

California Department of Public Health Center for Health Care Quality AFC Skilled Nursing Facilities Infection Prevention Call October 13 & 14, 2021

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/

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 presentation covered:

- CDPH Updates
- Testing Task Force Updates
- Immunization Branch Updates
- National Healthcare Safety Network (NHSN) Vaccine Reporting Updates
- Ventilation Strategies to Control COVID-19 Transmission in Skilled Nursing Facilities: Part 2
- Q&A

Important Links to State and Federal Guidance	
Important Links and FAQs to State Guidance	https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Guidan
	<u>ce.aspx</u>
September 9, 2021 CMS Press Release to expand	https://www.cms.gov/newsroom/press-releases/biden-harris-
vaccination requirements.	administration-expand-vaccination-requirements-health-care-
	settings
August 18, 2021 CMS Press Release: Regarding	https://www.cms.gov/newsroom/press-releases/biden-harris-
Requiring Staff Vaccinations within Nursing Homes	administration-takes-additional-action-protect-americas-
	nursing-home-residents-covid-19
August 5, 2021 State Public Health Officer Order:	https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVI
Health Care Worker Vaccine Requirement Q&A	D-19/FAQ-Health-Care-Worker-Vaccine-Requirement.aspx
August 5, 2021 State Public Health Officer Order:	https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVI
Requirements for Visitors in Acute Health Care and	D-19/Order-of-the-State-Public-Health-Officer-Requirements-
Long-Term Care Settings	for-Visitors-in-Acute-Health-Care-and-Long-Term-Care-
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July 26, 2021 State Public Health Officer Order:	https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVI
Health Care Worker Protections in High-Risk Settings	D-19/Unvaccinated-Workers-in-High-Risk-Settings-State-
Q&A	Public-Health-Order-FAQ.aspx
CDPH AFL 21-28: Testing, Vaccination Verification	https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-
and PPE for HCP at SNFs	<u>21-28.aspx</u>
and PPE for HCP at SNFs CDPH AFL 20-22.9: Guidance for Limiting the	21-28.aspx https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-
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and PPE for HCP at SNFs CDPH AFL 20-22.9: Guidance for Limiting the Transmission of COVID-19 in SNFs CDPH AFL 20-53.5: Mitigation Plan	21-28.aspx https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-22.aspx https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-
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CDC: Interim Infection Prevention and Control Recommendations to Prevent SARS-CoV-2 Spread in Nursing Homes	https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html
CMS QSO-20-38-NH: Revision to Long-Term Care	https://www.cms.gov/files/document/qso-20-38-nh-
(LTC) Facility Testing Requirements	revised.pdf
CDPH AFL 21-37: BYD Field Action Notification	https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-
	21-37.aspx

Vaccination Questions & Answers

Q-1: If an HCP got their second vaccine dose on October 13th, can they work on October 14th? Or do they need to wait until two weeks have passed from the second dose to be fully vaccinated? **A:** Since the HCP received their second dose on October 13th, they are compliant with the SPHO order, and do not have to wait until they meet the criteria of fully vaccinated to work. They can continue working but must be tested twice a week and wear appropriate source control (N95 preferred, but not required) until they meet criteria for being fully vaccinated. Consider a lower-risk assignment (e.g., not working with unvaccinated or severely immunocompromised residents who are less likely to have a robust immune response to vaccination) until the criteria for being fully vaccinated is met (but this is not a requirement).

Q-2: Do new hires need to be fully vaccinated before they can work?

A: New hires need to meet the criteria of the August 5, 2021, State Public Health Officer Order before beginning work. That means that they must complete their first dose of a one-dose regimen or second dose of a two-dose regimen before starting work. Once they complete their vaccines doses, they can begin working but must be tested twice a week and wear appropriate source control (N95 preferred, but not required) until they meet criteria for being fully vaccinated. Consider a lower-risk assignment (e.g., not working with unvaccinated or severely immunocompromised residents who are less likely to have a robust immune response to vaccination) until the criteria for being fully vaccinated is met (but this is not a requirement).

Q-3: If a fully vaccinated SNF HCP visits a resident at another facility as a visitor (they do not work at the facility), do they need to submit a copy of their vaccination card to our SNF? Or can they just show that they have proof of being vaccinated. In this case, they are refusing to leave us a copy of their card, and we want to make sure it is ok that we do not have the card on file.

A: The requirement is that the facility develops a process for verifying and documenting the vaccination status of a visitor. They do not need to keep a copy on file in the facility.

Q-4: We laminated the original cards our residents were given when the first series of vaccines were administered. We will be giving the booster doses in the facility, but since the cards are laminated, we cannot add additional information on the cards. Where can we get more vaccine cards so we can add the new doses to their records?

A: All vaccine supply kits, including for booster doses, should include new vaccine cards that can be used to record all of a resident's doses. If you still need new vaccine cards in addition to the cards in the vaccine supply kits, please email COVIDCallCenter@cdph.ca.gov.

Q-5: Can we attend the upcoming meetings related to the J&J and Moderna boosters, as well as the Pfizer EUA for 5–11-year-old children?

A: Yes, the meetings are open to the public and the FDA intends to make background materials for both VRBPAC meetings available to the public, including the meeting agendas and committee rosters, no later than two business days before each meeting. More FDA information can be found at: https://www.fda.gov/news-events/press-announcements/fda-hold-advisory-committee-meetings-discuss-emergency-use-authorization-booster-doses-and-covid-19. The FDA intends to livestream the

VRBPAC meetings on the agency's YouTube page (Oct. 14 meeting link; Oct. 15 meeting link; Oct. 26 meeting link), which will be viewable on the agency's Facebook and Twitter channels; the meetings will also be webcast from the FDA website. Registration information is below.

- October 14-15: FDA—Vaccines and Related Biological Products Advisory Committee; Register at: https://www.fda.gov/advisory-committee-calendar/vaccines-and-related-biological-products-advisory-committee-october-14-15-2021-meeting-announcement
 - Discuss EUA for Moderna and J&J booster doses for ≥18y/o
 - Discuss NIH Mix and Match Booster Study
- October 26, 2021: FDA—Vaccines and Related Biological Products Advisory Committee; Register at: https://www.fda.gov/advisory-committee-calendar/vaccines-and-related-biological-products-advisory-committee-october-26-2021-meeting-announcement
 - Discuss EUA for Pfizer vaccine to children 5-11 y/o
- October 20-21; November 2-3; 10am-5pm Eastern: CDC—Advisory Committee on Immunization Practices (ACIP); Register at: https://www.cdc.gov/vaccines/acip/index.html

Q-6: Do we need to treat unvaccinated X-ray and pharmacy vendors coming in every week as staff members? Do they need to be tested twice weekly or show proof of a negative test within 72 hours? **A:** Yes, contractors/vendors are subject to the August 5, 2021 State Public Health Officer Order, therefore need to follow the vaccine requirements for unvaccinated HCP, including twice weekly testing. The FAQ (https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/FAQ-Health-Care-Worker-Vaccine-Requirement.aspx) posted with the Health Officer Order indicates that it is up to the facility to verify the vaccination status of these vendors either through the individual vendor directly or through the vendor agency that is the employer.

Q-7: Do we need to test vaccinated staff who work per diem?

A: No, fully vaccinated staff, regardless of schedule, don't need to be routinely screening tested unless they have symptoms or were exposed.

Q-8: Can prospective candidates be hired if they have a religious exemption?

A: Yes. New hires can begin work in a SNF if they complete their vaccines doses, or if they have a medical or religious exemption on file.

Q-9: Our SNF's pharmacy provider told us that we can administer the COVID booster doses, as long as we are registered with CAIR? Is this correct information?

A: Each pharmacy has specific contracts with facilities. In this scenario it sounds like your pharmacy has agreed to supply your facility with COVID-19 booster vaccines that your staff will administer. In this case, then yes. Your facility would need to report the vaccines doses into CAIR.

Q-10: How can we modify our access to CAIR from view only to inputting data?

A: Email the CAIR help desk at <u>CAIRHelpDesk@cdph.ca.gov</u>.

Q-11: When will the Moderna booster vaccine be available?

A: Meetings are occurring with FDA and CDC this month regarding this topic. We anticipate hearing an answer by the beginning of November 2021.

Q-12: Is the content of the Pfizer booster dose different than the content of the original two dose series, and the third dose for immunocompromised individuals?

A: The Pfizer vaccines for age 12+ are all the same content and dosage for primary series, additional doses, and booster doses. The Moderna vaccine booster dosage is lower than the dosage for primary series.

Industrial Hygiene/Ventilation Best Practices Questions & Answers

The October 6, 2021 Part 1 Presentation Slides can be downloaded at:

- https://www.hsag.com/globalassets/covid-19/ventbestpractices_20211006_508.pdf
 The October 13, 2021 Part 2 Presentation Slides can be downloaded at:
 - https://www.hsag.com/globalassets/covid-19/vent2-isolationbm-508.pdf

Q-13: Are there any specific suggestions for the ventilation management of COVID in Operating Rooms that are usually positively pressured?

A: Please see guidance published on the American Society for Health Care Engineering (ASHE) and American Society of Heating, Refrigerating and Air-Conditioning Engineers (ASHRAE) websites:

- "OR Use During COVID-19", April 3, 2020: https://www.ashe.org/ashe-issues-recommendation-or-use-during-covid-19.
- "COVID-19 Ventilation Guidance Efforts" (has section on operating room): https://www.ashe.org/covid-19-ventilation-guidance-efforts.
- "Operating on a COVID-19 patient", https://www.ashrae.org/technical-resources/healthcare Under the Cal/OSHA Aerosol Transmissible Diseases standard, AGPs on a suspected or confirmed COVID-19 patient must be performed in an AIIR. https://www.dir.ca.gov/title8/5199.html

Q-14: Will there be any funding available for air scrubbers that can run \$500 per day? **A:** Not that we are aware of unfortunately. Also, recently we asked whether air cleaners, scrubbers, or negative pressure machines were available from the state stockpile/warehouse for distribution through the MHOACs and were told that they are not. Air scrubbers cost around \$500-\$1000 in total. If you're renting for \$500/day we recommend that you buy one instead.

Q-15: Negative pressure fans are very noisy. How do we mitigate in-room noise?

A: Some models of negative air machines listed for sale online are advertised as "quiet" but just how loud they are is not always listed. One that is advertised as quiet is 55-58 dBA. During the Wednesday Webinar, only a few options for ventilation were presented. If noise is an issue, ASHRAE has other temporary ventilation options on their topic page which include putting the HEPA filtered negative air machine outside the room. https://www.ashrae.org/technical-resources/residential-healthcare

Q-16: What are the recommendations for using a humidifier in a shared SNF resident room? A: Humidifiers are not ventilation devices. High humidity may affect the function of PACs, if a facility is using them. However, we will do more research to see how a humidifier can affect PAC function and provide a more comprehensive answer in writing. We haven't found anything from ASHRAE in terms of recommendations. The details of cleaning the humidifier are substantial including not using tap water.

Q-17: If a SNF opts to utilize one of the isolation room strategies discussed during the Wednesday Webinar, what would the expectation be regarding dedicated staff restroom, entrance, and break area? A: In staff restrooms, entrances, and break areas your facility should implement the ventilation best practices that were outlined in Part 1 of our presentation series last week (access the October 6, 2021 presentation slides and recording at: https://www.hsag.com/en/covid-19/long-term-care-facilities/cdph-ip-webinars-past/#October%E2%80%93December_2021). This includes working with facility staff to maximize the flow of outdoor air into these areas of the facility via the mechanical ventilation system and improving air filtration (MERV-13 or higher) in these areas of the facility if they rely on recirculated air. It also includes using Portable Air Cleaners (PACs) to augment ventilation in areas where more staff may congregate such as the break room. On top of these best practices, directional airflow strategies outlined in Part 2 of our presentation yesterday should be used to prevent "dirty air" from red/yellow zones travelling into staff areas and the facility entrance.

Q-18: Do we need OSHPD approval before installing fans in windows to create temporary negative pressure rooms?

A: The Department of Health Care Access and Information (HCAI), formerly OSHPD, previously signaled its intent to allow portable high efficiency particulate air (HEPA) filtration units that are not hard wired and that are exhausted through windows and used to create temporary negative pressure isolation rooms as stated at https://hcai.ca.gov/construction-finance/oshpd-covid-19-resources/, under "Negative Pressure Room". See the Policy Intent Notice 4. The Policy Intent Notice 4 (PIN 4) says that "Even though this was written for tuberculosis (TB) cases, this applies for the current COVID-19 Emergency." Please review this information and check with HCAI to see if it applies to the situation in your facility.

Q-19: How does OSHPD view temporary negative pressure rooms?

A: HCAI, formerly OSHPD, has said that they will not review the setup presented in this week's Wednesday Webinar with the HEPA filtered, negative pressure unit exhausting out the window to outdoors. However, excellent point that facilities should check with HCAI (formerly OSHPD) before making any changes to other existing ventilation systems.

PPE Questions & Answers

Q-20: Do HCP still need to wear eye protection (face shields, goggles) in the SNF?

A: Eye protection is required to be worn during all patient/resident care, including green, red, and yellow zones, in facilities in counties with moderate, substantial, and widespread COVID-19 transmission rates (high test positivity rates), and during a COVID-19 outbreak in a facility. All California counties still have high levels of transmission, so universal PPE, including eye protection, is required. Eye protection in the green zone is NOT required in counties that have minimal to no county transmission rates (<2% COVID-19 test positivity rates or low case rates), unless otherwise indicated as part of standard precautions. Eye protection is NOT necessary in non-patient care areas, such as the kitchen, hallways, nurses' station, regardless of county transmission. County test positivity rates can be found at: https://covid19.ca.gov/state-dashboard/. Check with your local health department to see if there is any specific guidance that they have. Refer to CDPH AFL 20-74.1 for more guidance (https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-74.aspx). The table in the attachment "COVID-19 PPE, Resident Placement/Movement, and Staffing Considerations by Resident Category" indicates when eye protection is needed. Note that CDPH may make changes to this guidance if the CDC framework is adopted in California.

Q-21: Can fully vaccinated SNF HCP wear surgical masks or KN95s in the green zone? **A:** Yes, surgical masks and KN95s can be worn by SNF HCP in the green zone as source control. While KN95s are acceptable, CDPH cautions against the use of KN95s as source control to avoid confusion with N95s. KN95s are not able to be worn as PPE.

NHSN Questions & Answers

Q-22: How does a provider correct incorrect employee vaccination rates on CMS.gov? The facility has 100% of staff vaccinated whereas Nursing Home Compare shows 5%.

A: Facilities can make corrections directly in NHSN. The corrections may take 2 weeks or longer to reflect on the CMS public websites. CDC pulls data routinely to send to CMS.

Testing Questions & Answers

Q-23: Can our SNF meet testing requirements by only using rapid antigen tests? Or do we need to use PCR tests at a certain frequency to verify test results?

A: Antigen tests can be used for routine screening testing which is required for exempt unvaccinated staff. There will always be situations where PCR tests will be needed for confirmatory tests when an antigen test is negative, but the person is symptomatic. Ensure your facility has access to PCR tests when they are necessary.

Visitation Questions & Answers

Q-24: Will there be guidance for facilities about the upcoming holiday season on dining and visits? A: Yes, CDPH has an upcoming meeting with experts to develop guidance that will be presented soon.

Q-25: Indoor visitor guidelines require proof of vaccination or a negative covid test for unvaccinated visitors. What about unvaccinated visitors that are COVID recovered within 90 days? Do they need to have a negative test?

A: No. Individuals who had COVID within 90 days should not be tested because the test results would not be useful. Facilities must have some form of documentation and process (i.e., COVID-19 positive test result) to verify the person had COVID, is past the isolation period, and is asymptomatic. COVID recovered unvaccinated visitors should be managed as unvaccinated visitors in terms of source control; and they need to keep their distance from the resident (no physical contact allowed).

Q-26: Can residents and visitors eat meals together?

A: Communal dining guidelines are outlined in CDPH AFL 20-22.9

(https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-22.aspx). Fully vaccinated residents and fully vaccinated visitors can eat and drink together in indoor and outdoor visits, as long as they are in a space that is distanced from other residents that they are not visiting. Physical distancing is not required, and they may have physical contact. However, eating and drinking is not allowed during visits in which the resident and/or visitor is unvaccinated or partially vaccinated. Those visits must be conducted with a well-fitted facemask throughout the visit, physical touch is not allowed, and physical distancing must be maintained throughout the visit.

Other Questions & Answers

Q-27: Can our SNF offer buffet meals to residents? In this case, staff would serve the residents. A: In general, we discourage self-serve buffets from an infection prevention perspective. Provided that other protocols and measures are in place regarding communal dining (distancing and not inviting visitors), buffet meals are reasonable as long as the staff serve the food to the residents.