



**California Department of Public Health
Center for Health Care Quality
AFC Skilled Nursing Facilities Infection Prevention Call
October 20 & 21, 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:

- Requesting Staffing Support from the Medical Health Operational Area Coordinator (MHOAC)
 - Nursing homes with staffing shortages should follow the process to request staffing outlined in the CDPH AFL 20-46.3 updated on September 11, 2021 “Requests for urgent staffing resources for COVID-19.”
<https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-46.aspx>
 - Per the AFL, nursing homes are urged to report staffing needs to local health departments and the MHOAC to initiate the process of locating staffing resources. MHOAC contact information can be found at: <https://emsa.ca.gov/medical-health-operational-area-coordinator/>
 - If the MHOAC cannot fulfill staffing needs, staffing resources will be requested from the region via the Regional Disaster Medical Health Coordinator (RDMHC).
 - If regional resources are inadequate, the RDMHS will forward the request to the Medical Health Coordination Center (MHCC).
 - Review the Staffing Process Flowchart at
<https://www.cdph.ca.gov/Programs/CHCQ/LCP/CDPH%20Document%20Library/AFL-20-46-Attachment-01.pdf>
- Testing Task Force Updates
 - PPT: <https://www.hsag.com/globalassets/covid-19/testingtaskforce102021-508.pdf>
- Immunization Branch Updates
 - PPT: <https://www.hsag.com/globalassets/covid-19/immunizationbranch102021-508.pdf>
- National Healthcare Safety Network (NHSN) Vaccine Reporting Updates
 - CMS imposed Civil Money Penalties (CMP) against many facilities for failure to submit data to NHSN for the weeks of 10/3 and 10/10. After discussion about data upload errors, CMS made the decision to rescind CMP penalties imposed against facilities during those two weeks for failure to report the data.
- Skilled Nursing Facility Infection Preventionist Education Requirements
 - PPT: <https://www.hsag.com/globalassets/covid-19/ipconteduc102021-508.pdf>
 - The presentation reviewed CDPH SNF IP education requirements; provided resources for obtaining initial and annual IP training courses; and described how to become certified in infection control and prevention (CIC).
- Strategies to Reduce Risk: Humidifier Guidance (see slides 9-11)
 - PPT: <https://www.hsag.com/globalassets/covid-19/cdphoct20102021-508.pdf>

Important Links to State and Federal Guidance	
Important Links and FAQs to State Guidance	https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Guidance.aspx
August 5, 2021 State Public Health Officer Order: Health Care Worker Vaccine Requirement Q&A	https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/FAQ-Health-Care-Worker-Vaccine-Requirement.aspx
August 5, 2021 State Public Health Officer 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-FAQ.aspx
July 26, 2021 State Public Health Officer Order: Health Care Worker Protections in High-Risk Settings Q&A	https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Unvaccinated-Workers-in-High-Risk-Settings-State-Public-Health-Order-FAQ.aspx
CDPH AFL 21-28: Testing, Vaccination Verification and PPE for HCP at SNFs	https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-28.aspx
CDPH AFL 20-22.9: Guidance for Limiting the Transmission of COVID-19 in SNFs	https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-22.aspx
CDPH AFL 20-53.5: Mitigation Plan Recommendations for Testing	https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-53.aspx
CDPH AFL 21-08.5: Guidance on Quarantine for HCP Exposed to COVID-19	https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-08.aspx
CDPH AFL 21-34: COVID-19 Vaccine Requirement for HCP	https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-34.aspx

Vaccination Questions & Answers

Q-1: Can individuals who got the Moderna or J&J vaccines as their original vaccine dose(s), get the Pfizer booster dose?

A: Recommendations on mixing boosters will be released soon. Stay tuned for further information.

Q-2: We interviewed a dietary manager candidate that we want to hire, but she is unvaccinated. She said she is willing to get the Pfizer vaccine if we hire her. Can we hire her now?

A: The opportunity to hire a new employee is open at any point for any facility. However, a new hire cannot provide patient care or expose other workers that provide care until they complete their first dose of a one-dose regimen or second dose of a two-dose regimen before starting work (per the August 5, 2021 State Public Health Officer Order). 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: We have five unvaccinated staff with religious exemptions. When is the CMS final rule going to come out, and could that affect the religious exemption process?

A: We do not have any updates at this time on the final rule from CMS on the federal COVID vaccination mandate. CMS is still working on the proposed rule for this.

Q-4: Are medical or religious exemptions required for HCP that decline the flu shot?

A: At this time, these are not requirements at the state level, but local health departments may issue such requirements. In the past, many local health departments issued masking orders for HCP that declined the flu vaccine, but since we now have universal masking, that is a moot point. Refer to your local health department that might issue a health order in preparation for the flu season.

Q-5: Will it be required for HCP to get the booster shot later?

A: At this point, the booster shots are recommended, but are not required. Also, at this time, there is no change to the definition of being “fully vaccinated” for the purposes of testing and quarantine requirements.

Testing Questions & Answers

Q-6: Do we still need to test asymptomatic visitors before they enter the facility?

A: There is no state requirement to test fully vaccinated visitors, but there is a requirement to test unvaccinated visitors for an indoor visit within 72 hours of the visit. See AFL 20-22.9 for more guidance. <https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-22.aspx>

Q-7: Will there be an extension on the expiration dates of the Abbott BinaxNOW antigen test kits?

A: Abbott extended the expiration date to 12 months from the date of production. CDPH is looking into the possibility of using the kits beyond their expiration date. At this time, we do not recommend using expired kits, but keep them until further notice.

Q-8: If a fully vaccinated symptomatic staff member had a negative test using an at-home test kit that they administered at home, do they still need to do a PCR or POC test at the facility?

A: Yes. Symptomatic individuals who test negative with an at-home test kit or antigen test at the facility need to have a confirmatory PCR test.

Q-9: How often does an unvaccinated staff member need to be tested if they only work on weekends?

A: Refer to AFL 21-28 for guidance under “Updated Routine Diagnostic Screening Testing of Asymptomatic HCP” (<https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-28.aspx>). HCP who are unvaccinated or incompletely vaccinated and work no more than one shift per week must undergo weekly SARS-CoV-2 diagnostic screening testing, and the testing should occur within 48 hours before their shift. HCP who are unvaccinated or incompletely vaccinated and work less often than weekly must undergo SARS-CoV-2 diagnostic screening testing, and the testing should occur within 48 hours before each shift. The test can be either a PCR or antigen test.

Q-10: Can unvaccinated visitors use an antigen test, or does it need to be a PCR test?

A: Yes, you can offer visitors a POC antigen test on site (although SNFs are not required to offer such testing), or they can obtain a PCR test. “Over the counter” or “at-home” tests can be used by visitors, but the test needs to be observed by facility staff. For example, an at-home test kit can be brought by the visitor and observed by facility staff; the at-home test should not be completed at the visitor’s home prior to the visit.

Isolation/Quarantine Questions & Answers

Q-11: Fully vaccinated visitors, staff and residents are testing COVID positive at a higher rate than unvaccinated individuals in my community. Has CDPH considered requiring fully vaccinated individuals to quarantine after exposure for safety purposes?

A: California data shows that unvaccinated people are far more likely to get COVID, be hospitalized for COVID, or die from COVID, than vaccinated people. The vaccines are working to prevent severe infection, hospitalization, and death. Since a high proportion of people in your community (SNF in general) are vaccinated, you might be observing more cases among vaccinated individuals. We don’t anticipate any changes to recommendations for quarantine for exposed vaccinated staff, but we do recommend they are tested according to current CDC and CDPH guidance.

Q-12: The quarantine AFL 21-08.5 was updated on October 11th, but it is still old guidance. Is the HAI team talking internally about updating it?

A: In the most recent update to AFL 21-08.5, we’ve removed the information about quarantine for residents – it now only addresses HCP and it is current with CDC and CDPH guidance around quarantine and testing based on their vaccination status. There has been discussion on updating relevant AFLs (AFL 20-53 and AFL 20-74) with considerations for safely implementing CDC’s updated guidance on quarantine for patients and residents in healthcare facilities, but this is still in process.

Q-13: A worker has a positive family member in their home and is unvaccinated because they have an exemption. Do they need to isolate?

A: Assuming the worker cannot reliably isolate from the positive household member, the worker would be considered exposed until the end of the isolation period for the positive family member in their household. The unvaccinated exposed worker would need to be excluded from work and quarantined from the date of initial exposure through 14 days after their last exposure to their household member.

PPE Questions & Answers

Q-14: When can N95s be taken off to get a breath of fresh air?

A: Workers can go outside the facility in an area where they are alone or distanced from residents and other workers to take a break and take their mask off.

Q-15: Do staff have to don and doff their N95 mask for patients in the yellow zone?

A: In a cohort setting with residents who are under the same status, it is acceptable for HCP to extend use of the respirator. There is no need to don and doff between each resident while caring for multiple residents in that zone. The respirator should be taken off and discarded after completing the resident care activities (in other words, re-donning or reuse of respirators is not permitted).

Visitation Questions & Answers

Q-16: Can an unvaccinated 9- and 15-year-old visit a COVID recovered resident if they have a negative COVID test? We are a D/P SNF with no COVID cases.

A: Yes, it is acceptable for them to visit in the facility with proof of a negative test with 72 hours per CDPH AFL 20-22.9.

Q-17: Do children under 12 need to show proof of a negative test within 72 hours of the visit?

A: Yes, unvaccinated children need to be tested prior to an indoor visit. Masking is also required, therefore individuals who are unable to mask would not meet the criteria to visit.

Other Questions & Answers

Q-18: Will there be an updated AFL to reflect the approval of AB 1585 (revision of AB 2644) in regards to who can work as an IP in SNFs?

A: CDPH will be issuing an AFL to reflect the altering of AB 1585 to expand who can be considered an IP in the facility.

Q-19: Can SNFs use non-CNAs to be trained and skill checked to perform functional maintenance activities such as range of motion, splinting and walking? Can SNFs use non-CNAs as feeding assistants who are trained, and skill checked? Could a waiver be submitted to count these types of creative solutions into PPD?

A: Currently, California permits a nurse assistant who has been trained and had their competencies verified to perform some CNA services and tasks. There is limited approval for nurse assistants participating in a training program to be counted towards the 3.5 component of the staffing requirement. Regarding feeding assistants, currently California does not have a way to approve training programs for feeding assistants; so that is not an option at this time.