



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

Wednesday, July 26, 2023

# Upcoming Calls



- CDPH Tuesday, 8 a.m., All-Facilities Phone Calls
  - 2nd Tuesday of each month
  - Call in: **1.844.721.7239**
  - Access code: **799 3227**
- CDPH Wednesday, 3 p.m., SNF Infection Prevention (IP) Webinars
  - 4th Wednesday of each 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:
  - 3rd Tuesday of each month
  - Register at: <https://bit.ly/NHSNHAlofficehoursJulytoDec2023>

# Agenda



- Announcements
- National Healthcare Safety Network (NHSN) Updates
- Immunization Branch Updates
- Occupational Health Branch Updates:
  - Best Practices for Ventilation of Isolation Areas to Minimize Aerosol Transmissible Disease Transmission
- 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 monthly (4th Wednesday) 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 from 8–9 a.m. PT, on the 2nd Tuesday of the month. Dial 844.721.7239, access code 7993227.

## Register for Upcoming Webinars

April–December 2023



### Past Webinars

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





# Opportunity for 1 & 2 Star Nursing Homes



## Infection Prevention & Control Leadership Program



### Program Highlights:

- Comprehensive curriculum focused on Leadership & Management skills and Infection Prevention & Control;
- Expert-led workshops and interactive sessions;
- Personalized mentorship and guidance.

\$22,000+  
Value

### Facility Requirements:

- California nursing home, located outside of Los Angeles County
- Rated as 1 or 2 Star Facility;
- Available to dedicate a minimum of 32 hours over 6 months.

### Who will participate? Facility Leadership Team:

- Administrator
- Director of Staff Development
- Director of Nursing
- Infection Preventionist
- Medical Director

For details visit [caltcm.org](http://caltcm.org), scan the QR code, or email [info@caltcm.org](mailto:info@caltcm.org).

# CAHF Infection Prevention Conference 2023

**August 15-16, 2023**

*Register Today!*



**Sheraton Pasadena  
Hotel**



Register at:

<https://www.cahf.org/Education-Events/Event-Info/sessionaltcd/IPC23>

# Virtual Infection Preventionist Train-the-Trainer Workshops



- 4 Train-the-Trainer Workshops offered over 15 weeks.
- **Goal:** Improve IPC practices to reduce HAIs and infection-related hospitalizations.
- BRN and NHAP continuing education available.
- Trainees are expected to train SNF staff on the IPC practices taught in each workshop.
- Register: <https://www.hsag.com/ip-train-the-trainer>

Register Here



BRN = California Board of Registered Nursing

NHAP = Nursing Home Administrator Program

**Enhanced Standard Precautions**

*May 15–19, 2023*

**Recording & Toolkits Available Online**

**Urinary Tract Infection Prevention**

*June 20–23, 2023*

**Recording & Toolkits Available Online**

**Certified Nursing Assistant IPC Curriculum**

*July 17–21, 2023*

**Recording & Toolkits Available Online**

**EVS IPC Curriculum for EVS Managers**

*August 21–25, 2023*

- August 21, 1–2:30 p.m.
- August 22, 11 a.m.–12:30 p.m.
- August 24, 12–1:30 p.m.
- August 25, 2–3:30 p.m.

# CNA IPC Curriculum & Friday Office Hours

- Standard Precautions
- Personal Protective Equipment
- Environmental Cleaning and Disinfection
- Skin, Perineal, and Urinary Catheter Care
- Oral Care and Feeding
- Positioning and Transferring Residents
- Bathing and Dressing Residents
- Nail Care and Shaving



**Register for CNA Office Hours: Friday, July 28, 2023, 11 a.m.–12 noon PT**

<https://us06web.zoom.us/meeting/register/tZEuc-qupzkoGtG71ilH7H8et-NBAkDrJAZG#/registration>





# NHSN Updates

# NHSN Alerts

The QA alert is generating incorrectly for some facilities, saying that they have reported a primary vaccination rate of less than 10%. **Please disregard these QA alerts**, as the alerts are not impacting a facility's ability to enter, update, save, or analyze data.<sup>1</sup>

The screenshot shows the NHSN Long Term Care Facility Component Home Page. On the left, there is a navigation menu with 'Long Term Care Dashboard' and 'Action Items'. Below this, a 'COMPLETE THESE ITEMS' section shows 'Survey Required 2022'. An 'ALERTS' section shows '2 COVID-19 Vaccination Summary Data Alerts'. A blue arrow points from this alert to a detailed view of the alerts.

The detailed view is titled 'COVID-19 Vaccination Summary Data Alerts' and contains a table with the following data:

Week Start Date	Week End Date	Vaccination Form Type	QA Alert	Variable	QA Flag Description	Confirmed
07/10/2023	07/16/2023	Resident	QA Alert	pctAnyVacc	The total (complete + partial) vaccination coverage rate is less or equal than 10%	N
07/17/2023	07/23/2023	Resident	QA Alert	pctAnyVacc	The total (complete + partial) vaccination coverage rate is less or equal than 10%	N

Navigation: Page 1 of 1, 50, View 1 - 2 of 2, Back

# How to Resolve Alerts

COVID-19 Vaccination Summary Data Alerts

Week Start Date	Week End Date	Vaccination Form Type	Variable	QA Flag Description
07/10/2023	07/16/2023	Resident	pctAnyVacc	The total (complete + partial) vaccination coverage rate is less or equal than 10%
07/17/2023	07/23/2023	Resident	pctAnyVacc	The total (complete + partial) vaccination coverage rate is less or equal than 10%

1 Click on QA Alert

Edit COVID-19 Vaccine Data

COVID-19 Vaccine: Residents

Resident COVID-19 Cumulative

Date Created:  
 \* Facility ID:  
 \* Week of Data Collection:

Note: Facilities submit Weekly level COVID-19 vaccination

Note: Facilities submit Weekly COVID-19 Vaccination Form

1. \* Number of residents submitted

2. \* Cumulative number of

Any completed COVID-19

2. \* Cumulative number of

2. \* Cumulative number of

Please review the current data

2.1 \* Only 1 dose of a two

2.2 \* Any completed Prior

3. \* Cumulative number of

3.1 \* Medical contraindications

3.1 \* Medical contraindications

Tip: Make sure Questions 2 + 3 = 1

2 Click on Manage Alert(s)

Week Start Date	Week End Date	Vaccination Form Type	Variable	QA Flag Description	Confirmed
07/10/2023	07/16/2023	Resident	pctAnyVacc	The total (complete + partial) vaccination coverage rate is less or equal than 10%	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Back Save

4 Click on Save

3 Check the box for Yes



# Immunization Branch Updates



# Best Practices for Ventilation of Isolation Areas to Minimize Aerosol Transmissible Disease Transmission



# HAI Updates

# COVID-19 CDPH All Facility Letters (AFLs)

<b>Active COVID-19 AFLs</b>		
Bulletin Number	Facility Type Affected	Subject
AFL 21-08.9 (Supersedes AFL 21-08.8)	General Acute Care Hospitals, Acute Psychiatric Hospitals, Skilled Nursing Facilities	Guidance on Quarantine and Isolation for Health Care Personnel (HCP) Exposed to SARS-CoV-2 and Return to Work for HCP with COVID-19
AFL 23-12 (Supersedes AFL 20-74.1)	Skilled Nursing Facilities (SNFs)	Coronavirus Disease 2019 (COVID-19) Recommendations for Personal Protective Equipment (PPE), Resident Placement/Movement, and Staffing in Skilled Nursing Facilities
<b>Rescinded COVID-19 AFLs</b>		
Bulletin Number	Facility Type Affected	Subject
AFL 21-07 (Rescinded)	Skilled Nursing Facilities, General Acute Care Hospitals	Maintain Efforts to Increase Staffing Levels
AFL 21-28.3 (Rescinded)	Skilled Nursing Facilities	Coronavirus Disease 2019 (COVID-19) Testing, Vaccination Verification and Personal Protective Equipment for Health Care Personnel (HCP) at Skilled Nursing Facilities (SNF)
<b>Obsolete COVID-19 AFLs</b>		
Bulletin Number	Facility Type Affected	Subject
AFL 20-09 (Obsolete)	All Facilities	Healthcare Facility Resources for the 2019 Novel Coronavirus (2019-nCoV)
AFL 20-10 (Obsolete)	All Facilities	Healthcare Facility Resources for the 2019 Novel Coronavirus (2019-nCoV)

All CDPH AFLs <https://www.cdph.ca.gov/Programs/CHCQ/LCP/pages/Incafl.aspx>

CDPH COVID-19 AFLs <https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/COVID-19-AFLs.aspx>

# Q: Are COVID-19 vaccines still required for Healthcare Personnel (HCP)?

- As of August 4, 2023, CMS will no longer require the COVID-19 primary vaccine series for HCP, as described in the CMS and HHS Final Rule in the Federal Register announced on June 5, 2023.
- The final rule states, “considering the lower policy priority of enforcement within the remaining time, we will not be enforcing the staff vaccination provisions between now and August 4, 2023.”
- CDPH also no longer requires COVID-19 vaccinations for HCP as of April 3, 2023.
- However, CMS and CDPH continue to **strongly recommend** that all HCP and residents remain up to date on recommended vaccines.
- Additionally, local health departments and healthcare facilities may implement COVID-19 vaccination requirements for HCP.



# Q: Are SNFs required to test newly admitted and readmitted residents upon admission?

- No. CDPH AFL 22-13.1, which had testing guidance for new admissions, is no longer in effect.
- Admission testing in nursing homes is now at the discretion of the facility per the most recent CDC guidance, updated on May 8, 2023.



# Q: Do nursing homes still need to report COVID-19 positive test results to CalREDIE, NHSN, LHDs, and L&C?

- Due to the ending of the PHE, there have been changes to the CalREDIE reporting requirement; however, other reporting requirements (e.g., NHSN, outbreak reporting to LHDs and L&C) have not changed.
- **CalREDIE Reporting Requirements:**  
Per the June 14, 2023, CDPH Laboratory Partner Letter, nursing homes conducting testing with a CLIA Certificate of Waiver are no longer required to report positive or non-positive antigen test results through CalREDIE.  
[https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/Laboratory\\_Reporting\\_Letter\\_COVID\\_Influenza\\_RSV\\_June2023-FINAL\\_ESP.pdf](https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/Laboratory_Reporting_Letter_COVID_Influenza_RSV_June2023-FINAL_ESP.pdf)  
Email [calredieelr@cdph.ca.gov](mailto:calredieelr@cdph.ca.gov) with any questions about result reporting.

## Q: Do nursing homes still need to report COVID-19 positive test results to CalREDIE, NHSN, LHDs, and L&C? (cont.)

- **NHSN Reporting Requirements:**

Nursing homes are still required to report an aggregate number of all newly positive tests (cases) based on a viral test result from residents or staff once a week to NHSN in the COVID-19 Pathway Reporting Module. The test result may be from a NAAT/PCR or an antigen test.

<https://www.cdc.gov/nhsn/pdfs/covid19/lrcf/57.144-res-blank-p.pdf>

- **CDPH L&C District Office and LHD Reporting Requirements:**

Nursing homes are still required to report outbreaks (currently, one or more new cases in either residents or HCP meets the reporting threshold) to their local public health officer and their respective CDPH Licensing & Certification District Office per [AFL 23-08](#): “Requirements to Report Outbreaks and Unusual Infectious Disease Occurrences” updated on January 18, 2023.”

## Q: Are nursing homes required to report COVID-19 cases to residents and their representatives, and families?

- No. Per CMS QSO-23-13-ALL, CMS relayed their concerns that the effort required to continue this reporting provision may outweigh the utility of the information provided.
- Therefore, CMS is exercising enforcement discretion and will not expect providers to meet this requirement at this time.
- CMS QSO-23-13-ALL:  
<https://www.cms.gov/files/document/qso-23-13-all.pdf>

# Q: How many weeks of PPE surge supply are nursing homes required to maintain?

- In September 2020, California passed the bill SB 275 which requires the Department of Industrial Relations to adopt regulations requiring California healthcare providers to have a 45-day surge-level stockpile of personal protective equipment (PPE) on hand.
- Providers must establish their stockpiles by January 1, 2023, or one year after the adoption of specified regulations, whichever comes later.
- The legislation requires the formation of a PPE Advisory Committee which will finalize the details required by SB 275.
  - The PPE Advisory Committee has not convened yet, so the regulation for a 45-day stockpile is not required.

SB 275

<https://www.seiu-uhw.org/wp-content/uploads/2020/09/SB-275-Details.pdf>

# PPE Surge-Level Stockpile Best Practices & Tips

- The type and amount of PPE needed is facility-dependent, based on individual exposure risks.
- All facilities should have adequate amounts of PPE based on current and projected use.
- PPE should cover all types of potential exposures at the facility, including: standard masks, N95 respirators, eye protection (face shields and/or goggles), and gowns.
- Depending on other factors, such as patient population and care type, additional types of PPE could be warranted (i.e., powered air purifying respirator [PAPR], hair or shoe covers) based on exposure risk.

# PPE Surge-Level Stockpile Tools

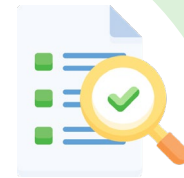
- The [CDC and NIOSH](#) offer the following tools to help facilities understand how to estimate 45-day supply needs:
  - **CDC Burn Rate Calculator**
    - Excel spreadsheet used to track PPE Use
    - Video available to track set up and use
  - **NIOSH PPE Tracker App**
    - No cost, mobile app based on the PPE Burn Rate Calculator Spreadsheet
    - Facilities can estimate and visualize how long PPE supplies will last
    - Tools to calculate the average PPE consumption rate
    - Videos and other tools guide how to use the app
- The Burn Rate Calculator and PPE Tracker app can provide facilities with data to understand changes in PPE use over the year. Once an average is established, a facility can determine daily use, and 45-day PPE use.

# Emergency Preparedness Webinars

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

**August 16**

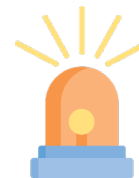
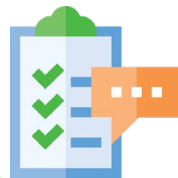
Engaging Your Staff—  
Being Prepared  
at Home



**October 18**  
Top 10 E-tag  
Deficiencies

**September 20**

Table-Top Exercises:  
Planning and the  
After-Action Report



**November 8**  
Emergency Operations  
Plan (EOP): Updating and  
Utilizing the CAHF Templates



# California Partnership to Improve Dementia Care

## Improving Resident Relationships in Long-Term Care (IRRL): A Train-the-Trainer Opportunity

- Discover the tools needed to support staff to recognize, manage, and reduce negative resident interactions ([flyer](#)).
- The IRRL Program is an evidence-based intervention to prevent resident-to-resident aggression (RRA).
- Registration Information:
  - **Wednesday, September 27, 2023**
    - 11:00 a.m.–12:45 p.m. PT
    - <https://bit.ly/IRRLsep27session>
  - **Thursday, September 28, 2023**
    - 3:00–4:45 p.m. PT
    - <https://bit.ly/IRRLsep28session>
- BRN, NHAP, and Social Worker CEUs available.



# 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-07262023-01