



COVID-19 Chicago Long Term Care Roundtable

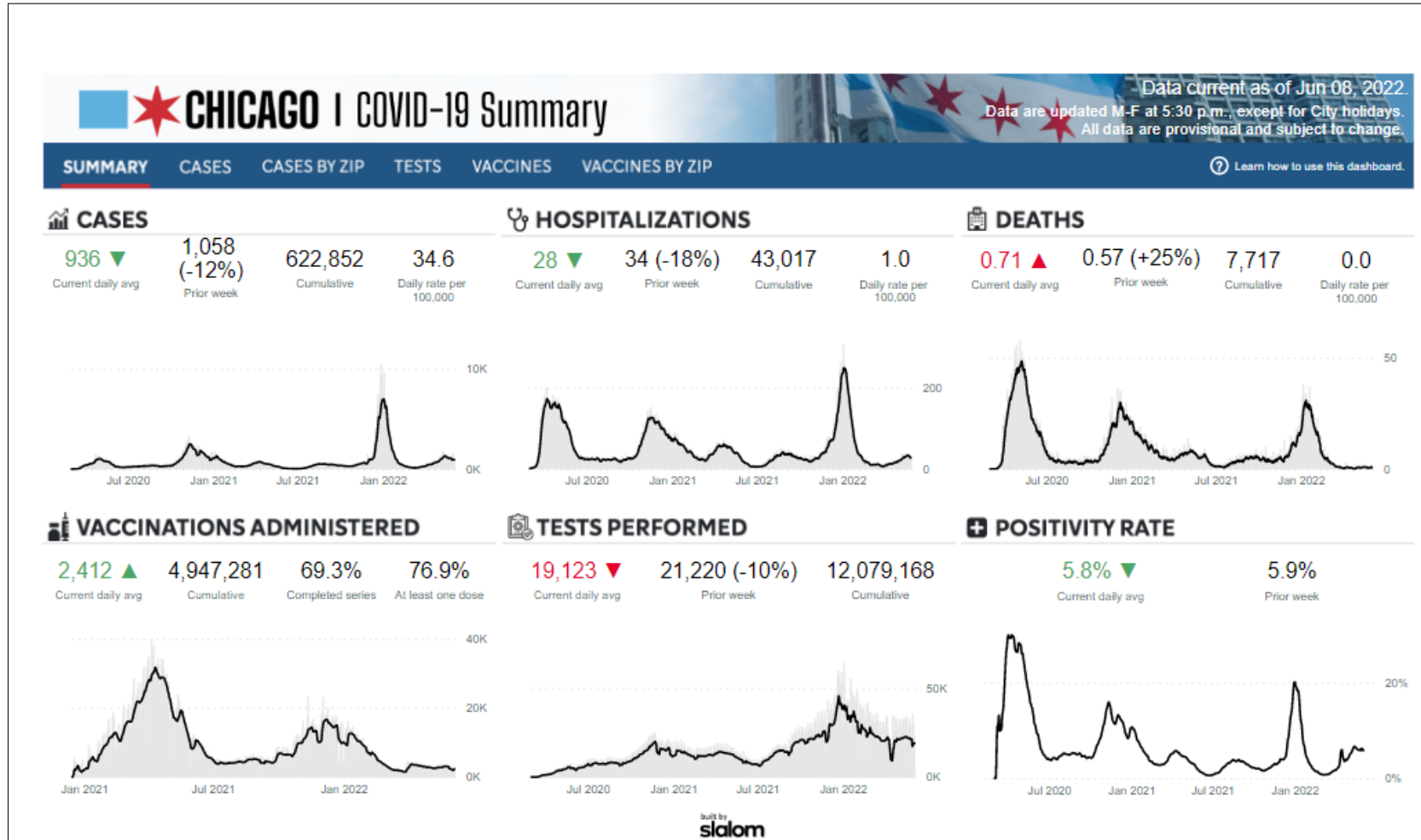
06-09-2022



Agenda

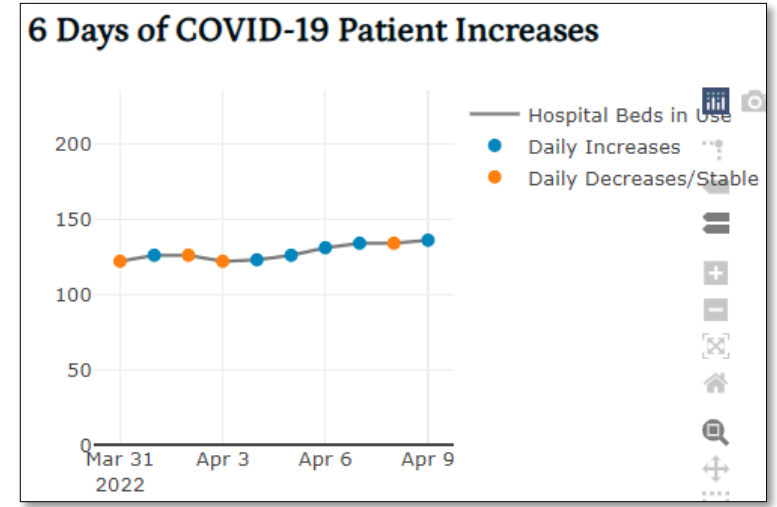
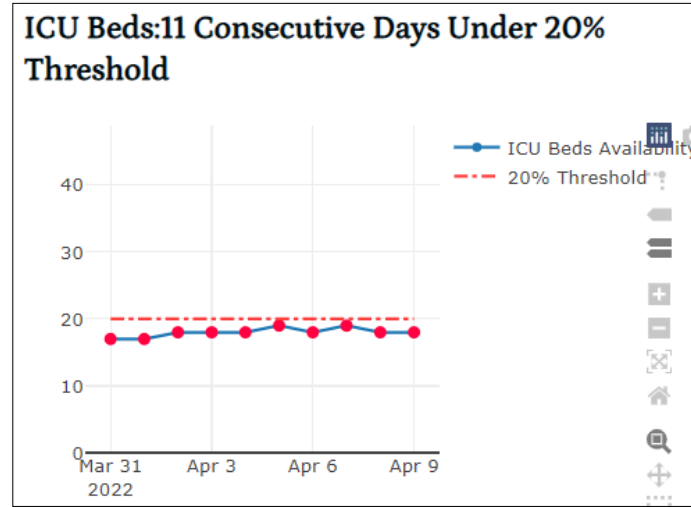
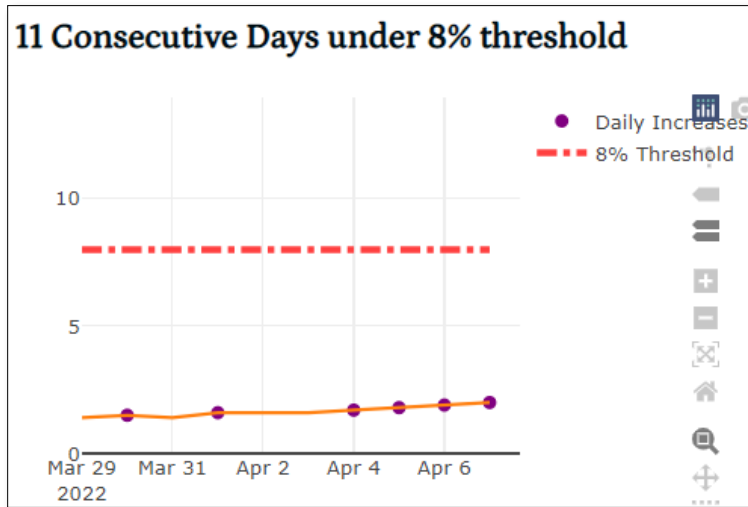
- COVID-19 Epidemiology
- COVID Reminders, Updates, and FAQs
- EVS Survey
- Questions & Answers

Chicago Dashboard

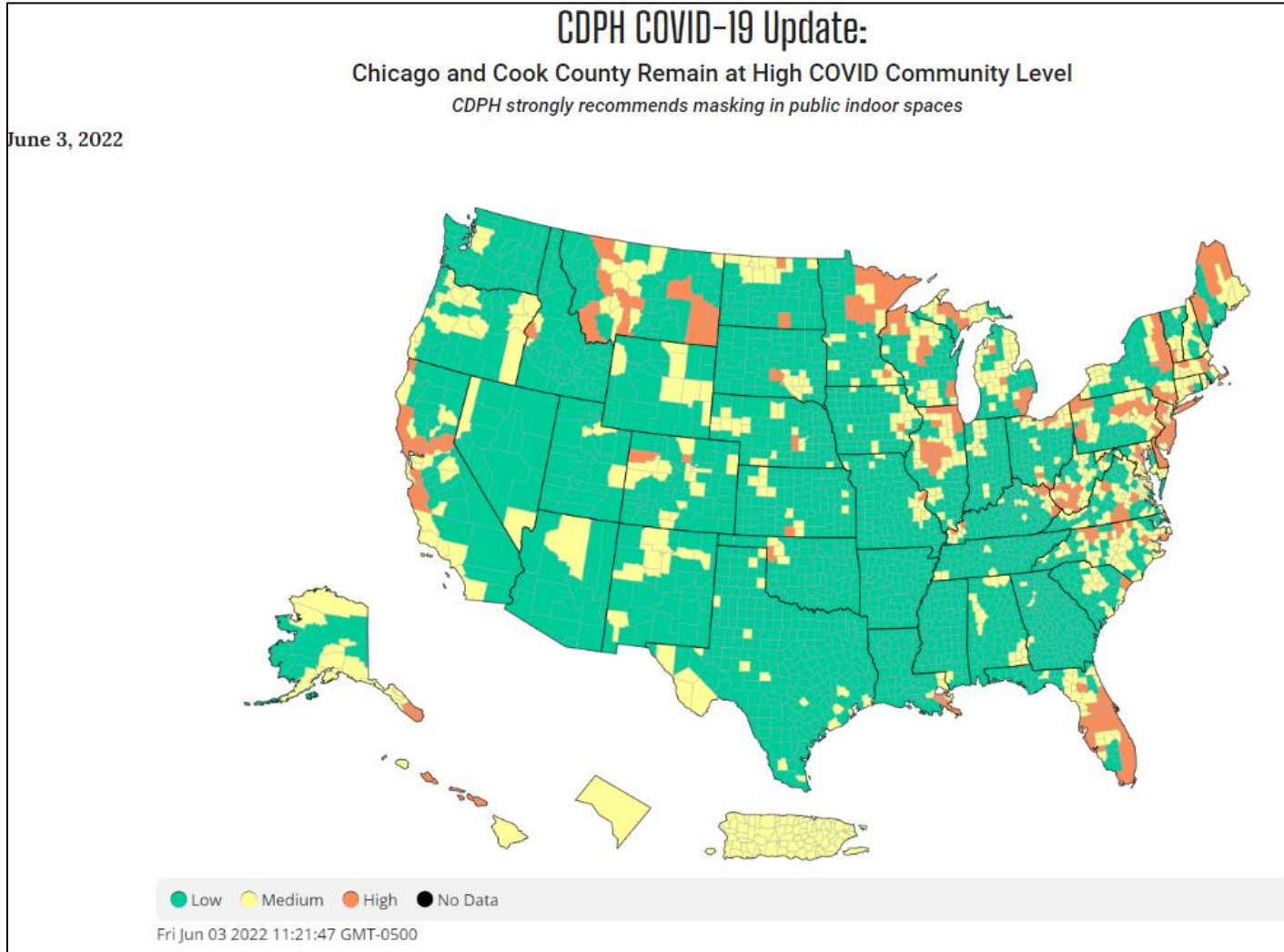




IDPH Regional Resurgence Metrics: Region 11



CDC COVID-19 Community Levels

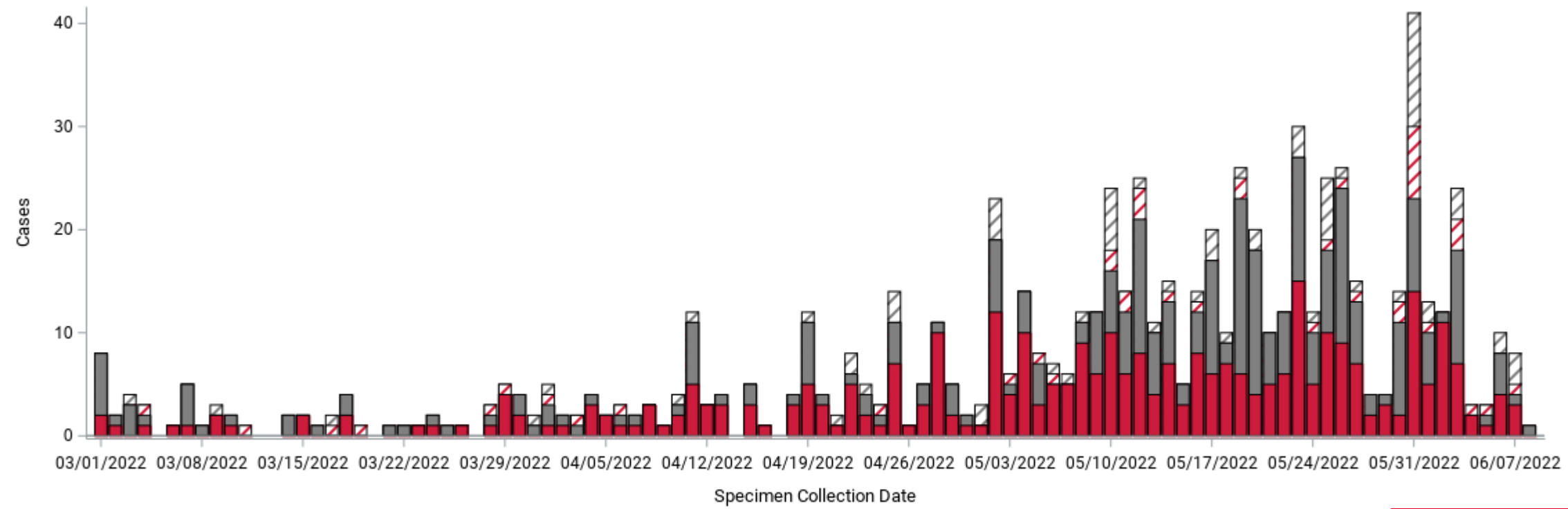


COVID-19 Variant Proportions



Continued Increase in Skilled Nursing Home Cases & Outbreaks

(Mar. 1, 2022 – Jun 8, 2022)



Legend:
 - Not Fully Vaccinated Resident (grey with diagonal lines)
 - Not Fully Vaccinated Staff (red with diagonal lines)
 - Fully Vaccinated Resident (grey)
 - Fully Vaccinated Staff (red)

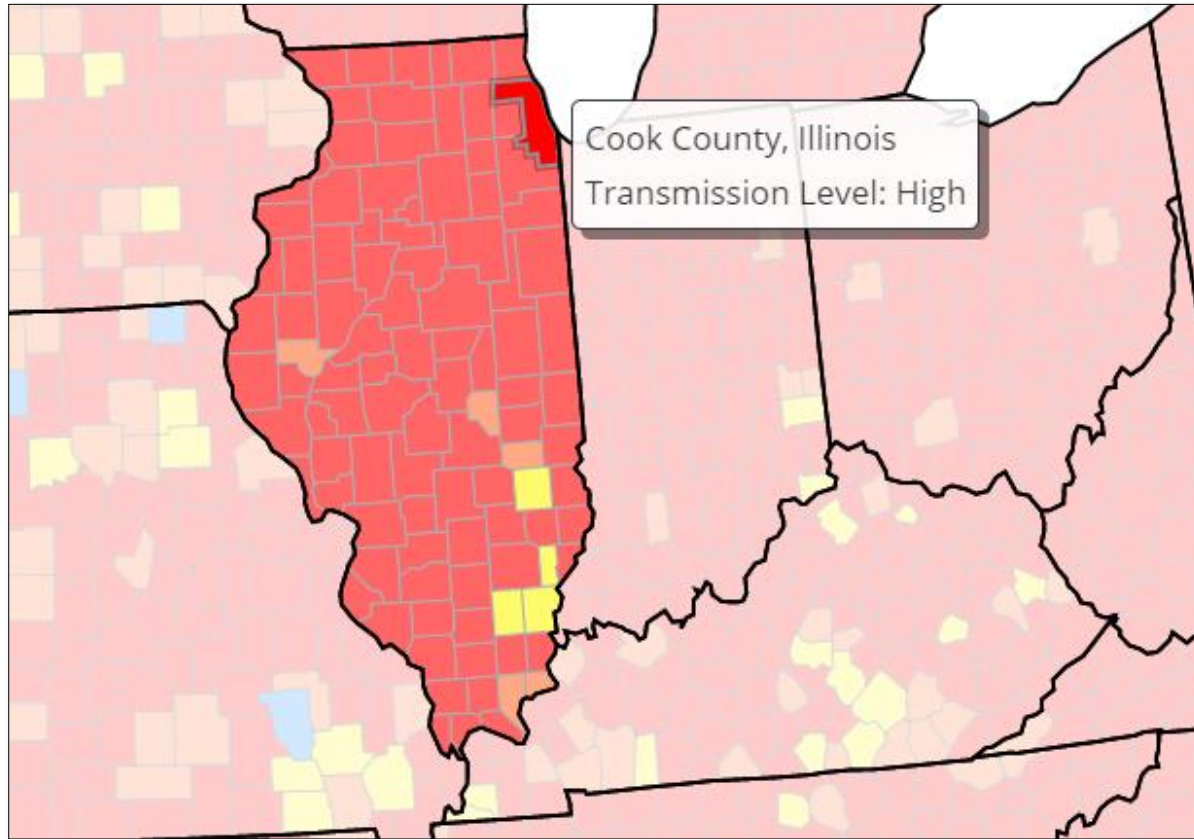
Data Sources: INEDSS (Illinois state) and REDCap (facility self report)
A fully vaccinated case occurs when the positive test specimen was collected at least 14 days after the individual completed their COVID vaccination
Fully vaccinated cases may be underestimated due to delayed reporting

58 (70%) SNFs have active outbreaks

★ Reminder: CDC COVID Data Tracker

Indicator - If the two indicators suggest different transmission levels, the higher level is selected	Low Transmission Blue	Moderate Transmission Yellow	Substantial Transmission Orange	High Transmission Red
Total new cases per 100,000 persons in the past 7 days	0-9.99	10-49.99	50-99.99	≥100
Percentage of NAATs ¹ that are positive during the past 7 days	0-4.99%	5-7.99%	8-9.99%	≥10.0%

CDC COVID Data Tracker: Cook County





Reminder: Minimum Routine Staff Testing Frequency

Vaccination Status	Testing Frequency
Unvaccinated	2x a week*
Partially Vaccinated	2x a week*
Vaccinated but not up to date**	2x a week*
Up to date	No required routine testing

Based on Executive Order and related Emergency Rules

* Unless symptomatic, had a high-risk exposure, or your facility is in outbreak and performing broad-based testing.

** An individual has not received all COVID-19 vaccinations for which they are eligible, as outlined under “up to date”

★ Reminder: Minimum Routine Resident Testing Frequency

Vaccination Status	Routine Testing Frequency
Unvaccinated*	No required routine testing**
Partially vaccinated*	No required routine testing**
Vaccinated but not up to date*	No required routine testing**
Up to date*	No required routine testing**
New and readmissions, regardless of vaccination status, <i>when community transmission is low or moderate</i>	No required routine testing**
New and readmissions, regardless of vaccination status, <i>when community transmission is substantial or high</i>	Must be tested upon admission (unless tested within the 72 hours prior to admission) <i>and</i> at 5-7 days post-admission

*Excluding new/readmissions when community transmission is substantial or high

**Unless symptomatic, had a high-risk exposure, or your facility is in outbreak and performing broad-based testing.

Reminder: Temporary Barriers

- Facilities are no longer permitted to use temporary walls and barriers (e.g., plastic sheeting) between patients as the waiver allowing for those barriers expired on June 6, 2022.
- If there are no other physical barriers (e.g., fire doors) you can use to separate COVID+ residents from other residents, we recommend moving the COVID+ resident(s) to the end of the hallway and leaving an empty room in between the COVID+ resident(s) and other residents.
- Consider using nonobstructive visual cues (e.g., signage, red tape on the ground) to indicate that staff will be entering a different zone

★ Update: Up to Date Definition

- Previously, a person was considered up to date if they were fully vaccinated and not yet eligible for a booster or if they were fully vaccinated and had received **at least one booster dose**
- Using CDC's updated definition, a person is up to date when they "have received all doses in the primary series and **all boosters recommended...when eligible**"

★ Update: Up to Date Definition

Individuals <50 who are not moderately/severely immunocompromised are considered up to date if they are:

- Fully vaccinated (i.e., two doses of Moderna/Pfizer or one dose of J&J) and not yet eligible for a first booster **OR**
- Fully vaccinated and have received at least one booster dose



Reminder: Vaccination schedule for those who are not moderately/severely immunocompromised

Vaccine	0 month	1 month	2 month	3 month	4 month	5 month	6 month	7 month	8 month	9 month	10 month	11 month
Pfizer-BioNTech (ages 5 years and older)	1 st dose	2 nd dose [†] (3-8 weeks after 1 st dose)					Booster dose [‡] (at least 5 months after 2 nd dose)				2 nd booster dose for eligible people [§] (at least 4 months after 1 st booster)	
Moderna (ages 18 years and older)	1 st dose	2 nd dose [†] (4-8 weeks after 1 st dose)					Booster dose [‡] (at least 5 months after 2 nd dose)				2 nd booster dose for eligible people [§] (at least 4 months after 1 st booster)	
Janssen (ages 18 years and older)	1 st dose			Booster dose [‡] (at least 2 months after 1 st dose)				2 nd booster dose for eligible people [§] (at least 4 months after 1 st booster)				

★ Update: Up to Date Definition

Individuals **>50** and/or who **are moderately/severely immunocompromised** are considered up to date only if they are:

- Fully vaccinated* and not yet eligible for a first booster **OR**
 - Fully vaccinated*, have received one booster dose, and are not yet eligible for a second booster **OR**
 - Fully vaccinated* and have received two booster doses
- * Note that three doses (or two doses if the first dose was J&J) are required to be fully vaccinated for those who are moderately/severely immunocompromised.



Reminder: Vaccination schedule for those who are moderately/severely immunocompromised

Vaccine	0 month	1 month	2 month	3 month	4 month	5 month	6 month	7 month	8 month	9 month
Pfizer-BioNTech (ages 5 years and older)	1 st dose	2 nd dose (3 weeks after 1 st dose)	3 rd dose (at least 4 weeks after 2 nd dose)			Booster dose* (at least 3 months after 3 rd dose)				2 nd booster dose for eligible people† (at least 4 months after 1 st booster)
Moderna (ages 18 years and older)	1 st dose	2 nd dose (4 weeks after 1 st dose)	3 rd dose (at least 4 weeks after 2 nd dose)			Booster dose* (at least 3 months after 3 rd dose)				2 nd booster dose† (at least 4 months after 1 st booster dose)
Janssen (ages 18 years and older)	1 st dose	2 nd (additional) dose‡ using an mRNA COVID-19 vaccine (at least 4 weeks after 1 st dose)			Booster dose* (at least 2 months after additional dose)			2 nd booster dose† (at least 4 months after 1 st booster dose)		



Differences in guidance for up to date vs. not up to date

- Quarantine for new/readmissions
- Quarantine for exposed residents
- Work exclusion for exposed staff
- Routine staff testing requirements
- Social distancing at communal dining and group activities



Quarantine Guidance for New/Readmissions

- **Up to date:** No quarantine required
- **Not up to date:** Must quarantine for 10 days following (re)admission
 - **Exception:** If the resident has had COVID in the preceding 90 days, they can bypass quarantine
- **Reminder:** When Cook County is experiencing substantial or high COVID transmission, all new/readmissions (excluding those who had COVID <90 days ago) must be tested upon admission (if not within the 72 hours prior) and 5-7 days post-admission

New/Readmission Scenarios

- 1) 45-year-old new admission who received her first booster 9 months ago and has never had COVID**
 - No quarantine required but must test upon admission and day 5-7 post-admission when Cook County is experiencing substantial or high COVID transmission

- 2) 51-year-old readmission who received his first booster 6 months ago and had COVID 4 months ago**
 - Must be quarantined and tested when Cook County is experiencing substantial or high COVID transmission

- 3) 67-year-old unvaccinated new admission who had COVID 2 months ago**
 - No quarantine or testing required



Update: Bed Management for New/Readmissions

- **Ideal state:** All new/readmissions requiring quarantine are placed in *private rooms* in a designated area under transmission-based precautions for 10 days
- If an unanticipated acute situation (e.g., large outbreak) causes severe bed management issues, facilities can cohort as follows:
 - Unvaccinated, partially vaccinated, fully vaccinated but unboosted (despite being eligible): private room
 - Fully vaccinated + one booster : Can cohort with other new/readmissions who have received one booster dose
 - If roommates are added on different days, the **entire** room has to restart the 10-day quarantine based on the date of (re)admission for the most recent resident
 - This is intended to be a short-term solution and should **not** be adopted as routine facility policy



Quarantine Guidance for Asymptomatic Exposed Residents

- **Up to date:** No quarantine required but must be masked whenever leaving the room and tested “immediately” (but not sooner than 24 hours) and at 5-7 days post-exposure
 - **Exception:** If the resident has had COVID in the preceding 90 days, they can bypass testing
- **Not up to date:** Must quarantine for 10 days and be tested at the same frequency as outlined above
 - **Exception:** If the resident has had COVID in the preceding 90 days, they can bypass quarantine and testing



Asymptomatic Exposed Resident Scenarios

- 1) 48-year-old immunocompromised resident who received his third dose 4 months ago**
 - Must quarantine for 10 days following the exposure and be tested “immediately” (but no sooner than 24 hours) and 5-7 days post-exposure

- 2) 57-year-old immunocompetent resident who received her second booster 2 weeks ago**
 - No quarantine required but must be tested and wear a mask

- 3) 90-year-old resident who received one dose 3 months ago and had COVID 2 months ago**
 - No quarantine or testing required but must wear a mask



Work Exclusion for Asymptomatic Exposed Staff

- **Up to date:** No exclusion required but must have a negative test on day 1 and 5-7 post exposure
 - **Exception:** If the staff member had COVID in the preceding 90 days, they can bypass testing
- **Not up to date:** As per the conventional strategy, either 10 days off if no testing is performed or 7 days off with a negative test
 - **Exception:** If the staff member had COVID in the preceding 90 days, they can bypass exclusion and testing



Work Exclusion for Asymptomatic Exposed Staff Scenarios

- 1) 18-year-old unvaccinated staff member with a religious exemption**
 - Must be excluded for 10 days following the exposure if not tested or 7 days following exposure with a negative test

- 2) 35-year-old staff member who received one booster 8 months ago**
 - No exclusion required but must have a negative test on day 1 and day 5-7

- 3) 52-year-old staff member who received one booster dose 6 months ago**
 - Must be excluded for 10 days following the exposure if not tested or 7 days following exposure with a negative test



Routine Staff Testing

- **Up to date:** No routine testing required
- **Not up to date:** Must test 2x a week
 - **Exception:** If the staff member had COVID in the preceding 90 days, they can bypass testing
- **Reminder:** All staff, regardless of vaccination status, must test following an exposure, if the facility is performing broad-based testing during an outbreak, and/or if symptomatic

Routine Staff Testing Scenarios

- 1) **60-year-old unboosted staff member who received the second dose 3 months ago**
 - No routine testing required

- 2) **35-year-old immunocompromised staff member who received the first booster 6 months ago**
 - Must be tested 2x a week

- 3) **55-year-old staff member who received the second booster yesterday**
 - No routine testing required



Social Distancing for Communal Dining & Group Activities

- **Up to date:** Do not need to socially distance from other residents or staff
- **Not up to date:** Must maintain a 6-foot distance from other residents and staff

Update: ICARE Access for LTCFs

- We heard from many of you that you applied for ICARE a while ago but still do not have access
- Marleigh Andrews-Conrad from IDPH will provide an in-depth overview of the registration process and common errors that have been holding up previously submitted applications on the next roundtable

Update: ICARE Access for LTCFs

- In the meantime, Marleigh said that those of you who have already applied and want a status update can email her directly (note that she will be out of the office from 6/9 – 6/21 so there may be a delay in her response).
- When emailing Marleigh (marleigh.andrews-conrad@illinois.gov), please include the following information:
 - Name
 - Facility name
 - If the facility belongs to a larger corporate network, please also provide the name of the network
 - The name of the PRA that was listed in the enrollment submission, if applicable
 - To the best of your knowledge, please provide the names, emails, and job titles of any other staff that applied for access at your facility

New: EVS Survey

- Survey about cleaning/disinfection practices, frequency, and products
- Ensure your Administrator, DON, and EVS Manager are present when completing the survey but there should only be one submission per facility
- Survey link: <https://redcap.link/snfevs>
 - We will also be sending the link in our follow-up emails
- Please complete by Friday July 1st

Cleaning and Disinfecting Survey

In order to provide the best service CDPH has created this survey to gauge the cleaning and disinfecting practices at Chicago's Long Term Care Facilities. This is a one-time Redcap survey. CDPH will use this information to supplement site visits and phone discussions to better understand cleaning and disinfection practices within Chicago's LTCFs.

Instructions

- Fill out this section with regards to your facility and the person filling it out.
- CDPH highly recommends filling out this survey with the EVS manager.

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Demographics	
Name of facility <small>* must provide value</small>	<input type="text"/>
Address of Facility <small>* must provide value</small>	<input type="text"/>
First Name of Reporter <small>* must provide value</small>	<input type="text"/> <small>First name of person filling out survey</small>
Last Name of Reporter <small>* must provide value</small>	<input type="text"/> <small>Last name of person filling out survey</small>
Title/Position of Reporter <small>* must provide value</small>	<input type="text"/>
E-mail Address of Reporter	<input type="text"/>
Phone Number (Direct Line)	<input type="text"/>
How many resident floors are in your facility?	<input type="text"/>
Is there dedicated cleaning staff for each floor (i.e., do you have different environmental services staff on each floor)?	<input type="button" value="Yes"/> <input type="button" value="No"/> <small>reset</small>
How many housekeeping staff do you have for your facility (FTE)?	<input type="text"/>
What hours of the day do you have environmental services staff present (e.g., 7 a.m. - 7 p.m.)?	<input type="text"/>

New: EVS Survey

Resident Rooms

Area	Day Shift		Night Shift	
	Who cleans <i>If "other personnel" please specify</i>	Frequency of Cleaning	Who Cleans <i>If "other personnel" please specify</i>	Frequency
Patient Room	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bed rail/controls	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bedside cabinet and other furniture	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Blood Pressure Cuffs/Sphygmomanometer/Portable Blood Pressure Machine	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Call box/button and cords	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Computer monitor, mouse, keyboard, and cart (if present)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Dispensers for towels, soap, sanitizer, etc.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Door knob/handle and push plates (inside and out) to room	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Disinfectant Products

	Product Name	EPA Number	List N / List K / List P	Cleaner/Disinfectant	How is it mixed	Contact Time
For high touch surfaces in resident rooms	<input type="text"/>	<input type="text"/>	+ List N	Cleaner	Premixed	<input type="text"/>
			+ List K	Disinfectant	Dispenser	
			+ List P	Both <small>reset</small>	Hand mixed <small>reset</small>	
For high touch surfaces in contact precautions resident rooms	<input type="text"/>	<input type="text"/>	+ List N	Cleaner	Premixed	<input type="text"/>
			+ List K	Disinfectant	Dispenser	
			+ List P	Both <small>reset</small>	Hand mixed <small>reset</small>	



Questions & Answers

A special thanks to:

CDPH HAI SNF Team:

Dr. Stephanie Black
Shannon Xydis
Hira Adil
Liz Shane
Winter Viverette
Stephanie Villarreal
Kelly Walblay
Dan Galanto
Christy Zelinski
Marie Heppe
Nisreen Droubi
Leirah Jordan
Matthew Mondlock
Brittney Pitchford

**For additional resources and upcoming events,
please visit the CDPH LTCF HAN page at:**
<https://www.chicagohan.org/covid-19/LTCF>