas, the lowest compliance result was hand hygiene with 67%. Compliance rate ranged from 85% - 92% for the rest of the assessment areas. While comparing the last year’s data on influenza outbreak in RCHEs there was marked improvement after the introduction of the enhanced program. Number of influenza outbreak reduced by 83% and number of staff and residents affected were also decreased by 67% and 46% respectively. Number of residents required hospital management reduced sharply by 90%.