

Welcome and Introductions

Wednesday, October 27, 2021



Belinda Hawks

Division Director, Quality Management and Planning
Behavioral Health and Developmental Disabilities Administration

Today's topics and guests

1. New: Health and Aging Services Administration (HASA)

Katie Commey, MPH

Strategic Partnerships and Special Projects, HASA

2. COVID-19 Pandemic Update

Jennifer Beggs, MPH

Emergency Preparedness Epidemiologist

3. Visitation, Testing, and Quarantine guidance: updates and clarification

Chelsea Ludington, MPH, CIC

Infection Preventionist

Infection Prevention Resource & Assessment Team (iPRAT)

Division of Communicable Diseases



Please note:

Due to upcoming holidays, we will have just one presentation in November and one in December.

- Wednesday, November 10, 2021
- Wednesday, December 8, 2021

Integration of Michigan's Medical Services Administration (MSA) and Adult & Aging Services Agency (AASA)



Katie Commey, MPH
Strategic Partnerships and Special Projects
Health and Aging Services Administration

MSA + AASA = HASA

Announced on October 14, 2021, [EO 2021-14](#) establishes the Health and Aging Services Administration (HASA) within MDHHS to provide more coordinated services to Michigan's growing aging population by combining the former MDHHS Aging and Adult Services Agency (AASA) and Medical Services Administration (MSA) under one umbrella.

What does this mean for COVID-19 response support for Long-Term Care Facilities?

Staff who provided support under MSA and AASA remain the same.

Contact information FOR COVID-19 related-communications remains:

MDHHS-MSA-COVID19@michigan.gov

Read the full press release [HERE](#)



IMPORTANT UPDATES FOR AFC & HFA OPERATORS RELATED TO COVID-19 EMERGENCY RESPONSE

JENNIFER C. BEGGS, MPH

EMERGENCY PREPAREDNESS EPIDEMIOLOGIST

MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES

Source: COVID-19 Map - Johns Hopkins Coronavirus Resource Center (jhu.edu)

Tracking Home

Data Visualizations ▼

Global Map

U.S. Map

Data in Motion

Tracking FAQ



COVID-19 Dashboard by the Center for Systems Science and Engineering (CSSE) at Johns Hopkins University (JHU)

Last Updated: 10/26/2021, 8:22 PM

Total Cases

244,433,059

Total Deaths

4,962,750

Total Vaccine Doses Administered

6,852,210,445

28-Day Cases

11,750,037

28-Day Deaths

198,091

28-Day Vaccine Doses Administered

675,311,951

Cases | Deaths by Country/Region/Sovereignty

US

28-Day: 2,430,281 | 45,908

Totals: 45,608,408 | 738,877

United Kingdom

28-Day: 1,113,163 | 3,421

Totals: 8,894,591 | 140,253

Russia

28-Day: 815,103 | 26,491

Totals: 8,185,400 | 228,581

Turkey

28-Day: 812,780 | 5,972

Totals: 7,879,438 | 69,344



Esri, FAO, NOAA

Powered by Esri

Admin0

28-Day

COVID Data Tracker

Source: CDC COVID Data Tracker

United States

At a Glance

Cases Total **45,468,434**

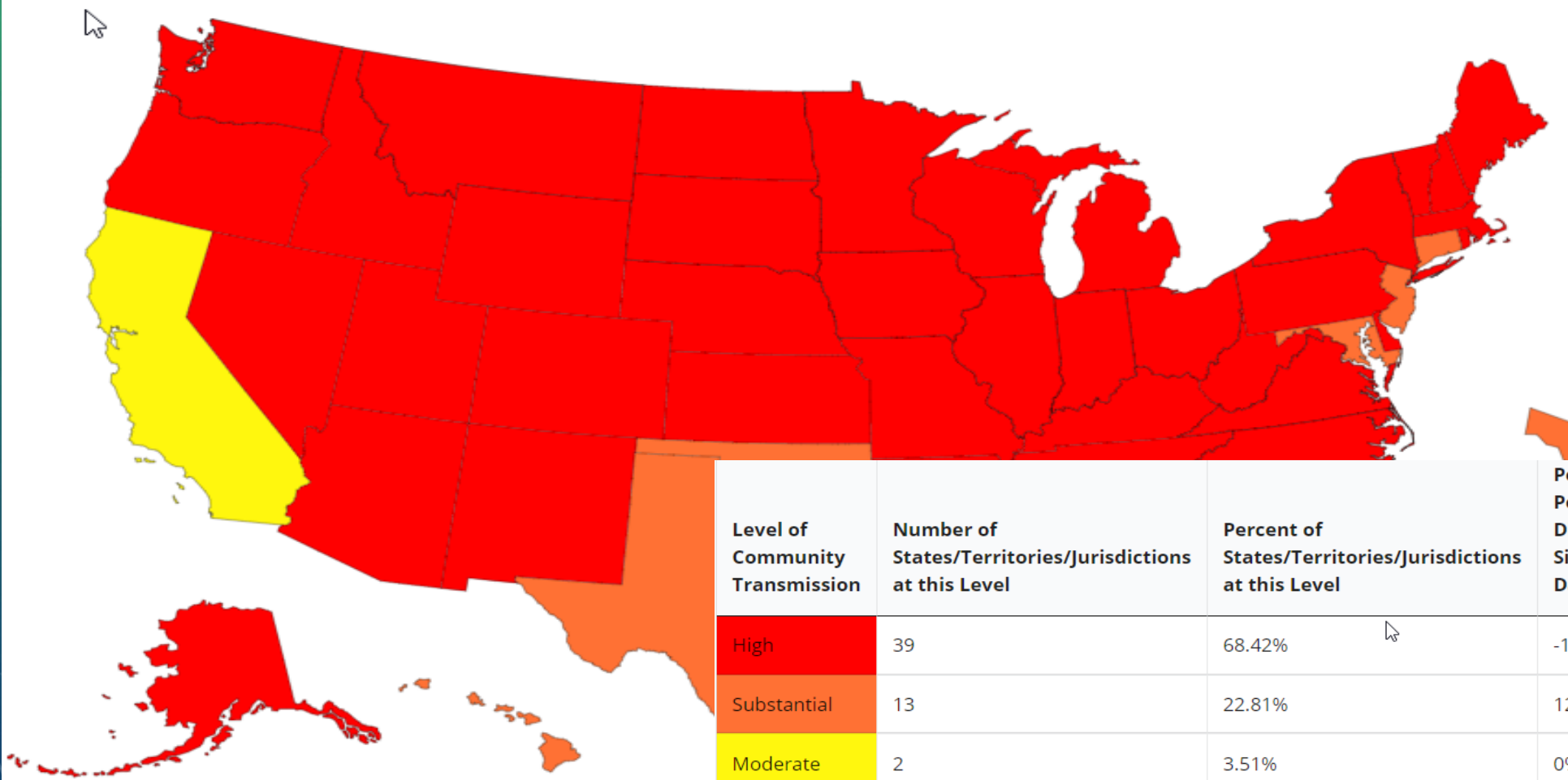
Last 30 Days 

Deaths Total **736,048**

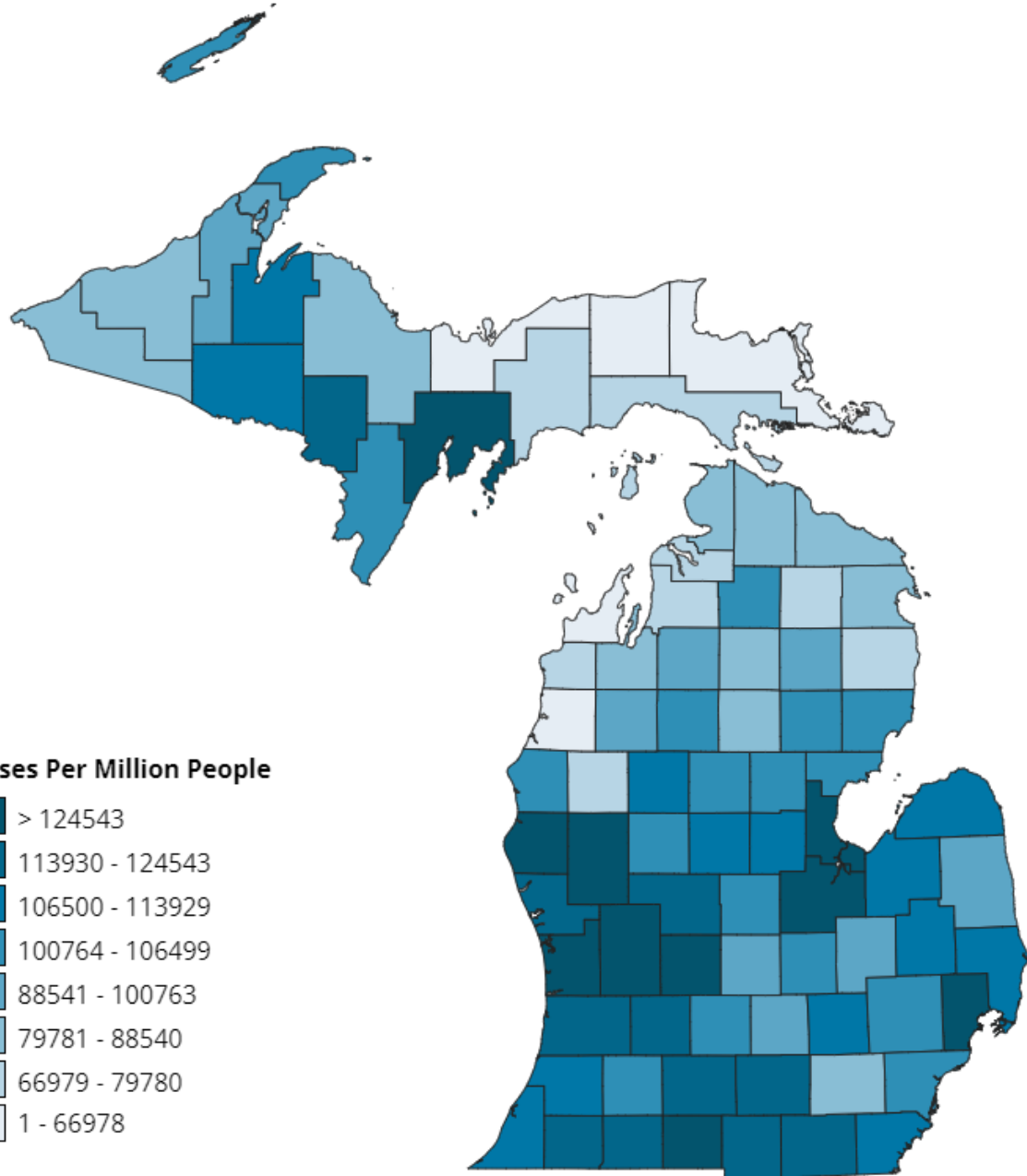
Last 30 Days 

77.7% of People 12+ with At Least

One Vaccination 



Level of Community Transmission	Number of States/Territories/Jurisdictions at this Level	Percent of States/Territories/Jurisdictions at this Level	Percentage Point Difference Since 7 Days Ago
High	39	68.42%	-14.04%
Substantial	13	22.81%	12.28%
Moderate	2	3.51%	0%
Low	3	5.26%	1.75%



Total Confirmed Cases
1,112,490

Total COVID-19 Deaths
21,918

Saturday - Monday
Daily Confirmed Cases
7,856*

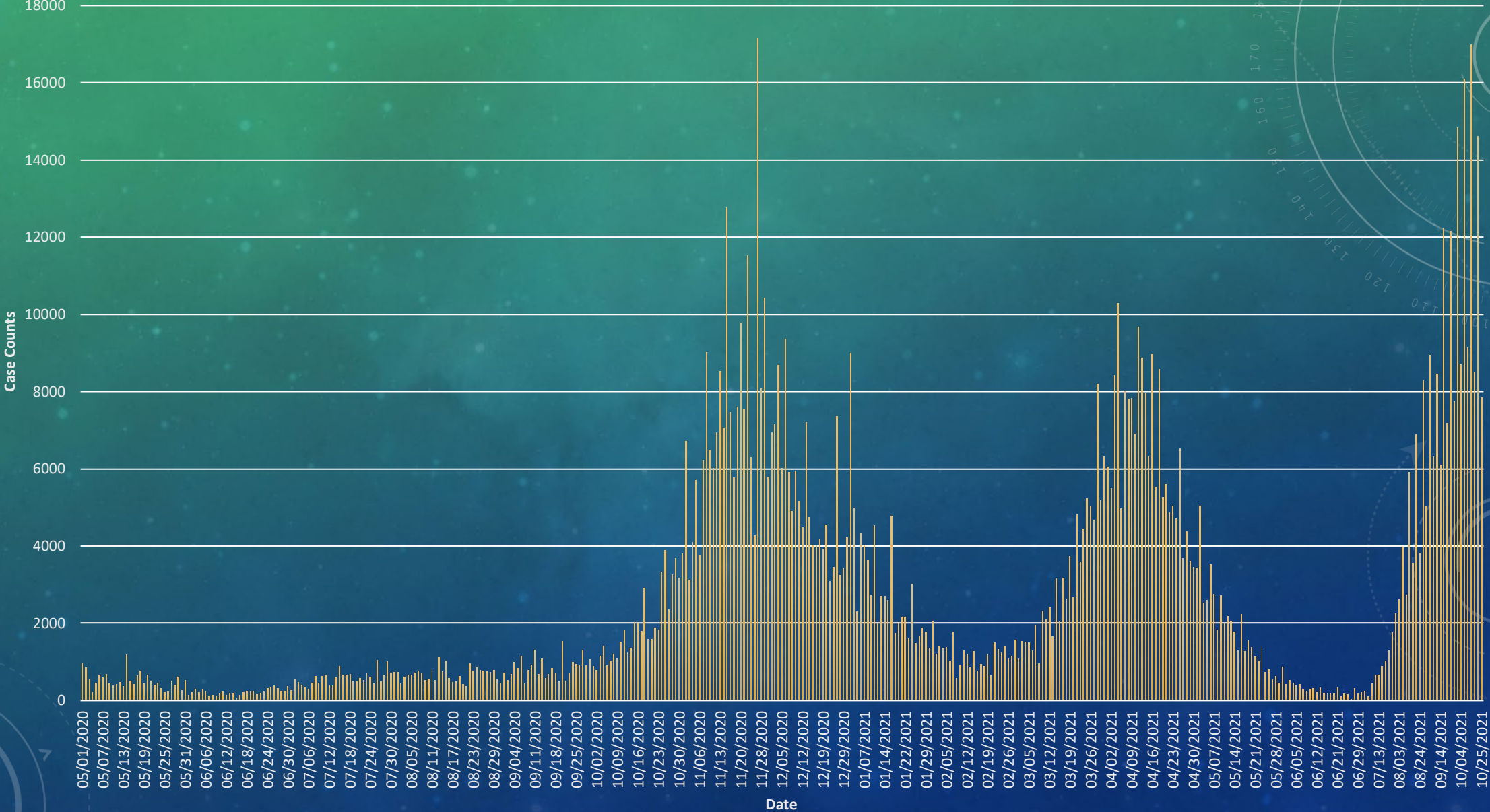
Saturday - Monday
Daily COVID-19 Deaths
56**

*Note on cases (10/25/2021): Today's daily case count represents new referrals of confirmed cases to the MDSS since the last web update report. Over the three days (Saturday, Sunday, and Monday), the average number of new confirmed cases is ~2618 per day.

**The deaths announced today includes 29 deaths identified during a Vital Records review. See cumulative data page for more information.

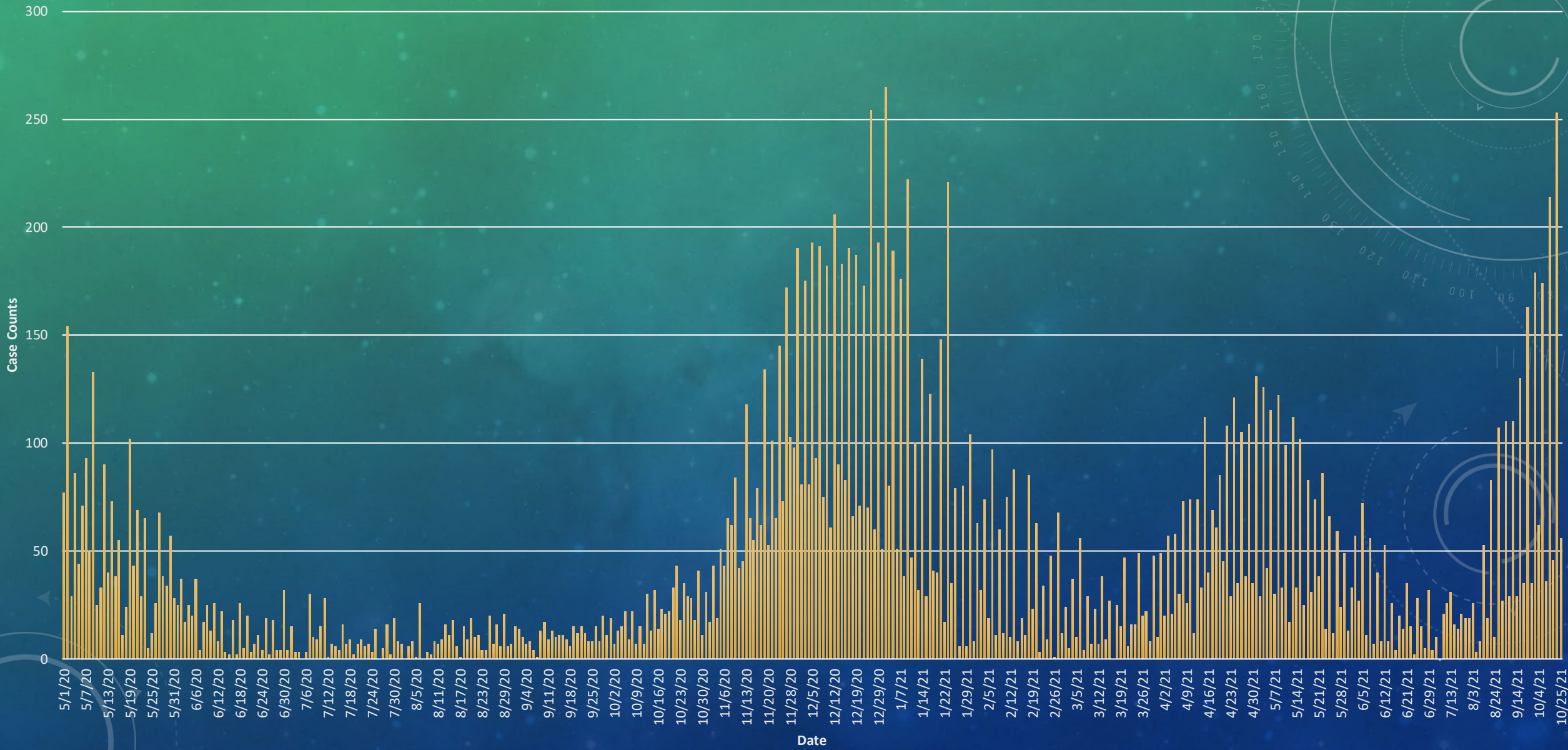
Confirmed Cases, Michigan, 5/1/20-10/25/21

Source: Michigan Disease Surveillance System



Confirmed Deaths, Michigan, 5/1/20-10/25/21

Source: Michigan Disease Surveillance System



MICHIGAN INDICATORS SHOW INCREASE IN COVID-19 ACTIVITY

- As of 10/26/2021, Michigan remains at High Transmission
- Case Rate (312.8 cases/million) have decreased for ~1 week (315.7 last week)
- Percent of inpatient beds occupied by individuals with COVID (10.5%) has increased for 14 weeks (up from 10.2% last week)
- Deaths (4.0 deaths/million) are increasing for two weeks (3.4 deaths/million last week)
- 11.2 million COVID-19 vaccine doses administered, 53.3% of population is fully vaccinated (5.3 million people)
- 137 new outbreaks were identified in the past week
- 678 ongoing outbreaks as of 10/26/21

NUMBER OF OUTBREAKS BY SETTING, MICHIGAN, 10/21/2021

Site type Outbreaks by ongoing/new classification, #

■ Ongoing ■ New Total

Site type	Ongoing	New	Total
K-12 SCHOOL	412	75	487
SNF/LTC/OTHER ASSISTED LIVING	118	26	144
MANUFACTURING, CONSTRUCTION	31	10	41
CHILDCARE/YOUTH PROGRAM	23	2	25
*SOCIAL GATHERING	14	5	19
CORRECTIONS	13	3	16
OTHER	11	4	15
*RETAIL	10	5	15
*RESTAURANTS AND BARS	9	1	10
HEALTHCARE	7	3	10
COLLEGE/UNIVERSITY	9	0	9
OFFICE SETTING	8	1	9
*SHELTERS	5	0	5
*RELIGIOUS SERVICES	3	1	4
*COMMUNITY EXPOSURE - INDOOR	2	0	2
*PERSONAL SERVICES	2	0	2
*COMMUNITY EXPOSURE - OUTDOOR	1	0	1
AGRICULTURAL/FOOD PROCESSING	0	1	1
TOTAL	678	137	815

Total number of active outbreaks is **up 5%** from previous week, with 137 new outbreaks identified

K-12 schools reported the greatest number of new outbreaks and clusters (75) this week, although there was a decrease in reported new outbreaks and clusters since last week (↓ 25, ↓25%)

The next greatest number of new outbreaks was among SNF/LTC (26), followed by manufacturing/construction (10), retail (5), social gathering (5), and 8 other settings with at least 1 new outbreak in the last week.

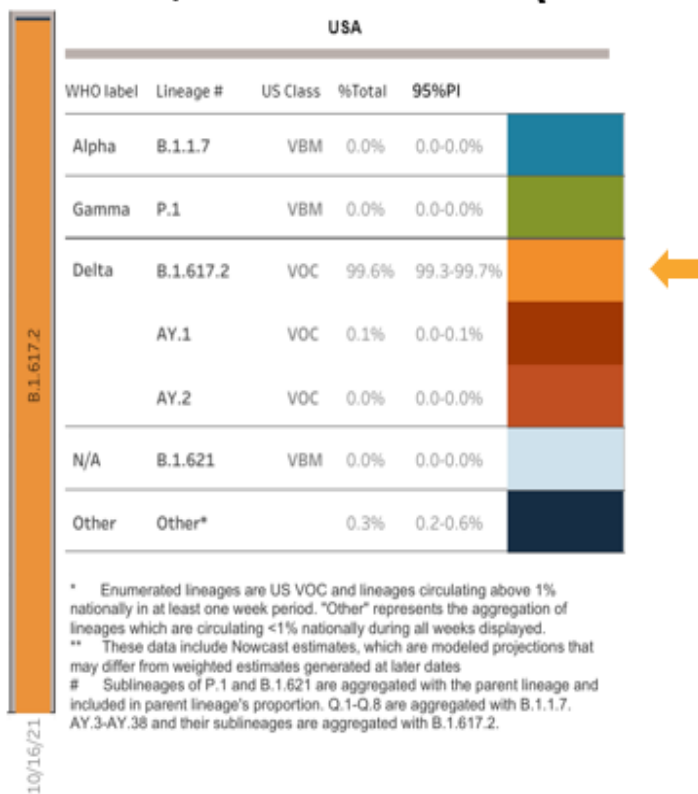
KEY MESSAGES: COVID-19 IS SPREADING FASTER WITH DELTA

- Delta variant (B.1.617.2) causes severe infections and is highly infectious
 - New variant identified in the UK AY.4.2 sub-lineage
- Statewide positivity has increased to 11.4% (last week 11.3 %)
- Of Michigan specimens that had a collection date from within the last 4 weeks and were sequenced as a variant of concern, 100% were identified as the Delta variant.

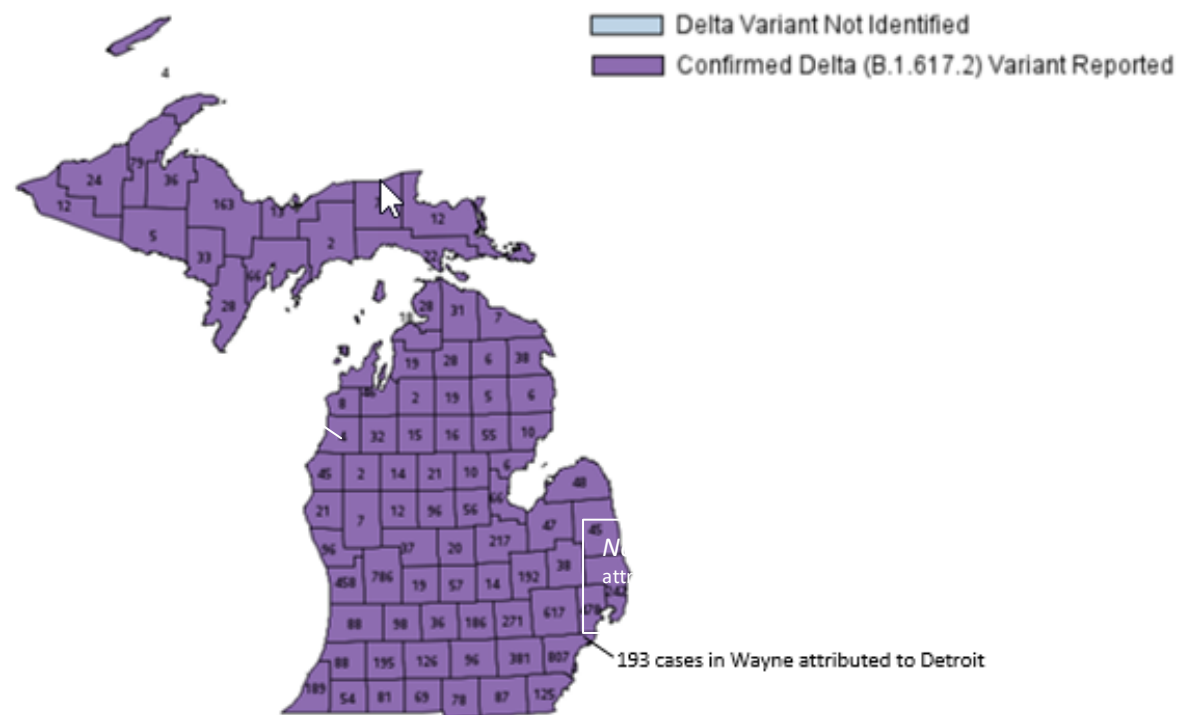
IDENTIFIED COVID-19 CASES CAUSED BY ALL VARIANTS OF CONCERN (VOC) IN US AND MI



SARS-CoV-2 Variants Circulating in the United States, Oct 10 – Oct 16 (NOWCAST)



Variants of Concern in Michigan, Oct 25



Variant	MI Reported Cases ¹	# of Counties	MDHHS Sequenced Prevalence
B.1.617.2 (delta)	7,853	83	100%

Data last updated Oct 25, 2021

Source: <https://covid.cdc.gov/covid-data-tracker/#variant-proportions> and MDSS

COMMUNITY MITIGATION MEASURES

- Get vaccinated
- Stay home if sick
- Socially distance at least 6 feet
- Wear a face covering
- Practice good hand hygiene frequently
- Cover coughs and sneezes with a tissue and immediately throw tissue away
- Frequently disinfect high-touch surfaces

*Currently, CDC recommends all individuals, regardless of vaccination status, should wear masks indoors.



QUESTIONS?

JENNIFER C. BEGGS, MPH
BEGGSJ@MICHIGAN.GOV

LTC Guidance Updates

October 2021

Chelsea Ludington MPH, CIC



IPRAT

Infection Prevention Resource and Assessment Team

Long-Term Care COVID-19 Plan

On March 10, 2020, Michigan recorded its first cases of COVID-19. By the first week in April 2020, the state was tallying about 1,500 cases and 100 deaths per day, and it became clear the state's long-term care facilities were facing immense challenges.

In order to respond to those concerns and provide essential protections to both residents and staff in residential care facilities, the State of Michigan leveraged authority granted by Executive Order and the Michigan Public Health Code. By designated authority, the Michigan Department of Health and Human Services (MDHHS) has acted to prevent and control the spread of COVID-19 by implementing a variety of strategies in the areas of infection control, diagnostic testing, data collection and reporting, and emergency staffing response.

MDHHS and other state partners continue to address and adapt to the changing impact of COVID-19 across the state. Expand the titles below to learn more about each component of the MDHHS Long-Term Care COVID-19 Plan.

Visitation	▼
Testing Strategy	▼
Reporting	▼
Staffing	▼
Infection Prevention and Control	▼
CRC and CRF Programs	▼
Adaptations to the Regional Hub Model	▼
Michigan Nursing Homes COVID-19 Preparedness Task Force	▼
CHRT Nursing Home Evaluation	▼

Quick Access

- Accordion drop downs
- Contains document links
- CRC and CRF tab enhanced

Visitation



Issued October 7, 2021

- Facilities follow [Epidemic Order May 21, 2021](#)
- Aligned with CMS [QSO 20-39-NH](#) (revised 4/27/21)
- If not explicitly addressed in either MDHHS Order or CMS QSO, facilities can consider their own circumstances and infection control protocol to inform operations.

Visitation, Continued

- Schedule visits by appointment
- Number of visitors per resident and visitor age limit are dependent on facility resources and ability to maintain infection prevention core principles per CMS QSO 20-39-NH (revised 4/27/21)
- Disallow visitation during the resident's aerosol-generating procedure or respiratory specimen collection

Visitation, Continued

- MDHHS strongly encourages including temperature checks as part of your screening process
- [Educate](#) visitor on infection prevention practices
 - Masking
 - Hand Hygiene
 - Social Distancing
 - [CDC guidance](#)

Testing



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF HEALTH AND HUMAN SERVICES
LANSING

ELIZABETH HERTEL
DIRECTOR

October 12, 2021

Order under MCL 333.2253
Testing in Skilled Nursing Facilities, Homes for the Aged,
and Adult Foster Care Facilities
Rescission of May 5, 2021 Order

- Adult Foster Care 13 beds or more
- Home for the Aged
- Nursing Homes
- Aligns with CMS [QSO 20-38-NH](#) (revised 9/10/21)

CMS QSO 20-38-NH (revised 9/10/21) uses an outbreak testing summary

Table 1: Testing Summary

Testing Trigger	Staff	Residents
Symptomatic individual identified	Staff, vaccinated and unvaccinated, with signs <i>or</i> symptoms must be tested.	Residents, vaccinated and unvaccinated, with signs <i>or</i> symptoms must be tested.
<i>Newly identified COVID-19 positive staff or resident in a facility that can identify close contacts</i>	<i>Test all staff, vaccinated and unvaccinated, that had a higher-risk exposure with a COVID-19 positive individual.</i>	<i>Test all residents, vaccinated and unvaccinated, that had close contact with a COVID-19 positive individual.</i>
<i>Newly identified COVID-19 positive staff or resident in a facility that is unable to identify close contacts</i>	<i>Test all staff, vaccinated and unvaccinated, facility-wide or at a group level if staff are assigned to a specific location where the new case occurred (e.g., unit, floor, or other specific area(s) of the facility).</i>	<i>Test all residents, vaccinated and unvaccinated, facility-wide or at a group level (e.g., unit, floor, or other specific area(s) of the facility).</i>
Routine testing	According to Table 2 below	Not <i>generally</i> recommended

Contact Tracing Outbreak Testing

Table 1: Testing Summary

Testing Trigger	Staff	Residents
<i>Newly identified COVID-19 positive staff or resident in a facility that can identify close contacts</i>	<i>Test all staff, vaccinated and unvaccinated, that had a higher-risk exposure with a COVID-19 positive individual.</i>	<i>Test all residents, vaccinated and unvaccinated, that had close contact with a COVID-19 positive individual.</i>

- Upon identification of a single new COVID case, staff or resident, outbreak testing should begin
- Close contacts identified for testing
 - Line list to trace contact with positive case
 - Needs someone with contract tracing experience
 - Needs resources (person & time) to complete

Group / Facility Outbreak Testing

Table 1: Testing Summary

Testing Trigger	Staff	Residents
<i>Newly identified COVID-19 positive staff or resident in a facility that is unable to identify close contacts</i>	<i>Test all staff, vaccinated and unvaccinated, facility-wide or at a group level if staff are assigned to a specific location where the new case occurred (e.g., unit, floor, or other specific area(s) of the facility).</i>	<i>Test all residents, vaccinated and unvaccinated, facility-wide or at a group level (e.g., unit, floor, or other specific area(s) of the facility).</i>

- Upon identification of a single new COVID case, staff or resident, outbreak testing should begin
- Identify unit, floor, or other specific area for testing
- Facility-wide testing should begin if outbreak continues

Staff Testing Summary

Uses [CDC COVID Data Tracker](#)

Table 2: Routine Testing Intervals by *County COVID-19 Level of Community Transmission*

<i>Level of COVID-19 Community Transmission</i>	Minimum Testing Frequency of Unvaccinated Staff⁺
<i>Low (blue)</i>	<i>Not recommended</i>
<i>Moderate (yellow)</i>	<i>Once a week*</i>
<i>Substantial (orange)</i>	<i>Twice a week*</i>
<i>High (red)</i>	<i>Twice a week*</i>

⁺Vaccinated staff do not need *to* be routinely tested.

*This frequency presumes availability of Point of Care testing on-site at the nursing home or where off-site testing turnaround time is <48 hours.

Staff Testing Summary, Continued

- Routine testing of unvaccinated staff
- Level of community transmission
 - Monitor every other week
 - Transmission increases move to higher testing cadence
 - Transmission decreases continue current cadence until community transmission has remained at lower level for 2 weeks
 - Maintained lower community transmission then decrease testing cadence

Testing, Continued

- Hospice facilities licensed by the state as a nursing home has same testing cadence
- Asymptomatic individuals recovered from COVID-19 within the last 3 months are exempt unless symptomatic
 - Documented in resident's diagnosis
 - Medical documentation in staff member's file
 - Documentation retained for at least 12 months

Testing, Continued

- Obtain testing consent documentation
 - Protocol for test refusal (staff or resident)
 - Positive test result begins outbreak precautions following [CDC](#) and MDHHS guidance
 - Positive test result begins outbreak testing protocol

Testing, Continued

- Vaccination status documentation
 - Resident's medical record reflecting vaccination given
 - Michigan Care Improvement Registry or immunization record from local health department, hospital, pharmacy, or health system
 - Presentation of a valid CDC vaccination card

LTC Testing Implementation Guidance



STATE OF MICHIGAN

GRETCHEN WHITMER
GOVERNOR

DEPARTMENT OF HEALTH AND HUMAN SERVICES
LANSING

ELIZABETH HERTEL
DIRECTOR

MEMORANDUM

Date: October 12, 2021
To: Skilled Nursing Facilities (SNFs), Homes for the Aged (HFAs), and Adult Foster Care homes (AFCs) licensed to care for 13 or more individuals
From: Michigan Department of Health and Human Services (MDHHS)
Subject: Updated: Implementation of Required COVID-19 Testing

- Provides additional contact tracing guidance for individual with confirmed COVID-19
 - Who developed symptoms, consider exposure window to start 2 days before symptom onset

LTC Testing Implementation, Continued

- Provides additional contact tracing guidance for individual with confirmed COVID-19
 - Who never develop symptoms, start of infection more challenging
 - Exposure date KNOWN - 2 days AFTER their exposure
 - Exposure date UNKNOWN – 2 days PRIOR the positive test collection

LTC Testing Implementation, Continued

- Test any resident or staff with symptoms of COVID-19
 - Whether testing by identified close contacts or broad testing approach
 - Test regardless of vaccination status
 - Test immediately but no earlier than 2 days after the exposure and, if negative, test again 5 to 7 days later
 - Testing should continue, if additional cases are identified, every 3 to 7 days until no new cases for 14 days

LTC Testing Implementation, Continued

- Facilities **may also consider** testing **unvaccinated** residents, staff, and visitors in the following scenarios:
 - Testing of all new or returning residents during intake unless tested in the 72 hours prior to intake
 - Testing of all newly hired staff on their start date or in the 72 hours prior to start date
 - Testing asymptomatic residents who leave the facility frequently
 - While not required, testing visitors to help facilitate visitation
 - Testing of all visitors over the age of 13 prior to entry for indoor visitation (with the exception of visits at the end of life)

Infection Prevention

Quarantine



Revised [October 7, 2021](#)

- Aligned with CMS [QSO 20-39-NH](#) (revised 4/27/21)
- Aligned with CMS [QSO 20-38-NH](#) (revised 9/10/21)
- [CDC](#) Interim Infection Prevention and Control Recommendations to Prevent SARS-CoV-2 Spread in Nursing Homes (revised 9/10/21)

Quarantine

How to Determine Quarantine Status					
*Leave = medical appointment, dialysis, hospital stay, family or community outing, etc.					
	Known Exposure	Symptomatic	Leave is LESS than 24 hours AND no known exposure or symptoms	Leave is MORE than 24 hours AND no known exposure or symptoms	New Admission
Resident Fully Vaccinated ¹	NO Quarantine ²	Quarantine	NO Quarantine	NO Quarantine	NO Quarantine
Resident NOT Fully Vaccinated ¹	Quarantine ³	Quarantine	NO Quarantine	Quarantine Assess risk of exposure ^{4,5,6}	Quarantine ⁶
Resident COVID-19 Recovered in past 90 days	NO Quarantine ²	Quarantine ⁷	NO Quarantine	NO Quarantine	NO Quarantine

- Fully vaccinated residents who are exposed do not need to quarantine
- NOT fully vaccinated resident who left facility for MORE than 24 hours CDC recommends doing a risk assessment for exposure

Contact Us



MDHHS-iPRAT@michigan.gov



517-335-8165



www.Michigan.gov/IPRAT



@MDHHS



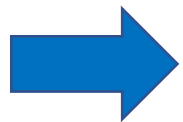
Infection Prevention Resource and Assessment Team



Reminder

A recording of today's presentation will be sent to the groups below, and they will email it to their members.

- Community Mental Health Association of Michigan
- Michigan Assisted Living Association
- Michigan Center for Assisted Living
- Leading Age of Michigan



You can also download the slides from our presentations at Michigan.gov/Coronavirus. Click the RESOURCES tab and select "For AFC and HFA Operators." Scroll to bottom of page.



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- Wednesday, November 10, 2021
- Wednesday, December 8, 2021

Questions on other topics can be sent to:

Staffing: MDHHS-LTCStaffing@michigan.gov

Vaccines: MDHHS-COVID-Longtermcare@Michigan.gov

Testing: MDHHS-COVIDTestingSupport@michigan.gov

Emergency Orders: MDHHS-MSA-COVID19@michigan.gov

All Other Questions:

MDHHS-COVID-AFC-HFA-Response@michigan.gov

- Subscribe to correspondence at this link: [Subscribe](#)