

Influenza Outbreak Control in Long-Term Care Facilities

Prepare for a flu outbreak

- Vaccinate all residents and staff
- Prepare for outbreaks
- •Obtain pre-approved Tamiflu orders from physicians
- •Monitor residents, staff & visitors for flu-like symptoms
- •Establish and/or evaluate flu testing protocol

Identify a flu outbreak

- Defined as: 1 lab-confirmed or ≥2 residents with influenza-like illness (ILI) within 72 hours
- ILI symptoms include: fever, cough, sore throat, fatigue, body aches, runny or stuffy nose
- Elderly may have atypical flu symptoms: chills, confusion, headache, loss of appetite, gait instability, or pnuemonia
- Perform influenza testing on ill residents
- **Report an outbreak or any flu-associated death** to Public Health-Seattle & King County: call 206-296-4774 or fax the report form to 206-296-4803

Monitor and control infection

- •Begin daily monitoring of residents and staff for ILI symptoms
- •Implement standard and droplet precautions
- •Wear gowns, gloves & facemasks
- Perform hand hygiene before and after contact with resident and/or resident environment
- Implement control measures
- •Restrict ill resident to room, limit group activities, avoid new admissions to unit with symptomatic residents, designate staff to care for ill residents
- •Limit visitation. Exclude ill persons from visiting
- Monitor staff absenteeism due to respiratory illness. Exclude ill staff until fever-free for 24 hours

Treat ill residents

- •Administer antiviral treatment immediately, unless contraindicated, to all long term care residents who have confirmed or suspected influenza
- Do not wait for lab results. Treatment works best when started within 2 days of symptom onset
- Follow CDC antiviral treatment dosing guidelines https://www.cdc.gov/flu/professionals/antivirals/summary-clinicians.htm

Administer **Prophylaxis**

- Administer prophy to all non-ill residents, unless contraindicated, when ≥2 residents ill within 72hours AND at least 1 resident lab-confirmed influenza
- Consider offering prophy to unvaccinated staff
- Follow CDC antiviral chemoprophylaxis dosing guidelines https://www.cdc.gov/flu/professionals/antivirals/summary-clinicians.htm

Communicable Disease Epidemiology and Immunization Section 401 5th Ave, Suite 1250 Seattle WA 98104

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Influenza in LTCF: Steps to Control an Outbreak

Control the spread of infection

- •Educate residents and staff about hand hygiene and cough etiquette. Post signs
- Provide staff in-service about hand washing and use of personal protective equipment (PPE)
- •Ensure access to sinks, soap, water and alcohol-based hand sanitizer
- •Increase environmental cleaning and disinfecting hand rails, door knobs, common surfaces

Protect residents

- Restrict ill residents to their rooms
- •If 2 or more residents with influenza-like illness AND 1 lab confirmed influenza, cancel large group activities and consider serving all meals in resident rooms
- Avoid new admissions or transfers to units with symptomatic residents

Monitor and exclude ill Staff

- •Monitor and exclude ill personnel with influenza-like illness until at least fever free for 24 hours without the use of fever-reducing medication
- Restrict personnel movement from areas of the facility with ill residents to unaffected areas
- •Implement standard and droplet precautions (gowns, gloves, facemask)

Educate Visitors

- •Limit visitation and exclude ill visitors from visiting facility via posted notices
- Provide facemasks and remind visitors of need for good hand hygiene
- •Consider restricting visitation by children during influenza outbreak

Vaccinate residents and staff

• Administer current season's influenza vaccine to unvaccinated residents and health care personnel per current vaccination recommendations

Report outbreaks and deaths

- •Report an outbreak or any flu-associated death to Public Health-Seattle & King County: call 206-296-4774 or fax the report form to 206-296-4803
- •Report an outbreak to the Licensor: WA DOH DSHS 1-800-562-6078

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