

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

December 10th, 2021

Housekeeping

- All attendees in listen-only mode
- Submit questions via Q&A pod to All Panelists

Slides and recording will be made available later



Agenda

- Upcoming Webinars
- Midwest Coordination Center (MCC) COVID Testing
- Reporting Reminders
- LTC Guidance Review
- Monoclonal Antibody Therapy
- Open Q & A



IDPH webinars

Upcoming Friday Brief Updates and Open Q&A 1:00 pm - 2:00 pm

Friday, December 17 th	https://illinois.webex.com/illinois/onstage/g.php?TID=e0e7bd4e82ebe4d5aea 70d4c144d734b9
Friday, January 7 th	https://illinois.webex.com/illinois/onstage/g.php?MTID=ef127454ceb88fc821a 4628d7bf94f36c
Friday, January 21st	https://illinois.webex.com/illinois/onstage/g.php?MTID=e186e9ec449223208b 4036456b181fd39
Friday, January 28th	https://illinois.webex.com/illinois/onstage/g.php?MTID=e7219111798c190cbe c52c8eae6c4836c

Previously recorded webinars can be viewed on the IDPH Portal



Telligen is Hosting Open Office Hours for NHSN Reporting

Join Telligen's Kristen Ives, NHSN subject matter expert, as she demonstrates:

- How to upgrade to Level 3 access, which is required beginning April 2022
- Review the annual survey and monthly reporting plans
- Q & A

Wednesday, Dec. 15	Wednesday, Jan. 5	Wednesday, Jan. 12
11 a.m 12 p.m. (CST)	12 p.m 1 p.m. (CST)	2 p.m 3 p.m. (CST)
<u>Register</u>	<u>Register</u>	<u>Register</u>

Contact <u>Kives@telligen.com</u> for questions

This material was prepared by Telligen, the Quality Innovation Network-Quality Improvement Organization, under contract with the Centers for Medicare & Medicaid Services (CNS), an agency of the U.S. Department of Health and Human Services (HHS). Views expressed in this material do not necessarily reflect the official views or policy of CMS or HHS, and any reference to a specific product or entity herein does not constitute endorsement of that product or entity by CMS or HHS. This material is for informational purposes only and does not constitute medical advice; it is not intended to be a substitute for professional medical advice, diagnosis or treatment. (12SOW-IL-GOAL5-12-10-21-4291)



U.S. Health and Human Services COVID-19 Testing Program

Information Packet

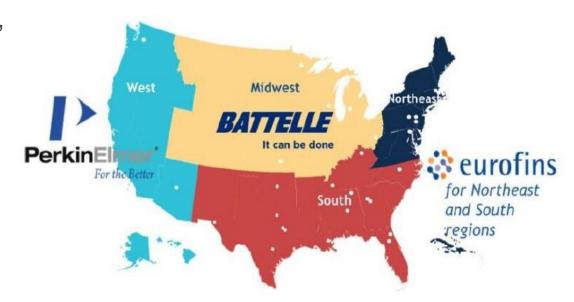


CONTENT

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- Setting Up
- 3 Testing
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- 5 Customer Support
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Program Purpose and Overview

- U.S. Department of Health and Human Services (HHS) is funding four regional coordination centers providing COVID-19 testing access to help schools and congregate settings safely reopen, remain open, and reach underserved populations
- All supplies, shipping, and testing are free
- Midwest Coordination Center (MCC) provides COVID-19 testing in 16 states
- Sites are registered and paired with certified partner laboratories that provide standard swab and saliva RT-PCR testing authorized under FDA Emergency Use Authorization
- Serial screening tests of individuals who have no symptoms help to quickly identify potentially contagious cases and prevent further transmission or future outbreaks





Eligible Sites

Schools

- Public Schools K 12
- Private Schools K 12
- Historically Black Colleges and Universities

Shelters

- Homeless
- Domestic violence
- Faith-based
- Youth
- Family

Youth-serving organizations

- YMCA (some will also have shelters)
- Boys and Girls Clubs
- Boy and Girl Scouts
- 4-H
- FFA

Correctional facilities

- Jails usually locally operated in counties and/or cities
- Federally operated prisons
- Privately operated prisons
- State operated prisons

Childcare centers

- Private/independent
- Home-based licensed through states
- Federally funded (Head Start)
- Pre-K programs

Other types

Nursing homes



How it Works

COORDINATION CENTER



- Registers facilities
- Pairs facilities with partner testing labs
- Provides training and customer support on program participation
- Coordinates distribution of sample collection and shipping supplies
- Coordinates reporting of results to individuals, schools, and facilities

SCHOOLS AND CONGREGATE SETTINGS



- Develops local testing plan
- Obtains testing consent documents and authorizations to release test results (with help of Coordination Center Guardian/Participant portal, if desired)
- Coordinates sample collection and sends samples for testing
- Acts based on screening and individual results

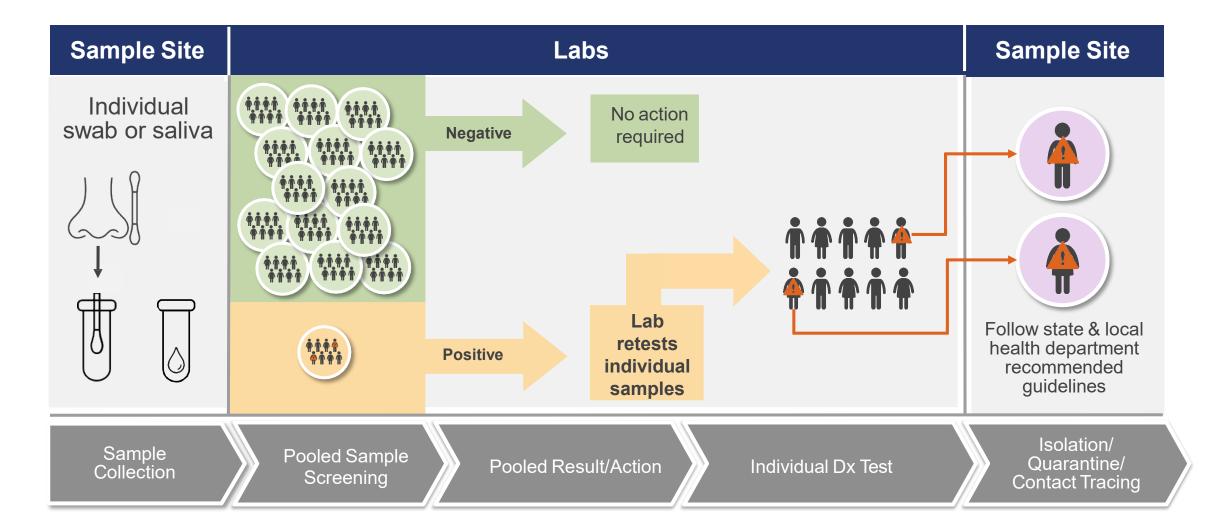
PARTNER TESTING LABS



- Provides sample collection supplies
- Receives and tests samples
- Reports results to Midwest Coordination Center and public health authorities



Testing Overview







Setting Up

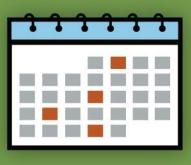
Testing Plan

Schools or congregate facilities will develop a Testing Plan



A Testing Plan includes:

Testing Schedule & Frequency



Targeted Testing Population



Process for Collecting Samples



Process for Shipping Samples



Follow-up Actions
Based on Results



Administrative Set-up in Preparation for Testing

1

Communicate testing plan clearly to parents, guardians, or residents

• The Midwest Coordination Center (MCC) has example text to assist with communications

2

Obtain individual consent documents for testing and authorization to release results

- Electronic signature on the MCC website
- Physical signature on paper form provided and then uploaded to the MCC website

3

Upload student/resident names, dates of birth, and other information into the secure Midwest Coordination Center website

- Individual upload
- Mass upload using provided template on the MCC website

Administrative Set-up in Preparation for Testing

4

Order Specimen Collection Tests and Shipping Supplies

- Use the MCC to place orders for specimen collection and shipping materials at least 5 to 7 business days before they are needed
- Lab tests for must be ordered by appropriately authorized healthcare providers, with a copy of the order entered on the Midwest CC website
- MCC will provide barcode scanners to track collected samples
- Supplies and shipping are free of charge

5

Establish Shipping Method and Courier Pick-up Arrangements

- Diagnostic lab will provide instructions on shipping/courier arrangements
- MCC will assist with coordinating pick-up arrangements



Testing

Sample Collection

- Samples are self-collected under supervision using either anterior nasal swabs or saliva collection tubes.
- Follow the instructions and training provided on the MCC website by your partner laboratory for sample collection.



Arrange pick-up of specimens no later than 2 pm local time on the day of collection.





Results

Getting Results



Test results will be available on the MCC website testedandprotected.org

Who can Access the Site?

- Sample site designees can view health results for their site.
- Participants or registered parents/guardians can view their individual test results.

The MCC and partner labs will follow state and federal public health law in reporting results.

 The school/congregate facility will <u>not</u> need to report results from testing. Results will be automatically reported by the MCC program.

Protecting Personal Health Information

It is essential to protect Personal Health Information by:

- A
- Limiting access to only those persons who absolutely need to know it. The MCC will obtain a person's (or parent's/guardian's) consent to share test results with physicians, school nurses, or others who "NEED TO KNOW."
- В
- Limiting the amount of information to the "Minimum Necessary Standard" only using or sharing the minimal amount of information needed.

This is important for two primary reasons:

- It's the right thing to do. It is important to protect everyone's right to privacy.
- There are federal, state and tribal laws to protect personal health information; misuse of such information can lead to criminal and civil penalties for organizations and individuals.

For questions about privacy protections, contact the MCC for assistance.



Customer Support for Facilities

Resources

COMMUNICATION TOOLKIT



- Email templates to assist with communications
- Informative flyers to share general information with other organizations and parents/guardians

TRAINING



- Webinars
- Demonstration video for how to use the MCC portal
- Sample collection guidance from partner lab

TEST RESOURCES



- Testing plan considerations (informative flyer)
- Lab collection instructions
- Lab shipping instructions
- Consent and authorization forms



Ways to Find Support



support@ testedandprotected.org



Call us at 833.754.2176



Visit the MCC Website at: https://testedandprotected.org/





FAQs

FAQs – General Testing

What types of tests will be performed?

• We provide screening that uses polymerase chain reaction (PCR) testing to participating sites. These tests will be either nasal swabs or saliva sampling, depending on which lab a site is paired with.

How much does it cost to test?

 Testing under this program is free – the kits, shipping and lab testing are paid for by the U.S. Department of Health and Human Services.

How quickly will we get the results?

• Test results will be available within 24 - 48 hours from the time the samples are shipped to the lab.

Who can supervise sample collection?

The samples for this program are all self-collected. Your assigned partner lab provides
training materials with information on how to obtain samples and staff at your facility follow these
procedures to oversee sample collection. Sites will be responsible for ensuring that the individuals who
oversee sample collection are appropriately trained.

Reminder: Weekly LTC reporting requirements for aggregate testing and vaccination data

- Emergency rules issued 11/5/21 requiring reporting,
 - https://www.ilsos.gov/departments/index/register/volume45/register-volume45 issue 47.pd
- "Facilities that are not required to report COVID-19 aggregate vaccination and testing data into the National Healthcare Safety Network (NHSN) shall report this data to the Department weekly utilizing the online form available at https://app.smartsheet.com/b/form/fa2d7abfb102490b9d2622a2ba490744."
- Remember this is weekly reporting.

Which facilities are required to report?

TITLE 77: PUBLIC HEALTH CHAPTER I: DEPARTMENT OF PUBLIC HEALTH SUBCHAPTER c: LONG-TERM CARE FACILITIES

- PART 295 ASSISTED LIVING AND SHARED HOUSING ESTABLISHMENT CODE
- PART 300 SKILLED NURSING AND INTERMEDIATE CARE FACILITIES CODE
- PART 330 SHELTERED CARE FACILITIES CODE
- PART 340 ILLINOIS VETERANS' HOMES CODE
- PART 350 INTERMEDIATE CARE FOR THE DEVELOPMENTALLY DISABLED FACILITIES CODE
- PART 370 COMMUNITY LIVING FACILITIES CODE
- PART 380 SPECIALIZED MENTAL HEALTH REHABILITATION FACILITIES CODE
- PART 390 MEDICALLY COMPLEX FOR THE DEVELOPMENTALLY DISABLED FACILITIES CODE

Ensure License Number is entered

correctly!



LTC COVID-19 Vaccination and Testing Reporting

The Illinois Department of Public Health is requiring all licensed long-term care facilities that are not required to report COVID-19 vaccination and testing aggregate data into the National Healthcare Safety Network (NHSN) to report this data to the department weekly utilizing this form.

your facility name is not listed or the the the dropdown menu.
· •

NHSN VACCINE MODULE – BOOSTER/ADDITIONAL DOSE

 During the reporting week ending 12/5, 88 facilities indicated that 0 residents had received an additional/booster dose.

• Question 5 of the Resident COVID-19 Vaccination Summary in NHSN asks for the "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 August 2021."

 More information here: https://www.cdc.gov/nhsn/forms/instr/57.218-toi-508.pdf

Long-term Care Updates

Clarification on IDPH LTC Guidance from Dec. 3rd

What is said:

Communal Dining and Group activities – Updated

Communal Dining

- Residents must wear a mask to and from dining hall or activity room.
- Consistent with Illinois Executive Order 2020-21 (<u>COVID-19 EXECUTIVE ORDER NO. 87</u>),
 residents, regardless of vaccination status or community transmission levels, should wear
 source control in public areas of the facility when not actively eating or drinking and
 consistently maintain 6 feet distance from other residents and HCP.

Not all residents!!!

What it should have said:

- All residents should wear source control in public areas of the facility when not actively eating or drinking.
- *Unvaccinated residents* should consistently maintain 6 feet distance from other residents and HCP.
- *Vaccinated residents* may sit together without physically distancing from each other, but should maintain 6 feet distance from unvaccinated residents.
- With the caveat that residents at increased risk for severe disease should still consider continuing to practice physical distancing and use of source control.

Visitation and Roommates

The safest practice is to only have one resident and one family in the rooms at a time (because the rooms are so small)---however, if both families come at the same time and both choose to have visits in the room....do the next best thing and draw the curtain between the beds, ensure visitors were screened at entry, performed hand hygiene, etc.

If the roommate doesn't have a visitor and doesn't mind leaving the room, that is the safest thing to do. However, if they refuse to leave the room....draw the curtain. Source control should be worn by everyone. Physical distancing may be difficult in the smaller rooms so even the resident without a visitor might want to wear a mask.

If the resident's roommate is unvaccinated or immunocompromised (regardless of vaccination status), visits should not be conducted in the resident's room, if possible. The roommate should leave the room if possible. If not able to leave the room, then the resident with the visitors should go to a designated visiting location in the facility.

Consider "opening" a room that is unoccupied to use as another visiting location. Most facilities have several more licensed beds than occupied beds. That way the resident with the visitor is still getting privacy and feels like their needs are being met.

Active Monitoring

While it's a team approach, the facility infection preventionist should be actively monitoring for appropriate use of:

- Source control (visitors, residents)
- Physical distancing
- Screening of visitors and staff
- Hand hygiene
- PPE use (HCP or staff)

What do I mean by active monitoring?

Rounding and observing practices firsthand

Resident Privacy

Question: Can the facility ask the resident where they are going?

Some concern that it may be a privacy issue.

Answer: (response from legal)

What does the facility's admission contract state about the resident's movement?

Need to know? Medical appointment and need to send transfer or medication information

There's no law in asking someone a question.

However, there is no law requiring them to respond or to be truthful as to where they are going.

The inquiry is not improper or a violation of resident privacy.

Reminders

- •LTCF are required to report COVID-19 to their local health departments in a timely manner.
- Reporting requirements for other pathogens per the IL Communicable Disease Code.
- •Work with your local health departments when you have an outbreak.
- •When you identify a positive COVID-19 case or are made aware of a known exposure---consider monoclonal antibodies!!
 - Not just for residents!
 - Have your staff contact their primary care physician about receiving monoclonal antibodies.

Holiday Meals-Options to Consider & Requirements

- 1. Consider holding several shifts of meals or have breakfast, lunch, dinner options where families could join their loved ones
- 2. Hold separate meals for vaccinated and unvaccinated (if possible)
- 3. Tables must be at least 6 feet apart. Consider meals in rooms or apartments to ease congestion in dining hall
- 4. Ensure visitors are screened for signs/symptoms and temperatures taken before entry to the facility
- No co-mingling of residents and families with other residents and families regardless of vaccination status
- 6. Masks must be worn to and from the dining hall. Masks must be worn unless ACTIVELY eating or drinking regardless of vaccination status
- 7. Provide alcohol-based hand rub at the entrance to the dining hall and ensure hand hygiene is done upon entry to the room
- 8. Disinfect surfaces thoroughly between meals



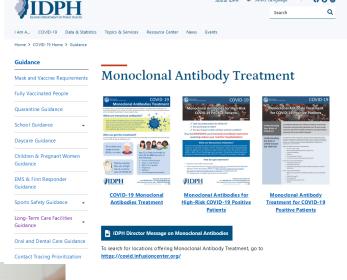
Monoclonal Antibody Therapy



General Vaccine Administration



Source Control / PPE



Monoclonal Antibodies mAb



Screening and Surveillance

Detection, Isolation

Example of Exterior Markings:
Append halder business tome, a registered todemark market, there business may are an eastly
understood affection. If providely labeled, the
proposal halder business may be a second or an eastly
understood affection. If providely labeled, the
proposal halder business may be a second or an eastly

Node! # XXXX - Model number

Node! # XXXX - Model number

Node! # XXXX - Model number

Regions

Respiratory Protection / Ventilation



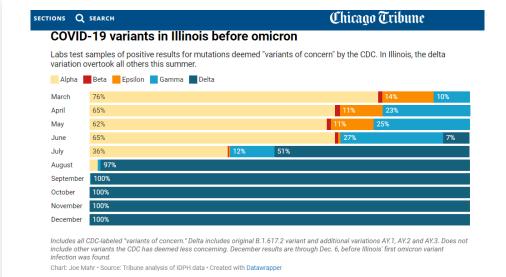
Hand Hygiene





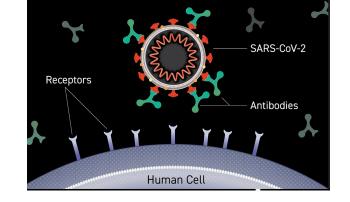
Omicron Variant of SARS-CoV-2

- Still collecting data on how Omicron is different than other variants of concern (e.g. Delta)
- Found in Illinois
- Preliminary studies evaluating vaccine efficacy/effectiveness
- Core Infection Prevention Measures
 - Mask Use
 - Vaccines
 - Hand Hygiene
 - Physical Distancing
 - Monoclonal Antibodies (mAb)





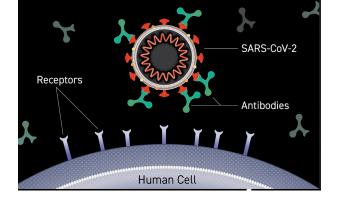
What are Monoclonal Antibodies?



- A type of man-made protein
- They restore, enhance or mimic the immune system's attack on cells.
- Many kinds of monoclonal antibodies
- Monoclonal antibodies for COVID-19 may block the virus that causes COVID-19 from attaching to human cells
- Makes it more difficult for the virus to reproduce and cause harm
- Monoclonal antibodies may also neutralize viruses
- each monoclonal antibody is made so that it binds to only one antigen.
- Monoclonal antibodies are being used in the diagnosis and treatment of many diseases, including some types of cancer. They can be used alone or to carry drugs, toxins, or other treatments directly to cancer cells.



Monoclonal Antibodies mAb



- Not a substitution for vaccination
- Used under FDA Emergency Use Authorization (EUA)
- Different monoclonal antibodies have different target populations and different indications
- Discuss with Medical Provider, Medical Director, Pharmacy, health department
- Goal is reduce barriers to administration of mAb to help prevent severe illness and hospitalization



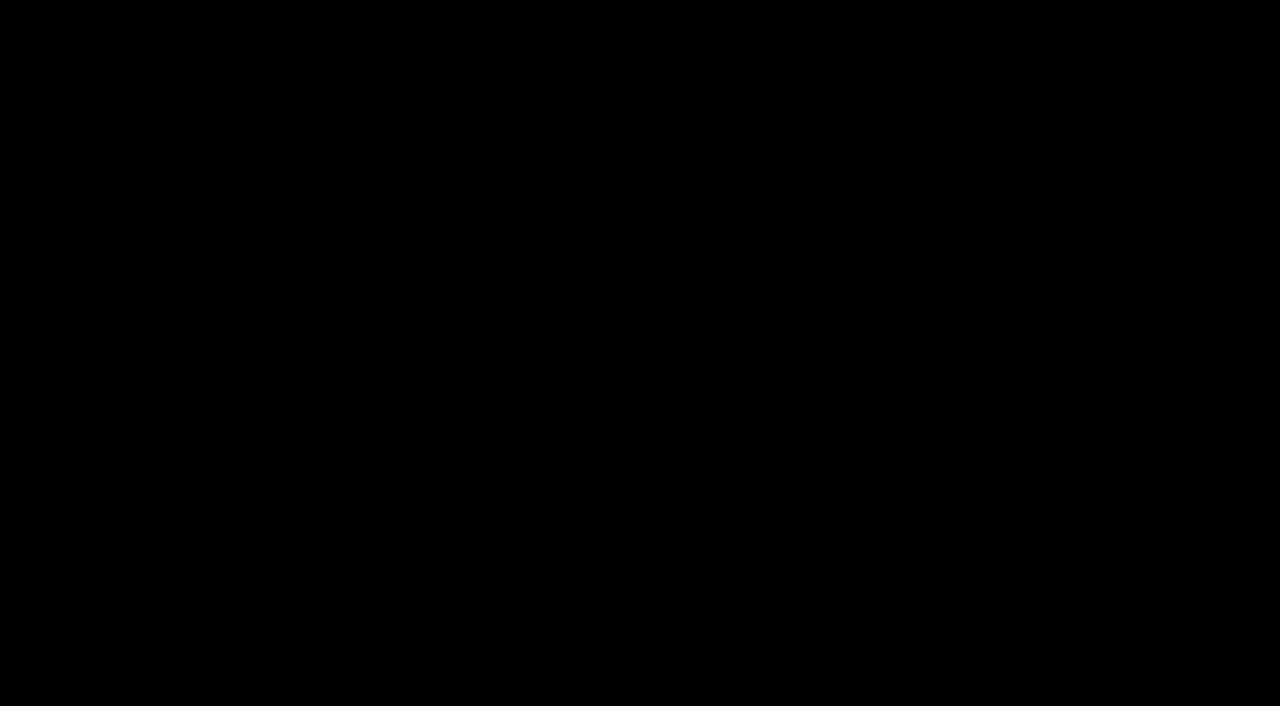
Monoclonal Antibodies for Persons Exposed to Someone with COVID-19 (Post-Exposure Prophylaxis)

- For <u>post exposure</u> prophylaxis
 - Higher RiskExposure
 - Within 7 days of exposure



Monoclonal Antibodies for Persons Diagnosed with COVID-19

- For treatment of persons diagnosed with COVID-19:
 - Non-hospitalized patients
 - Mild to moderate illness (eg, not requiring supplemental oxygen or, if on chronic supplemental oxygen, without an increased oxygen requirement)
 - Administered as soon as possible AND within 10 days of symptom onset
 - Earlier administration is likely associated with greater efficacy
 SubQ if any delays in IV



Open Q&A

Submit questions via Q&A pod to All Panelists

Please do not resubmit a single question multiple times

Slides and recording will be made available after the session.



Reminders

- 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

- NHSN Assistance:
 - Contact Telligen: nursinghome@telligen.com