



# Infection Control Nurses of CT/ DPH HAI Monthly Meeting August 25, 2021

# Welcome and Introductions



This call is being recorded and will be posted to the ICNS website



Infection Control Nurses of Connecticut/ Department of Public Health Healthcare Associated Infections  
Monthly Meeting Agenda

August 25, 2021

- |                                                                         |                   |
|-------------------------------------------------------------------------|-------------------|
| 1. Welcome and Introductions                                            | Kris Magnussen    |
| 2. Guest Speaker                                                        | Anne Bracker      |
| 3. COVID NH Data Updates                                                | Adora/ Dr. Leung  |
| 4. Contact tracing /Case Investigation                                  | Adora             |
| 5. Executive Order 13A- Testing                                         | Kathy             |
| 6. Executive Order 13B-Vaccination                                      | Kathy             |
| 7. ICARs: Infection Prevention<br>and Control Assessments/Common Themes | Kathy             |
| 8. Q&A                                                                  | Members and panel |

**Future Agenda Items**

- |                                |                      |
|--------------------------------|----------------------|
| 9. Topics of Interest          | Members              |
| 10. Speakers                   | Kris & Donna/Members |
| 11. Stories from the Frontline | Kathy/Members        |


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Suggestions for other agenda items?



# Guest Speaker

Anne Bracker, MPH, CIH  
Occupational Safety and Health Program  
Manager





# OSHA's ETS for Healthcare

Anne Bracker, MPH, CIH

CONN-OSHA Private Sector On-Site Consultation Program Manager

[OSHA's ETS](#)



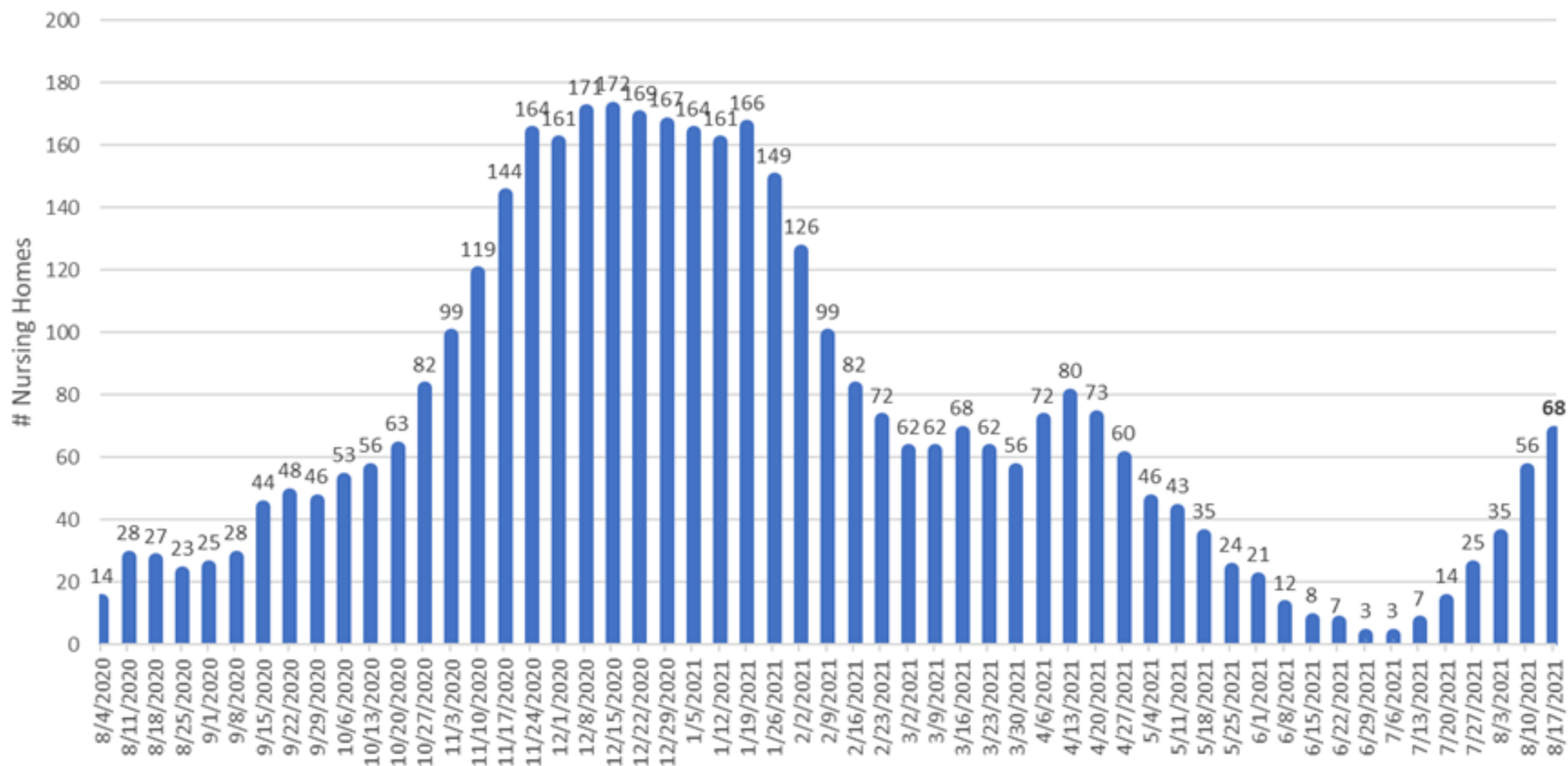


# COVID Nursing Home Data

Begin recording

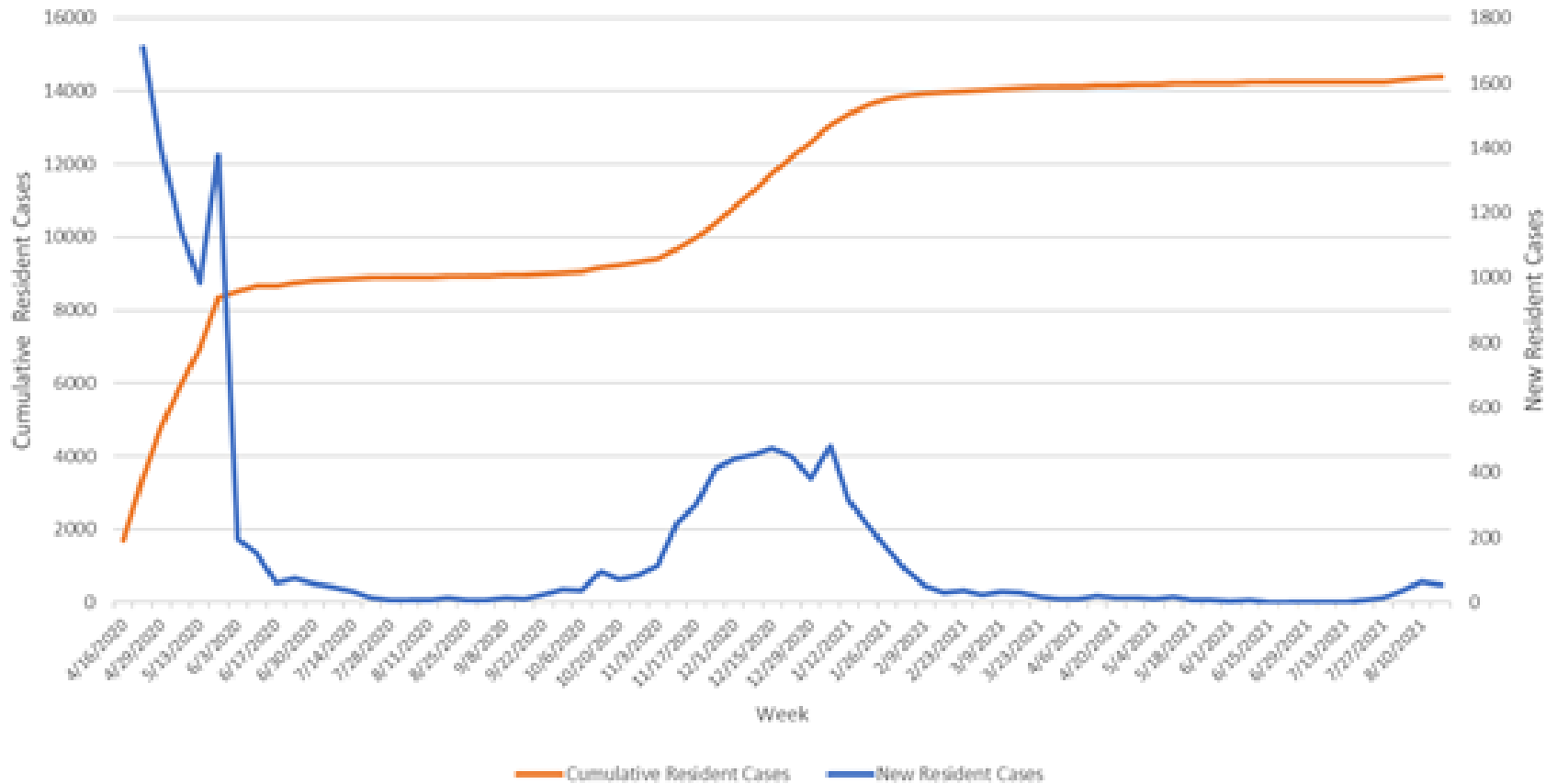


## Nursing Homes with Newly-Diagnosed COVID-19 Among Residents AND/OR Staff in the Most Recent 14-day Period



# Nursing Home Resident Incidence, Statewide 4/16/20-8/17/21

Nursing Home Resident Cases - Connecticut, April 16, 2020- August 17, 2021



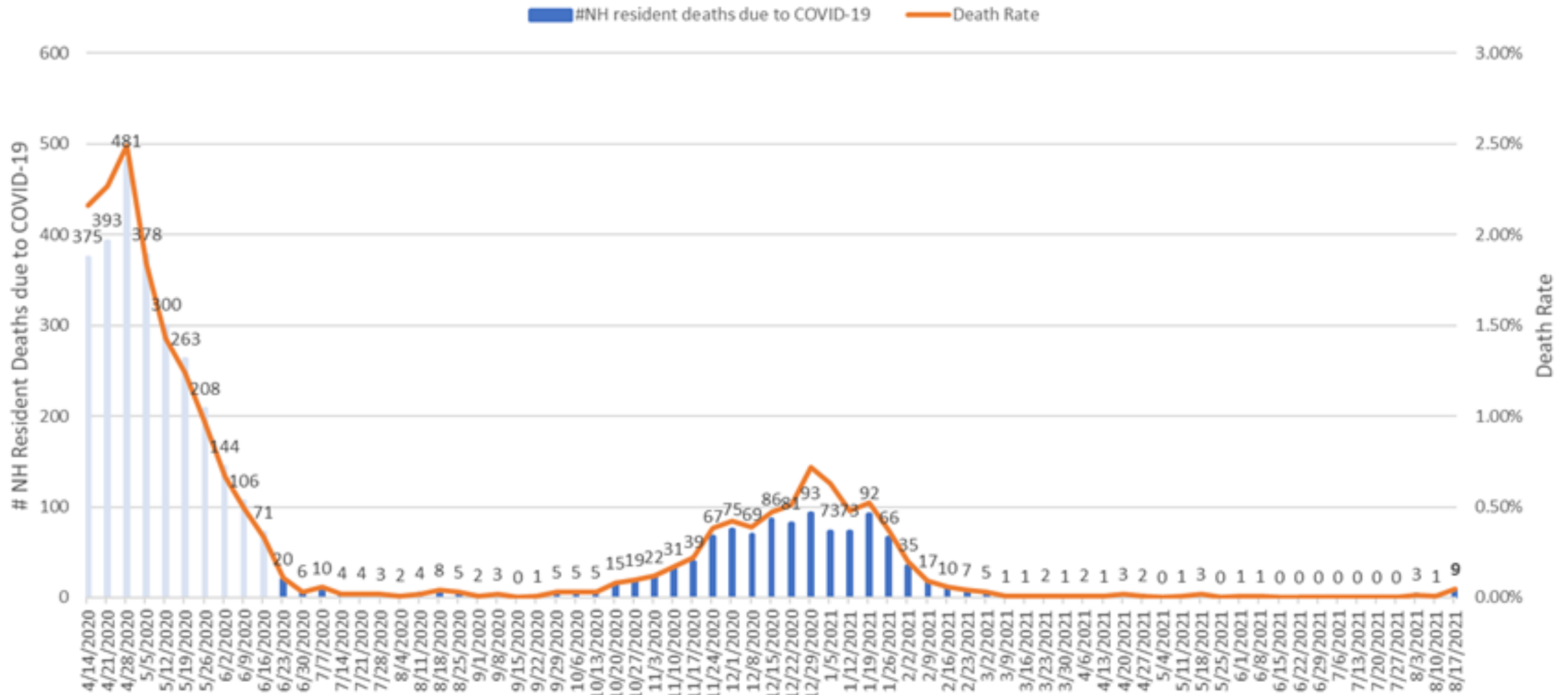
Date Reported	New Resident Cases (diagnosed that week)
18-May	7
25-May	6
1-Jun	4
8-Jun	5
15-Jun	1
22-Jun	1
29-Jun	0
6-July	1
13-July	0
20-July	6
27-July	14
3-Aug	36
10-Aug	65
17-Aug	53

Facility Metrics	#Nursing Homes
New res. cases, last 2 weeks	22 (+5)
No new res. cases, >2 weeks	187



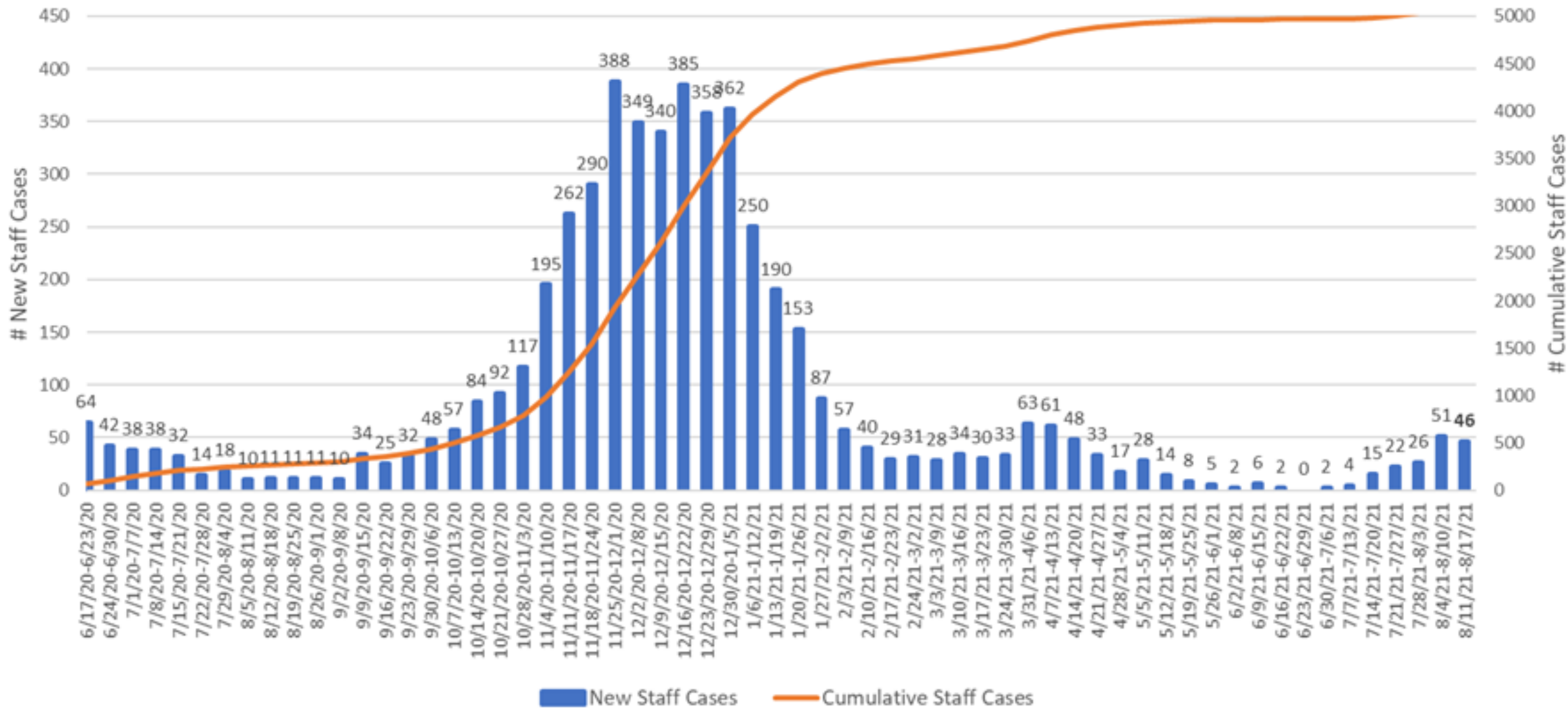
# Nursing Home Resident Deaths Due to COVID-19

## 4/15/2020-8/17/2021

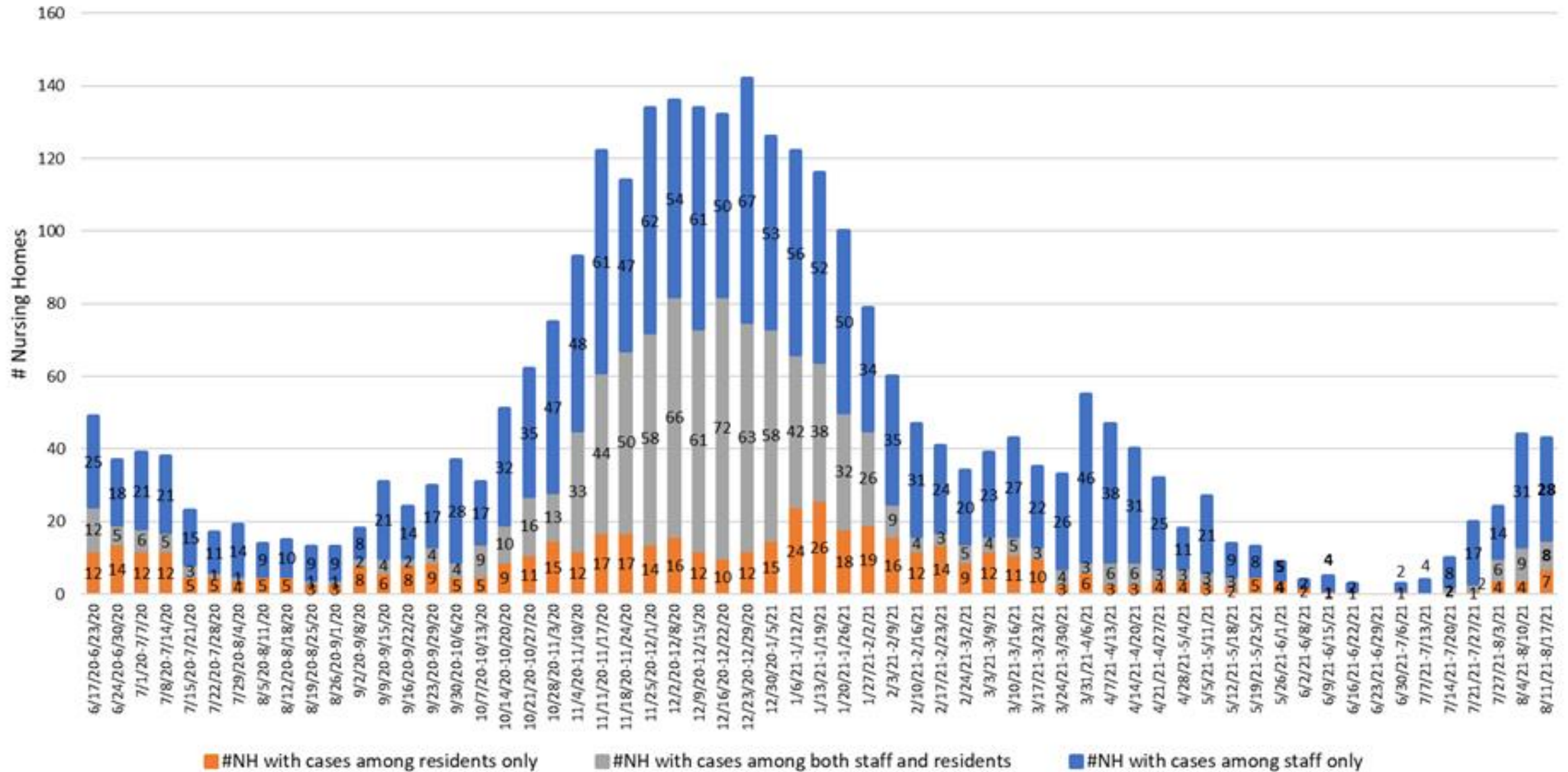


# Staff Cases in Connecticut Nursing Homes

## June 17, 2020–August 17, 2021



# Nursing Homes with Positive Staff or Residents June 17, 2020-August 17, 2021



# Nursing Home COVID Vaccination Rates as of August 8, 2021

## **Resident Vaccination Rates (203 NHs reported)**

- Average 91%, Median 92%
- Range 62-100%

**Overall- 97% of reporting NHs  
have resident vaccination rates  
≥ 75%**

## **Staff Vaccination Rates (204 NHs reported)**

- Average 74%, Median 75%
- Range 37-100%

**Overall- 50% of reporting NHs  
have staff vaccination rates ≥ 75%**

## Contact Tracing

- Identifies close contacts of individuals who test positive for COVID-19.
- “Close contact” is defined as someone who was within 6 feet for > 15 minutes.
- **Residents, regardless of vaccination status, with a significant exposure to an individual with COVID-19 (e.g. roommates) should quarantine for 14 days.**
- **Staff contacts: use definitions for healthcare exposure.**
  - **Unvaccinated staff should be excluded**
  - **Vaccinated staff can work and should be tested TWICE (immediately and 5-7 days after exposure)**
- The index case’s infectious period sets the time period for which close contacts should be identified. This starts 2 days prior to COVID-19 symptom onset (or 2 days prior to first positive test for index cases without symptoms at time of testing), and ends when the index case meets criteria of lifting isolation precautions.

## Case Investigation

- Involves identifying where someone diagnosed with COVID-19 might have been exposed.
- A case investigation for each case of nursing home-onset COVID-19 should be conducted to identify potential breaches in infection control.
- Exposure may have occurred up to 14 days prior to symptom onset or time of first positive specimen collection; median time from exposure to symptom onset is 4–5 days.
- During case investigation, look for adherence to infection control guidance:
  - Hand hygiene, source control (face covering over nose and mouth), and physical distancing.
  - Indoor gatherings (e.g communal activities, dining), particularly where adherence to face covering is low.
  - Visitation, particularly indoor visitation.
  - Medical appointment or any other type of LOA.

# LTCF Submission of respiratory specimens to the State Public Health Laboratory (SPHL)

## 1. After antigen testing IF:

- **Negative** antigen test result for **symptomatic** staff and/or resident
- **Positive** antigen result for **asymptomatic** (confirmatory PCR) or symptomatic (for variant identification)
- **2. When directed by DPH HAI/Epi Team for epidemiologic investigation**

Respiratory (nasopharyngeal, midturbinate, etc.) specimens can be sent to SPHL

- LTCFs are responsible for transport of specimen.
  - **Transport specimen (COLD – with ice pack)** to SPHL as soon as possible after collection.
- SPHL is open to receiving specimens **24/7**.
- SPHL can provide confirmatory PCR results in <48 hrs, M-F.
- A [COVID-19 Clinical Test Requisition Form](#) is **required** for each specimen.




# Executive Order 13A

8/11/21

Requires weekly testing of  
unvaccinated nursing home staff.

[20210811-DPH-Order-regarding-weekly-testing-of-unvaccinated-nursing-home-staff.pdf \(ct.gov\)](https://www.ct.gov/dph/20210811-DPH-Order-regarding-weekly-testing-of-unvaccinated-nursing-home-staff.pdf)





# Executive Order 13B

## Requirement for employees of long-term care facilities to receive COVID-19 vaccinations

[Executive-Order-No-13B.pdf \(ct.gov\)](#)





# ICARs: Infection Prevention and Control Assessments

Infection Control Assessment and Response (ICAR) tools are used to systematically assess a healthcare facility's infection prevention and control (IPC) practices and help to guide quality improvement activities

- **In-person** (whenever possible)
- **Educational**
- **Non-regulatory** assessments
- Cover **CDC** minimum standards

[Infection Prevention and Control Assessment Tool for Nursing Homes Preparing for COVID-19 | CDC](#)

# ICARs: Common Themes

- Outbreaks
    - Unvaccinated staff
    - Recent travel
  - Appropriate PPE
  - When to use eye protection in addition to a facemask
  - Appropriate eye protection/storage
  - Break room: strategies to prevent transmission
    - Storage of N95 /eye protection during breaks
    - Mixing of vaccinated and unvaccinated HCW during breaks
- ? Are fully vaccinated new admissions testing positive during the first 14 days?**



Questions????



# Future Agenda Items

NOBODY PANIC!  
I GOT THIS  
I'M A



**Infection Control  
Nurse**



Thank you for all you do!