



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

Wednesday, February 8, 2023

# Upcoming Calls



- CDPH Tuesday, 8 a.m., All-Facilities Phone Calls
  - 1st & 3rd Tuesdays of every month
  - Call in: **1.844.721.7239**
  - Access code: **799 3227**
- CDPH Wednesday, 3 p.m., SNF Infection Prevention (IP) Webinars
  - 2nd & 4th Wednesdays of every month
  - Register at: [hsag.com/cdph-ip-webinars](https://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:
  - <https://bit.ly/NHSNofficehours2023JanFebMarch>

# Agenda



- 2023 Educational Opportunities
- Testing Task Force Updates
- Immunization Branch Updates
- National Healthcare Safety Network (NHSN) Updates
- Healthcare-Associated Infection (HAI) Updates
- Q&A

# Updated: Wednesday Webinar FAQ Document



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## CDPH Infection Prevention Webinars



The California Department of Public Health (CDPH)—with the California Association of Long Term Care Medicine (CALTCM), California Association of Health Facilities (CAHF), and Health Services Advisory Group (HSAG)—hosts a bi-weekly (2nd and 4th Wednesdays) webinar on infection prevention for long term care facilities to discuss any recent updates on Coronavirus Disease 2019 (COVID-19) and provide a venue for addressing questions. The webinars focus on infection prevention guidance for SNFs. It is recommended that SNF infection prevention staff attend. Local health departments and SNF administrators, directors of nursing, and medical directors are also encouraged to attend. Please register in advance; space is limited. A recording link will be available the day following the webinar.

**Day of the webinar event:** Call-in telephone number for all webinars is: **415.655.0003**. You may join via computer (using your computer or telephone for audio) or by telephone only. (If you join the video portion of the webinar, for a better webinar experience we recommend you have Webex call your phone—don't dial in yourself).

**CDPH All-Facilities Phone Call:** For additional CDPH information, join the All-Facilities phone call on the alternate weeks between the webinars (8 a.m. PT, 1st and 3rd Tuesdays of the month). Dial 844.721.7239, access code 7993227.

## Register for Upcoming Webinars

January - March 2023 ▼



### Past Webinars

[CLICK HERE](#) to find past weekly webinar recordings, slides, and other links.



### Weekly Call Notes

[CLICK HERE](#) to find notes from the weekly Wednesday webinars.



# Wednesday Webinar FAQ Document (cont.)

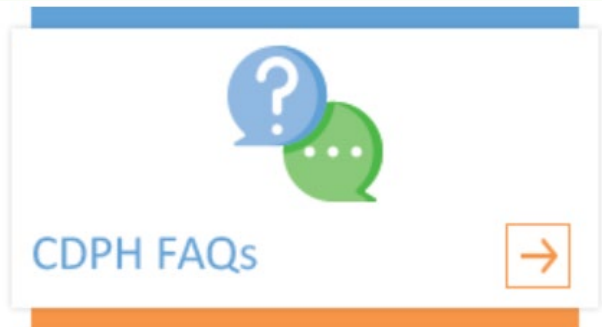
## Frequently Asked Questions

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### Important Links: State and Federal Guidance

Important Links/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>
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>
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>
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>



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- Click the refresh button 
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# Upcoming Educational Opportunities

# Enhanced Standard Precautions (ESP) Trainings

## Introduction to ESP

Region 1: Wednesday, February 1, 1 - 2 pm

Region 2: Thursday, February 2, 1 - 2 pm

Region 3: Wednesday, February 1, 3 - 4 pm

Region 4: Thursday, February 2, 3 - 4 pm

## ESP Implementation

Region 1: Wednesday, February 8, 1 - 2 pm

Region 2: Thursday, February 9, 1 - 2 pm

Region 3: Wednesday, February 8, 3 - 4 pm

Region 4: Thursday, February 9, 3 - 4 pm



- Audience: SNF NHAs, DONs, IPs, DSDs, LHDs
- Register [https://reg.learningstream.com/reg/event\\_page.aspx?ek=0076-0013-C63482BD59824A6AAFA312901547840C](https://reg.learningstream.com/reg/event_page.aspx?ek=0076-0013-C63482BD59824A6AAFA312901547840C)
- Review how ESP can prevent MDRO transmission in SNFs.
- Describe the 6 moments of ESP.
- Discuss steps to implement ESP in SNFs.
- Describe how to use the ESP Toolkit.

To look up your region, visit:

7 [www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/HAI\\_LiaisonIP.aspx](http://www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/HAI_LiaisonIP.aspx)

# CMS Special Roundtable: Improve COVID-19 Booster Rates and Use of Therapeutics by Residents and Staff in Post-Acute and Long-Term Care Settings

- **Date:** Tuesday, February 14, 2023
- **Time:** 1–2 p.m. PT
- Please join CMS Deputy Chief Medical Officer, Shari Ling MD, and leadership from AMDA, The Society for Post-Acute and Long-Term Care and the Centers for Disease Control and Prevention for an informative roundtable discussion focused on improving COVID-19 booster rates and use of therapeutics by residents and staff in post-acute and long-term care settings.
- **Register:**  
[https://cms.zoomgov.com/webinar/register/WN\\_rgSwUtjYSdyt4v8N0urbPw](https://cms.zoomgov.com/webinar/register/WN_rgSwUtjYSdyt4v8N0urbPw)



# 2023 Educational Opportunities

## Care Coordination

1st Tuesday

[hsag.com/cc-quickinars](https://hsag.com/cc-quickinars)



## Emergency Preparedness

3rd Wednesday

[hsag.com/epp-series](https://hsag.com/epp-series)



## Health Equity

2nd & 4th Thursdays

[hsag.com/health-equity-quickinars](https://hsag.com/health-equity-quickinars)



## Patient & Family Engagement

1st & 3rd Thursdays

[hsag.com/pfe-quickinars](https://hsag.com/pfe-quickinars)





# NHSN Updates

# NHSN/CDPH Survey123 Vaccination Data Errors

## NHSN Vaccination Questions

1. * Number of residents staying in this facility for at least 1 day during the week of data collection	<input type="text"/>
2. * <b>Cumulative number</b> of residents in Question #1 who have received primary series COVID-19 vaccine(s) at this facility or elsewhere since December 2020:	
2.1 * Only 1 dose of a two-dose Primary COVID-19 vaccine series	<input type="text"/>
2.2 * Any completed Primary COVID-19 vaccine series	<input type="text"/>
3. * <b>Cumulative number</b> of residents in Question #1 with other conditions:	
3.1 * Medical contraindication to COVID-19 vaccine	<input type="text"/>
3.2 * Offered but declined COVID-19 vaccine	<input type="text"/>
3.3 * Unknown COVID-19 vaccination status	<input type="text"/>
4. * <b>Cumulative</b> number of residents with complete primary series vaccine in Question #2 who have received any booster(s) or additional dose(s) of COVID-19 vaccine since August 2021	<input type="text"/>
4.1 * <b>Cumulative</b> number of residents in Question #4 who have received <u>only one</u> booster dose of COVID-19 vaccine since August 2021	<input type="text"/>
4.2 * <b>Cumulative</b> number of residents in Question #4 who received <u>two or more</u> booster doses of COVID-19 vaccine, and the most recent dose was received since March 29, 2022	<input type="text"/>
Question 5 asks about individuals who are <i>up to date</i> . Please review the current definition of <a href="#">up to date</a> .	
5. * <b>Cumulative</b> of residents in question #2 who are <i>up to date</i> with COVID-19 vaccines	<input type="text"/>

In general, any vaccine question using the words **“up to date”** is asking about the **bivalent booster**

\*Individuals who received the primary series less than 2 months ago are also considered up to date

## CDPH Survey123 Vaccination Questions

### RES Vaccination Volumes(Sub group) ▾

Cumulative number of residents with complete primary series vaccine who have received only one booster dose of COVID-19 vaccine since August 2021\*

12<sup>3</sup> 0

Cumulative number of residents with complete primary series vaccine who have received two or more booster doses of COVID-19 vaccine since March 29, 2022\*

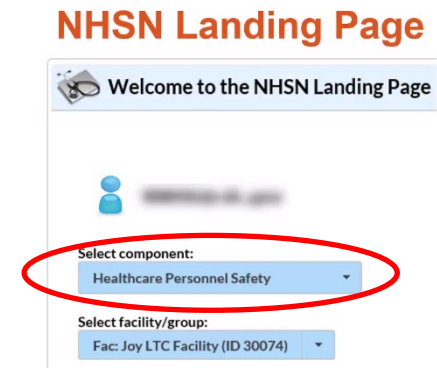
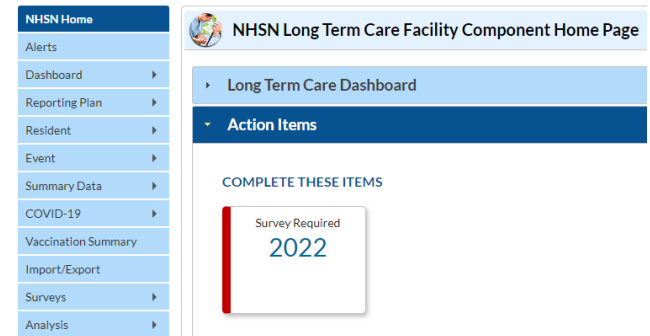
12<sup>3</sup> 0

Cumulative number of residents with complete primary series vaccine who are up-to-date with COVID-19 vaccines\*

12<sup>3</sup> 0

# General NHSN Updates

- Annual Surveys
  - Any facility that reports **HAI data** must submit their annual survey in NHSN by March 1, 2023.
  - If you **only report COVID-19 data**, you do not need to complete this annual survey
- Annual Influenza Report is due by May 15, 2023
  - This report must be completed in the **Healthcare Personnel Safety Component**
  - Guidance for how to add the component and complete the reporting can be found here: [Overview of National Health Safety Network \(NHSN\) Reporting Requirements for Long Term Care Facilities \(LTCFs\)](#)





# HAI Updates



Why have we changed the COVID-19 infection control guidance for SNF regarding quarantine, “zones,” and dedicated staffing?

# Earlier Pandemic COVID-19 Guidance and Practices

- Quarantine in “yellow zone” with empiric transmission-based precautions for exposed groups of residents
  - Prior to vaccines, higher risks of SARS-CoV-2 infection and spread among susceptible residents
  - Limited testing supplies and prolonged turnaround times delayed identification of infection among exposed residents
- Dedicated staffing with separate restrooms and breakrooms, limit cross-over and sequence care from uninfected to infected
  - Less knowledge about the role of surfaces in SARS-CoV-2 transmission, including hands and clothes of healthcare personnel moving from resident to resident
  - PPE supplies were low, conservation via extended use and limited re-use
- COVID-19 was primary concern; interventions implemented at group level based on COVID-19 status only

# Earlier Pandemic COVID-19 Guidance and Practices: Unintended Consequences

- Prolonged quarantine in “yellow zone” for exposed groups of residents
- Transmission of multi-drug resistant organisms among groups of residents/zones assigned based on COVID-19 status only
  - Extended use and re-use of gowns
- Operational challenges implementing dedicated staffing requirements
  - Hampered ability of SNF to accept new and returning residents with COVID-19



# Evolution in COVID-19 Guidance

- Quarantine and empiric transmission-based precautions no longer routinely recommended for exposed residents.
  - Decreased risks of infection and spread among residents with vaccine- and prior infection-induced immunity.
  - Frequent point-of-care testing allows prompt identification of infection among exposed residents.
- Dedicated staffing with separate restrooms and breakrooms and sequencing care no longer required.
  - Surfaces, including hands and clothes of HCP moving from resident to resident, do not play a significant role in SARS-CoV-2 transmission.
  - PPE supplies adequate; extended use of N95s a practical consideration.
- Other respiratory viruses, multidrug-resistant organisms must be considered in addition to COVID-19.

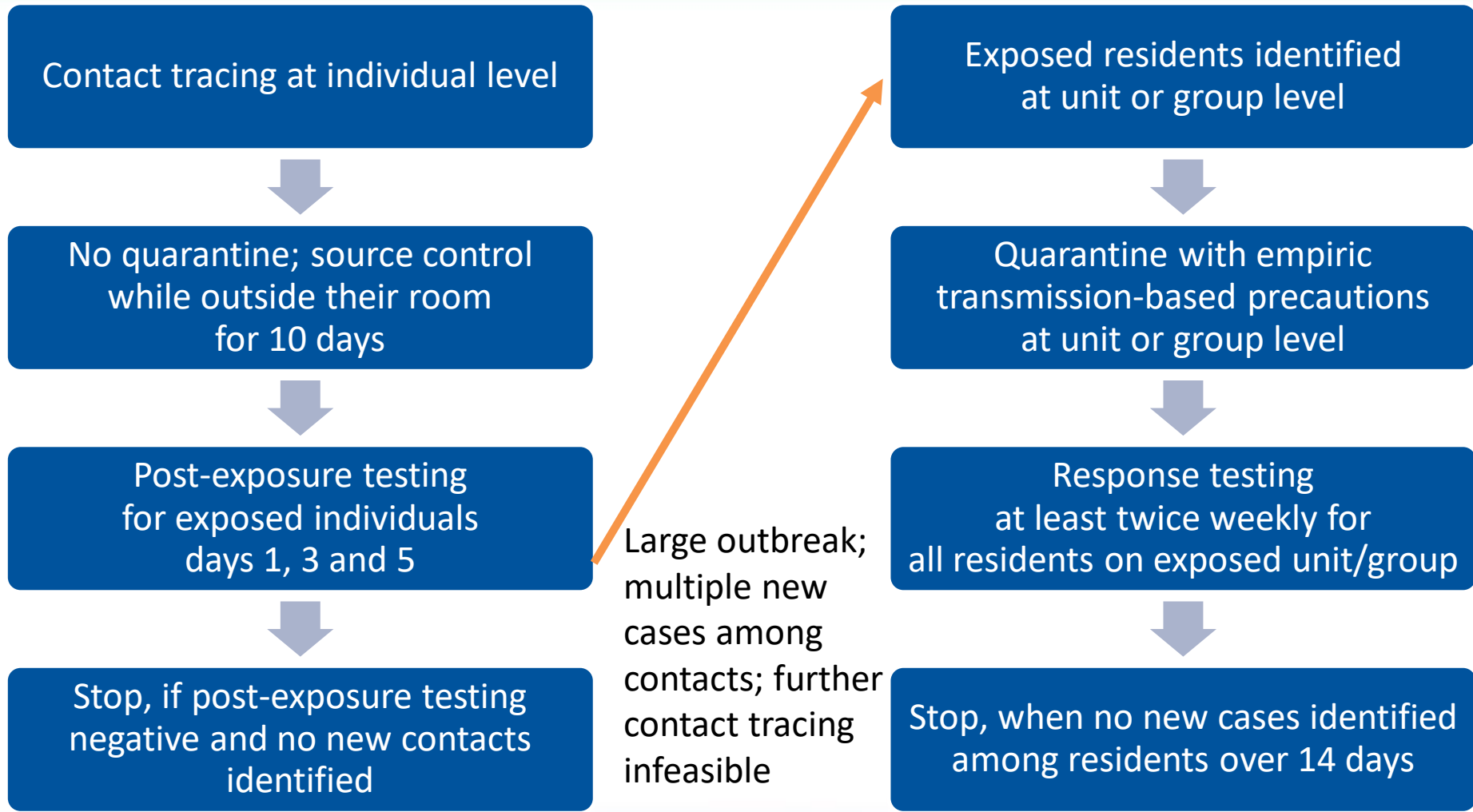
# Refocusing COVID-19 Guidance

- The most important interventions given the most current information and resources:
  - Vaccination
  - Source control
  - Ventilation
  - Testing of symptomatic and exposed individuals
  - Prompt isolation of positive individuals
  - Treatment
- Move away from interventions that have adverse, unintended consequences or are onerous to implement with limited or no infection control benefit
- Multidrug-resistant organisms and other respiratory viruses in addition to COVID-19

# Q: Do nursing homes still need to have a yellow zone to quarantine exposed residents?

- No; the “yellow zone” is no longer applicable because quarantine and empiric transmission-based precautions are no longer required for exposed and newly admitted residents.
- For residents with known exposure identified by contact tracing and remain asymptomatic:
  - Leave in current room.
  - Wear a mask for source control while outside their room for 10 days following the exposure.
  - Test promptly (but not earlier than 24 hours after the exposure) and, if negative, again at 3 days and at 5 days after the exposure.

# Contact Tracing with Post-Exposure Testing versus Unit- or Group-Level Exposure with Response Testing



# Q: How should nursing homes manage symptomatic residents?

- The “yellow zone” is not applicable; evaluate and manage residents as individuals.
- For residents with fever and/or respiratory symptoms:
  - Leave in current room (single room, if available).
  - Implement empiric transmission-based precautions for COVID-19, pending results of diagnostic testing.
  - Test for COVID-19, influenza, potentially other respiratory viruses (if identified in the facility or cluster of illnesses with negative COVID and influenza testing).

# Q: Do nursing homes need to have a red zone, even if there are no COVID positive residents?

- SNFs still need to have a dedicated COVID-19 isolation area (formerly referred to as “red zone”).
  - Ideally includes ventilation measures to limit airflow from “contaminated” to “clean” areas.
- In SNFs with no current residents in COVID-19 isolation:
  - Remain prepared to quickly re-establish the area and provide care for and accept admission of residents with COVID-19.
- Determination of COVID-19 isolation rooms/areas may be made on a case-by-case basis.

# Q: How should nursing homes manage staff caring for residents in isolation?

- Dedicated staffing for the COVID-19 isolation area and sequencing care for uninfected residents before positive residents are no longer required.
  - Might be a practical consideration if large numbers of residents in the COVID-19 isolation area, to facilitate extended use of N95s.
- Ensure all HCP perform hand hygiene and change gloves and gowns between residents and when leaving the resident's room, or area of care (i.e., treatment or therapy room).
- Ensure all HCP strictly adhere to masking for source control.

# HCP Vaccine and Booster Requirements

- For HCP who are already in compliance with receiving the primary series and at least one booster, there is not a new requirement to receive an additional bivalent booster.
- For HCP who are newly coming into compliance with the COVID-19 vaccination requirement including a booster:
  - Receive booster dose at least 2 months and no more than 6 months after 2nd dose
  - If they received their primary series more than 6 months prior, they are still eligible to receive a booster, but must have received that booster prior to start of work in the facility
- Timing of booster dose requirement is a deadline for compliance, not clinical guidance.
  - [CDC clinical guidance](#) indicates there is no maximum interval at which COVID-19 vaccine doses can be given.
- CDPH continues to encourage all individuals to remain up-to-date on the COVID-19 vaccines and boosters.

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/FAQ-Health-Care-Worker-Vaccine-Requirement.aspx>



# 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-02082023-01