## Agenda

HAI-AR

* Nursing Home Data
* SARS-CoV-2 Test Reporting

Nursing Homes with Newly-Diagnosed COVID-19 Among Residents AND/OR Staff in the Most
Recent 14-day Period
250


## Nursing Home Resident Incidence, statewide

April 16, 2020 - March 22, 2022
Resident Census: 18,077

Nursing Home Resident Cases - Connecticut
April 16, 2020 - March 22, 2022


| Date Reported | New Resident Cases <br> (diagnosed that week) |
| :--- | :--- |
| 4-Jan | 680 |
| 11-Jan | 893 |
| 18-Jan | 783 |
| 25-Jan | 519 |
| 1-Feb | 248 |
| 8-Feb | 192 |
| 15-Feb | 131 |
| 22-Feb | 71 |
| 1-Mar | 27 |
| 8-Mar | 13 |
| 15-Mar | 22 |
| 22-Mar | 10 |
| Facility Metrics |  |
| New res. cases, last 2 weeks | 12 (-21) |
| No new res. cases, >2 weeks | 193 |

## Nursing Home Resident Deaths Associated to COVID-19

$$
4 / 15 / 2020-3 / 22 / 2022
$$

\#NH resident deaths due to COVID-19 Death Rate


Staff Cases in Connecticut Nursing Homes
June 17, 2020 - March 22, 2022


Nursing Homes with Positive Staff or Residents June 17, 2020 — March 22, 2022



Percentage of Fully-Vaccinated Individuals Who Received an Additional Dose of COVID-19 Vaccine

*Executive Order 14B was signed on 01/09/2022 requiring nursing home staff to receive booster doses.

## Community Transmission Tracker

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## COMMUNITY TRANSMISSION

Focuses on how much diseases is spreading within the community
Classifications: Low, Moderate, Substantial, High

Combination of 2 Metrics:

1. Total new COVID-19 cases per 100,000 persons in the last 7 days
2. Percentage of positive SARS-CoV-2 diagnostic nucleic acid amplification tests (NAAT) in the last 7 days

Health care settings should continue to use CDC's infection prevention and control recommendations for healthcare settings which use community transmission as a metric for stratifying some IPC measures (e.g., use of source control, routine testing).

Community level recommendations DO NOT apply for healthcare settings.

## Community Transmission

## Connecticut

State Health Department ©
7-day Metrics
Cases
\% Positivity
\% of Population $\geq 5$ Years of Age Fully Vaccinated
New Hospital Admissions (7-Day Moving Avg)

On this page:
Cases \& Deaths
Testing
Vaccinations
Hospitalizations
Community Characteristics
Data Downiloads and Footnotes


On March 2022, HHS released updated guidance that makes the reporting of SARS-CoV-2 negative test results for antigen tests (POC) performed by CLIA certified laboratories optional.

* DPH is adopting this change in reporting effective April 4, 2022.

| Table 1. Changes to Reporting Requirements by Type of Test and Test Location |  |  |  |
| :--- | :--- | :--- | :--- |
| Type of Test | Positive Results | Negative \& Inconclusive <br> Results | Location |
| NAAT-testing conducted in <br> a facility CLIA certified to <br> perform moderate- or high- <br> complexity tests | Required | Required | For example, hospital, commercial, public <br> health and other labs |
| Other testing for SARS-CoV- <br> 2 antigen or rapid PCR <br> testing (e.g., using the <br> Abbott ID NOW) | Required | • No longer required to |  |
| report. |  |  |  |$\quad$| •Testing conducted in a setting <br> operating under a CLIA certificate of <br> waiver. <br> Laboratories performing non-NAAT |
| :--- |
| tests |

SAVE THE DATE
NEXT LTC MAP Meeting April 20, 2022

