

**Summary of January 20, 2021 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 Home Issues:**

**Overview of COVID-19 in Connecticut and outbreak trends in nursing homes.**

- The Department provided an updated overview of the week to week NHSN data of newly diagnosed COVID-19 among residents and/or staff in a nursing home.
- Included in this overview was a map of all towns with COVID cases and their alert status, along with markers that depicted nursing homes with COVID cases within those towns.
- Individual nursing home staff and resident positive cases continue to go down. However, the Department requests nursing homes continue to be vigilant in their source control measures as community prevalence is high in many areas.
- During the past 14-day period, there were 161 nursing homes with positive cases or staff and/or resident. The number of residents and staff with positive cases went down.
- Q&A
  - Why is the average county positivity rates so much higher than the rolling 7-day state positivity rates?  
The CMS positivity rates are published based on PCR test results. They are not using antibody testing results. Antigen testing varies and may be the reason why they are PCR.
  - Guidance for family members taking residents out for medical appointments?  
There is no change in guidance. Facilities should continue to have good communication about risks and understanding that the potential for that person to be infectious even though they are asymptomatic. Educate the family member on mask wearing, crack the window in the car along with other infection control measures. The family member should also inform the family member the resident may need to be placed in the observation cohort.

**Monoclonal antibodies:**

- The Department has received increasing inquiries this week regarding monoclonal antibodies, and their allocation to Connecticut's hospitals.
- HHS initiated a new program called SPEED, which will release monoclonal antibodies to the long term care pharmacies.
- Monoclonal antibodies therapy is indicated for patients prehospitalization status, and should be administered in the first 10 days of diagnosis by PCR test.
- It is indicated for individuals with a chronic disease, a BMI of 65+, currently receiving immunotherapy, hypertension, COPD, diabetes etc.
- The monoclonal antibodies are antibodies made for patients to help fight the illness upon diagnosis.

- Patients who received their first vaccine, then tested positive for COVID can still receive the monoclonal antibodies.
- Some long term care pharmacies or other companies may reach out to nursing homes to have the monoclonal antibodies on site.
- There are resources available for nursing homes to help prepare for monoclonal antibody therapy. The Department will share the playbook with facilities.

### **Nursing Home survey findings over the last week.**

- There were 22 infection control surveys conducted from 1/6/2021 to 1/12/2021, with findings in 1 facility.
- During this visit the following finding was noted:
  - A staff person came to work with a positive diagnosis.

### **Nursing Homes and Assisted Living Services Agencies Joint Issues:**

#### **Daily Reporting Reminder**

- It is important to submit your reports by 10:00 AM daily.
- Nursing homes report through NHSN and ALSA's report through LTC Mutual Aid Plan.
- There have been several nursing homes that haven't reported in a timely manner.
- Reporting allows DPH to work with nursing homes to help control outbreaks in a timely manner and prioritize the next steps.
- The Department can provide supports to nursing homes such as a transfer to a COVID recovery facility, personal protective equipment, rapid response visits and CART visits.
- 157 facilities did not report at all or did not report in a timely manner.

#### **Testing**

- The Department was notified the weekly testing program supported by the State is being extended through April 30, 2021.
- Reminder to check the County rates through CMS to determine whether twice weekly testing is required. Link: [Rates of county positivity are posted here](#). (Archive is [here](#).)
- Q&A.
  - Based on >10% positivity rate we should stop all but compassionate visitation. How do we explain this to fully vaccinated residents?  
The status of resident vaccination is not currently considered in the guidance from CMS regarding visitation. Individuals need a couple of weeks after the 2<sup>nd</sup> dose to be fully vaccinated. Before facilities can allow individuals from the public where community incidence is high, we need to determine that the vaccine is working. Additionally, not all staff and residents are vaccinated. Lastly, compassionate care visits do not fall under the greater than 10% positivity rate, they are still allowed.

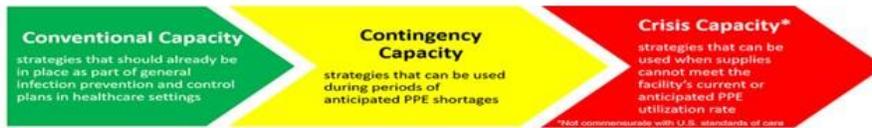
Tip of the Week.

## Tip of the Week: PPE extended use/limited reuse



**Once PPE supplies and availability return to normal, healthcare facilities should promptly move towards conventional practices**

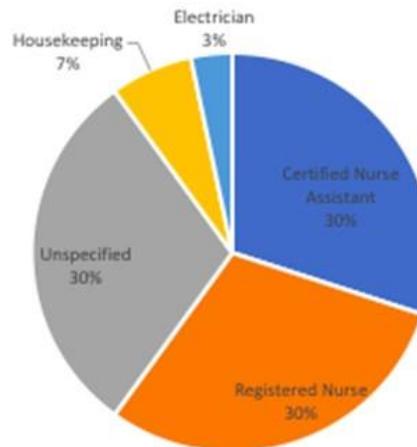
- **Limited reuse:** Limit the number of **reuses** of N95 to no more than **five** uses per device (usually one mask per day)
- Change gown between **all** patients (washable gowns OK)
- Change gloves/perform hand hygiene
- Discard **facemask** whenever it is **removed**
- May continue extended use/reuse of **face shield/goggles** unless integrity is compromised - universal use recommended



[Summary for Healthcare Facilities: Strategies for Optimizing the Supply of PPE during Shortages | CDC](#)

## Common Roles Among LTCF Employees in Workplace Clusters — Connecticut, January 1–14, 2021

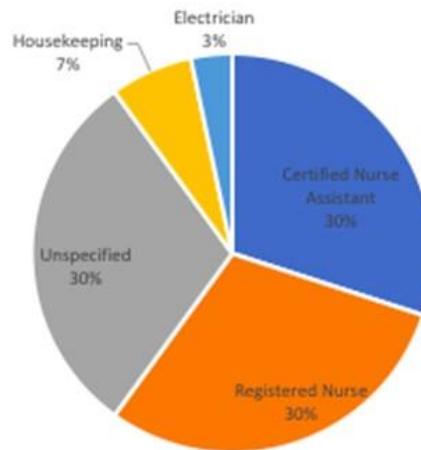
Occupation	Count	Percentage
Certified Nurse Assistant	9	30.0%
Registered Nurse	9	30.0%
Housekeeping	2	6.7%
Electrician	1	3.3%
Unspecified	9	30.0%
<b>Total</b>	<b>30</b>	<b>100%</b>



**Contact tracing data for individuals working in the Long-term care setting:**

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### COVID Recovery Facilities.

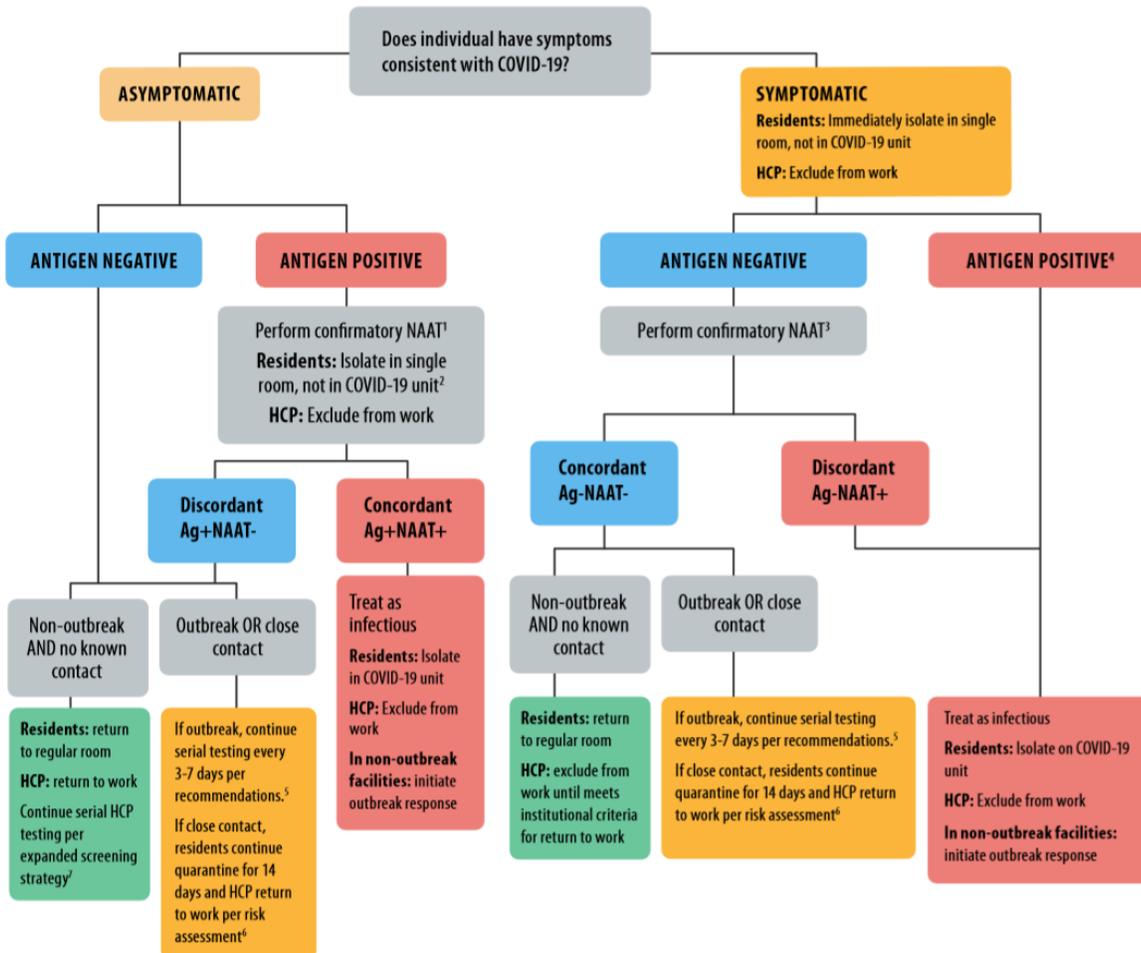
- COVID Recovery Facilities can be helpful if a facility is experiencing staffing issues, challenges and shortages.
- The COVID Recovery Facilities capacity has been running between 42 and 46%.
- The process and consideration for transfers to the COVID recovery facility include:
  - Qualifying for a SNF level of care.
  - Pre admission screening assessment must be done on all residents.
  - In a non medical setting, the facility should consider their cadre of physicians, nurses, and social workers to support the screening assessment.
  - Facilities should NOT take a reactive response and send residents to the emergency department. The Department recommends reaching out to the facility’s medical director or residents healthcare provider when the resident has a positive test and no symptoms.
  - Should a resident be experiencing a change in condition at any level, they should be transferred to the emergency room.

### Antigen testing update:

- The Department has heard that the Feds are continuing to send BinaxNOW kits to assisted living facilities and nursing homes with current CLIA waivers.
- The Department heard that some of the facility’s reagent for BinaxNOW is running out. Facilities should take into consideration the following:

- Each operator needs to complete a quality control test for each lot, which requires using 8 drops of reagent. However, when completing a regular test, only 6 drops are required.
- If a facility needs more reagent, they should contact the DPH Laboratory.
- CDC has revised their guidance for the consideration of antigen testing in nursing homes to expand to all long-term care settings. Links for antigen testing guidance can be found [here](#) and [here](#).

## CONSIDERATIONS FOR INTERPRETATION OF ANTIGEN TESTS IN LONG-TERM CARE FACILITIES



### PPE update

- Over the past week, the Department had 2 requests for PPE, all orders were filled.

### Vaccine update

- The first round of vaccines in nursing homes has been completed and most are on their second clinics.
- Assisted Living facilities began vaccine the 2<sup>nd</sup> week of January.
- The roll out seems to be moving at an appropriate pace. The Department has been working with CVS and Walgreens when there is an issue.
- DPH is working on the issue regarding the 4 week wait between vaccine and TB testing.
- Q&A.

- Is any change to the 14 day quarantine when someone comes in from hospital within 90 days of a recent outbreak and should they frequently test with antigen testing?  
There are no requirements to quarantine individuals being admitted from the hospital. The Public Health recommendation is anyone that has recovered from COVID 19 within the past 90 days do not need to quarantine as they are not infectious. If someone has been fully vaccinated, no current changes in the quarantine guidance. The Department expects guidance is coming soon. Link to CDC's clinical consideration for vaccines: <https://www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html#laboratory-testing>
- Does a facility with an infusion program need a waiver to administer monoclonal antibodies?  
The Department will review and get back to the nursing homes. Most states in New England require a waiver for monoclonal antibody therapy.
- We are hearing about vaccination clinics being cancelled. Can we be confident that our next 2 clinics will take place?  
We have not heard any clinics being cancelled. If this is taking place, please inform DPH.

**Assisted Living Services Agencies:**

**Overview of COVID-19 in Connecticut and outbreak trends in nursing homes.**

- The Department provided an overview of the week to week data of newly diagnosed COVID-19 among residents and/or staff in an ALSA.
- 91 out of the 133 licensed ALSA facilities, have positive cases of residents and staff.
- There has been an increase in the number of facilities with an outbreak, a decrease in residents with a positive result and an increase in staff with a positive case.

**Assisted Living Services Agencies survey findings over the last week**

- There were 6 surveys conducted from 1/6/2021 to 1/12/2021 with no findings.

**Q&A**

- Compassionate care visits in ALSA. Is Everyone in hospice eligible or only those at end of life or significant change in condition.  
Visitation rules set forth by CMS do not apply to ALSAs.

**Hospital transfers:**

- When transferring an individual to a hospital, the hospital would appreciate the following information being provided:
  - Date when the individual was tested
  - Testing status
  - Kind of test performed
  - Vaccine status