



# **COVID-19 Chicago Long Term Care Roundtable**

09-02-2021



# Agenda

- COVID-19 Epidemiology
- COVID Reminders, Updates, and FAQs
- Hand Hygiene Compliance
- Questions & Answers

# Chicago Dashboard

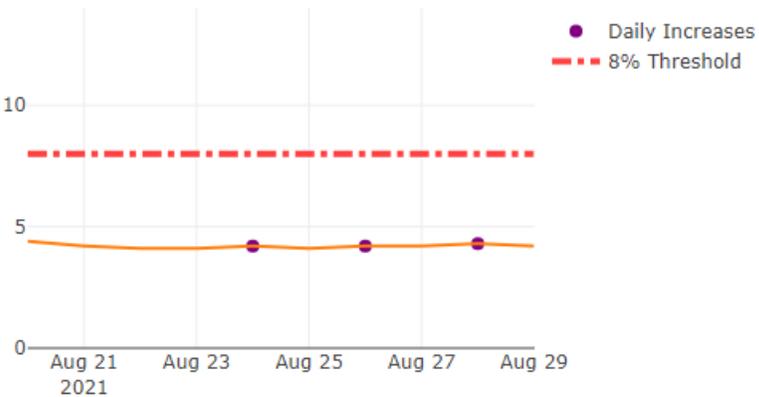




# IDPH Regional Resurgence Metrics: Region 11

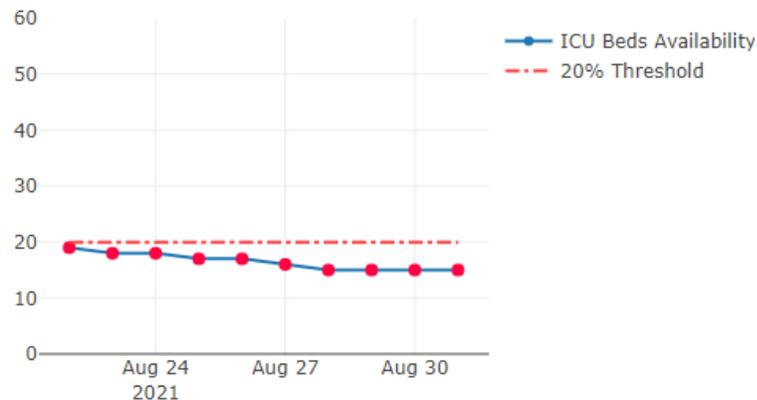
Test Positivity 7-Day Rolling Average

11 Consecutive Days under 8% threshold



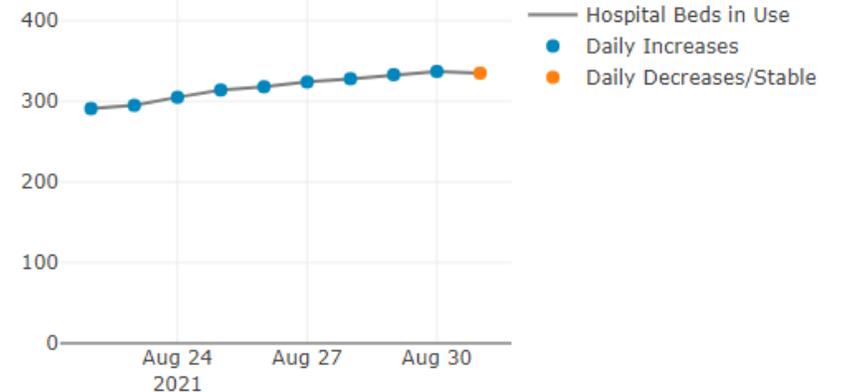
Hospital Bed Availability 7-Day Rolling Average

ICU Beds: 11 Consecutive Days Under 20% Threshold



COVID-19 Patients in the Hospital 7-Day Rolling Average

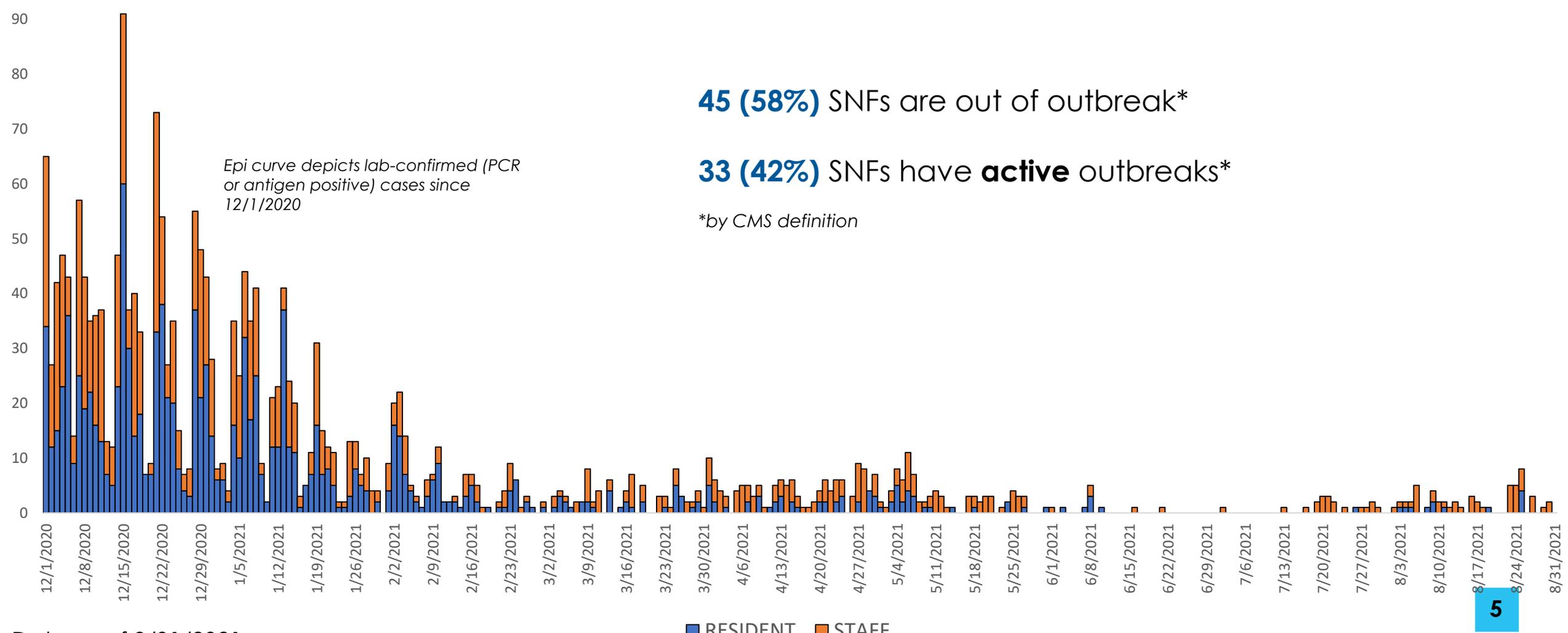
9 Days of COVID-19 Patient Increases





# Skilled Nursing Facility COVID-19 Cases

100



Epi curve depicts lab-confirmed (PCR or antigen positive) cases since 12/1/2020

45 (58%) SNFs are out of outbreak\*

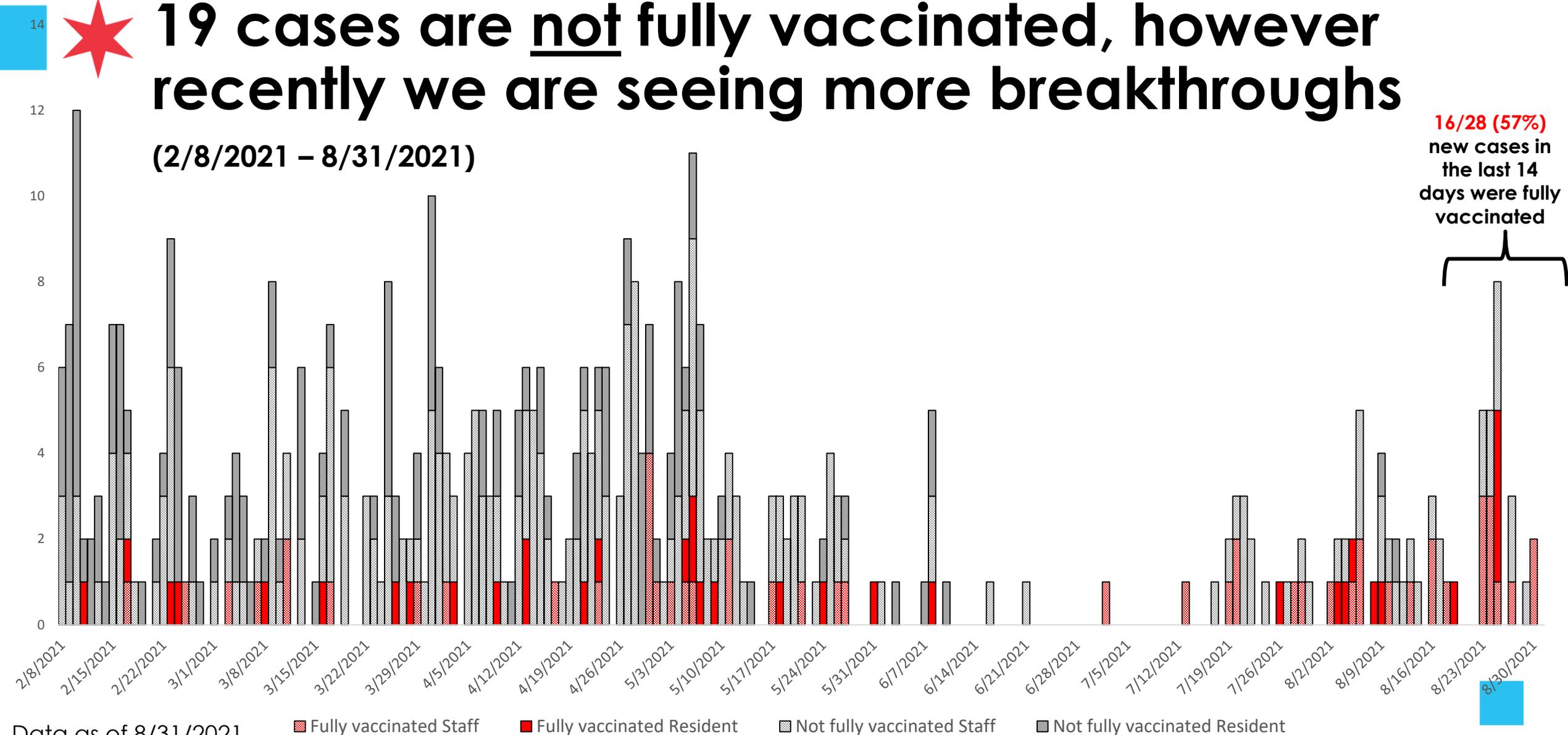
33 (42%) SNFs have **active** outbreaks\*

\*by CMS definition

RESIDENT STAFF

# The majority (82%) of SNF-associated COVID-19 cases are not fully vaccinated, however recently we are seeing more breakthroughs

(2/8/2021 – 8/31/2021)



Data as of 8/31/2021

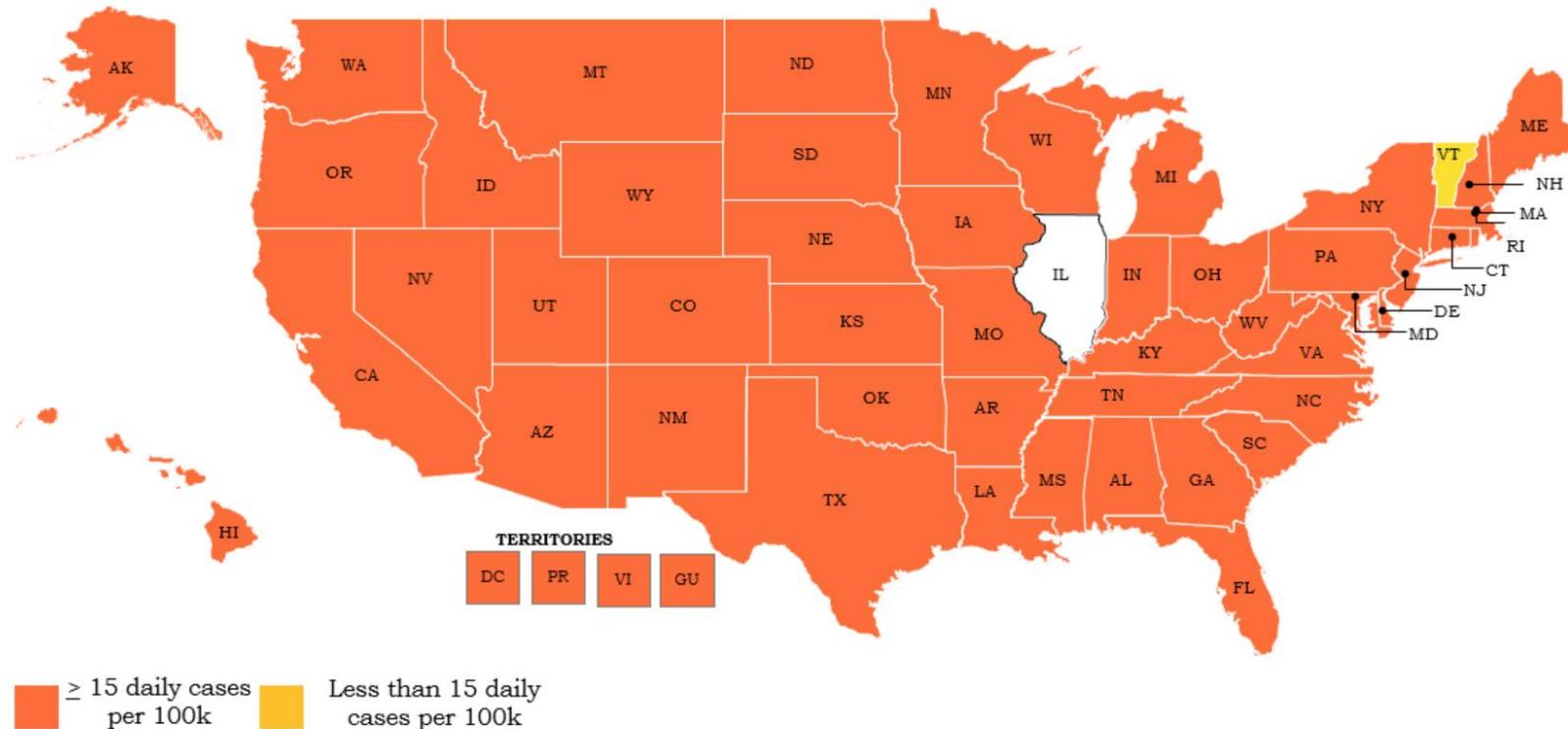
■ Fully vaccinated Staff   
 ■ Fully vaccinated Resident   
 ■ Not fully vaccinated Staff   
 ■ Not fully vaccinated Resident

# Chicago Travel Advisory

Updated 8/31/2021

Based on data as of 8/30/2021

States and Territories on the Advisory: Alabama, Alaska, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, Florida, Georgia, Hawaii, Idaho, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Virginia, Washington, West Virginia, Wisconsin, Wyoming, District of Columbia, Guam, Puerto Rico, and the Virgin Islands.



All other U.S. Territories are categorized as yellow

# Chicago Travel Advisory



**CDPH has updated its COVID-19 Travel Advisory guidance around travel to align with updated CDC recommendations.**

Review the Advisory recommendations below. Parents and guardians should check with their local school for specific policies.

**Before travel, unvaccinated individuals traveling to a high-risk ("orange") state should:**

- Get tested 1-3 days prior to departure.

**While traveling:**

- ALL individuals regardless of vaccination status should wear a mask on planes, buses, trains, and other forms of public transportation traveling into, within, or out of the United States and while indoors at U.S. transportation hubs such as airports and stations.
- In Chicago, wear a mask in all indoor public settings, regardless of vaccination status.
- Avoid crowds, try to stay at least 6 feet/2 meters (about 2 arm lengths) from anyone who is not traveling with you, and wash your hands often or use hand sanitizer (with at least 60% alcohol).

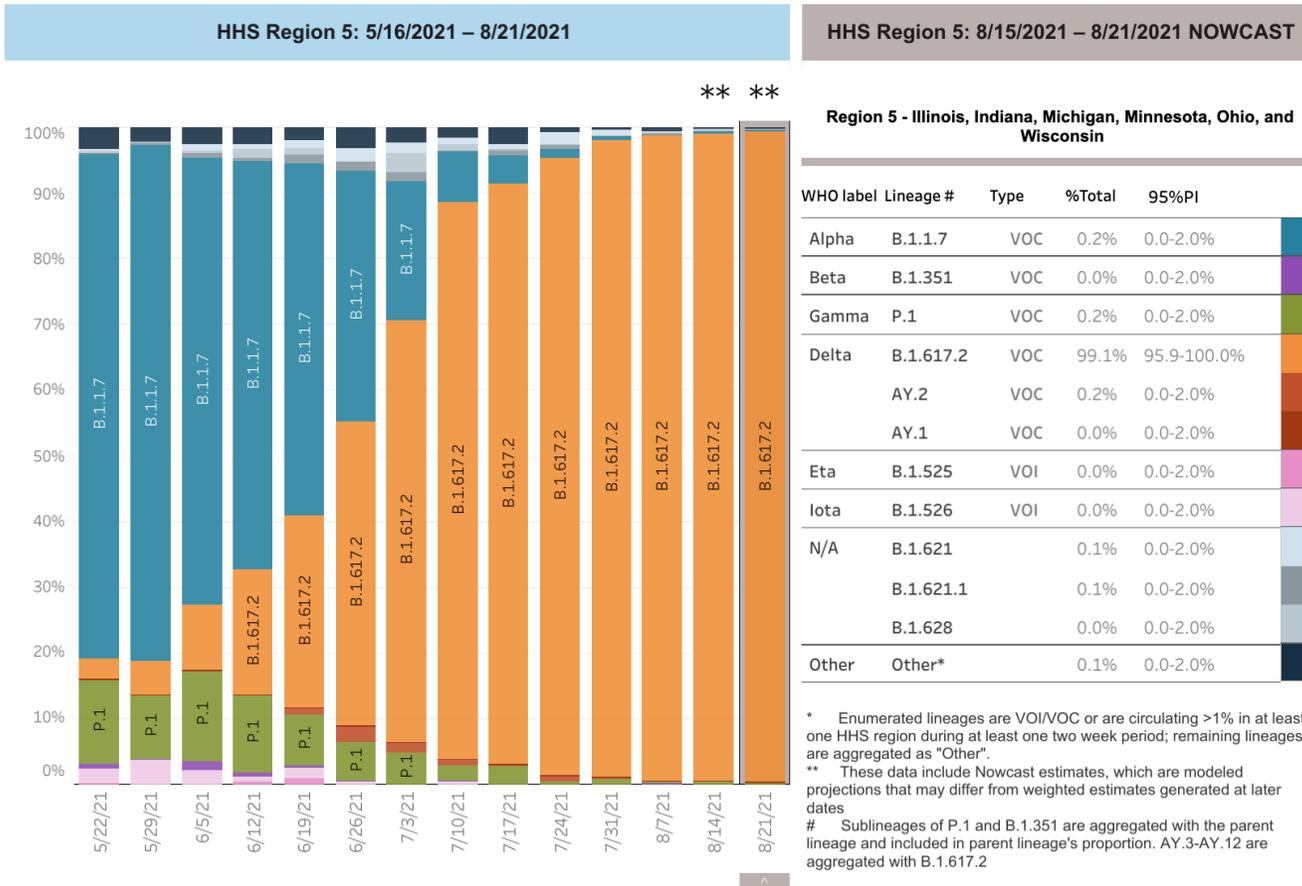
**After travel, unvaccinated individuals returning from a high-risk ("orange") state should:**

- Get tested with a viral test 3-5 days after travel **AND** stay home and self-quarantine for a full 7 days.
- Even if you test negative, stay home and self-quarantine for the full 7 days.
- If your test is positive, isolate yourself to protect others from getting infected.
- If you don't get tested, stay home and self-quarantine for 10 days after travel.
- Avoid being around people who are at increased risk for severe illness for 14 days, whether you get tested or not.

**All travelers are advised after travel to monitor themselves for COVID-19 symptoms and isolate and get tested if they develop symptoms.**



# COVID Variants of Concern in HHS Region 5 (includes Illinois)





# Update: Executive Order 2021-20

- Issued on August 26, 2021 by Governor Pritzker
- Requires masking in indoor public places
- Requires COVID-19 vaccinations for healthcare workers, school/higher education personnel, and personnel at state-owned or operated congregate facilities
- To read the full text, visit:  
<https://www.illinois.gov/government/executive-orders/executive-order.executive-order-number-20.2021.html>



August 26, 2021

Executive Order 2021-20

**EXECUTIVE ORDER 2021-20  
(COVID-19 EXECUTIVE ORDER NO. 87)**

**WHEREAS**, since early March 2020, Illinois has faced a pandemic that has caused extraordinary sickness and loss of life, infecting over 1,490,000, and taking the lives of more than 23,800 residents; and,

**WHEREAS**, at all times but especially during a public health crisis, protecting the health and safety of Illinoisans is among the most important functions of State government; and,

**WHEREAS**, the Illinois Department of Public Health (IDPH) has determined that the Delta variant is the most dominant strain of COVID-19 in Illinois and has spread quickly among unvaccinated people of all ages in Illinois; and,

**WHEREAS**, the Delta variant of the coronavirus is more aggressive and more transmissible than previously circulating strains, and poses significant new risks in the ongoing effort to stop and slow spread of the virus; and,

**WHEREAS**, the Delta variant also may cause more severe disease than prior strains of the virus; and,

**WHEREAS**, the Centers for Disease Control and Prevention (CDC) estimates that the Delta variant now accounts for more than 90 percent of all sequenced coronavirus cases in the U.S.; and,

**WHEREAS**, the CDC has issued guidance recommending wearing a mask indoors in public in most circumstances, even for fully vaccinated people,<sup>1</sup> as well as where required by federal, state, local, tribal, or territorial laws, rules, and regulations, including local business and workplace guidance; and,

**WHEREAS**, every region in the State is experiencing increased numbers of COVID-19 cases and increased numbers of hospital beds and ICU beds utilized by COVID-19 patients; and,

**WHEREAS**, there are parts of the country in which there are few if any available ICU beds as a result of the Delta variant, and in many parts of Illinois, the number of available ICU beds is decreasing as a result of the Delta variant; and,

**WHEREAS**, the CDC continues to advise that cloth face coverings or masks protect persons who are not fully vaccinated from COVID-19; and,

<sup>1</sup> Individuals are considered fully vaccinated 2 weeks after their second dose in a 2-dose series, such as the Pfizer or Moderna vaccines, or 2 weeks after a single-dose vaccine, such as Johnson & Johnson's Janssen vaccine. Individuals who do not meet these requirements, regardless of age, are not considered fully vaccinated.



# Executive Order: Healthcare Worker Definition (Subsection a)

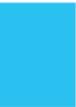
- Any person who:
  - (1) is employed by, volunteers for, or is contracted to provide services for a Health Care Facility, or is employed by an entity that is contracted to provide services to a Health Care Facility, **and**
  - (2) is in close contact (fewer than 6 feet) with other persons in the facility for more than 15 minutes at least once a week on a regular basis.

Does not include any person who is present at the facility for only a short period of time and whose moments of close physical proximity to others on site are fleeting (e.g., contractors making deliveries to a site where they remain physically distanced from others or briefly entering a site to pick up a shipment).



# Executive Order: Healthcare Facility Definition (Subsection a)

- Any institution, building, or agency, or portion of an institution, building or agency, whether public or private (for-profit or nonprofit), that is used, operated or designed to provide health services, medical treatment or nursing, or rehabilitative or preventive care to any person or persons.
- Includes:
  - Long-term care facilities (including skilled and intermediate long-term care facilities licensed under the Nursing Home Care Act, the ID/DD Community Care Act or the MC/DD Act)
  - Specialized Mental Health Rehabilitation Facilities
  - Assisted living facilities



# Executive Order: Vaccine Mandate (Subsection b)

- All Health Care Workers must have, at a minimum, the first dose of a two-dose COVID-19 vaccine series or a single-dose COVID-19 vaccine within 10 days after issuance of the Executive Order and be fully vaccinated against COVID-19 within 30 days following administration of their first dose in a two-dose vaccination series.



# Executive Order: Work Exclusion (Subsection c)

- Health Care Facilities shall exclude Health Care Workers who are not fully vaccinated against COVID-19 from the premises unless they comply with the testing requirements specified in Subsection d.



# Executive Order: Weekly Testing (Subsection d)

- Beginning 10 days after issuance of this Executive Order, to enter or work at or for a Health Care Facility, Health Care Workers (HCWs) who have not been fully vaccinated against COVID-19 must undergo testing for COVID-19, as described below, until they establish that they are fully vaccinated against COVID-19:
  - HCWs who are not fully vaccinated against COVID-19 must be tested for COVID-19 weekly, at a minimum
  - Testing for HCWs who are not fully vaccinated against COVID-19 must be conducted on-site or the Health Care Facility must obtain proof or confirmation from the HCW of a negative test result obtained elsewhere.
  - IDPH recommends that HCWs be tested using a PCR test if available.
- This weekly testing requirement is stricter than the existing CMS requirement for monthly testing of unvaccinated staff in facilities located in counties with <5% positivity. By complying with the Executive Order, you will be in compliance with CMS as well (as long as the positivity rate remains below 10% in Cook County).



# Executive Order: Exemptions (Subsection e)

- Exemptions are allowed if:
  - (1) vaccination is **medically contraindicated**, including any individual who is entitled to an accommodation under the Americans with Disabilities Act or any other law applicable to a disability-related reasonable accommodation, and/or
  - (2) vaccination would require the individual to violate or forgo a **sincerely held religious belief, practice, or observance**.



# Update: Federal Distribution of BinaxNOW

- Eligibility to receive BinaxNOW tests from the federal government is based on CLIA Certificate of Waiver designation and county positivity rates.
  - Facilities are automatically added or removed from the distribution list every two weeks.
- For questions about your CLIA waiver, please contact [DPH.CLIA@illinois.gov](mailto:DPH.CLIA@illinois.gov)
- If you are not eligible but need in need of testing supplies, please contact Chris at [Reynald.Albert@cityofchicago.org](mailto:Reynald.Albert@cityofchicago.org)
  - Testing supplies are not guaranteed

FACILITY TYPE	DESIGNATION CRITERIA	EPIDEMIOLOGY CRITERIA
Assisted Living Facility	CLIA application under <a href="#">04- Assisted Living Facility</a>  <b>Confirm “Facility Type” Designation <a href="#">here</a></b>	Yellow County: 5-10% positivity Red County: >10% positivity
Nursing Homes	Medicare-certified Skilled Nursing Facility (SNF) and/or Medicaid-certified Nursing Facility (NF)  <b>Confirm Designation <a href="#">here</a></b>	Yellow County: 5-10% positivity Red County: >10% positivity

# ★ Reminder: NHSN Reporting

## Reporting Cumulative Data: Week 1

- Week 1: 50 individuals in facility: 10 received 1<sup>st</sup> vaccine dose; 5 received 2<sup>nd</sup> vaccine dose

	Week 1	Week 2	Week 3
1. Number of individuals working in or receiving care at the facility for at least 1 day during the week of data collection	50		
2.1. Cumulative number of individuals in question #1 who received <u>only</u> dose 1 of <i>Pfizer-BioNTech</i> COVID-19 vaccine	10		
2.2. Cumulative number of individuals in question #1 who received dose 1 <u>and</u> dose 2 of <i>Pfizer-BioNTech</i> COVID-19 vaccine	5		



# ★ Reminder: NHSN Reporting

## Reporting Cumulative Data: Week 2

- Week 1: 50 individuals: 10 received 1<sup>st</sup> vaccine dose; 5 received 2<sup>nd</sup> vaccine dose
- Week 2: 5 more individuals received 1<sup>st</sup> dose

	Week 1	Week 2	Week 3
1. Number of individuals working in or receiving care at the facility for at least 1 day during the week of data collection	50	50	
2.1. Cumulative number of individuals in question #1 who received <u>only</u> dose 1 of <i>Pfizer-BioNTech</i> COVID-19 vaccine	10	(10+5) 15	
2.2. Cumulative number of individuals in question #1 who received dose 1 <u>and</u> dose 2 of <i>Pfizer-BioNTech</i> COVID-19 vaccine	5	5	



# ★ Reminder: NHSN Reporting

## Reporting Cumulative Data: Week 3 (cont.)

- Week 1: 50 individuals: 10 received 1<sup>st</sup> vaccine dose; 5 received 2<sup>nd</sup> vaccine dose
- Week 2: 5 more individuals received 1<sup>st</sup> dose
- Week 3: **3** more individuals received 1<sup>st</sup> dose; **10** individuals received 2<sup>nd</sup> dose

	Week 1	Week 2	Week 3
1. Number of individuals working in or receiving care at the facility for at least 1 day during the week of data collection	50	50	50
2.1. Cumulative number of individuals in question #1 who received <u>only</u> dose 1 of <i>Pfizer-BioNTech</i> COVID-19 vaccine	10	15	(15+3-10) 8
2.2. Cumulative number of individuals in question #1 who received dose 1 <u>and</u> dose 2 of <i>Pfizer-BioNTech</i> COVID-19 vaccine	5	5	(5+10) 15



43

# ★ Update: New NHSN Questions

- New questions on additional doses and booster shots:
  - Number of individuals who have received a complete COVID-19 vaccine series and who are eligible to receive an additional dose or booster
  - Number of these individuals who have received an additional vaccine dose since August 2021

Cumulative Vaccination Coverage	
1. *Number of residents staying in this facility for at least 1 day during the week of data collection	
2. *Cumulative number of residents in Question #1 who have received COVID-19 vaccine at this facility or elsewhere since December 2020:	
2.1. <u>Only dose 1</u> of <i>Pfizer-BioNTech</i> COVID-19 vaccine	
2.2. <b>Dose 1 and dose 2</b> of <i>Pfizer-BioNTech</i> COVID-19 vaccine	
2.3. <u>Only dose 1</u> of <i>Moderna</i> COVID-19 vaccine	
2.4. <b>Dose 1 and dose 2</b> of <i>Moderna</i> COVID-19 vaccine	
2.5. <b>Dose</b> of <i>Janssen</i> COVID-19 vaccine	
2.99. Complete COVID-19 vaccination series: unspecified manufacturer	
<b>Any completed COVID-19 vaccine series</b>	
3. <u>Cumulative number</u> of residents in Question #1 with other conditions:	
3.1 *Medical contraindication or exclusion to COVID-19 vaccine	
3.2. Offered but declined COVID-19 vaccine	
3.3. Unknown COVID-19 vaccination status	
4. *Cumulative number of residents in question #2 eligible to receive an additional dose or booster of COVID-19 vaccine	
5. *Cumulative number of residents in question #4 who have received an additional dose or booster of COVID-19 vaccine at this facility or elsewhere since *date*	
5.1. *Additional dose or booster of <i>Pfizer-BioNTech</i> COVID-19 vaccine	
5.2. * Additional dose or booster of <i>Moderna</i> COVID-19 vaccine	
5.3 * Additional dose or booster of <i>Janssen</i> COVID-19 vaccine	
5.4. Additional dose or booster of unspecified manufacturer	
* Any Additional dose or booster of COVID-19 vaccine series	

# Reminder: Resident Quarantine

- If an unvaccinated or partially vaccinated resident is a new admission, readmission, or is out of the facility overnight for any reason, they **must** quarantine for 14 days upon their return
- If a fully vaccinated resident is a new admission, readmission, or is out of the facility overnight for any reason, IDPH and CDPH **strongly recommend** that they quarantine for 14 days upon their return
- For trips outside of the facility lasting <24 hours, use the IDPH risk assessment tool to determine whether the resident should quarantine.
- Regardless of vaccination status, all residents **must** quarantine for 14 days following close contact with a positive case

# Update: Vaccine Booster Clinics

- SNFs currently connected with a COVID vaccine provider should work with that provider to set up booster clinics for residents and staff
- If your facility does not have a COVID vaccine provider, you can indicate that via NHSN
- CDPH is working to verify vaccine access for those facilities who have reported that they do not have a vaccine provider
- If CDPH determines that a SNF needs assistance with vaccine access, we will refer you to a CDC website for assistance (note that the website is still being developed)



# Reminder: New SNF Case Reporting Form

- <https://redcap.link/snfcasereport>

- Benefits:

- Streamlined reporting process
  - All required reporting to CDPH can be done using one form
  - No longer need to enter the same information in multiple locations
- Increased response timeliness by CDPH
  - The sooner we know about new cases, the faster we can connect with you to assist in your outbreak response

Chicago Department of Public Health

## SNF COVID-19 Case Report Form

Lab-confirmed cases of COVID-19 are reportable conditions to the Chicago Department of Public Health.

This form should only be used by **Chicago-based Skilled Nursing Facilities** to report COVID-19 cases.

If you are not affiliated with a Skilled Nursing Facility and would like to report a COVID-19 case, please report the case using the following link: <https://redcap.link/chicovidreport>

1) Date  M-D-Y

2) Facility Name  \* must provide value

3) Do you have any new cases to report this week?   \* must provide value

# ★ If you have no new cases to report

- Every Thursday, go to the survey link:
  - Date will be auto-populated
  - Select your facility name from the drop-down menu
  - Select “No” for “Do you have any new cases to report this week?”
  - Press “Submit”

Resize font: 



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If you are not affiliated with a Skilled Nursing Facility and would like to report a COVID-19 case, please report the case using the following link: <https://redcap.link/chicovidreport>

1) Date	<input type="text" value="08-18-2021"/> M-D-Y
2) Facility Name	<input type="text"/>
* must provide value	
3) Do you have any new cases to report this week?	<input type="button" value="Yes"/>
* must provide value	
	<input type="button" value="No"/>
	<input type="button" value="reset"/>
<input type="button" value="Submit"/>	

# ★ If you have a new case to report

- Report all new cases within 24 hours of receiving the positive result, including:
  - Cases that tested positive via your facility testing
  - Cases that tested positive at an outpatient clinic
  - Cases that tested positive at the hospital
- Select “Yes” on the screening form
  - You will automatically be taken to a new screen where you can enter additional information about the case
- Must fill out one record per new case (e.g., cannot report multiple cases at the same time)

Resize font:  | 



Chicago Department of Public Health

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1) Date	<input type="text" value="08-18-2021"/> M-D-Y
2) Facility Name	<input type="text"/>
* must provide value	
3) Do you have any new cases to report this week?	<input type="button" value="Yes"/>
* must provide value	
	<input type="button" value="No"/>
	<input type="button" value="reset"/>
<input type="button" value="Submit"/>	

# ★ If you have a new case to report

- Sections on the form include:
  - Reporter information
  - Case information
  - Clinical information
  - Laboratory information
  - Vaccine history
- Additional questions may pop-up depending on your answers to previous questions (e.g., a list of symptoms will appear if you indicate that the case was symptomatic)

### Laboratory Information

**Where was the case tested?**  
\* must provide value

reset

**What type of test was conducted?**  
\* must provide value

reset

Choose the test type that provided a positive result

**Name of laboratory that conducted testing:**  
\* must provide value

**Specimen Source:**  
\* must provide value

**Specimen Collection Date**

M-D-Y



# FAQ: The booster clinic(s) will occur around the same time we usually start giving flu shots. Do we need to space out the two vaccines by >14 days?

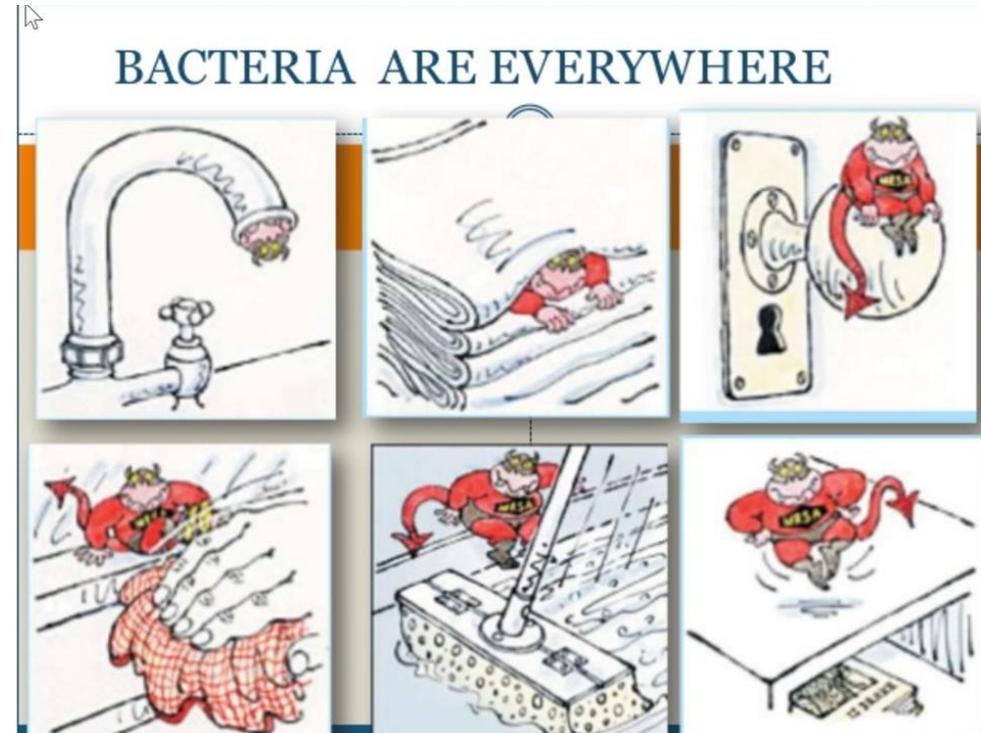
- CDC has updated their guidance to say that a COVID vaccine and any other vaccine can be given without regards to timing
- Therefore, **you can give a COVID vaccine on the same day as an influenza vaccine**
- Best practices for multiple injections:
  - Label each syringe
  - Separate injection sites by 1 inch or more, if possible
  - Administer the COVID-19 vaccines and vaccines that may be more likely to cause a local reaction in different limbs, if possible



# Hand Hygiene Compliance



# ★ Dirty hands spread germs



# ★ Methods for Hand Hygiene

Soap and Water	Alcohol-Based Hand Sanitizer
visibly dirty/soiled, before eating, and after using the restroom.	Most effective product for reducing the number of germs on the hands of healthcare providers.
After caring for a person with known or suspected infectious diarrhea	Immediately before and after touching a patient or patient's environment
After known or suspected exposure to spores (e.g. B. anthracis, C difficile outbreaks)	Before performing an aseptic task (e.g., placing an indwelling device) or handling invasive medical devices
	Before moving from work on a soiled body site to a clean body site on the same patient
	Immediately after glove removal

# Approaches to Model Hand hygiene Compliance

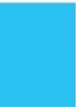
- Education
- Monitoring
- Feedback



# ★ Education

- Importance of Hand hygiene
- 5 Moments of Hand Hygiene
- Why is ABHR preferred over Soap and water?
- Gloves are NOT a substitute for hand hygiene.
- Train all healthcare personnel on hand hygiene at hire, when job functions change and at least annually





# Monitoring Compliance

- Place alcohol-based hand rubs at entrance to patient room, or at bedside  
Provide HCWs with pocket-sized containers
- Monitor Healthcare workers (HCWs) adherence with recommended hand hygiene practices and give feedback
- Facilities should monitor hand hygiene performance (various shifts, various units)
- Record at a minimum of 30 observations per unit each month
- Resources:  
<https://www.cdc.gov/handhygiene/providers/guideline.html>





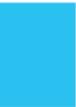
# Secret shoppers

- Teams of **unidentified** employees will monitor colleagues' hand hygiene each time they enter or exit a patient's room
- Staff members like EVS team, dietary aides, social services that can help to collect these observations
- Important components:
  - ✓ Training and standardized tools are necessary
  - ✓ Inter-relator reliability
  - ✓ Mobile handheld device for data collection









# Feedback

- Set targets for improvement
  - ✓ Be realistic.
  - ✓ Will be influenced by baseline data – Align with rewards and recognition
- How often will hand hygiene adherence data be shared?
- How will it be displayed?
  - ✓ Website, quality boards, emails etc.
- Who needs to see the data?
  - ✓ Hospital leadership
  - ✓ Unit leadership
  - ✓ Individual healthcare personnel – Patients





# Questions & Answers

A special thanks to:

Dr. Hira Adil  
Dr. Stephanie Black  
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Marie Heppe  
Liz Shane  
Dr. Richard Teran  
Winter Viverette  
Kelly Walblay  
Shannon Xydis  
Shane Zelencik  
Christy Zelinski

For additional resources and upcoming events,  
please visit the CDPH LTCF HAN page at:

<https://www.chicagohan.org/covid-19/LTCF>

The screenshot displays two sections of the CDPH LTCF HAN page. The top section is titled 'Upcoming' and features three event cards. The first card is for 'Sexually Transmitted Diseases...' (MATEC Webinar) on 08/04/2021 from 8:00 - 9:00 AM CST, with a 'SIGN UP >' button. The second card is for 'COVID-19 Chicago Long-Term Car...' (CDPH Webinar) on 08/05/2021 from 12:30 - 1:30 PM CST, with a 'JOIN >' button. The third card is for 'IDPH COVID-19 LTC Q & A Webina...' (IDPH Webinar) on 08/06/2021 from 1:00 - 2:00 PM CST, with a 'SIGN UP >' button. The bottom section is titled 'Past' and features three event cards. The first card is for 'IDPH COVID-19 LTC Q & A Webina...' (IDPH Webinar) on 07/30/2021, with a 'SLIDES' button. The second card is for 'IDPH COVID-19 LTC Q & A Webina...' (IDPH Webinar) on 07/23/2021, with a 'SLIDES' button. The third card is for 'COVID-19 Chicago Long Term Car...' (COVID-19 LTCR) on 07/22/2021, with a 'SLIDES' button.