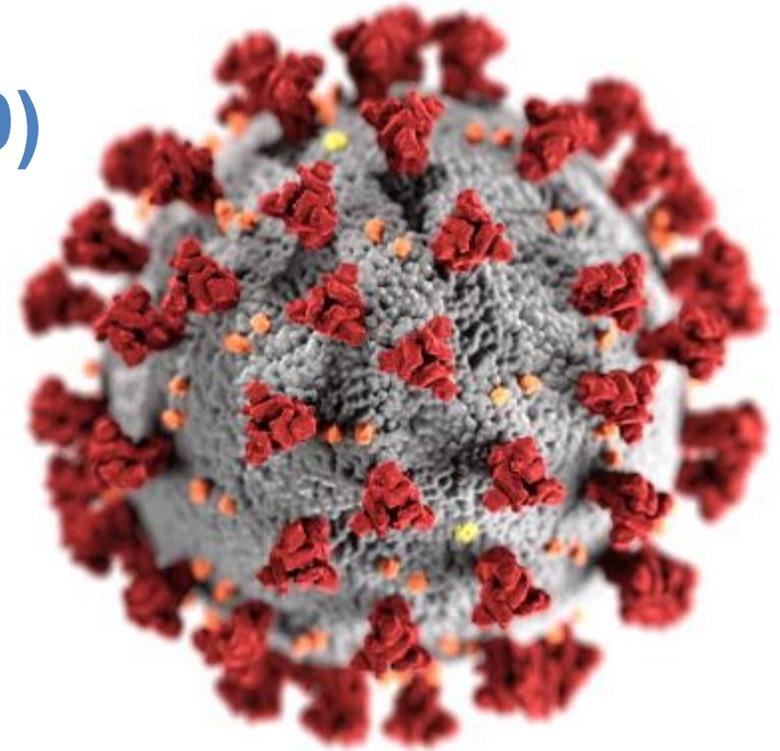


2019 Novel Coronavirus (COVID-19)

South Dakota Department of Health

September 24, 2020



We will begin in just a few moments. Thanks!

This is an **emerging, rapidly evolving situation**. Information in this presentation is current as of September 23, 2020. Please check the South Dakota Department of Health website for the most current information and guidance.

[COVID.sd.gov](https://www.southdakota.gov/covid-19)

Agenda

- Situation Update
- Laboratory Guidance
- Long Term Care
- Community Mitigation
- Supply Chain Management
- On-going Communications
- Q&A Session

Note: Slides and a recording of the presentations will be posted to the website following the webinar.

Request of Medical Providers

- SD-DOH follows CDC isolation and quarantine guidelines and recommends that medical provider provide patient education:
 - Persons being tested for SARS-CoV-2 isolate at home awaiting results
 - A positive test result initiates the action for household members to quarantine
 - All close contacts, with priority to households, be tested for SARS-CoV-2
 - SD-DOH will be contacting the positive case to provide guidance
 - Start a list of close contacts, with phone/email/address, to speed the process
 - Cases can notify close contacts to aid prompt testing
 - Isolation reminder
 - Starting at symptom onset or specimen collection date, recommend staying at home for 10 days plus 24 hours after fever resolves and symptoms improve
 - Quarantine reminder
 - Recommend staying at home for 14 days after the last exposure to a case
 - If a person is within 90 day of their positive test for SARS-CoV-2, no quarantine is recommended due to low risk for reinfection

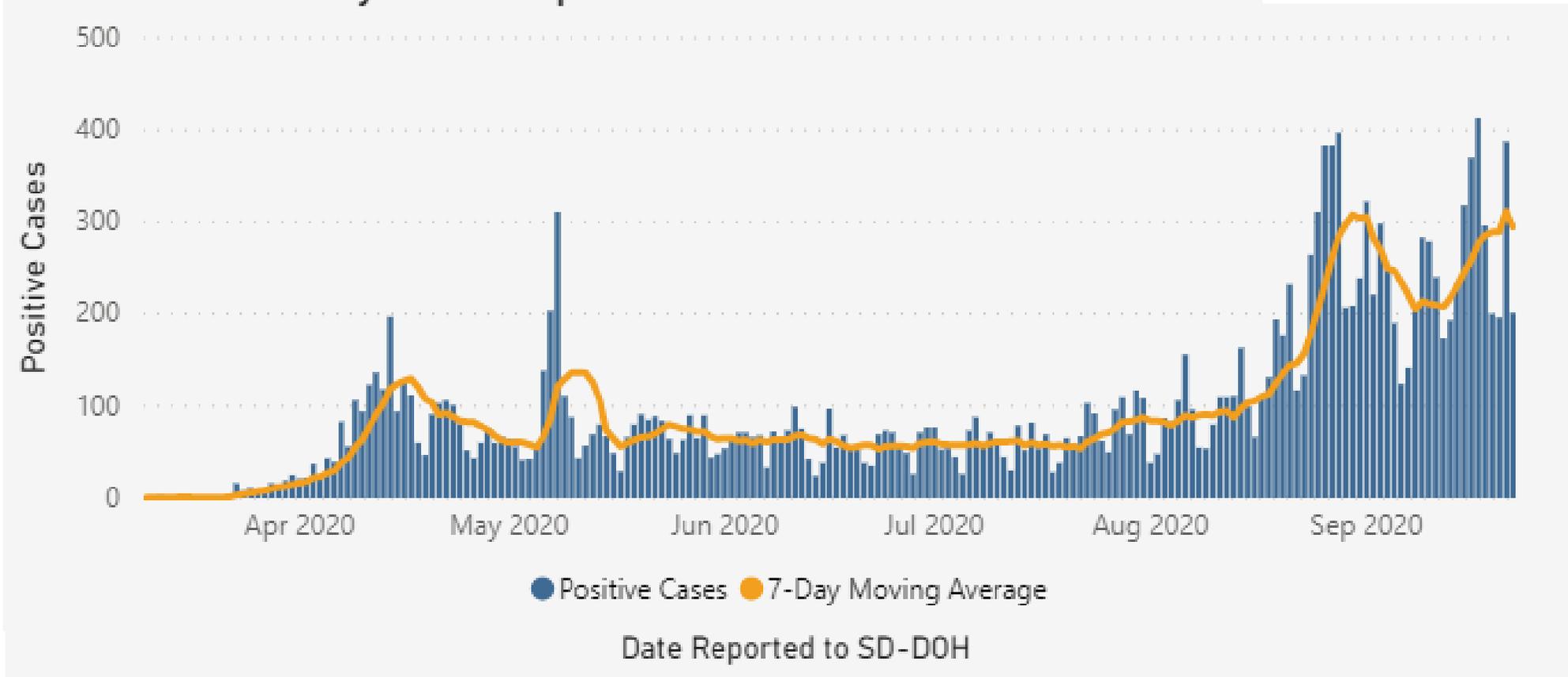
Coronavirus Situation (as of September 23, 2020)

- [International](#)
 - 31,425,029 confirmed cases
 - 967,164 deaths
- [United States](#) (50 states + DC)
 - 6,874,982 confirmed cases in U.S.
 - 200,275 deaths
- [South Dakota](#)
 - 19,634 confirmed cases in South Dakota
 - 202 deaths
 - 16,324 recovered

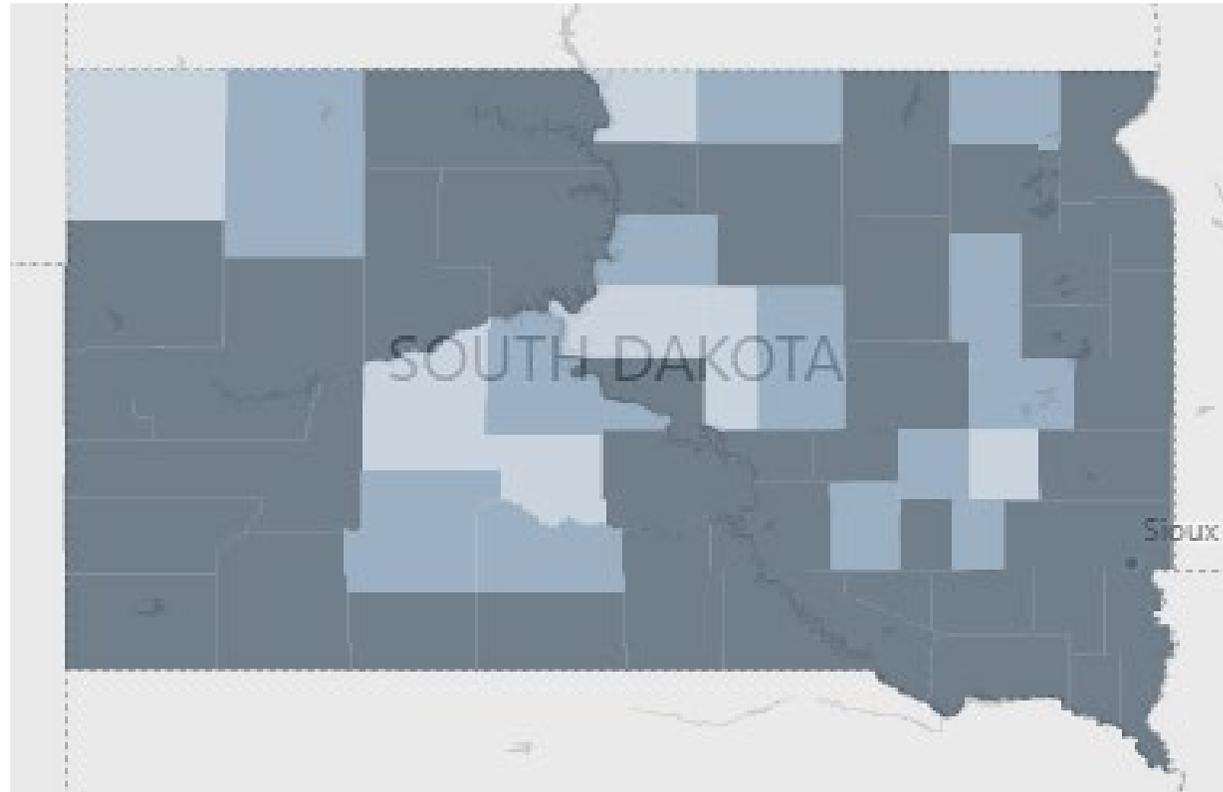
Epidemiologic “Epi” Curve of COVID-19 Cases, by Onset Date

Positive Cases by Date Reported to SD-DOH

As of September 23, 2020



COVID-19 Case Map, by County



Substantial Community Spread

Beadle	Fall River	Lakota*
Bennett	Grant	Pennington
Brookings	Gregory	Roberts
Brown	Hughes*	Spink
Butte*	Jerauld*	Tripp
Clay	Kingsbury*	Turner*
Codington	Lake	Union
Custer	Lawrence*	Walworth
Davison*	Lincoln	Yankton
Deuel	McCook	
Dewey	Meade	34 counties
Douglas	Minnehaha	(* New)
Edmunds	Oglala	

As of September 23, 2020

<https://doh.sd.gov/news/coronavirus.aspx#SD>

General Testing Recommendations

Medical providers are recommended to test individuals with signs and symptoms compatible with COVID-19 infection, including:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

As of June 18, 2020

<https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>



SOUTH DAKOTA DEPARTMENT OF HEALTH

Close Contact Testing Recommendations

The CDC recently released new guidance on close contact testing

Clarification made on September 18, 2020

“Due to the significance of asymptomatic and pre-symptomatic transmission, this guidance further reinforces the need to test asymptomatic persons, including close contacts of a person with documented SARS-CoV-2 infection”

Considerations for SARS-CoV-2 Diagnostic Testing:

- If you have symptoms of COVID-19
 - Consult with your healthcare provider to determine if a test is necessary
 - Isolate for at least 10 days after symptom onset and resolution of fever for at least 24 hours, without the use of fever-reducing medications, and with improvement of other symptoms
- If you have been in close contact and do not have symptoms
 - **Testing is recommended for all close contacts** of persons with SARS-CoV-2 infection

Reporting COVID-19 Tests to SD-DOH

- **Reminder:** Coronavirus respiratory syndromes are a Category I disease
- Report ***immediately*** on suspicion of disease
- Reporting mechanisms:
 - Electronic Laboratory Report (ELR) – HL7 message to SD Health Link (health information exchange)
 - Flat file (CSV) – Secure email
 - Disease reporting website – sd.gov/diseasereport
 - Fax – 605.773.5509

Selected CDC Updates

Available at <https://www.cdc.gov/coronavirus/2019-ncov/whats-new-all.html>

- Interim Laboratory Biosafety Guidelines for Handling and Processing Specimens Associated with Coronavirus Disease 2019 (updated September 19, 2020): <https://www.cdc.gov/coronavirus/2019-nCoV/lab/lab-biosafety-guidelines.html>
- Optimizing Personal Protective Equipment (PPE) Supplies (N95 and Other Respirators section updated September 16, 2020): https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/index.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fhcp%2Foptimize-ppe-supply.html



Laboratory Guidance

Statewide Priority Populations for SARS-CoV-2 Testing

It is a statewide priority that ALL individuals with symptoms of COVID-19 be tested for SARS-CoV-2 with the recommendation from a health care provider

- Hospitalized individuals
- Healthcare workers, first responders, and active military
- Critical infrastructure workers in food manufacturing and agriculture
- Individuals in communal living settings like long-term care facilities
- Underinsured or uninsured individuals
- Low-income individuals or individuals unable to pay for testing
- Homeless individuals

SDPHL COVID-19 Testing Priorities

- Symptomatic hospitalized patients
- Symptomatic healthcare workers, first responders, and active military
- Symptomatic individuals in congregate living settings like long-term care facilities
- Symptomatic individuals with no way to pay for testing
- Asymptomatic participants in state-sponsored sentinel surveillance:
 - Long-term care (staff and residents)
 - K-12 schools (adults)
 - Tribes (October 1, 2020)

FDA EUA Updates

- FDA has issued Emergency Use Authorization for the following:
 - 165 (3): Molecular Diagnostic Tests for SARS-CoV-2
 - 46 (1): Serological Tests
 - 35: Molecular-Based Laboratory Developed Tests for SARS-CoV-2
 - 4: Antigen Diagnostic Tests for SARS-CoV-2
- This week, DOH will review the [Abbott BinaxNow SARS-CoV-2 antigen test](#)

Abbott BinaxNOW COVID-19 Ag Card

- Lateral flow immunoassay for testing of nasal swabs
- Qualitative detection of SARS-CoV-2 nucleocapsid antigen
- For use within the first 7 days of symptom onset (EUA)
- Positive test indicates presence of viral antigen
- Negative result does not rule out SARS-CoV-2 infection
- Negative results from beyond 7 days are presumptive
- Presumptive results may be confirmed with a molecular test
- All results should be considered in clinical context



Abbott BinaxNOW COVID-19: Kit Materials

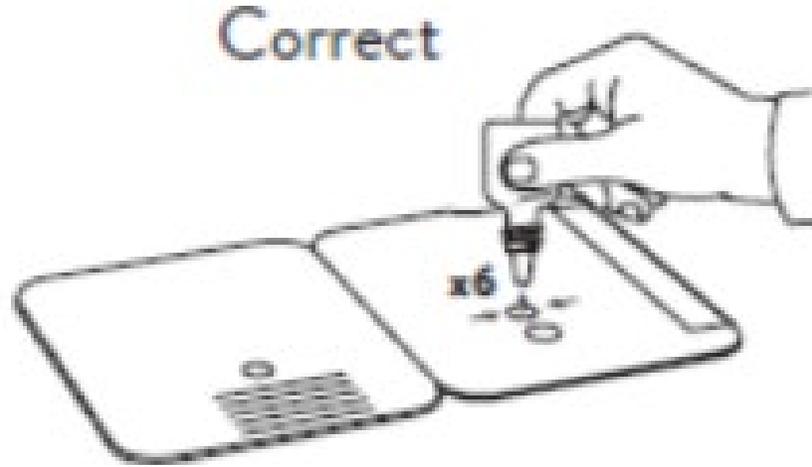
Materials Provided

- Lateral flow immunoassay for testing of nasal swabs
- Test Cards (40): A cardboard, book-shaped hinged test card
- Extraction Reagent (1): Bottle containing 10 mL of extraction reagent
- Nasal Swabs (40): Sterile swabs
- Positive Control Swab (1) : Non-infectious recombinant SARS-CoV-2 swab
- Control Swab: Sterile swab with no recombinant SARS-CoV-2 antigen
- Product Insert (1)
- Procedure Card (1)

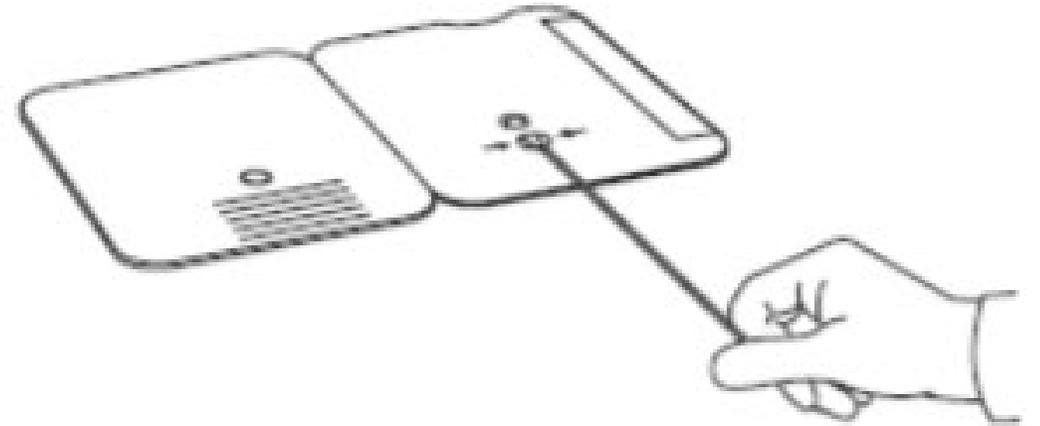
Materials Required but not Provided

- Clock, timer, or stopwatch

Abbott BinaxNOW COVID-19: Procedure

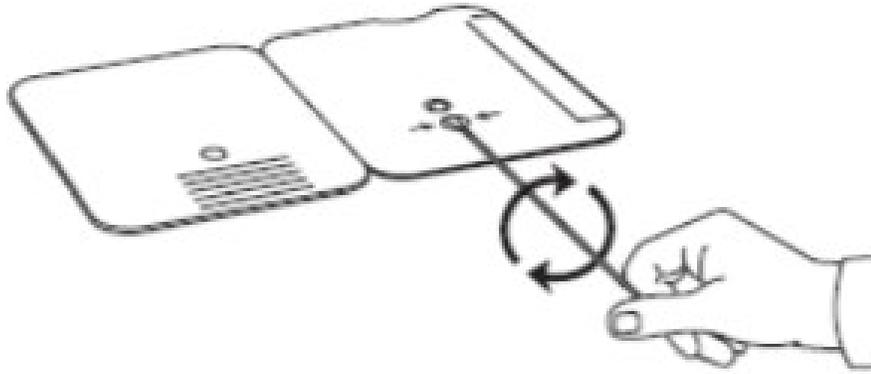


1. Hold extraction reagent bottle vertically
2. Add 6 drops to the top hole of the swab well
3. Do not touch the card with the dropper

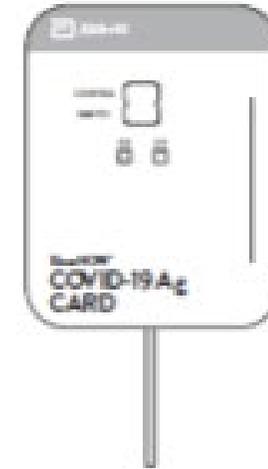


4. Insert sample into the bottom hole
5. Firmly push upwards to the swab tip is visible in the top hole

Abbott BinaxNOW COVID-19: Procedure



6. Rotate swab shaft 3 times clockwise
7. Do not remove swab



8. Peel off adhesive liner from right edge of card
9. Close and securely seal the card
10. Read result in the window in 15 minutes
11. Do not read result after 30 minutes

Abbott BinaxNOW COVID-19: Results

<p>Negative A negative specimen will give a single pink/purple colored Control Line in the top half of the window, indicating a negative result. This Control Line means that the detection part of the test was done correctly, but no COVID-19 antigen was detected.</p>	 <p>Pink/Purple Control Line</p>
<p>Positive A positive specimen will give two pink/purple colored lines. This means that COVID-19 antigen was detected. Specimens with low levels of antigen may give a faint</p>	 <p>Pink/Purple Control Line Pink/Purple Sample Line</p>

Abbott BinaxNOW COVID-19: Results

Invalid

If no lines are seen, if just the Sample Line is seen, or the Blue Control Line remains blue, the assay is invalid. Invalid tests should be repeated.

Invalid Result



No Control Line



Sample Line Only



Blue Control Line Only



Blue Control Line

Sample Line

Abbott BinaxNOW COVID-19: Additional Details

- The federal government purchased 150 million Abbott BinaxNOW COVID Ag tests at cost of \$760M
- The federal government continues to prioritize vulnerable populations including:
 - Long-term care
 - K-12 schools
 - Home healthcare providers

Abbott BinaxNOW COVID-19 in LTC: What to Expect

- BinaxNOW tests will ship between September 14 and December 20
- Test kits will be shipped to qualifying facilities directly from the manufacturer
- Allocation strategy (priority) will be based on CDC hotspot data
- Facilities will need sufficient kit storage space at ambient temperature
- CMS requires LTC facilities have a Certificate of Waiver in place for testing
- Laboratories can extend their Certificate of Waiver to cover off-site facilities
- CMS is exercising enforcement discretion and will allow asymptomatic individuals to be tested with POC antigen tests EUA-approved for symptomatic patient testing

Long Term Care

Disease Impact – United States *as*

of 09.06.20

Resident Cases and Deaths

TOTAL COVID-19 CONFIRMED CASES

223,626

TOTAL COVID-19 SUSPECTED CASES

132,911

TOTAL COVID-19 DEATHS

54,437

<https://data.cms.gov/stories/s/COVID-19-Nursing-Home-Data/bkwz-xpvg/>

Long Term Care in South Dakota * updated LTC only

- **Total Cases in LTC – 226** (*tracking over 50 facilities*)
- **Total Active Cases – 87**
- **Total Deaths in LTC – 15**
- **Total Case in Staff – 460**
- **Total Active Cases in Staff – 49**
- **Total Staff Hospitalized – 17**

Center for Medicare and Medicaid Services (CMS)

Nursing Home Visitation - COVID-19 QSO-20-39-NH

- Visitation Guidance: CMS is issuing new guidance for visitation in nursing homes during the COVID-19 PHE. The guidance below provides reasonable ways a nursing home can safely facilitate in-person visitation to address the psychosocial needs of residents.
- Facilities must have a plan in place to ensure person-care visitation will occur based on the Core Principles of COVID-19 Infection Prevention and the COVID-19 test positivity rate in the community (county).

<https://www.cms.gov/files/document/qso-20-39-nh.pdf>

Nursing Home Visitation - COVID-19

QSO-20-39-NH

The Core Principles of COVID-19 Infection Prevention

- **Screening** of all who enter the facility for signs and symptoms of COVID-19 (e.g., temperature checks, questions or observations about signs or symptoms), and denial of entry of those with signs or symptoms
- **Hand hygiene** (use of alcohol-based hand rub is preferred)
- **Face covering or mask** (covering mouth and nose)
- **Social distancing** at least six feet between persons
- **Instructional signage** throughout the facility and proper **visitor education** on COVID19 signs and symptoms, infection control precautions, other applicable facility practices (e.g., use of face covering or mask, specified entries, exits and routes to designated areas, hand hygiene)
- **Cleaning and disinfecting** high frequency touched surfaces in the facility often, and designated visitation areas after each visit
- Appropriate use of **Personal Protective Equipment (PPE)**
- **Effective cohorting** of residents (e.g., separate areas dedicated COVID-19 care)
- **Resident and staff testing** are accessible

Nursing Home Visitation - COVID-19

QSO-20-39-NH

Facilities should use the **COVID-19 (community) county positivity rate to facilitate indoor visitation**. Community Test Positivity Rates must be obtained from a consistent formal official source using either the [CMS COVID-19 Nursing Home](#) or [State Department of Health data](#).

- Low (<5%) = Visitation should occur according to the core principles of COVID19 infection prevention and facility policies (beyond compassionate care visits)
- Medium (5% – 10%) = Visitation should occur according to the core principles of COVID-19 infection prevention and facility policies (beyond compassionate care visits)
- High (>10%) = Visitation should only occur for compassionate care situations according to the core principles of COVID-19 infection prevention and facility policies

<https://data.cms.gov/stories/s/COVID-19-Nursing-Home-Data/bkwz-xpvg>

<https://doh.sd.gov/news/Coronavirus.aspx>

Nursing Home Visitation - COVID-19

QSO-20-39-NH

Outdoor Visitation

- While taking a person-centered approach and adhering to the core principles of COVID-19 infection prevention, outdoor visitation is preferred and can also be conducted in a manner that reduces the risk of transmission.
- The county positivity rate does not need to be considered for outdoor visitation.

Nursing Home Visitation - COVID-19

QSO-20-39-NH

Indoor Visitation

LTC facilities should accommodate and support indoor visitation, including visits for reasons beyond compassionate care situations, based on the following guidelines:

- There has been no new onset of COVID-19 cases in the last 14 days and the facility is not currently conducting outbreak testing;
- Visitors should be able to adhere to the core principles and staff should provide monitoring;
- Facilities should limit the number of visitors per resident at one time and limit the total number of visitors in the facility at one time; and
- Facilities should limit movement in the facility.

Nursing Home Visitation - COVID-19

QSO-20-39-NH

Entry of Healthcare Workers and Other Provider Services

- Health care workers who are not employees of the facility but provide direct care to the facility's residents, such as hospice workers, Emergency Medical Services (EMS) personnel, dialysis technicians, laboratory technicians, radiology technicians, social workers, clergy, barber, beautician, etc., must be permitted to come into the facility as long as they are not subject to a work exclusion due to an exposure to COVID-19 or show signs or symptoms of COVID-19 after being screened.

Nursing Home Visitation - COVID-19

QSO-20-39-NH

Communal Dining and Activities

While adhering to the core principles of COVID-19 infection prevention, communal activities and dining may occur. Residents may eat in the same room with social distancing (e.g., limited number of people at each table and with at least six feet between each person).

Additionally, group activities may also be facilitated (for residents who have fully recovered from COVID-19, and for those not in isolation for observation, or with suspected or confirmed COVID-19 status) with social distancing among residents, appropriate hand hygiene, and use of a face covering.

Nursing Home Visitation - COVID-19

QSO-20-39-NH

[Access to Surveyors](#)

[Access to Ombudsman](#)

[Access to Federal Disability Rights Laws and Protection and Advocacy \(P&A\) Programs](#)

Nursing Home Visitation - COVID-19

QSO-20-39-NH

Testing

Testing of visitors is not required. Facilities should consider in medium or high-positivity counties to test visitors, if feasible.

If it is decided to test visitors, facilities should prioritize visitors that visit regularly (e.g., weekly), although any visitor can be tested.

Facilities may also encourage visitors to be tested on their own prior to coming to the facility (e.g., within 2–3 days) with proof of negative test results and date of test.

Abbott BinaxNOW COVID-19 Ag Card Point of Care SARS-CoV-2 Diagnostic Test

As part of an initiative led by the U.S. Department of Health and Human Services (HHS) and the Department of and Defense (DOD), the Administration awarded a contract for \$760 million to Abbott for delivery of 150 million rapid, Abbott BinaxNOW COVID-19 Ag Card Point of Care (POC) SARS-CoV-2 diagnostic tests to expand strategic, evidence-based testing in the United States.

The Federal Government continues to prioritize vulnerable populations and has procured tests to send to nursing homes and assisted living facilities with a current CLIA Certificate of Waiver.

Community Mitigation

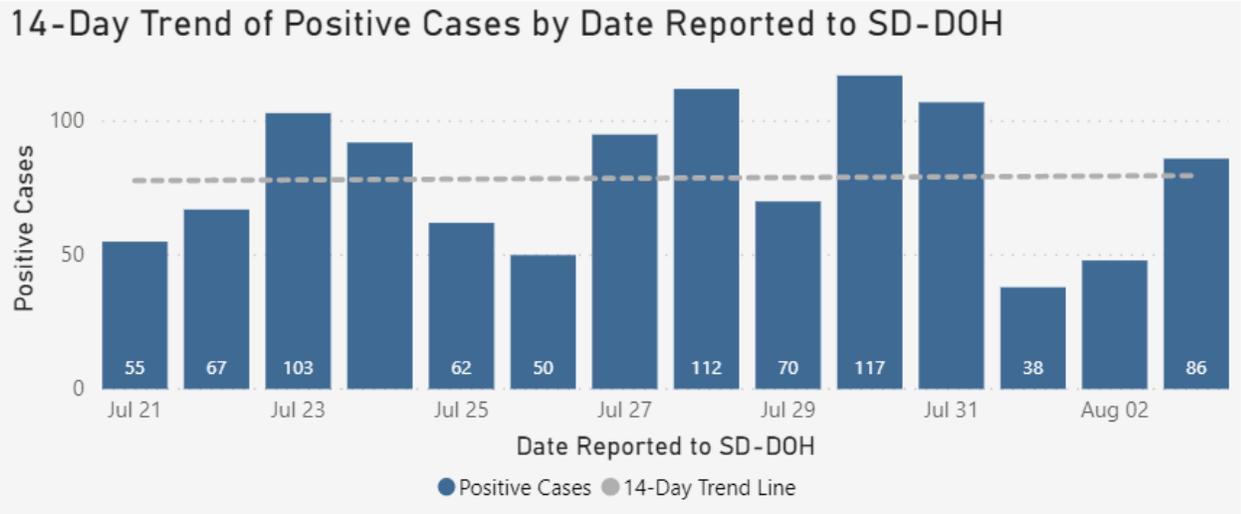
New Cases Today 89	Active Cases 951	Recovered Cases 8,080
Currently Hospitalized 43	Ever Hospitalized 856	Deaths 137
Total Cases 9,168	Total Persons Tested 116,374	Total Tests 145,555
% Progress (June Goal: 44,233 Tests) 97%	% Progress (July Goal: 44,233 Tests) 106%	% Progress (August Goal: 44,233 Tests) 9%

Dashboard

County:

Test Positivity Rate, Last 1 Day 7.5%	Test Positivity Rate, Last 7 Days 7.0%	Test Positivity Rate, Last 14 Days 6.6%	Test Positivity Rate, Cumulative 7.3%
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Test Positivity Rate: This rate is equal to the number of Positive Tests divided by Total Tests, within specified period of time.



Supply Chain Management

PPE Request Procedure

All requests for PPE from DOH must be:

- Emailed to COVIDResourceRequests@state.sd.us,
- Faxed to **605.773.5942**, or
- Called in to **605.773.3048** to ensure prioritization and coordination of requests.

- Do not duplicate your request by using all three means of communication.

- Any requests received through any other email or number will all be directed to email COVIDResourceRequests@state.sd.us OR call **605.773.3048** and requesting entities must provide information regarding their current facility status.

On-going Communication

Helpful sources of information:

covid.sd.gov

coronavirus.gov

SD COVID-19 Help Line: 800-997-2880

SOUTH DAKOTA
COVID-19 INFORMATION LINE

Questions about COVID-19? We're here to help.

PLEASE CALL **1-800-997-2880**



Communications

- SD-HAN: sdhan.sd.gov
- [Epi Listserv](#)
- [Lab Listserv](#)
- [HAI Listserv](#)
- [OLC Listserv](#)

Visit **covid.sd.gov** to subscribe

SOUTH DAKOTA
COVID-19 INFORMATION LINE
Questions about COVID-19? We're here to help.
PLEASE CALL **1-800-997-2880**



Questions?

Follow-up after the webinar

COVID Helpline: 800-997-2880

Epidemiology: 605-773-3737

Laboratory: 605-773-3368

[COVID.sd.gov](https://www.southdakota.gov/covid)

COVIDSD@state.sd.us