

Summary of October 21, 2020 meeting
Between DPH and Nursing Homes and Assisted Living Services Agencies
The notes below summarize information shared by DPH with Nursing Homes and Assisted Living Agencies on the weekly industry call. Information is subject to change week to week. Facilities should always consult DPH, CDC and CMS guidance for the most up-to-date information.

Nursing Homes:

Overview of COVID-19 in Connecticut and Nursing Home Outbreak Trends

- The Department provided an overview of the week to week NHSN data for the most recent 14-day period.
- Positive cases in nursing homes have increased over the past 14 days. The Department has taken into consideration the false positives that took place this week.
- Reminder to facilities who have been notified of a false positive, NHSN data can be changed at any time by the facility.
- In addition to the positive cases in nursing homes, the state has seen a rise in community incidences of COVID-19. Community incidences will cause staff cases to increase. Some cases were determined by staff to staff interaction within the facility, and there has been an increase in staff to resident transmissions.
- Community transmission to staff is common. Nursing home staff should be vigilant in taking precautions when out in public especially in communities with increased incidences.
- Link to the community data map: <https://portal.ct.gov/Coronavirus/COVID-19-Data-Tracker>. The communities with highest incidences are in red with “15 or more cases per 100,000” and Orange where there are “10-14 cases per 100,000”. Facilities should be aware of staff travelling from areas with high incidences.
- Adora is out of the office for the next 2 weeks – facilities with questions re NHSN, should reach out to the Department’s HAI program for a response.

Survey findings over the last week.

- There were 43 visits conducted from 10/15 to 10/21.
- During these visits the following findings were noted:
 - Inappropriate use of PPE i.e. mask not used by recreation, dietary and nurse aide staff and visitors along with not being provided to patients in the hallways and common areas.
 - Inappropriate documentation of screening of staff, including the thermometer being set at Celsius and the screening person not knowing how to convert to Fahrenheit to see if the person had a temperature.
 - Missing signage for transmission-based precautions
 - Staff not wearing a N95 mask during a nebulizer treatment
 - Hand hygiene issues when doffing protective equipment and cleaning a face shield
- A brief discussion took place regarding PPE use for dietary staff. If the staff are only walking into the room to drop off a tray and leave, minimal PPE is needed. However, the Department suggested the tray drop off be bundled with other activities taking place in the resident’s room with staff such as a nurse or nurse aide bring in the tray when completing care with the resident.

Shift coaches.

- The Department is considering guidance and training for staff persons in a facility that can function as shift coaches. This person’s role would be infection control monitoring by observing

staff and looking for items that would make the facility out of compliance during the shift. The individual would be tasked with giving friendly reminders to wear appropriate PPE, including use of masks and hand hygiene.

- A similar process was implemented by Miller Memorial where they had their managers complete surprise inspections to ensure appropriate infection control techniques were taking place.
- Facilities interested in piloting this model should send an email to Lita at: adelita.orefice@ct.gov.
- Facilities do not need to wait for the guidance to come out from the Department to implement this program. They should feel free to take the initiative to move forward.
- This program is not supposed to be considered punitive or enforcement, but to provide support to the facility in infection control.

Rapid Response Teams.

- The Department is having internal discussions on the implementation of rapid response teams to support nursing homes in a consultative way rather than punitive or enforcement.
- The Department has developed concepts and is in the process of formalizing the structure.
- The rapid response team would be made up of a multidisciplinary team from the Department that would include a nurse consultant and Life Safety Code person from Facilities Licensing and Investigations Section, and an epidemiologist from the Healthcare Associated Infections Program.
- The team would be deployed when an outbreak or increase in incidences occur in the nursing home to support facilities in their infection control measures.
- Facilities should make the bed board and floor plan available to the rapid response team upon arrival.
- Some of the lessons learned by the Department over the past few weeks include:
 - It is important to quarantine individuals separately whenever possible
 - If individuals are quarantined together, they should be tested early and frequently (every day to every other day) using the antigen tests.
 - Need to detect the individual's COVID status ASAP to minimize spread.
 - If a facility is using their antigen tests, they should keep ordering more from the suppliers.

Commissioner's PPE Stockpile Order.

- A blast fax related to the [Commissioner's Order](#) of September 24, 2020 went out to facilities on October 7, 2020. This fax provided instructions for facilities to attest they have the appropriate PPE in a stockpile. Link: <https://portal.ct.gov/-/media/Departments-and-Agencies/DPH/Facility-Licensing--Investigations/Blast-Faxes/2020-55-and-up/Blast-Fax-2020-98-Personal-Protective-Equipment-Inventory-Attestation.pdf>
- As of October 16th, the deadline for the order, 191 facilities had attested, this was a 90% rate of facilities.

- The Department is currently working with facilities who are having difficulty with supply issues to extend the October 16th deadline for 2 weeks.
- Facilities should have enough reserve PPE and hand sanitizer to manage an outbreak of twenty percent (20%) of the facility's average daily census for a thirty (30) day period.
- Facilities need to check their inventory on a monthly basis to: (1) ensure they have enough PPE, and (2) replace expired or expiring PPE and store the stockpile on site or off site in an accessible place.
- Q&A:
 - Does the 30-day supply allow for reusable/extended use options for PPE supply? Yes, it does. The Department would like to make facilities aware of the CDC gown reuse webpage. If gowns are being used as extended use, the facility needs to be aware of patients with MDRO's and make sure those residents are treated last or dispose of or wash the gown after treating the patient before seeing another patient.

PPE Online Ordering Portal.

- A blast fax with directions with instructions on ordering emergency PPE through the Department went out to all facilities on October 7, 2020.
- The Department is happy to report that the portal is working and functional.
- The department has fulfilled approximately 10 requests so far.
- Once a submission is made through the online portal, a facility can expect follow-up turn-around time between 2-4 hours.

Surge Staffing Planning and Proposed Summit

- The Department, in conjunction with LeadingAge Connecticut and Connecticut Association of Health Care Facilities, Inc will be hosting a staffing summit to discuss the challenges of staffing during an outbreak.
- The summit is scheduled to take place on October 30, 2020 from 1:30 – 3:30 via zoom.
- More information will be shared with facilities soon.

Visitation Updates and Applications for CMP Funds

- The Department acknowledges the challenge in allowing indoor visitation as the spread of COVID-19 continues to grow. However, on a call with CMS this week, they made it known that this was a priority for facilities.
- CMS has also stated that facilities may encourage but may not require visitor testing.
- If the facility tests visitors, the Department encourages facilities to use a testing standard similar to the state's travel advisory, that is a test within 72 hours of visiting.
- The Department also encourages facilities to test visitors, particularly if the nursing home or visitor is in one of the counties seeing increased rates of COVID.
- Lastly, CDC has a link to FAQ's regarding frequency of testing during an outbreak. Facilities should familiarize themselves with this page. Here is the link: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/faq.html#Testing-in-Nursing-Homes>

- QSO has an expedited process for approving CMP funds to make it easier on facilities to host visitors. It appears that the state agency will have decision making ability to release these funds. The Department has a dedicated staff member to approve requests for funding.
- Questions:
 - Is there a contact identified for the CMP funds to purchase plexiglass and other indoor visitation items?
The DPH contact for CMP funding is: Cynthia Hayle, email: Cynthia.hayle@ct.gov
 - Are pets, such as dogs or cats, allowed during the visit time? If so, are there any Infection Control measures that need to be observed?

Dogs have been shown to carry SARS-CoV-2. However, there is less data on cats. Due to the potential for pets to carry SARS-CoV-2, and the difficulty for non-human animals to practice source control we don't recommend for pets to be allowed into facilities.

Safe Holidays Initiative:

- The Department is in the process of putting together guidance for Connecticut residents on initiatives for getting through the holidays and minimize the spread of COVID.
- The Department has concerns about large family gatherings throughout the holiday season.
- Once completed, the Department will share this information with facilities and post on the COVID website.

Nursing Homes and Assisted Living Services Agencies Joint Issues:

Testing data.

- Over the course of the program, 350,000 tests have been performed, which is the largest single block of tests performed for a specific group in the state.
- There are approximately 50% of the homes testing weekly for outbreak testing, and 50% of the homes surveillance testing.

Care partner issues and program extension.

- The Care Partner testing program has been extended to December 30th.
- The Department is working on extending the care partner contracts.
- Some of the Care Partners have stated they no longer want to participate in the program. The Department is working on reassigning new Care Partners to affected facilities.
- As in the past, when a facility receives a new Care Partner, the Department works to ensure there is a warm hand off so the transition can be as smooth as possible by facilitating contact between the new and old Care Partners and the facility.

- If a facility finds that their testing being interrupted, they should use their antigen testing kits as a back-up.
- It is important to note that testing kits expire after 6 months, so facilities should use them before the kits expire.

Weekly testing for High Incidence Areas:

- The Department has requested all facilities in New London County, Windham County, the Town of Danbury and the City of Hartford complete weekly testing.
- It is likely that all facilities will be required to move to weekly testing soon.
- If a facility is experiencing an outbreak, they should be testing residents and staff weekly.

Best Practice Spotlight! Outbreak Communications by Cady Bloodgood, Director of Nursing, Geer Nursing and Rehabilitation.

- The Department worked with Geer Nursing and Rehabilitation during their recent outbreak. The Department was impressed with their communication plan and requested they provide information as a best practice.
- Geer was experiencing the outbreak in their ALSA unit.
- As soon as they determined an outbreak was taking place in the facility, they chose to communicate quickly and transparently with all the patients, families and their community.
- They used multiple platforms to communication information including their website, Facebook, and individual phone calls to all families, not just family members of residents testing positive.
- In addition, they sent out snail mail and emails to residents and their families.
- All staff on both campuses were also notified of the outbreak.
- They were clear, concise and transparent in the information they sent out.

Antigen testing for Home Health and Hospice.

- The Department has been in touch with Tracy Wodatch to discuss antigen testing for home health and hospice employees.
- However, there are some agencies that do not belong to her association.
- The Department will be providing them with BinaxNOW cards.
- In addition to the state supplement of BinaxNOW cards, the Federal Government will be providing them to larger home health and hospice providers in the different states.
- The Department thanks the facilities for facilitating testing with employees of home health and hospice agencies.

Testing Guidance.

- Nursing homes are required to report all antigen testing results through NHSN.
- The Department suggests facilities have more than one person take the NHSN reporting training through CDC. The link to this training and others is here: <https://www.cdc.gov/nhsn/ltc/covid19/index.html>

- NHSN is also available to ALSAs for reporting test results. These results should only include staff and residents, no visitors.
- Anyone who is using antigen testing should report any positive or negative results to the Department.

Vaccine Update.

- CDC is coordinating vaccine distribution directly with CVS and Walgreens.
- The Department highly recommends facilities take advantage of the pharmacy support being offered in vaccine distribution.
- There is a link on the NHSN page or facilities can sign up for the retail pharmacy partnership program by October 29 on this link:
<https://airc.cdc.gov/surveys/?s=R3TYTJDAW4>
- Q&A
 - Is there any update on use of hairdryers/blow dryers in facilities? Hairdressers are using blow dryers in salons in the community, so can we use them in facilities? There will only be one person in the salon at a time. The hairdresser will be wearing a mask. The resident will be wearing a mask if able. The door to the room will be closed. Sanitization will occur between visits. Barbers and Hairdresser salons are regulated outside of DPH, by Local Health Departments. Facilities should check the reopening guidance for salons listed on the COVID-19 Page. Additionally, they can check with their local health departments on standards.
 - Scenario question: An assisted living community WITH MEMORY CARE, is notified that a physical therapist or visiting nurse who comes to the facility tested positive. The therapist falls under the definition of staff, so the facility now begins testing 100% of the staff weekly. Residents who had contact with the therapist are quarantined – (No residents in Memory Care had contact to the therapist). ALL residents were tested the following week and all were negative. Over 14 days has elapsed since the initial exposure with the therapist. All staff have tested negative in the first week of testing, but must continue to be tested. All residents and staff are asymptomatic. What is the requirement for further resident testing in memory care or the general community?
ALSAs, including ones with memory care units are not bound to CMS requirements, but are required to State requirements to test all staff and residents in facilities pursuant to the Governor’s Executive Order.

Assisted Living Services Agencies:

Overview of COVID-19 in Connecticut.

- The Department showed the state map where incidences of COVID are on the increase and explained the concerns with cities and towns in orange and red.
- When a town is determined to be at an alert level, it is recommended they increase testing, reduce gatherings and postpone events.

- The Department is discussing the need for weekly testing in all healthcare facilities.
- The Department has noted an increase in ALSA staff, particularly in staff and contractors that work in different facilities.

ALSA Survey Findings.

- The Department continues to perform surveys on a daily basis including on weekends.
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Testing Reimbursement.

- Lita reiterated to facilities to submit their invoices ASAP.
- Invoices for testing completed between June 28 through August 31 are due by October 15, 2020.
- It is important to open any attachments from the testing vendors to see if the files are accessible/readable before forwarding the invoices to OPM for reimbursement.
- Contact information for OPM to submit invoices:

Manisha Srivastava

Manisha.Srivastava@ct.gov

860-418-6317

Directions on submitting invoices can be found in the Tool Kit for ALSA/MCR facilities.

Link: <https://portal.ct.gov/-/media/Departments-and-Agencies/DPH/Facility-Licensing--Investigations/Blast-Faxes/2020-55-and-up/Blast-Fax-2020-75-ALSA-Staff-Testing-Tool-Kit.pdf>

PPE Online Ordering portal.

- A blast fax with directions with instructions on ordering emergency PPE through the Department went out to all facilities on October 7, 2020.
- The Department has assigned staff to evaluate and complete all requests.
- If approved for emergency PPE, facilities will be notified with further instructions on obtaining the PPE.