



California Department of Public Health (CDPH) Infection Prevention Webinar

Wednesday, January 12, 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
 - Trouble logging in: check link and date at registration site
- CDPH Thursday, 12 noon, SNF IP Phone Calls:
 - Dial-in: **1.877.226.8163**
 - Access Code: **513 711**

Upcoming Educational Opportunities

Host	Educational Opportunity	Link
HSAG	Care Coordination Quickinar Series <ul style="list-style-type: none">• Tuesday, January 18, 11-11:30 a.m.• Tuesday, February 1, 11-11:30 a.m.	www.hsag.com/cc-quickinars
HSAG	Opioid Stewardship Quickinar Series <ul style="list-style-type: none">• Thursday, January 13, 10:30-11 a.m.• Thursday, January 27, 10:30-11 a.m.	htwww.hsag.com/osp-quickinars
CDPH	Project Firstline: IP Training for CNAs <ul style="list-style-type: none">• January: IP while Providing Oral Care and Feeding Residents• February: IP while Changing Linens and Bed Making	https://www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/ProjectFirstline.aspx Sign up for distribution list to receive registration updates.
CDPH	Infection Preventionist Training for SNFs—14-hour self-paced online course; Weekly office sessions offered every Friday, 10-11 a.m.	https://www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/IP_TrainingForSNFs_OnlineCourse.aspx

Updates to CDC's COVID-19 Quarantine and Isolation Guidelines in Healthcare and Non-healthcare Settings

- **Date:** Thursday, January 13, 2022
- **Time:** 11:00 a.m. – Noon PST
- Registration is not required
- **Zoom Link:** <https://www.zoomgov.com/j/1610664006>
- **Passcode:** 468334
- **Telephone:** 1-669-254-5252
- **Webinar ID:** 161 066 4006
- Presenters will discuss the science supporting these changes, the populations and settings to which these changes apply, and additional precautions people should take at the end of quarantine or isolation.



Agenda



- CDPH Updates
- Testing Task Force Updates
- Immunization Branch Updates
- Therapeutic Treatment Updates
- National Healthcare Safety Network (NHSN) Updates
- Healthcare-Associated Infection (HAI) Updates
- Q&A



CDPH Updates

CDPH Updates

Guidance	Date	Link
State Public Health Officer Order – Amended with HCP Booster Requirement	Dec. 22, 2021	https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-of-the-State-Public-Health-Officer-Health-Care-Worker-Vaccine-Requirement.aspx
AFL 21-34.1 COVID-19 Vaccine/Booster Requirement	Dec. 27, 2021	https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-34.aspx
AFL 20-53.6 COVID-19 Testing in SNFs	Dec. 27, 2021	https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-53.aspx
AFL 21-28.1 COVID-19 Testing, Vaccination Verification and PPE for HCP at SNFs	Dec. 27, 2021	https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-28.aspx
CDPH Guidance for Isolation & Quarantine for General Public	Dec. 30, 2021	https://www.cdph.ca.gov/programs/cid/dcdc/pages/covid-19/guidance-on-isolation-and-quarantine-for-covid-19-contact-tracing.aspx
CDPH Requirements for Visitors in Acute Health Care and Long-Term Care Settings	Dec. 31, 2021	https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-of-the-State-Public-Health-Officer-Requirements-for-Visitors-in-Acute-Health-Care-and-Long-Term-Care-Settings.aspx
AFL 21-08.7 Guidance on HCP Quarantine and Isolation	Jan. 8, 2022	https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-08.aspx



Testing Taskforce

Poll—Our influenza vaccination rates are:

Staff Influenza Rates:

- A. 100%
- B. 80-99%
- C. 60-80%
- D. 40-60%
- E. 20-40%
- F. 0-20%
- G. Other (enter in chat)

Resident Influenza Rates:

- A. 100%
- B. 80-99%
- C. 60-80%
- D. 40-60%
- E. 20-40%
- F. 0-20%
- G. Other (enter in chat)



Immunization Branch Updates



Therapeutic Treatment Updates

Advanced Therapeutics for Omicron

Updated: 1/11/22

Rx	Risk Reduction	When	Route	Duration	Availability
Paxlovid (nirmatrelvir/ ritonavir)	88%	Within 5 days of sxs/+ test	PO	5 days	Retail/LTC Rx – Limited
Sotrovimab	79%	Within 10 days of sxs/+ test	IV	Single Infusion	Hospitals - Limited
Remdesivir	87%	Within 7 days of sxs/+ test	IV	3 days	Hospitals
Molnupiravir	30%	Within 5 days of sxs/+ test	PO	5 days	Expected in Retail Rx/LTC
Pre-exposure Prophylaxis	Risk Reduction	When	Route	Duration	Availability
Evusheld (tixagevimab /cilgavimab)	77%	Q 6 mos. for immunocomp	IM	Two Consecutive Injections	Hospitals - Limited

IDSA Treatment Prioritization

Tier	Risk Group
1	Immunocompromised individuals regardless of vaccine status or Unvaccinated individuals age >74 or age >64 with additional risk factors*
2	Unvaccinated individuals age >64 or age <65 with risk factors*
3	Vaccinated individuals age >74 or age >64 with additional risk factors*
4	Vaccinated individuals age >64 or age <65 with risk factors*
*	Risk factors for progressing to severe COVID include advanced age, cancer, cardiovascular disease, CKD, chronic lung disease, DM, immunocompromised, obesity, pregnancy, sickle cell disease, other conditions

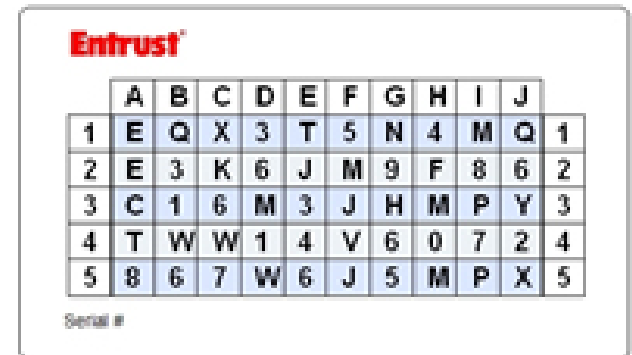


NHSN Updates

Monthly Reporting Plans

- Monthly reporting plans will be required to enter weekly HCP & resident COVID-19 Vaccination data
- Level-3 access required by **March 27, 2022**

SAMS Grid Card



SAMS = Secure Access Management Service

Identity Proofing—New Faster Option

Experian

- Provide Experian credit reporting service your social security number and date of birth.
- Experian will ask questions to validate information.
- No impact to your credit score.

This is the fastest and most secure method to complete the SAMS identity proofing process

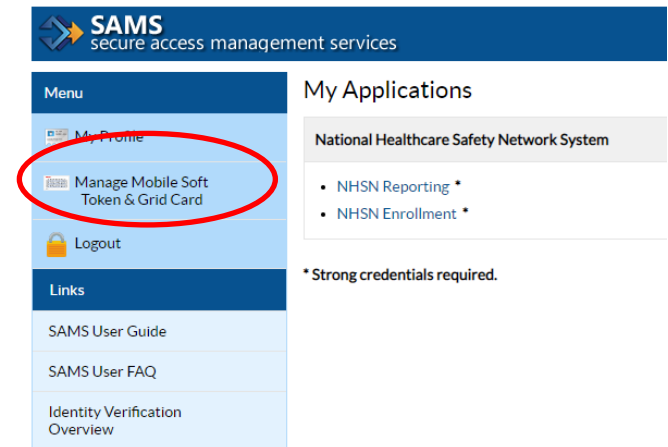
Entrust Identity App

New NHSN users

- Instructions on how to set up the Entrust Identity app will be emailed to you once you complete the identity proofing steps.

Current Grid Card Users

- Click on the “Manage Mobile Soft Token” link after logging in to SAMS for instructions on how to set up the app.



NHSN Best Practice

Be sure to have multiple NHSN users in your facility to ensure continue access to reporting and avoid costly citations.



Updated NHSN Vaccine Data Trackers

These trackers calculate your data for you on a weekly basis

Data Tracking Worksheets

[Data Tracking Worksheet Quick Reference Guide](#)  [PDF – 600 KB] – May 2021

New! [Data Tracking Worksheet for COVID-19 Vaccination among Residents](#)  [XLS – 8 MB] – January 2022

New! [Data Tracking Worksheet for COVID-19 Vaccination among Healthcare Personnel](#)  [XLS – 8 MB] – January 2022

Questions or Need NHSN Help?

- Reach out to Simi Williams at **swilliams1@hsag.com** or 630.777.4643.
- Or email NHSN at **nhsn@cdc.gov**.





HAI Updates

AFL 21-08.7 Guidance on Quarantine/Isolation

- AFL 21-08.6 Updated December 30, 2021.
- AFL 21-08.7 Updated January 8, 2022.
- Due to critical staffing shortages because of the rise in the Omicron variant, the AFL temporarily adjusts the quarantine and isolation return-to-work criteria from January 8 to February 1, 2022.

<https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-08.aspx>

January 8 to February 1, 2022: Temporary Isolation, Quarantine and Return to Work Criteria for HCP

- HCPs who have tested positive and are asymptomatic may return to work immediately without isolation and testing.
- HCPs who have been exposed and are asymptomatic may return to work immediately without quarantine and testing.
- HCPs must wear an N95 respirator for source control.
- These HCPs should preferably be assigned to work with COVID-19 positive patients. However, this may not always be possible in areas experiencing extreme staffing shortages.
- **Facilities implementing this change must have made every attempt to bring in additional registry or contract staff.**
- Temporary adjustment does not preclude facilities from implementing more protective measures, (e.g., 5 days with negative test).

AFL 21-08.7 Guidance on Quarantine/Isolation

The tables below are temporarily waived from January 8 to February 1, 2022, due to staffing shortages.

Work Restrictions for HCP with SARS-CoV-2 Infection (Isolation)

Vaccination Status	Routine	Critical Staffing Shortage
Boosted, OR Vaccinated but not booster-eligible	5 days* with negative diagnostic test [†] same day or within 24 hours prior to return OR 10 days without a viral test	<5 days with most recent diagnostic test [†] result to prioritize staff placement [‡]
Unvaccinated, OR Those that are vaccinated and booster-eligible but have not yet received their booster dose	7 days* with negative diagnostic test [†] same day or within 24 hours prior to return OR 10 days without a viral test	5 days with most recent diagnostic test [†] result to prioritize staff placement [‡]

Work Restrictions for Asymptomatic HCP with Exposures (Quarantine)

Vaccination Status	Routine	Critical Staffing Shortage
Boosted, OR Vaccinated but not booster-eligible	No work restriction with negative diagnostic test [†] upon identification and at 5-7 days	No work restriction with diagnostic test [†] upon identification and at 5-7 days
Unvaccinated [§] , OR Those that are vaccinated and booster-eligible but have not yet received their booster dose [§]	7 days with diagnostic test [†] upon identification and negative diagnostic test [†] within 48 hours prior to return	No work restriction with diagnostic test [†] upon identification and at 5-7 days

FAQs

- When HCP return to work while still COVID-19 positive, do they need to be included in response testing?
- Did the “no testing with 90 days of a positive test” guidance change?
- When HCP return to work while still COVID-19 positive, should the unit they work on turn into a yellow zone because the residents are now exposed? If yes, should the residents now be tested?
- If utilizing crisis staffing strategies, should the facility report “yes” or “no” on the CDPH Daily 1, 2, 3 survey for staffing shortages?

FAQ

Q: Is Hotel for Health Care Workers (HFHCW) still in effect?

A: HFHCW is administered by the Governor's Office of Emergency Services (Cal OES) and provides free or discounted hotel rooms to HCP so they do not expose their household to COVID-19.

- The program ended on June 15, 2021, for most counties except for Riverside, Imperial and San Diego counties.
- If a county is added to or removed from the program after June 15, 2021, the authorized Points of Contact at affected facilities will be notified.
- Nursing homes must be reporting cases and completing the CDPH Daily 1, 2, 3 survey to qualify.

<https://www.dgs.ca.gov/OFAM/Travel/Resources/Page-Content/Resources-List-Folder/COVID-19-Obligations-of-Health-Care-Workers>





ClearPol <https://beta.clearpol.com/>

- Easy to use, free search engine for quickly accessing and comparing past and current federal and state guidance
- Tutorial video: https://www.youtube.com/watch?v=iYWKkw_oSmQ

AFL 21-08.6 December 30, 2021

AFL 21-08.7 January 8, 2022

List of Changes

 <p>State of California—Health and Human Services Agency California Department of Public Health</p> <p><small>TOMÁS J. ARAGÓN, M.D., Dr.P.H. State Public Health Officer & Director</small></p> <p>December 30, 2021</p> <p>TO: General Acute Care Hospitals (GACHs) Acute Psychiatric Hospitals (APHs) Skilled Nursing Facilities (SNFs)</p> <p>SUBJECT: Guidance on Quarantine for Health Care Personnel (HCP) Exposed to SARS-CoV-2 and Return to Work for HCP with COVID-19 (This AFL supersedes AFL 21-08.5)</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p align="center">All Facilities Letter (AFL) Summary</p> <ul style="list-style-type: none"> • The purpose of this AFL is to provide hospitals and SNF with updated guidance on: <ul style="list-style-type: none"> ◦ Exposure risk assessment and work restriction for asymptomatic HCP with SARS-CoV-2 exposures (quarantine) ◦ Work restrictions for HCP diagnosed with SARS-CoV-2 infection (isolation) • This revision incorporates updated Centers for Disease Control and Prevention (CDC) guidance on Interim Guidance for Managing Healthcare Personnel with SARS-CoV-2 Infection or Exposure to SARS-CoV-2 and Strategies to Mitigate Healthcare Personnel Staffing Shortages. • Pursuant to Welfare and Institutions Code section 14126.033 a SNF's receipt of the annual increase in the weighted average Medi-Cal reimbursement rate may be conditioned on the facility's good faith compliance with CDPH AFLs related to the COVID-19 Public Health Emergency, as a result the recommendations included in this AFL are requirements for SNFs. </div> <p><small>With the increasing number of COVID-19 cases from the Omicron variant and in preparation for an anticipated surge in patients, CDC updated their guidance for HCP isolation and quarantine to reflect what is currently known about infection and exposure in the context of vaccination and booster doses. Additionally, CDC updated their guidance for contingency and crisis management to mitigate the effects of staff shortages caused by COVID-19 on patient</small></p>	 <p>GAVIN NEWSOM Governor</p> <p>AFL 21-08.6</p>	 <p>State of California—Health and Human Services Agency California Department of Public Health</p> <p><small>TOMÁS J. ARAGÓN, M.D., Dr.P.H. State Public Health Officer & Director</small></p> <p>January 8, 2022</p> <p>TO: General Acute Care Hospitals (GACHs) Acute Psychiatric Hospitals (APHs) Skilled Nursing Facilities (SNFs)</p> <p>SUBJECT: Guidance on Quarantine and Isolation for Health Care Personnel (HCP) Exposed to SARS-CoV-2 and Return to Work for HCP with COVID-19 (This AFL supersedes AFL 21-08.6)</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p align="center">All Facilities Letter (AFL) Summary</p> <ul style="list-style-type: none"> • The purpose of this AFL is to provide hospitals and SNF with updated guidance on: <ul style="list-style-type: none"> ◦ Exposure risk assessment and work restriction for asymptomatic HCP with SARS-CoV-2 exposures (quarantine) ◦ Work restrictions for HCP diagnosed with SARS-CoV-2 infection (isolation) • This revision incorporates updated Centers for Disease Control and Prevention (CDC) guidance on Interim Guidance for Managing Healthcare Personnel with SARS-CoV-2 Infection or Exposure to SARS-CoV-2 and Strategies to Mitigate Healthcare Personnel Staffing Shortages. • Pursuant to Welfare and Institutions Code section 14126.033 a SNF's receipt of the annual increase in the weighted average Medi-Cal reimbursement rate may be conditioned on the facility's good faith compliance with CDPH AFLs related to the COVID-19 Public Health Emergency, as a result the recommendations included in this AFL are requirements for SNFs. • From January 8, 2022 until February 1, 2022, HCP who test positive for SARS-CoV-2 and are asymptomatic, may return to work immediately without isolation and without testing, and HCPs who have been exposed and are asymptomatic may return to work immediately without quarantine and without testing. These HCPs must wear an N95 respirator for source control. </div>	 <p>GAVIN NEWSOM Governor</p> <p>AFL 21-08.7</p>	<table border="1"> <tr> <td>7</td> <td></td> <td></td> </tr> <tr> <td>2.</td> <td>REPLACED</td> <td>-2 +2</td> </tr> <tr> <td></td> <td>December 30</td> <td></td> </tr> <tr> <td></td> <td>January 8</td> <td></td> </tr> <tr> <td>3.</td> <td>REPLACED</td> <td>-1 +1</td> </tr> <tr> <td></td> <td>1</td> <td></td> </tr> <tr> <td></td> <td>2</td> <td></td> </tr> <tr> <td>4.</td> <td>INSERTED</td> <td>0 +2</td> </tr> <tr> <td></td> <td>No text deleted</td> <td></td> </tr> <tr> <td></td> <td>and Isolation</td> <td></td> </tr> <tr> <td>5.</td> <td>REPLACED</td> <td>-1 +1</td> </tr> <tr> <td></td> <td>5</td> <td></td> </tr> <tr> <td></td> <td>6</td> <td></td> </tr> <tr> <td>6.</td> <td>INSERTED</td> <td>0 +55</td> </tr> <tr> <td></td> <td>No text deleted</td> <td></td> </tr> <tr> <td></td> <td>From January 8, 2022 until February 1, 2022, HCP who test po</td> <td>+ 44 words</td> </tr> <tr> <td>7.</td> <td>REPLACED</td> <td>-2 +2</td> </tr> <tr> <td></td> <td>this AFL</td> <td></td> </tr> <tr> <td></td> <td>AFL 21-08.6</td> <td></td> </tr> <tr> <td>8.</td> <td>REPLACED</td> <td>-1 +1</td> </tr> <tr> <td></td> <td>5</td> <td></td> </tr> <tr> <td></td> <td>ed</td> <td></td> </tr> <tr> <td>9.</td> <td>REPLACED</td> <td>-1 +1</td> </tr> <tr> <td></td> <td>1</td> <td></td> </tr> </table>	7			2.	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Boost Our Booster Rates

- Per December 22, 2021, California State Public Health Officer Order, all workers currently eligible for boosters must be "fully vaccinated and boosted" for COVID-19 no later than February 1, 2022.
- HSAG nursing home run charts now include booster trend lines.
- Access in HSAG QIIP Data Portal <https://qiip.hsag.com>.



For assistance in accessing data, contact qiip@hsag.com

Questions?





This material was prepared by Health Services Advisory Group (HSAG), a Quality Innovation Network-Quality Improvement Organization (QIN-QIO) under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services (HHS). Views expressed in this material do not necessarily reflect the official views or policy of CMS or HHS, and any reference to a specific product or entity herein does not constitute endorsement of that product or entity by CMS or HHS. Publication No. CA-12SOW-XC-01122022-01