BLAST FAX 2020-90

TO: Care Partners for Testing in Nursing Homes
FROM: Commissioner Deidre S. Gifford, MD, MPH
CC: Deputy Commissioner Heather Aaron, MPH, LNHA
     Adelita Orefice, MPM, JD, CHC, Senior Advisor to the Commissioner
     Barbara Cass, RN., Branch Chief, Healthcare Quality and Safety Branch
     Donna Ortelle, Section Chief, Facility Licensing and Investigations Section

DATE: September 23, 2020
SUBJECT: Care Partner Reporting to DPH re: COVID-19 testing

This Document is intended for care partners to use as guidance for reporting to Department of Public Health for weekly and monthly COVID-19 testing in nursing homes.

Background.

The Governor’s Executive Order 7AAA requires nursing homes, assisted living services agencies and managed residential care entities to test all staff in their facility “beginning not later than the week starting June 14, 2020, shall weekly test members of the nursing home facility staff for COVID-19 who have not previously tested positive for COVID-19, and shall continue such weekly testing for the duration of the public health and civil preparedness emergency, or until testing identifies no new cases of COVID-19 among residents or staff over at least 14 days since the most recent positive result, whichever occurs first.”

The Executive Order defines staff “as all personnel working in a provide or municipal nursing home facility, managed residential community or assisted living services agency, including, but not limited to, administrators, medical staff, employees, per diem staff, contractors with a regular presence in the facility, private duty patient or resident-contracted individuals, dietary, laundry and housekeeping personnel, and volunteers.”
Once facilities are past the 14 day testing period with no new cases among residents or staff, per new DPH guidance, all nursing homes, ALSA and MRC facilities should have 100% of staff who have not previously tested positive by PCR undergo screening testing each month, according to following guidelines:

- Private or municipal nursing homes, MRCs and ALSAs with greater than 100 staff will test weekly 25% of staff who have not previously tested positive by PCR for the duration of the public health and civil preparedness emergency or until there is a new case of COVID-19 among staff or residents (nursing home-onset resident cases), whichever comes first; or

- Private or municipal nursing homes, MRCs and ALSAs with less than 100 staff will test every other week 50% of staff who have not previously tested positive by PCR for the duration of the public health and civil preparedness emergency or until there is a new case of COVID-19 among staff or residents (nursing home-onset resident cases), whichever comes first.

- Private or municipal nursing homes, MRCs and ALSAs who are completing routine staff screening tests in the absence of an outbreak should rotate the testing of staff so that they are not testing the same staff each week or biweekly. This will allow 100% of staff who have not previously tested positive for COVID-19 by PCR to be tested on a monthly basis.

If a private or municipal nursing home, MRC or ALSA has a new case of COVID-19 among staff or residents, the facility is required to resume weekly testing of all staff pursuant to Executive Order 7AAA and guidance provided by the Department. For nursing homes, the Department has contracted with Care Partners through October 31, 2020, to ensure the testing can be completed in a timely manner. The state is directly reimbursing MRCs and ALSAs for staff testing through October 31, 2020.

**Reporting requirements.**

The Department provided an Excel spreadsheet for Care Partners to fill out in its entirety on a weekly basis and emailed each week to the following: Vivian.Leung@ct.gov, DPH.HAIAR@ct.gov, Bianca.Cartagena@ct.gov and Tiara.Conteh@ct.gov.

- Data should be submitted as an attachment via email every Wednesday by noon. This is required because the Department needs to report this data to other entities by Thursday afternoon.
- Only Nursing Home testing data should be included in the excel document; do not include assisted living test results.
- Data should be cumulative, so each week ALL data from the beginning of care partner testing should be reported.
- Please update prior pending and inconclusive results as “positive” or “negative” when those results are available.
The excel document includes the following:

**Date of Collection:** The date the test was performed on the staff and residents.

**Nursing Home:** Fill in the name of the nursing home. Please be consistent with the name of the nursing home when reporting both staff and resident results. Many times when the document is sorted, the nursing home will be listed twice because the name is abbreviated and doesn’t match and needs to be matched up manually.

**# staff swabbed, # staff positive, # staff negative, # staff inconclusive, # staff pending:** Please fill in all the tests as requested. Staff Swabbed should equal (=) Staff Positive + Staff Negative + Staff Inconclusive + Staff Pending. Please revise the columns for staff pending, staff positive, staff negative or staff inclusive when any pending test results become available. This adjustment should be included on the worksheet for your next reporting cycle.

**# Residents swabbed, # Residents Positive, # Residents Negative, # Residents Inconclusive, # Residents Pending:** Resident Swabbed should equal (=) Resident Positive + Resident Negative + Resident Inconclusive + Resident Pending. Please revise the columns for staff pending, staff positive, staff negative or staff inclusive when any pending test results become available. This adjustment should be included on the worksheet for your next reporting cycle.

**Other reporting requirements. Weekly calls with the Department.**

The Department is currently working with our National Guard Partners to develop a dashboard for reporting specific information that will be required from each of the care partners during individualized weekly conference calls. The Conference calls will take place every Monday or Tuesday at specifically scheduled timeframes for each provider. Care partners are expected to provide the following information:

- The total number of nursing homes and the names of each nursing home testing weekly.
- The total number of nursing homes and the names of each nursing home testing “monthly.”
- Turn Around Time (TAT), specifically, how long the test results are taking to process for each care partner, from specimen arrival to the testing laboratory to the time that laboratory results are provided to the facility.
- Are the Care Partners experiencing any delays in scheduling a test session or obtaining test results? This is applicable to outbreak/potential outbreak testing, weekly testing and monthly testing results that cannot be obtained within 48 hours.

The Department also hosts a weekly meeting with all Care Partners on Thursdays at 2 p.m.

**Testing to take place during an outbreak or suspected case.**
A facility with one positive case of COVID-19 in a resident (with nursing home-onset COVI-19) or staff person is considered to be experiencing an outbreak.

A facility with symptomatic staff or residents, should request to have that person tested. If the test result comes back positive, the facility will be required to test 100% of the staff again. Additionally, facilities will be performing contact tracing and request testing for any resident that may have been exposed to the person who tested positive. Facilities will need tests to be performed and results back within 48 hours to ensure proper cohorting, to mitigate the spread of COVID.

Facilities may use antigen testing if they need to test more than once every 7 days. See below for information provided to facilities regarding antigen testing.

**Antigen testing.**

The Department provided healthcare facilities with guidance on antigen testing in [Blast Fax # 2020-89](#). The Department recommends a nursing home use antigen testing to supplement the state’s PCR testing program for the following scenarios:

1. If a resident or staff is exhibiting symptoms and the facility is unable to obtain a PCR test within 24-48 hours of the onset of symptoms, the facility should test the person using the antigen machine.
2. If staff missed the weekly/monthly testing provided through the Care Partners.
3. If there is an outbreak, antigen testing of asymptomatic residents and staff can be used to augment Care Partner PCR testing as part of an outbreak response.