

JB Pritzker, Governor

Sameer Vohra, MD, JD, MA, Director

## Summary and Action Items

To provide information to local health departments and healthcare facilities (HCF) regarding recommendations for:

- Temporary visitor restriction policies and
- Broader use of source control (masking)

during times of increased rates of respiratory illness and COVID-19 hospital admissions in the community.

## Background

[Respiratory illness activity](#) continues to increase in the United States, including in Illinois. Many counties have experienced increasing levels of influenza-like illness (characterized as fever of 100°F [37.8°C] or higher plus cough and/or sore throat), increases in Emergency Department (ED) visits and admissions for respiratory conditions, long-term care facility respiratory outbreaks, and increases in positive laboratory specimens for viral respiratory conditions. Several U.S. counties have also reached high [COVID-19 Hospital Admissions Levels](#).

## IDPH and LHD Response

The Illinois Department of Public Health (IDPH) recommends that healthcare facilities implement the Centers for Disease Control and Prevention's (CDC) comprehensive viral respiratory prevention and control recommendations: [Preventing Transmission of Viral Respiratory Pathogens in Healthcare Settings](#) and [Prevention Strategies for Seasonal Influenza in Healthcare Settings](#).

## Temporary Mitigation Measures

During times of increased incidence of respiratory illness in the community, IDPH supports a healthcare facility's decision to implement temporary mitigation measures which may include the following:

- Policies and guidance on visitation practices and signage at entrances with dates to ensure visitors know that this reflects current practice at the facility.
- Consider limiting visitors to those older than 18 years of age and keeping the number of visitors to two or fewer.
- Promote compliance with [Hand Hygiene](#) and Respiratory Hygiene/Cough [Etiquette](#)
- Screen visitors for symptoms of acute respiratory illness before entering the facility and place signage that encourages testing for Covid-19, Flu and RSV prior to visitation.
- Provide instruction, before visitors enter patients' rooms, on hand hygiene, limiting surfaces touched, and use of personal protective equipment (PPE) according to current facility policy while in the patient's room.
- Instruct visitors to limit their movement within the facility.
- Encourage visitors with symptoms of respiratory infection to defer non-urgent routine visits in favor of alternative mechanisms (e.g., telehealth applications) until they have recovered.
- Limit visits to patients in isolation for viral respiratory illnesses to persons who are necessary for the patients' emotional well-being and care.

Exemptions to these temporary visitor restrictions are permissible at the discretion of the HCF's Infection Prevention and Control authorities for circumstances including, but not limited to,

## Illinois Department of Public Health

compassionate care and end-of-life situations. Lifting mitigation measures is at the discretion of the HCF. HCFs should follow the [CDC guidelines](#) and IDPH supported mitigation measures when making these decisions. Local health departments and facilities should monitor respiratory illness activity in their community at least weekly during high transmission periods (October to April) and HCFs should monitor the level of activity and severity of illness they are experiencing within their facility (ER and urgent care visits, respiratory illness related hospitalizations, etc.) to help guide them with these decisions. To monitor respiratory illness activity levels in Illinois or to access additional resources, visit the [IDPH Infectious Respiratory Diseases](#) or [CDC Respiratory Viruses](#) pages.

### **Broader Use of Source Control**

Source control refers to use of respirators or well-fitting face masks to cover a person's mouth and nose to prevent spread of respiratory secretions when they are breathing, talking, sneezing, or coughing. Masking can help prevent facility transmission of COVID-19, and other prevalent respiratory diseases such as influenza and RSV. IDPH recommends that HCFs institute facility-wide masking when any one or more of the following conditions are met:

- COVID-19 Hospital Admissions Levels are [HIGH in their county](#).
- ILINet level of Respiratory Illness Activity is [HIGH statewide](#) even when county specific COVID-19 Hospital Admissions are not HIGH
- If facility specific or local data suggests elevated transmission of respiratory pathogens such as RSV or flu based on the discretion of the facility or the local health department, even when COVID-19 Hospital Admissions Level by County or Respiratory Illness Activity level may not be HIGH.

Universal masking should also be considered during periods of higher levels of transmission of other community respiratory infections besides COVID-19, Flu and RSV. Such an approach could be implemented facility-wide or, based on a HCF risk assessment, targeted toward higher-risk areas (e.g., emergency departments or urgent care) or patient groups (e.g., when caring for patients with moderate to severe immunocompromise).

Examples reflecting higher levels of community respiratory illness transmission could include:

- Months during the typical respiratory illness season (e.g., October-April)
- National data on trends of respiratory viruses suggesting the beginning of respiratory virus season (e.g., the [RESP-NET interactive dashboard](#) or data from the [National Emergency Department Visits](#) for COVID-19, Influenza, and Respiratory Syncytial Virus)
- Local (including at the HCF level) increases in emergency department or outpatient visits related to respiratory infections.

Universal use of source control in common areas is also recommended as a mitigation measure during outbreaks of COVID-19 in healthcare facilities and may be ended once no new cases have been identified for 14 days AND local hospital COVID-19 admission levels are low or medium.

### **Source Control Options**

Healthcare Providers: Source control options for healthcare providers include:

- A well-fitting [mask](#).
- A NIOSH Approved® particulate respirator with N95® filters or higher.
- A respirator approved under standards used in other countries that are like NIOSH Approved N95 filtering facepiece respirators (Note: These should not be used instead of a NIOSH Approved respirator when respiratory protection is indicated).

- A barrier face covering that meets ASTM F3502-21 requirements, including Workplace Performance and Workplace Performance Plus masks. When used solely for source control, any of the options listed above for HCP could be used for an entire shift unless they become soiled, damaged, or hard to breathe through. If used during the care of a resident for which a NIOSH-approved respirator or well-fitted mask is indicated for personal protective equipment (PPE) they should be removed and discarded after the resident care encounter and a new one should be donned.

Health care facility patients or long-term care facility residents:

It is recommended that residents wear a well-fitted mask in common areas when the facility is experiencing an outbreak of COVID-19 or is otherwise recommended by public health. Those patients or residents experiencing an acute respiratory illness should refrain from facility-wide activities or communal dining until symptoms of respiratory illness (like fever, cough, sore throat etc.) subside. During an outbreak, long term care facility residents do not have to wear source control in their own rooms.

Visitors:

Facilities may choose to offer well-fitting masks as a source control option for visitors but should allow the use of a mask or respirator with higher-level protection that is not visibly soiled.

## Contact

IDPH Respiratory Surveillance Program 217-782-2016 or [DPH.Respiratory@Illinois.gov](mailto:DPH.Respiratory@Illinois.gov) or the IDPH Regional Infection Prevention Program at [DPH.IP@Illinois.gov](mailto:DPH.IP@Illinois.gov).

## Target Audience

Local Health Departments, Hospital Infection Preventionists, Infectious Disease Physicians, Hospital Administrators, Long-term Care Facilities, and Regional Health Offices.

## Date Issued

December 14, 2023

## Resources

[Prevention Strategies for Seasonal Influenza in Healthcare Settings](#)

[Preventing Transmission of Viral Respiratory Pathogens in Healthcare Settings | Infection Control | CDC](#)

[Respiratory Virus Activity Levels - CDC](#)

[IDPH Infectious Respiratory Diseases](#)