

PDPH/LTCF Conference Call Wednesday, 11/20/24

Agenda

- Seasonal Influenza and Other Respiratory Viruses: Testing and Infection Prevention and Control Considerations
- SNF NHSN Reporting Updates
- Enhanced Barrier Precautions (EBP) Survey
- US Antibiotic Awareness Week Presentation by APIC Consulting Services: Antimicrobial & Diagnostic Stewardship Practices in Prevention of Urinary Tract Infections

SEASONAL INFLUENZA AND OTHER RESPIRATORY VIRUSES IN LTCFS: TESTING AND INFECTION PREVENTION AND CONTROL CONSIDERATIONS

DANA PERELLA, MPH

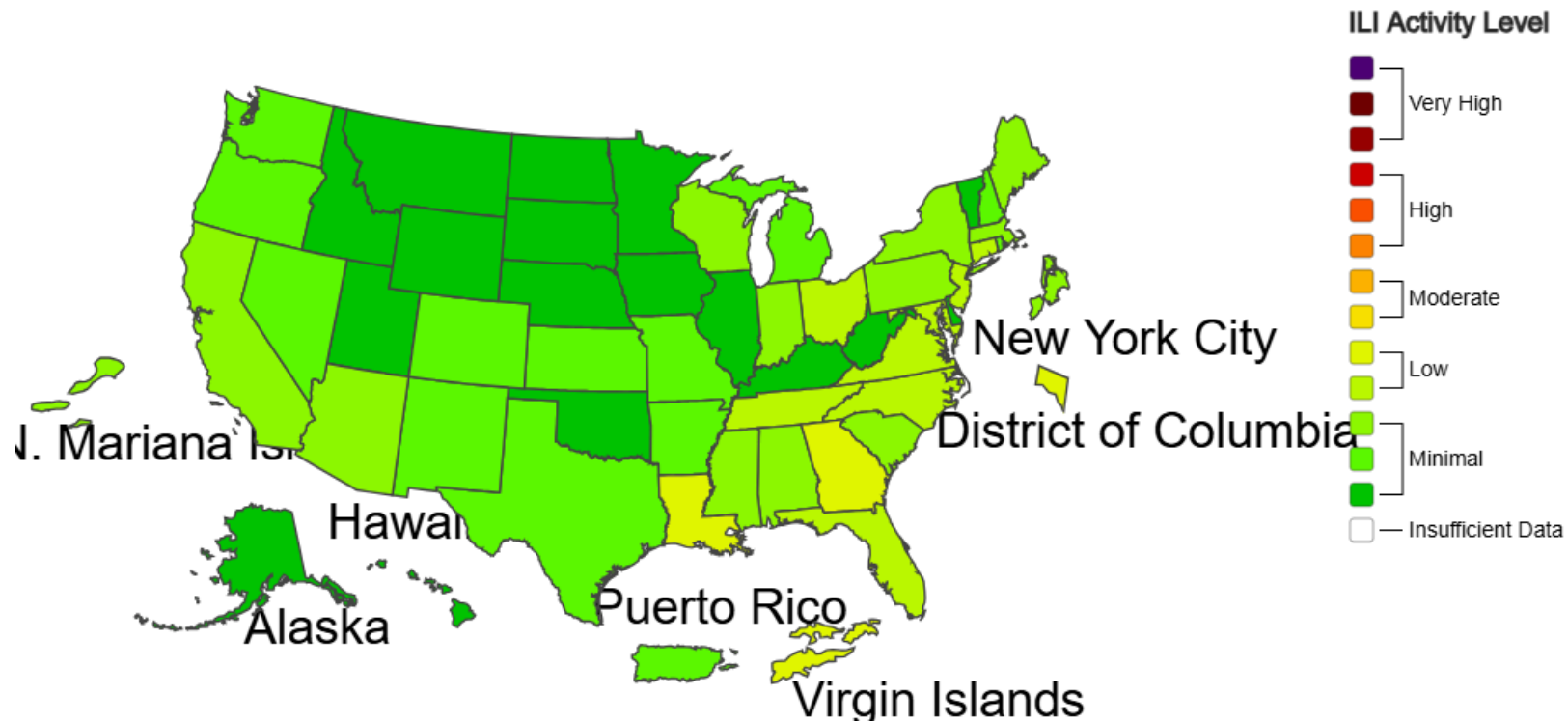
ACUTE COMMUNICABLE DISEASE PROGRAM, DIVISION OF DISEASE CONTROL



CITY OF PHILADELPHIA
DEPARTMENT OF
PUBLIC HEALTH
DIVISION OF DISEASE CONTROL

CURRENT INFLUENZA ACTIVITY IN THE US: 2024-2025 SEASON

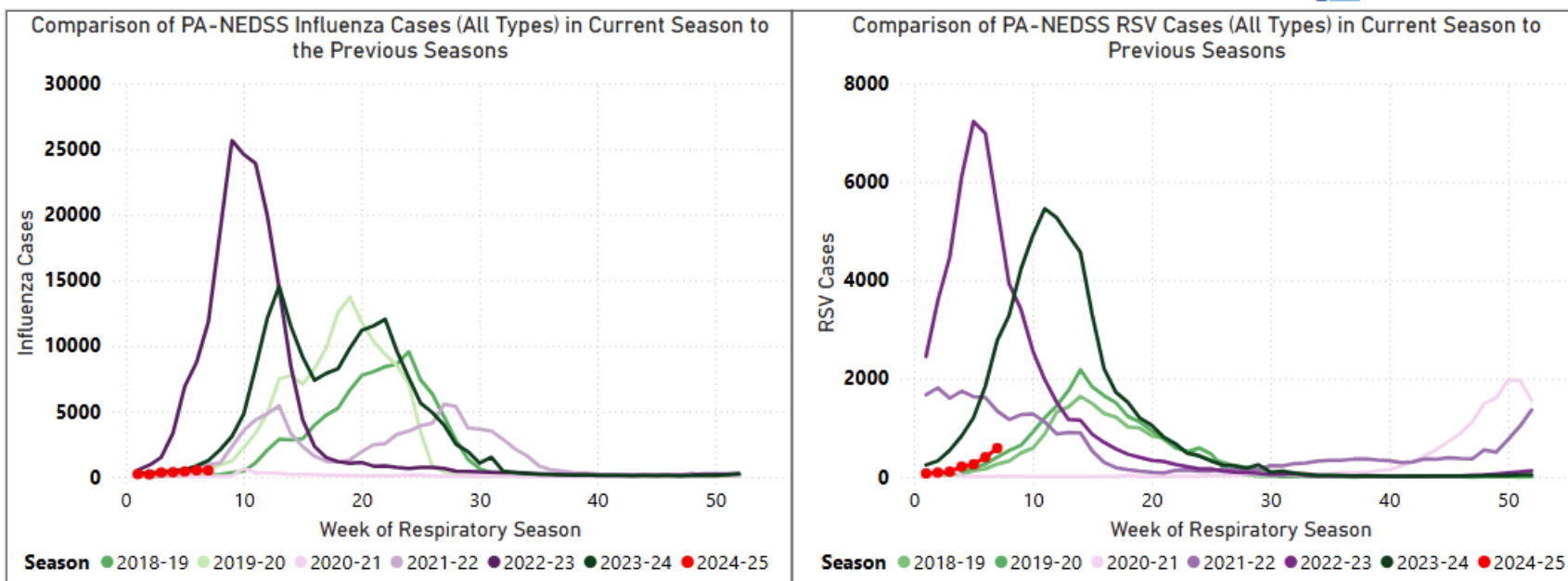
2024-25 Influenza Season Week 45 ending Nov 09, 2024



<https://www.cdc.gov/fluview/surveillance/2024-week-45.html>

CURRENT RESPIRATORY VIRUS ACTIVITY IN PA: 2023-2024 SEASON

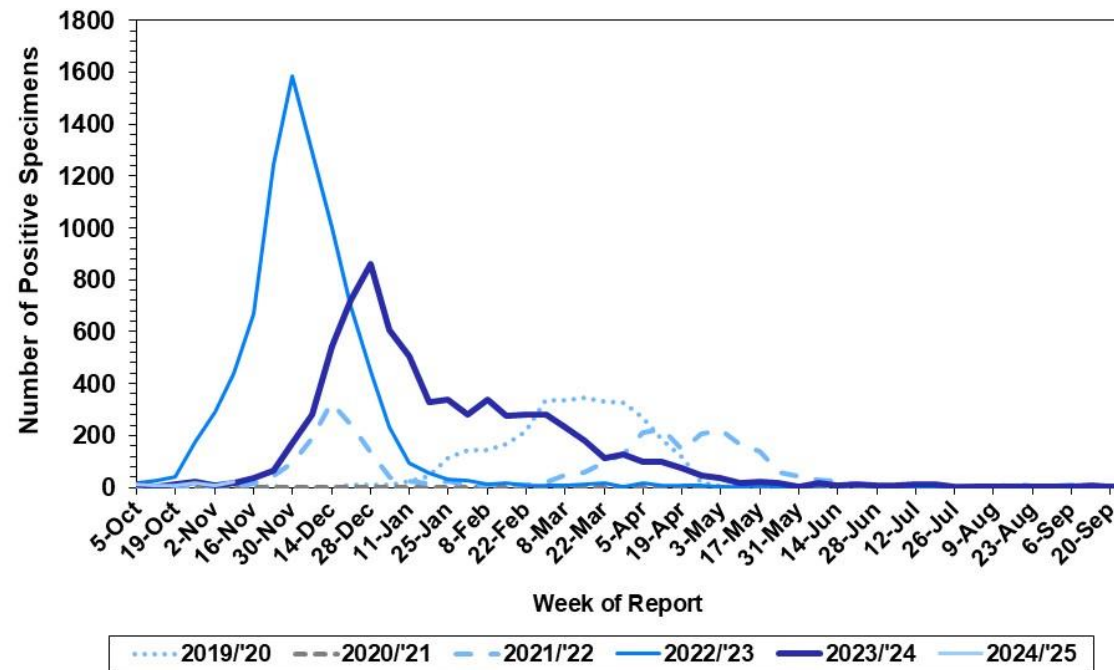
Seasonal Comparisons for Influenza and RSV



CURRENT INFLUENZA ACTIVITY IN PHILADELPHIA

Laboratory-Based Surveillance for Influenza A Philadelphia, 2019/2020 through 2024/2025 Seasons*

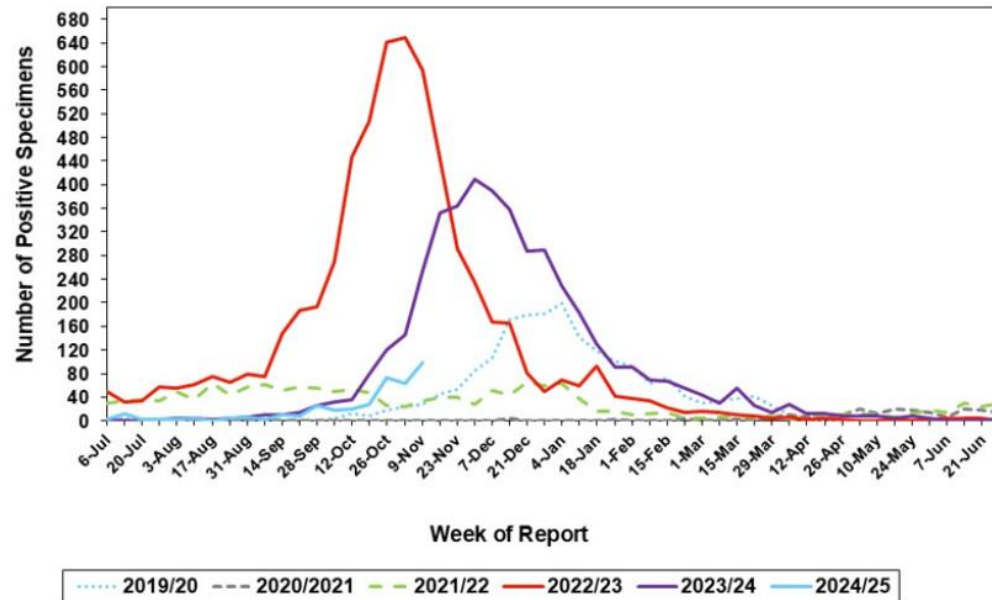
**Based on select hospital laboratories participating in surveillance across respiratory virus seasons*



OTHER RESPIRATORY VIRUS ACTIVITY IN PHILADELPHIA

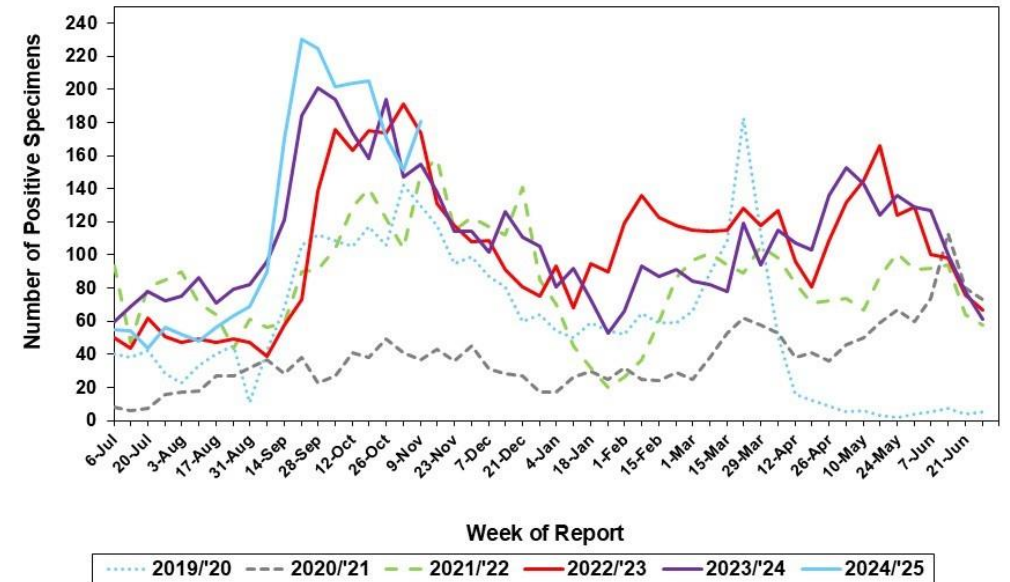
Laboratory-Based Surveillance for RSV (Counts)
Philadelphia, 2019/2020 through 2024/2025 Seasons*

*Based on six hospital laboratories with RSV testing capabilities across respiratory virus seasons



Laboratory-Based Surveillance for Rhinoviruses/Enteroviruses (Counts)
Philadelphia, 2019/2020 through 2024/2025 Seasons

*Based on three hospital laboratories with Rhinovirus testing capabilities across respiratory virus seasons



LONG TERM CARE FACILITY INFLUENZA OUTBREAKS

- What is considered an influenza outbreak?
 - **One** case of laboratory confirmed influenza in a LTCF
 - Suspected outbreak: Two or more residents ill with influenza-like illness (ILI) occurring within 72-hours, who are in close proximity to each other
 - Outbreak conclusion: considered 7 days after onset of last influenza case or two incubation periods after last case of respiratory illness
- LTCFs should call 215-685-6741 during business hours or report through their PDPH COVID Outbreak Response Coordinator

TESTING

- Since we are seeing co-circulation of these viruses in the community, consider testing symptomatic persons for SARS-CoV-2, influenza, and other respiratory viruses
- For residents or staff with acute respiratory illness:
 - Order multiplex nucleic acid detection assay for influenza and SARS-CoV-2
 - Single-plex is okay if multiplex not available (might need two respiratory specimens)
 - Molecular tests for influenza have better sensitivity and are recommended over antigen tests
 - False negative results may occur with rapid antigen tests for influenza
- PDPH can assist with respiratory panel testing of NP swabs for residents who are SARS-CoV-2 and influenza negative
 - 4-plex testing of nasal swabs to test for Flu A, Flu B, RSV, and SARS-CoV-2 also available

RESPONSE TO INFLUENZA CASES IN THE COVID-19 ERA

- Place symptomatic residents in Transmission-Based Precautions using all recommended PPE for care of a resident with suspected SARS-CoV-2 infection
- Test any resident with symptoms of COVID-19 or influenza for both viruses
- Placement Decisions
 - Residents confirmed to have SARS-CoV-2 infection should be placed in a single room, if available, or housed with other residents with only SARS-CoV-2 infection. If unable to move a resident, the ill individual could remain in the current room with measures in place to reduce transmission to roommates (e.g., optimizing ventilation)
 - Duration of isolation is at least 10 days
 - Residents confirmed with influenza only should be placed in a single room, if available, or housed with other residents with only influenza. If unable to move a resident, the individual could remain in the current room with measures in place to reduce transmission to roommates (e.g., physical barriers, antiviral chemoprophylaxis)
 - For those with influenza only, use droplet and standard precautions with eye protection
 - Duration of isolation is at least 7 days
 - Residents with symptoms of acute respiratory illness who are determined to have neither SARS-CoV-2 infection nor influenza should be cared for using Standard Precautions and any additional Transmission-Based Precautions based on their suspected or confirmed diagnosis
 - Isolate until fever free without medication for 24 hours and respiratory symptoms have improved

ANTIVIRAL USE IN RESPONSE TO INFLUENZA CASES

- Antiviral Treatment for Influenza Cases
 - Antiviral treatment can reduce the severity and duration of influenza illness.
 - Treatment should be initiated within 2 days of symptom onset; however, it is still beneficial when given later in the course of progressive illness.
- Antiviral Chemoprophylaxis for Persons Exposed to Influenza
 - Antiviral prophylaxis with oral oseltamivir or baloxavir should be started as early as possible in all eligible exposed residents (who have no contraindications), and residents on outbreak-affected units, regardless of vaccination status.
 - Chemoprophylaxis should continue for at least 2 weeks, until 7 days after the onset of illness in the last known case.
 - Chemoprophylaxis should be offered to staff who are unvaccinated or have underlying medical conditions. Staff members who are initially vaccinated at the time of an outbreak, and have no underlying conditions, require chemoprophylaxis only for the 2-week period following vaccination.

OTHER MEASURES

- Promote influenza vaccination among residents and staff
 - Fall 2024 COVID-19 vaccine, RSV vaccine and Pneumococcal vaccine should also be encouraged
- Encourage good hand hygiene and covering coughs and sneezes
- Routinely clean commonly used objects and surfaces
- Consider masking during respiratory virus season as activity increases
 - Mask and social distance during an influenza outbreak
- Ensure staff and visitors stay home if sick

CDC: VIRAL RESPIRATORY PATHOGENS TOOLKIT FOR NURSING HOMES

PREPARE for respiratory viruses

- Vaccinate
- Allocate resources (such as PPE, alcohol-based hand sanitizer)
- Monitor and mask
- Educate
- Ventilate
- Test and Treat

RESPOND when a resident or staffer develops sign or symptoms of a respiratory virus infection

- Apply transmission-based precautions
- Test
- Provide treatment and prophylaxis
- Investigate

CONTROL respiratory virus spread when transmission is identified

- Notify PDPH
- Implement initial control attempt
- Apply additional control measures, if needed

RESPIRATORY VIRUS GUIDANCE RESOURCES

- CDC Influenza Outbreak Management in LTC and Post-Acute Care Facilities: [Interim Guidance for Influenza Outbreak Management in Long-Term Care and Post-Acute Care Facilities | Influenza \(Flu\) | CDC](#)
- CDC Respiratory Virus Pathogens Tool Kit for Nursing Homes: [Viral Respiratory Pathogens Toolkit for Nursing Homes | LTCFs | CDC](#)

RESPIRATORY VIRUS SURVEILLANCE DASHBOARDS

■ Philadelphia

- Influenza: <https://hip.phila.gov/data-reports-statistics/influenza/>
- Other Respiratory Viruses: <https://hip.phila.gov/data-reports-statistics/otherrespiratoryviruses/>

■ Pennsylvania

- All Respiratory Viruses: <https://www.health.pa.gov/topics/disease/Flu/Pages/2023-24-Flu.aspx>

■ United States

- CDC Respiratory Virus Illnesses Data Channel: [Respiratory Illnesses Data Channel | Respiratory Illnesses | CDC](#)



QUESTIONS???





SNF NHSN Reporting Updates

TASEEN KARIM, MPH

HEALTHCARE-ASSOCIATED INFECTIONS/ANTIMICROBIAL RESISTANCE (HAI/AR) PROGRAM



NHSN – COVID-19

New rule from CMS

- LTCFs will be required to report resident information about COVID-19, influenza, and RSV
- Starting January 1, 2025, on a weekly basis, through NHSN
- This updated requirement will replace the current COVID reporting requirement for staff and residents
- CMS is finalizing required reporting data elements to include:
 - Facility census
 - For COVID-19, Influenza, and RSV: Resident vaccination status, confirmed resident cases, hospitalized residents with confirmed cases

NHSN Resources

For more information visit:

- [Calendar Year \(CY\) 2025 Home Health Prospective Payment System Final Rule Fact Sheet \(CMS-1803-F\) | CMS](#)
- [Federal Register : Federal Register Documents Currently on Public Inspection](#)



Enhanced Barrier Precautions Survey

BRIANA BOWEN, MPH

HEALTHCARE-ASSOCIATED INFECTIONS/ANTIMICROBIAL RESISTANCE (HAI/AR) PROGRAM



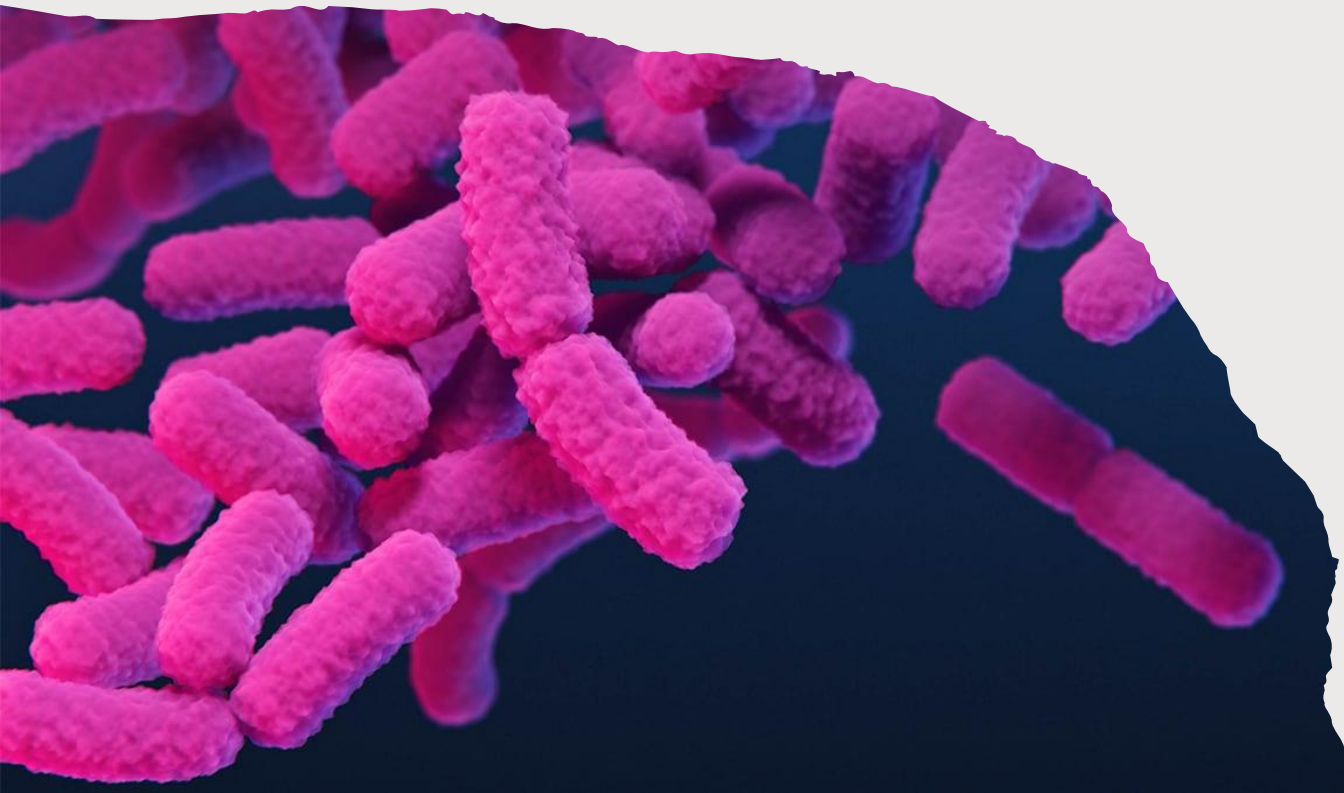
Enhanced Barrier Precautions (EBP) Survey



- Centers for Medicare & Medicaid Services (CMS) made implementing EBP mandatory in SNFs effective March 20, 2023, and will survey SNFs on this practice
- EBP is still fairly new to skilled nursing facilities so staff may not be proficient with it and issues in the process may not have been identified yet

Study Goals:

- Gain an understanding of EBP implementation
- Identify areas for improvement in each participating SNF and overall, among all facilities
- Provide education on EBP and MDRO prevention to frontline staff in Philadelphia SNFs



Participation

- Participating facilities will:
 - Receive the survey via the email provided between November and December
 - Advertise the survey to their staff via email and a flyer provided by PDPH
 - Distribute the survey to all staff members in various clinical and environmental service roles via:
 - PDPH provided staff email
 - PDPH provided posters with QR codes for the survey
 - Receive an **individual report** with **targeted recommendations and support** we can offer
- Overall, survey data will be used to provide further resources, including trainings
- Anonymous aggregate data will be shared in a PDPH monthly LTCF Collaborative Call and possibly elsewhere
- **Enroll via the email in follow up!**



Questions?



U.S. ANTIBIOTIC AWARENESS WEEK

November 18-24, 2024

bit.ly/USA AAW2024

Building landscapes across Philadelphia will illuminate in purple for AAW!
Capture a photo and tag PDPH + CDC on social media.
Below is a schedule of where to find **GRAPE-NESS!**

November 18th: Ben Franklin Bridge ALL DAY

November 18th – 20th: BOMA Philadelphia

November 18th – 24th: PECO Crown Lights





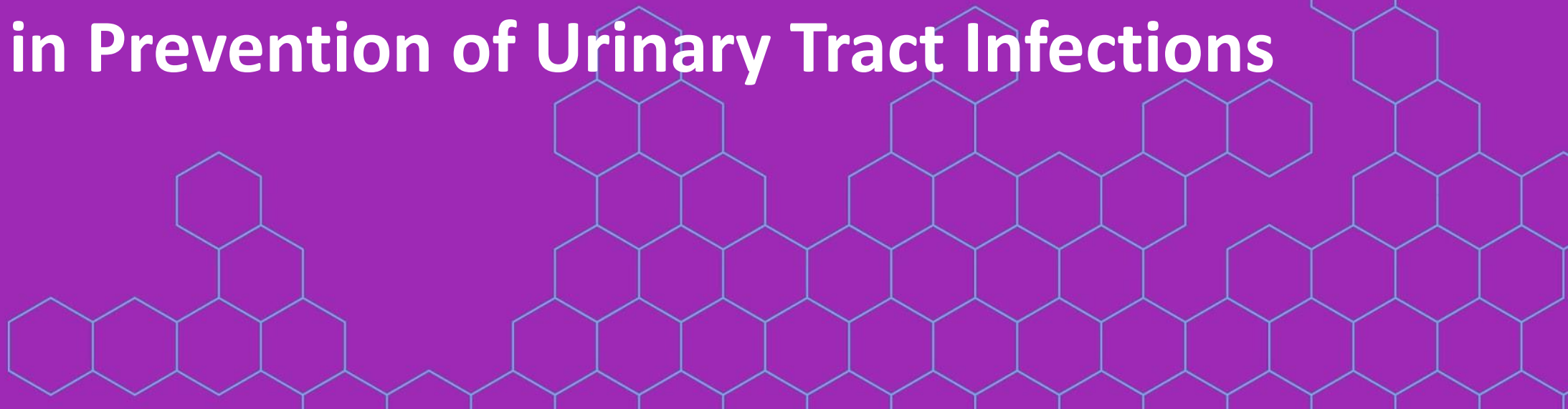
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US Antibiotic Awareness Week Presentation by APIC Consulting Services:

Antimicrobial & Diagnostic Stewardship Practices in Prevention of Urinary Tract Infections





Department of
Public Health

CITY OF PHILADELPHIA

Thank you!

Next call Wednesday, December 18, 2024 @ 11:00 AM