

# Recommendations for Prevention and Control of Influenza Outbreaks in Adult Family Homes

This document provides general guidance to long term care facilities (LTCF) on preventing, detecting, reporting, and controlling suspected and confirmed influenza outbreaks. Additional guidance for managing influenza outbreaks in long term care facilities is available at: <http://www.cdc.gov/flu/professionals/infectioncontrol/ltc-facility-guidance.htm>

## Preventing Outbreaks

What is an outbreak?



A single resident with a positive flu test

OR

Two or more residents with acute febrile respiratory illness\* onset within 72 hours of each other

\*Acute febrile respiratory illness:

- |  |                                     |
|--|-------------------------------------|
| • Fever ( $\geq 100.4^{\circ}\text{F}$ ) | • Dry cough or non-productive cough |
| • Muscle pain (Myalgia)                  | • Sore throat (Pharyngitis)         |

Preventing outbreaks



**Influenza vaccination** is the first action you can take to protect residents and staff at your facility. Upon admission and annually, AFHs must provide access on-site or make available elsewhere for all residents to obtain the influenza virus immunization per [RCW 74.42.285](#) and [WAC 388-97-1340](#)

**Other year-round prevention measures** include:

- **Follow [standard precautions](#)<sup>1</sup> when providing care to all residents to prevent the spread of illness at your facility.**
  - o Practicing good hand and respiratory hygiene are practices included in [standard precautions](#)<sup>1</sup> and should be used for all resident care.
  - o Provide hand and respiratory hygiene information and materials (tissues, supplies for hand hygiene, waste receptacles) at facility year-round for easy access and improved practices from staff and residents.
  - o Staff can wear personal protective equipment, such as gown and gloves for any resident-care activity when contact with blood, body fluids, secretions (including respiratory), or excretions is anticipated.
- **Limit visitation of others to your facility that are ill, including ill staff.**
  - o Develop a communication process to let family and visitors know the importance of not visiting when they are symptomatic or ill.
  - o Consider a process for staff to perform symptom screening for respiratory illness during influenza season to prevent symptomatic or ill staff from working.
  - o Develop a procedure for staff to report illness to employers and to understand the importance of staying home when ill.
- **Have an Influenza Outbreak Management Plan for your facility.**
  - o Early recognition and testing of symptomatic individuals will help prepare your facility in taking the correct steps to prevent spread in your facility.
  - o Influenza testing can be performed on individuals regardless of influenza vaccination status.
    - Do not wait for test results to confirm flu for symptomatic individuals to start [droplet](#)<sup>2</sup> precautions and to consult their PCP for antiviral treatment.



## What to Do If an Outbreak is Suspected

1	<p>Separate ill and symptomatic individuals from healthy individuals at your facility to prevent the spread of illness. Start <a href="#">droplet precautions</a><sup>2</sup> for individuals showing symptoms of the flu:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 33%;">Common signs and symptoms of Flu</th> <th style="width: 33%;">Warning signs of Flu</th> <th style="width: 33%;">Subtle symptoms</th> </tr> </thead> <tbody> <tr> <td> <ul style="list-style-type: none"> <li>Fever* or feeling feverish/chills</li> <li>Cough</li> <li>Sore throat</li> <li>Runny or stuffy nose</li> <li>Muscle or body aches</li> <li>Headaches</li> <li>Fatigue (tiredness)</li> <li>Some people may have vomiting and diarrhea</li> </ul> <p style="font-size: 0.9em; margin-top: 10px;">*It's important to note that not everyone with flu will have a fever.</p> </td> <td> <ul style="list-style-type: none"> <li>Difficulty breathing or shortness of breath</li> <li>Persistent pain or pressure in the chest or abdomen</li> <li>Persistent dizziness, confusion, inability to arouse</li> <li>Seizures</li> <li>Not urinating</li> <li>Severe muscle pain</li> <li>Severe weakness or unsteadiness</li> <li>Fever or cough that improve but then return or worsen.</li> <li>Worsening of chronic medical conditions</li> </ul> </td> <td> <p>Note that elderly patients may experience subtle symptoms, including:</p> <ul style="list-style-type: none"> <li>Anorexia</li> <li>Mental status changes</li> <li>Pneumonia</li> <li>Low-grade or no fever</li> <li>Worsening of chronic respiratory conditions</li> <li>Worsening congestive heart failure</li> </ul> </td> </tr> </tbody> </table> <p style="font-size: 0.9em; margin-top: 10px;"><b><i>*These lists are not all inclusive. Please consult a medical provider for any other symptom that is severe or concerning.</i></b></p> <p style="font-size: 0.9em; margin-top: 5px;">CDC Flu Symptoms &amp; Complications: <a href="https://www.cdc.gov/flu/symptoms/symptoms.htm">https://www.cdc.gov/flu/symptoms/symptoms.htm</a></p>	Common signs and symptoms of Flu	Warning signs of Flu	Subtle symptoms	<ul style="list-style-type: none"> <li>Fever* or feeling feverish/chills</li> <li>Cough</li> <li>Sore throat</li> <li>Runny or stuffy nose</li> <li>Muscle or body aches</li> <li>Headaches</li> <li>Fatigue (tiredness)</li> <li>Some people may have vomiting and diarrhea</li> </ul> <p style="font-size: 0.9em; margin-top: 10px;">*It's important to note that not everyone with flu will have a fever.</p>	<ul style="list-style-type: none"> <li>Difficulty breathing or shortness of breath</li> <li>Persistent pain or pressure in the chest or abdomen</li> <li>Persistent dizziness, confusion, inability to arouse</li> <li>Seizures</li> <li>Not urinating</li> <li>Severe muscle pain</li> <li>Severe weakness or unsteadiness</li> <li>Fever or cough that improve but then return or worsen.</li> <li>Worsening of chronic medical conditions</li> </ul>	<p>Note that elderly patients may experience subtle symptoms, including:</p> <ul style="list-style-type: none"> <li>Anorexia</li> <li>Mental status changes</li> <li>Pneumonia</li> <li>Low-grade or no fever</li> <li>Worsening of chronic respiratory conditions</li> <li>Worsening congestive heart failure</li> </ul>
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2	<p>Work with your facility healthcare provider or resident PCP to perform influenza testing on symptomatic individuals at your facility to identify an influenza outbreak at your facility.</p>						
3	<p>When you identify that an outbreak is occurring at your facility, notify staff, residents, family members/visitors as soon as possible. Communicate with visitors to limit their visits while your facility is in an outbreak in order to help prevent further spread of illness.</p>						
4	<p><b>Report all suspected and confirmed outbreaks to your <a href="#">Local Health Jurisdiction (LHJ)</a> per Washington Administrative Code (WAC) <a href="#">246-101-305</a>.</b></p> <p>Follow state public health and local health recommendations listed in the <b>Checklist for Controlling Influenza Outbreaks in Adult Family Homes</b> below.</p>						



# Checklist for Controlling Influenza Outbreaks in Adult Family Homes

Recommendations	Recommended By LHJ	Implemented By Facility
<b>Taking care of Ill Residents</b>		
<p>Certain people are at increased risk of serious flu-related complications (including young children, people 65 and older, pregnant people and people with certain medical conditions). Antiviral drugs can be used to treat flu illness and can prevent serious flu complications. Work with your facility healthcare provider or resident PCP who may prescribe antivirals for treating flu for ill and exposed residents are your facility. Do <i>not</i> wait for laboratory confirmation of flu to initiate treatment.</p>		
<p>Implement <a href="#">droplet precautions</a><sup>2</sup> while continuing to follow <a href="#">standard precautions</a><sup>1</sup> for suspected or confirmed cases. Continue <a href="#">droplet isolation precautions</a><sup>2</sup> for 7 days since symptoms first appeared or until the individual has been fever free and without respiratory symptoms for at least 24hours without the use of medications to lower the fever. <a href="#">Droplet isolation precautions</a><sup>2</sup> may last longer than 7 days if the individual continues to have a fever and respiratory symptoms.</p>		
<p>Healthcare providers should wear a NIOSH-approved respiratory protection such as a fit-tested particulate filtering facepiece (e.g., N95) or higher (e.g., powered air-purifying respirator, elastomeric respirator) during aerosol-generating procedures.</p> <p><a href="https://www.cdc.gov/flu/professionals/infectioncontrol/healthcaresettings.htm">https://www.cdc.gov/flu/professionals/infectioncontrol/healthcaresettings.htm</a></p>		
<p>Restrict ill residents to their rooms.</p> <ul style="list-style-type: none"> <li>If private rooms are not available, consider other placement options such as cohorting ill residents with the same condition, or ensuring at least 3 feet of separation and a physical barrier (e.g., curtain) between ill and well roommates.</li> </ul>		
<p>Ill residents who must leave their room should limit contact with others as much as possible, wear a facemask and be instructed to cover their nose and mouth with a tissue when coughing and sneezing and practice good hand hygiene.</p>		
<p>Your local health jurisdiction (LHJ) may request additional laboratory testing of staff and residents. Work with your LHJ on request for specimen sample collections if requested.</p> <ul style="list-style-type: none"> <li><b>Upon local health jurisdiction approval</b>, specimens can be submitted to the Washington State Public Health Laboratories</li> </ul>		

(PHL) for influenza testing free of charge per instructions available at: <a href="http://www.doh.wa.gov/Portals/1/Documents/pubs/301-018-InfluenzaTestingPHL.pdf">http://www.doh.wa.gov/Portals/1/Documents/pubs/301-018-InfluenzaTestingPHL.pdf</a>		
<b>Staff</b>		
Exclude ill staff, including volunteers, from work for <b>at least</b> 24 hours after resolution of fever* (without the use of fever-reducing medications). <ul style="list-style-type: none"> <li>Those with ongoing respiratory symptoms should be evaluated by a health care provider to determine the appropriateness of returning to work.</li> </ul>		
Assign staff to care for ill residents and others to care for well residents and minimize staff movement between areas in the facility with illness and areas not affected by the outbreak if possible. <ul style="list-style-type: none"> <li>Consider setting up a separate break room for staff caring for ill residents, and disinfect surfaces used by all staff (such as time clocks) or set up an interim system to avoid contamination of shared surfaces.</li> </ul>		
<b>Vaccination</b>		
Work with your facility healthcare provider/PCP and LTC Pharmacy to offer influenza vaccine to all previously unvaccinated residents and staff.		
<b>Administration of Chemoprophylaxis (Prescribed antiviral medication)</b>		
Work with your facility healthcare provider/primary care provider and Long-Term Care Pharmacy to offer influenza chemoprophylaxis to all <b>non-ill residents regardless of vaccination status</b> . <ul style="list-style-type: none"> <li>Remember that ill persons should receive antiviral treatment.</li> </ul>		
Remember that unvaccinated staff are also at risk for influenza. Consult your local health jurisdiction about the use of chemoprophylaxis for previously unvaccinated staff.		
<b>Education/Hand Hygiene</b>		
Educate staff, residents and visitors regarding outbreaks and following <a href="#">standard precautions</a> <sup>1</sup> by reminding them about the need for hand and respiratory hygiene.		
Post signs alerting staff, residents, and visitors to the outbreak.		

<b>Resident Movement/Admissions/Transfers</b>		
Limit large group activities in the facility and consider serving all meals in rooms to avoid gathering of residents and spread of illness.		
If a resident is transferred to another healthcare facility during an outbreak, notify the receiving facility of the outbreak whether the resident being transferred has symptoms.		
As long as appropriate infection control measures are maintained, facilities can admit new residents. It is important to inform potential new residents of the outbreak so they may choose whether to postpone their admission. Facilities can work with their LHJ to determine whether it is safe to admit new residents during an outbreak.		
<b>Visitors</b>		
Exclude ill visitors from the facility.		
Alert visitors to wear masks and of the need for good hand washing with soap and water or alcohol-based hand sanitizer while visiting a resident ill with influenza-like illness.		
Work with your LHJ to determine if visitation must be limited until the outbreak is over.		
<b>Active Surveillance / Communication</b>		
Track all resident and staff case counts, symptoms and date of onset, testing, vaccination information and hospitalizations using the <b>line list for outbreaks in long term care facilities</b> form. Track these daily and continue for 1 week from the last onset (from the last positive influenza test or symptomatic individual) date logged. (e.g., Date onset 5/1/23, continue tracking for 1 week through 5/8/23, until no more cases are identified during your outbreak).		
Report outbreak to the Department of Social and Health Services or other licenser per <a href="https://www.wa.gov/health-services">WAC 388-76-10225</a> .		
Communicate with the local health jurisdiction daily.		

\*Healthcare providers with confirmed or suspected influenza should not care for patients in Protective Environments such as stem cell transplant patients until 7 days from symptom onset or until resolution of symptoms, whichever is longer.

**1 Standard Precautions:** <https://www.cdc.gov/infectioncontrol/basics/standard-precautions.html>

**2 Droplet Precautions:** <https://www.cdc.gov/infectioncontrol/basics/transmission-based-precautions.html>

## Guidance and Recommendations

CDC. Guidance on Influenza Outbreak Management in Long Term Care Facilities  
<http://www.cdc.gov/flu/professionals/infectioncontrol/ltc-facility-guidance.htm>

CDC. Guidance on Infection Control in Healthcare Facilities  
<http://www.cdc.gov/flu/professionals/infectioncontrol/>

CDC. Prevention and control of seasonal influenza with vaccines: recommendations of the Advisory Committee on Immunization Practices—United States, 2017–2018 Influenza Season. MMWR 2017; 66(2):1-20.  
<https://www.cdc.gov/mmwr/volumes/66/rr/rr6602a1.htm>

CDC. Antiviral Drugs: Recommendations of the Advisory Committee on Immunization Practices (ACIP): Information for Health Care Professionals.  
<http://www.cdc.gov/flu/professionals/antivirals/index.htm>

CDC. Flu Symptoms & Complications <https://www.cdc.gov/flu/symptoms/symptoms.htm>

WSHA Droplet Precautions Poster  
<https://washington-state-hospital-association.myshopify.com/collections/isolation-precautions/products/isolation-precautions-signage-droplet-e-g-influenza>

## Educational Resources

Centers for Disease Control and Prevention materials  
<https://www.cdc.gov/flu/resource-center/freeresources/index.html>

CDC Cover your cough materials [https://www.cdc.gov/flu/pdf/protect/cdc\\_cough.pdf](https://www.cdc.gov/flu/pdf/protect/cdc_cough.pdf)

Knock Out Flu educational materials from the Washington State Department of Health  
<https://www.doh.wa.gov/YouandYourFamily/IllnessandDisease/Flu>

Knock Out Flu: Think of It as Essential toolkit  
<https://doh.wa.gov/you-and-your-family/illness-and-disease-z/flu/materials-and-resources/knock-out-flu-toolkit>

Wash Your Hands in Washington materials  
<https://www.doh.wa.gov/YouandYourFamily/IllnessandDisease/Flu/WashYourHandsInWashington>

For information on COVID-19 outbreaks in LTC  
[SARS-CoV-2 Infection Prevention and Control in Healthcare Settings Toolkit \(wa.gov\)](https://www.doh.wa.gov/YouandYourFamily/IllnessandDisease/Flu/SARS-CoV-2-Infection-Prevention-and-Control-in-Healthcare-Settings-Toolkit)

WA DOH Infection Control Assessment and Response (ICAR)  
<https://doh.wa.gov/public-health-healthcare-providers/healthcare-professions-and-facilities/healthcare-associated-infections/infection-control-assessment-and-response>

WA DOH Adult Family Home Resources <https://doh.wa.gov/public-health-healthcare-providers/healthcare-professions-and-facilities/healthcare-associated-infections/adult-family-homes>

