2019 Novel Coronavirus (COVID-19)

South Dakota Department of Health

October 8, 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 October 7, 2020. Please check the South Dakota Department of Health website for the most current information and guidance.

[COVID.sd.gov](https://COVID.sd.gov)
Agenda

- Situation Update
- Laboratory Guidance
- Long Term Care
- Infection Prevention
- Community Mitigation
- Supply Chain Management
- On-going Communications
- Q&A Session
Antigen tests are now included as probable cases!

Antigen tests are included in:
• New Total Cases Today
• Total Cases
• Ever Hospitalized
• Total Persons Tested
• Total Tests
• Deaths
• % Progress
• Trend tab, except for RT-PCR Test Positivity Rate

Cases: Persons who meet the national surveillance case definition for COVID-19. According to the case definition, a confirmed case includes persons with a positive RT-PCR test and a probable case includes persons with a positive antigen test for the SARS-CoV-2 virus that causes COVID-19. A positive case moves from active to recovered status based on the CDC guidelines for removal from isolation.
Coronavirus Situation (as of October 7, 2020)

- **International**
  - 35,537,491 confirmed cases
  - 1,042,798 deaths
- **United States** (50 states + DC)
  - 7,436,278 confirmed cases
  - 209,560 deaths
- **South Dakota**
  - 25,906 confirmed cases
  - 258 deaths
  - 21,137 recovered cases
Epidemiologic “Epi” Curve of COVID-19 Cases, by Onset Date

As of October 7, 2020

Positive Cases by Date Reported to SD-DOH

Date Reported to SD-DOH
As of October 7, 2020

COVID-19 Case Map, by County

Substantial Community Spread

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<tr>
<th>County</th>
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<tr>
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<td>Oglala Lakota</td>
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<tr>
<td>Douglas</td>
<td>Moody</td>
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</tbody>
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48 counties

(* New)
How COVID-19 Spreads – updated CDC guidance

Most commonly spreads by respiratory droplets during close contact:

• People who are within 6 feet or have direct contact with a person with COVID-19 are at greatest risk of infection
• Respiratory droplets are produced when a person with COVID-19 coughs, sneezes, sings, talks, or breathes
• Infections occur mainly through exposure to respiratory droplets

Sometimes spreads by airborne transmission

• COVID-19 may be able to infect people who are further away than 6 feet from a person with COVID-19 or after the person has left the space
• Exposure to small droplets and particles that can linger in the air for minutes to hours that are produced by a person with COVID-19 is possible
• Infections can occur by breathing in the small droplets, especially when in enclosed spaces with inadequate ventilation

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
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](http://sd.gov/diseasereport)
  - Fax – 605.773.5509
Selected CDC Updates

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

Considerations for Institutions of Higher Education (updated October 5):

Evidence used to update the list of underlying medical conditions that increase a person’s risk of severe illness from COVID-19 (updated October 6):
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 LTC 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)
  - Corrections (mid-October, 2020)
  - Tribes (mid-October, 2020)
Remdesivir Update

• As of October 1, 2020, no further allocation of remdesivir will be made by the federal government

• Hospitals can now purchase unrestricted amounts of remdesivir directly from the distributor, AmerisourceBergen, who will remain the sole distributor through December 2020

• Hospitals that do not have an account with AmerisourceBergen can establish an account by going to their online ordering portal.

• Questions can be directed to AmerisourceBergen using the following:
  – Phone: 877-746-6273
  – Email: remdesivir@amerisourcebergen.com
Abbott ID Now Tests

**Abbott ID Now**
- Molecular test
- CLIA waived
- Requires the ID Now instrument
- Often performed in a lab or POC
- Frontline healthcare and higher ed

**Abbott BinaxNOW**
- Antigen test
- CLIA waived
- No instrument required
- Often performed POC
- LTC and K-12
Abbott ID Now Test Availability

- SDPHL receives 67 Abbott ID Now Tests kits (1,608 tests) each week from the federal government for distribution throughout South Dakota
- ID Now kits are typically shipped to hospitals and clinics within 24 hours of receipt at the public health laboratory in Pierre, SD
- ID Now test kit placement priorities:
  - Locations with test positivity rates over 10% AND…
  - Facilities that received and ID Now instrument from the state AND…
  - Facilities that have no other method of COVID testing
- SDPHL is purchasing an additional 55 kits each month through a second federal allocation program
As of October 7, 2020: Due to extremely high-demand, Abbott ID Now kits provided by SDDOH should only be used to test individuals with symptoms of COVID-19. Kits provided by the SDDOH prior to October 7, 2020 can be used at the discretion of the recipient but emphasis should always be placed on testing of symptomatic individuals.
ID Now Purchase: Points-of-Contact

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McKesson Medical-Surgical
South Dakota / NW IA / SW MN
605-376-0090
Matt.VanDam@McKesson.com
FDA EUA Updates

- FDA has issued Emergency Use Authorization for the following:
  - 180 (6): Molecular Diagnostic Tests for SARS-CoV-2
  - 53 (2): Serological Tests
  - 35: Molecular-Based Laboratory Developed Tests for SARS-CoV-2
  - 5 (1): Antigen Diagnostic Tests for SARS-CoV-2

- Notable Updates:
  - Serological Test: Assure COVID-19 IgG/IgM Rapid Test Device
  - Diagnostic Test: Biofire FilmArray Panel 2.1-EZ
  - Antigen Test: Quidel Sofia 2 Flu+SARS Antigen FIA
Long Term Care
Disease Impact – United States

as of 09.20.20

Resident Cases and Deaths

TOTAL COVID-19 CONFIRMED CASES
238,283

TOTAL COVID-19 SUSPECTED CASES
138,783

TOTAL COVID-19 DEATHS
57,008

Long Term Care in South Dakota

Nursing Homes and Assisted Living Centers

- Cumulative Total Resident Cases – 694
- Cumulative Total Resident Active Cases – 155*
- Cumulative Total Resident Deaths – 139
- Cumulative Total LTC with Case – 145
- Current Total of LTC with Case - 101
- Cumulative Total Case in Staff – 550
- Total Active Cases in Staff – 243*
- Cumulative Total Staff Hospitalized – 20

*self-reported by touch-base calls
Testing Frequency - based on the extent of the virus in the community (county)

- County positivity rate
  - **Community Activity Low** (<5%) test all staff once per month.
  - **Community Activity Medium** (5-10%) test all staff once per week.
  - **Community Activity High** (>10%) test all staff twice per week.

*This frequency presumes availability of Point of Care testing on-site at the nursing home or where off-site lab testing is available.*


Testing for COVID 19 Testing

Facilities can meet the testing requirements through the use of rapid Point-of-Care (POC) diagnostic testing devices or through an arrangement with an offsite laboratory. Diversify your capability.

**Quidel Sofia 2:**
- COVID Testing kits are available
  - We have a good stock available on these testing kits
  - Full allocation levels should be available in early October

**BD Veritor:**
COVID testing kits have started to roll in more frequently from BD
- Full monthly allocations are available
  - We are able to move product around to meet demands currently

**Abbott Bianax Now:**
These testing kits are not currently available through distribution. The Federal Government will send allocations out to LTC facilities automatically.

*POC Testing Device Re-supply – McKesson or your distributor*
Nursing Home Visitation - COVID-19 QSO-20-39-NH

• CMS guidance for visitation in nursing homes during the COVID-19 PHE. The guidance 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).

• Other factors to allow visitation may include the facility’s COVID-19 status, a resident’s COVID-19 status, visitor symptoms, the lack of visitor adherence to proper infection control practices, or other relevant factors related to the COVID-19 Public Health Emergency (PHE).

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](https://data.cms.gov/stories/s/COVID-19-Nursing-Home-Data/bkwz-xpvg) or [State Department of Health data](https://doh.sd.gov/news/Coronavirus.aspx).

- **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.
Compliance – to meet the intent of the regulations

- Please keep in mind the intent of the regulations and how best to care for residents.

- Facilities can meet the visitation regulation by revising their policies and procedures (plan) to ensure person-centered visitation is reasonably allowed and will occur based on the core principles of COVID-19 infection prevention and the COVID-19 test positivity rate in the community (county).

- Facilities can meet the testing requirements using the rapid Point-of-Care (POC) diagnostic testing devices or through an arrangement with an offsite laboratory.
  - The labs of choice may include Avera, LabCorp, Monument, or Sanford.
  - Use the federal funds through the CARES Act to help support your routine testing efforts.
  - The South Dakota Public Health Lab will not conduct routine testing in Nursing Homes.

- Documentation is key to show compliance.
Infection Prevention
HHS COVID-19 Testing in Nursing Homes State Webinar

The webinar was developed to assist states in their continued outreach on the distribution of COVID-19 antigen tests to long term care facilities. In this webinar, test manufacturers, BD and Quidel, walk through steps associated with performing the BD Veritor and Quidel Sofia SARS-CoV-2 antigen tests.

*Link to Webinar: https://www.youtube.com/watch?v=8oCRqlY1kJw

*PDF of frequently asked questions regarding antigen testing in long term care facilities: https://data.cms.gov/download/tv7a-xetf/application%2Fpdf
• NHSN Point of Care Laboratory Reporting Pathway: CDC’s National Healthcare Safety Network (NHSN) will release a new Point of Care (POC) Laboratory Reporting Pathway within the NHSN LTC COVID-19 Module on October 15, 2020. The new Pathway will enable CMS-certified nursing homes, and other long-term care facilities, to meet the Department of Health and Human Services’ requirement to report SARS-CoV-2 point-of-care antigen test data, and other on-site COVID-19 laboratory testing data, to appropriate federal and state health authorities. Using the pathway will require an upgraded NHSN Secure Access Management Service (SAMS) from Level 1 to Level 3. Please be on the lookout for an email invitation from CDC to perform this upgrade. Nursing homes and other long-term care facilities can also email nhsn@cdc.gov with the subject line “Enhancing Data Security” to begin upgrading their SAMS access to use this Pathway.
PPE Fatigue

*Continue to encourage and reinforce proper PPE use, especially in our HCWs who are wearing it for extended periods of time.


*Educational webinar examining PPE use and fatigue in HCWs, with links to resources and opportunities for improvement: https://www.youtube.com/watch?v=CJlbXadulYY&feature=youtu.be
Infection Control Question?

Email: DOHInfectionControl@state.sd.us
Community Mitigation
Dashboard

New Total Cases Today: 609
New Confirmed Cases: 562
New Probable Cases: 47
Currently Hospitalized: 273
Active Cases: 4,511
Recovered Cases: 21,137
Total Cases: 25,906
Total Confirmed Cases: 25,433
Total Probable Cases: 473
Ever Hospitalized: 1,697
Total Persons Tested: 208,780
Total Tests: 309,841
Deaths: 258

% Progress (September Goal: 44,233 Tests): 216%
% Progress (October Goal: 44,233 Tests): 45%

County:
All

RT-PCR Test Positivity Rate, Last 1 Day: 10.0%
RT-PCR Test Positivity Rate, Last 7 Days: 9.6%
RT-PCR Test Positivity Rate, Last 14 Days: 10.4%
RT-PCR Test Positivity Rate, Cumulative: 8.9%

14-Day Trend of Positive Cases by Date Reported to SD-DOH:

SOUTH DAKOTA DEPARTMENT OF HEALTH
Supply Chain Management
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
Communications

• SD-HAN: sdhan.sd.gov
• Epi Listserv
• Lab Listserv
• HAI Listserv
• OLC Listserv

Visit covid.sd.gov to subscribe
Questions?

Follow-up after the webinar
COVID Helpline: 800-997-2880
Epidemiology: 605-773-3737
Laboratory: 605-773-3368

COVID.sd.gov
COVIDSD@state.sd.us