Policy and Procedure: Coronavirus Disease (COVID-19) TESTING FOR COVID-19 – <u>ILLINOIS ONLY</u>

Effective: May 19, 2020	Revised: 6/10/2020 Adapted by IDPH
	Guidance 6/4/2020 and received on
	6/9/2020

This Policy may change or be revised based on CDC/CMS/ State Public Health Department changes or recommendations.

BACKGROUND

Nursing home residents are at high risk for infection, serious illness, and death from COVID-19. Testing for SARS-CoV-2, the virus that causes COVID-19, can detect current infections (referred to here as viral testing or test) among residents and healthcare personnel (HCP) in nursing homes. Viral testing in nursing homes <u>can be an important addition to other infection prevention and control recommendations aimed at:</u>

- Keeping COVID-19 out
- Detecting cases quickly
- Stopping transmission

<u>Testing should not supersede existing INFECTION PREVENTION AND CONTROL interventions.</u>

Testing conducted at nursing homes may be implemented *in addition to* recommended INFECTION PREVENTION AND CONTROL measures.

Testing should be used when results will lead to **specific** INFECTION PREVENTION AND CONTROL actions*.

*meaning a resident may be monitored for signs and symptoms of COVID; isolate and quarantine a resident, implement advanced PPE requirements; for CDC requirements of 14 days and there may not be any specific INFECTION PREVENTION AND CONTROL actions required or necessary.

Viral testing can be used to inform if any additional INFECTION PREVENTION AND CONTROL actions are necessary to keep SARS-CoV-2 out of facilities, detect COVID-19 cases, and possibly stop transmission. Testing practices should aim for rapid turn-around-times (e.g., less than 48 hours but are subject to laboratory testing protocols) in order to facilitate effective INFECTION PREVENTION AND CONTROL action. At the current time, antibody test results should not be used to diagnose someone with an active SARS-CoV-2 infection and should not be used to inform INFECTION PREVENTION AND CONTROL action.

Baseline Testing

Baseline testing will be performed for all residents and health care personnel. If there are no positive results the facility will continue to monitor residents and staff. After 14 days have passed and no new symptoms have been observed the facility will follow the protocol for the "Testing scenario when there is not an outbreak" For any positive results the facility will do the following.

Residents that tested positive for COVID-19 will be placed into droplet/contact precautions and moved to the COVID-19 designated area.

Residents that have not previously tested positive will be retested weekly until there are no further positive results and at least 14 days have passed without a new case.

Employees that test positive will be quarantined at home for a minimum of 10 days with 3 days being afebrile before returning to work.

Employees that have not tested positive in the past will be retested weekly until there are no further positive results and at least 14 days have passed without a new case.

After 14 days have passed without a new case, the facility will be considered "Outbreak Free" and will follow "Testing scenario when there is not an outbreak"

Testing Scenario when there is an outbreak

An outbreak is defined as 1 new confirmed case of COVID19 and 1 person with COVID19 illness. If an outbreak is determined all facility residents, and Health Care Personnel will be tested. Testing will occur within 72 hours from the date of the reported outbreak if all supplies are available and the local health department and/or identified state has issued the required testing authorization and outbreak identification number. Any positive residents, staff, or vendors will be quarantined/isolated for a minimum 10 days with 3 day being afebrile before returning to work.

Residents that tested positive for COVID-19 will be placed into droplet/contact precautions and moved to the COVID-19 designated area.

Residents that have not previously tested positive will be retested weekly until there are no further positive results and at least 14 days have passed without a new case.

Employees that test positive will be quarantined at home for a minimum of 10 days with 3 days being afebrile before returning to work.

Employees that have not tested positive in the past will be retested weekly until there are not further positive results and at least 14 days have passed without a new case.

Testing Scenario when there is not an outbreak

When there is not an outbreak the facility will test per guidelines or additionally as recommended by the identified state or local health department requires.

PPE Required for Testing: Full PPE: Gown, N95 Masks, Gloves, Face Shield/ goggles.

PPE required to properly care for this facility's residents see: POLICY CORONAVIRUS (COVID-19)

Personnel Necessary to test will be reviewed the day before testing begins to ensure adequate staff are available for testing.

Testing Protocol

- 1. Facility will cooperate and collaborate with any State or Local Health Department on testing residents and staff.
- 2. Facility will conduct all in-house testing.
- 3. Facility will coordinate testing internally and will test its residents and staff and not require nor request additional staff resources of State of Local Health Department.
- 4. Test Kits will be ordered as required and requested by State or Local Health Department or private laboratory or facility's normal testing laboratory.
- 5. In the event Test Kits are limited residents exhibiting symptoms, or discharging home or to a lessor restricted environment (AL/IL) from the facility will be given priority for testing.
- 6. The facility will collaborate with State and/or Local Health Department on priority cases and reporting requirements for notification based on IDPH Guidance of 5/28/2020 effective of this policy date.
- 7. Physician orders will be obtained either by residents' Physician or in case of whole facility testing the Medical Director. Physician order may not be required if the State of Local Health Department mandates testing.
- 8. Notification for testing will be made to residents and/or their representatives.
- 9. Testing Criteria: see Testing Scenarios Sections.

- 10. Baseline testing of all residents and staff should be performed as part of the reopening process for SNFs/ICF facilities.
- 11. If cases are identified, continue to test residents until no positive cases are identified per CDC (and CMS guidance as applicable). Previously positive cases do not need to be retested.
- 12. Any resident identified to be positive for COVID-19 (symptomatic or asymptomatic) will be placed into droplet/contact precautions and moved to the COVID-19 designated area.
- 13. Weekly retesting of HCP until no positive cases are identified and at least 14 days have passed without a new case, or per CDC (and CMS guidance as applicable).
- 14. If a new case is confirmed (facility- onset) in a resident or HCP, test all residents and HCP and continue to test until at least 14 days have passed without a new case, or per CDC (and CMS guidance as applicable). Facility-wide retesting of all residents at regular intervals is not necessary if no new COVID-19 cases or symptomatic individuals have been identified. Facility-wide retesting of all residents is warranted for outbreak situations.
- 15. Previously positive residents do not need to be retested unless they develop new symptoms consistent with COVID-19 per CDC.
- 16. If testing capacity is limited follow CDC guidance: https://www.cdc.gov/coronavirus/2019-ncov/hcp/nursing-homes-testing.html

Communication

- 1. Facilities should communicate testing plans and results to the local health departments.
- 2. Facilities should communicate testing plans and results to residents, families, representatives, and healthcare personnel

Quality Assurance and QAPI Review

The Infection Preventionist reviews results and all data as necessary or weekly and reports findings to Facility Administration to address any identified or immediate concerns. Test results will be evaluated by the CQI / QAPI committee and reviewed for analysis of facility's response to COVID and infection control. Patterns and trends (rooms, units, caregivers, etc.) will be included in the facility's evaluation. Line Lists will be included in this review, updated and shared with regulatory agencies as required.

This facility has completed its recap COVID Facility Assessment as required.

This facility has extensive Policies on infection control that are available by request to families, residents and regulatory agencies.

Facility will utilize either IDPH State Laboratory, Quest Laboratory or its contracted laboratory:
