Greater Dayton Area Hospital Association (GDAHA) Influenza Season Visitation Restriction Decision Policy

Background

Influenza season typically begins MMWR Week 40 (October) and last until approximately MMWR Week 20 (May) of each year. During influenza season, all GDAHA hospitals make every effort to protect their patients from flu and other infectious diseases. Therefore, as the prevalence of influenza increases in the region, it may be necessary to implement temporary visitation restrictions.

When implemented, the restrictions will be as follows:

- No visitation by anyone who is ill with any respiratory symptoms including coughing,
 fever, chills, headache, vomiting, sore throat, muscle aches or diarrhea.
- No visitation by anyone under the age of 14.
- Previously approved research and/or observational studies coordinated by GDAHA/Ascend and specific hospitals can continue as long as no participant has any respiratory symptoms that include coughing, fever, chills, headache, vomiting, sore throat, muscle aches or diarrhea.
- Does not apply to Dayton Children's Hospital

The Infection Control Committee (ICC) of GDAHA does not recommend that the restrictions be implemented automatically on an annual basis during a predetermined time frame or "typical flu season." The rationales for not having automatic visitation restrictions include:

- Viral activity may be different every year;
- Different age groups may be the primary spreader of the virus;
- Immunization may have been effective in promoting a mild influenza season; and
- Patient satisfaction by using visitation restrictions only when necessary.

Representatives of Public Health and GDAHA's Infection Control Committee (ICC) will meet inperson or via conference call within 48 hours after local or regional influenza activity has increased to a level where regional hospitals need to consider implementing visitor restrictions. The meeting will also be open to each hospital's Chief Operating Officer (COO) and Public Affairs Committee representatives.

When implemented, visitor restrictions will apply to all GDAHA members.

Visitation Restriction Decision

- A. Influenza Surveillance Systems and Variables
 - Emergency Department Visits (EpiCenter): EpiCenter collects emergency
 department chief complaint data from hospitals and urgent care facilities across
 Ohio counties in real time and classifies them into symptom and syndrome
 categories.
 - a. **Constitutional syndrome**: weight loss, loss of appetite, fever, and fatigue of unknown origin.
 - b. Fever plus Influenza-like Illness (ILI): fever (temperature of 100°F) and some or all of the following symptoms: cough and sore throat, runny or stuffy nose, muscle or body aches and chills, headache, and fatigue. In the absence of testing for influenza, ILI is considered a clinical definition.
 - 2. Ohio Disease Reporting System (ODRS): The Ohio Disease Reporting System (ODRS) provides real-time secured access for state and local public health practitioners to report infectious diseases.
 - a. Influenza-associated Hospitalizations: An influenza-associated hospitalization is a Class B reportable condition that must be reported to the local health department by the end of the next business day.

A discussion concerning the implementation of visitation restrictions among members of the ICC and Public Health Epidemiologist and/or Communicable Disease Nurse will occur within 48 hours of one of the two following conditions has been reported:

- A 150% increase in influenza-associated hospitalizations in Montgomery County over one week or
- A 20% increase in the percent of emergency departments visits for constitutional syndrome <u>AND</u> fever + ILI symptoms over one week.

These indicators will be reviewed in the total context of influenza activity in schools, community and outpatient clinical setting. Historical data indicated that the trigger points selected occurred prior to the peak of influenza season.

Following the ICC meeting, the GDAHA Board of Trustees will be updated by the GDAHA President & CEO regarding the need to implement visitor restrictions, including a specific date that visitor restrictions will take effect for the entire region. GDAHA staff will work with each hospital to ensure appropriate signage and support materials are available by the specified date that restrictions will be enacted. Signage will be consistent including age restrictions, respiratory hygiene and hand washing.

Restrictions will remain in place and will be reevaluated by the GDAHA ICC Committee, COOs, and Public Affairs, based on regional, state and national data. Public Health will continue to monitor influenza activity at the national, state and regional level.

If the decision is made to rescind visitor restrictions, the ICC, COOs, and Public Affairs

Committee will agree upon a specific date to ensure hospitals remove the restrictions and signage simultaneously.