

Prevention and Control Measures: Influenza and Influenza-like Illness in Long-term Care Facilities

Transmission:

Influenza can be spread when droplets from an ill person's cough or sneeze come into contact with
mucous membranes in the eyes, mouth, or nose of another person, or when a person touches a surface
or object contaminated with influenza virus.

Prevention and Control Measures:

- Offer the current season's influenza vaccine to unvaccinated residents and staff, if prior to June 30.
- Encourage early testing for influenza of residents and staff exhibiting influenza-like symptoms anytime throughout the year. Educate facility about ADPH Influenza Testing procedures.



- Consult facility's Medical Director about the administration of influenza antiviral medications to residents with influenza-like symptoms and all exposed residents and healthcare personnel in the facility.
- Post signs at entrances alerting the public of an influenza-like illness (ILI) in the facility, limit visitation (especially children), and exclude ill persons from visiting the facility.
- Place ill residents in a private room when possible. If a private room is not available, place (cohort) residents suspected of having influenza with one another.
- Request symptomatic residents stay in their rooms, including restriction from common activities, and
 meals served in their rooms. If resident movement or transport is necessary, provide a mask for the
 resident to wear.
- Limit the number of large group activities in the facility and serve all meals in resident rooms when the outbreak is widespread (involving multiple units of the facility).
- Monitor personnel absenteeism due to respiratory symptoms and exclude those with symptoms from work for at least 24 hours after they have no fever.







- Restrict personnel movement from areas of the facility having illness.
- Implement droplet precautions for residents with suspected or confirmed influenza for 7 days after illness onset or until 24 hours after the resolution of fever and respiratory symptoms, whichever is longer, while a resident is in a healthcare facility.
- Wear a facemask upon entering the resident's room. Remove the facemask when leaving the resident's room and dispose of the facemask in a waste container.
- Require healthcare personnel or visitors wear gloves and/or gowns, if contact with respiratory
 secretions or potentially contaminated surfaces is anticipated, and to change gloves and gowns after
 each resident encounter.
- Instruct healthcare personnel and visitors to perform hand hygiene before and after touching the resident, after touching the resident's environment, or after touching the resident's respiratory secretions, whether or not gloves are worn.
 Gloves do not replace the need for performing hand hygiene.



- Avoid new admissions or transfers to wards with symptomatic residents. Facility may accept new
 admits or transfers to wards/units with no ILI affected residents.
- Communicate information about residents with suspected or confirmed influenza to appropriate personnel before transferring them to other departments or healthcare facilities.

For More Information:

Visit cdc.gov and type <u>influenza</u> in the SEARCH box.





