







# California Department of Public Health (CDPH) Infection Prevention Webinar

Wednesday, June 22, 2022

## **Upcoming Calls**

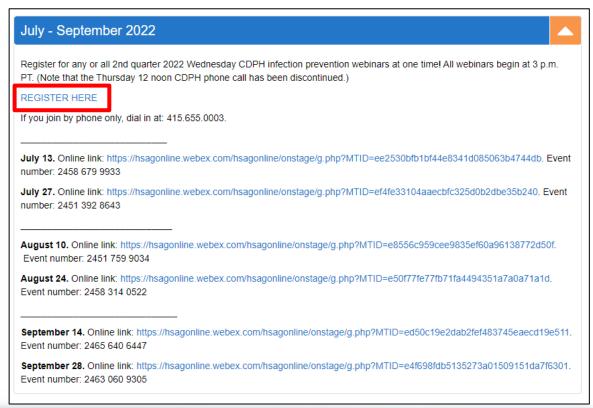




- CDPH Tuesday, 8 a.m., All-Facilities Phone Calls
  - Call in: 1.844.721.7239
  - Access code: 799 3227
- CDPH Wednesday, 3 p.m., SNF Infection Prevention (IP) Webinars
  - Register at: hsag.com/cdph-ip-webinars
  - Recordings, notes, and slides are posted at registration site
- HSAG Tuesday, 11:30 a.m., National Healthcare Safety Network (NHSN) Updates & Office Hours:
  - June registration link: https://bit.ly/NHSNofficehours2022
  - July registration link: https://bit.ly/NHSNJuly2022OfficeHours

## Register for July, August, and September Wednesday Webinars

- Register at: www.hsag.com/cdph-ip-webinars
- Scheduled the 2nd & 4th Wednesdays each month
  - July 13 & 27
  - August 10 & 24
  - September 14 & 28
- Questions
  - covhai@cdph.ca.gov





## Wednesday Webinar FAQ Document

#### **Frequently Asked Questions**

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Important Links: State and Federal Guidance		
Important Links/FAQs to CDPH State	https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Guidance.aspx	
Guidance		
2022 CDPH AFLs	https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/LNCAFL22.aspx	
2021 CDPH AFLs	https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/LNCAFL21.aspx	
2020 CDPH All Facilities Letters (AFLs)	https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/LNCAFL20.aspx	

Note: Revised language is in red type.

CDPH SNF IP Webinar FAQs v2. Revised 05.13.2022

To view the updated document, you may need to clear your cache to force your browser to download a "fresh" version of the website.

- Click the refresh button
- Press Ctrl +F5 simultaneously
- Press Ctrl + Shift + Delete simultaneously

Revised language is in red type.

FAQs v2. Revised 05.13.2022



## Agenda





- CDPH Updates
- Testing Task Force Updates
- NHSN Updates
- Immunization Branch
- Healthcare-Associated Infection (HAI) Updates
- Q&A





## **CDPH Updates**

### **Poll Question**

Is your nursing home using rapid influenza diagnostic tests?

- A. Yes
- B. No
- C. Unsure
- D. Does not apply





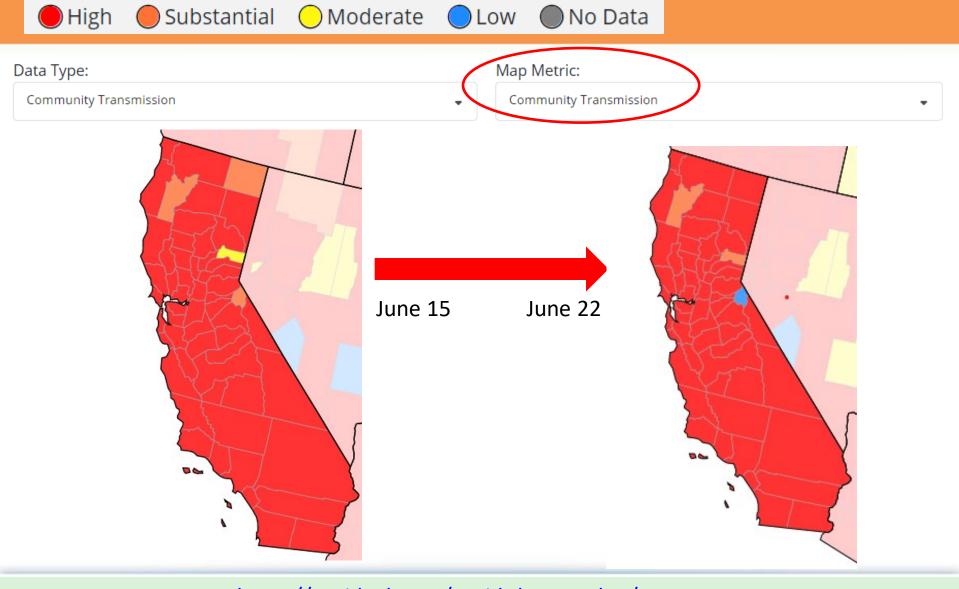
## **NHSN Updates**





## **HAI Updates**

#### CDC COVID-19 Data Tracker



<u>https://covid.cdc.gov/covid-data-tracker/#county-</u>
<u>view?list\_select\_state=all\_states&list\_select\_county=all\_counties&data-type=Risk&null=Risk\_</u>

## **Antigen Test Guidance**

#### Antigen tests can be used for:

- Testing visitors, but the test must be supervised by the facility to verify the identity
  of the individual being tested and the date of the test.
- 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.
- Releasing a resident or HCP from quarantine.
- Twice weekly routine diagnostic screening testing for HCP with exemptions who
  are unvaccinated, or who have completed their primary series and are booster
  eligible but not yet boosted.
- Response testing of exposed residents and HCP, if performed at least twice weekly.
- COVID positive HCP returning to work early due to critical staffing crisis. The test
  needs to be observed by the facility to verify the identity of the HCP being tested,
  the date of the test, and that the test is negative. This proctoring does not need to
  happen physically in person with the HCP. There are options for telehealth or other
  ways to allow for observation of the HCP testing themselves.

## Q: When are confirmatory tests needed following negative antigen tests?

- Confirmatory PCR tests following a negative antigen test result are not required for routine diagnostic screening testing of asymptomatic individuals.
- Confirmatory PCR testing is required for symptomatic individuals following a negative antigen test result.
- Confirmatory PCR testing following a positive antigen test result is not necessary for symptomatic or exposed individuals.
- Confirmatory PCR testing following a positive antigen test result for asymptomatic individuals without a known exposure is not generally necessary but may be considered if there is strong information to suggest that it could be a false positive (i.e., individual was asymptomatic and not exposed; community has low transmission rate). Contact your local health department for guidance in these situations.

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

- Yes, antigen testing 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.
- 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.

### **FAQs**

Q: If a COVID positive resident is experiencing an occasional or intermittent cough as their ONLY symptom, should they be isolated past day 10 until their cough is completely resolved?

A: Isolation can end at day 10 if symptoms have improved; they do not need to be completely resolved.

**Q:** Does a resident who had close contact with a positive visitor need to quarantine?

**A:** If exposure occurred within the facility and a contact tracing approach is used, quarantine would depend on the resident's vaccination status, i.e., if unvaccinated or booster eligible but not boosted.

### **FAQs**

Q: If a resident tests positive during response testing, and symptoms begin 2 days later, is day 1 of isolation the start of symptoms or the day of the positive test result?

A: For persons who develop symptoms, isolation begins on the day symptoms first appeared.

## Questions?















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