



California Department of Public Health (CDPH) Infection Prevention Webinar

Wednesday, October 12, 2022

Upcoming Calls



- CDPH Tuesday, 8 a.m., All-Facilities Phone Calls (every other Tuesday)
 - 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
 - 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/OctNovDecNHSNOfficeHours>

Agenda



- Testing Task Force Updates
- Immunization Branch Updates
- Healthcare-Associated Infection (HAI) Updates
- Q&A

NHSN Upcoming Webinar

- NHSN training on annual HCP influenza vaccination summary data through the NHSN HPS Component.
 - **Date:** Wednesday, October 19, 2022
 - **Time:** 10–11 a.m. PST
 - **Register:** https://cdc.zoomgov.com/webinar/register/WN_cVpHPfKTT--0cqQzQwdyw
- If you have any questions about NHSN, please send an email to user support at nhsn@cdc.gov. You should also include “HPS Flu Summary” in the subject line of the email and specify that you are a long-term care facility.



HAI Updates

CDC COVID-19 Data Tracker

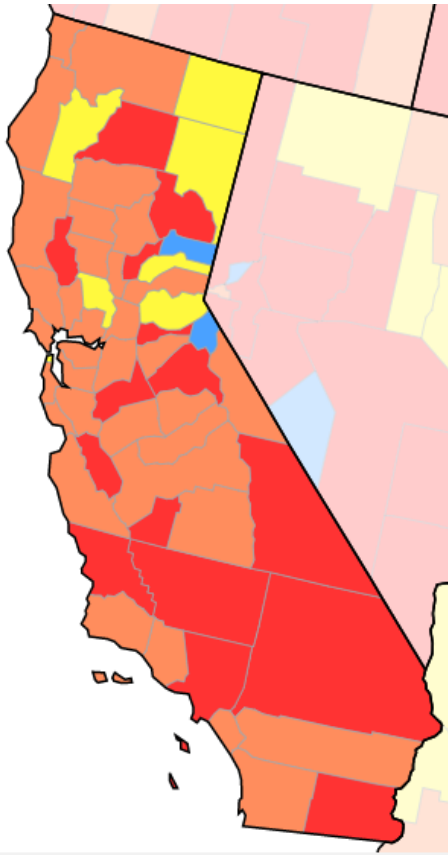
● High ● Substantial ● Moderate ● Low ● No Data

Data Type:

Community Transmission

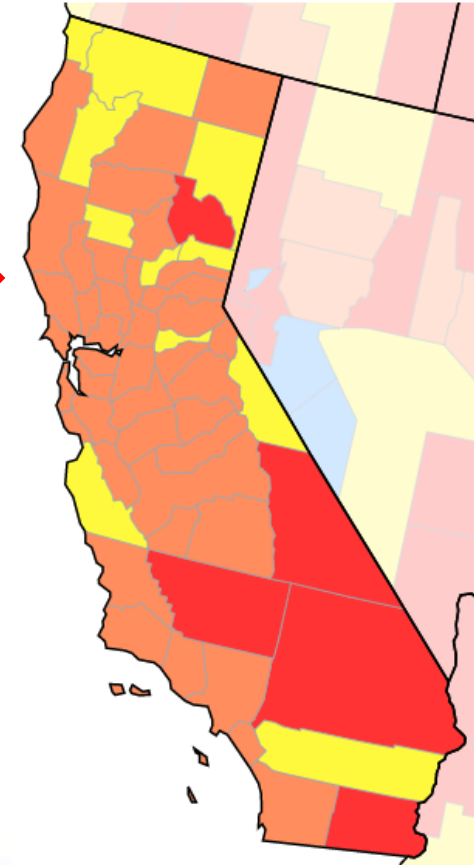
Map Metric:

Community Transmission



September 27

October 12



https://covid.cdc.gov/covid-data-tracker/#county-view?list_select_state=all_states&list_select_county=all_counties&data-type=Risk&null=Risk

CDPH AFL Updates

AFL	Date	Title	Website
20-88.3	10/5/22	COVID-19 Testing Recommendations for Patients and HCP at GACHS (supersedes AFL 20-88.2)	https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-88.aspx
21-34.4	10/5/22	COVID-19 Vaccine Requirement for HCP (supersedes AFL 21-34.3)	https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-34.aspx
22-13.1	10/5/22	COVID-19 Mitigation Plan Recommendations for Testing of HCP and Residents at SNFs (supersedes AFL 20-53.6 & AFL 22-13)	https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-22-13.aspx
21-14.2	10/6/22	Visitation Guidance for ICF/DD-H-N-CN Facilities During COVID-19 Pandemic (supersedes AFL 21-14.1)	https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-14.aspx
21-31.1	10/6/22	Visitor Limitation Guidance at GACHs (supersedes AFL 21-31 & AFL 20-38.7)	https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-31.aspx
22-07.1	10/6/22	Guidance for Limiting the Transmission of COVID-19 in SNFs (supersedes AFL 22-07)	https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-22-07.aspx
22-21	10/5/22	Enhanced Standard Precautions for SNFs (supersedes AFL 19-22)	https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-22-21.aspx

SNF= Skilled Nursing Facilities

GACHS = General Acute Care Hospitals

ICF/DD-H-N-CN = Intermediate Care Facilities; Developmentally Disabled; Habilitative; Nursing; Continuous Nursing

CDC and CMS Guidance Updates

- CDC's Interim Infection Prevention and Control Recommendations to Prevent SARS-CoV-2 Spread in Nursing Homes & Long-Term Care Facilities is now archived
<https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-termcare.html>
- CDC's SNF guidance is now incorporated in CDC's Interim Infection Prevention and Control Recommendations for HCP During the COVID-19 Pandemic (Updated 9/23/2022)
<https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html>

CMS QSO	Date	Title	Website
20-38-NH	9/23/22	Long-Term Care Facility Testing Requirements	https://www.cms.gov/files/document/qso-20-38-nh-revised.pdf
20-39-NH	9/23/22	Nursing Home Visitation - COVID-19	https://www.cms.gov/files/document/qso-20-39-nh-revised.pdf

Routine Diagnostic Screening Testing for HCP

- CDPH AFLs ([AFL 22-13.1](#); [AFL 21-34.4](#); [AFL 20-88.3](#)) are now aligned with the updated [CDC guidance](#), [CMS QSO 20-38-NH](#), and the CDPH State Public Health Officer Order (SPHO), “[Health Care Worker Vaccine Requirement](#),” updated Sept. 13, 2022.
- **The routine diagnostic screening COVID-19 testing requirements are rescinded (no longer required) for all unvaccinated exempt HCP and booster-eligible HCP who have not yet received their booster.**
- Per CDC and CMS, routine testing of asymptomatic staff is no longer recommended, regardless of community transmission rate, but may be performed at the discretion of the facility.
 - Check with your local health department for more stringent guidance.

The SPHOs amended to reflect testing changes include:

- Updated—[2/2/22 Health Care Worker Vaccine Requirement](#)
- Rescinded—[7/26/21 Health Care Worker Protections in High-Risk Settings](#)
- Rescinded—[8/11/21 Vaccine Verification for Workers in Schools](#)
- Updated—[2/22/22 Correctional Facilities and Detention Centers Health Care Worker Vaccination Requirement](#)
- Updated—[2/22/22 Adult Care Facilities and Direct Care Worker Vaccine Requirement](#)

Updated Visitation Guidance

- CDPH [AFL 22-07.1](#) is now aligned with [CMS QSO 20-39](#) and CDPH SPHO [“Requirements for Visitors in Acute Health Care and Long-Term Care Settings”](#) which was rescinded Sept 15, 2022.
- Visitors are no longer required to show proof of vaccination or a negative test to have indoor visitation.
 - While not required, facilities may offer and encourage testing for visitors.
- Visitors must continue to comply with [CDPH Masking Guidance](#).
- Screening for COVID-19 signs and symptoms, and exposures is still required, but may be conducted via **passive screening** as recommended by CDC. Options for **passive screening** to ensure visitors are educated to screen themselves prior to entry, include:
 - Post signs at entrances
 - Send emails to families/visitors with COVID-19 self-screening guidance

HCP Symptoms and Exposure Screening

- CDC still recommends screening for signs and symptoms of COVID-19, and potential exposures, but has transitioned from an **active** screening to a more **passive** self-screening process.
- Examples of passive screening, include posting signs at entrances, and sending emails and providing education to HCP to provide guidance about recommended actions for HCP who have:
 - a positive viral test for COVID-19
 - symptoms of COVID-19, or
 - close contact/higher-risk exposure with someone with COVID-19.
- There is no longer a requirement for SNFs to actively ask screening questions prior to entry; temperatures do not need to be checked.
- Facilities can continue to screen HCP in an active way, especially when community transmission rates are high or during a surge; however, active screening is no longer required.

Post-Exposure and Response Testing Guidance

- Per CDPH [AFL 22-13.1](#), CDPH continues to recommend immediate investigation when one or more COVID-19 positive individuals (HCP or resident) is identified.
- SNFs should initiate contact tracing to identify exposed HCP and/or residents.
- All exposed HCP and residents, regardless of vaccination status, should be tested promptly (but not earlier than 24 hours after the exposure) and, if negative, again at 3 days and at 5 days after the exposure (total of 3 tests; antigen or PCR tests are acceptable).
 - Testing is not generally recommended for individuals who had SARS-CoV-2 infection in the last **30** days if they remain asymptomatic.

Post-Exposure and Response Testing Guidance (cont.)

- Exposed residents should wear source control when outside their room but do not need to be quarantined, restricted to their room, or cared for by HCP using the full PPE recommended for the care of a resident with COVID-19.
- Refer to [AFL 21-08.8](#) for guidance about work restriction for HCP who have higher-risk exposures.
- If there is a large outbreak and contact tracing cannot be successfully implemented, the facility in partnership with the local health department may need to implement a facility-wide or group-level testing approach.

Q: Is the second booster now required for nursing home HCP?

- **No.** California's current vaccination and booster **requirements** for HCP remain in effect and have not changed.
 - **The primary vaccine series and first booster are required** per the [CDPH SPHO "Health Care Worker Vaccine Requirement"](#) (originally issued 8/5/21; amended 12/22/21, 2/22/22, 9/13/22) and [AFL 21-34.4](#).
 - HCP who have met the requirement to receive a primary series of vaccine and a booster are **not required to receive a bivalent booster**.
 - HCP who are newly coming into compliance with the vaccination requirement and are getting a booster dose now, should get the bivalent booster since it's the only currently authorized booster.
- **CDPH recommends all HCP be up to date on COVID-19 vaccine doses**, including the bivalent booster, when eligible.
 - CDPH Vaccine Guidance and Resource Website <https://eziz.org/resources-for-longterm-care-facilities/>
 - CDPH Bivalent COVID-19 Booster Dose FAQs <https://eziz.org/assets/docs/COVID19/BivalentBoosterFAQ.pdf>
 - CDPH COVID-19 Vaccine Timing by Age <https://eziz.org/assets/docs/COVID19/IMM-1396.pdf>
 - CDC Stay Up to Date with COVID-19 Vaccines Including Boosters <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/stay-up-to-date.html>

Source Control: CDPH Guidance Supersedes Updated CDC Guidance

- **At this time, CDPH continues to require masks (source control) for all individuals (HCP and visitors) entering a long-term care setting, regardless of vaccination status or community transmission rates.**
- CDPH is aware of and is reviewing [CDC's recent updates](#) that make source control optional for HCP in non-patient care areas in settings located in areas that have low (blue), moderate (yellow), or substantial (orange) COVID-19 transmission levels; however, currently there are **no changes to California's requirements for masks in healthcare settings**, including Long Term Care Settings and Adult & Senior Care Facilities.

Managing New Admissions and Residents who Leave Facility for >24 Hours

- Per [CDPH AFL 22-13.1](#), all newly admitted residents and residents who have left the facility for >24 hours, regardless of vaccination status, should have a series of three viral COVID-19 tests; immediately upon admission and, if negative, again at 3 and 5 days after their admission.
 - All newly admitted and readmitted residents should be tested regardless of COVID-19 community transmission levels.
- Quarantine is not required for newly admitted and readmitted residents, regardless of vaccination status.
- Testing and quarantine are not required for new admissions who tested positive and met criteria for discontinuation of isolation and precautions prior to admission and are within **30** days of their infection.
- Newly admitted residents should wear source control when outside their room for 10 days on admission.

Universal PPE (Eye Protection and N95 for AGP) Based on Community Transmission

- CDC no longer routinely recommends HCP wear eye protection for all direct resident care, and N95 or higher-level respirator while caring for residents undergoing AGP, based on community transmission levels.
- Eye protection and N95 respirators for AGPs can be considered:
 - During a surge or periods of high community transmission
 - During a COVID-19 outbreak in the facility.
- However, Cal/OSHA requires that SNFs use respirators for any AGPs on residents with aerosol transmitted diseases (i.e., COVID-19, Tuberculosis) per [Cal/OSHA's Aerosol Transmissible Disease standard](#).
- Also, [CDC](#) recommends, and [Cal/OSHA](#) requires, HCP to use N95s for AGPs for residents with suspected/confirmed seasonal influenza.
- Revisions to [AFL 20-74](#) and the attached [PPE table](#) are being made.

What Hasn't Changed?

- No changes to duration and criteria for discontinuation of isolation for COVID-19 positive residents and transmission-based precautions for positive residents.
 - COVID-19 positive residents still need to isolate for the full 10 days from the onset of symptoms; and at least 24 hours have passed since the last fever; and if symptoms have improved (e.g., cough, shortness of breath). If the resident remained asymptomatic, they also must isolate for 10 days from the date of the first positive test. If the resident had a severe or critical illness (e.g., intubation, ICU stay), or is moderately to severely immunocompromised, the isolation period may be extended to ≥ 20 days per CDC guidance.
- No changes to return-to-work criteria for positive HCP in CDPH [AFL 21-08.8](#) (but stay tuned).

Updated Enhanced Standard Precautions (ESP)

- CDPH [AFL 22-21](#) ESP for SNFs and D/P SNFs (updated 10/5/2022; supersedes AFL 19-22)
- Distributes the updated CDPH “[ESP for SNFs, 2022](#)” (20 pages)
- CDPH ESP Website [Link](#)
 - [Adherence Monitoring Tool](#)
 - [Six Moments Sign](#)
 - [Trifold Pamphlet](#)
- Tools under development
 - Checklist for readiness to implement ESP
 - Educational, Implementation slideset



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-10122022-01