



**California Department of Public Health  
Center for Health Care Quality  
AFC Skilled Nursing Facilities Infection Prevention Call  
May 4, 2022**

**Weekly Call-in Information:**

- Tuesday 8:00am All Facilities Calls: 844.721.7239; Access code: 7993227
- Wednesday 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/>
- Friday 11:30 Booster Vaccine Quickinars:
  - Register at: <https://bit.ly/FullSpeedAheadBoosterProgram>
  - Recordings: <https://www.hsag.com/covid-19/vaccine-resources>

Wednesday Webinar Frequently Asked Questions Document is Posted  
[https://www.hsag.com/globalassets/covid-19/cdph\\_faqsipwebinars.pdf](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	<a href="https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Guidance.aspx">https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Guidance.aspx</a>
2020 CDPH All Facilities Letters (AFLs)	<a href="https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/LNCAFL20.aspx">https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/LNCAFL20.aspx</a>
2021 CDPH AFLs	<a href="https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/LNCAFL21.aspx">https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/LNCAFL21.aspx</a>
2022 CDPH AFLs	<a href="https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/LNCAFL22.aspx">https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/LNCAFL22.aspx</a>
CDC COVID-19 Data Tracker	<a href="https://covid.cdc.gov/covid-data-tracker/#county-view?list_select_state=all_states&amp;list_select_county=all_counties&amp;data-type=Risk&amp;null=Risk">https://covid.cdc.gov/covid-data-tracker/#county-view?list_select_state=all_states&amp;list_select_county=all_counties&amp;data-type=Risk&amp;null=Risk</a>
CDPH Wednesday Webinar FAQs	<a href="https://www.hsag.com/globalassets/covid-19/cdph_faqsipwebinars.pdf">https://www.hsag.com/globalassets/covid-19/cdph_faqsipwebinars.pdf</a>

**Vaccine Questions & Answers**

**Q-1: Can a new hire in the process of completing the primary vaccine series begin to work?**

**A:** HCP who completed their full primary vaccine series are eligible to begin working without a medical or religious exemption, however, they need to be tested 2 times weekly per AFL 21-28.3 until the 2-week period after vaccination occurs to meet the fully vaccinated definition. Updated guidance is expected to be distributed soon that will clarify the process to onboard new hires that are not fully vaccinated or up to date on their vaccines.

**Testing Questions & Answers**

**Q-2: How often does PCR testing need to occur for response testing?**

**A:** For response testing, PCR testing needs to be done once a week for 14 days.

More information on response testing can be found at:

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Updated-COVID-19-Testing-Guidance.aspx>.

**Q-3: Can antigen tests be used for 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 positive individuals. 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. One implementation option is to substitute one round of response testing per week with a PCR test if the turnaround time for the PCR result is 24–48 hours and use the antigen test for the second test per week.

**Q-4: How can our facility get coverage for testing for uninsured HCP?**

**A:** DHCS's uninsured program for COVID-19 is still in effect until the end of the COVID-19 emergency in CA, so would cover uninsured HCP. More information can be found at:

<https://www.dhcs.ca.gov/services/medi-cal/eligibility/Pages/COVID-19-Presumptive-Eligibility-Program.aspx#:~:text=The%20new%20COVID%2D19%20Uninsured,individual%2C%20for%20up%20to%202012.>

## Visitation & Group Activities Questions & Answers

**Q-5: Do visitors need to wear an N95 when visiting a resident in the yellow zone?**

**A:** Yes. Visitors must wear the same PPE recommended for HCP when visiting residents in the yellow zone, which includes an N95, eye protection, gloves, and gown. HCP should instruct the visitors on proper hand hygiene and donning and doffing PPE. Fit testing is not required for visitors, but the visitors should be instructed how to perform a respirator seal check. Refer to the tables in “Section H. Visitation” in the FAQs for more information ([https://www.hsag.com/globalassets/covid-19/cdph\\_faqsipwebinars.pdf](https://www.hsag.com/globalassets/covid-19/cdph_faqsipwebinars.pdf)).

**Q-6: Family members came to visit a resident, and one of the family members tested positive before entering the facility. If the other family members are fully vaccinated, but now exposed, can they still visit the resident, or does our facility need to restrict visitation for all of them?**

**A:** In this scenario, the visitors that have now been exposed would need to reschedule their visit. Refer to AFL 22-07 visitation guidance, which states:

- “All visitors, regardless of their vaccination status, must be screened for fever and COVID-19 symptoms and/or exposure within the prior 14 days to another person with COVID-19; if a visitor has COVID-19 symptoms or has been in close contact with a confirmed positive case, they must reschedule their visit after their quarantine period has been completed, regardless of their vaccination status.”

**Q-7: Are we still required to obtain copies of vaccination records from visitors?**

**A:** No. The requirement is that the facility develops a process for verifying and documenting the vaccination status of a visitor. They do not need to keep a copy of the vaccination record on file in the facility, Records of vaccination verification must be made available, upon request, to the local health jurisdiction for purposes of case investigation

(<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-of-the-State-Public-Health-Officer-Unvaccinated-Workers-In-High-Risk-Settings.aspx>).

**Q-8: Is it a requirement that visitors sign the log to attest that they were formally screened at entry?**

**A:** No. The facility needs a process to screen visitors and ask the appropriate questions prior to entry, however, there is no explicit requirement for a visitor to have to sign the visitor log to attest to not having COVID-19 or symptoms.

**Q-9: Can visitors dine with residents or do they have to wear their masks at all times?**

**A:** Communal dining guidance can be found in CDPH AFL 22-07. During indoor, in-room visitation, both residents and visitors need to wear well-fitting masks, but if both the resident and visitor are fully vaccinated, they do not need to physically distance, can have physical contact, and must wear a well-fitting face mask unless eating or drinking. Therefore, fully vaccinated residents and fully vaccinated visitors can unmask and eat together while in the resident's room. However, they should be physically distanced from other residents/visitors who may not be fully vaccinated.

**Q-10: Can residents' pets visit the facility?**

**A:** There are no COVID-19 pet requirements or rules around pets. Allowing pets to visit would be at the discretion of each facility.

**PPE Questions & Answers**

**Q-11: Do HCP have to wear eye protection in the green zone?**

**A:** Eye protection (face shields, goggles) is required as PPE during all resident care, including green zones during an outbreak, and during care of residents in the green zone in counties with substantial or high COVID-19 transmission per CDC's 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](https://covid.cdc.gov/covid-data-tracker/#county-view?list_select_state=all_states&list_select_county=all_counties&data-type=Risk&null=Risk)).

- Eye protection in the green zone is NOT required in counties with low to moderate county transmission, unless otherwise indicated as part of standard precautions.
- Eye protection is NOT necessary in non-patient care areas—such as the kitchen, hallways, nurses' station—regardless of county transmission.
- Check with your local health department to see if they have more stringent requirements.

**Q-12: 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 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](https://covid.cdc.gov/covid-data-tracker/#county-view?list_select_state=all_states&list_select_county=all_counties&data-type=Risk&null=Risk)).

**Isolation/Quarantine Questions & Answers**

**Q-13: Do new admissions who are not boosted, but are booster eligible, need to admit to the yellow zone upon admission like unvaccinated and partially vaccinated residents?**

**A:** New admissions that are not up to date with all recommended COVID-19 vaccine doses (including booster, if eligible) should be tested on admission and quarantined for at least 7 days from the date of admission until results are known for testing obtained 5–7 days after admission; ensure the resident remains asymptomatic before ending quarantine.

**Q-14: What is the current quarantine and testing guidance for residents?**

**A:** As of February 2, 2022, CDC updated quarantine and testing recommendations for residents (<https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html>):

- **New admissions and residents who have left for > 24 hours**, regardless of vaccination status, should be tested on admission; and 5–7 days after admission.

- **New admissions** that are **not up to date** with all recommended COVID-19 vaccine doses (including booster, if eligible) should be tested on admission and quarantined for at least 7 days from the date of admission until results are known for testing obtained 5–7 days after admission; ensure the resident remains asymptomatic before ending quarantine.
- **Exposed residents** need to quarantine for 10 days following the exposure; or 7 days if testing is performed between days 5 and 7 and the resident tests negative.  
Note: consistent with CDPH AFL 20-53, this is regardless of vaccination status unless facility has > 90 percent booster coverage in HCP and residents.
- **Exposed residents** who have **recovered from COVID-19 in the previous 90 days** and are asymptomatic should wear source control but do not need to be quarantined, restricted to their rooms, or cared for by HCP using full COVID-19 PPE. In general, testing is not necessary unless they develop symptoms; however, if testing is performed, an antigen test is recommended. Consider quarantine for residents who are moderately to severely immunocompromised.

## NHSN Questions & Answers

**Q-15: Will the NHSN tracking spreadsheet for HCP be updated to reflect the second booster?**

**A:** According to NHSN, they will no longer update the Excel Data Tracking Worksheet starting this month so it will not include the question regarding the second booster.

**Q-16: How do we find the updated CSV files?**

**A:** CSV file templates are updated and posted by NHSN at: <https://www.cdc.gov/nhsn/ltc/weekly-covid-vac/index.html>.

**Q-17: We received an alert saying that there are 0 individuals in our facility that have received a booster dose since August 2021. How could this be possible?**

**A:** It is possible there are duplicate NHSN accounts for your facility. Please reach out to Rose Chen at HSAG for support ([rchen@hsag.com](mailto:rchen@hsag.com)).

## Other Questions & Answers

**Q-18: Have the Medicare waivers been extended?**

**A:** Most of the CMS waivers were extended until July 2022.

<https://www.cms.gov/files/document/covid-19-emergency-declaration-waivers.pdf>. The following waivers are slated to end May 7 and June 7, 2022: <https://www.cms.gov/files/document/qso-22-15-nh-nltc-lsc.pdf>.