Agenda

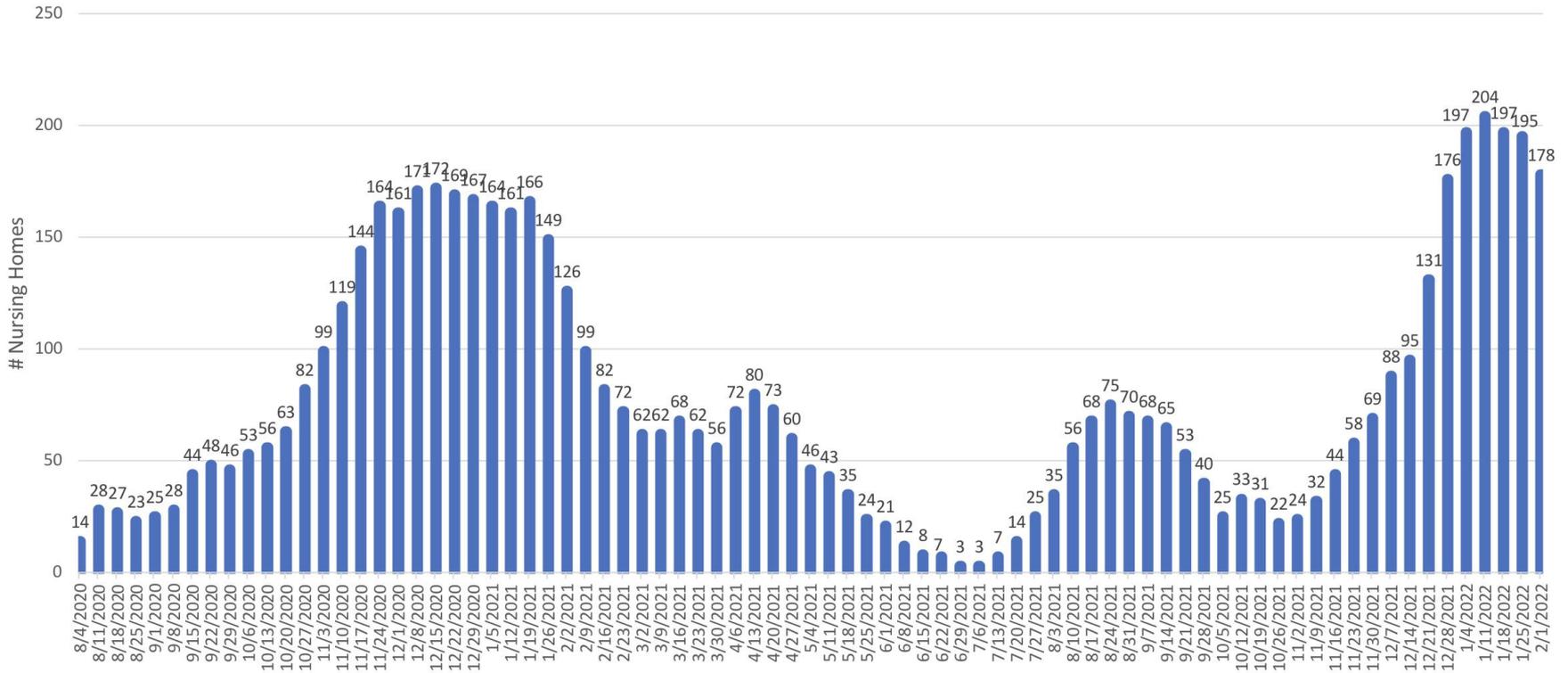**HAI-AR**

*Nursing Home Data

*CDC IPC Guidance

*New Admission and Readmission

*Quarantine and Testing Requirements after SARS-CoV-2 exposure

FLIS

*Recent Executive Orders

*EO 14B-Vaccine Booster Mandate for LTC

*EO 14F- Nursing Home Visitation

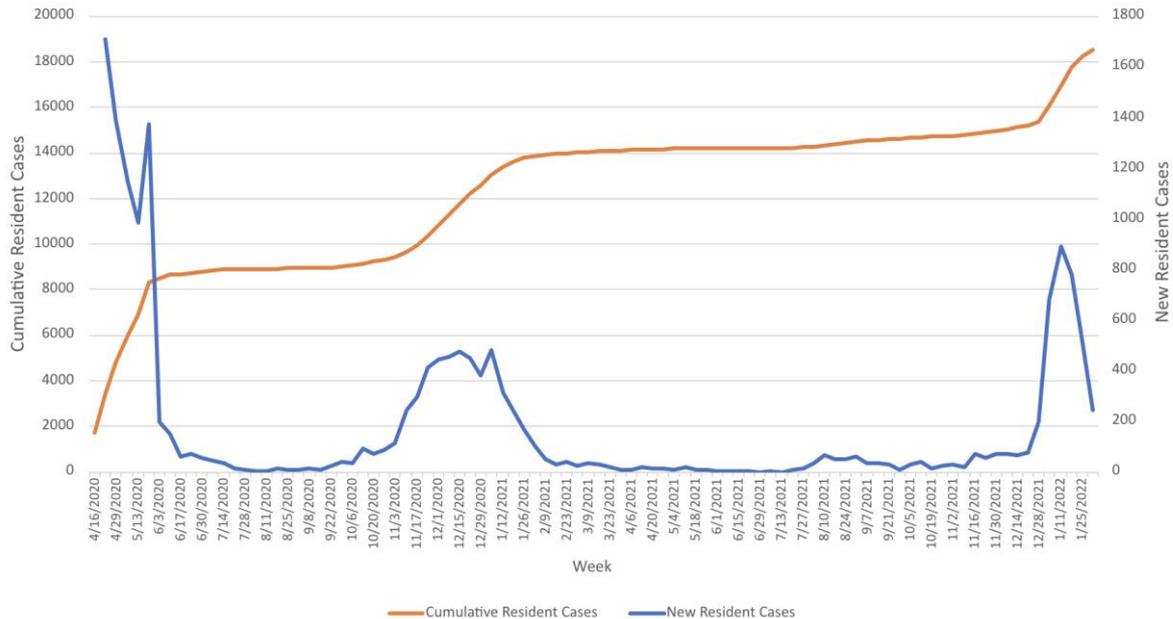Nursing Homes with Newly-Diagnosed COVID-19 Among Residents AND/OR Staff in the Most Recent 14-day Period

Nursing Home Resident Incidence, statewide
April 16, 2020 – February 1, 2022

Resident Census: 19,052

Nursing Home Resident Cases - Connecticut
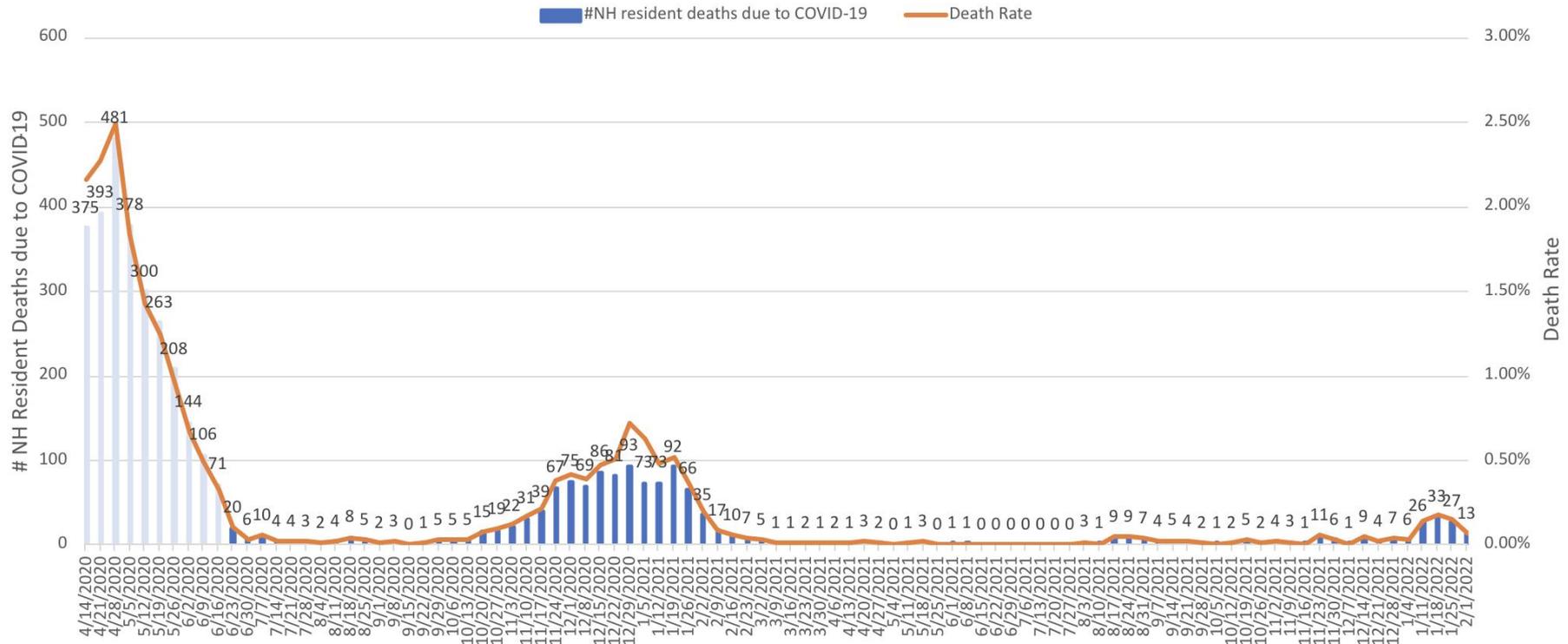April 16, 2020—February 1, 2022

Date Reported	New Resident Cases (diagnosed that week)
7-Dec	73
14-Dec	66
21-Dec	84
28-Dec	197
4-Jan	679
11-Jan	892
18-Jan	724
25-Jan	501
1-Feb	243

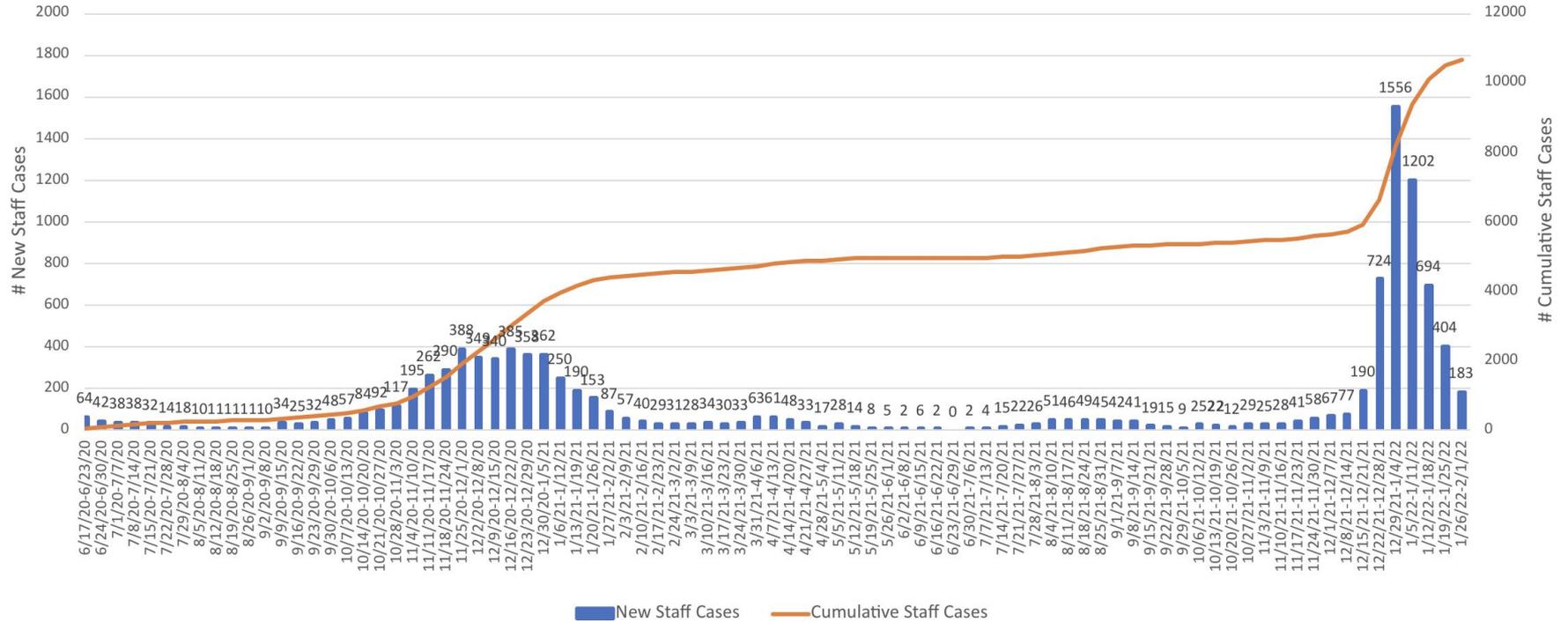| Facility Metrics	#Nursing Homes
New res. cases, last 2 weeks	134 (-23)
No new res. cases, >2 weeks	71

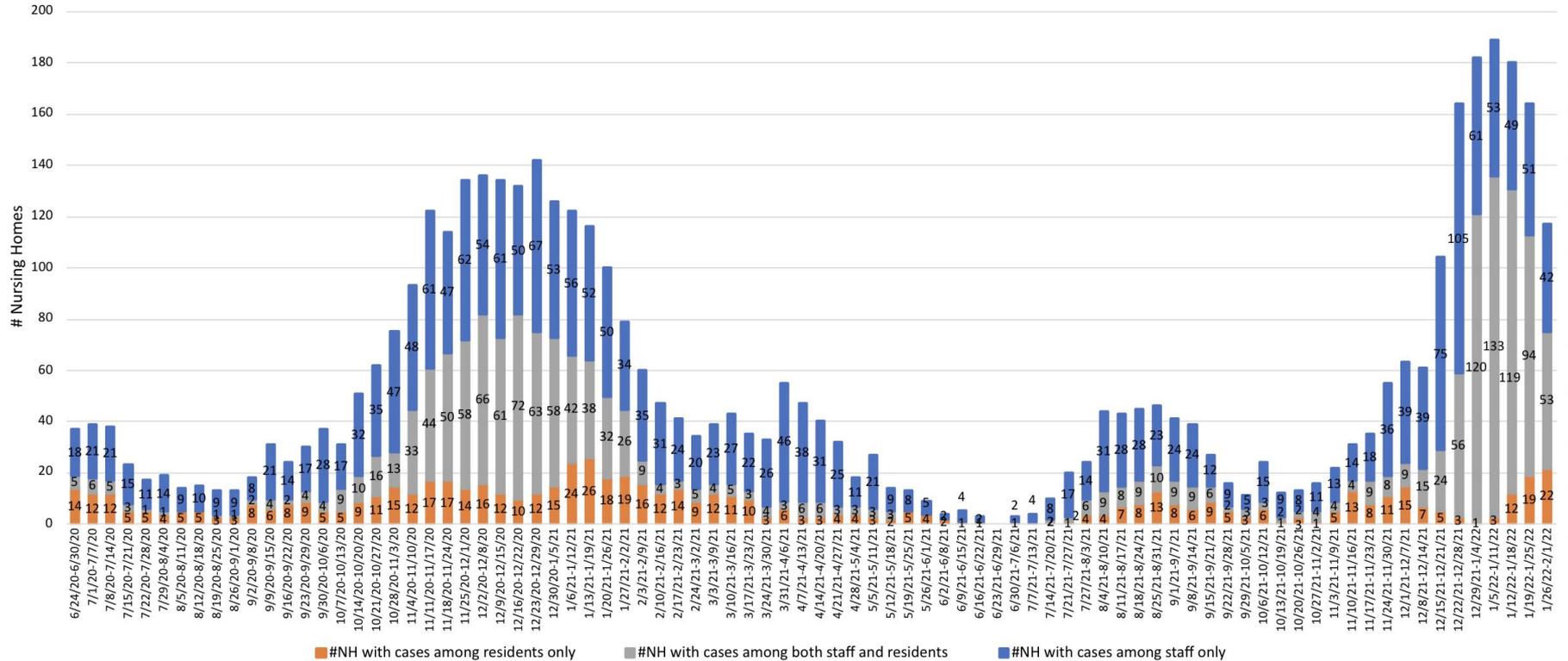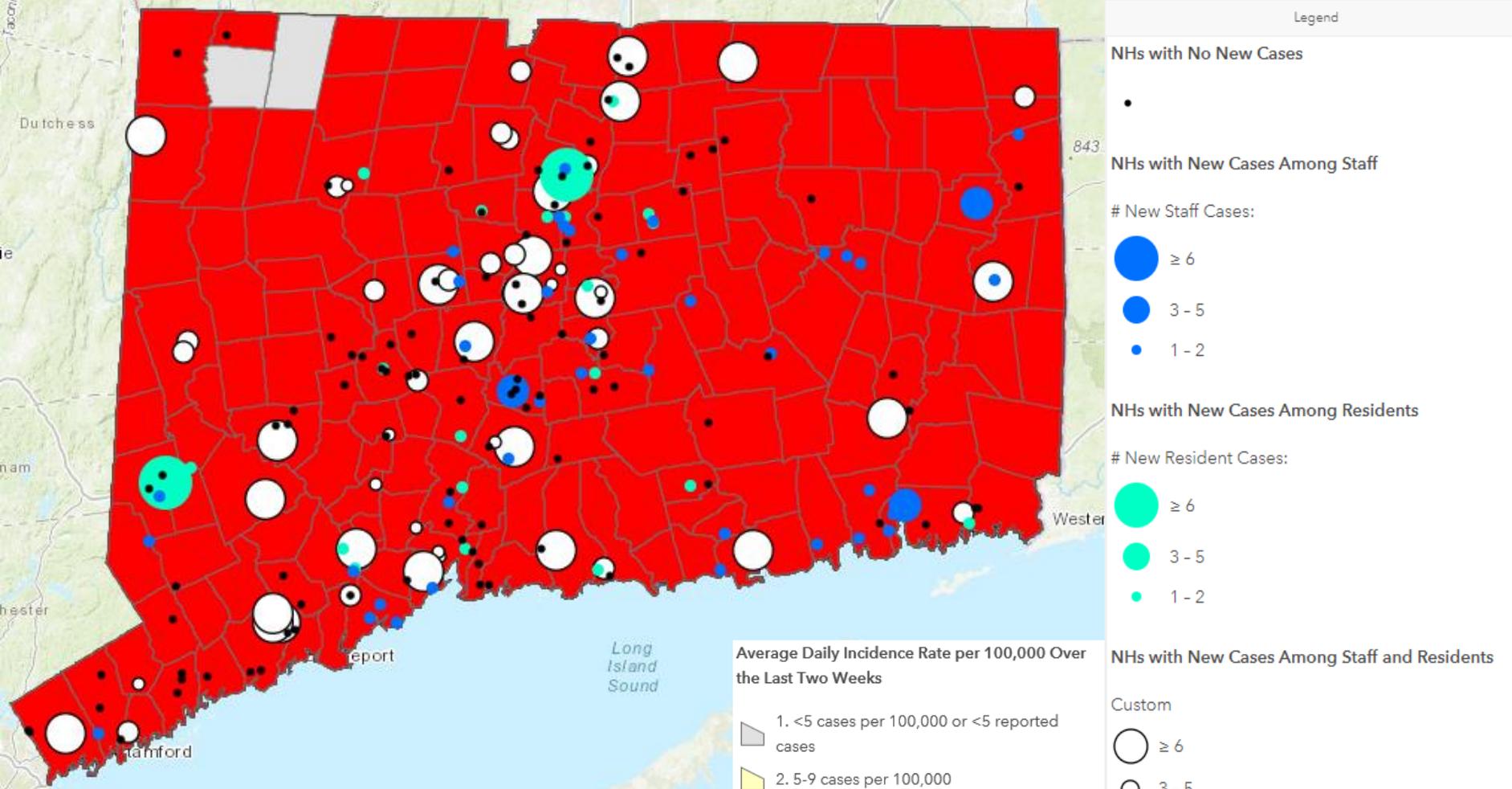Nursing Home Resident Deaths Associated to COVID-19
4/15/2020 —2/1/2022

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

Staff Cases in Connecticut Nursing Homes
June 17, 2020— February 1, 2022

Nursing Homes with Positive Staff or Residents June 17, 2020—February 1, 2022

1/26/22-2/1/22

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

CT Nursing Home Residents with Additional Dose Have
9x Lower Risk of Infection Than Unvaccinated Residents and
7x Lower Risk of Infection Than Residents Without Additional Dose
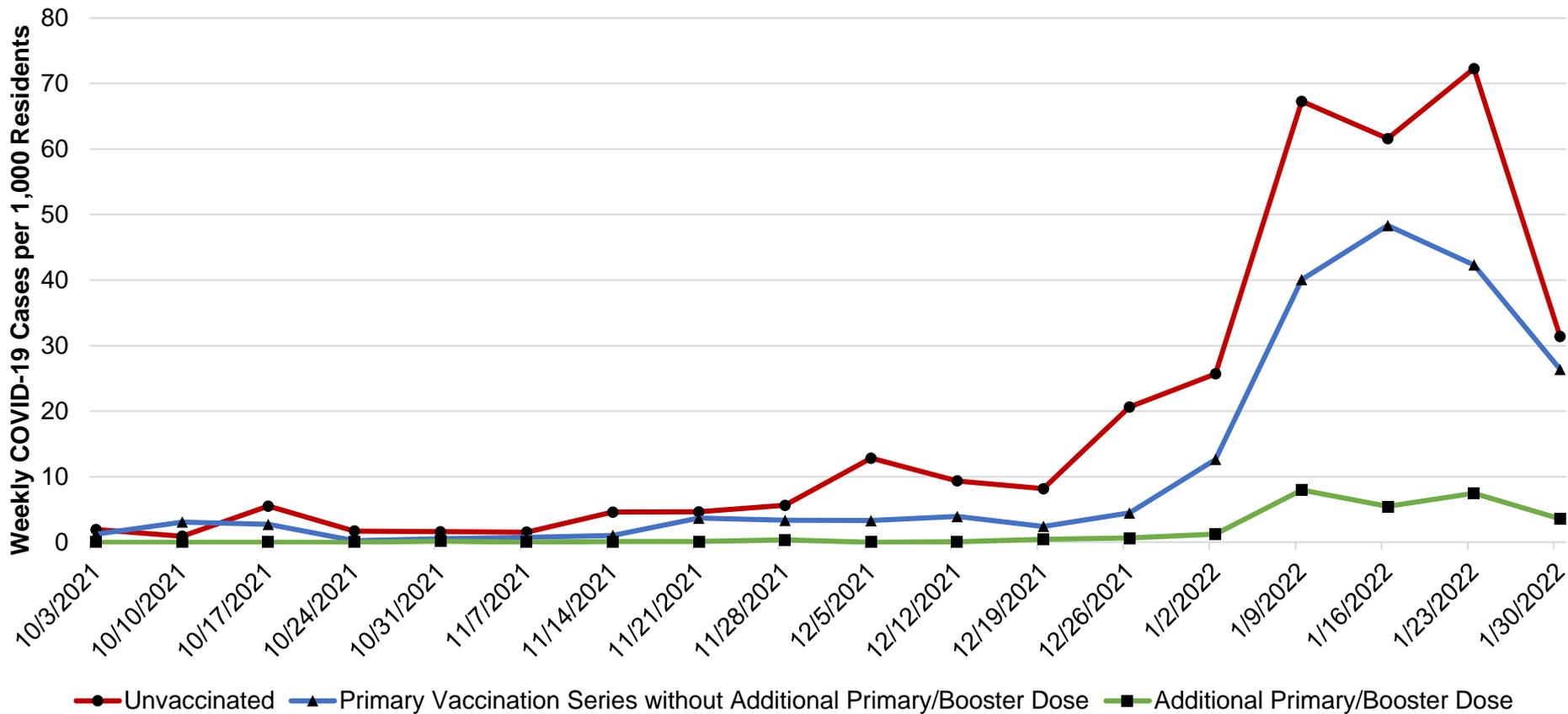
Nursing Home Booster Coverage

Reported via NHSN | As of January 30, 2022
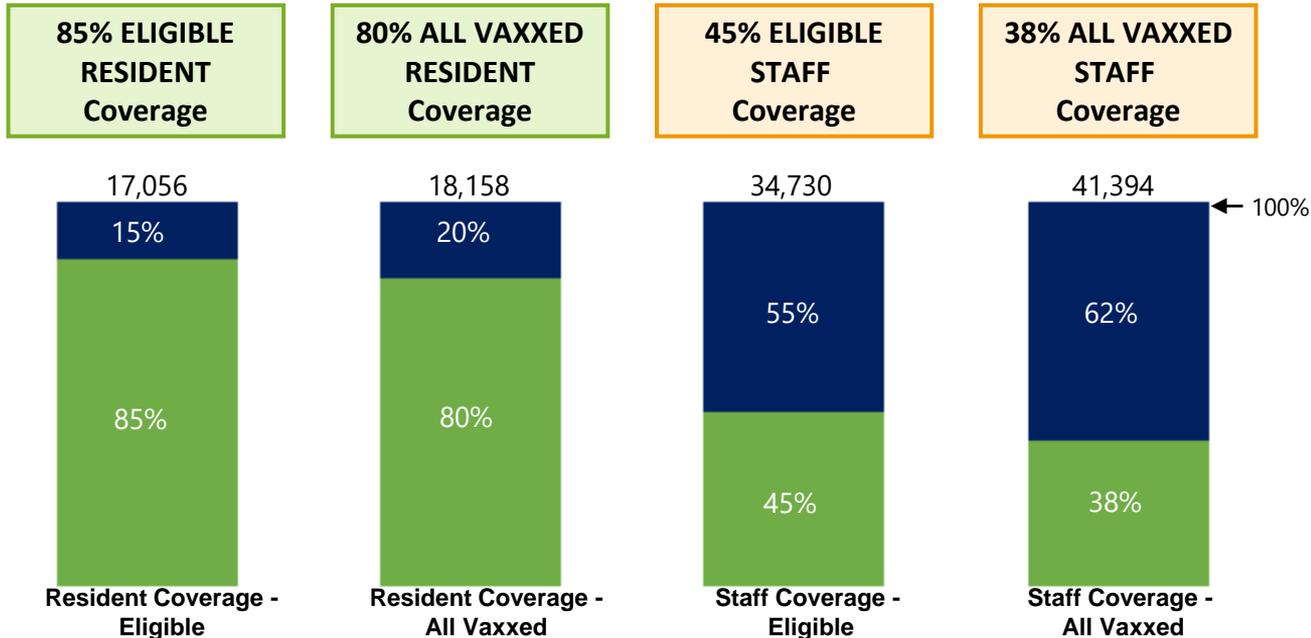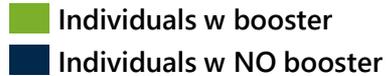
Overall Resident and Staff Booster Coverage

Legend:
- Individuals w booster (green)
- Individuals w NO booster (navy)

85% ELIGIBLE RESIDENT Coverage — 17,056 — 15% / 85% — Resident Coverage - Eligible

80% ALL VAXXED RESIDENT Coverage — 18,158 — 20% / 80% — Resident Coverage - All Vaxxed

45% ELIGIBLE STAFF Coverage — 34,730 — 55% / 45% — Staff Coverage - Eligible

38% ALL VAXXED STAFF Coverage — 41,394 — ← 100% — 62% / 38% — Staff Coverage - All Vaxxed

Median Home Resident Coverage

For homes that have >0% coverage:
- Median ELIGIBLE resident coverage: 91%
- Median ALL VAXXED resident coverage: 84%

Median Home Staff Coverage

For homes that have >0% coverage:
- Median ELIGIBLE staff coverage: 49%
- Median ALL VAXXED staff coverage: 39%

CDC IPC Guidance

CDC has updated their healthcare infection prevention and control (IPC) guidance pages:
- **Infection Control**: Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) | CDC
- Interim Infection Prevention and Control Recommendations to Prevent SARS-CoV-2 Spread in **Nursing Homes | CDC**.

Updates were made to align with prior updates for healthcare personnel with higher-risk exposures in the Interim Guidance for Managing Healthcare Personnel with SARS-COV-2 Infection or Exposure to SARS-CoV-2, which was released on December 23, 2021.

A review of the updates was given on a recent Clinician Outreach and Communication Activity (COCA) Call, which was recorded and is accessible here: Webinar January 13, 2022 - Updates to CDC's COVID-19 Quarantine and Isolation Guidelines in Healthcare and Non-healthcare Settings.

New Admissions and Re-admissions

Facilities should create a plan for managing new admissions and readmissions.

- Residents with **confirmed SARS-CoV-2 infection** who have **not met** criteria to discontinue Transmission-Based Precautions should be placed in the designated COVID-19 care unit, regardless of vaccination status.

- Newly-admitted residents and residents who have left the facility for >24 hours, **regardless of vaccination status**, should have a series of two viral tests for SARS-COV-2 infection; immediately and, if negative, again 5-7 days after their admission.

  - Residents who are **not up to date** with all recommended COVID-19 vaccine doses should be placed in quarantine (even if they keep testing negative).

  - Residents who are **up to date** with all recommended COVID-19 vaccine doses and residents who have recovered from SARS-CoV-2 infection in the prior 90 days do not need to be placed in quarantine but should be tested as described above.

Quarantine and Testing Requirements After Exposure

Facilities should have a plan on how to manage residents who had close contacts with someone with SARS-CoV-2 infection

- Residents who are **not up to date** with all recommended COVID-19 vaccine doses and have been exposed, **should be placed in quarantine** after their exposure.
  - They should also be **tested twice**, immediately and 5-7 days post exposure.
  - HCP caring for them should use full PPE (gowns, gloves, eye protection, and N95 or higher-level respirator).
- Length of quarantine now aligns with HCW work restrictions after an exposure.
  - Residents can be removed from Transmission-Based Precautions after day 10 following the exposure (day 0) or after day 7 with a negative viral test. Although the residual risk of infection is low, healthcare providers could consider testing for SARS-CoV-2 within 48 hours before the time of planned discontinuation of Transmission-Based Precautions.
- Residents who are **up to date** with all recommended COVID-19 vaccine doses and residents who have recovered from SARS-CoV-2 infection in the prior 90 days who have been exposed should not be quarantined but should be tested twice.
  - Quarantine might also be considered if the resident is moderately to severely immunocompromised.

EO 14B

*Once the form is submitted, the person submitting the form will receive confirmation that the report has been successfully submitted. If you need assistance or do not receive a confirmation, please submit a ticket to FLIS at https://dph-cthelpdesk.ct.gov/Ticket

*PLEASE PRINT AND SAVE THIS CONFIRMATION FOR YOUR RECORDS.

Help Ticket

Create a ticket

* - Required Field

What system do you need assistance with?	FLIS – Healthcare Facilities Quality & Safety ▼ *
Select the category:	Other ▼ *
Select the topic:	Other ▼ *
Select the sub topic:	Select a sub topic... ▼
First name of the submitter:	Barbara *
Last name of the submitter:	Cass *
Contact phone number:	8606372714 *
Phone number extension:	
Contact email:	barbara.cass@ct.gov *
Preferred method of communication:	○ Phone ● Email *
Facility Type	Chronic and Convalescent Nursing Home ▼ *
Facility Name	60 WEST ▼ *

Please do not include Personal Identifiable Information (PII) in your description.

Brief description of the issue:	I attempted to submit my data for compliance with EO 14B and had difficulty. *