

Infection Prevention Surveillance in the Assisted Living and Adult Day Care Environment

Logistics – Zoom Webinar



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Objectives

- Review surveillance terminology and the "whys" for conducting surveillance
- Introduce surveillance tool user instructions
- Review the surveillance tool and graphs
- Review manual options for surveillance
- Provide opportunity for participants to ask questions and receive feedback









What is Surveillance?

Surveillance A systematic and ongoing approach to monitoring illness that allows for tracking the health status of participants, residents and staff

Routine surveillance shows what health problems are occurring in the facility to establish a level of disease activity. Ongoing surveillance also helps to track changes over time and to quickly notice when disease activity is increasing.

Surveillance spreadsheet documentation should be completed (in general) when:

- 1 person (staff, participant/resident) has a fever or
- 1 person (staff, participant/resident) is experiencing 2 or more symptoms

*If 2 or more participants/residents or staff exhibit symptoms, consider it a potential outbreak and contact DSS and the local health department



The Benefits of Surveillance



- Surveillance monitors the health status of residents, participants and staff to maintain a facility free from the transmission of infectious diseases
- Identification of trends: The Excel
 spreadsheet surveillance tool was
 designed to assist with documentation
 to identify trends in reportable diseases
 - Auto populated graphs and manually entered data can assist in visualizing trends over time



Conducting & Using Surveillance

Surveillance includes:

- Rounding routinely to visually observe the overall health of residents and/or participants and staff
- The ongoing collection, evaluation and interpretation of health-related information
- Using the Surveillance Tracking Tool to collect and organize health-related information to allow easy identification of trends that may indicate the presence of communicable disease or outbreaks





Definitions

- Communicable disease
- Infectious
- Outbreak
- Reportable disease
- Symptoms
- Testing
- Diagnosis
- Trend





Maintaining Records

Maintaining records (documentation) is critical to ensure the appropriate steps are taken to record the individual's demographics (name, date of birth, etc.) as well as information about symptoms and testing, and details around when and how the communicable disease or outbreak was reported to the Virginia Department of Health (VDH) and the Virginia Department of Social Services (DSS).

The Surveillance Tracking Tool (used electronically or manually) is designed to maintain information in a readily-accessible format. The Virginia Department of Health personnel may use the documented information if follow-up or a case investigation is warranted.





Instruction Guide for Surveillance Tracking Tool

Surveillance Tracking Tool for Assisted Living Instructions for Use: Facilities (ALFs) and Adult Day Care Centers (ADCCs) · Licensed providers under VD55 are required to report outbreaks of communicable disease This document is intended to accompany the Surveillance Tracking Tool sureadsheet and provides VDH gives the following definition for outbreaks. "An outbreak is an increase in the an overview of reportable disease surveillance, trending and reporting. Instructions specific to the number of cases of a disease above what is normally expected in a specific location or Surveillance Tracking Tool are included within the tool and should be reviewed prior to use. produlation over a specific line period. The increase is often sudden. When two or more persons are experiencing similar symptoms, this should be reported to the local health Contents department (HD); by calling or through VDH's Suspected Outbreak Portal, to help 1 Definitions determine if an outbreak is occurring." · Providers are also required to report single cases of reportable diseases to the appropriate 2. Surveillance and Trending health department within the listed timeframe. Refer to the current Reportable Disease list 3. Maintaining Records (refer to Surveillance Tracking Tool instruction tab) 4. Reporting in the Excel Spreadsheet Surveillance Tracking Tool, for expected time frame (e.g., immediately within 3 days) 5. Communication Information obtained and reported can be used to target education and initiate 6. Excel Spreadsheet Surveillance Tracking Tool 2. Surveillance and Trending of Reportable Diseases interventions surrounding on topics such as outbreak response (personal protective equipment isolation, immunization recommendations, quidance associated with Definitions are included to provide a foundation of knowle Documentation , date of birth, gender, age), room number and location (floor). 1 Definitions Surveillance: This requires monitoring the health status of residents, participants an treatment and/or prophylaxis, etc.). infection prevention. maintain a facility free from the transmission of infectious diseases. Surveillance include Maintaining an accurate and up-to-date superillapre spreadsheet will allow for the prompt. symptoms associated with illness, testing and reporting Communicable disease: A disease that can spread from one person to ano · Rounding routinely to visually observe the overall health of residents and/or p identification of any communicable disease trends or clusters, and ensure diseases are uptoin resolution, hospitalization, and return to facility and/or and staff. reported as required by the Code of Virginia. is, especially in outbreak tracing and response or indirect contact. The oppoint collection, evaluation and interpretation of health-related information aintained can prove to reduce the spread of illness. Infectious: Capable of transmitting infections. · Use of the Surveillance Tracking Tool to collect and organize health-related inf Outbreak: A sudden rise in the number of cases of a disease above what is that allows easy identification of trends that may indicate the presence of com 5. Communication in a specific location or population over a specific period of time. h resident/participant documentation), symptoms associated disease or outbreaks. Reportable Disease: Any disease or condition required by law to be reported ng details, and information about hospitalization and return to medical authority within a defined time frame. Identification of Trends: The Surveillance Tracking Tool is designed to assist with Protected health information (PHI) is individually identifiable health information that is maintained Surveillance: A systematic and ongoing approach to monitoring illness, allo documentation to identify trends in reportable diseases. in various forms (electronically on paper orally, etc.), PHI should only be shared with those who · Used electronically, the Summary Ltab will determine bends and automatically tracking of the health status of participants, residents and staff. Routine surv need this information to carry out their role. The Surveillance Tracking Tool is a PHI document and graphs representing those trends. Details are described in Section 6: Excel Spri facilities with electronic capacity. As the information is health problems are occurring in the facility to establish a level of disease an should be shared only with those who need to know the information to carry out their role. Surveillance Tracking Tool * summary tab will automatically compile the information about surveillance also helps track changes over time so increasing disease activity · If the spreadsheet is used manually, Summary II contains mathematical form nts with symptoms. This will be recorded by month, by count of noticed. can be used to manually determine trends. t a specific month for comparison of symptoms between Symptoms: Feelings or sensations that may indicate the presence of an illne 6. Excel Spreadsheet for Surveillance Tracking and Maintaining Documentation Further choices include the ability to select up to three headache, cough etc.) il calculate a monthly count by condition or up to three Testing: Procedure performed to detect or diagnose a disease and/or to de 3. Maintaining Records rticipant trending. The use of these graphs over time can Tab 1: Instructions for Using the Surveillance Tracking Tool of a disease Users should read the instructions prior to using the tool. The instructions provide an out reoccurring patterns and it can also be an early warning tool Diagnosis: The act or process of identifying, determining or describing a dis Maintaining records (documentation) is critical to ensure the appropriate steps are tail mmarized by this method. overview of the spreadsheet content as well as information specific to the rategories problem from its signs or symptoms. record the individual's demographics (name, date of birth, etc.) as well as information (demographics, symptoms, etc.), Trend: A channe in disease activity & disease is said to be increasing, or "tre symptoms and testing, and details around when and how the communicable disease se by facilities that choose to maintain surveillance increase in cases for a specific disease is observed. was reported to the Virginia Department of Health (VDH) and the Virginia Departme Services (VDSS) a tab contains mathematical formulas that can be used to identify The Surveillance Tracking Tool (used electronically or manually) is designed to Summary. The Printable Summary tab walks the user through a information in a readily-accessible format. VDH personnel may use the docume entation information if follow-up or a case investigation is warranted. Tab 6: Virginia Reportable Disease List The VA reportable disease list is current as of 2023. Additional information for reporting 4. Reporting conditions to VDSS is provided with separation of conditions likely to be seen in ALFs/ADCs. listed first. Providers must ensure the disease list is current if the tracking tool is used. The VDH maintains a current reportable discase list on its website. Providers who do not have access to Adult Day Care Centers (ADCC) | VDSS: (22VAC40-61-290-F) download the current list should contact their LHD and request a current list Assisted Living Facilities (ALF) | VDSS: (22VAC40-73-100-F) (22VAC40-73-70) The stand sequence is the standard provide an CLL style is more index weights however distribution (CLL CLL) and control with the correct is and and a weight is according as graph with the temperature of the correct sector (TLL) was sparse in iteration is not reconciliated in the cll as according to the correct as performed as performed performance in the club and the control method is a control and a CLL and a performance as the performance is a sparse of the club and the control method is a control and a sparse of the cll as a control as performance is a sparse of the club and the control method is a control method. The club as the club and the club as a control of the club and the club as the club and the cl HQAN



The Excel Spreadsheet Surveillance Tool



Instructions – Green Tab

INSTRUCTIONS FOR USING THE SURVEILLANCE TRACKING TOOL

Residents

Columns A through F document the Resident or Participant's demographics including Name, date of birth (use MM/DD/YY format), gender, room number (if applicable) and location (if applicable). The Age column C column D, will be calculated based on today's date and the DOB entered in column B. The remaining columns are all manual entry fields. Columns G through T describe the Resident/Participant's symptoms. Enter the date symptoms appeared in column G, using the MM/DD/YYY format. In columns A through O, use the drop down box to indicate YES related to the presence of specific symptoms, or manually enter YES in response to each symptom. The "Other" (P) column can be used to enter any symptoms not

down box to indicate YES related to the presence of specific symptoms, or manually enter YES in response to each symptom. The "Other" (P) column can be used to enter any captured in the previous columns. The "Other" (P) column is a manual entry field.

Columns U through Z describe the Resident/Participants diagnosis and includes the type of lab test, the date the lab test was obtained/sent, diagnosis by the medical provider, whether the disease or condition is reportable. Column X asis if it is a reportable disease condition and Column AA allows for use of a drop-down box of the condition. Enter the date the disease or condition was reported to VDH in Column AB using the MM/DD/YYYY format. Column AC refers to how the information was reported to VDH - by phone, fax, VDH reporting portal or other. If the method of reporting in Column AD, Labeled "Specify Other Method of Reporting".

Columns AE through AI describe the Resident/Participants outcome and include date symptoms resolved, date of hospitalization (if applicable) date of expiration (if applicable) and a Column, AI for additional comments. These columns are manual entry using the MM/DD/YYYY format with the exception of Column AI which allows manual entry/free texting.

Staff

Columns A through F house the Staff's demographics including Name, date of birth (use MMUDDYYY format), gender, primary work location, and last location worked. The Age column will be calculated based on today's date and the DOB entered in Column B. Column C, labeled "gender"inloudes a drop-down box. The remaining columns are all manual entry fields. Columns G and H pertain to onset, including last day they worked and when the symptoms began, using the MMUDDYYY Y format. Columns I through U desoribe the Staff's symptoms. Uuse the drop down box to indicate "YES" related to specific symptoms, or manually enter "YES" in response to each symptom. The "Other" Column U can be used to enter any symptoms not captured in the previous columns. The "Other" Column U is a manual entry field.

Columns V through AA describe the Staff's diagnosis and include the type of lab test, the date the lab test was obtained/sent, result, diagnosis by the medical provider, whether the disease or condition is reportable and whether additional testing is needed. Columns V, W, and Y are manual entry, Column X has a drop down response choice for results. Columns Z and AA having the option to use the drop down box to enter YES/NO. Column AB asis for identification of the reportable disease condition and allows for use of a drop-down box or manual entry/fee texting (blank box) of the condition. If manual entry is used, refer to the reportable disease list on the last tab for the name to enter. Enter the date the disease or condition was reported to VDH in Column AC using the MM/DD/YYY format. Column AD refers to how the information was reported to VDH - by phone, fax, VDH reporting portal or other. Column AE, "Other" allows for manual entry of reporting options not found in Column AD.

Columns AF through AI describe the Staff's outcome and include date symptoms resolved, date of hospitalization (if applicable) return to work date, and a Column, AB for additional comments. These columns are manual entry using the MM/DD/YYYY format.

Please Note: Information related to the health f an employee, resident, or participant is protected health information (PHI) and should be maintained in a manner that allows only those persons responsible to access based on specific roles.

Using the Summary Tables

Table 1 - Overview of Symptoms: When information is entered into either the resident/participant or staff tabs, this information will automatically flow to the Summary tab with a count based on the month and type of symptom.

A further breakdown is possible by selecting a particular month that will produce a column (graph) comparison of residents and staff. Additionally, up to three symptoms can be selected and can be viewed as a total cases by month for both residents and staff to look at seasonal (and other) variations.

Table 2 - Surveillance Summary: Overview of Diseases: Information provided in the columns for Reportable Diseases will also autopopulate to this area with a count of cases by month and a breakdown of residents vs staff similar to Table 1. A particular month can be selected and a case count of residents vs. staff will automatically populate a column graph.

Manual Entry Option for Summary Sheets

A manual option for data collection is provided in the tab marked PRINTABLE SUMMARY SHEET. Users can record symptoms on one and actual confirmed reportable conditions on the other. Resident/Particpant information is maintained separately from staff information.

Reference tab for VA Reportable Conditions

The last tab of this tool lists the 2023 VA Reportabe Conditions, the timetable expectation for reporting requirements and it is organized with the most likely found conditions in ALFs ease of locating the condition.



- Read through the user instructions and the instructions in this tab carefully
- Reach out with questions/concerns



Demographics

Resident/Participant Surveillance Tracking Tool



*All fields can be manually entered if printing spreadsheet

- Name, DOB, room and location are manually-entered fields
- Gender is a drop-down box

• Age is automatically populated when date of birth is entered



Instructions

VA Reportable Disease

Onset/Signs and Symptoms

Onset Date		Signs and Symptoms											
Date of First Symptom	Fever (over 100.3)	Cough	Shortness of breath / Difficulty breathing	Sneezing	Rash / Skin Changes	Nausea / Yomiting	Sore throat	Diarrhea	orfusion (Altered Mental Status) Outside of Individual's Normal	Abnormal fatigue	Body Aches	Other	Specify "Other" Symptom
•	-	-	*	-	*	-	*	-	Ŭ 🔽	-		*	*
5/1/2023	Yes		Yes				Yes	Yes					
5/15/2023	Yes	Yes	Yes	Yes			Yes						
6/24/2023	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes					
6/26/2023													
6/26/2023													
7/1/2023													
5/15/2023	Yes	Yes	Yes	Yes			Yes						
5/16/2023	Yes	Yes	Yes	Yes			Yes						
5/17/2023	Yes	Yes	Yes	Yes			Yes						
5/18/2023	Yes	Yes	Yes	Yes			Yes						
5/19/2023	Yes	Yes	Yes	Yes			Yes						
5/20/2023	Yes	Yes	Yes	Yes			Yes						
5/21/2023	Yes	Yes	Yes	Yes			Yes						
Instructions	Resid	lent or	Participa	ant	Staff	Su	mmary	M	anual Trac	king	VAF	Report	able Disease

- Most "Signs and Symptoms" are dropdown boxes for "Yes," otherwise leave blank
- Enter "Other" manually



Diagnosis

		D	iagnosis			
Lab/Test Type	Date Lab Test Obtained/sent to lab	Lab/Test Result	Medical Provider Diagnosis	VDSS and/or V Reportable Cond (YES/NO)	DH ition	Additional Testing Needed?
Strep Test	E (4/2022	Positivo		Vec	*	▼
Strep Test	5/4/2025	Positive	Strep	res		
		Positive				
		Positive				
		Positive				
		Positive				
		Positive				
		Positive		1		
		Positive				
		Positive		1		
		Positive				
		Positive		Î I		
		Positive				
Instructions	Resident or Participa	nt Staff	Summary	Manual Tracking	VA Re	portable Disease

- "Lab/Test Result" is a dropdown box for positive, negative and unknown
- "VDSS and/or VDH Reportable Condition" is also a drop-down box for "Yes" or "No" responses
- "Additional Testing Needed?" drop-down box for "Yes" or "No" responses



Reportable Diseases

Reportable Disea	ses		
Specify Reportable Infectious and Communicable Diseases	Date reported to VDSS and/or VDH	Method of Reporting	Specify Other Method of Reporting
Coronavirus disease 2019 (COVID-19 or SARS-CoV-2)	5/5/2023		
Coronavirus disease 2019 (COVID-19 or SARS-CoV-2)			
Campylobacteriosis (Campylobacter spp.)			
Campylobacteriosis (Campylobacter spp.)			
Campylobacteriosis (Campylobacter spp.)			
Botulism (Clostridium botulinum)			
Coronavirus disease 2019 (COVID-19 or SARS-CoV-2)			
Coronavirus disease 2019 (COVID-19 or SARS-CoV-2)			
Coronavirus disease 2019 (COVID-19 or SARS-CoV-2)			
Coronavirus disease 2019 (COVID-19 or SARS-CoV-2)			
Coronavirus disease 2019 (COVID-19 or SARS-CoV-2)			
Coronavirus disease 2019 (COVID-19 or SARS-CoV-2)			
Coronavirus disease 2019 (COVID-19 or SARS-CoV-2)			
Instructions Resident or Participant Staff Summar	V Manual Trad	king VA Re	portable Disease

- The "Reportable Infectious or Communicable Disease" can be manually entered choosing from the VA reportable disease list or selected from the drop-down box
- "Method of Reporting" is also a drop-down box choice
- Use the final column "Specify Other Method of Reporting" to manually enter a method of reporting not found in the previous column



Outcome

		Outo	ome	
Date Symptoms Resolved	Hospitalized Date	Return to Facility Date	Date Expired	Comments
				~
ns Resider	nt or Participant	Staff Su	immary Ma	nual Tracking

 Outcome fields are dropdown selections except for the "Comments" field



Demographics

			Staff Demog	raphics		
Employee Nam	e Da	te of Birth (DOB)	Gender	Age	Primary Work Location (Unit/floor)	Last Location Worked (Unit/ Floor)
	T	T	•	•	T	•
	sident or	Participant	Staff Sum	mary Manual	Tracking	Reportable Dise

- Enter "Employee Name" and "Date of Birth" manually
- "Gender" is a drop-down box
- "Age" is automatically populated when date of birth is entered
- Enter "Primary Work Location" manually
- Enter "Last Worked Location" manually



Onset, Signs & Symptoms

Onset	t Date	Signs and Symptoms												
Last Day Worked	Date of First Symptom	Fever (over 100.3)	Cough	Shortness of breath /	Sneezing	<mark>. B</mark> ash / Skin Changes	Alausea / Vomiting	Sore throat	d Diarrhea	Confusion (Altered Mental Status) Outside of Andividual's Normal	Abnormal fatigue	🖌 🛛 Body Aches	 Other 	Specify "Other" Symptom
			-											
			_	_		_	_	_	_		_	_	_	
Instructions	Resident or Pa	articip	oant	Sta	aff	Sum	nmary		Manu	ual Trackin	ng	VA	Repo	rtable Disease

- Enter "Last Day Worked" manually
- "Gender" is a drop-down box
- "Age" is automatically populated when date of birth is entered
- Enter "Primary Work Location" manually
- Enter "Last Worked Location" manually



Diagnosis

		Diagno	osis		
Lab/Test Type	Date Lab Test Obtained/sent to lab	Lab/Test Result	Medical Provider Diagnosis	VDSS and/or VDH Reportable Condition (YES/NO)	Additional Testing Needed?
Instructions R	esident or Participan	t Staff Sum	mary Manual T	racking VA Re	eportable Disease

- Enter the type of lab or test manually
- Enter "Date Obtained" manually
- Enter "Lab/Test Result" manually
- Enter "Diagnosis" manually
- "VDSS or VDH Reportable Condition" is a "Yes/No" dropdown box
- Enter "Additional Testing Needed?" manually



Reportable Diseases

Reportable	e Diseases		
Specify Reportable Infectious and Communicable Diseases	Date reported to VDSS and/or VDH	Method of Reporting	Specify Other Method of Reporting
·	· · · · · · · · · · · · · · · · · · ·	¥	¥
			(A Reportable Disc
ructions Resident or Participant Staff S	ummary Man	ual Tracking	A Reportable Dise

- Use the drop-down box to select the reportable disease
- Manually enter the date
- Select from the options under "Method of Reporting"
- If the "Method of Reporting" column does not contain the accurate reporting method, move to "Specify Other Method of Reporting" and enter the method



Outcome

	Outcome									
Date Symptoms Resolved	Hospitalized Date	Return to Work Date	Com	ments						
×	¥	×		·						
tions Posidont	or Participant	Ctaff Cummany	Manual Tracking	VA Reportable Dise						

Summary

Manual Tracking

Staff

Resident or Participant

 Outcome selections are drop-down options except "Comments," which is a free text field



Instructions

Summary – Bright Pink Tab

SURVEILLANCE SUMMARY

OVERVIEW OF SYMPTOMS



VA Reportable Disease

TABLE 1. Monthly number of residents/participants and staff who reported the following symptoms. Monthly totals are based on the date of symptom onset.

	Symptom	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23
	Fever (over 100.3)	0	0	0	0	9	1	0	0	0	0	0	0
Cough Shortness of breath/difficulty breathing foreneity	Cough	0	0	0	0	8	1	0	0	0	0	0	0
	0	0	0	0	9	1	0	0	0	0	0	0	
Number of	Imber of Sneezing	0	0	0	0	8	1	0	0	0	0	0	0
Residents /	Loss of taste	0	0	0	0	0	1	0	0	0	0	0	0
Residents /	Loss of smell	0	0	0	0	0	1	0	0	0	0	0	0
Sore throat Diarthea Other RESIDENT/PARTICIPANT TOTAL	0	0	0	0	9	1	0	0	0	0	0	0	
	0	0	0	0	1	1	0	0	0	0	0	0	
	0	0	0	0	0	0	0	0	0	0	0	0	
	RESIDENT/PARTICIPANT TOTAL	0	0	0	0	9	3	1	0	0	0	0	0
	Fever (over 100.3)	0	0	0	0	0	3	2	0	0	0	0	0
	Cough	0	0	0	0	0	2	1	0	0	0	0	0
	Shortness of breath/difficulty breathing	0	0	0	0	0	3	2	0	0	0	0	0
	Sneezing	0	0	0	0	0	3	1	0	0	0	0	0
Number of Staff	Loss of taste	0	0	0	0	0	2	0	0	0	0	0	0
Number of Stan	Loss of smell	0	0	0	0	0	3	0	0	0	0	0	0
	Sore throat	0	0	0	0	0	3	2	0	0	0	0	0
	Diarrhea	0	0	0	0	0	3	1	0	0	0	0	0
	Other	0	0	0	0	0	0	0	0	0	0	0	0
	STAFF TOTAL	0	0	0	0	0	3	7	0	0	0	0	0

In the yellow highlighted cell below, select the month that you would like to view in the following chart.

Resident or Participant

Select Month:

Instructions

Jun-23

Number of Residents/Participants and Staff by Symptom (Jun - 2023)

Summary

Manual Tracking

Staff



Viewing Diseases: Residents & Participants



Viewing Diseases: Staff

Ν	umber of Staff by Disease by Month		
Coronavirus disease 2019 (COVID-19 or SARS-CoV-2)	Botulism (Clostridium botulinum)) 🗧 Diphtheria (Corynebacterium d	liphtheriae)
	1		
0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0	0 0 0 0 0 0 0	0 0 0 0 0 0
Jan-23 Feb-23 Mar-23 Apr-23 May-	3 Jun-23 Jul-23 At	ug-23 Sep-23 Oct-23	Nov-23 Dec-23

Instructions Resident or Participant Staff Summary Manual Tracking VA Reportable Disease



Manual Tracking – Resident or Participant

SURVEILLANCE SUMMARY

Resident / Participant Analysis



Instructions:

In the table below, fill in the top row (highlighted in blue) with the 12-month window you wish to analyze. For example, if your surveillance begins in May 2023, write May 2023 in the first available space and fill in the rest of the row for each month following.
Count the number of times a resident/participant reported each symptom within each month and fill in the table to reflect that. In this same example, if 4 residents reported a loss of smell in June 2023, write "4" in the third column and seventh row. Three blank spaces have been provided at the end of the table for "other" symptoms not already listed.

Add up all the symptoms recorded in the month and write the total for that month in the TOTAL column at the bottom of the table. OPTIONAL: Instead, count the number of unique residents/participants reporting symptoms in the month and record that total at the bottom of the table.

	\downarrow ENTER MONTH \downarrow										
Resident/Participant Symptoms											
Fever (over 100.3)											
Cough											
Shortness of breath/difficulty breathing											
Sneezing											
Loss of taste											
Loss of smell											
Sore throat											
Diarrhea											
TOTAL											



Manual Tracking – Resident or Participant

				VIA	KY				
esident / Participant Analysis Health Quality Innovation Network									
nstructions: In the first column of the tabl Repeat the steps above in th	le, add the confirme e table below for re	d diseases sidents/pa	that have be rticipants wi	en seen du th confirme	ring the time d diseases.	period being	analyzed.		
				↓ ENTER MO	лтн 🗸				
Resident/Participant Confirmed Illnesses									
ΌΤΑΙ									



Manual Tracking – Staff

SURVEILLANCE SUMMARY



Staff Analysis

Instructions:

In the table below, fill in the top row (highlighted in blue) with the 12-month window you wish to analyze. For example, if your surveillance begins in May 2023, write May 2023 in the first available space and fill in the rest of the row for each month following. Count the number of times a staff member reported each symptom within each month and fill in the table to reflect that. In this same example, if 4 staff members reported a loss of smell in June 2023, write "4" in the third column and seventh row. Three blank spaces have been provided at the end of the table for "other" symptoms not already listed.

Add up all the symptoms recorded in the month and write the total for that month in the TOTAL column at the bottom of the table. OPTIONAL: Instead, count the number of unique staff reporting symptoms in the month and recording that total at the bottom of the table.

				J	ENTER MO	ОМТН 🗸				
Staff Symptoms										
Fever (over 100.3)										
Cough										
Shortness of breath/difficulty breathing										
Sneezing										
Loss of taste										
Loss of smell										
Sore throat										
Diarrhea										
TOTAL										
Instructions Resident	or Particip	ant	Staff	Summar	y Ma	anual Tra	cking	VA Rep	ortable	Disease



Staff Analysis

					•••	•••	Health	Quality In	novation Net	work
taff Analysis										
nstructions: In the first column of the table Repeat the steps above in the	e, write the c table below	onfirmed c for staff m	liseases th tembers w	nat have be ith confirm	en seen d Ied diseas	uring the ti es.	ime period	being ana	lyzed.	
				1	ENTER MO	олтн 🗸				
Staff Confirmed Diseases										



Reporting Outbreaks



Virginia Reportable Diseases

VIRGINIA REPORTABLE DISEASE LIST						
Disease	*Reporting Speed	Likely to See in ALFs/ADCs?				
Bed bugs		Yes				
Campylobacteriosis (Campylobacter spp.)	Within 3 Days	Yes				
Candida auris, infection or colonization b	Within 3 Days	Yes				
Carbapenemase-producing organism, infection or colonization	Within 3 Days	Yes				
Chickenpox (Varicella virus)	Within 3 Days	Yes				
Chlamydia trachomatis infection	Within 3 Days	Yes				
Coronavirus disease 2019 (COVID-19 or SARS-CoV-2)	Within 3 Days	Yes				
Cyclosporiasis (Cyclospora spp.)	Within 3 Days	Yes				
Giardiasis (Giardia spp.)	Within 3 Days	Yes				
Gonorrhea (Neisseria gonorrhoeae)	Within 3 Days	Yes				
Haemophilus influenzae infection, invasive	Immediately	Yes				
Hepatitis A	Immediately	Yes				
Hepatitis B (acute and chronic)	Within 3 Days	Yes				
Hepatitis C (acute and chronic)	Within 3 Days	Yes				
Hepatitis, other acute viral	Within 3 Days	Yes				
Human immunodeficiency virus (HIV) infection	Within 3 Days	Yes				
Influenza A, novel virus	Immediately	Yes				
Influenza, confirmed	Within 3 Days	Yes				
Influenza-associated deaths if younger than 18 years of age	Immediately	Yes				
Lead, blood levels	Within 3 Days	Yes				
Legionellosis (Legionella spp.)	Within 3 Days	Yes				
Listeriosis (Listeria monocytogenes)	Within 3 Days	Yes				
Lyme disease (Borrelia spp.)	Within 3 Days	Yes				
Measles (Rubeola)	Immediately	Yes				
Meningococcal disease (Neisseria meningitidis)	Immediately	Yes				
Mumps	Within 3 Days	Yes				
Norovirus		Yes				
Instructions Resident or Participant Staff	Summary Manual Tra	cking VA Reportable Disease				

*Please Note: "Reporting Speed" (Column B) refers to reporting requirements for the Virginia Department of Health.

VDSS requires notification within 24 hours once it has been determined an outbreak has occurred.



Protected Health Information (PHI)

PHI is individually identifiable health information that is maintained in various forms (i.e., electronic, paper, oral, etc.). PHI should only be shared with those who need this information to carry out their role.

The Surveillance Tracking Tool is a PHI document and should be shared only with those who need the information to carry out their role.











- <u>Surveillance Tracking Tool and User Guide | HQIN</u>
- Infection Prevention Audit Tools | HQIN
- <u>Surveillance Case Definitions for Current and Historical Conditions | CDC</u>
- <u>Surveillance Definitions of Infections in Long-Term Care Facilities:</u> <u>Revisiting the McGreer Criteria | NIH</u>
- Long-Term Care Settings HAI/AR | VDH



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