DEPARTMENT OF PUBLIC HEALTH

Renée D. Coleman-Mitchell, MPH Commissioner



Ned Lamont Governor Susan Bysiewicz Lt. Governor

HEALTHCARE QUALITY AND SAFETY BRANCH

BLAST FAX 2020-51

TO:

All Nursing Homes

FROM:

Commissioner Renée D. Coleman-Mitchell, MPH

CC:

Deputy Commissioner Heather Aaron, MPH, LNHA

Barbara Cass, RN., Branch Chief, Healthcare Quality and Safety Branch Donna Ortelle, Section Chief, Facility Licensing and Investigations Section

DATE:

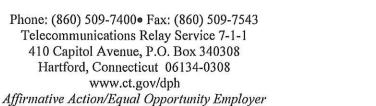
May 7, 2020

SUBJECT:

Re-launching of the LTCF COVID-19 Daily Reporting System

The attached information is specific to the re-launching of the CT Long-Term Care Facility (LTCF) COVID-19 Daily Reporting System on May 8, 2020.







STATE OF CONNECTICUT DEPARTMENT OF PUBLIC HEALTH

Renée D. Coleman-Mitchell, MPH Commissioner



Ned Lamont Governor Susan Bysiewicz Lt. Governor

Facility Licensing and Investigations Section May 6, 2020

DPH will be re-launching the CT Long—Term Care Facility (LTCF) COVID-19 Daily Reporting System on 5/8/2020. You will see a new form when you log into the FLIS portal (at dphflisevents.ct.gov) on that day.

We are re-launching to:

- 1. Provide clearer guidance on how to complete the form. There will be definitions within the form and LTCFs will be provided with a FAQ document.
- 2. Ensure DPH collects information needed to identify and respond to LTCF COVID-19-related issues. For example, given the wide range of symptoms experienced by elderly people with COVID-19, the definition of presumptive COVID-19 has been expanded¹.
- 3. Allow LTCFs to fulfill both current requirements to provide daily COVID count data and outbreak reports in one system. Once the updated system launches, LTCFs reporting to the COVID-19 Daily Reporting System via the FLIS portal will not be required to submit separate COVID-19 outbreak reports to FLIS or Epidemiology. Facilities will not be required to call in outbreak reports.

The new system will collect 2 kinds of information:

- 1. Line list data on residents with laboratory-confirmed or presumptive COVID-19
- 2. Daily counts of things like census, number of staff out sick, number of new laboratory-confirmed COVID-19 cases, number of COVID-19 cases newly hospitalized.

¹ A presumptive case. This means that you presume the resident to have COVID-19 based on symptoms. Other likely causes have been ruled out. Usually a presumed case has not been tested for the virus that causes COVID-19. However, in some cases a resident that has a negative test may be considered a presumptive case.





On the day that the new system begins you will be asked to complete a line list of all your residents who have ever had laboratory-confirmed and presumptive COVID-19 since the beginning of the outbreak (January 2020) on the system portal. This includes those who are currently in house, in hospital or discharged (whether or not they are recovered) and those who are deceased. Line list data must be entered by the end of Tuesday May 12th to ensure that facility specific COVID-19 count data can be accurately reported on Thursday May 14th. If your facility also offers assisted living, residents who had laboratory-confirmed or presumptive COVID-19 while in the assisted living portion of your facility should not be included.

We acknowledge that for some LTCFs this will require a substantial effort. However, after that, daily reporting will consist of adding new information to the line list and providing daily counts. In preparation for the new system, we would suggest that you gather the information that you will need to complete the line list. Information collected in the line list is summarized below.

We know this is a very difficult time for the staff of long-term care facilities. We thank you for your participation in this daily reporting system and for everything you do for your residents.

CT Long - Term Care Facility COVID-19 Daily Reporting System -

Line Listing Information

- Name
- Date of Birth
- Gender
- Whether family was notified
- Whether resident was transferred to your facility for the first time as known COVID-19 case
- COVID-19 laboratory testing (whether tested, result, specimen date)
- · Whether resident was ever symptomatic
- Description of symptoms
- Treatment details
- Whether resident was ever hospitalized
- Deaths (died, date of death, died while sick with COVID-19) date may be left blank if the date death occurred in hospital is unknown)
- Recovery (recovery status, date of recovery)

If necessary, LTCFs should prioritize the completion of data points in bold when entering historic information into the line list.