

West Virginia ILINet Sentinel Provider Program 2020-21

FAQ for Potential Participants

Q: What is an ILINet sentinel provider?

Unlike that of many other diseases, influenza surveillance is not focused on determining and quantifying cases with clear cut definitions. Instead, a variety of different surveillance indicators are collected by state and national influenza surveillance programs to determine the timing and relative severity of each influenza season. **ILINet sentinel providers are healthcare providers who report how many visits they have weekly for influenza-like illness (ILI) into a CDC-run system called ILINet.** Nationwide, more than 2,000 providers participate as ILINet sentinel providers every year. In recent years, West Virginia has 50-60 sentinel providers participate in this effort.

Q: Who is eligible to be an ILINet sentinel provider?

- Healthcare providers of any specialty, **preferably primary care providers/providers who would likely see patients for respiratory illnesses throughout the year**
- Can be associated with a hospital or health system – just need to check during enrollment that the provider's ILI data is not already reported through other means
- Clinical laboratories are not eligible – they have a separate reporting process that is required by the West Virginia Reportable Disease Rule.
- Must have access to the Internet and be able to log on to ILINet to make weekly reports – **NO FAXING**

Q: What are the responsibilities of an ILINet sentinel provider?

1. Access ILINet by **4:00 PM every Wednesday** to report counts of your patient visits occurring the previous week. The primary reporting period is 33 weeks between October and late May. Directions on how to use ILINet will be provided in a mailed packet.
2. Collect respiratory specimens from patients with ILI and submit up to five per week to the state public health laboratory (Office of Laboratory Services) for influenza testing and characterization. **Collection and supply issues due to COVID-19 will be monitored and addressed throughout the season.**
3. Communicate with local health department and/or influenza surveillance program about important matters (e.g. technical issues, changes in point of contact, local ILI outbreaks of which sentinel provider is aware).

Q: What are the incentives of being a sentinel provider?

- Free doses of adult influenza vaccine distributed by the West Virginia Division of Immunization Services, with sentinel provider's staff size used to determine how many doses provided (maximum 100 doses). Further information on who can be vaccinated with these doses, as well as proper billing and reporting of their administrations, will be communicated to sentinel providers who request doses.
- Free specimen collection kits and shipping materials to submit respiratory specimens to the state public health laboratory, as supply and funding are available.

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- Distribution of the West Virginia Weekly Influenza Surveillance Report

Q: How does a healthcare provider officially become a sentinel provider?

Healthcare providers need to enroll as sentinel providers every year, regardless of whether they participated last year or in previous years. Please enroll by completing [this online form](#). Due to issues experienced last year and to the “new normal” created by the COVID-19 pandemic, **provider enrollments by fax or e-mail will no longer be accepted**. Once a provider has filled out the online enrollment form, the influenza surveillance program will distribute communications and other materials to them in a timely manner.

Q: Will there be changes to the sentinel provider program this year because of COVID-19?

CDC has not changed what sentinel providers will be reporting in ILINet every week. Sentinel providers will need to report counts of visits for ILI by age group and total visits each week. The deadline for reports will be the following Wednesdays at 4:00 PM so that the influenza surveillance coordinator can determine what geographic spread to report to the CDC.

A major change to not only the sentinel provider program but to the influenza surveillance program at large is how we conduct our virologic surveillance at the state public health laboratory. The program will be finalizing a testing algorithm very soon that will account for the differences in testing for COVID-19 (diagnostic) and influenza (surveillance) at the laboratory as well as biosafety concerns. At this time, it is likely that sentinel providers will still be able to submit respiratory specimens – we will just need to communicate changes as far as what specimens will be accepted, how quickly they will be tested, and how we can assist with collection and shipping.

Q: Are there opportunities to learn more about this program or influenza surveillance in general?

The West Virginia influenza surveillance program holds an annual webinar. This year, the West Virginia Immunization Network will host [The 2020-2021 Influenza Season – Prevention, Control, and Surveillance of a Long-Time Threat in a New Era](#) on **Thursday, September 3rd at 12:00 PM**. Continuing education available for physicians, nurses, pharmacists, and laboratorians.

Thank you for your consideration of this program! If you have further questions, please contact the influenza surveillance coordinator at lauren.j.spadafora@wv.gov.