



**California Department of Public Health
Center for Health Care Quality
AFC Skilled Nursing Facilities Infection Prevention Call
January 5-6, 2022**

Recordings, notes and slides for the Wednesday Webinars and Thursday calls can be accessed at the Health Services Advisory Group (HSAG) registration website:

<https://www.hsag.com/en/covid-19/long-term-care-facilities/cdph-ip-webinars-past/>

The recording of the Tuesday, January 4, 2022, 8am All Facilities Call can be accessed by using AT&T Meeting Recording: 1 (866) 207-1041 Access Code: 8471325

CDPH Weekly Call-in Information:

Tuesday 8:00am All Facilities Calls: 844.721.7239; Access code: 7993227

Wednesday 3:00pm SNF Infection Prevention Webinars: Register at: <https://www.hsag.com/cdph-ip-webinars>

Thursday 12:00pm SNF Infection Prevention Calls: 877.226.8163; Access code: 513711

The Wednesday Webinar covered the following topics:

- Testing Task Force Updates
 - SARS-CoV-2 Viral Mutations: Impact on COVID-19 Tests | FDA
<https://www.fda.gov/medical-devices/coronavirus-covid-19-and-medical-devices/sars-cov-2-viral-mutations-impact-covid-19-tests#omicron>
 - COVID-19 for Laboratories: FAQ's (ca.gov)
<https://www.cdph.ca.gov/Programs/OSPHLD/LFS/Pages/COVID-19FAQ.aspx>
 - Interim Guidelines for Collecting and Handling of Clinical Specimens for Testing
<https://www.cdc.gov/coronavirus/2019-nCoV/lab/guidelines-clinical-specimens.html>
 - CDPH Guidance Updated December 30, 2021
 - Guidance for use of Over-the-Counter Tests for Local Health Jurisdictions
<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Over-The-Counter-Tests-LHJ-Guidance.aspx>
 - Information Sheet for Over-the-Counter Test Kits for SARS-COV-2
<https://testing.covid19.ca.gov/wp-content/uploads/sites/332/2021/12/Home-Testing-Information-Sheet.pdf>
- Immunization Branch Vaccine Update: PPT Slides <https://www.hsag.com/contentassets/4a66046f256e4d44ae30db0fd9dc2510/immunization-010522-508.pdf>
 - COVID-19 Information for LTC Residents and Family Members: <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/recommendations/LTCF-residents.html>
 - CDPH COVID-19 Vaccine Boosters: <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/COVID-19-Vaccine-Boosters.aspx>
 - Nursing Home COVID-19 Vaccination Data Dashboard:
<https://www.cdc.gov/nhsn/covid19/lte-vaccination-dashboard.html>
 - California Vaccination Data: <https://covid19.ca.gov/vaccination-progress-data/>
 - FAQs about COVID-19 Vaccination in Long-Term Care Facilities (CDC):
<https://www.cdc.gov/vaccines/covid-19/toolkits/long-term-care/faqs.html>
 - Vaccine Eligibility Guide: <https://eziz.org/assets/docs/COVID19/IMM-1396.pdf>
 - Vaccine Product Guide: <https://eziz.org/assets/docs/COVID19/IMM-1399.pdf>

- HAI Updates on State and Federal Guidance (PPT slides 9-20) <https://www.hsag.com/contentassets/4a66046f256e4d44ae30db0fd9dc2510/cdph-jan-5-2022-508.pdf>

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
CMS QSO-20-39-NH (REVISED 11/12/21): Nursing Home Visitation – COVID-19	https://www.cms.gov/files/document/qso-20-39-nh-revised.pdf
State Public Health Officer Order – amended with booster requirement for HCP (Updated 12/22/2021)	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 (12/27/2021)	https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-34.aspx
AFL 20-53.6 COVID-19 Testing in SNFs (Updated 12/27/2021)	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 (Updated 12/27/2021)	https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-28.aspx
AFL 21-08.6 Guidance on HCP Quarantine and Isolation (Updated 12/30/2021)	https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-08.aspx
CDPH Guidance for Isolation & Quarantine for General Public (12/30/2021)	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 (Updated 12/31/2021)	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

Visitation Questions & Answers

CDPH December 31, 2021 State Public Health Order

Requirements for Visitors in Acute Health Care and Long-Term Care Settings

<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>

Q-1: Fully vaccinated family members want to visit, but they are not able to get access to a test, and we don't have testing supplies to test them at our facility. What should we do to meet the spirit and intent of the CMS memo?

A: This is very challenging because tests are now required for visitors per the CDPH December 31, 2021 State Public Health Order. One solution is for the visitors to be tested at community sites or using at-home antigen tests if they administer the test being observed by a facility staff member. However, we acknowledge the difficulty of finding tests in the community at this time due to supply shortages and the high volume of tests being utilized by the general public. Facilities can offer testing that they have on hand, but are not required to do so, especially in light of the shortages.

Q-2: How can we have roommates move out of their room if in yellow/red zone to accommodate the visitation for visitors without a test?

A: This is a challenge. Per the CDPH December 31, 2021 State Public Health Order, if a resident is not able to leave their room to meet outdoors, the visitation may occur indoors, even for visitors who cannot provide vaccine verification or a negative test. However, the visit cannot take place in the resident's room if the roommate is present. Moving the roommate out would be challenging in this

scenario because ideally yellow and red zone residents should not move about the facility. The situation of having a visitor enter the room in this case would need to be managed case-by-case. One solution is moving the roommate temporarily to another room in the yellow/red zone.

Q-3: Can an unvaccinated visitor that has not been tested visit a resident indoors if the resident is in a booth/bubble that the family cannot touch, with plexiglass surrounding them.

A: This scenario is not ideal, because the unvaccinated visitor that is not tested could place everyone else at risk when visiting indoors. Consult with our local health department for more guidance. Also, note that the CDPH December 31, 2021 State Public Health Order on visitation says that visitation can occur if the visitor is unvaccinated and has not received a negative test, but only if the resident is not able to leave their room to meet outdoors, and only if the roommate is not present.

Q-4: For the vendors who do not like to disclose their vaccination status, can we allow them in as long as they get tested prior to entry?

A: Allowing unvaccinated vendors with a negative test into the facility depends on what the vendor is providing, and whether or not they are just dropping off supplies, or if they have to enter the facility. It would be optimal if they can drop off their product at the door, but we understand that is not always possible. Note that it's important to limit the time and movement in which a vendor is in the facility in order to mitigate exposure; but it's also important to understand that considerations need to be made for vendors that are coming in to provide necessary services to residents in order to improve care and promote quality of life.

Testing Questions & Answers

Q-5: Can both PCR and antigen tests be used for staff and resident response testing?

A: Yes, PCR and antigen testing can be used for response testing. Antigen testing may be particularly helpful during the initial rounds of response testing to rapidly identify, isolate, and cohort positives; however, during response testing, negative antigen test results may need to be followed by a confirmatory molecular (e.g., PCR) test. Consider confirmatory testing for higher risk close contacts (consult with your local health departments). One implementation option is to substitute one round of response testing per week with a PCR test. <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/CDPH-Guidance-onthe-Use-of-Antigen-Tests-for-Diagnosis-of-Acute-COVID-19.aspx>

Q-6: Can you clarify if people testing positive for COVID-19 need to wait 90 days prior to testing again? **A:** We have learned that being previously positive does not appear to be as protective against Omicron. The 90-day window for COVID-recovered individuals no longer applies. In addition, we are now recommending per 21-08.6, that fully vaccinated and boosted HCP that are COVID positive can shorten the duration of their isolation to five days with a negative test (antigen test recommended). This is confusing because in the past CDPH and CDC did not recommend a test-based strategy to discontinue isolation and did not recommend including individuals who were infected within 90 days in exposure or diagnostic screening testing. Reinfection with past variants, like Delta, was very rare; however, now, due to Omicron, the guidance has changed because reinfection is more common.

Q-7: Are unboosted HCP who previously recovered from COVID (within 90 days) still required to do weekly testing as part of the new state health order?

A: Yes. Per the December 22, 2021, California State Public Health Officer Order, booster-eligible workers who have not yet received their booster by December 27, 2021, must be tested with either a PCR or antigen test at least twice weekly. There is no longer a testing exception for COVID recovered individuals within the 90 days.

Q-8: How often do HCP need to be tested now?

A: Per the December 22, 2021, California State Public Health Officer Order, unvaccinated HCP with an approved exemption must test with either a PCR or antigen test at least twice weekly. In addition, booster-eligible workers who have not yet received their booster by December 27, 2021, must be tested with either a PCR or antigen test at least twice weekly. As a best practice, CDPH strongly recommends that all nursing home workers (including those that are fully vaccinated and boosted) undergo at least twice weekly screening testing. Also, keep in mind that testing should continue for HCP with signs or symptoms consistent with COVID-19, regardless of vaccination status. Testing should also continue for HCP with higher-risk exposures (i.e., response testing), including HCP that are COVID-recovered (within 90 days). <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-of-the-State-Public-Health-Officer-Health-Care-Worker-Vaccine-Requirement.aspx>

Q-9: We are having issues with lab turnaround times. Any recommendations on labs that can turn around tests quickly?

A: Options include requesting CLIA-waived POC antigen tests from the local MHOAC or review the turnaround time dashboard below as well as the laboratory list to see if any of the labs in the lists can help. Another option is to connect with your local health department.

- CDPH Turnaround Time Snapshot https://testing.covid19.ca.gov/wp-content/uploads/sites/332/2021/11/20211118_TAT_dashboard.pdf
- COVID-19 Testing Task Force Laboratory List <https://testing.covid19.ca.gov/covid-19-testing-task-force-laboratory-list/>

Q-10: Do SNFs need to report antigen test results for visitors or HCP?

A: Antigen tests used for testing visitors or HCP must be supervised by the facility to verify the identity of the individual being tested and the date of the test. Supervised OTC testing may be conducted in 2 ways:

- **“Self-swab” or “self-collect”** (person collects own specimen using swab, facility staff add reagent, inserts swab in card, reads results).
- **“Self-test”** (person collects own specimen using swab, adds reagent to **their own** test card, inserts swab in card, reads results).

Test results (positive and non-positive) of visitors and HCP who **“self-swab” or “self-collect”**, but **facility staff perform the actual test, do need to be reported by the facility** to NHSN and CalREDIE. Test results of visitors and HCP who **“self-test” do not need to be reported** by the facility. However, if an HCP tests positive, the positive result does need to be reported to NHSN and CalREDIE (also include in SNF 123 survey). Per the CDC, individuals who use antigen tests should report test results to their healthcare provider <https://www.cdc.gov/coronavirus/2019-ncov/testing/self-testing.html>.

Isolation/Quarantine Questions & Answers

Q-11: How do we manage fully vaccinated and boosted asymptomatic staff that have repeat exposures due to caring for family members (children and elderly parents) that are positive? Can they return to work if they test negative?

A: The infectious period and last date of potential exposure are key. The shortened 5-day isolation durations in AFL 21-08.6 can be applied to the infected members of the household assuming they are mildly symptomatic or asymptomatic. For HCP who is boosted or fully vaccinated but not booster eligible, they do not have a work restriction, but should be immediately tested upon identification and then tested again at 5-7 days. Unvaccinated HCP need to quarantine for 7 days from their last exposure and be tested upon identification and have a negative test within 48 hours prior to returning to work.

Q-12: What is the new quarantine and isolation guidance for residents that have been exposed or have tested positive? Has it been shortened? What if the resident leaves the facility on a family visit and returns (they have a roommate)?

A: CDC has not updated quarantine and isolation guidance for patients or residents in health care facilities at this time. They are considering shortened isolation/quarantine for asymptomatic or mildly symptomatic residents, but no updates have been given thus far. Stay tuned for more information.

Q-13: Can an asymptomatic COVID positive dietary staff member that is still showing a positive test result after 5 days (both antigen & PCR) return to work with an N95 and face shield; or do they still need to wait 10 days? If they are positive on day 5, can we try testing them again on day 7?

A: This will depend on if you are in routine or critical staffing shortage per AFL 21-08.6. If there is no staffing shortage (therefore you are following “routine” staffing), and they have a positive test at 5 days, then they do not meet criteria to return to work. It is acceptable to retest on day 7 (we recommend an antigen test), or you could follow the original 10-day isolation strategy in which a test would not be needed. If your facility has critical staffing shortages, then the boosted HCP that still has a positive test on day 5 can return to work with an N95. If the staff member works with residents, they can only be assigned to work with COVID positive residents in the red zone.

Vaccine Questions & Answers

Q-14: After February 2, 2022, if booster-eligible workers do not want a booster, can they continue to work if they get tested twice a week? Or do they need to have a religious exemption form on file?

A: No, they cannot continue to work by being tested twice weekly. They would need to have an exemption on file to continue to work.

Q-15: If any employee is due for a booster on January 24, 2022, does the employee have to wait until that day, or can the booster be administered any day in January?

A: Any day in January is acceptable if they received Pfizer for primary series. This week, FDA approved and CDC updated recommendation boosters, shortening the interval from 6 months to 5 months for people who received the Pfizer-BioNTech COVID-19 Vaccine. This means that people can now receive an mRNA booster shot 5 months after completing their Pfizer-BioNTech primary series. www.cdc.gov/media/releases/2022/s0104-Pfizer-Booster.html

Q-16: If staff recently got their booster, do they still have to continue to swab twice a week for two weeks following the administration of the booster to ensure it is fully effective?

A: No, they are not required to be routinely tested twice a week after they are given the booster shot.

Q-17: Do you expect the definition of "fully vaccinated" to change?

A: No, currently CDC continues to define “fully vaccinated” as having completed primary vaccination. CDC does recommend that people stay “**up to date**” with their COVID-19 vaccines, which includes additional doses for immunocompromised or booster doses.

www.cdc.gov/coronavirus/2019-ncov/vaccines/stay-up-to-date.html

Other Questions & Answers

Q-18: What is the definition for "critical staffing shortage" in AFL 21-08.6? If we determine that our facility is not meeting the minimum required safe staffing levels, will that suffice? The problem with "routine" and "critical" staffing shortage is that they don't align with the CDC's conventional, contingency and crisis definitions.

A: There isn't an explicit definition of critical staffing shortage in AFL 21-08, however, the critical staffing shortage management and strategies align with CDC. CDC defines crisis capacity as no longer having enough staff to safely provide patient care. Each facility needs to evaluate their own circumstances as to whether they have a global shortage or if there is a shortage among a specific group of staff to provide a specific service line. Check with your local health department that may have more specific criteria or processes for defining or providing justification for critical staffing shortages.

Q-19: During an outbreak, can we admit new residents?

A: Consult with your local health department for more guidance. We recommend getting a first round of response testing done prior to admitting new residents to understand how widespread the outbreak may be.