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COMMUNICABLE DISEASE PROGRAMS

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PROVIDER HEALTH ADVISORY OCTOBER 13, 2022

INFLUENZA RECOMMENDATIONS FOR LONG-TERM CARE FACILITIES (LTCF) AND RESIDENTIAL CARE FACILITIES FOR THE ELDERLY (RCFE)

BACKGROUND:

Residents of LTCFs and RCFEs are at increased risk for more severe outcomes from COVID-19 and other respiratory illness, including influenza (flu). As we approach the winter respiratory season during the COVID-19 pandemic, a layered approach to COVID-19 and flu prevention, identification, and infection control is critical. It is important to know that the Contra Costa Health Officer's flu vaccination/masking order for residential care facilities for the elderly is ongoing and has not been rescinded. Should the CDPH revise or lift its masking requirement for COVID, staff would either need to receive flu vaccine or mask during the flu season.

Actions Requested of Long-Term Care Facilities & Residential Care Facilities for the Elderly:

- **1. Vaccinate** residents and staff for influenza. Also, ensure residents and staff are up-to-date on other important vaccinations including the COVID bivalent booster, pertussis, and pneumococcal vaccine.
- 2. Identify and test symptomatic residents for both COVID-19 and influenza, consider testing for respiratory illness as well. Consider both typical and atypical symptoms. In certain situations, Contra Costa Public Health may be able to aid in testing symptomatic residents for both COVID-19 and flu.
- **3. Isolate** symptomatic residents and implement appropriate infection control including measures recommended for persons under investigation for COVID-19 due to symptoms as described in the <u>residential facility outbreak management checklist</u>. Residents should continue to isolate while results are pending.
- **4. Restrict** all symptomatic staff from work and have them tested for COVID-19 and/or other viral/respiratory illness as appropriate. Symptomatic staff should not return to work while test results are pending.
- 5. Notify Contra Costa Public Health of symptomatic residents by reporting to your usual COVID PH Nurse or by telephone (925) 313-6740. Report confirmed COVID-19 cases via SPOT. Report confirmed influenza cases by email to CoCoCD@cchealth.org or by phone (925) 313-6740.
- **6. Treat** all residents who are diagnosed with flu with appropriate flu antivirals.
- 7. Chemoprophylax all non-ill residents as appropriate with flu antivirals.

PREVENTION:

Preventive measures steps will reduce illness among residents and staff and minimize facility disruptions. Facilities should ensure: annual flu vaccination for residents and staff; residents and staff are up-to-date with other important immunizations including the COVID-19 bivalent booster, pneumococcal vaccine, and pertussis vaccine; universal masking of staff; and masking of residents when outside of their rooms.

For the 2022-23 flu season, the CDC's Advisory Committee on Immunization Practices (ACIP), preferentially recommends high-dose and adjuvanted flu vaccine for persons 65 years and older when

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they are available. However, flu vaccination should not be delayed and any appropriate flu vaccine that is available may be given to avoid a missed opportunity. Offering flu vaccine on site to staff and residents is strongly encouraged.

TESTING:

Prompt testing of symptomatic residents and staff will ensure appropriate implementation of infection control measures and initiation of flu treatment and chemoprophylaxis. Given the similarities in symptoms, testing symptomatic residents for both flu and COVID-19 is recommended. Coinfection with COVID-19 and flu is possible. For symptomatic residents, COVID-19 antigen tests may be used for rapid diagnosis of COVID-19 with a follow up polymerase chain reaction (PCR) test to confirm negative results. Rapid flu tests can be less accurate than PCR tests. Flu PCR tests are preferred, particularly when there is strong clinical suspicion of flu or in a LTCF and RCFE setting. A negative rapid flu test should be confirmed with a PCR flu test. Confirm now that you are partnered with a laboratory that can test for multiple respiratory pathogens including COVID-19, Influenza and RSV. Oftentimes, they will have a respiratory panel for these viruses.

INFECTION CONTROL MEASURES:

Resident placement, personal protective equipment (PPE), and treatment will be determined by flu and COVID-19 testing. While residents are awaiting test results, they should be treated as a person under investigation for COVID-19 with the appropriate isolation and PPE. Once test results are obtained, isolation, cohorting, and PPE should be based on a resident's COVID-19 test result. Please review the residential facility outbreak management checklist for further information and appropriate infection control measures to take for COVID-19 and flu.

TREATMENT AND CHEMOPROPHYLAXIS FOR FLU:

Residents with lab-confirmed flu, regardless of their COVID-19 status, should be treated as soon as possible with an appropriate flu antiviral. Also, all asymptomatic residents in the facility should be given influenza chemoprophylaxis, no matter their COVID-19 status, as recommended by the CDC (www.cdc.gov/flu/professionals/antivirals/summary-clinicians.htm and www.cdc.gov/flu/professionals/antivirals/links.htm).

- Treatment for flu should be initiated without waiting for confirmatory test results unless there is ongoing transmission of COVID in the facility.
- Influenza antiviral chemoprophylaxis should be given, when indicated, to all non-ill case roommates and residents in the entire facility or in the affected ward or building, regardless of their flu vaccination status.
 - Chemoprophylaxis should be given for a minimum of 2 weeks or 1 week after the last known case of influenza is identified in the facility, whichever is longer.

Facilities without clinical staff should have a flu preparedness plan in place to allow prompt treatment and chemoprophylaxis of residents. One method would be to contact directly or indirectly each resident's primary care provider now about flu treatment and chemoprophylaxis prescriptions. A <u>sample letter for primary care providers</u> is available to aid in obtaining an antiviral prescription for residents now so it can be filled without delay in the future.

ADDITIONAL RESOURCES:

 California Skilled Nursing Facilities (SNF) During the COVID-19 Pandemic: www.cdph.ca.gov/Programs/CHCQ/HAI/CDPH%20Document%20Library/RecsForPreventionControl_Flu_inCA_SNFsD_uringCOVID_FINAL_100120.pdf



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- California Department of Public Health's Influenza and Other Non-COVID-19 Respiratory Illness Outbreak Quicksheet:
 https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/Immunization/FluAndRespiratoryIllnessOutbreakQuicksheet.pdf
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- Contra Costa Public Health Seasonal Influenza Resources for Providers: cchealth.org/flu/providers.php
- Contra Costa Public Health COVID-19 Resources for Congregate Living Facilities: cchealth.org/covid19/clf/
- NIH Influenza and COVID-19: www.covid19treatmentguidelines.nih.gov/special-populations/influenza/
- CDC Interim Guidance for Routine and Influenza Immunization Services During the COVID-19 Pandemic: www.cdc.gov/vaccines/pandemic-guidance/index.html