Chicago COVID-19 Recovery Report Released

Chicago Mayor Lori Lightfoot this morning released a 104-page advisory report compiled by the city’s COVID-19 Recovery Task Force. The Task Force was co-chaired by the Mayor and former White House Chief of Staff Samuel Skinner and involved a group of more than 200 industry experts, regional government leaders, community-based partners and policymakers.

“I am deeply grateful for the hard work of the Recovery Task Force, and their commitment to doubling down on our mission of building a better Chicago that ends economic hardship, confronts racial inequities and unites all of the City’s residents,” said Mayor Lightfoot. “With their invaluable contributions we will transform the COVID-19 crisis into the once-in-a-generation opportunity that it presents to eliminate the deep, glaring chasms of inequity it has brought to the surface. While we don’t know when this crisis will end, we do know that our recovery from it will not be reached with any short cuts or half measures.”

The Task Force developed a set of 17 recommendations and four existing initiatives to advance a targeted set of outcomes for Chicago. The targeted outcomes include:

- Address new and old traumas;
- Expand economic opportunity, quality employment and financial security;
- Build on our region’s strengths;
- Capture opportunities created by COVID-19;
- Reignite activity throughout Chicago by sharing our story; and
- Accelerate investments to eliminate inequities – including INVEST South/West.

The report (pp. 50-51) calls for strengthening the city’s healthcare and life sciences ecosystem by:

- Expanding access to career opportunities and diversifying the workforce;
- Connecting and leveraging assets effectively (Convene the region’s universities, hospitals, companies, neighborhood-level institutions, VCs, etc. to increase collaboration and form partnerships to convert a greater share of research to business, invest in new infrastructure (e.g., wet-lab space) to strengthen ecosystem and become a life-sciences research capital, and problem-solve (e.g., more federal relief funds for hospitals));
- Making targeted investments to support research and development;
- Investing in neighborhoods; and
- Conducting targeted outreach to attract companies.

Governor Announces Expanded COVID-19 Mobile Testing

Governor J.B. Pritzker yesterday announced the expansion of the state’s mobile testing operation with 12 COVID-19 teams that will offer testing to residents in hard-hit communities and visit facilities such as homeless services centers and nursing homes. Drive-through and walk-up tests are available free of charge to any Illinois resident who wants to be tested at sites in Rock
We now have 12 mobile teams that can be moved anywhere on any given day to mitigate and suppress emerging outbreaks, including places like meatpacking plants, nursing homes, migrant worker housing and other communities less able to access traditional testing clinics. That puts us on the cutting edge nationally in flexible testing to meet the demands of a more open economy – and I'm thrilled that Illinois is leading the way,” said Governor Pritzker. “And to be clear, these mobile teams are in addition to our 11 free, state-run drive through and walk up testing sites across the state.” So far, the state has conducted more than 1.8 million COVID-19 tests, with an average positivity rate of 2.6% for the most recent seven-day reporting period.

The Governor also announced more than 500 Illinois National Guard members will conclude their missions at the 11 state-run testing sites this month, with contract staffers supporting those sites going forward. Approximately 100 Guard members will remain on duty through the end of the month to assist with the transition and other COVID-19 related missions.

Update on Efforts to Develop COVID-19 Vaccines and Treatment

The National Institute of Allergy and Infectious Diseases (NIAID), part of the National Institutes of Health, has established a new clinical trials network that aims to enroll thousands of volunteers in large-scale clinical trials testing a variety of investigational vaccines and monoclonal antibodies intended to protect people from COVID-19. The COVID-19 Prevention Trials Network was established by merging four existing NIAID-funded clinical trials networks: the HIV Vaccine Trials Network, based in Seattle; the HIV Prevention Trials Network, based in Durham, NC; the Infectious Diseases Clinical Research Consortium, based in Atlanta; and the AIDS Clinical Trials Group, based in Los Angeles. These networks will continue to perform clinical trials for HIV vaccine and prevention and other infectious diseases in addition to their new COVID roles.

Meanwhile, the U.S. Department of Health and Human Services (HHS) and Department of Defense (DoD) announced a $1.6 billion agreement with Novavax, Inc. of Gaithersburg, MD, to demonstrate commercial-scale manufacturing of the company’s COVID-19 investigational vaccine. By funding this manufacturing effort, the federal government will own the 100 million doses of investigational vaccine expected to result from the demonstration projects. The doses would become available for use in clinical trials or, if the U.S. Food and Drug Administration (FDA) grants Emergency Use Authorization or licenses the investigational vaccine, the federal government could distribute the doses as part of a COVID-19 vaccination campaign.

HHS and DOD have also reached an agreement with Regeneron, Inc. of Tarrytown, NY, to demonstrate commercial-scale manufacturing of the company’s COVID-19 investigational anti-viral antibody treatment, REGN-COV2. By funding this manufacturing effort, the federal government will own the doses expected to result from the demonstration project – between 70,000 and 300,000 doses – with the initial doses ready as early as end of summer and completed this fall. If the U.S. FDA grants Emergency Use Authorization or approves the treatment, the federal government would allocate these doses to treat COVID-19 patients.

State, National, Global COVID-19 Updates

The Illinois Department of Public Health (IDPH) announced today 1,018 new COVID-19 cases and 20 deaths. The total of new cases reported today is the first time since June 5 that IDPH has reported more than 1,000 new cases in a day. The total number of cases in the state is 150,450 in 102 counties, with a total of 7,119 deaths. IDPH says that in the past 24 hours, 36,180 test specimens have been processed, with a positivity rate of 2.8%. The preliminary seven-day statewide positivity rate from July 2 to July 8 is 2.6%. Statewide COVID-19 hospitalizations in the past 24 hours decreased from 1,518 patients to 1,507 patients. Of that figure, 317 patients were in the ICU, with 153 patients on ventilators.

Today's Centers for Disease Control and Prevention (CDC) figures show more than 3 million confirmed and presumptive positive cases of COVID-19 in the U.S., with 132,056 deaths.

Today's WHO Coronavirus Disease Dashboard shows more than 11.8 million COVID-19 cases globally, with more than 545,000 deaths. The Region of the Americas (includes the U.S.) continues to lead the world with more than 6.1 million cases and more than 272,000 deaths.
IHA has posted a fact sheet detailing the calendar year (CY) 2021 home health prospective payment system (HH PPS) proposed rule. Highlights include a reminder that HH agencies are subject to payment reductions if they fail to submit a Request for Anticipated Payment within five calendar days from the start of care; proposals to make certain COVID telehealth flexibilities permanent; and proposed changes to Core-Based Statistical Areas that impact the wage index. Hospital-specific impact sheets are under development and will be posted in the IHA C-Suite in the coming weeks. Comments on the proposed rule are due Aug. 31.

Register: CMS Compliance Webinars Start July 21
According to accreditation expert Sue Dill Calloway, RN, MSN, JD, recent changes to the Centers for Medicare & Medicaid Services’ (CMS) hospital Conditions of Participation (CoPs) could affect your next accreditation survey. Get clarity with three webinars, offered to IHA members through the Georgia Hospital Association.

Calloway will lead webinars on July 21, 23 and 28, each from 9-11 a.m.:

- **CMS Hospital Improvement Final Rules** on July 21 covers nursing; medical records; infection control; quality assurance and performance improvement; patient rights; history and physical; and restraint and seclusion. [Register today.](#)
- **CMS Hospital Surgery, Anesthesia and PACU Requirements: Are You in Compliance?** on July 23 focuses on CoPs for surgery, anesthesia and post-anesthesia care units (PACU), including the most commonly cited deficiencies and how to avoid them. [Register today.](#)
- **Documentation Update 2020: Ensuring Compliance** on July 28 examines the importance of documentation in avoiding allegations of malpractice, substandard care, accreditation problems and denial of reimbursement. [Register today.](#)

Hospital and health system leaders and staff in compliance, clinical care, quality and safety, risk management, and legal affairs are encouraged to attend.

You can attend any individual webinar; you don’t have to register for the entire series. [Claim your spot today.](#)