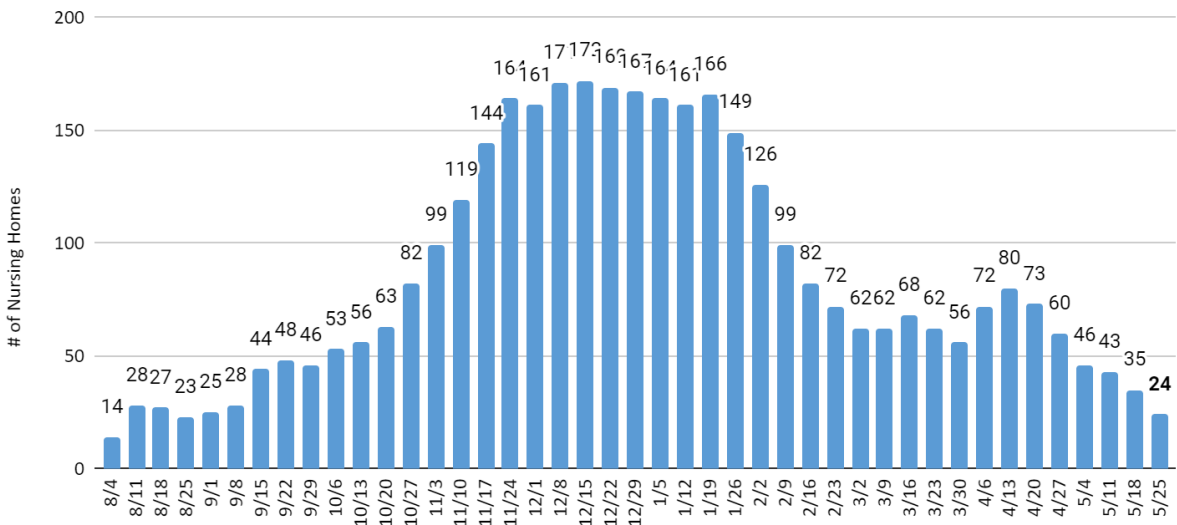


# Nursing Home Data

1

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



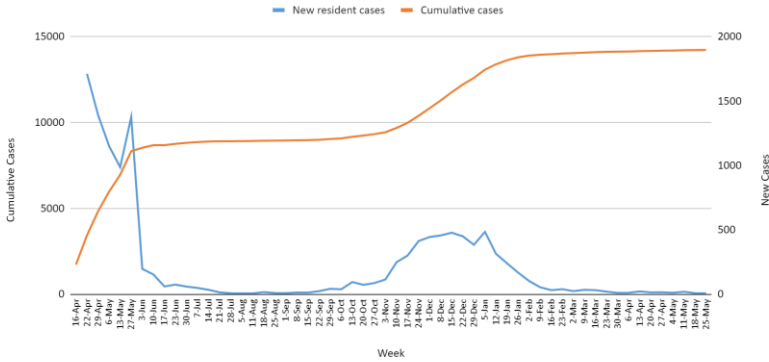
2

## Nursing Home Resident Incidence, statewide

April 16, 2020 – May 25, 2021

Resident Census: 18,344

Nursing Home Resident Cases - Connecticut, April 16, 2020- May 25, 2021



Date Reported	New Resident Cases (diagnosed that week)
23-Feb	38
2-March	22
9-March	33
16-March	30
23-March	18
30-March	9
6-April	10
13-April	20
20-April	13
27-April	14
4-May	10
11-May	17
18-May	7
25-May	6

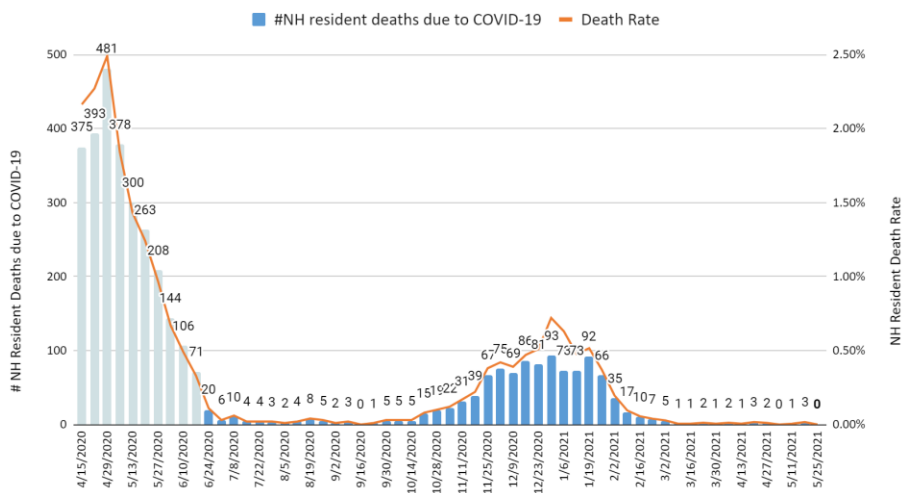
Facility Metrics	#Nursing Homes
New res. cases, last 2 weeks	8 (no change)
No new res. cases, >2 weeks	201

3

## Nursing Home Resident Deaths, statewide

April 15, 2020 – May 25, 2021

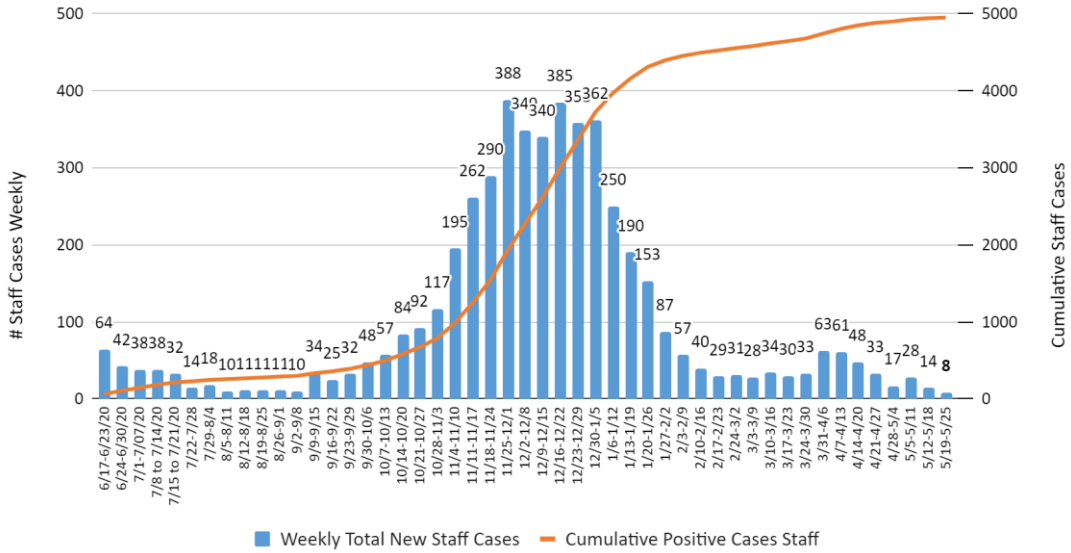
Nursing Home Resident Deaths Due to COVID-19 4/15/2020-5/25/2021



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

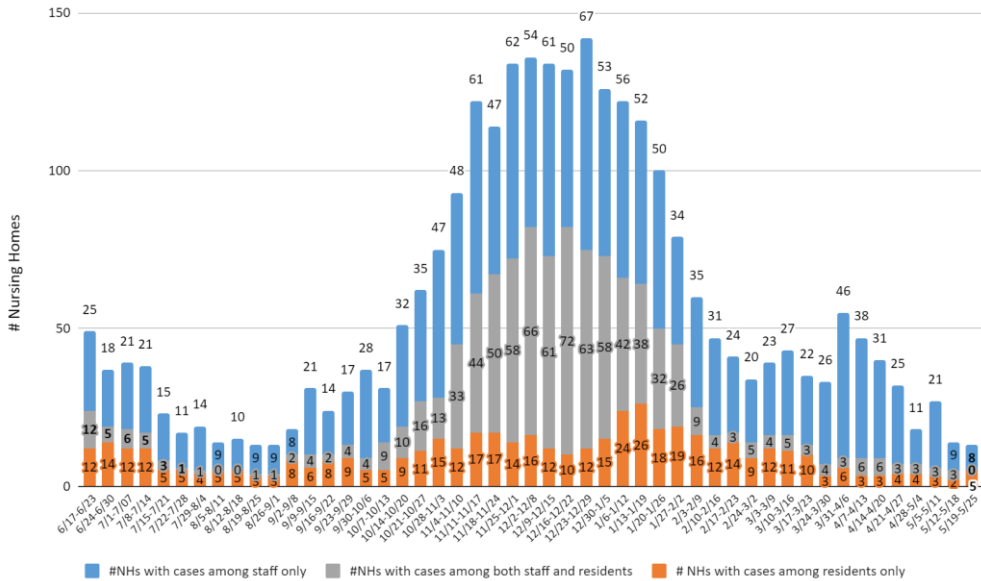
4

### New Staff Cases in CT Nursing Homes June 17, 2020–May 25, 2021

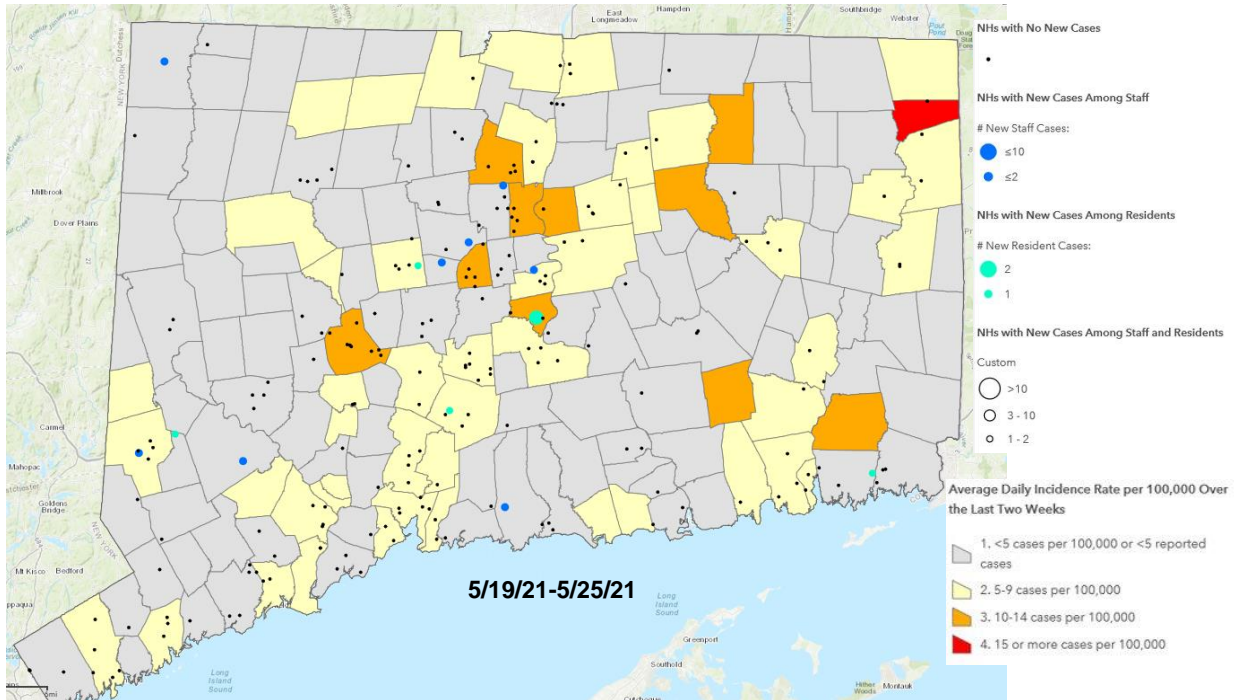


5

### Nursing Homes with Positive Staff or Residents June 17, 2020–May 25, 2021



6



7

## Ongoing Surveillance: COVID-19 in Nursing Homes

- **NHSN:** Weekly case surveillance, vaccine coverage, resource needs
- **Daily NH Portal:** case surveillance, vaccine/hospitalization/death data
- **Vaccine Breakthrough Surveillance**
  - **Identify any unusual patterns** (trends in age or sex, the vaccines involved, underlying health conditions, or which of the SARS-CoV-2 variants made these people sick)
  - To date, no unusual patterns have been detected
- **Vaccine Effectiveness Studies:** CDC and partners conducting studies in various populations, locations, and settings.

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## NHSN Reminders

**Submit weekly case data to NHSN by Wednesday at NOON.**

- Enter COVID-19 vaccination rates that same day.  
[Weekly HCP & Resident COVID-19 Vaccination](#)
- Make sure to have a back-up NHSN user for when you are away!!  
[How to Add a User](#)

### Staff Definition per NHSN

- Staff and facility personnel include **anyone working or volunteering in the facility, which includes, but not limited to contractors, temporary staff, resident care givers, shared staff, etc.**
- Defined by CMS as individuals who work in the facility on a regular (weekly) basis.

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## Joint Session

- Tip of the Week
- BinaxNOW
- Sending specimens to SPHL

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# Tip of the Week

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## Tip of the Week: Universal Eye Protection Decisions



Eye protection protects HCPs' eyes from splashes/sprays/splatter and respiratory secretions

- Always when Transmission-Based Precautions indicated: isolation & quarantine for COVID-19
- **Universal Eye Protection** recommended (for all patient encounters) when there is **moderate to substantial community transmission of SARS-CoV-2**
  - Perform a facility risk assessment, weigh pros and cons, consider vax rates for staff & residents
  - Are residents able to wear their mask/contain secretions? When was your last outbreak? Did you identify the source?
- **Consider using for AGPs when risk of infectious droplets is elevated**
  - **Risk is higher when:** patient is unvaccinated and/or severely immunocompromised, community/facility COVID-19 rates are high, patient unable to practice source control
  - **Risk is lower when:** residents are fully vaccinated, asymptomatic, recovered after initial diagnosis within 90 days, and vaccination coverage among "community" is high

"Community" can be floor or facility, staff and/or residents, and/or the larger town/county/state community

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## **Face Protection prior to COVID-19: Masks & Eye Protection (goggles/faceshield) as part of Standard Precautions**

Use during **procedures and patient-care activities likely to generate splashes or sprays** of blood, body fluids, secretions, especially suctioning, endotracheal intubation.

During **aerosol-generating procedures on patients with suspected or proven infections transmitted by respiratory aerosols: wear a fit-tested N95 or higher respirator *in addition* to gloves, gown and face/eye protection**

[Prevention](#) | [Isolation Precautions](#) | [Guidelines Library](#) | [Infection Control](#) | [CDC](#)

[Standard Precautions](#) | [Appendix A](#) | [Isolation Precautions](#) | [Guidelines Library](#) | [Infection Control](#) | [CDC](#)

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## **BinaxNOW**

- All BinaxNOW now expire 12 months after manufacture
  - Certain lot numbers of BinaxNOW have had their expiration dates extended. A memo was sent from Caroline Wadman on 5/6.
  - Please contact [DPH.HAIAR@CT.gov](mailto:DPH.HAIAR@CT.gov) if you would like the memo with lot numbers and new expiration dates
- Starting June 1, 2021, BinaxNOW will be available for pickup only.
  - Deliveries will only be available for pallet-sized orders.
  - After requesting, you will get an email with a confirmation # and scheduled date/timeframe for pickup at the warehouse in New Britain.
  - When requesting, please order enough for ~6 months.

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## LTCFs can **submit specimens for PCR confirmation of antigen testing** to the State Public Health Laboratory

Obtain PCR confirmation **when clinical picture is inconsistent with antigen results:**

- **Positive** antigen result for **asymptomatic** staff and/or resident (as part of staff screening, outbreak testing, or post-exposure testing)
- **Negative** antigen test results for **symptomatic** staff and/or resident

Why submit to SPHL?

- SPHL can provide confirmatory PCR results in <48 hours, M-F (submit early on Fridays).
- Help CT DPH collect specimens for genomic sequencing.

How do I submit a confirmatory specimen to SPHL?

- Label specimens correctly with patient identifying information
- A [COVID-19 Clinical Test Requisition Form](#) is required for each specimen.
- Transport specimen to state public health lab (transport COLD – with ice pack)

[SARS-CoV-2 Confirmatory Testing at the State Public Health Laboratory for Long Term Care Facilities](#)

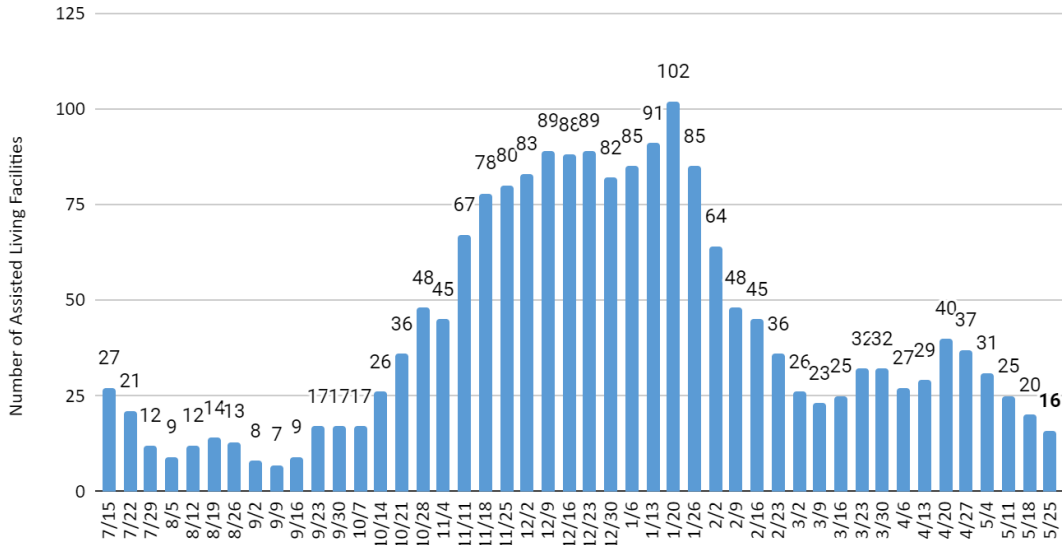
15

## Assisted Living Data

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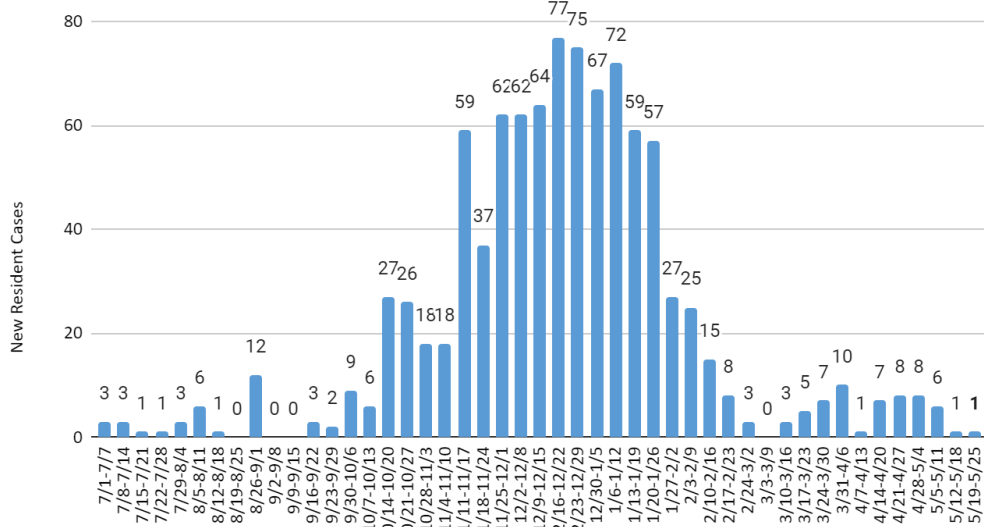
Assisted Living Facilities with Newly-Diagnosed COVID-19 Among Residents AND/OR Staff in the Most Recent 14-day Period



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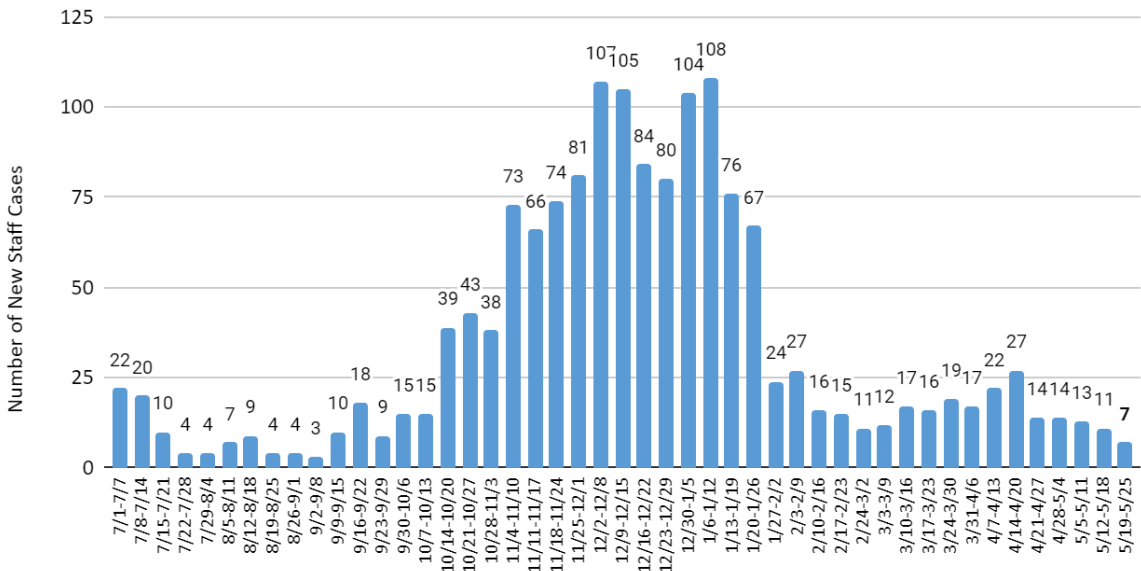
Assisted Living Resident Census: 7,345

New Resident Cases in CT Assisted Living Facilities July 1, 2020-May 25, 2021



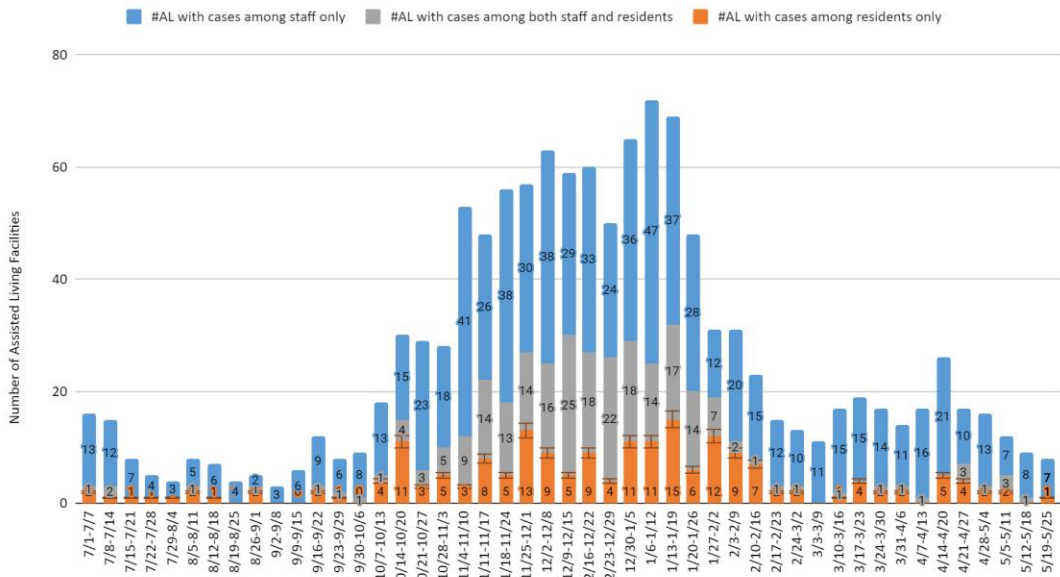
18

### New Staff Cases in CT Assisted Living Facilities July 1 2020-May 25, 2021



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### Assisted Living Facilities with Positive Staff or Residents July 1, 2020-May 25, 2021



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## Outbreak Testing in Assisted Living Facilities: *Recommendations*

- If case in memory care unit: follow NH guidance
  - Conduct outbreak testing in unit if staff member worked there while infectious or if memory care unit resident tests positive for COVID-19
  - Everyone on unit (staff & residents, regardless of vax status) should be tested every 3-7 days until no new positives for 14 days
- If case not in memory care unit
  - Identify and test anyone in close contact with the infectious person
  - Anyone with exposure in AL, regardless of vaccination status, should have 2 COVID-19 tests: 1 immediately, & another 5-7 days after exposure

Anyone with SARS-CoV-2 infection in the last 90 days shouldn't be tested if they remain asymptomatic, including those with known contact.

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## Assisted Living Reporting – Set reminders!

- LTC-MAP is no longer sending out daily email reminders
- ALs must remember to report:
  1. **Weekly numbers each Wednesday morning by 10am**
    - **Even if zeros**
    - **Non-reporters will be indicated on the weekly report**
  2. **Other days IF cases were detected among staff and resident in the past 24 hours.**

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