



California Department of Public Health (CDPH) Infection Prevention Webinar

Wednesday, March 22, 2023

Upcoming Calls



- CDPH Tuesday, 8 a.m., All-Facilities Phone Calls
 - 2nd Tuesdays of each month
 - Call in: **1.844.721.7239**
 - Access code: **799 3227**
- CDPH Wednesday, 3 p.m., SNF Infection Prevention (IP) Webinars
 - 4th Wednesdays of each month
 - 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:
 - 1st & 3rd Tuesdays of each month
 - Register at: <https://bit.ly/NHSNofficehours2023aprmayjune>

Agenda



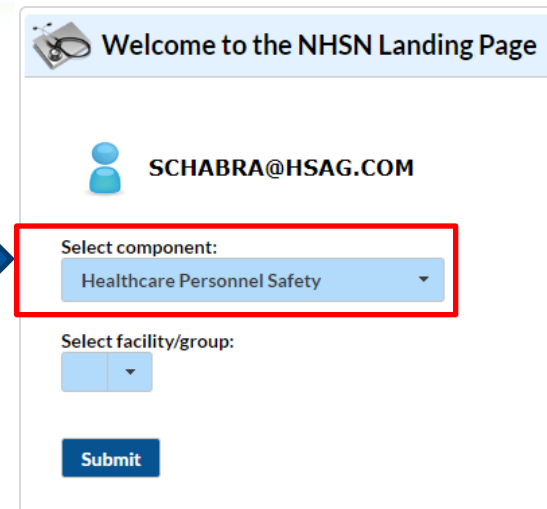
- Testing Task Force updates
- Immunization Branch updates
- NHSN updates
- HAI updates
- Q&A



NHSN Updates

General NHSN Updates

- NHSN 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 \(LTCFs\)](#).



Welcome to the NHSN Landing Page

SCHABRA@HSAG.COM

Select component:
Healthcare Personnel Safety

Select facility/group:

Submit

National Healthcare Safety Network (NHSN) Updates & Office Hours

- Q1 2023: Every Tuesday, 11:30 a.m.
 - <https://bit.ly/NHSNofficehours2023JanFebMarch>
- Q2 2023: 1st and 3rd Tuesday of the Month, 11:30 a.m.
 - <https://bit.ly/NHSNofficehours2023aprmayjune>



HAI Updates

California's State of Emergency Ended

- California's State of Emergency proclaimed on March 4, 2020, is terminated effective February 28, 2023.*
 - Executive Orders related to the terminated State of Emergency are no longer in effect, e.g., certain temporary waivers.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)

* California Executive Department. A Proclamation by the Governor of the State of California Terminating the State of Em 2023. Available at <https://www.gov.ca.gov/wp-content/uploads/2023/02/COVID-SOE-Termination-Proclamation-2.28.23.pdf?emrc=1db54f&msdynttrid=obyhbGkuMqODQwLq32Jq0uMXcaduNgmllNxMmU86rcA#msdynttrid=hb6vxtu12FOvINjM8nhGqgL9PU>.

Masking in Healthcare Settings

- 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:

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

CDC = The Centers for Disease Control and Prevention

Masking in Healthcare Settings (cont.)

- Current requirement remains in effect until April 3, 2023.
- 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.
 - Consider level of risk—SNF residents are among the highest at 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.
- <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Guidance-for-Face-Coverings.aspx>.

Vaccine Requirements for HCP

- CDPH continues to strongly *recommend* that all HCP and high-risk individuals remain up to date on COVID-19, influenza, and other recommended vaccines.
- **Beginning April 3, 2023, the state of California will no longer require vaccination and boosters for HCP.**
 - State Public Health Officer Order, “[HCW Vaccine Requirement](#)” (originally issued 8/15/21; will be rescinded 4/3/23)
- 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\(a\)\(4\)\(i\)](#) also require long-term care facilities to offer COVID-19 vaccines to residents, clients, and staff onsite and in accordance with the CDC and ACIP COVID-19 vaccine schedule, which includes bivalent booster doses.
- Local health departments and healthcare facilities may implement COVID-19 vaccination *requirements* for HCP.

ACIP = Advisory Committee on Immunization Practices

CDPH. State Public Health Officer Order of March 13, 2023. Available at <https://www.cdph.ca.gov/Programs/CID/DCDC/Page-the-State-Public-Health-Officer-Health-Care-Worker-Vaccine-Requirement.aspx>.

Centers for Medicare & Medicaid Services (CMS). Revised Guidance for Staff Vaccination Requirements. October 26, 2022. Available at <https://www.cms.gov/files/document/qs0-23-02-all.pdf>.

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

- 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.

COVID-19 Isolation Guidance

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 feeling well, having improved symptoms, and is fever-free for 24 hours, with less emphasis on testing negative.

This updated guidance does NOT apply to HCP in settings, including SNFs, covered by [AFL 21-08.9](#), which is unchanged.

- CDPH guidance for isolation of SNF residents is unchanged as specified in [AFL 22-13](#).

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

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

- 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.

CDC. Ending Isolation and Precautions for People with COVID-19: Interim Guidance. Available at <https://www.cdc.gov/coronav/ncov/hcp/duration-isolation.html>.

CDPH. AFL 22-13.1. Available at <https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-22-13.aspx>.

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

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

- 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

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-03222023-01