

JB Pritzker, Governor

COVID-19

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Updated Interim Guidance: COVID-19 Testing and Response Strategy in Licensed Long-term Care (LTC) Facilities

May 28, 2020

This interim guidance provides updated guidelines and criteria for COVID-19 testing in licensed long-term care (LTC) facilities, as defined by the Nursing Home Care Act, 210 ILCS 45, primarily focusing on skilled nursing and intermediate care facilities.

Given their congregate setting and resident populations served (e.g., older adults often with underlying chronic medical conditions), nursing home populations are at the highest risk of being affected by COVID-19. If infected with SARS-CoV-2, the virus that causes COVID-19, residents are at increased risk of serious illness. The Illinois Department of Public Health (IDPH) is committed to working proactively with LTC facilities to prevent illnesses.

The Nursing Home Care Act requires each LTC facility to designate a person or persons as Infection Prevention and Control Professionals to develop and to implement policies governing the control of infections and communicable diseases (210 ILCS 45/2-213(d)). This policy must be written, clear, unambiguous and made available to the public (210 ILCS 45/2-210). This guidance outlines how each LTC facility must develop an infection and communicable disease control policy that includes a facility assessment, a testing plan, and a response strategy for COVID-19.

Facility Assessment

Each LTC facility must complete the Illinois Long-Term Care Facility Assessment for COVID-19, available at:

https://redcap.dph.illinois.gov/surveys/?s=L3HPFNXEJD.

This assessment was previously distributed March 20, 2020. Any LTC facility that did not submit a response at that time must do so within seven days of the issuance of this guidance.

Testing Plan and Response Strategy

Each LTC facility must develop a written COVID-19 testing plan and response strategy within 14 days of the issuance of this guidance and be made available upon request by IDPH. Each LTC facility must account for scenarios when the facility is not experiencing an outbreak and scenarios when the facility has a COVID-19 outbreak. The response strategy must include a policy on personal protective equipment (PPE) that specifies the types and quantity of PPE required to properly care for the facility's residents. The response strategy must specify the necessary personnel, and the required training or experience of the personnel, to properly care for the number and types of residents served by the facility, including the personnel necessary

to execute the COVID-19 testing plan. The testing plan must identify the ordering physician, method of obtaining consents for the tests, and the criteria and frequency for testing residents and staff. The results of testing should be used to identify asymptomatic cases, to confirm infection in symptomatic cases, to evaluate quality indicators, to follow-up on infection control programs, and to support decision-making.

The COVID-19 testing plan and response strategy must conform to guidance issued by the Centers for Disease Control and Prevention (CDC), including but not limited to the following:

"Key Strategies to Prepare for COVID-19 in Long-Term Care Facilities," available at: <u>https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care-strategies.html</u>

"Considerations for Memory Care Units in Long-Term Care Facilities," available at: <u>https://www.cdc.gov/coronavirus/2019-ncov/hcp/memory-care.html</u>

"Responding to Coronavirus (COVID-19) in Nursing Homes," available at: <u>https://www.cdc.gov/coronavirus/2019-ncov/hcp/nursing-homes-responding.html</u>

"Testing Guidance for Nursing Homes" available at: https://www.cdc.gov/coronavirus/2019-ncov/hcp/nursing-homes-testing.html

Identified Laboratory with Adequate Capacity

Every COVID-19 testing plan must identify by name a dedicated laboratory contracted or otherwise engaged to provide COVID-19 clinical testing services according to the volume and frequency identified in the testing plan. IDPH can advise LTC facilities regarding laboratories with available capacity.

IDPH can refer facilities with no COVID-19 cases in the last 28 days to a partner laboratory. LTC facilities can request COVID-19 testing and onsite specimen collection support at:

https://redcap.dph.illinois.gov/surveys/?s=8TYYKCETCX.

Referred facilities are responsible for contracting with the partner laboratory, including providing insurance information for any person tested. The contracted laboratory will provide testing kits directly to the LTC facility. If requests exceed capacity, IDPH will prioritize assistance based on these considerations:

- o High local incidence of COVID-19 cases;
- rapid increase in local incidence of COVID-19 cases; and
- high local score on CDC's Social Vulnerability Index (SVI).

The IDPH laboratory is another source for testing as part of outbreak response and can provide test kits and run the tests. Facilities must work with their local health department (LHD) to order testing supplies and arrange for testing at an IDPH laboratory (Chicago, Springfield, or Carbondale). Facilities must obtain an outbreak or INEDSS number from their LHD to complete the supplies order form, available at:

https://app.smartsheet.com/b/form/23f8f4130df043568f2e92169b8cda40.

As part of the development of an infection and communicable disease control policy for COVID-19, each LTC facility must identify a contracted or engaged laboratory to continue to provide COVID-19 clinical testing services according to their testing plan.

<u>Onsite Training for Specimen Collection</u> Upon request and subject to availability, IDPH can provide onsite training for proper specimen collection or other assistance. LTC facilities can request onsite training for specimen collection at: <u>https://redcap.dph.illinois.gov/surveys/?s=8TYYKCETCX.</u>

LTC Facility Testing Guidelines

Facilities that experience an outbreak or identify their first case

For a facility experiencing a COVID-19 outbreak (one lab positive case and one case with COVID-19-like symptoms) or that has identified its first case, the facility must promptly report the occurrence to its LHD. The facility and LHD, in consultation with the IDPH Regional Infection Control Consultant, will arrange for testing of residents and staff. Testing is most informative to the outbreak response when implemented at the onset of the outbreak and when it includes both staff and residents. Subsequent to initial testing, the LHD, in consultation with the IDPH Regional Infection Control Consultant, will apply <u>CDC guidance</u> in determining the extent and timing of any retesting of residents and staff.

Testing should not supersede existing infection prevention and control interventions and should inform infection prevention and control actions, such as:

- Identifying health care workers (HCW) with SARS-CoV-2 infection for work exclusion.
- Enabling a HCW who tests negative to return to work after being excluded for suspected SARS-CoV-2 infection.
- Cohorting residents to separate those with SARS-CoV-2 from those without detectable SARS-CoV-2 infection at the time of testing to reduce the opportunity for further transmission.
- Determining the SARS-CoV-2 burden across different units or facilities and allocating resources.

Facilities with no identified cases in the last 28 days

For a facility with no identified cases in the last 28 days, testing must occur in residents and staff as outlined in the facility's testing plan.

<u>Contact</u>

Questions regarding the facility assessment, testing plan, or response strategy can be directed to <u>DPH.LTCtesting@illinois.gov</u>.

Distributed to: IL Licensed LTC Facilities, LHD Administrators, LHD Communicable Disease, IDPH Regional Offices