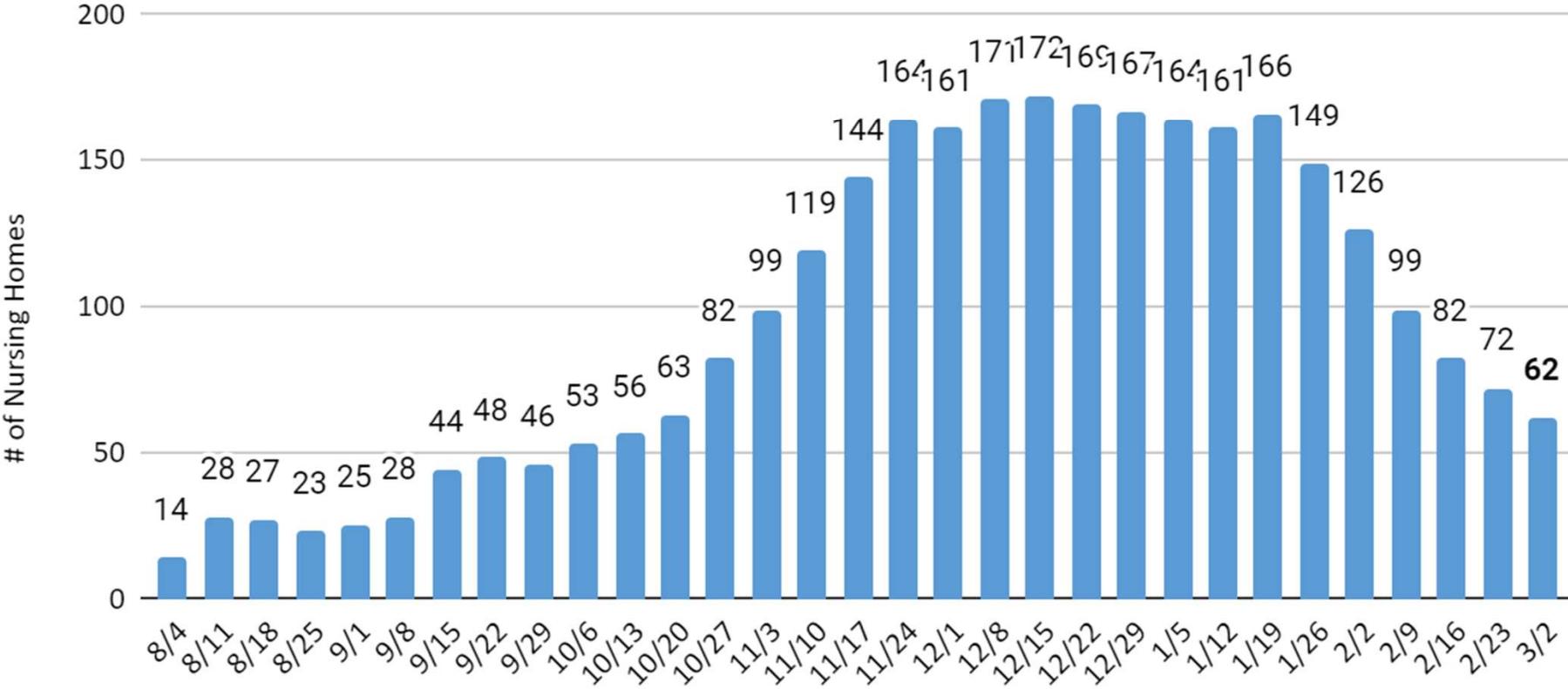


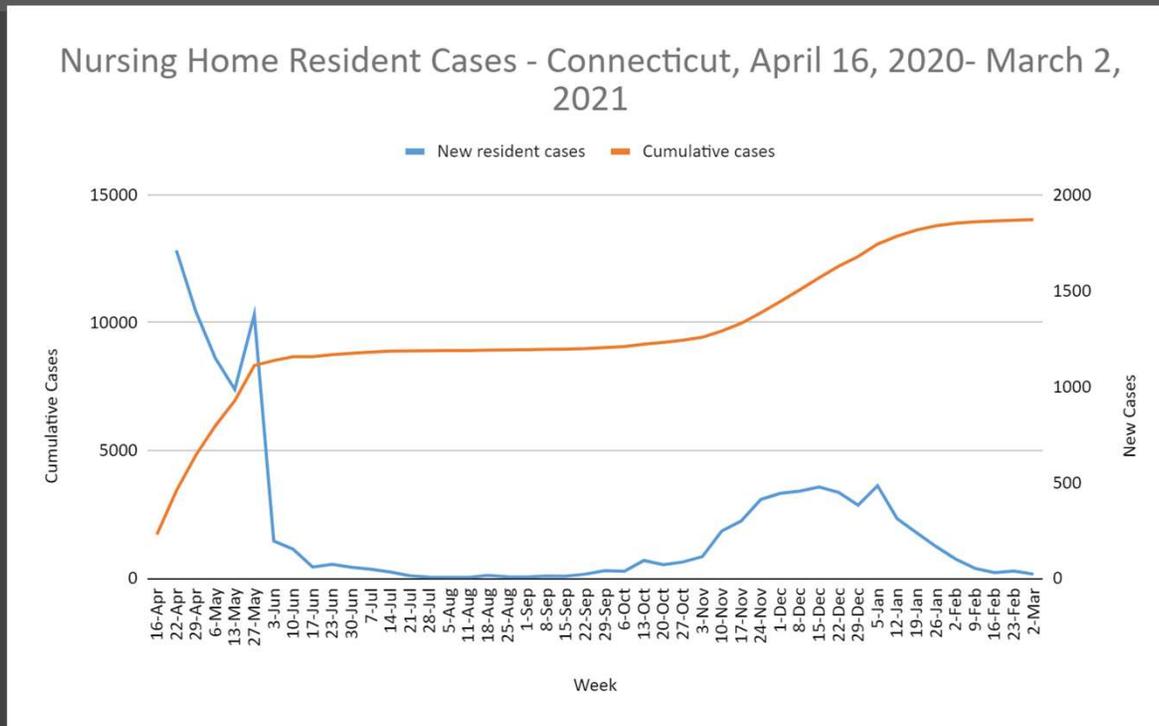
# Nursing Homes with Newly-Diagnosed COVID-19 Among Residents AND/OR Staff in the Most Recent 14-day Period



# Nursing Home Resident Incidence, statewide

## April 16, 2020 – March 2, 2021

**Resident Census: 17,912**



Date Reported	New Resident Cases (diagnosed that week)
1-Dec	443
8-Dec	455
15-Dec	476
22-Dec	448
29-Dec	382
5-Jan	483
12-Jan	321
19-Jan	238
26-Jan	166
2-Feb	101
9-Feb	52
16-Feb	30
23-Feb	38
2-March	22

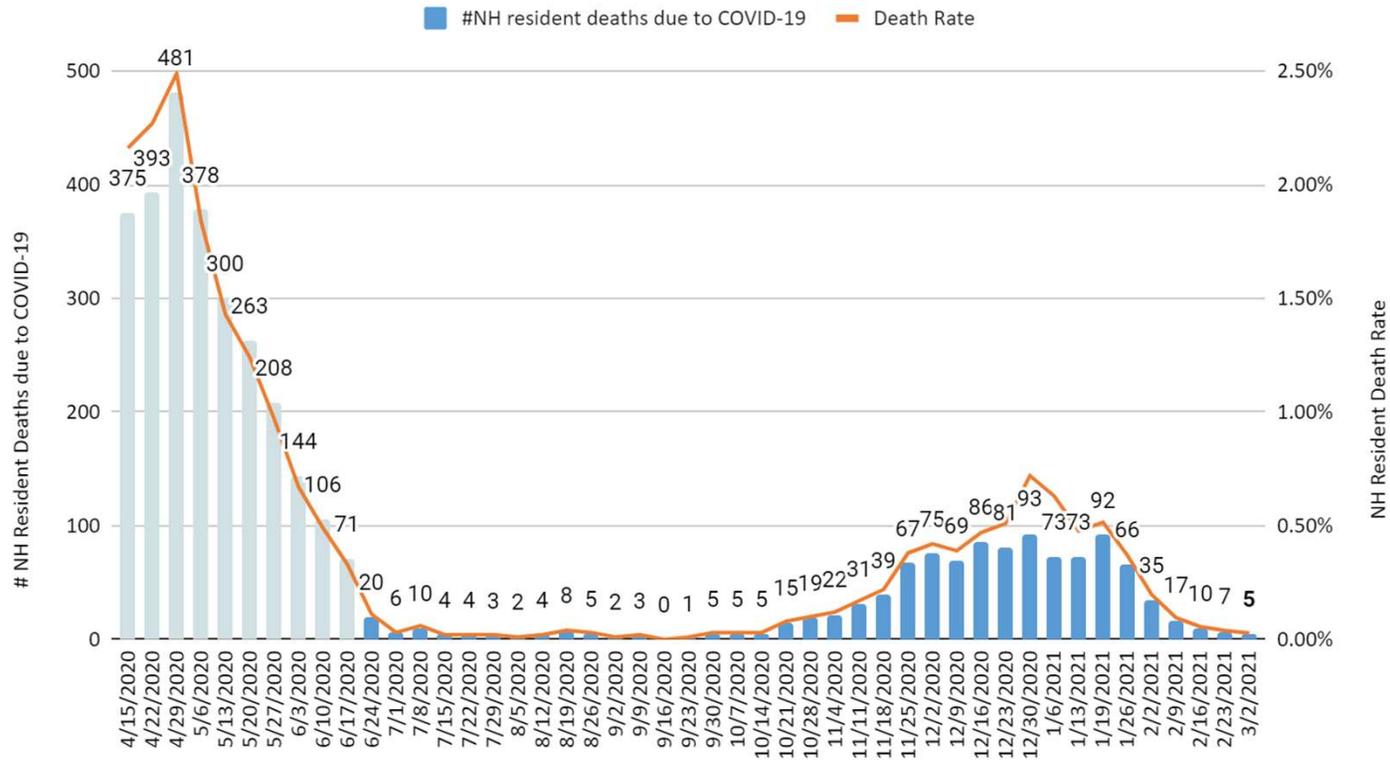
  

Facility Metrics	#Nursing Homes
New res. cases, last 2 weeks	26 (no change)
No new res. cases, >2 weeks	183

# Nursing Home Resident Deaths, statewide

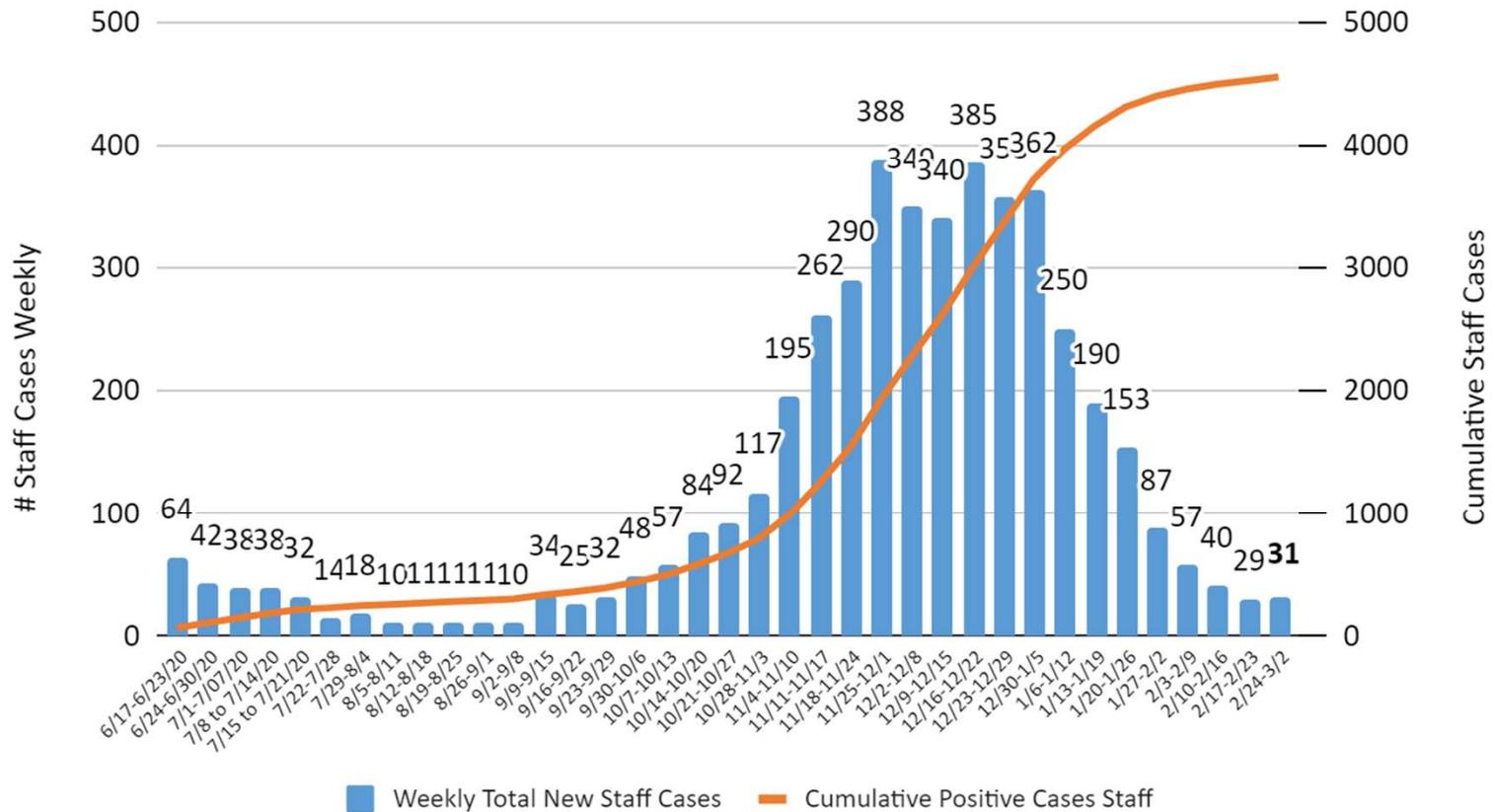
## April 15, 2020 – March 2, 2021

Nursing Home Resident Deaths Due to COVID-19 4/15/2020-3/2/2021

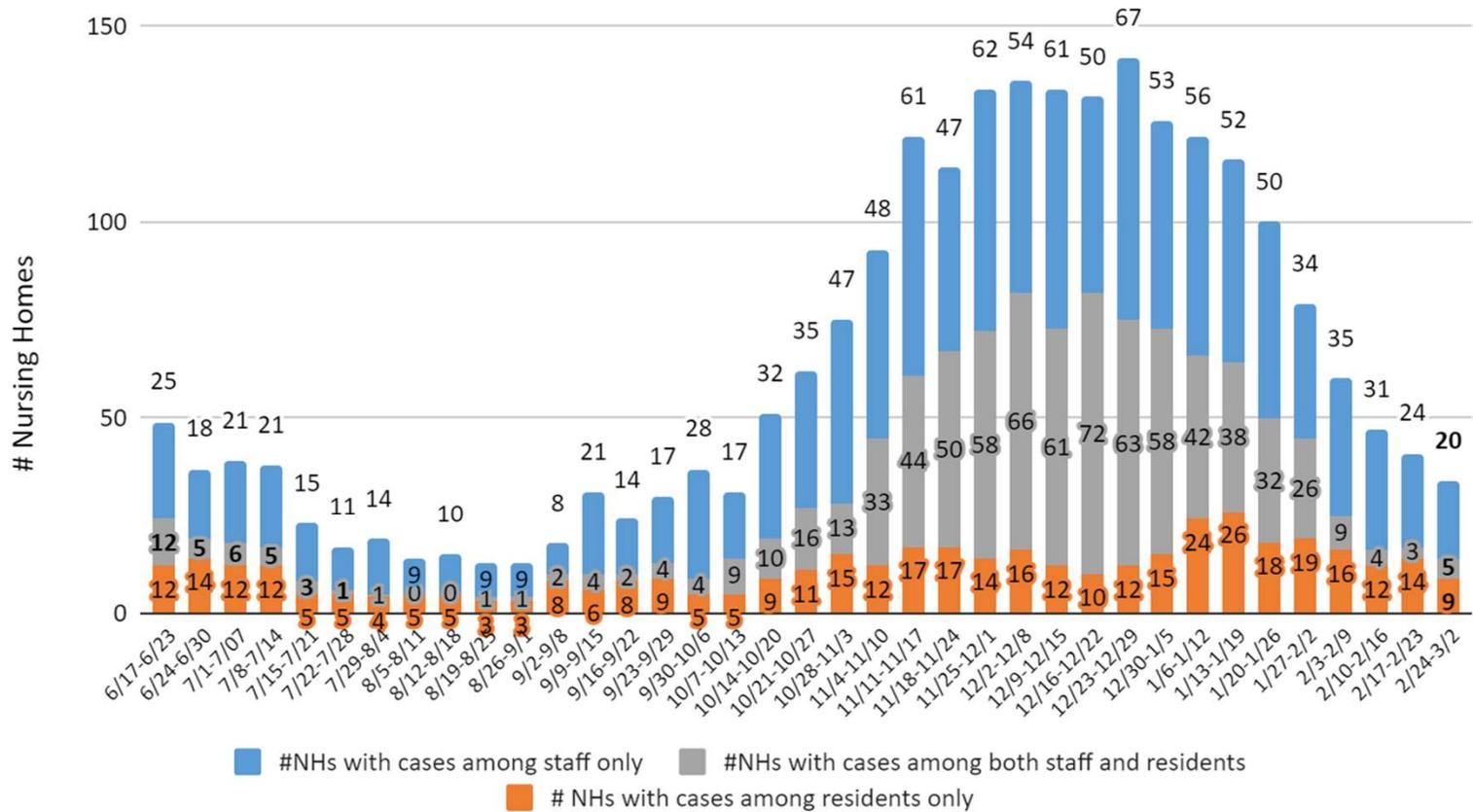


Note: Light blue= OCME lab-confirmed and suspected deaths due to COVID-19, Darker blue= NHSN data

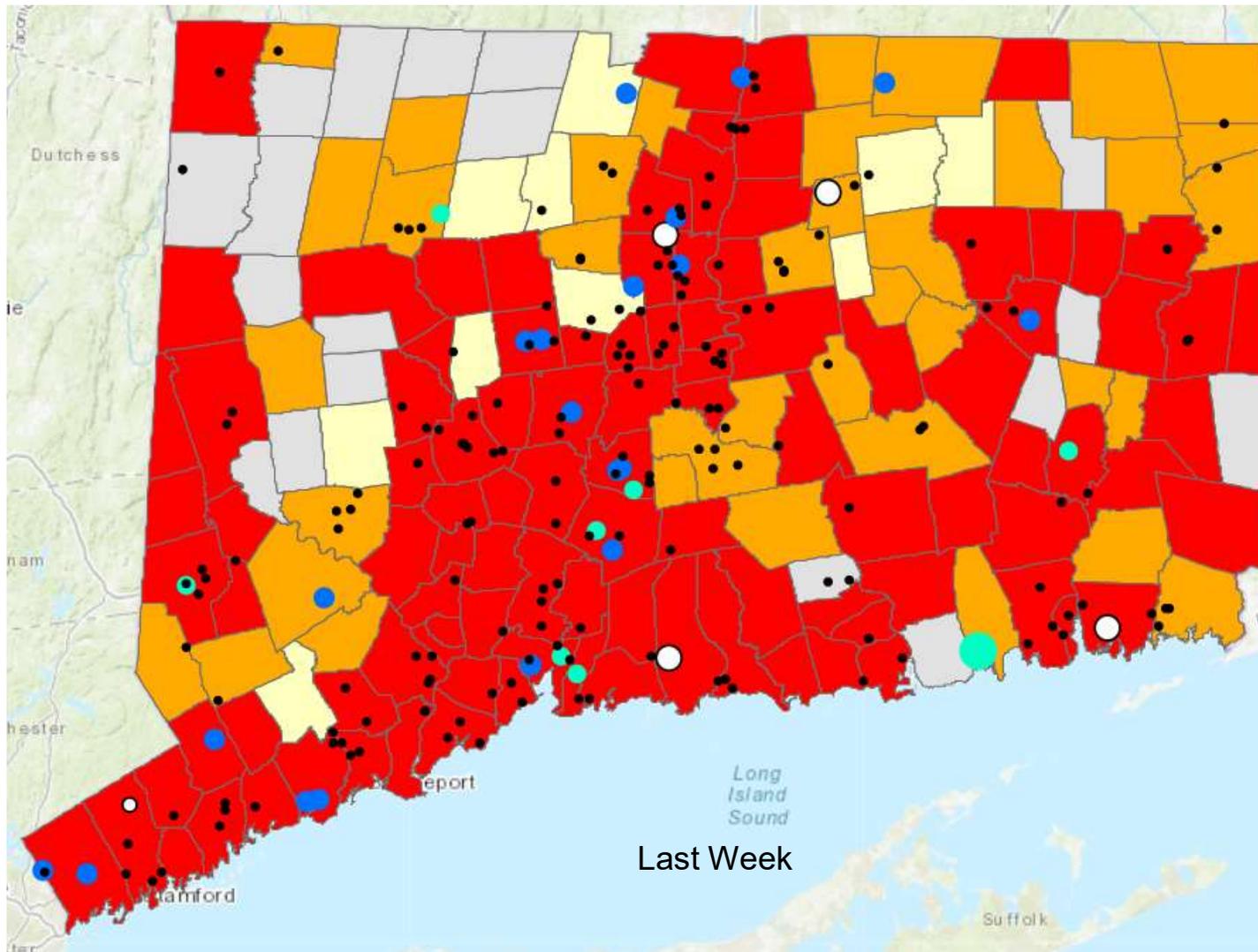
## New Staff Cases in CT Nursing Homes June 17, 2020–March 2, 2021



## Nursing Homes with Positive Staff or Residents June 17, 2020-March 2, 2021







Last Week

# Joint Session

- CDC Guidance for Vaccinated Persons
- Variants, vaccine breakthrough cases, and genomic sequencing
- Operation Matchmaker
- Friday reporting to LTC-MAP: Vaccine Needs
- Tip of the Week: risk assessment for quarantine after admission/readmission

# CDC Guidance for Fully Vaccinated People

- **Does not apply to healthcare settings.**
  - **Nursing homes are healthcare settings.**
  - **DPH recommends memory care units follow guidance for nursing homes.**
  - **DPH recommends that *non-memory care areas* of assisted living follow community (non-healthcare) COVID-19 guidance, allowing for socialization.**
- Fully vaccinated people ( $\geq 2$  weeks post-last vaccine dose) can:
  - Visit with other fully vaccinated people indoors without wearing masks or physical distancing
  - Visit with unvaccinated people from a single household who are low risk for COVID-19 disease indoors without wearing masks or physical distancing
  - Refrain from quarantine and testing following a known exposure if asymptomatic
- Fully vaccinated people should continue to wear well-fitting masks, physically distance, avoid crowds, and be vigilant with infection control around unvaccinated people at increased risk for severe COVID-19 disease.

<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/fully-vaccinated-guidance.html>

# SARS-CoV-2 Variants, Vaccine Breakthrough Cases, and Genomic Sequencing

- **SARS-CoV-2 variants have been established in CT**
  - 81 B.1.1.7 cases, 2 B.1.351 cases
  - DPH is working with labs across the state to sequence SARS-CoV-2 positive specimens
  - Sequencing of positive specimens happens *automatically* without clinician orders, as it is public health surveillance.
- **Vaccine breakthrough cases are sequenced where possible**
  - DPH will track down the specimens *where available* for sequencing
  - Vaccine breakthrough case report form should be completed, *indicating lab name*.
- **DPH cannot take ad-hoc requests for sequencing**
  - Sequencing is not a diagnostic test that can be ordered; results cannot be reported to clinicians
  - Sequencing results do not affect clinical management

# Operation Matchmaker



## Goals

- Complete Pfizer vaccination series for LTC residents in need
- Limit unvaccinated fraction of LTC residents
- Establish longer-term vaccination partners (LTC Pharmacies)

## Tasks

- Connect 2<sup>nd</sup> dose needs to vaccinators able to provide on-site Pfizer administration
- Leverage healthcare partnerships to continue vaccinating LTC residents and LTC-bound residents
- Identify and fill gaps in LTC Pharmacy vaccination program



# Federal Pharmacy Program Enrollment Process

1

Enroll with Parent Company/Network

- This is not completed through the state
- Parent companies include:
  - ABC
  - Cardinal
  - CPESEN
  - Gerimed
  - Health Mart
  - Innovatix
  - MHA

2

Onboard with State IIS (CT WiZ)

- Must have appropriate storage and handling in place
- Must be onboarding with state IIS to report doses

3

Allocation received through jurisdictional transfer of doses

- Doses will be received through a jurisdictional transfer of doses from DPH to the parent company

## Overall Vaccine Needs (as of time of reporting on Friday 3/5):

# nursing home residents that need a second dose of Pfizer-BioNTech vaccine **162 (57 facilities)**

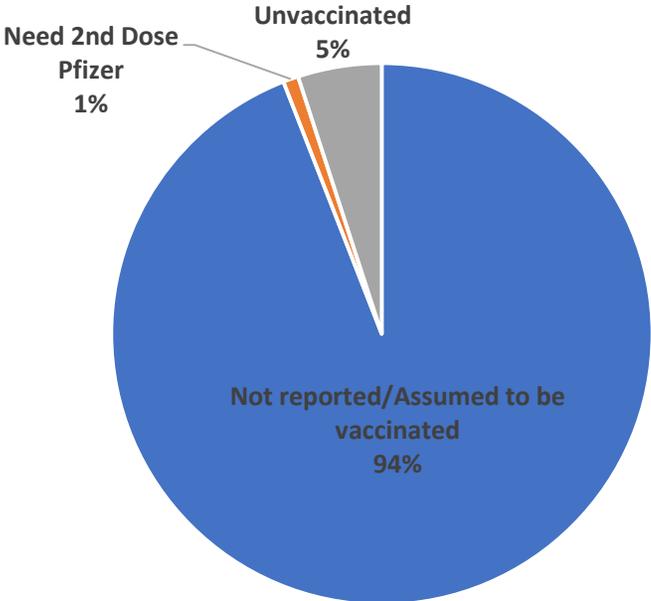
# nursing home residents who have not received any doses of COVID-19 vaccine? **899 (102 facilities)**

# assisted living residents that need a second dose of Pfizer-BioNTech vaccine? **107 (33 facilities)**

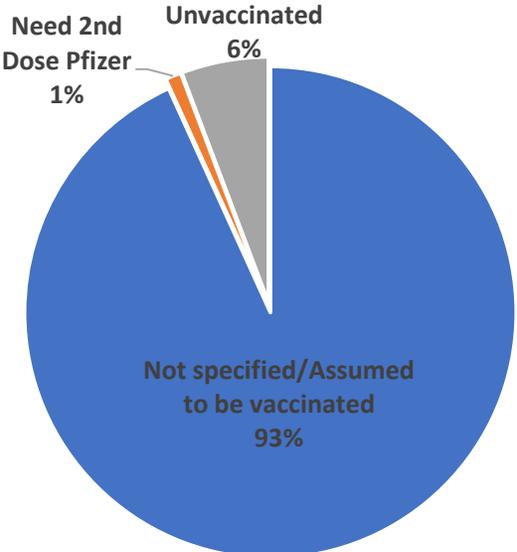
# assisted living residents who have not received any doses of COVID-19 vaccine? **214 (50 facilities)**

# Nursing Home Resident Vaccination Status

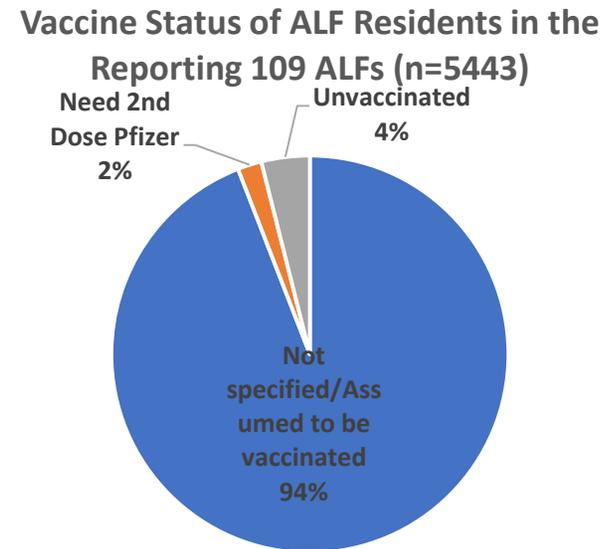
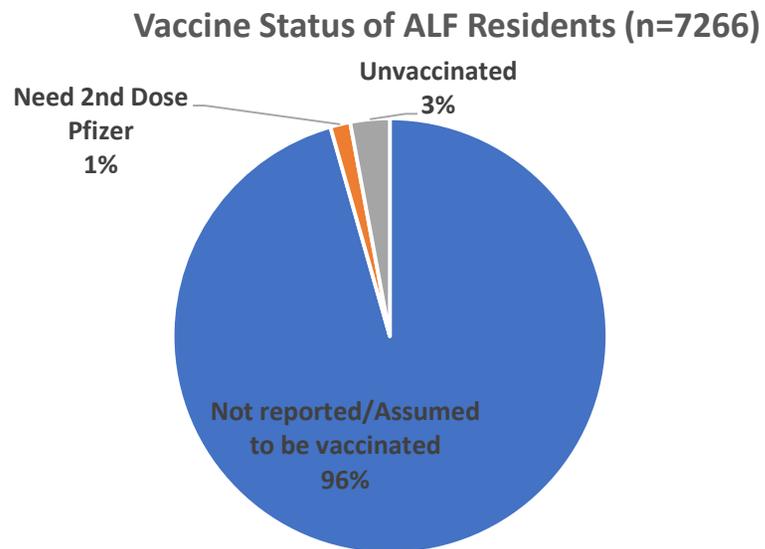
Vaccination Status of NH Residents (n=17912)



Vaccination Status of NH Residents in the 174 Reporting NHs (n=15634)



# Assisted Living Facility Resident Vaccination Status



## LTC-MAP Vaccine Needs Assessment Survey Questions – Each Friday

### Questions about vaccination status of admissions (including readmissions) during Fri-Th

#### **#Residents admitted (including readmissions) during the prior 7 days (Fri through Thurs)**

- #Residents admitted/readmissions that came from an **acute care hospital** during the prior 7 days
- #Residents admitted/readmissions during the prior 7 days **who were unvaccinated** (no doses received) for COVID-19
- #Residents admitted (including readmissions) during prior 7 days who had received 1 dose of COVID-19 vaccine prior to this admission (regardless of where the 1st dose was given)
  - Which COVID-19 vaccine(s) did the admissions this week receive? (choose all that apply: J&J, Pfizer-BioNTech, Moderna)
  - Where were 1st doses given for these partially-vaccinated admitted residents?

### Questions about vaccination needs for residents in-house (at time of reporting on Fri)

**Total # residents currently in-house that need a second dose of Pfizer-BioNTech vaccine?**

**Total # residents in-house who have not received *any* doses of COVID-19 vaccine?**

## Where can LTC STAFF get 2<sup>nd</sup> doses of Pfizer?

- Walgreens, CVS, or other Pfizer providers
- Try calling the pharmacy location if unable to schedule online.
- [COVID-19 Vaccination Scheduling Options \(ct.gov\)](#)

# Walgreens offering Pfizer

CLINTON	218 E MAIN ST
DARIEN	138 HEIGHTS RD
STRATFORD	1606 BARNUM AVE
BRIDGEPORT	960 NORTH AVE
NORWALK	55 WESTPORT AVE
RIVERSIDE	1333 E PUTNAM AVE
WESTPORT	880 POST RD E
BRIDGEPORT	4083 MAIN ST
BRIDGEPORT	1000 PARK AVE
NEW CANAAN	36 PINE ST
NORWALK	235 MAIN ST
NORWALK	54 WEST AVE
STAMFORD	780 E MAIN ST
STAMFORD	1203 HIGH RIDGE RD
FAIRFIELD	414 KINGS HWY E
DANBURY	75 MAIN ST
MILFORD	541 BRIDGEPORT AVE

DANBURY	101 FEDERAL RD
MONROE	275 MONROE TPKE
RIDGEFIELD	46A DANBURY RD
NEWTOWN	49 S MAIN ST
NEW MILFORD	173 DANBURY ROAD
HAMDEN	1697 WHITNEY AVE
HAMDEN	1191 DIXWELL AVE
NEW HAVEN	88 YORK ST
NEW HAVEN	87 FOXON ST
NORTH HAVEN	49 WASHINGTON AVE
BRANFORD	1036 W MAIN ST
WALLINGFORD	284 S COLONY RD
LITCHFIELD	331 WEST STREET
WATERBURY	649 W MAIN ST
WATERBURY	11 MERIDEN RD
SOUTHINGTON	359 MAIN ST
MERIDEN	825 E MAIN ST
WATERTOWN	1271 MAIN ST

# CVS offering Pfizer

Danbury	146 SOUTH ST.
Norwalk	696 WEST AVE.
Colchester	119 S. MAIN ST.
Enfield	875 ENFIELD ST, ENFIELD PLAZA SHOPPES
Putnam	57 PROVIDENCE PIKE
Waterford	106 BOSTON POST ROAD
Willimantic	1200 MAIN STREET
Hartford	479 BLUE HILLS AVE.
Windsor Locks	90 MAIN STREET
New Haven	215 WHALLEY AVENUE

# Tip of the Week: Risk Assessment for Quarantine

- **Where?**
  - Nursing Homes and Memory Care Units
  - Not: Independent Living, Assisted Living Apartments
- **When?**
  - New admission
  - Readmissions
  - Day trips, leaving facility for any reason
- **How?**
  - Ask: What is the risk of this resident being exposed to COVID-19 outside the facility, and the risk of them spreading it to others in the facility?

# Tip of the Week: Risk Assessment for Quarantine for Readmissions/Day-Trips

[DPH Guidance June 22](#): “**Readmission**...A risk assessment to inform the placement decision should be conducted and documented. Considerations for this risk assessment should include (but not be restricted to) evaluation of:

- Extent of COVID-19 activity and infection control measures in the hospital. In general, hospitalizations should be considered low-risk for COVID-19 exposure.
- Transportation mode and potential for unprotected (others unmasked) exposures during transportation.
- Extent of exposure from potentially higher-risk procedures including IV infusion and dialysis.
- Level of potential exposure from other procedures performed.
- Level of physical distancing and source control of others who interacted with the resident.
- Degree to which the resident can maintain physical distancing.
- Degree to which the immune system of the resident might be compromised.
- Risks and benefits of making a room change.”

# Tip of the Week: Risk Assessment for Quarantine at Admission

- [DPH Guidance Aug 12](#): “DPH now recommends that **new admissions** who have not had a COVID-positive test result in the past 90 days undergo a risk assessment upon admission to inform decision-making for the placement of the newly-admitted resident. Quarantine is not recommended for individuals who have recovered from COVID-19 during the 3-month period after symptom onset.”

# Tip of the Week: New risks to assess

- **What is the risk of vaccine-breakthrough?**
  - >20 potential NH vaccine breakthrough cases (from DPH portal line list data)
  - Vaccine breakthrough cases are NOT false positives; treat as potentially infectious!
  - Vaccine breakthrough cases are expected, and at greater frequency when incidence is high
- **What is the risk of reinfection?**
  - 2020 CT nursing home case data (primarily from DPH portal line list): >100 cases of confirmed SARS-CoV-2 diagnosis >90 days post-initial diagnosis. Some may be reinfection.
  - Reinfections can occur, and can be severe and even deadly: [Suspected Recurrent SARS-CoV-2 Infections Among Residents of a Skilled Nursing Facility During a Second COVID-19 Outbreak — Kentucky, July–November 2020 | MMWR \(cdc.gov\)](#)

# Suspected Recurrent SARS-CoV-2 Infections Among Residents of a Skilled Nursing Facility During a Second COVID-19 Outbreak — Kentucky, July–November 2020

Weekly / February 26, 2021 / 70(8);273–277

Alyson M. Cavanaugh, DPT, PhD<sup>1,2</sup>; Douglas Thoroughman, PhD<sup>1,3</sup>; Holly Miranda<sup>1,4</sup>; Kevin Spicer, MD, PhD<sup>1,5</sup> ([View author affiliations](#))

[View suggested citation](#)

## Summary

### What is already known about this topic?

Case reports of reinfection with SARS-CoV-2 exist; however, data are limited as to the frequency and outcomes of reinfection.

### What is added by this report?

Five residents of a skilled nursing facility received positive SARS-CoV-2 nucleic acid test results in two separate COVID-19 outbreaks separated by 3 months. Residents received at least four negative test results between the two outbreaks, suggesting the possibility of reinfection. Severity of disease in the five residents during the second outbreak was worse than that during the first outbreak and included one death.

### What are the implications for public health practice?

Skilled nursing facilities should use strategies to reduce the risk for SARS-CoV-2 transmission among all residents, including among those who have previously had a COVID-19 diagnosis. Vaccination of residents and health care personnel in this setting is particularly important to protect residents.

## Article Metrics

### Altmetric:



Citations: 0

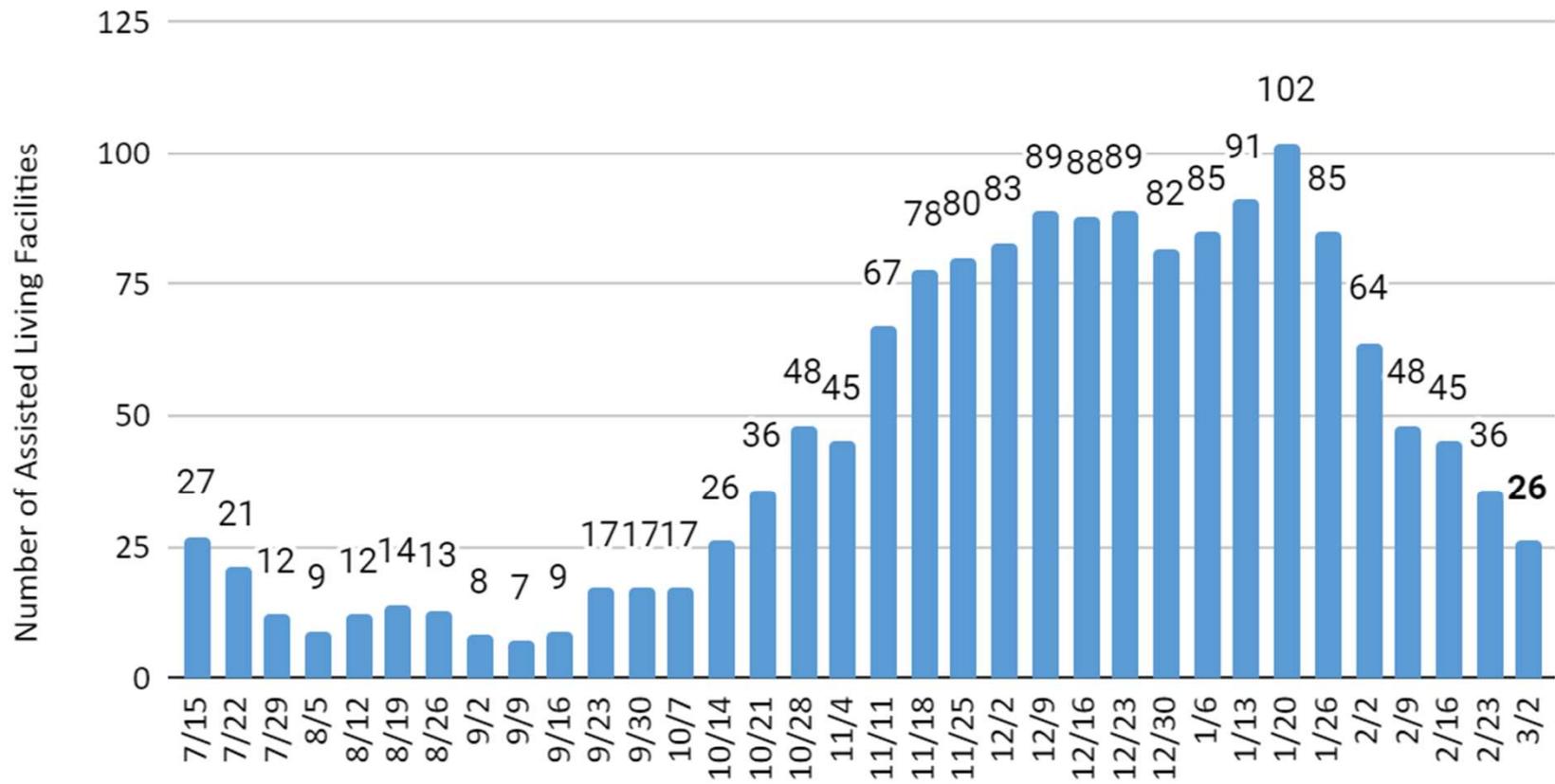
Views: 4,909

*Views equals page views plus PDF downloads*

[Metric Details](#)

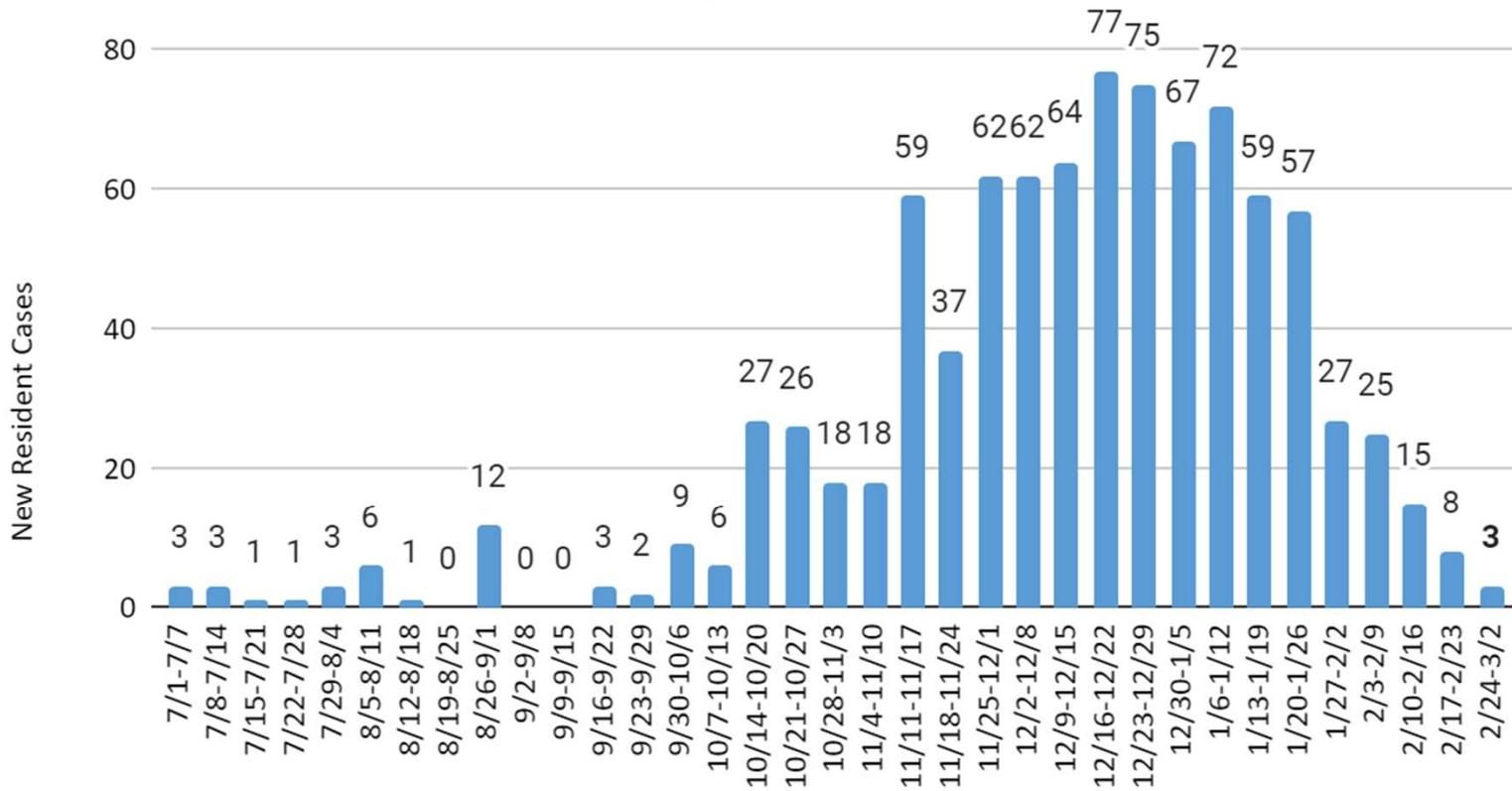
# AL Section

## Assisted Living Facilities with Newly-Diagnosed COVID-19 Among Residents AND/OR Staff in the Most Recent 14-day Period

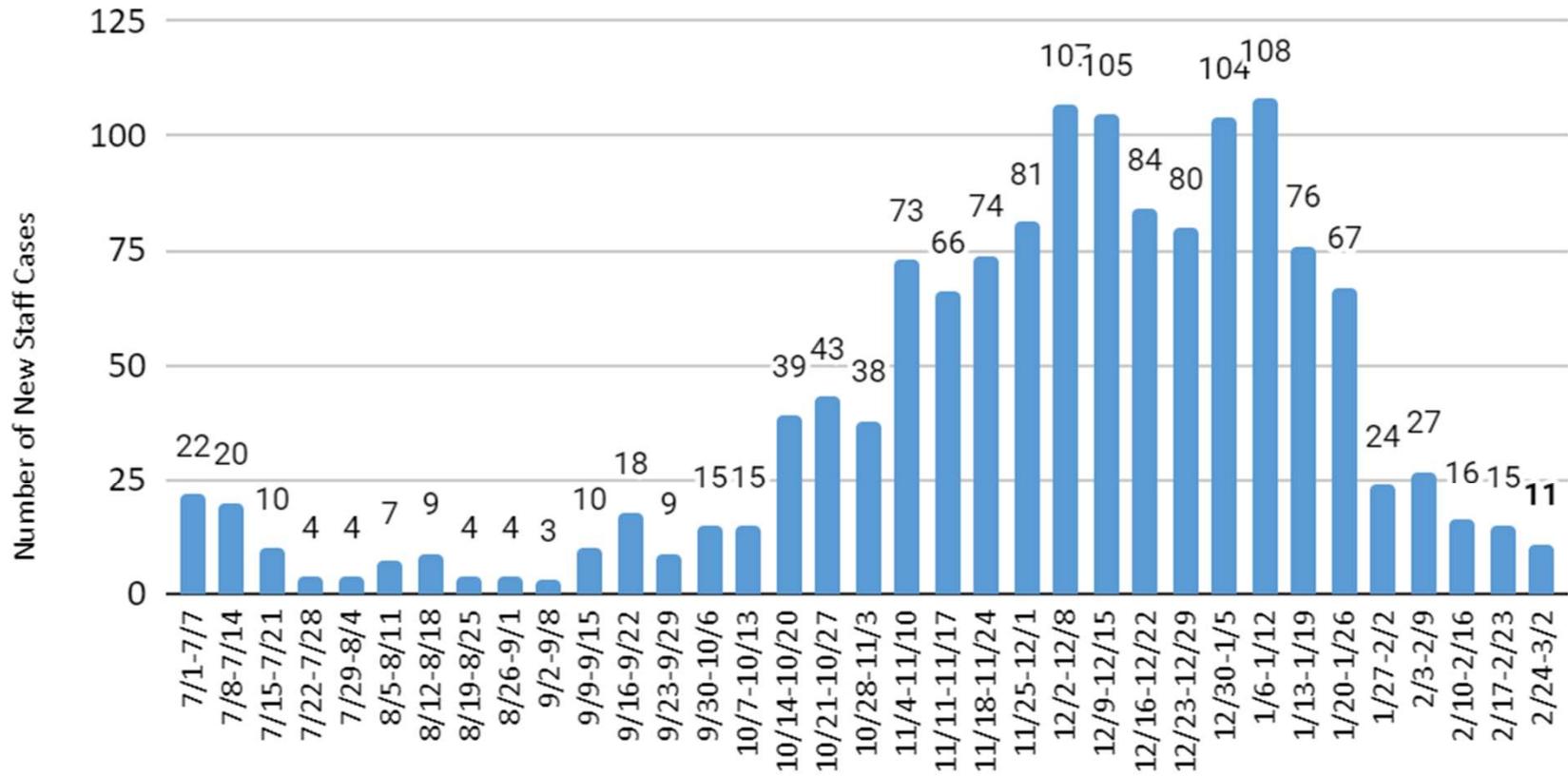


# Assisted Living Resident Census: 7,266

## New Resident Cases in CT Assisted Living Facilities July 1, 2020-March 2, 2021



# New Staff Cases in CT Assisted Living Facilities July 1 2020-March 2, 2021



# Assisted Living Facilities with Positive Staff or Residents July 1, 2020-March 2, 2021

