

COVID-19 Chicago Long Term Care Roundtable

09-16-2021



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

🖈 Chicago Dashboard

COVID Dashboard



Source: https://www.chicago.gov/city/en/sites/covid-19/home/covid-dashboard.html

IDPH Regional Resurgence Metrics: Region 11



Chicago Travel Advisory



Source: https://www.chicago.gov/city/en/sites/covid-19/home/emergency-travel-order.html

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



HHS Region 5: 9/5/2021 - 9/11/2021 NOWCAST

	Region 5 -	Illinois, India	ana, Michig Wisconsi		esota, Ohio, and
	WHO label	Lineage #	Туре	%Total	95%PI
	Alpha	B.1.1.7	VOC	0.0%	0.0-2.0%
	Beta	B.1.351	VOC	0.0%	0.0-2.0%
	Gamma	P.1	VOC	0.0%	0.0-2.0%
	Delta	B.1.617.2	VOC	99.7%	98.0-100.0%
		AY.2	VOC	0.0%	0.0-2.0%
1.617.2		AY.1	VOC	0.0%	0.0-2.0%
B.1.6	Eta	B.1.525	VOI	0.0%	0.0-2.0%
	lota	B.1.526	VOI	0.0%	0.0-2.0%
	Карра	B.1.617.1	VOI	0.0%	0.0-2.0%
	Mu	B.1.621		0.0%	0.0-2.0%
	N/A	B.1.617.3	VOI	0.0%	0.0-2.0%
	Other	Other*		0.2%	0.0-2.0%

* Enumerated lineages are VOI/VOC or are circulating >1% in at least one HHS region during at least one two week period; remaining lineages are aggregated as "Other".

** These data include Nowcast estimates, which are modeled projections that may differ from weighted estimates generated at later dates

Sublineages of P.1, B.1.351 and B.1.621 are aggregated with the parent lineage and included in parent lineage's proportion. Q.1-Q.8 are aggregated with B.1.1.7. AY.3-AY.25 are aggregated with B.1.617.2.

Collection date, week ending

SNF COVID-19 Cases by Role & Vaccination Status

21/30 (70%) of cases with specimen collection dates in the past 14 days were breakthrough infections.

COVID-19 Epi Curve by Role & Vaccination Status Among Skilled Nursing Facilities

Reinfections count as new cases



Data Sources: INEDSS (Illinois state) and REDCap (facility self report)

A fully vaccinated case occurs when the positive test specimen was collected at least two weeks after the individual completed their COVID vaccination

COVID Reinfections are not shown until Sept 1, 02021

Update: Executive Order 2021-22

- Extended deadline for implementation:
 - Staff must receive their first dose of vaccine by September 19th and their second dose within 30 days after the first dose
 - Staff who are unvaccinated must be tested at least weekly
 - Staff who are not fully vaccinated and do not have a negative test result within the past 7 days must be excluded from work
- IDPH released a FAQ document on September 7th via SIREN

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September 3, 2021	Executive Order 2021-22
EXECUTIVE ORDER 2021-2. (COVID-19 EXECUTIVE ORDER N	
WHEREAS, since early March 2020, Illinois has faced a pandemi sickness and loss of life, infecting over 1,538,300, and taking t residents; and,	
WHEREAS, at all times but especially during a public health cr safety of Illinoisans is among the most important functions of State	
WHEREAS, the Illinois Department of Public Health (IDPH) variant is the most dominant strain of COVID-19 in Illinois as unvaccinated people of all ages in Illinois; and,	
WHEREAS, the Delta variant is more aggressive and more circulating strains, and poses significant new risks in the ongoing e the virus; and,	
WHEREAS, the Delta variant also may cause more severe disease and,	e than prior strains of the virus;
WHEREAS, the Centers for Disease Control and Prevention (C variant now accounts for more than 90 percent of all sequenced core	
WHEREAS, the CDC has issued guidance recommending wearin most circumstances, even for fully vaccinated people, ⁴ as well as w local, tribal, or territorial laws, rules, and regulations, including guidance; and,	where required by federal, state,
WHEREAS, every region in the State is experiencing increased nu increased numbers of hospital beds and ICU beds utilized by COVI	

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 has been decreasing in recent weeks as a result of the Delta variant; and,

Executive Order 2021-22 FAQs

Can health care workers, school personnel, higher education personnel, and higher education students choose to be tested rather than be vaccinated, even if they do not meet the requirements for a medical or religious exemption?

• Yes. Individuals covered by the requirement to be vaccinated can choose to be tested on a weekly basis, rather than be vaccinated, regardless of the reason that they choose not to be vaccinated. However, an employer may choose to impose stronger health and safety requirements beyond the requirements of the Executive Order, such as permitting exceptions and weekly testing only for individuals with a medical or religious exemption.

Executive Order 2021-22 FAQs

Are employers required to pay for testing for employees who are not vaccinated?

- The Executive Order does not require employers to pay for testing if an employee is not fully vaccinated. However, we encourage all employers to consider making it as easy as possible for employees to get vaccinated and tested for the safety of all workers.
- Pursuant to a federal Executive Order and guidance from CMS, Department of Labor, and Department of Treasury, health plans must provide coverage for COVID-19 diagnostic tests for individuals who are asymptomatic and who have no known or suspected exposure to COVID-19. Such testing must be covered without cost sharing, prior authorization, or other medical management requirements. More information is available here: http://dph.illinois.gov/testing.

VUpdate: Federal Vaccination Regulation

- Expanded forthcoming emergency regulations to include additional healthcare settings (e.g., home health agencies)
- CMS will issue an Interim Final Rule (with comment period) in October with more specifics

Press release

Biden-Harris Administration to Expand Vaccination Requirements for Health Care Settings

Sep 09, 2021 | Policy

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The Biden-Harris Administration will require COVID-19 vaccination of staff within all Medicare and Medicaid-certified <u>facilities</u> to protect both them and patients from the virus and its more contagious Delta variant. Facilities across the country should make efforts now to get health care staff vaccinated to make sure they are in compliance when the rule takes effect.

The Centers for Medicare & Medicaid Services (CMS), in collaboration with the Centers for Disease Control and Prevention (CDC), announced today that emergency regulations requiring vaccinations for <u>nursing home</u> workers will be expanded to include hospitals, dialysis facilities, ambulatory surgical settings, and home health agencies, among others, as a condition for participating in the Medicare and Medicaid programs. The decision was based on the continued and growing spread of the virus in health care settings, especially in parts of the U.S. with higher incidence of COVID-19.

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, Illinois

State Health Department

7-day Metrics | 7-day Percent Change

Community Transmission

🛑 High

Everyone in **Cook County, Illinois** should wear a mask in public, indoor settings. Mask requirements might vary from place to place. Make sure you follow local laws, rules, regulations or guidance.

How is community transmission calculated?

	September 10, 2021
Cases	6,988
% Positivity	3.85%
Deaths	54
% Eligible Population Fully Vaccinated	63.2%
New Hospital Admissions	561



Current 7-days is Fri Sep 03 2021 - Thu Sep 09 2021 for case rate and Wed Sep 01 2021 - Tue Sep 07 2021 for percent positivity. The percent change in counties at each level of transmission is the absolute change compared to the previous 7-day period.

Update: CMS Routine Testing Frequency Requirements for Unvaccinated/Partially Vaccinated Staff

Level of COVID-19 Community	Minimum Testing Frequency of
Transmission	Unvaccinated Staff ⁺
Low (blue)	Not recommended
Moderate (yellow)	Once a week*
Substantial (orange)	<i>Twice</i> a week*
High (red)	Twice a week*

⁺Vaccinated staff do not need *to* be routinely tested.

*This frequency presumes availability of Point of Care testing on-site at the nursing home or where off-site testing turnaround time is <48 hours.

Update: CMS Routine Testing Frequency Requirements for Unvaccinated/Partially Vaccinated Staff

- The facility should test all unvaccinated staff at the frequency prescribed in based on the *level of community transmission* reported in the past week.
 - If the level of community transmission increases to a higher level of activity, the facility should begin testing staff at the frequency shown in the table <u>as</u> <u>soon as</u> the criteria for the higher activity *level* are met.
 - If the level of community transmission decreases to a lower level of activity, the facility should continue testing staff at the higher frequency level until the level of community transmission has remained at the lower activity level for at least two weeks before reducing testing frequency.

Updated CDC Guidance for Nursing Homes

- Updated guidance issued on September 10th
- Includes updates to quarantine, testing, outbreak response, and visitation guidance
- IDPH is working on modifying their guidance accordingly, so stay tuned!
- For more information, visit: https://www.cdc.gov/coron avirus/2019-ncov/hcp/longterm-care.html

Interim Infection Prevention and Control Recommendations to Prevent SARS-CoV-2 Spread in Nursing Homes

Nursing Homes & Long-Term Care Facilities

Updated Sept. 10, 2021 Print

Summary of Recent Changes

Updates as of September 10, 2021

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- Updated outbreak response guidance to promote use of contact tracing approach. Alternative broad-based approaches to outbreak response at a facility-wide or unit level are also described.
- Updated expanded screening testing recommendations for healthcare personnel (HCP).
- Updated recommendations for quarantine of fully vaccinated residents.
- Updated visitation guidance.

Update: Upcoming FDA Meeting re: Boosters

ADVISORY COMMITTEE MEETING

Vaccines and Related Biological Products Advisory Committee September 17, 2021 Meeting Announcement

SEPTEMBER 17, 2021

Scheduled

Agenda

The meeting presentations will be heard, viewed, captioned, and recorded through an online teleconferencing platform. The committee will meet in open session to discuss the Pfizer-BioNTech supplemental Biologics License Application for COMIRNATY for administration of a third dose, or "booster" dose, of the COVID-19 vaccine, in individuals 16 years of age and older.

Source: https://www.fda.gov/advisory-committees/advisory-committee-calendar/vaccines-and-related-biological-products-advisory-committee-september-17-2021-meeting-announcement#event-information

Reminder: 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 <u>does not</u> 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: Post-vaccination Signs and Symptoms in Staff

- HCP with postvaccination signs and symptoms could be mistakenly considered infectious and restricted from work unnecessarily.
- If a staff member has a cough, shortness of breath, runny nose, sore throat, and/or loss of taste or smell, the staff member should be tested and <u>excluded</u> from work, as those symptoms are common with COVID but not typical reactions to the vaccine.
- If a staff member does not have any of the above signs/symptoms but has fatigue, headache, muscle pain, joint pain, and/or chills within the three days after vaccination, they can continue to work as long as they feel well enough to do so and do not have a fever
 - If symptoms worsen or persist for more than 2 days, test and exclude from work.

Reminder: Post-vaccination Signs and Symptoms in Staff

- HCP with **fever** should be <u>excluded from work</u> pending further evaluation, including testing.
 - If an infectious etiology is not suspected or confirmed as the source of their fever, they may return to work when they feel well enough.
 - HCP should be re-evaluated and tested if fever does not resolve within 2 days.

Reminder: Post-vaccination Signs and Symptoms in Residents

- If a resident has a cough, shortness of breath, runny nose, sore throat, and/or loss of taste or smell, they should be <u>isolated in a</u> private room in the orange/PUI zone and tested for COVID.
- If a resident has other signs/symptoms (e.g., fever, headache), they should be restricted to their room, tested for COVID, and closely monitored.
 - If symptoms resolve within two days and the resident has been afebrile for 24 hours, precautions can be lifted. Until that point, staff should wear full PPE while caring for the resident.

Questions & Answers

A special thanks to:

Dr. Hira Adil Dr. Stephanie Black John Ehlers Dan Galanto 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

Sexually Transmitted Diseases MATEC Webinar	COVID-19 Chicago Long-Term Car	IDPH COVID-19 LTC Q & A Webina
₩ 08/04/2021	₩ 08/05/2021	₩ 08/06/2021
D 8:00 - 9:00 AM CST	⊙ 12:30 - 1:30 PM CST	◎ 1:00 - 2:00 PM CST
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