

Non-COVID-19 Respiratory Outbreak Reporting

Introduction for Long-Term Care Facilities

Winter 2024 Version 2

Making reporting quicker and accessible.



Replacing .pdf influenza-like illness reporting form.



Provides options for reporting outbreaks of illness that are not in the reportable disease rule, like respiratory syncytial virus (RSV).



Clarifying which information is required for the point-in-time report versus information that can be provided when available.



Sends immediate acknowledgement of submission and sharing of applicable resources to your facility.



Uses the same reporting platform and database as COVID-19 outbreak reporting for consistency and collaboration.

What hasn't changed:



The information requested is the same.



This tool is intended to be used by all institutions required to report as well as institutional settings opting to report.



Find it on the healthvermont.gov webpage.



Information will be sent to Vermont Department of Health Division of Laboratory Sciences and Infectious Disease.



Your feedback helps improve the data collection tool.

Influenza or Influenza-like Illness Outbreak Definition:

What is an Outbreak?

A single resident with a positive flu test **and** two or more additional residents with respiratory illness symptoms.

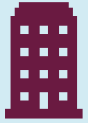
OR

Two or more residents with at least two of the following symptoms:

- Fever of 100 degrees Fahrenheit or more
- Nonproductive cough
- Myalgia (muscle pain)
- Pharyngitis (sore throat)

healthvermont.gov/fluoutbreak

Outbreak Decision Scenario



An increase of resident respiratory illness symptoms is being observed at a nursing home.



The east wing is most affected; of the 16 residents, 8 have nonproductive coughs. Of those 8 residents, one also has a fever over 100 degrees Fahrenheit. No residents have tested positive for flu.



Of the 48 residents in the facility, 7 residents are ill with a nonproductive cough, 4 residents have sore throat, and one resident has a fever over 100 degrees Fahrenheit with a sore throat. No residents have tested positive for flu.

Is this scenario an outbreak of influenza or influenza-like illness?

Is this a new event?

Influenza outbreaks are considered over after two incubation periods pass without further illness since the last symptom onset. This is ordinarily eight days. No previous events are reported in this scenario.

Does this meet affected group criteria?

Affected group criterion: Residents

Does the effected group meet clinical criteria?

A single resident with a positive flu test **and** two or more additional residents with respiratory illness symptoms.

OR

Two or more residents with at least two of the following symptoms:

- Fever of 100 degrees Fahrenheit or more
- Nonproductive cough
- Myalgia (muscle pain)
- Pharyngitis (sore throat)

By answering these questions, have you determined this facility currently experiencing an ILI outbreak?

Why or why not?

Is this scenario an outbreak of influenza or influenza-like illness?

Is this a new event?

Influenza outbreaks are considered over after two incubation periods pass without further illness since the last symptom onset. This is ordinarily eight days. No previous events are reported in this scenario.

Does this meet affected group criteria?

Affected group criterion: Residents

Does the affected group meet clinical criteria?

A single resident with a positive flu test **and** two or more additional residents with respiratory illness symptoms.

OR

Two or more residents with at least two of the following symptoms:

- Fever of 100 degrees Fahrenheit or more
- Nonproductive cough
- Myalgia (muscle pain)
- Pharyngitis (sore throat)

By answering these questions, have you determined this facility currently experiencing an outbreak?

This facility is not currently experiencing an outbreak of influenza or ILI.

Why or why not?

No residents have tested positive for flu.

In the east wing, only one resident has two symptoms from the clinical criteria list. Two or more residents must have multiple symptoms for an outbreak scenario.

In the entire facility, there are multiple residents with only one of the listed symptoms, but no positive flu tests.

Outbreak form example run-through

The added criteria of an influenza positive test result changes the scenario to a reportable outbreak situation:



The east wing is most affected; of the 16 residents, 8 have nonproductive coughs. Of those 8 residents, one also has fever over 100 degrees Fahrenheit. The febrile resident was seen at the emergency department due to illness, and tested PCR positive for influenza A.



Of the 48 residents in the facility, 7 residents are ill with a nonproductive cough, 4 residents have sore throat, and one flu-positive resident has a nonproductive cough and fever over 100 degrees Fahrenheit.

Test link to follow along: <https://apps-test.health.vermont.gov/SMARTPublic/Condition/Create>

Vermont Department of Health Outbreak Report Form - SMART Program



Thank you for reporting a potential infectious disease outbreak at your facility to the Vermont Department of Health. This data will help us track outbreaks and support your facility. Please select the condition you are reporting from the dropdown, below.

If you do not see the condition you are trying to report, please call 802-863-7240.

- Please Select --
- Please Select --
- Influenza/Influenza-like Illness (ILI)**
- Other non-COVID-19 viral respiratory outbreak
- Respiratory Syncytial Virus (RSV)
- COVID-19

This scenario is for an ILI outbreak and should be the option selected from the webpage's drop-down menu.

What is the facility type? *

Long term care facility ▾

-- Please Select --

Long term care facility

School/Childcare

Shelter

Corrections

Other Healthcare Setting

This scenario is for a LTC facility type. The question is required (*) because following prompts depend on its answer.

LTCF type:

Nursing Home

-- Please Select --

Assisted Living

Nursing Home

Other LTCF

Residential Care Home

Residential Treatment Facility

Therapeutic Community Residence

Available options for LTCF type. These align with current COVID-19 outbreak reporting.

What is the facility type? *

LTCF type:

Facility Name: *

Facility Physical Address *

City *

State *

Zip *

This scenario is the “nursing home” category.

As much information as is available should be provided.

At minimum, the required (*) fields are necessary to report the outbreak and allow for follow up from the influenza coordinator, if requested.

Reporting Person

First Name: *

Last Name: *

Reporter Title:

Phone number:

Email: *

Condition: Influenza/Influenza-like Illness (ILI)

Outbreak Information

What was the date of symptom onset or positive test for the first case detected during this outbreak? Click to select a date MM-DD-YYYY:

mm/dd/yyyy



What symptoms have been identified in ill cases? Select all that apply. *

- Fever >100F
- Cough
- Difficulty breathing
- Chills
- Fatigue
- Diarrhea
- Headache
- Sore throat
- Runny nose
- Muscle aches
- Other symptoms

As much information as is available should be provided. If the date of the first ill resident's symptom onset is not available, it can be provided later.

At minimum, the required (*) fields are necessary to confirm the outbreak criteria.

Influenza test result fields:

Were positive influenza test results reported?

Influenza type:

Where were specimens tested?

This scenario had positive flu results reported. Any known details can be provided here.

These optional prompts will open even if the reported outbreak is not for influenza.

It's helpful to know if there were any flu positives even if it is another respiratory illness **outbreak** being reported, but it is not required information in that scenario.

Antiviral field:

Was antiviral chemoprophylaxis prescribed?

Yes

-- Please Select --

Yes

No

ed for influenza

This scenario took place in a facility with a medical director and standing orders for oseltamivir.

If the reported outbreak has a mix of resident providers and not all providers prescribed chemoprophylaxis, select “no” provide a note on the form with this information. Example:

Was antiviral chemoprophylaxis prescribed?

No

Why was antiviral chemoprophylaxis not prescribed?

9/12 patients' providers prescribed

Vaccination fields:

Percent of residents vaccinated for influenza this season:

 %

Percent of staff vaccinated for influenza this season:

 %

This information is helpful for determining influenza severity and vaccination effectiveness.

If it is not at hand at the time of the report, the influenza coordinator will reach out for this information.

How widespread is the illness activity at the time of this report?

Entire Facility

This scenario meets criteria for a unit level and a facility level outbreak. The larger outbreak scale may be reported since it includes the counts of the facility-level outbreak.

Comments:

All units affected by influenza and influenza-like illness. 1 positive test in East Wing unit, 8 symptomatic. 4 symptomatic in West Wing unit.

Please provide answers below to the best of your knowledge at the time of report:

Total number of residents in the affected unit/facility:

All residents with illness, with or without a positive test:

If known, number of residents with positive tests for reported outbreak virus:

Context for types of illness circulating

Number of residents hospitalized:	<input type="text" value="0"/>
Hospital(s)	<input type="text"/>
Number of resident deaths:	<input type="text" value="0"/>
Date(s) and location(s) of deaths	<input type="text"/>
Number of residents visiting ER:	<input type="text" value="1"/>
Hospital(s)	Acme Hospital

Context for severity of illness

Optional: please provide answers below to the best of your knowledge at the time of report:

Total number of staff in the affected facility

All staff with illness, with or without a positive test

If known, number of staff with positive tests for reported outbreak virus

Number of staff hospitalized

Hospital(s)

Number of staff deaths

Date(s) and location(s) of deaths

Number of staff visiting ER

Hospital(s)

Staff illness does not contribute to the definition of an influenza or influenza-like illness outbreak. Reporting staff illness is optional for the reportable flu/ILI outbreak scenario.

This scenario had no other illnesses reported at an outbreak level of activity at the time of the report.

Are there any other active outbreaks in the facility already reported to the Vermont Department of Health? (Example: COVID-19)

No ▼

Please check this box if you request follow-up by phone or email within a business day.

I request follow-up to this submission within a business day.

Do you have any additional notes or comments?

LTCF outbreaks often require follow up (e.g., surveillance specimen collection coordination), and your facility may receive a follow-up even if this is unchecked.

Back

Submit

End of form.
Finish the process by pressing "Submit".



Successful submission page:

Non-COVID-19 Viral Respiratory Disease Outbreak Report Form

Thank You!

Thank you for submitting the viral respiratory illness outbreak report form. For influenza or ILI outbreaks, please refer to www.healthvermont.gov/fluoutbreak for facility-specific guidance. If needed our team will be reaching out for follow-up within a business day. Please also review these steps to prevent and reduce viral respiratory illness:

- Cover nose and mouth with a tissue when coughing or sneezing
- Wash hands frequently with soap and water, if those are unavailable, use an alcohol-based sanitizer
- Routinely clean and disinfect commonly touched surfaces. Common household cleaners kill the flu virus
- Refer to the CDC document [Cleaning to Prevent the Flu](#)
- Avoid touching eyes, nose, and mouth
- As much as possible, keep ill and well individuals separated
- Encourage influenza vaccination. As long as flu is still circulating it is not too late to get vaccinated

If you have an additional respiratory illness to report, please return to the survey home page.

This form will not generate an automatic email reply as was done with the previous online form. That update is planned to be complete for the 2024-25 respiratory illness season.

What situations would require additional reporting to the Health Department?

Your facility does not need to provide number/percent absent updates during the same outbreak period.

Additional reporting required if:

- An unusual or atypical situation arises (e.g., severe morbidity, multiple hospitalizations) during a reported outbreak.
- The units/facility return to sub-outbreak influenza-like illness and no positive results are reported for at least eight calendar days. After the eight day, one or both of the outbreak thresholds are reached again.

Additional resources

Outbreak plan guide and other information at
healthvermont.gov/fluoutbreak

Your Office of Local Health
healthvermont.gov/local

Preparing for the Upcoming Respiratory Virus Season:
Recommendations for Influenza, COVID-19, and RSV Vaccines for
Older Adults:
https://emergency.cdc.gov/coca/calls/2023/callinfo_091923.asp

[CDC Viral Respiratory Pathogens Toolkit for Nursing Homes](#)

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