SUBJECT:

XIII-124 OUTBREAK REPORTING OF COMMUNICABLE

DISEASE

**POLICY #**: 1104

VERSION: 1

## **APPROVED BY:**

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#### **PURPOSE:**

To define an outbreak or unusual disease occurrence and delineate a process to be taken by the Ambulatory Surgical Center (ASC) in the reporting of a suspected or identified outbreak or unusual disease occurrence and follow-up of an investigation.

#### **POLICY:**

The ASC Medical Director and/or Nursing Director, in coordination with the HDHS Administrator and Infection Preventionist, are responsible to immediately report outbreak incidents of communicable illness or unusual diseases as they occur and to investigate and follow up per the directives of designated agencies and the following protocol.

#### **DEFINITIONS:**

An **outbreak** is an incidence of disease in excess of normal expectancy in a given population group over a given period of time in a geographic area.

An **unusual disease** is defined as a rare disease or a newly apparent or emerging disease or syndrome of uncertain etiology which a healthcare provider has reason to believe is caused by a transmissible infectious agent or microbial toxin.

In the ASC setting, if more than one incident of a communicable illness is identified or a higher than usual incidence occurs and appears to be healthcare associated, these incidents may be defined by Los Angeles County/ Acute Communicable Disease Control (LAC/ ACDC) Unit as an outbreak.

#### PROCEDURE:

## I. RECOGNITION AND NOTIFICATION

Any personnel becoming aware of a possible ASC epidemic, outbreak or unusual disease occurrence is to immediately report it to the Medical Director, Nursing Director (or designees) and to the Infection Preventionist (IP), through which the facility management will be notified.

#### II. PRELIMINARY INVESTIGATION

A. The ASC Medical Director, Nursing Director, IP and Administrator will confer and prepare a preliminary plan of investigation including the following:

SUBJECT:	<b>POLICY #</b> : 1104
XIII-124 OUTBREAK REPORTING OF COMMUNICABLE	102101 1101
	VERSION: 1
DISEASE	

- 1. The IP and others, as assigned, will review data and medical records for the involved patients and determine that an outbreak/epidemic exists.
- 2. A working definition of a case will be developed.
- 3. The presumptive hypotheses for the mode of transmission of the organism and procedures for testing the hypotheses will be developed.
- B. The IP will gather and compile data related to the infection(s) including:
  - 1. Conduct surveillance of medical records and microbiologic reports;
  - 2. Prepare line listing of cases;
  - 3. Interview involved personnel;
  - 4. Review factors that may conceivably play a role in transmission of an infection;
  - 5. Review infection prevention techniques as practiced;
  - 6. Maintain surveillance for further occurrence of infections, and
  - 7. Communicate with the lab for need of further testing of patients, staff or environment.

### III. COMMUNICATIONS / REPORTING

- A. Concurrently with the preliminary investigations, incidents of healthcare associated outbreaks are to be immediately reported to the local Public Health Office at Antelope Valley Health Center (A VHC) by the ASC Medical Director or Nursing Director, or their designees. HDHS Administration, Risk Management & Infection Prevention are to be notified when this report is made. If there are additional questions, the Los Angeles County Acute Communicable Disease Control Unit (LAC/ ACDC) may be consulted (phone number is 213-240-7941).
- B. Outbreak Report Determination

When an outbreak is reported to the Public Health Office at AVHC or ACDC, the Public Health Nurse (PHN) or Public Health Officer will determine whether the report constitutes an outbreak and will then open an investigation file and alert the facility and the District Health Officer.

## C. HDHS Administration

HDHS Administration is to be notified by person(s) initiating reports of the outbreak report and of PHN determination of an outbreak. If the PHN has opened an outbreak investigation file, HDHS Administration is to report the outbreak incident, as required by law, to the licensing agency and LAC/Health Facilities of DHS, and as necessary, Risk Management.

SUBJECT:	<b>POLICY #</b> : 1104
XIII-124 OUTBREAK REPORTING OF COMMUNICABLE	1 OLIG1 #. 1104
DISEASE	VERSION: 1
DISEASE	

## D. Report Forms

The PHN or Health Officer will initiate reporting forms and simultaneously distribute to all Department of Health Services and Public Health Units requiring notification.

### E. Public Information

Any questions from the community, uninvolved personnel, or news media are directed to the administrator who will act as public information coordinator.

### IV. IMMEDIATE CONTROL & ANALYSIS

## A. ASC Responsibilities

- 1. The responsibility for the ASC bringing a healthcare-associated outbreak under control lies primarily with the Medical Director, Nursing Director, the Administrator and Infection Preventionist.
- Reasonable immediate control measures will be put into effect. Such measures might include, but are not limited to, removal of common suspected sources of personnel, supplies or equipment from patient contact, or immediate in-service training in certain infection prevention techniques.

## B. Public Health Department Responsibilities

- Because of complex licensure requirements and the involvement of multiple districts, the Public Health Department is responsible for the epidemiologic investigation in the ASC. The Public Health Department may delegate the investigation to districts in selected instances.
- The Public Health Nurse acting as the agent of the Health Officer, has the
  duty to assist the facility, as necessary, in its efforts to control the spread
  of the outbreak by consultation methods of control and by monitoring the
  efforts of the ASC to ensure that its control efforts are timely and
  effective.
- 3. The PHN or Public Health Department staff may request copies of patient medical records and laboratory data.
- 4. Coordination of patient follow-up between ASC and the Health Districts may be assisted by ACDC as necessary.

SUBJECT:	<b>POLICY #</b> : 1104
XIII-124 OUTBREAK REPORTING OF COMMUNICABLE	1 OLIG1 #. 1104
DISEASE	VERSION: 1
DISEASE	

## C. Analysis of Data

The data collected in the preliminary investigation is reviewed by the investigators to determine whether a common source of infection can be implicated as the cause of the epidemic. A preliminary written report will be prepared.

## D. Further Investigation

If the cause of the infection is not evident as a result of the above investigation, expert consultation will be sought.

## V. CONCLUSION OF INVESTIGATION

- A. The investigation is continued at least as long as there are cases of infection occurring above the endemic level. A final written report of the investigation, outlining findings and recommendations is prepared and issued to the ASC Medical Advisory Committee, attending physicians, and others as needed.
- B. Health District and Licensing Agency
  These departments will be kept informed of the progress of the outbreak and its
  eventual resolution by reports generated by Public Health Department.

#### **REFERENCES:**

California Code of Regulations, Title 17, Section 2501

Los Angeles County/Department of Public Health, Communicable Disease Control Manual of Department Rules, Regulations and Control Procedures

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