



California Department of Public Health
Center for Health Care Quality
AFC Skilled Nursing Facilities Infection Prevention Call
March 22, 2023

Weekly Call-in Information:

- 2nd Tuesdays every month, 8:00am All Facilities Calls:
 - 844.721.7239; Access code: 7993227
- 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/>
- 1st & 3rd Tuesdays every month, 11:30am NHSN Updates & Office Hours
 - Register at: <https://bit.ly/NHSNofficehours2023JanFebMarch>

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
2023 CDPH AFLs	https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/LNCAFL23.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 Vaccine Guidance and Resources	https://eiz.org/resources-for-longterm-care-facilities/
CDPH Long-Term Care COVID-19 Vaccine Toolkit	https://eiz.org/assets/docs/COVID19/LTCFToolkit.pdf
CDC's Interim Infection Prevention and Control Recommendations for HCP During COVID-19 (9/23/2022)	https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html
HSAG NHSN and Vaccine Website	www.hsag.com/nhsn-help https://www.hsag.com/6-week-booster-sprint

Wednesday Webinar Frequency & FAQ

Starting in April 2023, the Wednesday Webinars will now be hosted the 4th Wednesday of every month. Register for the April to December monthly webinars at: <https://www.hsag.com/cdph-ip-webinars>

Frequently asked questions regarding visitor and staff screening, staff and resident quarantine and isolation guidance, and new admission, cohorting and PPE guidance can be found in the Wednesday Webinar FAQs that can be downloaded from the registration site.

- https://www.hsag.com/globalassets/covid-19/cdph_faqsipwebinars.pdf



 California Department of Public Health (CDPH)
 Center for Health Care Quality
 Skilled Nursing Facilities Infection Prevention Call
Frequently Asked Questions

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Important Links: State and Federal Guidance

Important Links/FAQs to CDPH State Guidance	https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Guidance.aspx
2023 CDPH AFLs	https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/LNCAFL23.aspx
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

Q-1: What changes in guidance are expected due to the termination of California’s State of Emergency?

A: On February 28, 2023, California’s State of Emergency proclaimed on March 4, 2020, was terminated (<https://www.gov.ca.gov/wp-content/uploads/2023/02/COVID-SOE-Termination-Proclamation-2.28.23.pdf?emrc=1db54f&msdyntrid=obyhbGkuMqODQwLq32Jq0uMXcaduNgmlINxMmU86rcA#msdyntrid=hb6vxtu1LVYRVtApPVpZRI6jw2FOvINjM8nhGqqL9PU>). Executive Orders related to the terminated State of Emergency are no longer in effect (e.g., certain temporary waivers). On Friday, March 3, 2023, CDPH announced changes to State Public Health Officer Orders and guidance:

- Masking in healthcare and other high-risk settings
- Vaccine requirements for healthcare personnel (HCP)
- COVID-19 isolation guidance for the general public

Q-2: Do HCP still need to wear masks in nursing homes?

A: All HCP and visitors are required to wear masks until April 3, 2023. **Beginning April 3, 2023, California will no longer require masking in indoor healthcare settings.** CDPH recommendations are now tied to the CDC’s COVID-19 Community Levels based on hospitalization rates, hospital bed occupancy, and COVID-19 incidence. The link to the CDC COVID-19 Community Level Data Tracker is https://covid.cdc.gov/covid-data-tracker/#county-view?list_select_state=all_states&list_select_county=all_counties&data-type=CommunityLevels&null=Risk/. Select Data Type: COVID-19 Community Levels.

- **Local health departments and facilities may develop and implement plans to recommend or require universal masking** based on exposure risk for high-risk individuals and settings. Check with your local health department. A facility must follow the most protective requirement.
- Consider level of risk—nursing home residents are among the highest risk. Consider masking requirement for HCP in patient/resident-care areas or during patient/resident-care interactions.
- Consider reinstating universal masking (if not currently required) during an outbreak response.

For further masking guidance, refer to CDPH Guidance for the Use of Face Masks

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Guidance-for-Face-Coverings.aspx>.

An updated accompanying Q&A is under development.

CDC Community Level	Individuals in the Community	Staff and Patients/Residents in Indoor High-Risk Settings
Low	Personal preference; consider if vulnerable	Consider
Medium	Everyone consider; recommended if vulnerable	Recommended
High	Everyone recommended; strongly if vulnerable	Strongly recommended

Q-3: Are HCP still required to get a COVID-19 booster in order to work?

A: CDPH continues to strongly recommend that all HCP and high-risk individuals remain up to date on COVID-19, influenza, and other recommended vaccines. However, beginning April 3, 2023, the state of California will **no longer require vaccination and boosters for HCP**. This change is reflected in the State Public Health Officer Order, “[HCW Vaccine Requirement](#)” that was updated on March 3, 2023 (originally issued August 15, 2021; and will be rescinded April 3, 2023). An updated accompanying Q&A is under development.

- However, per [CMS QSO 23-02-ALL](#), **CMS continues to require HCP to have received the COVID-19 primary vaccine series**, unless exempted.
- [42 CFR 483.80\(d\)\(3\)](#) and [42 CFR 483.460\(a\)\(4\)\(i\)](#) require long-term care facilities to offer COVID-19 vaccines and bivalent boosters to residents, clients, and staff onsite and in accordance with the CDC and Advisory Committee on Immunization Practices (ACIP) COVID-19 vaccine schedule.
- Local health departments and healthcare facilities may implement COVID-19 vaccination *requirements* for HCP.

Q-4: Due to California’s vaccine requirements being rescinded, do HCP still need to complete an exemption if they are not getting vaccinated?

A: While California’s vaccine requirement will rescind on April 3, 2023, per [CMS QSO 23-02-ALL](#), **CMS continues to require HCP to have received the COVID-19 primary vaccine series**, unless exempted. Further information on CMS medical and non-medical exemptions, including religious exemptions, can be found in CMS QSO 23-02-ALL on pages 8 and 9.

Q-5: Does the new isolation guidance distributed on March 3, 2023, apply to nursing homes?

A: No. The new isolation guidance does not apply to nursing homes. Per the CDPH guidance distributed on March 3, 2023, “Guidance for Local Health Jurisdictions on Isolation and Quarantine of the **General Public**”, in alignment with CDC recommendations, beginning March 13, 2023, a COVID-19 positive person may end isolation after 5 days if they feel well, have improving symptoms, and are fever-free for 24 hours. This new guidance removes the recommendation to test in order to leave isolation before Day 10. After ending isolation, persons may remove their mask sooner than Day 10 with two sequential negative tests one day apart. **This guidance only applies to the general public (not healthcare settings).**

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Guidance-on-Isolation-and-Quarantine-for-COVID-19-Contact-Tracing.aspx>

- **This updated guidance does NOT apply to HCP in settings, including SNFs, covered by [AFL 21-08.9](#), which is unchanged. It also does not apply to Emergency Medical Services personnel, who are permitted to follow the Guidance on Isolation and Quarantine for HCP in [AFL 21-08.9](#).**
- CDPH guidance for isolation of SNF residents is unchanged as specified in [AFL 22-13.1](#).

Isolation Questions & Answers

Q-6: How long do COVID-19 positive residents need to isolate for?

A: Refer to guidance in [CDPH AFL 22-13.1](#).

- Residents who test positive and are asymptomatic throughout their infection should be isolated for 10 days following the date of their positive test.
- Residents who test positive and are symptomatic with mild to moderate illness should be isolated until the following conditions are met:
 - At least 10 days have passed since symptom onset; and
 - At least 24 hours have passed since resolution of fever without the use of fever-reducing medications; and

- Any other symptoms have improved.
- The duration of isolation could be extended to up to 20 days for individuals who had critical illness and beyond 20 days for individuals who are moderately to severely immunocompromised.

Q-7: How long do COVID-19 positive HCP need to isolate in routine staffing conditions?

A: Refer to guidance in [CDPH AFL 21-08.9](#).

- Under routine staffing conditions, COVID-19 positive HCP may return to work after 5 days with proof of a negative antigen, or after 10 days without a negative test (and afebrile x 24 hours and symptoms improving).
- To provide an additional layer of safety, these HCP should wear a fit-tested N95 for source control through day 10.

Vaccination Status	Routine
All HCP, regardless of vaccination status	5 days with at least one negative diagnostic test same day or within 24 hours prior to return OR 10 days without a viral test

Q-8: How long do COVID-19 positive HCP need to isolate in a critical staffing shortage?

A: Refer to guidance in [CDPH AFL 21-08.9](#). If there is a critical staffing shortage, no additional testing is required to return beyond the initial positive test.

- Positive asymptomatic HCP, regardless of vaccination status, may return to work immediately with a fit-tested N95 for source control.
- When returning to work early, use the results of the most recent test result (which may be the test at diagnosis) to determine work placement:
 - If the most recent test result is positive, HCP can only provide direct care to COVID-19 positive residents, preferably in a cohort setting.

Vaccination Status	Critical Staffing Shortage
All HCP, regardless of vaccination status	<5 days with most recent diagnostic test result to prioritize staff placement

Testing Questions & Answers

Q-9: Will SNFs still need to continue to test new admissions on days 1, 3, and 5?

A: Yes. The new admission testing guidance is based on CDC’s infection control guidance. Per [CDPH AFL 22-13.1](#), guidance for new admissions and residents who have left the facility for > 24 hours (i.e., readmitted), regardless of vaccination status or COVID-19 community transmission levels, includes the following:

- All new admissions should have a **series of three SARS-CoV-2 tests**; immediately upon admission and, if negative, again at 3 and 5 days after their admission. Antigen or PCR tests are acceptable. Testing is not required for asymptomatic new admissions who tested positive and met criteria for discontinuation of isolation and precautions prior to admission and are within **30** days of their infection.

Q-10: Are masks required for HCP who are unvaccinated for influenza during the influenza season?

A: There is not a masking requirement at the state level, however, pre-pandemic many LHDs made the decision to require masks for unvaccinated HCP. Check with your local health department for more stringent masking guidance based on influenza vaccine status.

Q-11: Is it acceptable for a nursing home to require universal masking for all visitors?

A: Nursing homes should check with their local health department to understand whether and how any local masking requirements apply to visitors. Otherwise, nursing homes can request that visitors wear a mask; however, it would not be acceptable to deny visitation and infringe on resident rights because of masking. Additionally, per [AFL 22-07.2](#), all visitors must be educated to screen themselves prior to entry and be made aware of recommended actions to prevent transmission to others if they have COVID-19 symptoms and/or exposure within the prior 14 days to another person with COVID-19; COVID-19 symptoms or has been in close contact with a confirmed positive case, they must reschedule their visit, regardless of their vaccination status. CDC recommends facilities post signs at entrances and send emails to families and visitors with COVID-19 screening guidance.

Q-12: After April 3, 2023, can HCP wear any clean cloth mask from home?

A: If local health departments or nursing homes require masking following April 3, 2023, nursing homes would need to ensure that staff are wearing a mask that meets the universal masking requirement. A cloth mask would not meet this requirement.

Q-13: Is fit testing still required?

A: When the HCP is wearing an N95 as PPE (when caring for a patient with COVID-19 or other airborne transmissible infection), the N95 must be fit-tested and the HCP must have completed the requirements of a respiratory protection program.

Q-14: Should Enhanced Standard Precautions (ESP) be implemented only during high contact care?

A: Yes. There are 6 moments of high contact care activities when enhanced standard precautions (including gowns and gloves) are indicated for HCP. In contrast to Contact Precautions, donning of gown and gloves is not required upon entry into the room. See Enhanced Standard Precautions educational materials (www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/ESP.aspx).

Q-15: Can the COVID-19 bivalent vaccine be given as the primary vaccine series if we cannot get access to the monovalent vaccine?

A: No. Bivalent vaccines are not yet authorized for use for the primary series.

Q-16: Do SNFs need to provide proof of vaccination status of HCP when they get surveyed?

A: Beginning April 3, 2023, the state of California will no longer require vaccination and boosters for HCP, however, per [CMS QSO 23-02-ALL](#), **CMS continues to require HCP to have received the COVID-19 primary vaccine series**, unless exempted. Therefore, proof of the primary vaccine series is still required as part of the survey process to verify compliance with CMS' requirements.

Q-17: Do we need to have the resident sign consent forms for COVID-19, influenza, or pneumonia vaccines?

A: No. There are no federal or California state requirements for informed consent specifically relating to immunization. Before administering a COVID-19 vaccine with Emergency Use Authorization (EUA), the provider must provide the approved EUA fact sheet (or Vaccine Information Sheet, as applicable) to each vaccine recipient, the adult caregiver accompanying the recipient (as applicable), or other legal representative (as applicable). The fact sheet/information sheet explains risks and benefits of the particular vaccine and what to expect but is not a consent document. Explaining the risks and benefits of any treatment to a patient – in a way that they understand – is the standard of care. Providers should document that the fact sheet/information sheet has been provided and that the vaccine recipient has been given the opportunity to ask questions. Refer to the CDC website, “FAQs About Medical Consent & Pfizer-BioNTech Booster Doses for Long-term Care Residents.” <https://www.cdc.gov/vaccines/covid-19/long-term-care/medical-consent-faqs>

Q-18: Is there any news on the Abbott BinaxNOW rapid tests extended use?

A: BinaxNOW expiration information can be found at <https://www.fda.gov/media/158003/download> and is based on lot number. Check the lot number on your tests to verify expiration dates.

Other Questions & Answers

Q-19: Will the AFLs be updated by April 3, 2023.

A: CDPH is working on updating the AFLs that need to be revised; however, the updated State Public Health Officer Orders and CDC recommendations provide sufficient information for LHDs and facilities to update their policies. There is no need to wait for an updated AFL.

Q-20: Will the daily/weekly CDPH 123 survey be modified or discontinued?

A: CDPH is looking into this and will report changes as soon as modifications have been confirmed.

Q-21: Will the IP position continue to be full-time requirement, or will it return to part time?

A: At this time, there is no indication of a change. California nursing homes are still required to have a full time IP 40 hours a week, effective January 1, 2021, per AFL 20-52, AFL 20-84, AFL 21- 51, and AB 2644. The IP role may be filled either by one full-time IP staff member or by two staff members sharing the IP responsibilities, if the total time dedicated to the role equals at least the time of one full-time staff member.

Q-22: Will NHSN weekly reporting continue?

A: NHSN reporting is still required for nursing homes on a weekly basis and will continue through December 2024.

Q-23: Are residents with aerosol generating procedures required to be in an airborne isolation room, even if they are not suspected/confirmed for an aerosol transmissible disease?

A: No, an airborne isolation room is not required for aerosol generating procedures for residents that are not suspected or confirmed as having an aerosol-transmissible disease.