

STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

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HEALTHCARE QUALITY AND SAFETY BRANCH

BLAST FAX 2020-89

TO: Nursing Homes

FROM: Commissioner Deidre S. Gifford, MD, MPH 

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Date: September 15, 2020

Subject: Supplemental DPH Guidance on the Use of Antigen Testing in Nursing Homes

Facility-wide testing of health care personnel for SARS-CoV-2 can inform infection prevention and control practices to prevent transmission of COVID-19. Pursuant to Executive Order 7AAA, private or municipal Nursing Home facilities (Nursing Homes), Managed Residential Communities (MRCs), and Assisted Living Service Agencies (ALSAs) (individually a “Facility”; collectively “Facilities”) must weekly test all 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 comes first.

The Executive Order also requires such testing to be performed in accordance with the most recent guidance issued by the Department of Public Health (DPH), as such guidance may be revised from time to time.



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This guidance supplements DPH Guidance issued on August 12, 2020 and revises the guidance from September 1, 2020 regarding the use of antigen testing to supplement the PCR testing taking place through a Care Partner relationship facilitated by the Department. Antigen tests have a rapid turnaround time, which is critical to the identification of COVID-19 and rapid implementation of infection prevention and control measures. Antigen testing can augment the current weekly or monthly testing being performed by the nursing home's Care Partners. By the end of September, all nursing homes should have received antigen testing machines from CMS.

DPH 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.

Residents testing positive based on antigen testing should be properly cohorted, based on the guidance provided through the Department's website "[COVID-19 Healthcare Guidance](#)." Additionally, any resident positive result from antigen testing should be reported to DPH via the daily reporting portal at <https://dphflisevents.ct.gov>.

Consider a confirmatory molecular test (PCR) within 48 hours when an asymptomatic staff member tests positive during when community incidence is low and the facility is not experiencing and outbreak (during serial staff screening), per CDC: "[Considerations for Use of SARS-CoV-2 Antigen Testing in Nursing Homes](#)"

Facilities should schedule weekly facility-wide testing with their Care Partner when there is a new SARS-CoV-2 infection in any staff or any nursing home-onset SARS-CoV-2 infection in a resident. Facilities should follow the testing guidance outlined by CDC: "[Testing Guidance for Nursing Homes](#)". Testing all staff and residents (who have not tested positive for SARS-CoV-2 within the past 90 days) as soon as possible after a new staff or nursing home-onset resident case will help stop the spread of COVID-19. If a Care Partner is unable to conduct testing in a timely manner, antigen testing should be used.

The Department requires all results of antigen testing to be reported to the DPH Epidemiology Section. Further guidance on reporting procedures for both positive and negative findings is forthcoming.

Facilities should check the corresponding manufacturers website for guidance on training and using the machine and ordering supplies.

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