



California Department of Public Health (CDPH) Infection Prevention Webinar

Wednesday, September 23, 2020

Upcoming



Register for CDPH Wednesday, 3 p.m.,
webinars at:

www.hsag.com/cdph-ip-webinars



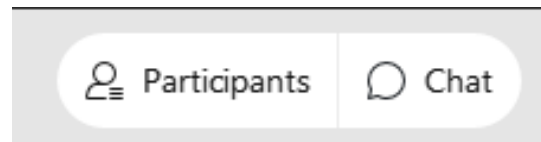
Join CDPH Thursday, 12 noon phone calls:

Dial-in: **1.877.226.8163**

Access Code: **513711**

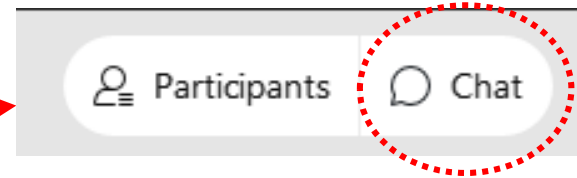
How to Find the Chat Button

- Click on the button at the bottom right corner of your WebEx window and select the chat button.

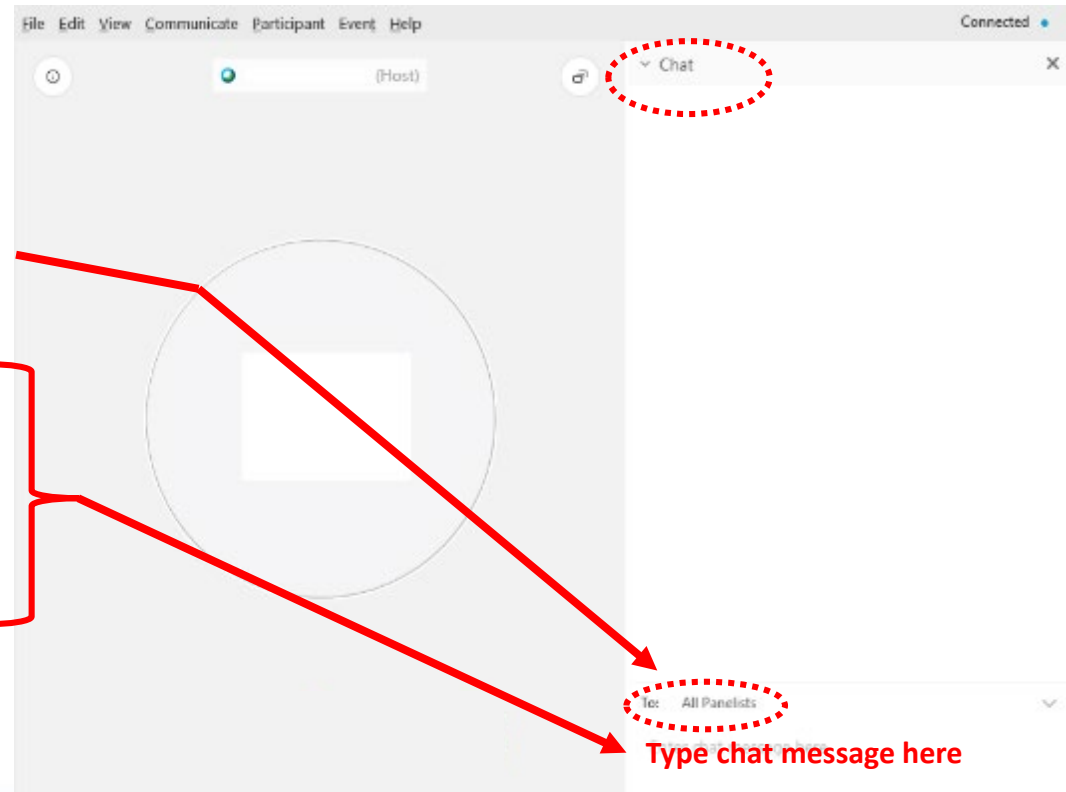


How to Submit a Question

1. To submit a question, click on the **Chat Button** located in the bottom right corner of your WebEx window.



2. The **Chat** panel will open on your right.



3. Indicate that you want to send a question to **All Panelists**.

4. Type your question in the box at the bottom of the panel.

5. Press **Enter** on your keyboard to submit your question.

To connect to the audio portion of the webinar,
please have WebEx call you.

Please Take 5 Seconds and Let Us Know



We want this call to be meaningful to you, so we need your input.

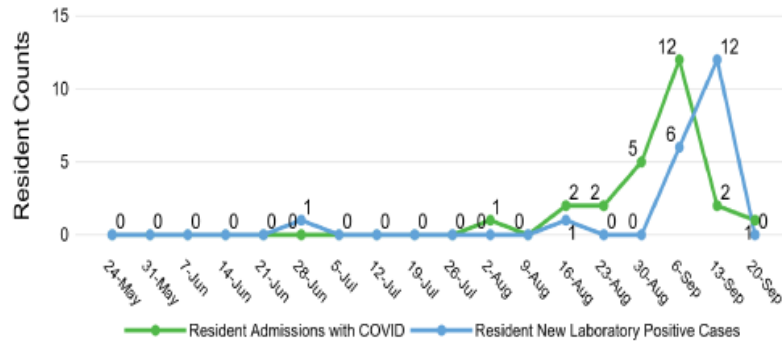
At the end of the webinar, you will be asked **one question** to determine if this call equipped your organization to manage COVID-19 and/or your infection prevention practices.



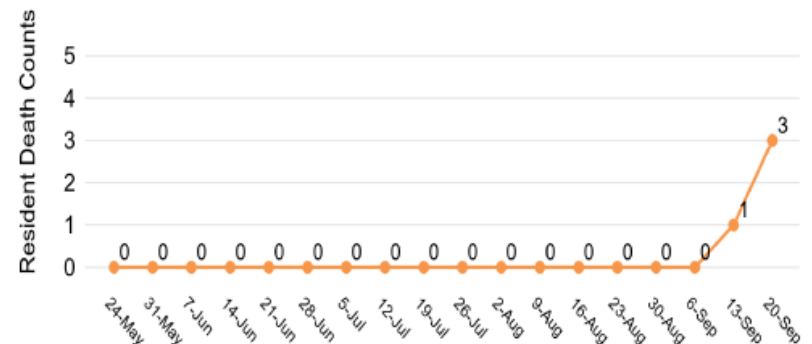
Updates

Facility-Specific COVID-19 Run Chart

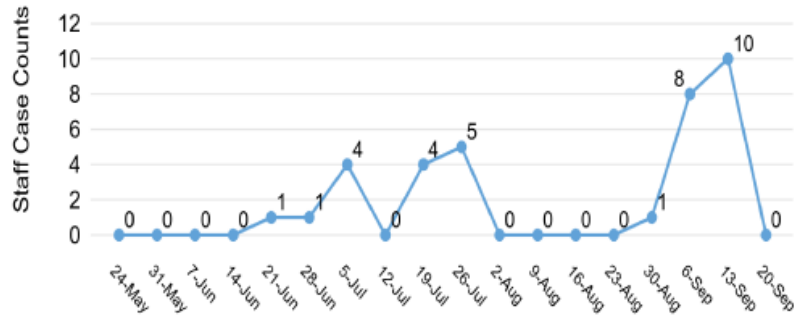
Resident: COVID-19 Case Counts



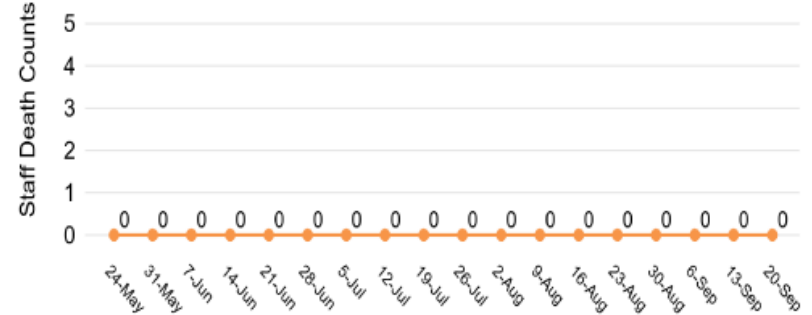
Resident: COVID-19 Death Counts



Staff: COVID-19 New Laboratory Positive Case Counts



Staff: COVID-19 Death Counts



AFL 20-68 has instructions on how to access your COVID-19 data report
www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-68.aspx

CMS Targeted COVID-19 Training for Frontline Nursing Home Staff and Management qsep.cms.gov



Driving Healthcare Quality

Welcome to the Quality, Safety & Education Portal (QSEP)

Login

Sign Up

[Select here for public access to the Training Catalog](#)

[Select here for instructions on how to access Targeted COVID-19 Training for Nursing Homes](#)

Instructions on How to Access Training

Steps required to get a certificate for the *Targeted COVID-19 Training for Frontline Nursing Home Staff and Management*

1. Select **"Sign up"** for **"Providers and Other Learners"**.
2. Tell Us Who You Are. Enter your Name and Email address. Select **"Provider/Supplier"** User Role from the drop-down list, select **"Next"** to continue registration.
3. Select **"SNF/NF - Skilled Nursing Facilities/Nursing Facilities"** from the drop-down list under **"Provider/Supplier Type"**.
4. Select **"Facility Search"**. Enter your primary facility CCN, or facility name (first few characters), or zip code, or state and select **"Search"**. A list of facilities matching your criteria will appear. select **"Next"** to complete registration. You will receive the email confirmation.
5. After confirmation, go to QSEP home page, select **"Login"** for **"Providers and Other Learners"**. Enter your email address to login to QSEP. You will be sent to the QSEP Training Catalog.
6. Use either the search field or the alphabetical listing to locate the training. The training names are:
 - **CMS Targeted COVID-19 Training for Frontline Nursing Home Staff**
 - **CMS Targeted COVID-19 Training for Nursing Home Management**
7. Select the **"Launch"** button at the right side of the window beside the course listing.
8. The Training Menu page will be displayed, where you may begin the pre-test, training, and post-test.
9. After completing the post-test, return to the Training Menu page and select the **"Training Evaluation"** link.

Training Menu:

CMS Targeted COVID-19 Training for Frontline Nursing Home Staff - Pre-test (COMPLETED)

CMS Targeted COVID-19 Training for Frontline Nursing Home Staff (COMPLETED)

CMS Targeted COVID-19 Training for Frontline Nursing Home Staff - Posttest (COMPLETED)

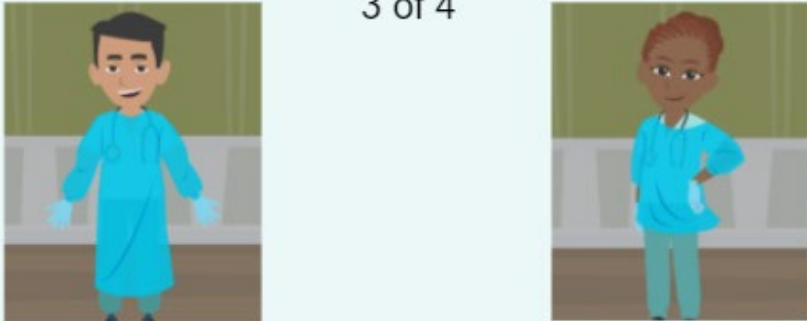
CMS Targeted COVID-19 Training for Frontline Nursing Home Staff - Training Evaluation (COMPLETED)

Personal Protective Equipment (PPE) Quiz: Who Wore it Best?

For each pair of photos, select the nursing home professional who is wearing PPE properly.

Who Wore it Best?

3 of 4



Correct. A gown fits correctly when it covers the front, back, and sides of your body from your neck to below your knees to protect your clothing and exposed skin.

Module 1: 18 of 28

Hand Hygiene Knowledge Check

Knowledge Check 1

What is an effective way to control the spread of germs in your nursing home? (select all that apply, then select Submit)

- Wearing gloves for resident care.
- Staying home when you are sick.
- Performing hand hygiene.
- Covering your mouth when you cough or sneeze.



That's right.

Wearing gloves for resident care, staying home when you are sick, performing hand hygiene, and covering your mouth when you cough or sneeze are all effective ways to control the spread of germs in your nursing home.

Continue

Module 1: 5 of 28

AFL 20-22.4: Guidance for Limiting the Transmission of COVID-19 in Long-Term Care Facilities

<https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-22.aspx>



Sandra Shewry
Acting Director

State of California—Health and Human Services Agency California Department of Public Health



GAVIN NEWSOM
Governor

August 25, 2020

AFL 20-22.4

TO: Long-Term Care Facilities

SUBJECT: Guidance for Limiting the Transmission of COVID-19 in Long-Term Care Facilities
(This AFL supersedes guidance provided in AFL 20-22.3)

All Facilities Letter (AFL) Summary

- This AFL notifies long-term care (LTC) facilities of Centers for Medicare and Medicaid Services (CMS) and Centers for Disease Control and Prevention (CDC) guidance for improving their infection control and prevention practices to prevent the transmission of Coronavirus Disease 2019 (COVID-19), including revised guidance for visitation.
- This AFL authorizes LTC facilities to temporarily modify their facility's visitation policies in accordance with CMS and CDC COVID-19 guidance when necessary to protect the health and safety of residents, staff, and the public.
- This AFL updates visitation guidance to require facilities to permit ombudsman to enter regardless of whether or not there is a COVID-19 outbreak.

QSO-20-39-NH: Nursing Home Visitation

<https://www.cms.gov/files/document/qso-20-39-nh.pdf>

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop C2-21-16
Baltimore, Maryland 21244-1850



Center for Clinical Standards and Quality/Survey & Certification Group

Ref: QSO-20-39-NH

DATE: September 17, 2020

TO: State Survey Agency Directors

FROM: Director
Survey and Certification Group

SUBJECT: Nursing Home Visitation - COVID-19

Memorandum Summary

- CMS is committed to continuing to take critical steps to ensure America's healthcare facilities are prepared to respond to the Coronavirus Disease 2019 (COVID-19) Public Health Emergency (PHE).
- **Visitation Guidance:** CMS is issuing new guidance for visitation in nursing homes during the COVID-19 PHE. The guidance below provides reasonable ways a nursing home can safely facilitate in-person visitation to address the psychosocial needs of residents.
- **Use of Civil Money Penalty (CMP) Funds:** CMS will now approve the use of CMP funds to purchase tents for outdoor visitation and/or clear dividers (e.g., Plexiglas or similar products) to create physical barriers to reduce the risk of transmission during in-person visits.

Outdoor & Indoor Visitation Guidance

- Outdoor visitation is preferred and should be facilitated routinely
- Use COVID-19 county positivity rates to determine indoor visitation:

<https://data.cms.gov/stories/s/q5r5-gjyu>

– **Low (<5%):** Indoor visitation should occur

– **Medium (5% – 10%):** Indoor visitation should occur

– **High (>10%):** Indoor visitation should only occur for compassionate care situations

Guidelines for Indoor Visitation

- Indoor visitation can occur if:
 - There is no new onset of COVID-19 cases in the last 14 days
 - Facility is not conducting outbreak testing
 - Visitors can adhere to infection prevention core principles
 - Movement is limited in the facility
 - Facility can consider limiting the number of visitors per resident and number of visits occurring simultaneously
- What if the resident has a roommate?
 - Visits should not be conducted in room with roommate
 - If resident's health status impacts ability to leave the room, facilities should attempt to enable in-room visitation

Entry of Healthcare Workers, Ombudsman, and Other Providers of Services

- **Ombudsman** must have immediate access to any resident. If in-person access is not advisable, facilities must facilitate alternative resident communication.
- **Outside healthcare workers** that provide direct care to the residents (i.e., hospice workers, social workers, clergy and dialysis, laboratory and radiology technicians) must be permitted to come into facility with proper screening.

Do Nursing Homes Need to Test Visitors?

- While not required, CMS encourages facilities in medium- or high-positivity counties to test visitors.
- Prioritize visitors that visit regularly.
- Encourage visitors to get tested on their own 2–3 days prior to visiting facility with proof of negative test results and date of test.

Other Visitation Factors to Consider

- Facilities may still restrict visitation due to:
 - COVID-19 county positivity rate
 - Facility's COVID-19 status
 - Resident's COVID-19 status
 - Visitor's symptoms
 - Lack of adherence to proper infection control practices
- Facilities may not restrict visitation without reasonable cause.
- Residents on transmission-based precautions should only receive visits that are virtual, through windows, or in-person for compassionate care situations.

Civil Monetary Penalty (CMP) Funds Available

- CMS previously approved \$3,000 per facility to purchase communicative devices (tablets, webcams).
- CMS now approved an additional \$3,000 per facility to purchase tents for outdoor visitation and/or clear dividers to create a physical barrier to reduce the risk of transmission during in person visits.

\$3,000 + \$3,000

LeadingAge Quality of Life Improvement Project: iNSPIRE

- Apply Online by October 30
www.leadingageca.org/inspire-grant
- Funding made possible through CMP grant
- iN2L equipment, training, and 24 months of software subscription are provided at no cost for 60 nursing homes

AFL 20-53.3: COVID-19 Mitigation Plan Recommendations for Testing of Health Care Personnel and Residents

<https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-53.aspx>



Sandra Shewry
Acting Director

State of California—Health and Human Services Agency California Department of Public Health



GAVIN NEWSOM
Governor

September 12, 2020

AFL 20-53.3

TO: Skilled Nursing Facilities

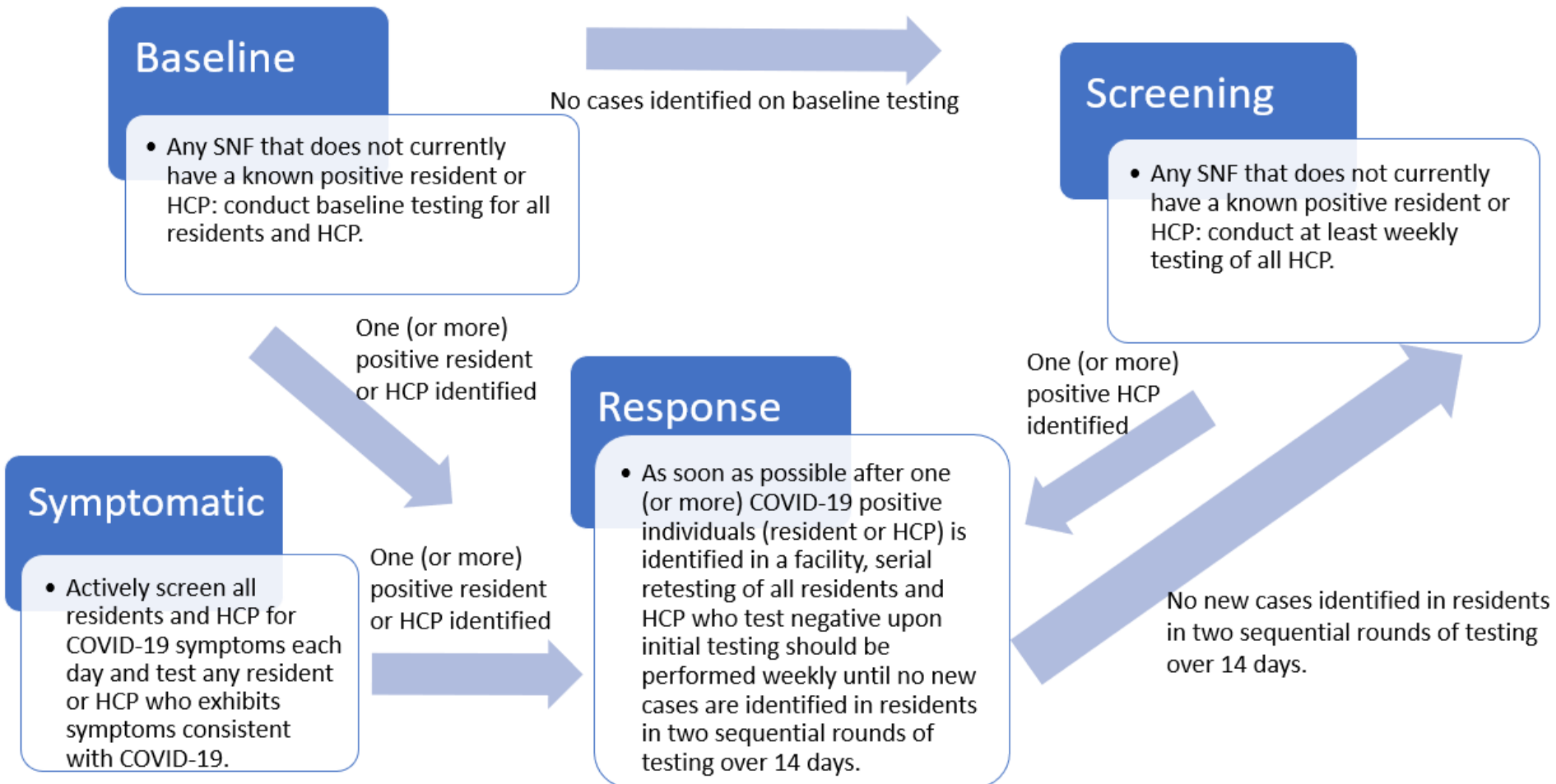
SUBJECT: Coronavirus Disease 2019 (COVID-19) Mitigation Plan Recommendations for Testing of Health Care Personnel (HCP) and Residents at Skilled Nursing Facilities (SNF)
(This AFL supersedes AFL 20-53.2)

All Facilities Letter (AFL) Summary

- This AFL provides recommendations from the California Department of Public Health (CDPH) for SNFs developing COVID-19 Mitigation Plans. This includes recommendations for baseline, screening, and response-driven testing of SNF residents and HCP to prevent spread of infection in the facility.
- This revision updates and clarifies testing guidelines to align with the Centers for Medicare and Medicaid Services (CMS) interim final rule on facility and resident COVID-19 testing and terminology from [new Centers for Disease Control and Prevention \(CDC\) testing guidance](#), and includes the use of point of care (POC) antigen test instruments.

Baseline, Symptomatic, Screening, & Response

Baseline, Symptomatic, Screening and Response COVID-19 Testing of SNF Residents and HCP



Point-of-Care Antigen Tests

Point-of-Care (POC) Antigen Tests for

Symptomatic, Screening and Response COVID-19 Testing of SNF Residents and HCP

- **Symptomatic testing:** POC antigen tests are most reliable when used on symptomatic individuals (SNF residents or HCP) in settings with high rates of transmission to quickly identify and isolate contagious individuals.
- **Screening testing:** POC antigen tests may be used for serial testing of asymptomatic individuals (e.g., SNF HCP) tested on a regular schedule (a minimum of weekly; SNF in counties with > 10% test positivity rate must test twice weekly per CMS).
- **Response testing:** POC antigen tests may be used for serial testing of asymptomatic individuals (residents and HCP) tested repeatedly during an outbreak when turnaround time for RT-PCR results is prolonged, e.g., >72 hours.

The need for confirmatory RT-PCR testing depends on the testing scenario (symptomatic, screening, or response) and antigen test result (positive or negative).

Considerations for Confirmatory RT-PCR Testing

Point of Care (POC) Antigen Tests for Symptomatic, Screening and Response COVID-19 Testing of SNF Residents and HCP
Considerations for Confirmatory RT-PCR Testing

Symptomatic HCP or residents

Positive Antigen
Test Result



No confirmatory testing needed; manage as confirmed COVID-19 positive

Negative Antigen
Test Result



Immediately obtain confirmatory testing; manage as suspected COVID-19 pending results

Screening HCP

Positive Antigen Test
Result



Confirmatory testing optional; manage as confirmed COVID-19 positive and consider confirmatory testing for HCP in SNF in areas with low transmission

Negative Antigen
Test Result



No confirmatory testing needed, as long as individual will continue to be tested regularly

Response HCP and residents

Positive Antigen
Test Result



No confirmatory testing needed; manage as confirmed COVID-19 positive

Negative Antigen
Test Result



Obtain confirmatory testing; manage as COVID-19 exposed pending results

AFL 20-74: PPE and Resident Cohorting

<https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-74.aspx>



Sandra Shewry
Acting Director

State of California—Health and Human Services Agency
California Department of Public Health



GAVIN NEWSOM
Governor

September 22, 2020

AFL 20-74

TO: Skilled Nursing Facilities

SUBJECT: Coronavirus Disease 2019 (COVID-19) Recommendations for Personal Protective Equipment (PPE), Resident Placement/Movement, and Staffing in Skilled Nursing Facilities

All Facilities Letter (AFL) Summary

This AFL provides recommendations for PPE, resident placement/movement, and staffing based on the residents' COVID-19 status.

Questions?





This material was prepared by Health Services Advisory Group, the Medicare Quality Innovation Network-Quality Improvement Organization for Arizona and California, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy.

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