

Management of Influenza Outbreaks in Long Term Care Facilities

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Centers for Disease Control and Prevention: Prevention Strategies for Seasonal Influenza in Healthcare Settings¹

- ▶ Promote and administer seasonal influenza vaccine
- ▶ Take steps to minimize potential exposures
- ▶ Monitor and manage ill healthcare personnel
- ▶ Adhere to standard precautions
- ▶ Adhere to droplet precautions
- ▶ Use caution when performing aerosol-generating procedures
- ▶ Manage visitor access and movement within the facility
- ▶ Monitor influenza activity
- ▶ Implement environmental infection control
- ▶ Implement engineering controls
- ▶ Train and educate healthcare personnel
- ▶ Administer antiviral treatment and chemoprophylaxis of patients and healthcare personnel when appropriate

¹<http://www.cdc.gov/flu/professionals/infectioncontrol/healthcaresettings.htm>



Promote and administer seasonal influenza vaccine

- ▶ Annual influenza vaccination of all residents and healthcare personnel is recommended
- ▶ Pennsylvania requires that influenza vaccine be provided to all residents and offered to all personnel
- ▶ Healthcare personnel include all employees, contractors, attending physicians, and volunteers with patient contact
 - ▶ Housekeepers
 - ▶ Dietary staff
 - ▶ Chaplains
 - ▶ Hospice workers
 - ▶ Candy strippers



Take steps to minimize potential exposures - 1

- ▶ **Before arrival to a healthcare setting**
 - ▶ Instruct patients and visitors to inform HCP upon arrival if they have respiratory symptoms and to take precautions (mask, cough etiquette)
 - ▶ During periods of increased influenza activity, minimize elective visits by those with suspected or confirmed influenza



Take steps to minimize potential exposures - 2

- ▶ **Upon arrival and during visits to a healthcare setting**
 - ▶ Take steps to ensure that all persons with respiratory symptoms adhere to respiratory hygiene, cough etiquette, and hand hygiene
 - ▶ Posting visual alerts (signs, posters) at entrances and strategic places (waiting areas, elevators, cafeterias)
 - ▶ Provide facemasks
 - ▶ Provide hand hygiene supplies



Monitor and Manage Ill Healthcare Personnel - 1

Healthcare personnel who develop **fever and respiratory symptoms** (ILI) should:

- ▶ Not report to work, or if at work, stop patient care, don a facemask, promptly notify their supervisor and infection control/occupational health before leaving work
- ▶ Adhere to respiratory hygiene and cough etiquette after returning to work. If respiratory symptoms are still present, wear a facemask during patient care activities. Perform frequent hand hygiene.
- ▶ Be **excluded from work until at least 24 hours after they no longer have a fever** (without the use of fever-reducing medicines)

Healthcare personnel who develop **fever** should:

- ▶ Follow workplace policy for HCP with fever until a more specific cause of fever is identified or until fever resolves
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Monitor and Manage Ill Healthcare Personnel - 2

Healthcare personnel who develop **acute respiratory symptoms without fever** should:

- ▶ Report to occupational health for evaluation to determine the appropriateness of contact with patients
- ▶ If suspected of having influenza, consider antiviral treatment
- ▶ Adhere to respiratory hygiene, cough etiquette, and hand hygiene. If symptoms such as cough and sneezing are present, wear a facemask during patient care.



Monitor and Manage Ill Healthcare Personnel - 3

Facilities and organizations providing healthcare services should:

- ▶ Develop non-punitive, flexible sick leave policies to encourage HCP with suspected or confirmed influenza to stay home
- ▶ Ensure that all HCP, including staff who are not directly employed by the facility are aware of the policies
- ▶ Establish employee health services procedures for
 - ▶ Tracking absences
 - ▶ Reviewing job tasks and ensuring that employees with higher risk for exposure to influenza are given priority for vaccination
 - ▶ Ensuring that employees have prompt access to medical consultation and, if necessary, early treatment
 - ▶ Promptly identifying individuals with possible influenza



Adhere to Standard Precautions

- ▶ Hand hygiene
- ▶ Gloves
- ▶ Gowns



Adhere to Droplet Precautions

For patients with suspected or confirmed influenza

- ▶ For 7 days after illness onset or until 24 hours after resolution of fever and respiratory symptoms, *whichever is longer*
- ▶ Private room or area, or after consultation with infection control:
 - ▶ Cohorting of influenza cases
 - ▶ Remaining with existing roommate
- ▶ Facemask, respiratory hygiene, cough etiquette, and hand hygiene if transporting patient



Use caution when performing aerosol-generating procedures

- ▶ Only perform on suspected or confirmed influenza patients if medically necessary and cannot be postponed
- ▶ Limit the number of healthcare personnel present
- ▶ Conduct in airborne isolation room, if feasible
- ▶ Consider use of portable HEPA filtration units
- ▶ HCPs should adhere to standard precautions and use a face shield that fully covers the front and sides of the face or goggles
- ▶ HCPs should wear N95 or equivalent respiratory protection
- ▶ Unprotected HCP should not be allowed in the room until sufficient time has elapsed to remove potentially infectious particles
- ▶ Conduct environmental surface cleaning following procedures



Manage visitor access and movement within the facility

- ▶ **Limit visitors for patients in isolation for influenza**
 - ▶ Provide instruction, before visitors enter patient rooms, on hand hygiene, limiting surfaces touched, and use of personal protective equipment
 - ▶ Visitors should not be present during aerosol-generating procedures
- ▶ **Develop visitor policies for persons with acute respiratory symptoms**
 - ▶ All visitors should follow respiratory hygiene and cough etiquette
 - ▶ Restriction policies should consider location of patient being visited
- ▶ **Screen visitors for symptoms of acute respiratory illness**
- ▶ **Limit movement of visitors within the facility**
- ▶ **Advise visitors to contact their healthcare provider for information about influenza vaccine**



Monitor influenza activity

- ▶ Promptly alert HCP about increased influenza activity in the community and when an outbreak occurs within the facility
- ▶ Close collaboration and communication with local public health authorities (1-877-PA-HEALTH)



Implement engineering controls

- ▶ Physical barriers (partitions, curtains) in shared areas
- ▶ Closed suctioning systems for airways suction
- ▶ Appropriate air-handling systems



Implement environmental infection control

- ▶ Standard cleaning and disinfection
- ▶ Proper management of laundry, food service utensils, and medical waste



Train and educate healthcare personnel - 1

- ▶ All HCP should receive job- or task-specific education and training on preventing transmission of infectious agents, including influenza
- ▶ Periodic updates
- ▶ Document competency initially and repeatedly
- ▶ Ensure that HCP employed by outside employers meet these requirements



Train and educate healthcare personnel - 2

Education should include key aspects of influenza and its prevention:

- ▶ Signs, symptoms, complications and risk factors for complications
- ▶ Administrative controls
 - ▶ Vaccination
 - ▶ Respiratory hygiene and cough etiquette
 - ▶ Sick leave policies
 - ▶ Precautions for aerosol-generating procedures
- ▶ Engineering controls and work practices including infection control procedures



Administer antiviral treatment and chemoprophylaxis of patients and healthcare personnel when appropriate

- ▶ Patients treated with antiviral medications continue to shed influenza virus
 - ▶ Maintain hand hygiene, respiratory hygiene and cough etiquette even while on treatment
- ▶ Widespread resistance to amantidine/
rimantidine – **NOT RECOMMENDED**
- ▶ Increasing resistance to oseltamivir – Consult public health for latest recommendations



Healthcare Personnel at Higher Risk for Complications of Influenza

- ▶ Pregnant women, including women up to 2 weeks postpartum
- ▶ Persons ≥ 65 years of age
- ▶ Persons with chronic medical conditions:
 - ▶ Asthma
 - ▶ Heart disease
 - ▶ Diabetes
 - ▶ Immunosuppressive conditions
- ▶ Morbidly obese persons

Vaccination and early treatment with antiviral medications can decrease the risk of hospitalizations and deaths in these persons.

Consider work accommodations to avoid potentially high-risk exposures.

