



**COVID-19 Question and Answer Session
for Long-Term Care and Congregate
Residential Settings**

May 1, 2020

Housekeeping

- All attendees in listen-only mode
- Submit questions via Q&A pod to **All Panelists**
 - Any other comments, feedback, suggestions for future topics, etc, please submit via chat
- Slides and recording will be made available later

Agenda

- Past and upcoming webinars
- Latest CDC and IDPH updates
- Open Q & A

Slides and recording will be made available after the session.

IDPH webinars

- **Friday Brief Updates and Open Q&A (1-2 pm):**
 - **5/8/20:**
<https://illinois.webex.com/illinois/onstage/g.php?MTID=e77142f8b200cbd01c324d538403bf664>
 - **5/22:**
<https://illinois.webex.com/illinois/onstage/g.php?MTID=e1f723a533a0753b8a5dffa4914e4726>
 - **5/29:**
<https://illinois.webex.com/illinois/onstage/g.php?MTID=e3007014ea78f16862cfba3ebc982f771>
- **Hand Hygiene and Performance measures- topic may change (Wednesday, 5/15, 1 – 2 pm):**
<https://illinois.webex.com/illinois/onstage/g.php?MTID=e002fff0fa13b512e81dfae197770ff12>

Slides and recordings will be made available after the sessions.

CDC mini-webinar trainings for LTC frontline staff

- Keep COVID-19 Out! <https://youtu.be/7srwrF9MGdw>
- Sparkling Surfaces - <https://youtu.be/t7OH8ORr5Ig>
- Clean Hands - <https://youtu.be/xmYMUly7qiE>
- PPE Lessons - <https://youtu.be/YYTATw9yav4>



Criteria for Return to Work for Healthcare Personnel with Confirmed or Suspected COVID-19 (Interim Guidance)

Print Page

Summary of Recent Changes as of April 30, 2020

- Changed the name of the 'non-test-based strategy' to the 'symptom-based strategy' for those with symptoms and the 'time-based strategy' for those without symptoms and updated these to extend the duration of exclusion from work to at least 10 days since symptoms first appeared. This update was made based on evidence suggesting a longer duration of cultural viral shedding and will be revised as additional evidence becomes available.
- Based on this extension of the symptom-based and time-based strategies, language about the test-based strategy being preferred was removed.

“10+3” strategy

Return to Work Criteria for HCP with Confirmed or Suspected COVID-19

Symptomatic HCP with suspected or confirmed COVID-19:

- *Symptom-based strategy.* Exclude from work until:
 - At least 3 days (72 hours) have passed *since recovery* defined as resolution of fever without the use of fever-reducing medications **and** improvement in respiratory symptoms (e.g., cough, shortness of breath); **and**,
 - At least 10 days have passed *since symptoms first appeared*
- *Test-based strategy.* Exclude from work until:
 - Resolution of fever without the use of fever-reducing medications **and**
 - Improvement in respiratory symptoms (e.g., cough, shortness of breath), **and**
 - Negative results of an FDA Emergency Use Authorized COVID-19 molecular assay for detection of SARS-CoV-2 RNA from at least two consecutive nasopharyngeal swab specimens collected ≥ 24 hours apart (total of two negative specimens)[1]. See Interim Guidelines for Collecting, Handling, and Testing Clinical Specimens for 2019 Novel Coronavirus (2019-nCoV). Of note, there have been reports of prolonged detection of RNA without direct correlation to viral culture.

Discontinuation of Transmission-Based Precautions and Disposition of Patients with COVID-19 in Healthcare Settings (Interim Guidance)

Print Page

CDC guidance for COVID-19 may be adapted by state and local health departments to respond to rapidly changing local circumstances.

Summary of Changes to the Guidance

Below are changes to the guidance as of April 30, 2020:

- Changed the name of the 'non-test-based strategy' to the 'symptom-based strategy' for those with symptoms and the 'time-based strategy' for those without symptoms and updated these to extend the duration of Transmission-Based Precautions to at least 10 days since symptoms first appeared. This update was made based on evidence suggesting a longer duration of viral shedding and will be revised as additional evidence becomes available. This time period will capture a greater proportion of contagious patients; however, it will not capture everyone.
- Added criteria for discontinuing Transmission-Based Precautions for patients who have laboratory-confirmed COVID-19 but have not had any symptoms of COVID-19.

Discontinuation of Transmission-Based Precautions for patients with COVID-19:

The decision to discontinue [Transmission-Based Precautions](#) for patients with confirmed COVID-19 should be made using either a test-based strategy or a symptom-based (i.e., time-since-illness-onset and time-since-recovery strategy) or time-based strategy as described below. Meeting criteria for discontinuation of Transmission-Based Precautions is not a prerequisite for discharge.

Symptomatic patients with COVID-19 should remain in Transmission-Based Precautions until either:

- *Test-based strategy*
 - ◊ Resolution of fever without the use of fever-reducing medications and
 - ◊ Improvement in respiratory symptoms (e.g., cough, shortness of breath), and
 - ◊ Negative results of an FDA Emergency Use Authorized COVID-19 molecular assay for detection of SARS-CoV-2 RNA from at least two consecutive nasopharyngeal swab specimens collected ≥ 24 hours apart (total of two negative specimens) [1]. See [Interim Guidelines for Collecting, Handling, and Testing Clinical Specimens for 2019 Novel Coronavirus \(2019-nCoV\)](#). Of note, there have been reports of prolonged detection of RNA without direct correlation to viral culture.
- *Symptom-based strategy*
 - ◊ At least 3 days (72 hours) have passed *since recovery* defined as resolution of fever without the use of fever-reducing medications and improvement in respiratory symptoms (e.g., cough, shortness of breath); and,
 - ◊ At least 10 days have passed *since symptoms first appeared*

Patients with laboratory-confirmed COVID-19 who have not had any symptoms should remain in Transmission-Based Precautions until either:

- *Test-based strategy*
 - ◊ Negative results of an FDA Emergency Use Authorized COVID-19 molecular assay for detection of SARS-CoV-2 RNA from at least two consecutive nasopharyngeal swab specimens collected ≥ 24 hours apart (total of two negative specimens). Note, because of the absence of symptoms, it is not possible to gauge where these individuals are in the course of their illness. There have been reports of prolonged detection of RNA without direct correlation to viral culture.
- *Time-based strategy*
 - ◊ 10 days have passed since the date of their first positive COVID-19 diagnostic test assuming they have not subsequently developed symptoms since their positive test. Note, because symptoms cannot be used to gauge where these individuals are in the course of their illness, it is possible that the duration of viral shedding could be longer or shorter than 10 days after their first positive test.

Note that detecting viral RNA via PCR does not necessarily mean that infectious virus is present.

Consider consulting with local infectious disease experts when making decisions about discontinuing Transmission-Based Precautions for patients who might remain infectious longer than 10 days (e.g., severely immunocompromised).

CMS upcoming reporting requirements

- **Background:** Nursing homes will be required to report cases in residents and staff via the National Healthcare Safety Network (NHSN)
- **CDC website:** <https://www.cdc.gov/nhsn/ltc/covid19/index.html>

The screenshot displays the CDC National Healthcare Safety Network (NHSN) website. At the top left is the CDC logo and the text "Centers for Disease Control and Prevention, CDC 24/7: Saving Lives. Protecting People™". A search bar and "Search NHSN" button are on the top right. Below the header is a green navigation bar with "National Healthcare Safety Network (NHSN)". The breadcrumb trail reads "CDC > NHSN > Materials for Enrolled Facilities > Long-term Care Facilities". A sidebar on the left lists navigation options: NHSN, NHSN Login, About NHSN, Enroll Here, Change NHSN Facility Administrator, Materials for Enrolled Facilities (expanded), and COVID-19 Module. The main content area is titled "LTCF COVID-19 Module" and contains the following text: "CDC's NHSN provides healthcare facilities, such as long term care facilities (LTCF) with a customized system to track infections and prevention process measures in a systematic way. Tracking this information allows facilities to identify problems, improve care, and determine progress toward facility and national healthcare-associated infection goals. The NHSN Long-term Care Facility Component is supporting the nation's COVID-19 response by introducing a new COVID-19 Module for Long Term Care Facilities. Facilities eligible to report into the COVID-19 Module include nursing homes/skilled nursing, long-term care for the developmentally disabled, and assisted living facilities. The COVID-19 Module for LTCFs consists of four pathways within NHSN's Long-term Care Facility Component: Resident Impact and Facility Capacity, Staff and Personnel Impact, Supplies and Personal Protective Equipment, and Ventilator Capacity and Supplies. The Module enables an assessment of the impact of COVID-19 in LTCFs through facility reported information, including: 1) counts of residents and facility personnel with suspected and laboratory positive COVID-19; 2) counts of suspected and laboratory positive COVID-19 related deaths among residents and facility personnel; 3) staffing shortages; 3) status of personal protective equipment (PPE) supplies; and 4) ventilator capacity and supplies for facilities with ventilator dependent". To the right of the text is a large blue button labeled "COVID-19 Module for LTCF" and four smaller blue buttons: "Resident Impact & Facility Capacity", "Staff & Personnel Impact", "Supplies & Personal Protective Equipment", and "Ventilator Capacity & Supplies".

NHSN website

Enrollment

–

LTCF's submitting COVID-19 data **only** should follow the enrollment steps below:

[Enrollment steps for LTCFs submitting data in COVID-19 Module](#)

Training

+

Data Collection Forms & Instructions

+

Resources

+

Get NHSN COVID-19 Updates

For continued NHSN COVID-19 updates, please enter your email address. NHSN facility and group users do not need to sign up, you will receive them automatically.

Email (optional)



CDC COVID-19 Info

Get the latest information from the CDC about COVID-19

CMS Requirements

[CMS Requirements for reporting in NHSN](#)

CMS COVID-19 Updates:

[CMS Announces Relief for Clinicians, Providers, Hospitals and Facilities Participating in Quality Reporting Programs in Response to COVID-19](#) 
[PDF – 400 KB] 

NHSN Enrollment – COVID19 module only

Step 1 – Prepare your computer to interact with NHSN

You may need to change your email and internet security settings to receive communications from NHSN during the enrollment process.

Step 2A – Register Facility with NHSN

The person who will serve as the NHSN Facility Administrator (usually the person enrolling the facility) must access and read the [NHSN Facility/Group Administrator Rules of Behavior](#).

Step 2B – Register with SAMS (Security Access Management System)

After NHSN receives your completed registration, you will receive an *Invitation to Register with SAMS* via email with steps to complete the process.

Step 3 – Complete NHSN LTC Enrollment

On the SAMS homepage, click the link to the National Healthcare Safety Network labeled **NHSN LTC Enrollment and Complete Facility Contact Information**.

Step 4 – Electronically Accept the NHSN Agreement to Participate and Consent

*If your facility wants to report other modules (e.g., *C. difficile*), the process is different

NHSN Enrollment – COVID19 module only

Step 1 – Prepare your computer to interact with NHSN

You may need to change your email and internet security settings to receive communications from NHSN during the enrollment process.

Step 2A – Register Facility with NHSN

IMPORTANT!

If your facility previously enrolled in NHSN, do not enroll again!

LTCFs that are currently enrolled in NHSN's LTCF Component have immediate access to the new module and may begin reporting. If your facility previously enrolled, but is no longer able to gain access, contact NHSN user support at nhsn@cdc.gov for assistance.

Step 4 – Electronically Accept the NHSN Agreement to Participate and Consent

NHSN Training

Enrollment +


Training -

Topic: COVID-19 Module Overview for Long-term Care Facilities

When: Thursday, April 30th, 2020

Time: 1:30-3:00 PM, EST

Please click the link below to join the webinar:

<https://cdc.zoomgov.com/j/1616453257?pwd=aWdkNVdWeGJWMXZJSk9NOW5VK1Igdz09> 

Password: 693066

Or iPhone one-tap :

US: +16692545252,,1616453257#,,#,693066# or
+16468287666,,1616453257#,,#,693066#

Or Telephone:

Dial(for higher quality, dial a number based on your current location):

US: +1 669 254 5252 or +1 646 828 7666

Webinar ID: 161 645 3257

Password: 693066

Please note that links are available only during the date and time of the event.

Topic: COVID-19 Enrollment Guidance for Long-term Care Facilities

When: Friday, May 1st, 2020

NHSN LTCF staff will conduct various virtual trainings and office hour sessions to assist LTCFs with enrollment and data submission.

NHSN Data Collection Forms & Instructions

Data Collection Forms & Instructions

Resident Impact and Facility Capacity

- [COVID-19 Resident Impact and Facility Capacity Pathway Form \(57.144\)](#)
[PDF - 100 KB] (print-only)
 - [Table of Instructions \(57.144\)](#) [PDF - 250 KB]
-

Staff and Personnel Impact

- [COVID-19 Staff and Personnel Impact Pathway Form \(57.145\)](#) [PDF - 120 KB] (print-only)
 - [Table of Instructions \(57.145\)](#) [PDF - 220 KB]
-

Supplies and Personal Protective Equipment

- [COVID-19 Supplies and Personal Protective Equipment Pathway Form \(57.146\)](#) [PDF - 120 KB] (print-only)
 - [Table of Instructions \(57.146\)](#) [PDF - 220 KB]
-

Ventilator Capacity and Supplies

- [COVID-19 Ventilator Capacity and Supplies Pathway Form \(57.147\)](#) [PDF - 110 KB] (print-only)
 - [Table of Instructions \(57.147\)](#) [PDF - 250 KB]

NHSN Data Collection Forms



OMB Approved
OMB No. 0920-1290
Exp. Date 09/30/2020
www.cdc.gov/nhsn

COVID-19 Module Long Term Care Facility: Resident Impact and Facility Capacity

NHSN Facility ID:
CMS Certification Number (CCN):
Facility Name:
*Date for which responses are reported: ____/____/____

For the following questions, please collect data at the same time at least once a week (for example, 7 AM)

Resident Impact

_____	ADMISSIONS: Residents admitted or readmitted who were previously hospitalized and treated for COVID-19
_____	CONFIRMED: Residents with new laboratory positive COVID-19
_____	SUSPECTED: Residents with new suspected COVID-19
_____	TOTAL DEATHS: Residents who have died in the facility or another location
_____	COVID-19 DEATHS: Residents with suspected or laboratory positive COVID-19 who died in the facility or another location

Facility Capacity and Laboratory Testing

_____	ALL BEDS (FIRST SURVEY ONLY)
_____	CURRENT CENSUS: Total number of beds that are currently occupied
_____	<p>*TESTING: Does your facility have access to COVID-19 testing while the resident is in the facility?</p> <p><input type="checkbox"/> YES</p> <p><input type="checkbox"/> NO</p> <p>If YES, what laboratory type? Select all that apply.</p> <p><input type="checkbox"/> State health department lab</p> <p><input type="checkbox"/> Private lab (hospital, corporation, academic institution)</p> <p><input type="checkbox"/> Other</p>

Assurance of Confidentiality: The voluntarily provided information obtained in this surveillance system that would permit identification of any individual or institution is


Good for
reference as to
what's in the
online module



NHSN Resources

Resources

Facility Resources

- [Facility Guide to Using the COVID-19 Module](#)  [PDF - 1 MB]
- [Facility - How to Upload COVID-19 CSV Data Files](#)  [PDF - 600 KB]
- Facility Level CSV File Templates
 - [Resident Impact and Facility Capacity Template](#)  [CSV - 1 KB]
 - [Staff and Personnel Impact Template](#)  [CSV - 1 KB]
 - [Supplies and Personal Protective Equipment Template](#)  [CSV - 1 KB]
 - [Ventilator Capacity and Supplies Template](#)  [CSV - 1 KB]
- [How to ADD and EDIT Facility CMS Certification Number \(CCN\) within NHSN](#)  [PDF - 1 MB]
- [Facility Enrollment Guidance](#)  [PDF - 850 KB]

NHSN Assistance

Telligen can support Nursing Homes with the COVID-19 Module and

- Enrolling facilities and users in NHSN
- *C. difficile* and UTI surveillance and reporting
- Submitting and analyzing data
- How to use the data for monitoring and surveillance in community
- Telligen Contacts:
 - NGriffin@telligen.com
 - LBridwel@telligen.com

IDPH update to communication guidance

- Updated to align with CMS requirements

The following notifications must be provided within 12 hours after the facility's administration becomes aware of the event, unless sooner notification is required:

1. A verbal communication shall be provided immediately to a resident's family, and a resident's representative whenever a resident receives confirmation of COVID-19 infection.
2. A written notification shall be provided within 12 hours to each resident of the facility, resident's family, representative, and to all staff members, upon the occurrence of a single confirmed infection of COVID-19, or three or more residents or staff members with new-onset of respiratory symptoms that occur within 72 hours.
3. A written notification shall be provided immediately to DPH and the LHD upon the confirmation of COVID-19 infection of a resident or staff member. The written notification should confirm that the long-term care facility is notifying all staff members, residents, residents' families, and residents' representatives as provided in this guidance. Notification to DPH should be submitted to the Regional Office by email or fax.
4. A notice that indicates a resident or staff member of the facility has been confirmed with COVID-19 infection shall be posted in a conspicuous place near the main entrance of the facility.
5. Updates to residents, their families, their representatives, and staff members shall be provided weekly, or each subsequent time a confirmed infection of COVID-19 is identified and/or whenever three or more residents or staff members with new onset of respiratory symptoms occurs within 72 hours. In these updates, facilities will include information on mitigating actions implemented to prevent or reduce the risk of transmission, including if normal operations in the nursing home will be altered.
6. A verbal communication shall be provided immediately to a resident's family and a resident's representative whenever the long-term care facility receives notice that a resident has died from COVID-19.

Updated IDPH employee monitoring tool - 4/27

EMPLOYEE MONITORING TOOL (COVID-19)

Associate Name: _____ Dept: _____ Date: _____ Time: _____

Pre-Checker Name: _____

- Select place close to entrance for screening. Ideally a separate employee entrance with limited traffic.
- Staff should be screened before entering the building for temperature and symptoms of COVID19 and respiratory illness (per CDC guidance).

Do you have a:	Yes	No	Comments
Fever (>100.0°F)			
New or worsening cough			
Shortness of breath			
Sore throat			
Chills or shaking w/chills			
Muscle pain			
Headache (new or unusual onset). Not related to caffeine, dietary reasons (hunger), or history of migraines, cluster, or tension headaches, or HA typical for the individual).			
New loss of taste or smell			



***Note: Not all individuals present with the same symptoms. The above listed symptoms are per CDC. Clinical judgment should be used to determine whether additional symptoms would warrant the employee to be excluded from work.**

If employee answers NO to ALL screening questions, the screener should complete a screening ticket for employee to give to shift supervisor. Employee may begin work shift. All employees must wear facemask while in the facility. Universal masking is required of all staff.

IDPH efforts: COVID testing for LTC

- **Strategy:** IDPH intends on providing testing to every LTC facility in Illinois in need of testing. Based on limited resources and supplies, the state must prioritize facilities.

LTCF with cases identified?	Who will be tested?	Purpose
NO	Residents and staff	Identify previously undetected cases. Swiftly implement mitigation strategies to decrease potential spread.
YES	Staff	Prevent continued transmission of the virus through staff.

IDPH efforts: COVID testing for LTC

1. IDPH will call
 - a. LTCF to schedule testing, arrange for shipment of specimen collection supplies and ensure receipt, describe process.
 - b. Local health department for awareness and coordination.
 2. Support team of 5 contract nurses will go onsite to:
 - a. Collect specimens
 - b. Train facility staff to collect specimens
 - c. Conduct infection control assessment and observations
- 10 support teams deployed across state for these efforts

IDPH efforts: COVID testing for LTC

1. IDPH will call LTCF to schedule testing, arrange for shipment of specimen collection supplies, describe process. Will call local health department for awareness and coordination.
2. Support team of 5 contract nurses will go onsite to:
 - a. Collect specimens
 - b. Train facility staff to collect specimens
 - c. Conduct infection control assessment and observations
3. **Contract lab to:**
 - a. Arrange for specimen pickup
 - b. Test specimens
 - c. Report results to LTCF and IDPH (via I-NEDSS) within 48 hours
4. If there are positives, implement infection control measures

Open Q&A

Submit questions via Q&A pod to **All Panelists**

Submit suggestions for future topics, LTCFs best practices, lessons learned via Chat pod to **All Panelists**

Slides and recording will be made available after the session.

Reminder: SIREN Registration

To receive situational awareness from IDPH, please use this link to guide you to the correct registration instructions for your public health related classification: <http://www.dph.illinois.gov/siren>