

ALTSA: AFH #2024-039 ALTSA: ALF #2024-034 ALTSA: CCRSS #2024-030 ALTSA: ESF #2024-031 ALTSA: ICF/IID #2024-021

ALTSA: NH #2024-047

THIS LETTER SUPERCEDES: AFH #2023-042; ALF #2023-030; CCRSS #2023-026; ESF #2023-025; ICF/IID #2023-035; NH #2023-044

COVID-19, INFLUENZA, RSV, AND PNEUMOCOCCAL VACCINATION REMINDER

Dear Provider/Administrator/Superintendent:

This is an important reminder as we prepare for the upcoming respiratory illness season. Flu, COVID-19, and respiratory syncytial virus (RSV) are highly contagious illnesses with typical increases in circulation between the months of October through March. Pneumococcal disease is the most common cause of pneumonia and is known to spread throughout this time of year as well. Staff, visitors, and newly admitted residents can easily bring these illnesses into your facility/home. Your residents/clients can develop severe illness from any of these respiratory viruses. These illnesses can be fatal, especially for high-risk individuals.

The flu, COVID-19, RSV, and pneumococcal vaccines are the best protection against these illnesses. It is possible to become infected with more than one of these illnesses, sometimes at the same time. Vaccines help to lower the risk of becoming infected and can decrease the risk of severe illness if infected. Vaccinations help protect essential health care workers by lessening their risk for infection or severe illness and assist in keeping a healthy workforce available to meet the needs of your residents/clients.

To minimize the impact of COVID-19, flu, RSV, and pneumococcal disease in your facility/home:

- Encourage ALL residents/clients and staff to stay up to date on their COVID-19
 vaccination status, get the flu vaccine as soon as possible, AND encourage
 residents/clients and staff to get the RSV vaccine and pneumococcal vaccine as
 needed.
 - The Centers for Disease Control and Prevention (CDC) recommends everyone six months and older stay up to date with all COVID-19 vaccine doses recommended to them.
 - Anyone five years old and older, regardless of previous vaccination, is recommended to receive at least one dose of an updated 2024-2025 COVID-19 vaccine at least two months since the last dose of any COVID-19 vaccine.

Dear Provider/Administrator/Superintendent October 1, 2024 Page 2

- Immunocompromised people and children aged 6 months to 4 years old that have not completed a primary COVID-19 vaccine series may need more than one dose to be up to date.
- While there is not a mandate for health care or long-term care facility staff to be up to date with COVID-19 vaccinations, some facilities may still have COVID-19 vaccine policies for residents, staff, or visitors.
- Visit the Department of Health's COVID-19 vaccine webpage, <u>www.CovidVaccineWA.org</u>, for up-to-date information on how to get the vaccine and for materials to share with your residents, staff, and/or visitors.

The 2024-2025 Influenza vaccine has been updated. The recommended vaccine update is a trivalent vaccine that will protect against three types of circulating influenza viruses. Fall is the best time to get vaccinated because it ensures protection before flu begins to circulate widely. Staff who have not received the flu vaccine this year should get vaccinated as soon as possible. For more information on immunizations for seniors, visit the DOH Immunization for Seniors webpage.

The RSV vaccine is available for people 60 years and older. Adults may receive one dose of RSV vaccine after discussing with their health care provider if the vaccine will be beneficial. People who are 60 or older and have weak immune systems, chronic medical conditions, or live in nursing homes or other medical facilities are at higher risk for severe RSV illness. Those at higher risk may benefit from RSV vaccination. For more information visit: Respiratory Syncytial Virus | Washington State Department of Health.

The pneumococcal vaccine helps protect against bacteria that cause pneumococcal disease. These bacteria can cause many types of illnesses, including pneumonia, ear infections, sinus infections, meningitis, and/or blood infections. There are different vaccines that are recommended, depending on a person's age and risk factors. For more information on pneumococcal vaccinations visit: Vaccines for Pneumococcal | CDC.

- 2. Wash your hands and use alcohol-based hand sanitizer frequently. Many of the healthy habits used to prevent flu also help prevent RSV, COVID-19, and pneumococcal illness. Promote proper hand-washing among your staff and residents/clients to minimize germs.
- **3. Consider wearing a face mask.** Masks may help prevent people who have respiratory illnesses like COVID-19 from spreading to others. Source control is recommended for all individuals who have suspected or confirmed respiratory infection (e.g. those with runny nose, cough, sneeze) or who had close contact or a higher-risk exposure with someone with SARS-CoV-2 infection, for up to 10 days after their exposure.
- **4. Stay home and away from others if sick.** Prevent the spread of illness by having policies or protocols in place for staff to stay home if experiencing symptoms of a respiratory viral illness. The following resources can be used to guide when staff should stay home and return to work after a respiratory illness:
 - CDC Guidance for Managing Healthcare Personnel with COVID-19 infection
 - CDC Prevention Strategies for Seasonal Influenza in Healthcare Settings
 - CDC Respiratory Virus Guidance

Dear Provider/Administrator/Superintendent October 1, 2024 Page 3

- DOH What to Do if You are Sick with a Respiratory Virus Illness
- 5. Be familiar with the reporting and notification rules for your setting. Contact your local health jurisdiction whenever a resident/client tests positive for COVID-19 or flu, or if you see a sudden increase in acute respiratory illness (two or more ill residents/clients within 72 hours). Your local health jurisdiction can advise on testing, antiviral treatment, prophylaxis, and infection control. Visit www.doh.wa.gov/localhealth to find your local health jurisdiction. If your long-term care setting rules require you to notify the Department of Social and Health Services (DSHS), use the online reporting tool or call the hotline at 1-800-562-6078.
- 6. Review your facility/home's ability to implement infection prevention standards and meet the health care needs of residents/clients with suspected or confirmed COVID-19 or flu. A facility/home can admit/readmit a recently ill resident/client if the facility determines they can meet all care and service needs AND follow infection control standards. For infection control guidance, visit www.doh.wa.gov/Portals/1/Documents/5100/fluoutbrk-LTCF.pdf The following additional resources can help you prepare for heightened flu activity:
 - Department of Health: <u>www.FluFreeWA.org</u>
 - Department of Social and Health Services: See Latest Guidance Regarding COVID-19 resources at <u>www.dshs.wa.gov/altsa/residential-care-services/latest-guidance-regarding-covid-19</u>
 - Centers for Disease Control and Prevention: www.cdc.gov/pneumonia/ and https://www.cdc.gov/covid/index.html
 - Advisory Committee for Immunization Practices (ACIP) Vaccine Recommendations:
 <u>Vaccine-Specific Recommendations</u>

We encourage you to continue to adhere to the <u>Standards for Adult Immunization</u>, which include routinely **assessing** the immunization status of all residents/clients and **strongly recommending** and encouraging vaccines based on the needs of each resident/client. If your facility/home provides immunizations, please **administer** and **document** all vaccines given. If your facility/home does *not* provide immunizations, please **refer** residents/clients to a vaccination provider and **document** that vaccines were given.

For more information about the Standards for Adult Immunizations, visit <u>doh.wa.gov/you-and-your-family/immunization/adult/standards-adult-immunization-practice</u>.

Thank you for your continued efforts to help fight flu, COVID-19, RSV, and pneumococcal disease.

Sincerely,

Amy Abbot, Director

Residential Care Services

Imy abbott

Tao Sheng Kwap Gett, MD MPH

Unslueland mo

Chief Science Officer

Washington Department of Health