

Interim Guidance to Mitigate Healthcare System Challenges During COVID-19 and Viral Respiratory Season

December 23, 2021

Summary and Action Items

- COVID-19 case counts in Chicago are currently in the Very High Transmission level with a 7day rolling average [7DRA] of 2,345.
- Positivity is currently 8.6%. At the current pace of increase, it is expected positivity will shortly be above 10%.
- Hospitalizations have been rising with intensive care unit bed capacity at 13.8% available and acute non-ICU bed capacity at 15.7% available as of 12/22/2021.
- CDPH recommends that hospitals implement several interventions now to strengthen hospital response capacity and reduce the risk of COVID-19 exposure to patients and staff.
- CDPH Hospital Visitation Guidance is now based on the <u>Chicago Community Transmission Risk</u> <u>Matrix</u>. Hospitals are currently recommended to follow the visitation guidance for Very High Transmission (Red).

Recommendations for Hospital Interventions During the Current COVID-19 Surge

The Chicago Department of Public Health (CDPH) recommends that hospitals consider several interventions to mitigate the impact of increasing COVID-19 case burden on hospital capacity:

- Restrict visitors according to guidance suggested below to reduce the risk of COVID-19 exposure to patients and staff
- Evaluate emergency surge staffing
- Consider limiting or postponing elective surgeries, in particular those requiring hospitalization, over the next month to preserve bed capacity and staffing
- Ventilators remain in good supply and hospitals should follow the *Resource Request* process if ventilators are needed. Discuss supply and equipment needs with Hospital Emergency Manager / Liaison Officer.
- Assess PPE stores, consider extended use of N95 respirators, and use protective eyewear in all clinical settings
- Conduct audits of compliance with PPE guidance
- Discourage staff holiday gatherings inside and outside of work
- Encourage staff mRNA COVID-19 vaccine boosters (consider offering on-site boosters)
- Assess the capacity of your wellness programs to support staff resilience during this difficult time
 - For hospitals without established wellness programs, consider circulating resources such as <u>www.mentalhealth.chicago.gov</u>
- Stay updated on Chicago's COVID-19 data by frequently viewing CDPH's <u>COVID Dashboard</u>, <u>Hospital Capacity</u> <u>Dashboard</u>, and <u>Chicago Community Transmission Risk Matrix</u>

Hospital Visitation Guidance

CDPH recognizes that throughout the COVID-19 pandemic, hospitals have had to balance the safety of staff and patients with compassionate care and common-sense policies. Hospitals are recommended to use the highest level of transmission risk that any of the <u>Chicago Community Transmission Risk Matrix</u> metrics are in to determine which of the below levels of visitation guidance to implement. Hospitals may implement more stringent visitor restrictions than those recommended by CDPH based on hospital assessment of other factors (e.g., hospital COVID-19 positivity, staffing challenges, nursing or infection control assessment of visitor compliance with masking).

Below is the <u>Chicago Community Transmission Risk Matrix</u>. Currently, hospitals are recommended to follow visitation guidance for Very High Transmission (Red).

	VERY HIGH TRANSMISSION	HIGH TRANSMISSION	SUBSTANTIAL TRANSMISSION	LOWER TRANSMISSION	CONTROLLED TRANSMISSION
COVID-19 CASE DIAGNOSES Chicago residents - 7-day rolling daily average	800+	400 – 799	200 – 399	20 – 199	<20
COVID-19 TEST POSITIVITY Chicago residents - 7-day rolling daily average	10%+	6.6 - 9.9%	5.0 - 6.5%	2 - 4.9%	<2%
EMERGENCY DEPARTMENT VISITS w/ COVID-19 DIAGNOSIS Chicago residents - 7-day rolling daily average	200+	150 - 199	50 – 149	10 - 49	<10
HOSPITAL BEDS (NON- ICU) OCCUPIED BY COVID PATIENTS Chicago hospitals - 7-day rolling daily average	1250+	750-1249	250 - 749	100 – 249	<100
ICU BEDS OCCUPIED BY COVID PATIENTS Chicago hospitals - 7-day rolling daily average	400+	300 - 399	100 – 299	20 - 99	<20

Very High Transmission (Red)

During this period of highest COVID-19 community risk, CDPH recommends the below restrictions, with limited exceptions as noted. All exceptions must be approved by the care team in advance of the visit. A patient's care team may make additional compassionate exceptions, as appropriate, and as permitted by the hospital's infection control and prevention team.

Patients with confirmed COVID-19 or who are being evaluated for COVID-19

- No visitors
- Exceptions may be made for pediatrics, labor and delivery, end of life, and patients with intellectual, developmental or cognitive impairment including dementia, communication barriers or behavioral concerns who require assistance from a companion

Emergency Department:

- Adult: No visitors
 - Exceptions may be made for labor and delivery, end of life, and patients with intellectual, developmental or cognitive impairment including dementia, communication barriers or behavioral concerns
- Pediatrics: One parent or guardian

Adult In-Patient:

• One visitor per day

Pediatric In-Patient:

• Up to two parents or guardians

Obstetrics/L&D:

- Labor and Delivery: One support person and one doula (must be the same people for the duration of labor)
- Mother Baby: One support person (must be the same person throughout the stay)

Outpatient Surgical/Procedure Patients:

• One visitor in pre-procedure and recovery, provided social distancing can be accomplished

Outpatient/Ambulatory Clinics

- Adult: No visitors
 - Exceptions may be made for obstetrics, end of life, and patients with intellectual, developmental or cognitive impairment including dementia, communication barriers or behavioral concerns who require assistance from a companion
- Pediatrics: One parent or guardian

High Transmission or Substantial Transmission (Yellow)

During periods of high or substantial COVID-19 community risk, CDPH recommends limiting visitors, with exceptions as noted below. All exceptions must be approved by the care team in advance of the visit. A patient's care team may make additional compassionate exceptions, as appropriate, and as permitted by the hospital's infection control and prevention team.

Patients with confirmed COVID-19 or who are being evaluated for COVID-19

- No visitors
- Exceptions may be made for pediatrics, labor and delivery, end of life, and patients with intellectual, developmental or cognitive impairment including dementia, communication barriers or behavioral concerns who require assistance from a companion

Emergency Department:

- Adult: One visitor
- Pediatrics: One parent or guardian

Adult In-Patient:

• Adult: One visitor at a time

Pediatric In-Patient:

• Up to two parents or guardians

Obstetrics/L&D:

- Labor and Delivery: One support person and one doula
- Mother Baby: One support person

Outpatient Surgical/Procedure Patients:

• One visitor in pre-procedure and recovery

Outpatient/Ambulatory Clinics

- Adult: One companion
- Pediatrics: Up to two parents or guardians

Lower Transmission and Controlled Transmission (Green)

During periods of lower transmission and controlled transmission, hospitals are permitted to follow their usual visitor protocols. Hospitals may consider implementing visitor limitations during periods of lower transmission when the metrics are on the higher end of that level's range.