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GAVIN NEWSOM  
Governor

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**TO:** General Acute Care Hospitals (GACH)  
Skilled Nursing Facilities (SNF)

**SUBJECT:** Requirements to Report Outbreaks and Unusual Infectious Disease Occurrences

**AUTHORITY:** Title 42 Code of Federal Regulations (CFR) section 482.42,  
Title 17 California Code of Regulations (CCR) sections 2500-2502,  
Title 22 CCR sections 70737, 70739, 72523, 72539, and 72541

**All Facilities Letter (AFL) Summary**

This AFL reminds providers of the requirements to report outbreaks and unusual infectious disease occurrences to the local public health officer and the California Department of Public Health (CDPH), and provides definitions and examples of reportable incidents.

Health facilities licensed by CDPH Licensing and Certification (L&C) are required to report outbreaks and unusual infectious disease occurrences to the local public health officer and their respective [District Office](#) (DO).

**Definitions:**

**Outbreak** - The occurrence of cases of a disease (illness) above the expected or baseline level, usually over a given period of time, in a geographic area or facility, or in a specific population group. The number of cases indicating the presence of an outbreak will vary according to the disease agent, size and type of population exposed, previous exposure to the agent, and the time and place of occurrence. Thus, the designation of an outbreak is relative to the usual frequency of the disease in the same facility or community, among the specified population, over a comparable period of time. A single case of a communicable disease long absent from a population or the first invasion by a disease not previously recognized requires immediate reporting and epidemiologic investigation.

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**Unusual Disease** - A rare disease or a newly apparent or emerging disease or syndrome of uncertain etiology which a health care provider has reason to believe could possibly be caused by a transmissible infectious agent or microbial toxin.

**Unusual Occurrences** - Occurrences such as epidemic outbreaks, poisonings, fires, major accidents, death from unnatural causes or other catastrophes and unusual occurrences which threaten the welfare, safety or health of patients, personnel or visitors.

**Examples of Reportable Incidents:**

CDPH is aware that licensed facilities are interpreting these requirements differently. To improve understanding of the requirements, CDPH provides the following examples of outbreaks or unusual infectious disease occurrences that should be reported:

- Single case of colonization or infection with a novel multi-drug resistant organism (MDRO) that was never previously or only rarely encountered in California, such as:
  - *Candida auris*
  - mcr-1-producing bacteria
  - Vancomycin-resistant *Staphylococcus aureus* (VRSA)
  - pan-resistant MDRO
- Single case of measles in a patient not placed into airborne isolation precautions upon facility entry, or a healthcare worker or other employee
- Single cases of healthcare-associated legionellosis
- Single case of healthcare-associated invasive group A beta hemolytic *Streptococcus*
- Cluster or suspected transmission of methicillin-resistant *S. aureus* (MRSA) colonization or infection in a neonatal intensive care unit (NICU) or other high-risk location (Note: should be reported upon identification of the MRSA cluster while awaiting results of genetic-relatedness testing if performed)
- Cluster or suspected transmission of any MDRO
- Outbreak or increased incidence of disease due to any infectious agent occurring in residents or persons working in the facility, such as:
  - Staphylococci
  - Vancomycin-resistant *enterococci* (VRE)
  - Pseudomonas
  - Clostridium difficile
  - Carbapenem-resistant enterobacteriaceae (CRE)
  - multi-drug resistant *Acinetobacter*
- Intra-facility infectious disease outbreak of influenza, gastroenteritis, pneumonia, or respiratory syncytial virus
- Infections associated with transfusions, biologics, contaminated medications, replacement fluids, or commercial products
- Foodborne infectious disease outbreak
- Clusters of positive tuberculosis test conversions
- Single case of active pulmonary or laryngeal tuberculosis in a nursing home resident or employee

**Please note the above list is not all-inclusive.** Rather, it should be used as a guide when making a determination on whether or not to report an occurrence. **If in doubt, report.**

Upon receipt of a report of an outbreak or unusual occurrence, the local public health department recommends control actions and may conduct an epidemiologic investigation. The DO makes a determination on regulatory follow-up action, which may include an onsite survey. The CDPH Healthcare-Associated Infections (HAI) Program is available to local public health authorities and L&C for consultation on infection control and containment measures.

If you have any questions, please contact your respective L&C District Office or the HAI Program ([HAIProgram@cdph.ca.gov](mailto:HAIProgram@cdph.ca.gov)).

Sincerely,

**Original signed by Heidi W. Steinecker**

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