



**California Department of Public Health
Center for Health Care Quality
AFC Skilled Nursing Facilities Infection Prevention Call
August 10, 2022**

Weekly Call-in Information:

- Tuesday 8:00am All Facilities Calls: 844.721.7239; Access code: 7993227
- Tuesday 11:30am NHSN Updates & Office Hours (Hosted by HSAG NHSN Experts)
 - <https://bit.ly/NHSNofficeHours2022AugSep>
- 2nd & 4th Wednesdays every month, 3:00pm SNF Infection Prevention Webinars:
 - Register at: <https://www.hsag.com/cdph-ip-webinars>
 - Recordings, call notes and slides can be accessed at <https://www.hsag.com/en/covid-19/long-term-care-facilities/cdph-ip-webinars-past/>

Wednesday Webinar Frequently Asked Questions Document is Posted at:
https://www.hsag.com/globalassets/covid-19/cdph_faqsipwebinars.pdf

Important Links to State and Federal Guidance

Important Links and FAQs to CDPH State Guidance	https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Guidance.aspx
2020 CDPH All Facilities Letters (AFLs)	https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/LNCAFL20.aspx
2021 CDPH AFLs	https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/LNCAFL21.aspx
2022 CDPH AFLs	https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/LNCAFL22.aspx
CDC COVID-19 Data Tracker	https://covid.cdc.gov/covid-data-tracker/#county-view?list_select_state=all_states&list_select_county=all_counties&data-type=Risk&null=Risk
CDPH Wednesday Webinar FAQs	https://www.hsag.com/globalassets/covid-19/cdph_faqsipwebinars.pdf
CDPH Vaccine Guidance and Resources	https://eziz.org/resources-for-longterm-care-facilities/
CDPH Long-Term Care COVID-19 Vaccine Toolkit	https://eziz.org/assets/docs/COVID19/LTCFToolkit.pdf

Testing Questions & Answers

Q-1: How should we treat a situation in which multiple PCR and antigen tests were done within a few days of each other, but the results are different (i.e., 2 antigen tests were positive; 2 antigen tests were negative; and 1 PCR test was negative)? The HCP is asymptomatic and boosted; tests were taken because all HCP are tested weekly, regardless of vaccination status.

A: In this scenario, since community transmission rates are high, treat the positive antigen test result as a true positive. We do not generally recommend confirmatory PCR tests (or other repeated testing) after a positive antigen test is taken during periods of high transmission. Sometimes there are differences in test results due to the quality of the specimen taken at the time of the test. Error on the side of caution because the majority of California counties have substantial to high transmission; ensure the HCW is restricted from work and isolated.

Q-2: A visitor tested positive one day after their visit to the SNF. The resident now has symptoms and tested positive for COVID-19. Does that trigger an outbreak and the need for response testing?

A: Yes. Any resident that tests positive would trigger an outbreak and response testing would be indicated because others may have been exposed.

Q-3: Can antigen tests be used for staff and resident response testing?

A: Yes, antigen tests can be used for response testing if used at least twice a week and may be particularly helpful during the initial rounds of response testing to rapidly identify, isolate, and cohort positives. Confirmatory molecular (e.g., PCR) testing is not required for negative antigen test results during response testing but may be considered (in consultation with your local health department) for higher risk close contacts. If an antigen test is used, testing must be done twice weekly; a PCR test may be used for one of the twice weekly tests if the turnaround time for the PCR result is 24–48 hours. See AFL 22-13.

Q-4: Do all new admissions, regardless of vaccination status, need to be tested on admission?

A: Yes. Newly admitted residents and residents who have left the facility for >24 hours, regardless of vaccination status, should have a series of two COVID-19 tests; immediately upon admission and, if negative, again 5-7 days after their admission. Testing is still recommended prior to admission for residents who are unvaccinated, or not boosted (if eligible), including hospital transfers. SNFs may not require a negative test result prior to accepting a new admission, and should be prepared to isolate or quarantine new admissions as needed if suspected infection or exposure. Those who are fully vaccinated and boosted may be admitted to the green zone, but must undergo the testing described and wear a mask outside of their room until the 5-7 day test is negative; those not vaccinated and boosted should admit to the yellow zone until test results 5-7 days following admission return and are negative. See AFL 22-13 <https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-22-13.aspx>.

Q-5: Does CDPH require or recommend nursing homes to test for COVID-19 postmortem?

A: Testing postmortem is not required by CDPH, but it is a best practice. While CDPH does not require testing postmortem, there are other agencies that have guidance on this, such as the coroners' office, especially at the beginning of the pandemic. CDC has guidance at <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-postmortem-specimens.html>.

Isolation and Quarantine Questions & Answers

Q-6: Is the second booster taken into consideration for contact tracing and quarantine purposes?

A: The CDC terminology “up to date” that includes the second booster (when eligible) is not used in California state guidance at this time. Since the CDC’s recommendation for a second booster applies to the vast majority of SNF residents, it’s reasonable for facilities to consider the second booster in determining whether residents are boosted for the purpose of quarantine and contact tracing decisions. Check with your local health department for more stringent guidance.

Q-7: Do unvaccinated new admissions need to quarantine in the yellow zone, even if they test negative for COVID?

A: Yes. Per AFL 22-13, newly admitted residents and residents who have left the facility for >24 hours who are unvaccinated, or who have completed their primary series and are booster eligible but not yet boosted, should be quarantined in single rooms or a separate observation area ("yellow-observation") for at least 7 days from the date of admission or last potential exposure until results are known for testing obtained within 5-7 days after their admission. Ensure the resident remains asymptomatic before ending quarantine. Testing and quarantine are not required for residents who tested positive for COVID-19 and met criteria for discontinuation of isolation and precautions prior to SNF admission or readmission and are within 90 days of their infection. If the facility has a yellow zone for residents exposed within the facility, it is optimal to not place a newly admitted resident in the same room as residents who have been exposed within the facility.

Q-8: Does a COVID recovered resident (within 90 days) that is exposed to COVID (i.e., by their roommate or an HCW wearing full PPE) need to be tested with an antigen test and quarantined?

A: Since previously positive people are becoming infected with COVID-19 more than once in a 90-day period, all exposures need to be investigated even if it's under the 90 days of recovery. It is recommended to test the exposed resident following the exposure, and quarantine until further investigation is completed.

Q-9: If a new admission did not get the second booster (and they are eligible) do they need to admit to the yellow zone?

A: AFL 22-13 does not incorporate the second booster into the guidance for new admissions, however, the CDC does include the second booster in their up to date definition (<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/stay-up-to-date.html>). Therefore, since the CDC's recommendation for a second booster applies to the vast majority of SNF residents, it's reasonable for facilities to consider the second booster in determining whether new admissions admit to the yellow or green zone. If the resident is not up to date with their vaccines according to the CDC definition, it is recommended that they admit to the yellow zone for observation purposes. Check with your local health department for more stringent guidance.

Q-10: If a new admission's test result came back positive, is that considered an outbreak or a facility acquired infection? The facility currently has no COVID cases and the new admission was quarantined in the yellow zone.

A: If a new admission admits to the yellow zone to quarantine and tests positive upon arrival to the facility, that would not be considered a facility outbreak or a facility acquired infection as long as there were no exposures to other residents and assuming that HCP were wearing appropriate PPE during all care activities. It would be considered acquired either in the community or in the facility or transfer. Notify the facility of transfer of any positive tests upon admission to the new facility.

PPE Questions & Answers

Q-11: Can HCP wear surgical masks rather than N95s in the green zone?

A: Surgical masks are acceptable as source control when HCP are caring for residents in the green zone (and in non-resident care areas). However, HCP should wear N95s as **both** PPE and source control and eye protection in the green zone:

- During an outbreak.
- During care for residents undergoing aerosol generating procedures in a facility located in a county with substantial or high levels of community **transmission** per the CDC COVID Data Tracker (https://covid.cdc.gov/covid-data-tracker/#county-view?list_select_state=all_states&list_select_county=all_counties&data-type=Risk&null=Risk).

Per CDC, to simplify implementation, facilities in counties with substantial or high transmission may consider implementing universal use of N95 respirators for HCP during all patient care encounters or in specific units or areas of the facility at higher risk for SARS-CoV-2 transmission. Check with your local health department to see if they have more stringent requirements.

Note that AFL 20-74 has a chart that summarizes the use of PPE (N95, eye protection, gown, gloves) and use of face masks in different zones by resident category. It is important to understand that an N95 respirator is part of the PPE ensemble. HCP wear N95 respirators for respiratory protection during care of a suspect or confirmed COVID-19 resident. A face mask is worn for source control. Face masks (such as a well-fitting surgical mask, KN95, KN94 or N95), worn by HCP, residents, or visitors, limit emission of the wearers' respiratory secretions for the protection of others around them. More information can be found in the CDPH Wednesday Webinar FAQ document in section I. PPE and Face Masks https://www.hsag.com/globalassets/covid-19/cdph_faqsipwebinars.pdf.

NHSN Questions & Answers

Q-12: Do you have to have level 3 access to report flu immunizations in NHSN?

A: No, you do not need to have level 3 access since you are only reporting cumulative data

Q-13: How do we get access to the new analysis report for COVID-19 data - CMS SNF QRP?

A: Everyone should have access to the new CMS QRP reports in your NHSN account.

Q-14: Will LTC be required to report influenza vaccinations in October 2022?

A: Yes, LTCFs will be required to report flu vaccination data in NHSN for staff starting in October 2022.

Monkeypox Questions & Answers

Q-15: Who should get vaccinated for monkeypox (MPX)?

A: CDC recommends vaccination for people who have been exposed to MPX and people who may be more likely to be exposed to MPX. More information can be found on the CDC website:

<https://www.cdc.gov/poxvirus/monkeypox/vaccines.html>

Q-16: Will nursing home guidance on MPX be distributed?

A: There isn't any written guidance at this time. CDC has guidance for congregate living settings (<https://www.cdc.gov/poxvirus/monkeypox/specific-settings/congregate.html>). CDPH is working on an FAQ document to support nursing homes, with attention to instructions to staff to not come to work with symptoms and evaluation of potential exposures.

Important Links about MPX

- CDC: Isolation and Prevention Practices for People with MPX
<https://www.cdc.gov/poxvirus/monkeypox/clinicians/isolation-procedures.html>
- CDC: MPX Signs & Symptoms <https://www.cdc.gov/poxvirus/monkeypox/index.html>
- CDPH: MPX <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Monkeypox.aspx>
- CDPH: MPX Information for Health Care Providers
<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Monkeypox-HCP-Info.aspx>
- CDPH: Clinical Assist Tool for MPX Evaluation
www.cdph.ca.gov/Programs/CID/DCDC/Pages/Clinical-Assist-Tool-for-Monkeypox-Evaluation.aspx
- Los Angeles County Department of Public Health: What you should know about MPX:
<http://publichealth.lacounty.gov/media/monkeypox/>
- Pasadena Public Health Department: <https://www.cityofpasadena.net/public-health/>
- EPA: Disinfectants for Emerging Viral Pathogens (EVPs): List Q
<https://www.epa.gov/pesticide-registration/disinfectants-emerging-viral-pathogens-evps-list-q>

Visitation Questions & Answers

Q-17: Can an unvaccinated visitor who refuses to test for COVID have an indoor visit?

A: No. Per AFL 22-07, and in compliance with the Public Health Order issued February 7, 2022, beginning February 8, 2022, SNFs must verify visitors are fully vaccinated or have provided evidence of a negative SARS-CoV-2 test within one day of visitation for antigen tests, and within two days of visitation for PCR tests for indoor visitation. Visitors that are unvaccinated or incompletely vaccinated or are unable to show a negative SARS-CoV-2 test may only have an outdoor visit.

Q-18: How long do boosted visitors who tested positive or who were exposed need to isolate/quarantine until they can visit in the nursing home? We have visitors who traveled across the country and one of them tested positive prior to entry. The other is now exposed. We would like to accommodate a safe visit to see their loved one before they travel home.

A: In this scenario, it would be ideal to be able to allow the visitors to see their loved one before they travel home, as long as it can be done safely. Consult with your local health department to ensure the visit is conducted in a manner that adheres to the core principles of COVID-19 infection prevention and does not increase risk to other residents. If it's deemed unsafe to conduct the visit indoors, consider an outdoor visit. Visitation guidance can be found in AFL 22-07.

<https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-22-07.aspx>

Q-19: For indoor visits, is it recommended that nursing homes test all visitors, or just visitors that are unvaccinated or not up to date?

A: Per AFL 22-07, tests are only required for visitors that are unvaccinated or incompletely vaccinated meaning they have not received their first booster, if eligible). Unvaccinated or incompletely vaccinated visitors wanting an indoor visit, must provide evidence of a negative SARS-CoV-2 test within one day of visitation for antigen tests, and within two days of visitation for PCR tests for indoor visitation. If they are unable to show a negative SARS-CoV-2 test, they may only have an outdoor visit. While this is the requirement in the AFL, due to high transmission rates throughout California, to prevent outbreaks, it would be reasonable to offer testing to all visitors, regardless of vaccination status, if they are willing to be tested. Check with your local health department for more stringent guidance.