



Influenza and Non-COVID-19 Respiratory Illness Outbreak Surveillance: Training for Long-Term Care Facilities and Assisted Living Residences in Rhode Island

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Today



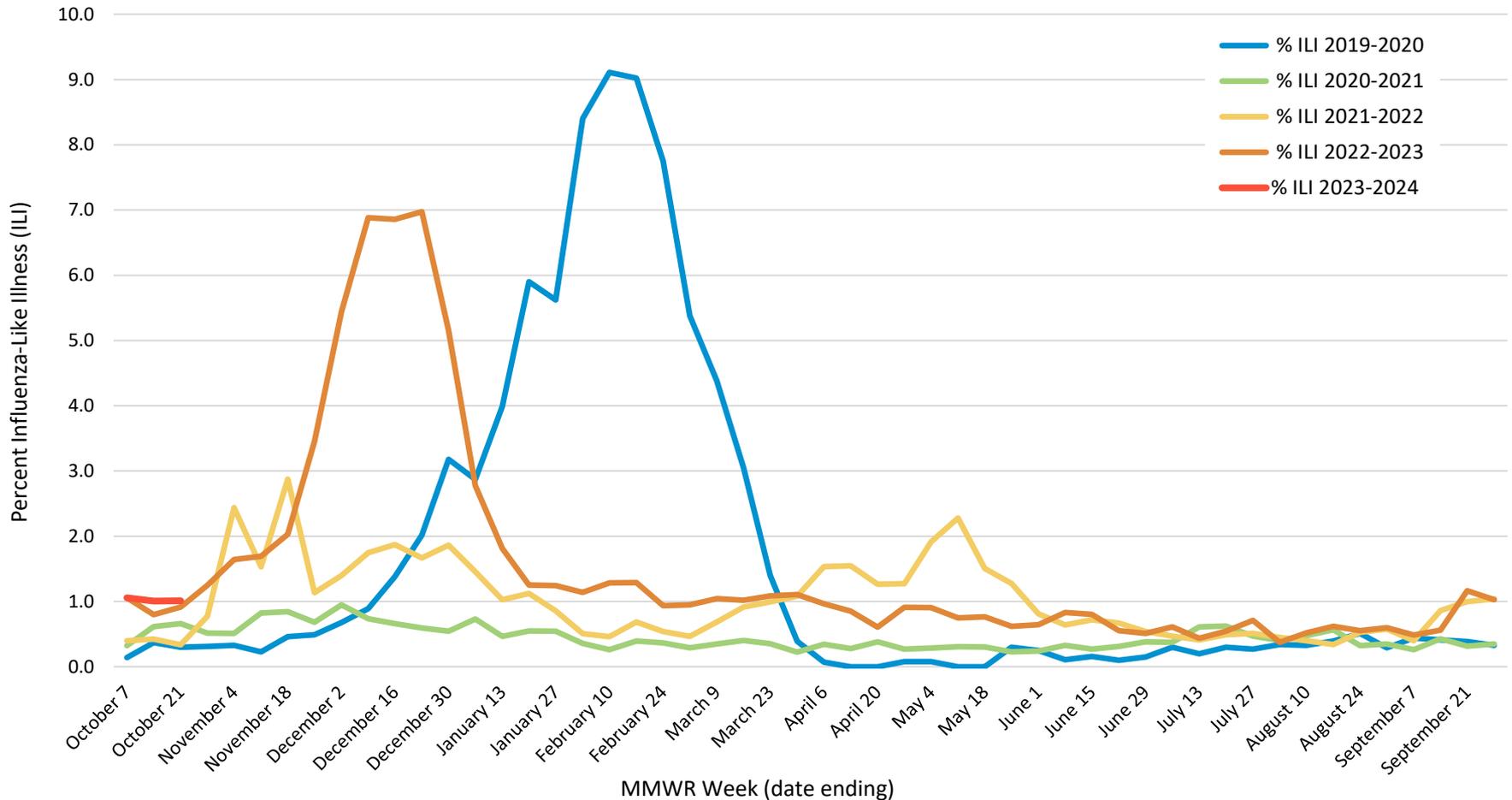
- Update on current flu season
- Reporting outbreaks
- Testing recommendations
- Infection control
- Outbreak monitoring
- Outbreak toolbox
- Respiratory Syncytial Virus



Influenza-like Illness



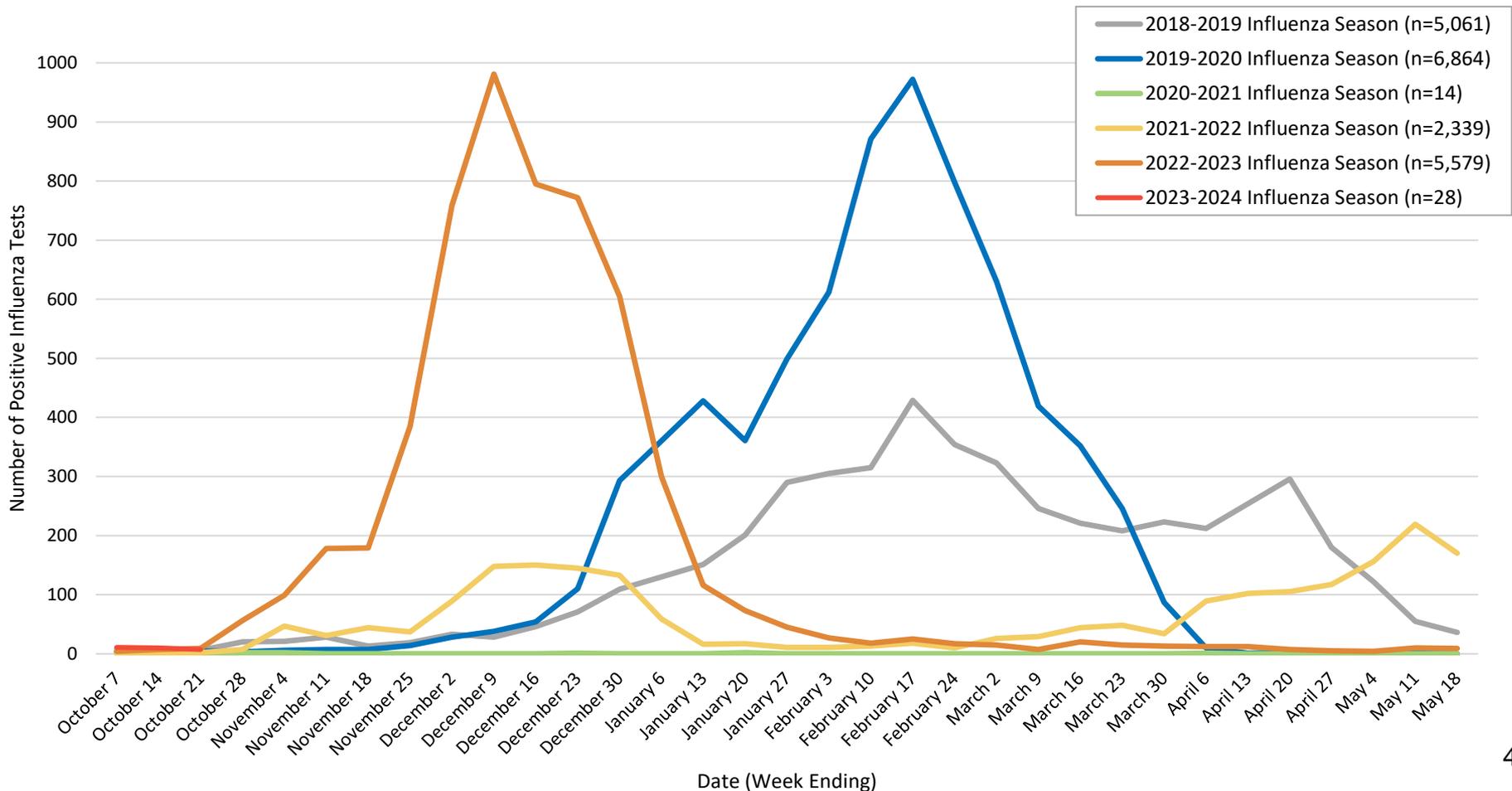
Percentage of Visits for Influenza-like Illness (ILI) reported by ILINet: Rhode Island, Seasons 2019-2024



All Hospital Influenza Positives: Season Comparison



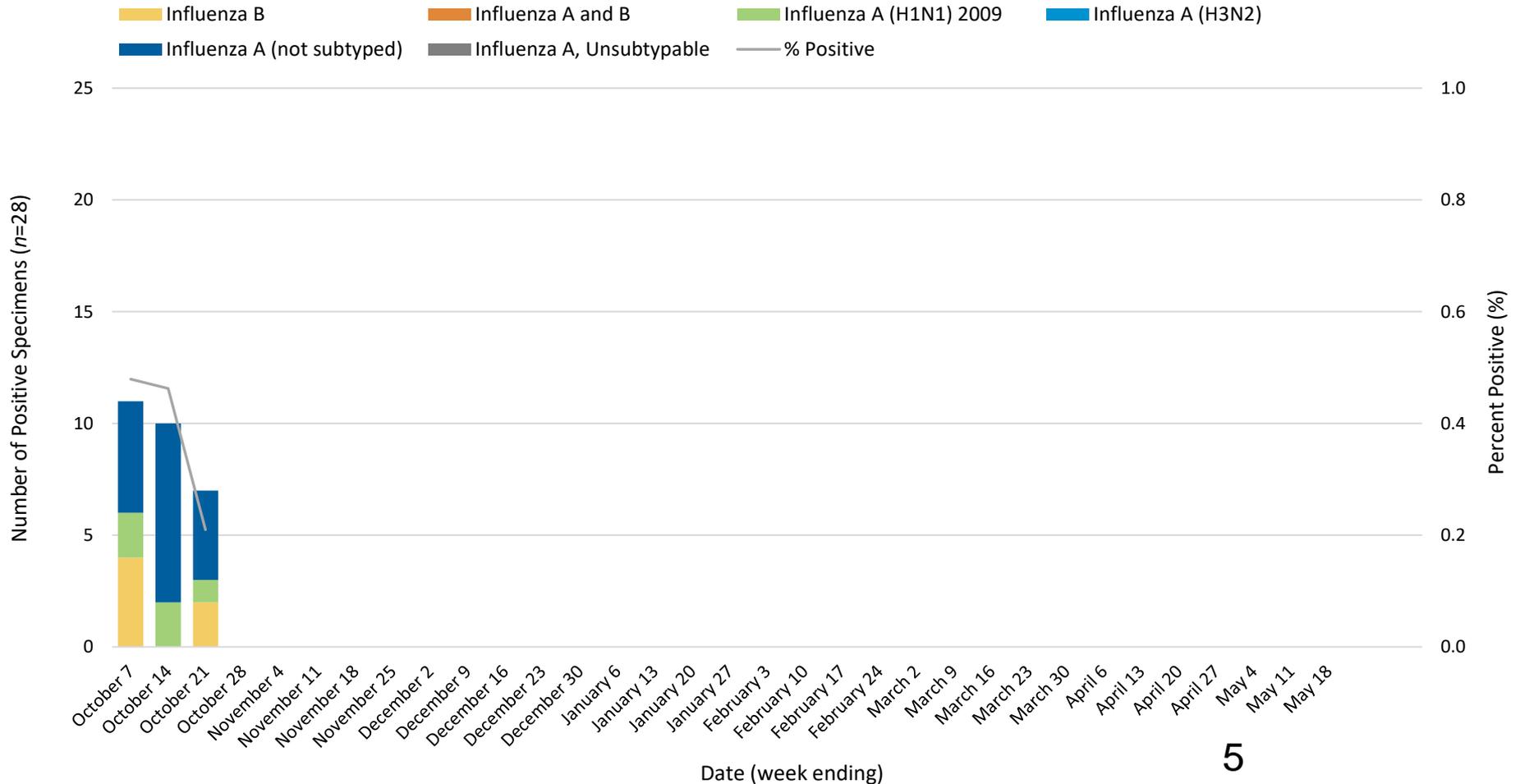
Positive Influenza Tests by Week, Rhode Island Hospitals, Comparison of Influenza Seasons, 2018-2024



All Hospital Influenza Positives: 2023-2024 Season



All Positive Influenza Tests by Strain and MMWR Week, Rhode Island Hospitals, 2023-2024



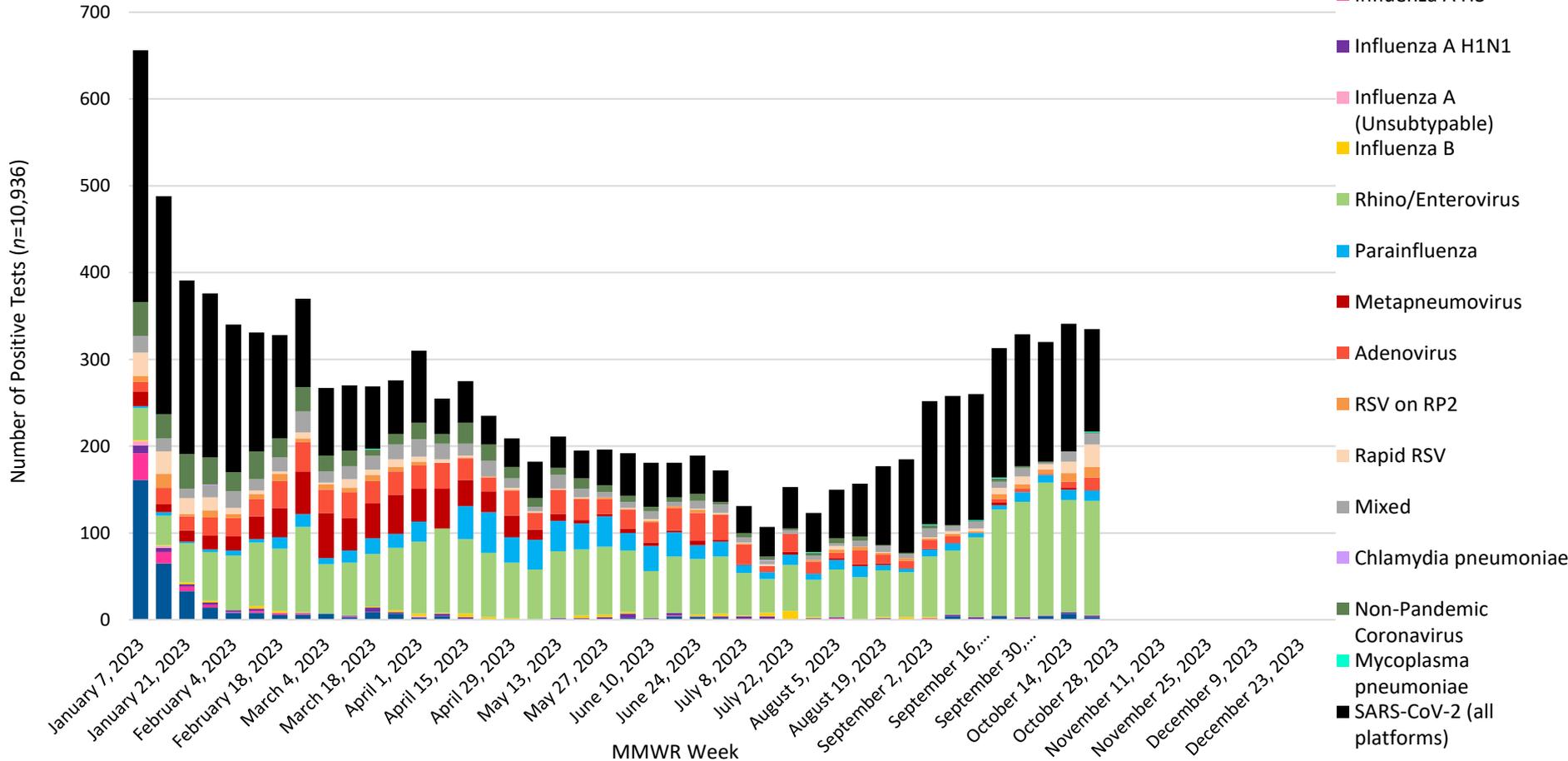
Lifespan Laboratories:

Lifespan Respiratory Pathogen Panel and Rapid Molecular Test Results

Includes all COVID-19-positive tests from Lifespan



Respiratory Pathogen Panel and Rapid Respiratory Test Positives Lifespan Microbiology Laboratory January 1, 2023-October 21, 2023

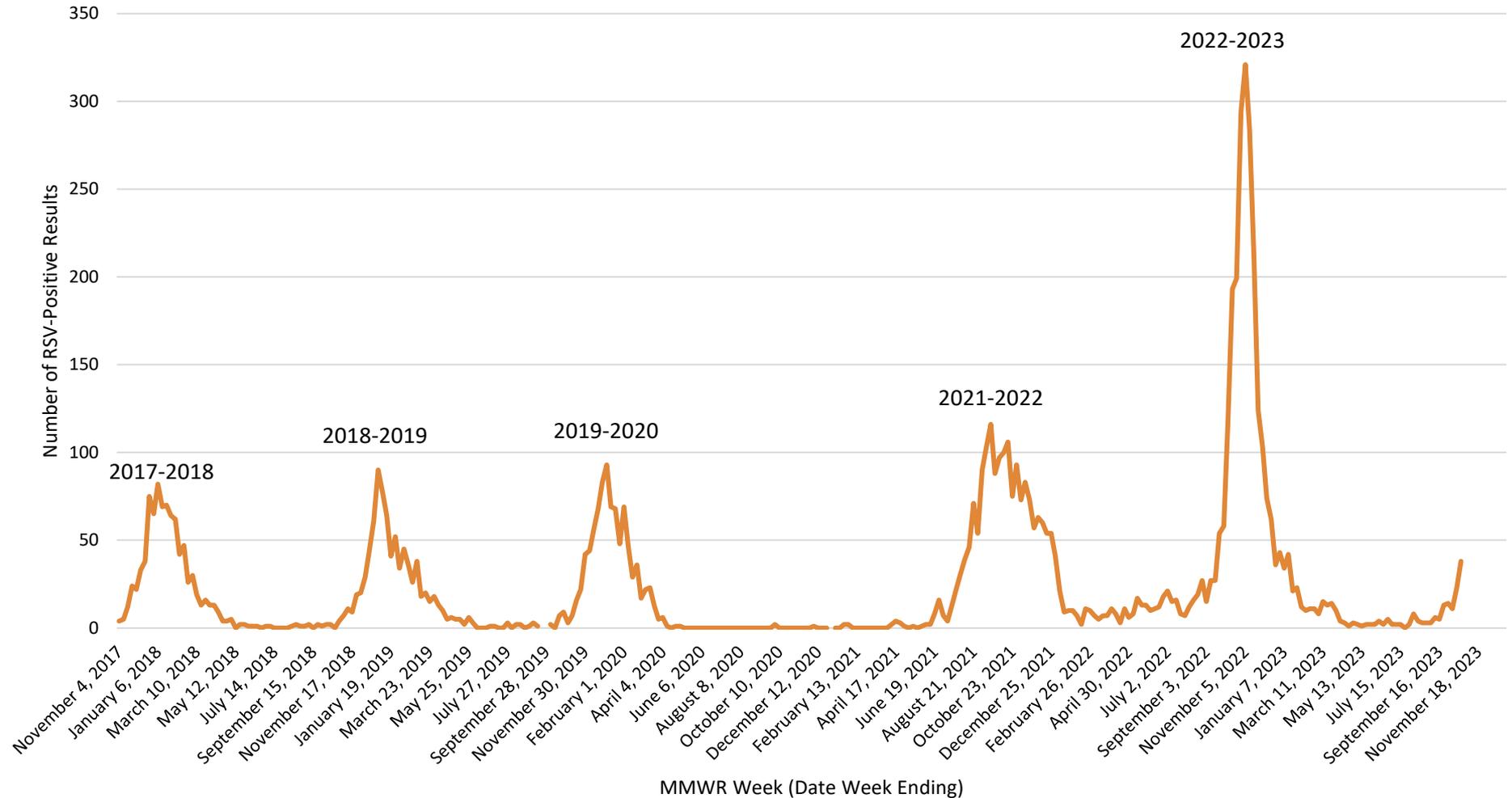


Lifespan Laboratories:

RSV Results on All Platforms: Comparison Between Seasons



RSV Positive Results by Week, Lifespan, 2017-2023, RP2 and Rapid Molecular Tests





Respiratory Illness Prevention

- Educate staff and residents to cover their cough or sneeze
- Wash hands properly
- Clean and disinfect high touched surfaces
- Monitor and manage ill healthcare personnel
- Explore options to improve ventilation and indoor air quality
- Vaccination

Vaccination



- Vaccination against the flu is the best method to prevent the spread of infection.
- Influenza vaccination significantly reduces hospitalizations and deaths.
- Adults aged ≥ 65 years are preferentially recommended to receive a higher dose or adjuvanted influenza vaccine, if possible.
- For more information on vaccine effectiveness:
<https://www.cdc.gov/flu/vaccines-work/2022-2023.html>



Respiratory Outbreaks



Within a congregate living setting, a respiratory outbreak is defined as:

- One lab-confirmed case of influenza
- or
- Two cases of influenza-like illness (ILI) within 72 hours of each other

Respiratory Outbreaks



Influenza-like illness (ILI) definition:

Fever/abnormal temperature

With

Cough and/or sore throat

*NOTE: Elderly individuals may present “abnormal temperature” (higher or lower than normal baseline) rather than a very high fever.

If a patient only has a cough, only has a sore throat, or only has cough and sore throat, they do not meet the ILI definition.

Call RIDOH to Report the Non-COVID-19 Respiratory Outbreak



If you suspect your facility has a respiratory outbreak, test for COVID-19.

If residents are COVID-19-negative:

Call the Center for Acute Infectious Disease Epidemiology at RIDOH at **401-222-2577** to report that the facility may have a respiratory outbreak



Call RIDOH to Report the Respiratory Outbreak, continued



- The RIDOH nurse will complete an intake form
- Please have the following information available:
 - Illness onset date of first case (resident or staff)
 - Signs and symptoms
 - Total number of residents and staff:
 - In facility
 - In outbreak area
 - With respiratory illness
 - With any lab-confirmed flu test
 - Hospital visits/admissions for respiratory illness
 - Deaths in persons with lab-confirmed flu
 - Vaccination status (flu and RSV)

Specimen Collection



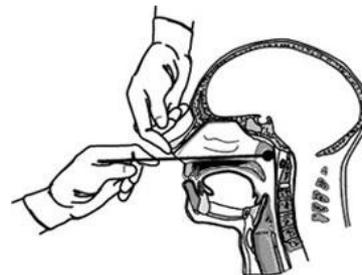
- You may be asked to pick up a flu test kit to collect and submit specimens to RI State Health Laboratories (RISHL)
- PCR testing helps confirm the outbreak and determine the flu strain
 - Rapid flu tests do not provide the ability to type the circulating strain(s) in your facility
- Only submit specimens if instructed by RIDOH
- **All specimens will be tested for flu and COVID-19**
- Specimens testing negative for flu and COVID-19 will be tested on a respiratory pathogen panel (which includes RSV)
- Results are faxed to your facility from RISHL



Specimen Collection



- Specimens should be collected from:
 - ~5 residents with ILI who have not started on antivirals
- How to collect a specimen:
 - Tip resident's head towards ceiling and insert dacron-tipped swab through nostril until a cough is elicited
 - Take swab, insert into viral transport medium, clip swab, cover, and refrigerate for storage and transport on ice
 - **Complete lab requisition form – make sure name, date of birth and requisition number on tube and form match**



Specimen Submission



Please batch specimens for submission and send them to:

RI State Health Laboratory:
50 Orms St, Providence, RI 02903
Monday-Friday 8:30 AM – 4:30 PM

Your facility is responsible for specimen collection and submission if requested by RIDOH

Reporting



- Outbreak forms are available in fillable, electronic formats
- After you report an outbreak, RIDOH will email you all the forms necessary for the outbreak including:
 - Staff and resident line lists
 - Outbreak summary form
- You will also receive a link to [Preventing Transmission of Viral Respiratory Pathogens in Healthcare Settings](#) and [Viral Respiratory Pathogens Toolkit for Nursing Homes](#)
- Completed forms should be emailed directly to RIDOH at doh.flu@health.ri.gov

The Line List: An Overview



- Once you have reported the outbreak to RIDOH, your facility should begin two line lists of ill persons (provided by RIDOH): residents and staff
- Line lists should be emailed to RIDOH at doh.flu@health.ri.gov initially and at regular reporting intervals
- Line lists are cumulative. Once an individual is placed on the list they should not be removed.
- Line lists should include those with **ILI and/or those with a positive influenza or other positive non-COVID-19 respiratory pathogen**
 - If an individual is laboratory-positive without symptoms of ILI, please include them in your lists

Toolkit: The Line List- Resident



EXAMPLE

Date: November 10, 2018							Contact Name: Jane Smith					
Facility Name: Green Meadows Nursing Home							Phone Number: (401) 222-2222					
Address: 123 Green Meadows Drive							Fax Number: (401) 333-3333					
City: Smithfield				Zip: 02917			Email: jsmith@greenmeadows.org					
Resident Name	Sex (M/F)	DOB	Floor & Room	SYMPTOMS			Date of Illness Onset	Flu Test Result & Subtype (Pos., Neg., Not tested, Type A, Type B)	Vaccinated for Flu? (Y/N) & Type, if known	Antivirals Taken? (Y/N; If yes, start date, dose, duration) Std: BID x 5 days	Hospital visit for respiratory illness? (Y/N; if yes, ER or Inpatient?)	Died? (Y/N; if yes, date)
				Abnormal temp/fever? (Y/N)	Cough? (Y/N)	Sore Throat? (Y/N)						
John Doe	M	1/1/1932	Fl 1 Rm 5	Y	Y	N	11/2/17	Pos Type A	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> High Dose <input type="checkbox"/> Quad <input type="checkbox"/> Other	Y-11/3/17 75mg BID x 5 days	Yes-ER	N
Jane Doe	F	2/2/1932	Fl 2 Rm 5	Y	Y	Y	11/4/17	Pos Type A	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> High Dose <input type="checkbox"/> Quad <input type="checkbox"/> Other	N	N	N

Remember: A resident **MUST** have abnormal temp/fever and one of the other symptoms to meet the definition for influenza-like illness. Just cough, just sore throat, or cough and sore throat do not count.

Monitoring Your Outbreak



At intake RIDOH will assign you one day per week to email the following information:

- New cases
- Hospital visits and admissions due to respiratory illness
- Infection control measure updates
- Antiviral treatment and prophylaxis usage



If you have a flu-related death or are seeing large increases in the number of illnesses, please call us rather than waiting for your reporting day!

Infection Control Recommendations



- Maintain droplet and standard precautions for residents with suspected or confirmed influenza, 7 days after illness onset or until 24 hours after the resolution of fever and respiratory symptoms, whichever is longer
- Administer antivirals and chemoprophylaxis as prescribed
- Monitor staff absenteeism and exclude those with ILI from work for 24 hours after fever subsides (without use of antipyretics)
- Before transferring a resident to an outside facility (such as a hospital), notify the facility of suspected/confirmed outbreak

Infection Control Recommendations



You may also consider:

- Restricting movement between healthy and outbreak-affected areas
- Avoiding new admissions or transfers to outbreak-affected areas
- Posting notices to limit visitation and exclude ill persons from visiting the facility
- Limiting large group activities
- Serving all meals in resident rooms as the outbreak spreads

RIDOH is here to provide guidance during outbreaks, but the facility makes all decisions

Antiviral Guidelines



Treatment:

- It is recommended that all long-term care residents **confirmed or suspected** to have influenza be treated immediately with an antiviral, such as:
 - Oseltamivir:
 - 75mg twice daily for 5 days
- Note: Dosage may need to be regulated by providers for patients with end-stage renal disease or on dialysis before starting Oseltamivir

Antiviral Guidelines (cont.)



Chemoprophylaxis:

- Chemoprophylaxis may be indicated for well residents and staff regardless of vaccination status
- Oseltamivir:
 - 75mg daily for a minimum of 2 weeks, and continuing for at least 7 days after the onset date of last known case is identified



**All influenza-associated deaths are
immediately reportable**

Call RIDOH at 401-222-2577



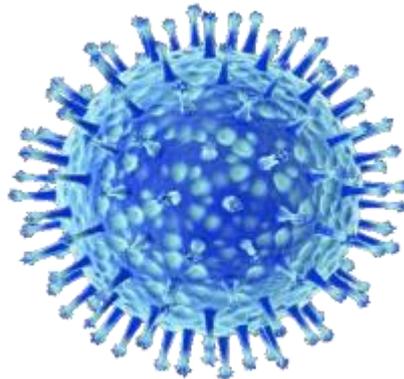
Influenza-Associated Death

- A death resulting from a clinically compatible illness that was confirmed to be influenza by an appropriate laboratory or rapid diagnostic test. There should be no period of complete recovery between the illness and death.

The End of the Outbreak



- RIDOH will declare a facility outbreak to be over when there have been no new cases in residents for **10 days**
- You must submit an **outbreak summary form** AND final line lists to RIDOH via email at doh.flu@health.ri.gov



Toolkit: The Outbreak Summary Form



EXAMPLE

BASIC INFORMATION			
Date: November 26, 2018		Contact Name: Jane Smith	
Facility Name: Green Meadows Nursing Home		Phone Number: (401) 222-2222	
Address: 123 Green Meadows Drive		Fax Number: (401) 333-3333	
City: Smithfield	Zip: 02917	Email: jsmith@greenmeadows.org	
OUTBREAK INFORMATION			
RESIDENTS		STAFF	
	<i>Date</i>		<i>Date</i>
Illness onset date of first resident during outbreak	11/2/2018	Illness onset date of first staff member during outbreak	11/2/2018
Illness onset date of last resident during outbreak	11/8/2018	Illness onset date of last staff member during outbreak	11/10/2018
	<i>Number</i>		<i>Number</i>
Total number of residents in facility on 1st day of outbreak (resident census)	200	Total number of staff in facility on 1st day of outbreak (staff census)	250
Number of ill residents MUST HAVE abnormal temp./fever AND at least one of the following: -Cough -Sore Throat	4	Number of ill staff MUST HAVE fever AND at least one of the following: -Cough -Sore Throat	4
Number with lab-confirmed flu	4	Number with lab-confirmed flu	2
Flu Type(s)	Flu A, H1N1	Flu Type(s)	Flu A, H1N1
Number of residents who went to the hospital for respiratory illness	# Inpatient: <u> 1 </u> # ER: <u> 1 </u>	Number of staff who went to the hospital for respiratory illness	# Inpatient: <u> 0 </u> # ER: <u> 1 </u>
Number of deaths with lab-confirmed flu	0	Number of deaths with lab-confirmed flu	0

Toolkit: The Outbreak Summary Form



EXAMPLE

VACCINATION INFORMATION			
RESIDENTS		STAFF	
Vaccine Type(s) Offered to Residents	High Dose	Vaccine Type(s) Offered to Staff	Standard trivalent
Total number of residents (ill + well) vaccinated against flu	185	Total number of staff (ill + well) vaccinated against flu	190
Number of ill residents vaccinated against flu	3	Number of ill staff vaccinated against flu	2
CHEMOPROPHYLAXIS INFORMATION			
The CDC recommends that when at least 2 residents are ill within 72 hours of each other and at least one resident has laboratory-confirmed influenza, the facility should initiate chemoprophylaxis to non-ill residents, regardless of vaccination status. Was this guidance followed?			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
To whom was chemoprophylaxis was offered? (Please select one)	<input type="checkbox"/> Well roommates <input checked="" type="checkbox"/> Well residents on the affected floor	<input type="checkbox"/> Well residents in the affected wing <input type="checkbox"/> Well residents in the entire facility	
Start date of chemoprophylaxis	11/4/2018	Duration of chemoprophylaxis	12 days
FOR RIDOH EPIDEMIOLOGIST USE ONLY			
FINAL OUTBREAK CLASSIFICATION	Influenza Type _____ Other: _____		

Respiratory Syncytial Virus (RSV)

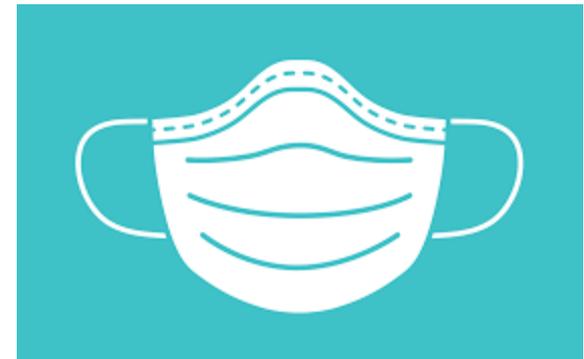


- Respiratory Syncytial Virus, RSV, is a cause of severe respiratory illness in older adults
- New vaccines against RSV are available for adults 60 and older
- CDC recommends that this population may receive an RSV vaccine, using shared clinical decision making with their provider
- The FDA has approved Arexvy, GSK and Abrysvo, Pfizer
- RSV vaccines are not expected to be offered through the State-Supplied Vaccine Program prior to the 2023-2024 RSV season. Check with your contracted pharmacies and alternate pharmacies for availability.

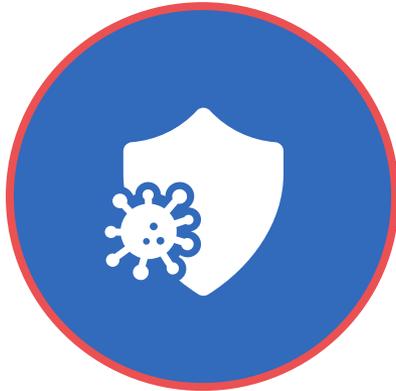
RSV – Infection Control Recommendations



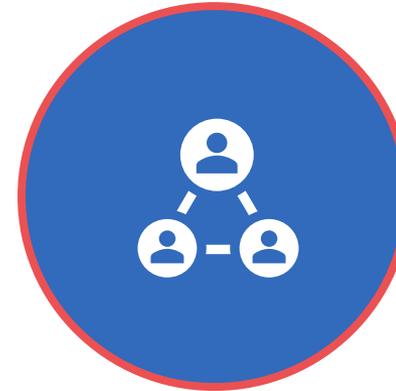
- Contact and standard precautions are recommended for duration of illness and your facility policy
- Wear mask according to standard precautions
- Increase disinfection of high touched surfaces



COVID-19 Remains a Reportable Illness



Report all cases and outbreaks online through the [Long-Term Care Results Portal](#).



Contact the Center for COVID-19 Epidemiology (CCE) team at ridoh.covid19ltc@health.ri.gov or **401-222-8022**
[Choose option #3 and ask for the Long-Term Care team].

Resources



- “Interim Guidance for Influenza Outbreak Management in Long-Term Care and Post-Acute Care Facilities”: <https://www.cdc.gov/flu/professionals/infectioncontrol/ltc-facility-guidance.htm>
- “Prevention Strategies for Seasonal Influenza in Healthcare Settings”: <http://www.cdc.gov/flu/professionals/infectioncontrol/healthcaresettings.htm>
- “Prevention and Control of Seasonal Influenza with Vaccines: Recommendations of the Advisory Committee on Immunization Practices (ACIP)—United States, 2023-24”: <https://www.cdc.gov/flu/professionals/acip/summary/summary-recommendations.htm>
- “Influenza Antiviral Medications: Summary for Clinicians”: <http://www.cdc.gov/flu/professionals/antivirals/antiviral-dosage.htm>
- “Type and Duration of Precautions Recommended for Selected Infections and Conditions”: <https://www.cdc.gov/infectioncontrol/guidelines/isolation/appendix/type-duration-precautions.html>
- “Respiratory Syncytial Virus (RSV) For Healthcare Provider”: <https://www.cdc.gov/rsv/clinical/index.html>
- RI Influenza Surveillance Data: <http://health.ri.gov/data/flu/>
- RI RSV Surveillance Data: <https://health.ri.gov/data/rsv/>
- National Influenza Surveillance: <https://www.cdc.gov/flu/weekly/index.htm>

Influenza Team Contact Info



Thank you!

Contact Us:

RIDOH Center for Acute Infectious Disease Epidemiology

Fax: 401-222-2488

Phone: 401-222-2577

Influenza Email: doh.flu@health.ri.gov

Lara Grenier, Influenza Nurse: lara.grenier@health.ri.gov

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