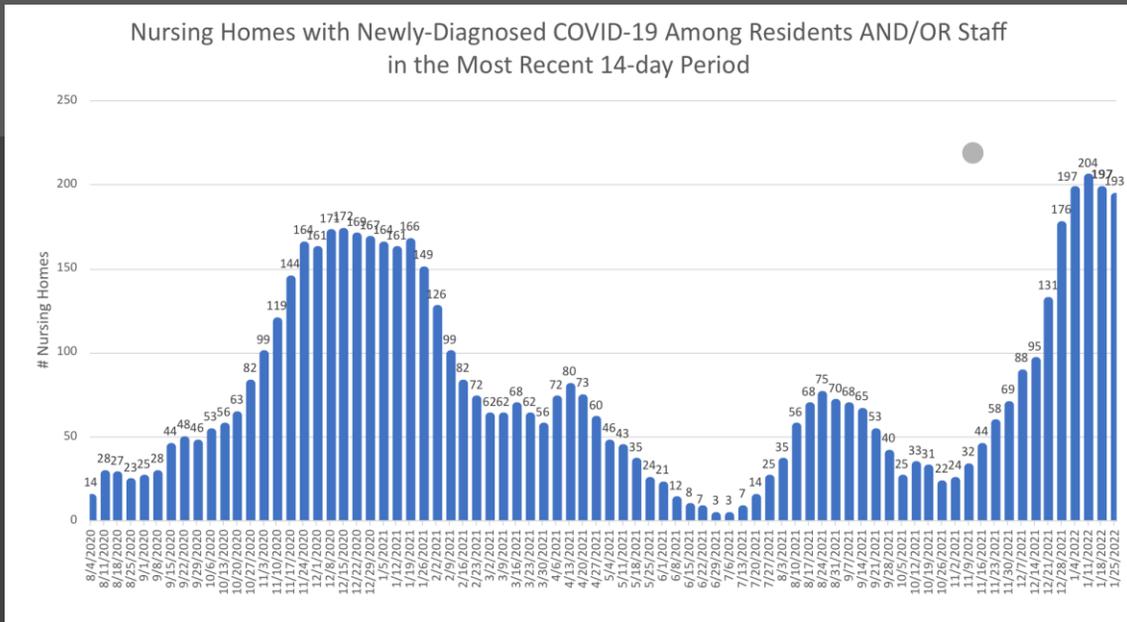# Agenda

*Nursing Home Data

*HHS POC distribution

*Infection Control Assessment and Response (ICAR) Visit

*Tip of the week: possible reinfections

*Recent Executive Orders

 *EO 14B- Vaccine Booster Mandate for LTC

 *EO 14F- Nursing Home Visitation

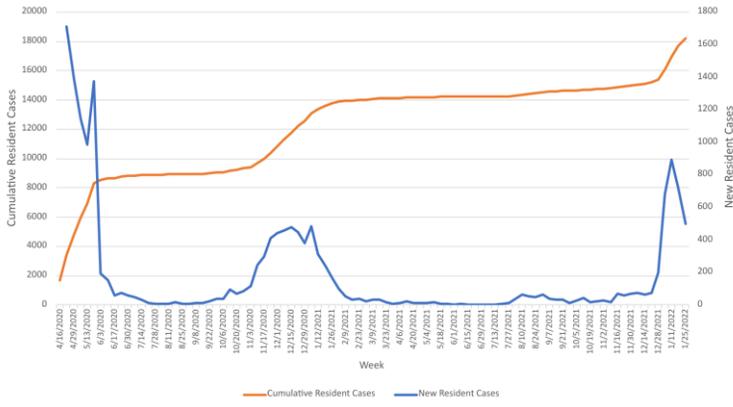*Access for Home Health and Hospice

1

2

Nursing Home Resident Incidence, statewide
April 16, 2020 – January 25, 2022

Resident Census: 17,815

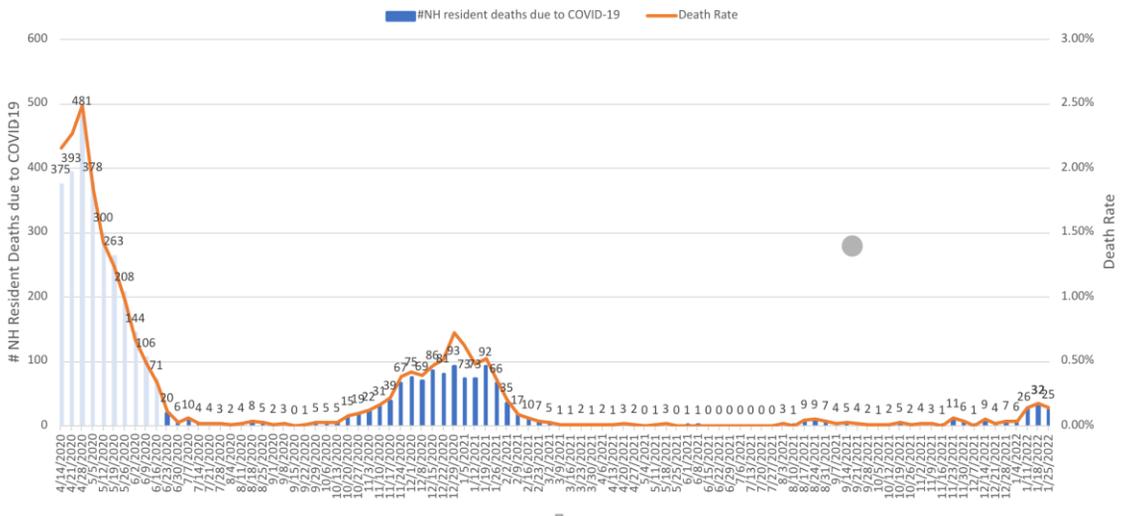Nursing Home Resident Cases - Connecticut, April 16, 2020- January 25, 2022

Date Reported	New Resident Cases (diagnosed that week)
26-Oct	24
2-Nov	29
9-Nov	18
16-Nov	70
23-Nov	58
30-Nov	71
7-Dec	73
14-Dec	66
21-Dec	84
28-Dec	197
4-Jan	679
11-Jan	892
18-Jan	724
25-Jan	501

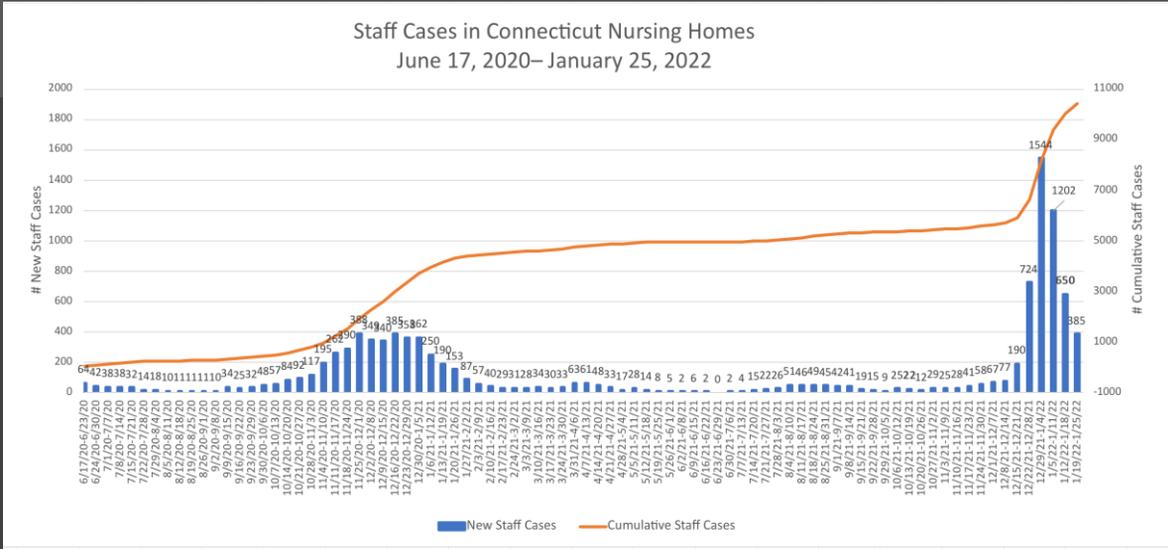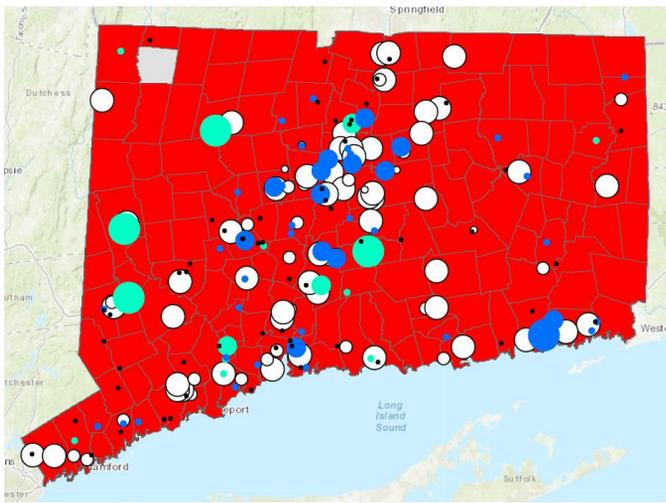| Facility Metrics	#Nursing Homes
New res. cases, last 2 weeks	157 (-1)
No new res. cases, >2 weeks	48

3

Nursing Home Resident Deaths Associated to COVID-19 4/15/2020- 1/25/2022

Note: Light blue= OCME lab-confirmed and suspected deaths due to COVID-19, Darker blue= NHSN data
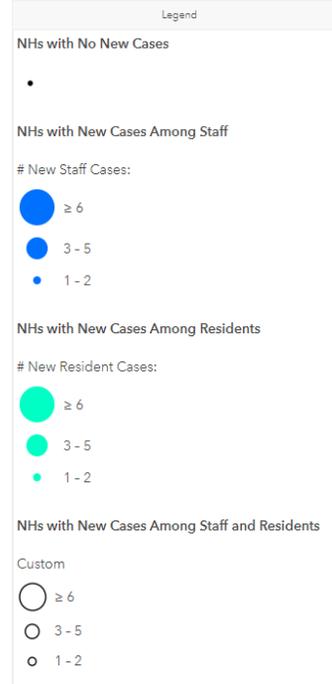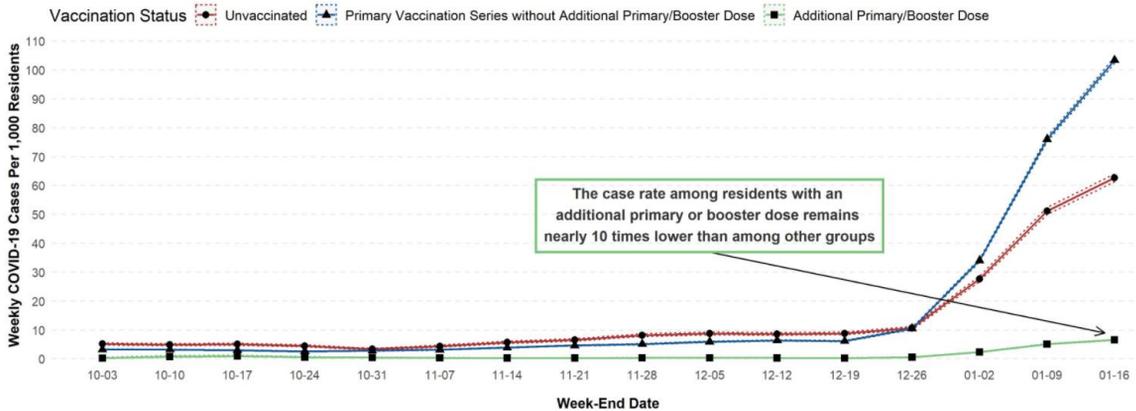
4

Staff Cases in Connecticut Nursing Homes
June 17, 2020– January 25, 2022

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Nursing Homes with Positive Staff or Residents June 17, 2020 - January 25, 2022

6

3

Legend

NHs with No New Cases

NHs with New Cases Among Staff

New Staff Cases:

≥ 6

3 – 5

1 – 2

NHs with New Cases Among Residents

New Resident Cases:

≥ 6

3 – 5

1 – 2

NHs with New Cases Among Staff and Residents

Custom

≥ 6

3 – 5

1 – 2

Average Daily Incidence Rate per 100,000 Over the Last Two Weeks

1. <5 cases per 100,000 or <5 reported cases
2. 5-9 cases per 100,000
3. 10-14 cases per 100,000
4. 15 or more cases per 100,000

1/19/22-1/25/22

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Unadjusted COVID-19 Cases Per 1,000 Nursing Home Residents, by COVID-19 Vaccination Status (Including Additional Primary and Booster Doses) and Week, United States

Vaccination Status — Unvaccinated ···· Primary Vaccination Series without Additional Primary/Booster Dose — Additional Primary/Booster Dose

The case rate among residents with an additional primary or booster dose remains nearly 10 times lower than among other groups

Weekly COVID-19 Cases Per 1,000 Residents

Week-End Date

Data source: Centers for Disease Control and Prevention, National Healthcare Safety Network
For more information: https://www.cdc.gov/nhsn/ltc/weekly-covid-vac/index.html
Note: Data reported in the most recent week may still be accruing.

Data as of 01/24/2022 05:30 AM
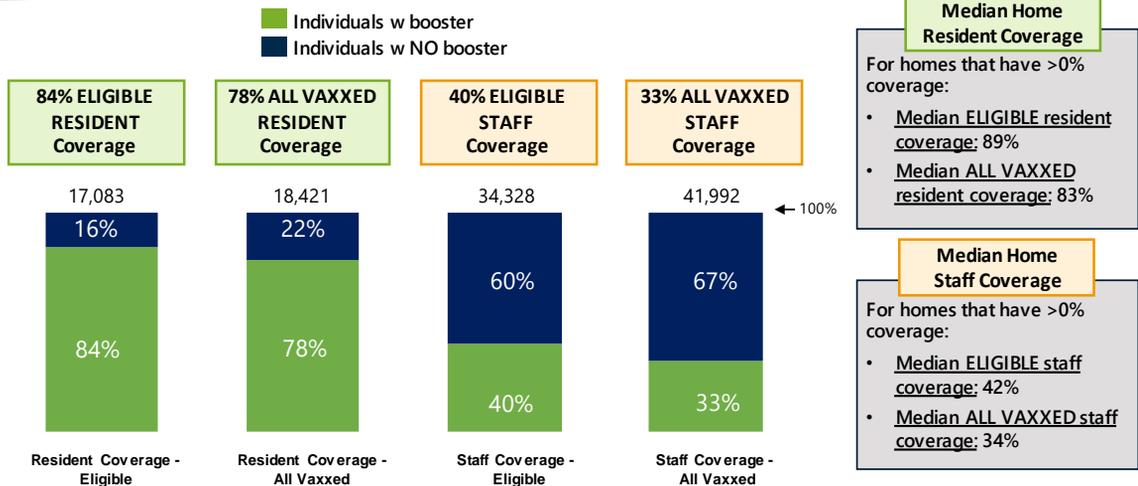
https://www.cdc.gov/nhsn/covid19/ltc-vaccination-dashboard.html

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Nursing Home Booster Coverage
Reported via NHSN | As of January 23, 2022

Overall Resident and Staff Booster Coverage

- 🟩 Individuals w booster
- 🟦 Individuals w NO booster

84% ELIGIBLE RESIDENT Coverage	78% ALL VAXXED RESIDENT Coverage	40% ELIGIBLE STAFF Coverage	33% ALL VAXXED STAFF Coverage

Resident Coverage - Eligible	Resident Coverage - All Vaxxed	Staff Coverage - Eligible	Staff Coverage - All Vaxxed
17,083	18,421	34,328	41,992 ← 100%
16%	22%	60%	67%
84%	78%	40%	33%

Median Home Resident Coverage

For homes that have >0% coverage:
- Median ELIGIBLE resident coverage: 89%
- Median ALL VAXXED resident coverage: 83%

Median Home Staff Coverage

For homes that have >0% coverage:
- Median ELIGIBLE staff coverage: 42%
- Median ALL VAXXED staff coverage: 34%

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DPH

HHS POC Distribution

HHS/CMS will increase test kit allocations to CMS-certified skilled nursing facilities.

* Facilities will receive **Celltrion DiaTrust COVD-19 Ag Rapid Tests**.

    * These tests require nasopharyngeal specimen collection

    * Each skilled nursing facility will receive approximately four tests per resident.

    * Assisted living facilities and nursing homes that have already been receiving BinaxNOW test directly from the manufacturer, Abbott, will continue to receive these tests.

* When onboarding a new POC test, staff must be adequately trained and a new EUA Attestation Form must be submitted to DPH.FLISlab@ct.gov (form found here: https://portal.ct.gov/DPH/Facility-Licensing--Investigations/Facility-Licensing--Investigations-Section-FLIS/State-of-CT-FDA-Emergency-Use-of-Authorization-EUA-Attestation-Form

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ICAR Visits

Infection Control Assessment and Response (ICAR) visits are conducted by an HAI-AR nurse who will use a standardized infection control assessment tool to systematically assess the healthcare facility's infection prevention and control (IPC) practices and help guide their quality improvement activities (e.g, by addressing identified gaps).

- **In-person (**whenever possible)
- **Educational**
- **Non-regulatory** assessments
- Cover **CDC** minimum standards
- 2 types of ICAR Visits (**Preventive** or **Response)**

Infection Prevention and Control Assessment Tool for Nursing Homes Preparing for COVID-19 | CDC

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Tip of the Week: Possible Re-infections

In general, individuals who have recovered from SARS-CoV-2 infection in the prior 90 days **do not** require testing or quarantine **HOWEVER** it is possible for individuals that were infected with Delta to be re-infected with Omicron within the 90 days.

*Clinical judgement should be used to evaluate possible re-infection.

*Residents with a current COVID-19 infection should **only** be roomed with other COVID-19 positive residents.

*Due to the possibility of re-infection, recovered individuals (especially individuals that tested positive prior to December 2021) should not be roomed with a currently positive resident.

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