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| **Infection Control Policy**  | **Subject: Influenza, Influenza Like Illness Outbreak** |
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| **Effective:**  | **Revised:**  |

**Policy:** It is the Policy of this Facility to identify, report and treat Influenza and Influenza like illness in accordance with NYSDOH and CDC guidance

**Procedure**:

1. All Direct Care staff are responsible to observe and report any identification of influenza and/or influenza like symptoms to the Unit nurse/RNS
2. The resident(s) will be placed on Droplet precautions.
3. The RNS will assess the resident and notify the Physician for follow up testing and orders for treatment as indicated.
4. A cluster or outbreak of influenza-like illness (defined as a measured temperature\* ≥37.8°C [100°F] with cough or sore throat) in a health care facility is defined as:
	* One or more *health care facility-associated case(s)* of confirmed influenza in patient(s)/resident(s), or
	* Two or more cases of influenza-like illness among health care workers and patients/residents of a facility on the same unit within 7 days.
5. The resident will remain on Droplet Precautions and confined to their rooms or restricted to the affected unit for at least 7 days or until 24 hours after all fevers have resolved without the aid of anti-pyretic medication (e.g., ibuprofen, acetaminophen), whichever is longer.
6. Ill staff should not be allowed to work until 24 hours after fever has resolved without the aid of anti-pyretic medication (e.g., ibuprofen, acetaminophen).
7. The Facility will notify  [NYSDOH Regional Epidemiologist](https://www.health.ny.gov/professionals/diseases/reporting/communicable/infection/regional_epi_staff.htm) of the cluster/outbreak within 24 hours of recognition by submitting a report on the Nosocomial Outbreak Reporting Application (NORA) system located on the Health Commerce System (HCS;
8. The Facility IP will develop and maintain a respiratory line ([http://www.health.ny.gov/professionals/diseases/reporting/communicable/infection/docs/respiratory\_illness\_line\_list\_form.pdf](https://www.health.ny.gov/professionals/diseases/reporting/communicable/infection/docs/respiratory_illness_line_list_form.pdf)) to record as much information as possible about individual ill patients/residents. A separate list should be maintained if ill staff members are identified.

9. The Facility will implement the following Infection control measures:

* + Offer influenza vaccine to unvaccinated patients/residents and staff.
	+ Maintain Standard Precautions for all patients.
	+ Confine ill patients/residents to their rooms and place them on Droplet Precautions for 7 days or until 24 hours after fever has resolved without the aid of anti-pyretic medication (e.g., ibuprofen, acetaminophen), whichever is longer.
	+ Minimize floating of staff.
1. Provide in-service training for staff to reinforce the need to adhere to infection prevention and control measures for respiratory outbreaks. Education should include:
	* Standard and Droplet Precautions
	* Cough etiquette and respiratory hygiene
	* Hand hygiene
	* Environmental cleaning
2. Ensure sufficient supplies of hand hygiene materials and surgical or procedure masks are available and readily accessible for patients/residents, staff, and visitors.
3. Restrict ill persons from visiting the facility.
4. Ensure appropriate and effective environmental cleaning of all patient/resident care areas, especially in the areas where patients/residents are ill.
5. Notify receiving facilities of the outbreak when transfers occur.
6. Additionally, if one or more specimens test positive for influenza the Facility will:
* Re-offer influenza vaccine to unvaccinated patients/residents and staff. \*
* Use antiviral medication for influenza treatment and chemoprophylaxis in accordance with current CDC guidelines, available at: <http://www.cdc.gov/flu/professionals/antivirals/>
1. **Antiviral treatment/prophylaxis will not be delayed while awaiting testing results.**
2. Offer influenza vaccination and place new admissions on antiviral prophylaxis during the outbreak period.
3. Do not admit patients/residents to units where patients/residents are ill.
4. Limit patient/resident movement from the affected unit(s).
5. Notify visitors that influenza is occurring in the facility.
6. Restrict ill persons from visiting the facility.

**REFERENCES**

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

<https://www.health.ny.gov/diseases/communicable/control/respiratory_disease_checklist.htm>.