



COVID-19 Testing in Long-Term Care

June 4, 2020

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

- Why test?
- Preparing for results
- LTCF definition(s)
- Emergency rule
- LTC Testing Memo
- Process for obtaining testing
- What to do after you receive results
- Q & A

Slides and recording will be made available after the session.

IDPH memos, 5/28/20: LTC testing and emergency rule



State of Illinois
Illinois Department of Public Health

COVID-19

JB Pritzker, Governor

Ngozi O. Ezike, MD, Director

Updated Interim Guidance: COVID-19 Testing and Response Strategy in Licensed Long-term Care (LTC) Facilities

May 28, 2020

This interim guidance provides updated guidelines and criteria for COVID-19 testing in licensed long-term care (LTC) facilities, as defined by the Nursing Home Care Act, 210 ILCS 45, primarily focusing on skilled nursing and intermediate care facilities.

Given their congregate setting and resident populations served (e.g., older adults often with underlying chronic medical conditions), nursing home populations are at the highest risk of being affected by COVID-19. If infected with SARS-CoV-2, the virus that causes COVID-19, residents are at increased risk of serious illness. The Illinois Department of Public Health (IDPH) is committed to working proactively with LTC facilities to prevent illnesses.

The Nursing Home Care Act requires each LTC facility to designate a person or persons as Infection Prevention and Control Professionals to develop and to implement policies governing the control of infections and communicable diseases (210 ILCS 45/2-213(d)). This policy must be written, clear, unambiguous and made available to the public (210 ILCS 45/2-210). This guidance outlines how each LTC facility must develop an infection and communicable disease control policy that includes a facility assessment, a testing plan, and a response strategy for COVID-19.

Facility Assessment

Each LTC facility must complete the Illinois Long-Term Care Facility Assessment for COVID-19, available at:

<https://redcap.dph.illinois.gov/surveys/?s=L3HPFNXEJD>.

This assessment was previously distributed March 20, 2020. Any LTC facility that did not submit a response at that time must do so within seven days of the issuance of this guidance.



NEWS RELEASE

FOR IMMEDIATE RELEASE

May 28, 2020

CONTACT:

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Illinois Department of Public Health Files Emergency Rules Mandating COVID-19 Testing in Long-Term Care Facilities

SPRINGFIELD – Today, the Illinois Department of Public Health (IDPH) filed emergency rules mandating long-term care facilities comply with infection control practices, including testing all residents and staff for COVID-19. Each facility will be required to develop and implement a testing plan to better protect vulnerable residents and ensure no facility is shirking its responsibilities for those in their care.

“Nursing home residents are at higher risk for infection, serious illness, and death from COVID-19,” said IDPH Director Dr. Ngozi Ezike. “Testing residents and health care staff is important to help keep COVID-19 out of facilities if the virus is not there, detect cases quickly – especially among individuals who are asymptomatic, and stop transmission. While many facilities are working with IDPH and their local health departments to help keep residents safe, we cannot rely on voluntary compliance alone, and this additional regulatory authority will help ensure swift action.”

IDPH is requiring every long-term care facility in Illinois to test all residents and staff for COVID-19 as recommended by the Centers for Medicare and Medicaid Services and the Centers for Disease Control and Prevention. Each facility will collect specimens and arrange with a laboratory to have them tested. IDPH will provide training and assistance with testing if needed and will help identify laboratory services if requested. Each facility will be required to report to

Why test in long-term care facilities?

IL

- 17,098 lab-confirmed COVID-19 cases and 2,744 deaths associated with long-term care facilities as of 5/29/20

CDC

- Guides infection prevention and control measures
 - Cohorting and initiation of transmission-based precautions
 - Exclusion of healthcare personnel
- Identifies asymptomatic cases

CMS

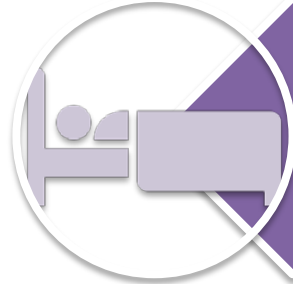
- Recommended as factor for reopening nursing homes (QSO-20-30-NH; 5/18/20)

Refer to hyperlinks for source information.

Prepare, Prepare, Prepare!

Testing is only the beginning.

Facilities need to have a plan in place to act on the results.



Designate a COVID-19 unit

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/nursing-homes-responding.html>



Understand the HCP return to work criteria

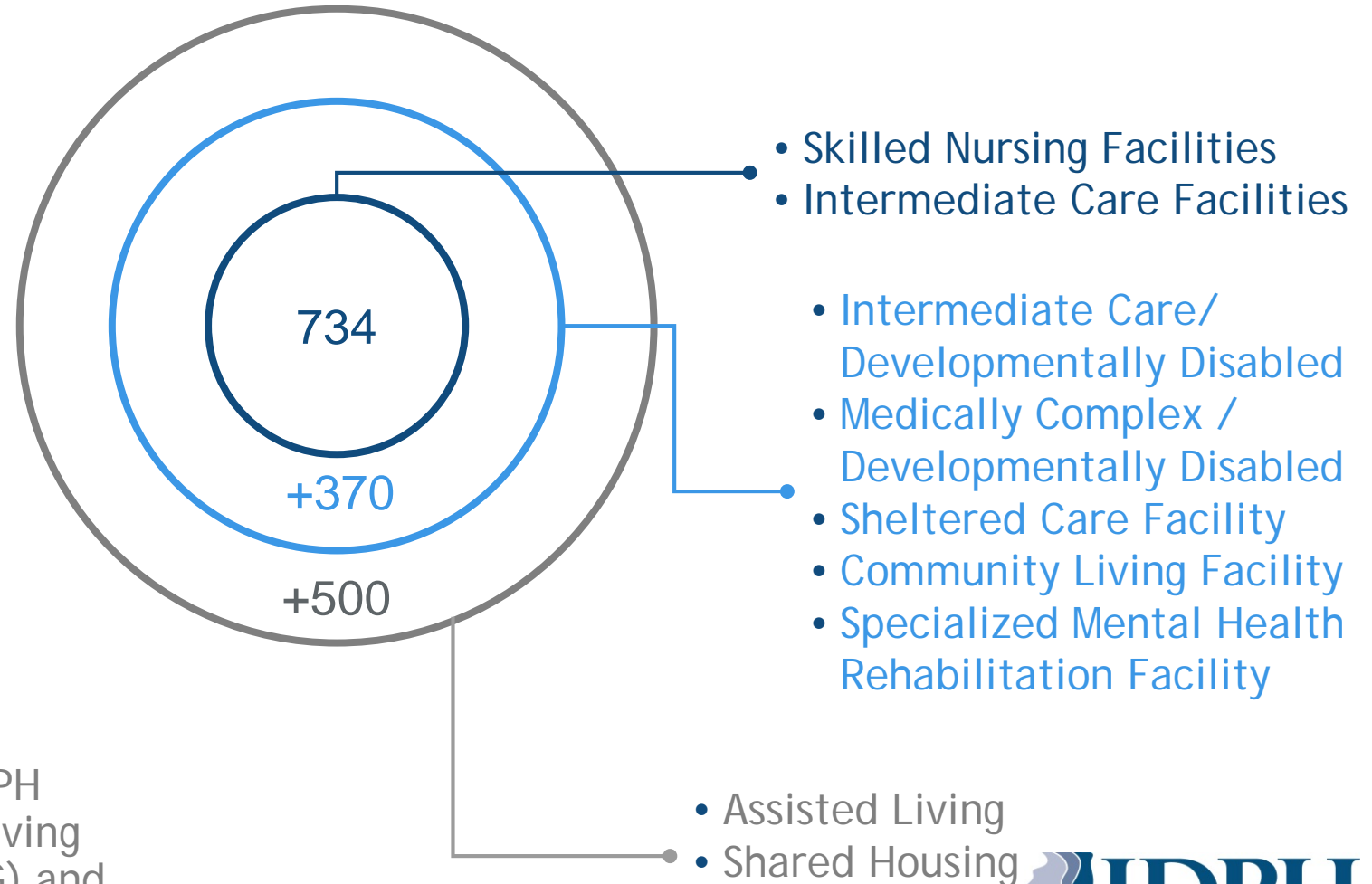
<https://www.cdc.gov/coronavirus/2019-ncov/hcp/return-to-work.html>



Plan for potential staffing shortages

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/mitigating-staff-shortages.html>

LTCF definition(s)



Note: Figure does not include non-IDPH regulated facilities, eg. Supportive Living
Slide courtesy Rachel Whitcomb (BCG) and Avery Hart (IDPH consultant)

Emergency Rule, 77 Ill. Adm. Code 300

- Where were changes made?
- What facility types does this apply to?

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](#)

For full text: <https://www.dph.illinois.gov/covid19/governor-pritzkers-executive-orders-and-rules>
Information current as of May 28, 2020

What does the emergency rule require?

- **Facilities must:**
 - Add testing for infectious diseases to the facility's infection control policies and procedures.
 - Comply with infection control recommendations provided by IDPH or their LHD
 - Test residents and staff when they have either an outbreak in the facility or when the chain of transmission is high and IDPH directs them to conduct testing. Test results must be reported to IDPH.

IDPH LTC Testing Memo



Facility Infection Control Assessment

- Each SNF/ICF must complete the assessment at <https://redcap.dph.illinois.gov/surveys/?s=L3HPFNXEJD>
- Previously distributed on March 20, 2020. **No need to resubmit if you already filled out.** There was an option to receive a confirmation email upon survey submission. If you think you submitted before, please check your email for this verification
- Otherwise, must complete **within 7 days** of memo release

Illinois Long-Term Care Facility Assessment for COVID-19 resize font: [+] [-]

This infection prevention and control assessment tool is being used to assist long-term care and other congregate care facilities with preparing to care for residents with COVID-19. The information you provide will help the Illinois Department of Public Health (IDPH) plan for resource and technical assistance needs at your and other facilities.

The assessment reviews the following domains:

- Visitor restrictions
- Education, monitoring, and screening of Healthcare Personnel (HCP)
- Education, monitoring, and screening of Residents
- Availability of Personal Protective Equipment (PPE) and other supplies
- Infection Prevention Practices:
 - Hand hygiene
 - Use of PPE
 - Cleaning and disinfection of environmental surfaces and resident care equipment

Questions about this assessment can be directed to IDPH's Division of Patient Safety and Quality, dph.dcpq@illinois.gov.

Questions about COVID-19 preparations and response can be directed to your local health department.

IDPH COVID-19 Guidance for Long Term Care Facilities are available at: <http://www.dph.illinois.gov/topics-services/diseases-and-conditions/diseases-a-z-list/coronavirus/long-term-care-guidance>

Facility Demographics

Facility Name <small>* must provide value</small>	<input type="text"/>
Facility Type <small>* must provide value</small>	<input type="checkbox"/> Skilled nursing <input type="checkbox"/> Assisted living <input type="checkbox"/> Intermediate care/developmental disability <input type="checkbox"/> Supportive living <input type="checkbox"/> Independent living <input type="checkbox"/> Residential group home <input type="checkbox"/> Other
Bed Capacity	<input type="text"/>
Number of Ventilator Skilled Nursing Beds	<input type="text"/>
Street Address	<input type="text"/>

Required Testing Plan and Response Strategy

- Written COVID-19 testing plan and response strategy **within 14 days** of the issuance of the memo. Must be made available to IDPH upon request.
- Must specify the necessary personnel, and the required training or experience of the personnel, to properly care for the number and types of residents served by the facility, including the personnel necessary to execute the COVID-19 testing plan.

What test type is acceptable?

PCR testing (FDA Emergency Use Authorized COVID-19 molecular assay for detection of SARS-CoV-2 RNA)

Testing Plan (cont)


- The testing plan shall identify the ordering physician, method of obtaining consents for the tests, and the criteria and frequency for testing residents and staff.
- Every COVID-19 testing plan shall identify by name a dedicated laboratory contracted or otherwise engaged to provide COVID-19 clinical testing services according to the volume and frequency identified in the testing plan.
- IDPH can advise LTC facilities regarding laboratories with available capacity.

HOW CAN MY FACILITY GET TESTED?

Onsite Training for Specimen Collection



- Upon request, and subject to availability, IDPH can provide onsite training for proper specimen collection or other assistance as necessary.
- This can be requested via <https://redcap.dph.illinois.gov/surveys/?s=8TYKCECTCX>.



Testing for LTCFs with no COVID-19 cases in last 28 days

- IDPH can refer facilities with no COVID-19 cases in the last 28 days to a partner laboratory (currently Quest). Facilities may request this referral here: <https://redcap.dph.illinois.gov/surveys/?s=8TYYYKCETCX>.
- Facilities should notify LHD of upcoming plans for testing. LHD can help facilities prepare for or respond to results.

Testing for LTCFs with outbreaks or identify their 1st case

- IDPH Laboratory can provide test kits and perform testing
- As part of outbreak response, facilities should discuss testing plans and arrangements with their local health department
 - Then they can sign up for testing through the same form:
<https://redcap.dph.illinois.gov/surveys/?s=8TYYKCETCX>
- Once the outbreak is over, the facility must identify a contracted or engaged laboratory to continue to provide COVID-19 clinical testing services according to their testing plan

Process for testing through a referred or IDPH laboratory

1. An IDPH representative will call you to arrange for testing and/or onsite specimen collection support, if requested.
2. If you requested testing, your referred laboratory or IDPH representative will arrange for shipment of supplies, discuss specimen collection and transport, and set up a facility account and contract.
3. Billing for either Quest or IDPH laboratories will be handled in the same manner. They will obtain insurance information for test recipients to bill for services. Residents and staff without insurance will still be able to be tested, with services [supported by HFS/CARES Act](#).

Process for testing through a referred or IDPH laboratory

4. Facility obtains consent from residents (or their representatives) and staff to be swabbed prior to date of testing. Facility also prepares or compiles other supplies needed for specimen collection (e.g., specimen labels, test requisition forms, PPE, etc).
 - Transport media may require refrigeration – ensure you have space to store supplies!
5. Facility should prepare for the results. For example, ensure that a dedicated COVID-19 unit with dedicated staff are in place, prepare for potential health care worker [shortages](#), and understand the [return to work criteria](#).
6. Once facility receives test kits, they can conduct specimen collection (or on designated date if onsite assistance was requested) and submit samples to their designated laboratory.
7. Your referred laboratory will conduct testing and report results to the facility and IDPH.

COVID-19

ONLY for COVID-19 testing.

Transport Media (may require refrigeration)

Nasopharyngeal Swabs

Anterior Nasal Swabs

MAILING SUPPLIES

Biohazard Bags

1 per specimen

Shipping Boxes with Styrofoam Cooler

PROVIDE QUANTITY AND SIZE

Small: Holds 15-20 specimens

Medium: Holds 50-75 specimens

Large: Holds 175-225 specimens

Ice Packs

UNG373 Labels

1 label per shipping box/cooler if shipping via mail service

UPS RETURN SERVICE LABELS

UPS Return Service Labels are for next-day air delivery service. These labels should not be used for shipments that need to be delivered on the weekends, as they are Monday-Friday service only.

Carbondale Laboratory

Chicago Laboratory

Testing through the IDPH Laboratory

- [Online order form](#): Facilities must obtain an outbreak or INEDSS number to order supplies
 - Don't forget to order shipping supplies
 - **Prefer that facilities drop off or courier specimens to an IDPH Lab to ensure sample integrity**
 - If not possible, alternate arrangements can be explored
 - Top reasons for sample rejection: samples not kept cold (2-8°C) or not delivered to lab within 72 hours of collection
- [Test requisition form](#): Each specimen must be submitted with this form



Training Materials for Specimen Collection and Packaging



IDPH-produced video [in post-production]



IDPH Lab's 17 steps for collection



PowerPoint slides with step-by-step instruction



What to do with positive results



Report to LHD and
CDC/NHSN (if required)



Implement infection control
measures, plan for
subsequent testing



Notify residents,
families/representatives, and
staff (see CMS requirements)

Refer to CDC guidance – Retesting if positive cases

- Immediately test any resident or HCP who subsequently develops fever or symptoms consistent with COVID-19
- Continue repeat testing of **all previously negative residents** (e.g., once a week) until the testing identifies no new cases of COVID-19 among residents or HCP over at least 14 days since the most recent positive result.
 - If test capacity is limited, CDC suggests directing repeat rounds of testing to residents who leave and return to the facility (e.g., for outpatient dialysis) or have known exposure to a case (e.g., roommates of cases or those cared for by a known positive HCP).
 - For large facilities with limited test capacity, testing all residents on affected units could be considered, especially if facility-wide serial testing demonstrates no transmission beyond a limited number of units.

Refer to CDC guidance – Retesting if positive cases (cont)

- Continue repeat testing of **all previously negative HCP** (e.g., at least once a week, consider more frequent testing in settings where community incidence is high) until the testing identifies no new cases of COVID-19 among residents or HCP over at least 14 days since the most recent positive result.
 - If testing capacity is limited, CDC suggests directing repeat HCP testing to HCP who work at other facilities where there are known COVID-19 cases.

What to do with all negative results

This is great news! But remember that this only provides a snapshot of COVID-19 status on the day swabbing occurred

Continue with infection prevention and control measures (e.g., monitoring hand hygiene adherence/PPE use and screening residents and staff for symptoms)

Plan for subsequent testing per your facility's testing plan

Points for consideration when determining testing frequency if no cases

- CMS QSO-20-30-NH has *recommendations* for nursing homes
- From their [FAQ](#):

9. How often should a nursing home test its staff?

All staff should receive a baseline test, and continue to be tested weekly

(Note from memo: “State and local leaders may adjust the requirement for weekly testing of staff based on data about the circulation of the virus in their community”)

10. How often should a nursing home test its residents?

Nursing homes should have a comprehensive plan for testing. All residents should receive a single baseline test for COVID-19. Also, all residents should be tested upon identification of an individual with symptoms consistent with COVID-19 or if an employee or staff member tested positive for COVID-19.

Points for consideration when determining testing frequency if no cases

- CDC: “Considerations for [time intervals between testing](#) include concern for ongoing transmission and logistics of repeat large scale testing.”
- Incidence of COVID-19 in community
- Lab turnaround time and capacity

Testing should not supersede infection prevention and control actions.

What are the deadlines?

Facility assessment

- 7 days of memo release

Testing plan and response strategy

- 14 days of memo release

Facility-wide baseline testing

- No required deadline
- If 1st case/ new outbreak/ outbreak with rapid increase in cases or many deaths, test as soon as possible
- For other situations, consider CMS guidance for reopening nursing homes, whether facility has ever had cases, low vs high incidence area

FAQ

- Q: Will residents and staff be charged for testing?
 - A: Please refer to the HFS provider notice, “COVID-19 Testing is Free to Illinois Residents”, 5/18/20.
 - If they are insured, insurance will be billed; there should be no copays, deductibles, etc. If they are uninsured, HFS Uninsured COVID-19 Testing Program will support testing.
 - <https://www.illinois.gov/hfs/MedicalProviders/notices/Pages/prn200518a.aspx>



Staff refusals

- **Staff members** have a legal right to refuse testing. But staff who refuse to be tested may be infected and so may transmit COVID-19 to residents and other staff.
- Facility administration may develop human resource policies to address staff refusals.
- Facilities may consider whether testing will be a condition for continued employment.
- If facility policy does not require staff testing, then the facility should consider what measures are needed to protect residents from risk of exposure to a staff member with undetermined COVID-19 status.

Resident consent and refusal

- **Residents** would be covered for testing by the general consent that they typically would sign on entry.
- Residents, or their guardians or legal surrogates, have a legal right to refuse testing, as an exception to the general consent.
- If no general consent for a resident is on file with the facility, verbal, informed consent must be obtained prior to testing and documented in the resident's chart.

Questions

- Submit questions via Q&A pod to **All Panelists**
- **Friday Brief Updates and Open Q&A (1-2 pm):**
Friday June 5th
<https://illinois.webex.com/illinois/onstage/g.php?MTID=e93324db3f5686b96980cbdcc42059012>
- LTC testing mailbox: dph.ltctesting@illinois.gov