



**California Department of Public Health
Center for Health Care Quality
AFC Skilled Nursing Facilities Infection Prevention Call
October 6 & 7, 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 I
- 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/Guidance.aspx
September 9, 2021 CMS Press Release to expand vaccination requirements.	https://www.cms.gov/newsroom/press-releases/biden-harris-administration-expand-vaccination-requirements-health-care-settings
August 18, 2021 CMS Press Release: Regarding Requiring Staff Vaccinations within Nursing Homes	https://www.cms.gov/newsroom/press-releases/biden-harris-administration-takes-additional-action-protect-americas-nursing-home-residents-covid-19
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/CHCO/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/CHCO/LCP/Pages/AFL-20-22.aspx
CDPH AFL 20-53.5: Mitigation Plan Recommendations for Testing	https://www.cdph.ca.gov/Programs/CHCO/LCP/Pages/AFL-20-53.aspx
CDPH AFL 21-08.4: Guidance on Quarantine for HCP Exposed to COVID-19	https://www.cdph.ca.gov/Programs/CHCO/LCP/Pages/AFL-21-08.aspx
CDPH AFL 21-34: COVID-19 Vaccine Requirement for HCP	https://www.cdph.ca.gov/Programs/CHCO/LCP/Pages/AFL-21-34.aspx

severely immunocompromised people at least 28 days after an initial 2-dose mRNA primary vaccine series.

- **Booster dose:** An additional dose of vaccine administered when the initial immune response to a primary vaccine series is good, but likely to have waned over time, usually starting at 6 months after the primary series. CDC has issued recommendations for a single Pfizer-BioNTech vaccine booster dose at least 6 months after completion of a Pfizer-BioNTech COVID-19 primary vaccine series in populations who are at high risk for serious COVID-19 disease. Guidance for providing booster doses for individuals who received a primary series of Moderna or J&J vaccine are forthcoming.

Q-7: Will CVS and Walgreens consider administering boosters in the SNF like they did for the Federal Pharmacy Partnership? We have access to vaccines from our own pharmacy, but it was easier with CVS taking care of all the logistics.

A: The LTCF toolkit provides more information on this subject. Page 3 of the document has a detailed list of the various large retail pharmacy chains with information regarding how to contact them to request an on-site vaccine clinic. Facilities can reach out to the pharmacies directly to explore this option. [https://eziz.org/assets/docs/COVID19/LTCF Toolkit 10.01.21.pdf](https://eziz.org/assets/docs/COVID19/LTCF_Toolkit_10.01.21.pdf)

Q-8: Can partially vaccinated HCP continue to work in our SNF because we have staffing shortages?

A: No. The August 5, 2021 State Public Health Officer order does not allow unvaccinated workers to continue to work, even when there are staffing shortages. Per the September 7, 2021, CDPH AFL 20-46.3 (<https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-46.aspx>; updated 9/7/2021), “Requests for Urgent Staffing Resources for COVID-19”, nursing homes are urged to report staffing needs to local health departments and the Medical Health Operational Area Coordinator (MHOAC) to initiate the process of locating staffing resources from healthcare facilities, coalitions, medical reserve corps, local staffing agencies, etc.

Q-9: What is the California Immunization Registry (CAIR2) and how do I get access to vaccine records?

A: CAIR2 is a secure, confidential, statewide computerized immunization information system for California residents. SNF are encouraged to register with CAIR2 to record vaccine doses administered and get access to immunization records (such as flu, COVID-19, pneumococcal vaccine) of their patients. They may not access vaccine records for staff or visitors who received vaccine elsewhere. Visit the immunization registry website to request an account with the registry that serves your county.

- **CAIR2:** Serves 49 California counties <https://cairweb.org/enroll-now/>
- **San Diego Regional Immunization Registry (SDIR):** <http://www.sdiz.org/cair-sdir/enrollment.html>
- **Healthy Futures:** Serves the San Joaquin Region, including Alpine, Amador, Calaveras, Mariposa, Merced, San Joaquin, Stanislaus, and Tuolumne counties <http://www.myhealthyfutures.org/>

Q-10: Our new admission says they are vaccinated, but the resident and family have no proof. We don't have access to CAIR2. What should we do?

A: The Digital COVID-19 Vaccine Record is a useful tool to access vaccine records. <https://myvaccinerecord.cdph.ca.gov/>. Any individual that received a vaccine record in California can access their vaccine record using that website. Sometimes there may be data entry problems or delays and the information cannot be accessed until those are corrected. To troubleshoot, individuals can utilize the CDPH Virtual Vaccination Support website: <https://chat.myturn.ca.gov/?id=17>. Another option is to seek vaccine records from the provider who administered the vaccine, or have the provider correct your information in CAIR2.

Q-11: Is the booster mandatory?

A: No, the booster dose is not mandatory at this time. However, it is recommended to provide maximum protection to high-risk individuals.

NHSN Questions & Answers

Q-12: If we report POC rapid tests into NHSN, will we be able to see those results in CalREDIE?

A: No, if a facility reports their results to NHSN then they will not be able to access them in CalREDIE. CalREDIE is set-up to only allow the user access to the results they entered directly in CalREDIE. In NHSN, line listings for residents, staff, and visitors POC test results can be generated under the Analysis tab.

Q-13: Any updates on the turnaround time for NHSN to process requests for level 3 access for SAMS?

A: Users receive their SAMS grid card 2-4 weeks after uploading the complete SAMS application. Please refer to this document for an overview and tips on uploading ID verification documents for SAMS level-3: <https://auth.cdc.gov/sams/SAMSProofingGuide.pdf>

Testing Questions & Answers

Q-14: Can you please clarify the screening, testing, vaccination proof needed for paramedics/EMS/non-emergency medical transportation drivers in emergency vs. non-emergency situations?

A: Transporters who enter the facility for non-emergency purposes should undergo the same process as visitors. They need to be screened for symptoms or recent exposure, and they are subject to the vaccine verification, or testing requirements if they are unvaccinated. Transport companies that are independent or privately owned, are not subject to CDPH vaccination or testing mandates. To reduce the risk of transmission, some facilities are delivering the resident to the front door or to the pick-up area just outside the entrance of the building. CDPH strongly recommends that SNFs proactively include requirements for vaccination and testing when negotiating contracts transportation companies.

Q-15: It appears that employee health insurances will no longer be covering the cost for twice-weekly testing for unvaccinated HCP with an exemption. Is there any subsidy for our industry?

A: Diagnostic screening testing costs are covered by insurance companies. Be sure not to refer to this testing as surveillance testing. We recommend that you contact the California Department of Managed Health Care (DMHC). <https://www.dmhc.ca.gov/AbouttheDMHC/ContactUs.aspx>

Isolation/Quarantine Questions & Answers

Q-16: Can we cohort fully vaccinated dialysis residents?

A: Yes, there are advantages of cohorting dialysis residents together as a best practice, as long as they are compatible for cohorting with their COVID exposure status.

Q-17: If an HCP is asymptomatic and tests positive for COVID, but then develops symptoms 5 days later, when does the 10-day isolation period start? From the date of the positive test, or the day that symptoms started?

A: The 10-day isolation period begins on the date of symptom onset, even if the symptom onset is a few days after the positive test. If an individual remains asymptomatic, the date of the positive test would be the start of isolation. Also, note that there may be some instances in individuals with COVID-19 who have severe underlying immunocompromising conditions (such as receiving

chemotherapy for cancer treatment) who may shed the virus for a prolonged period of time. In that case, isolation may need to be extended up to 20 days, or sometimes even longer. Consult with the provider managing the immunocompromising condition.

Q-18: Can yellow zone residents go out on pass with their family?

A: Although residents have the right to leave the facility, those in the yellow zone are on quarantine. Per local health department rules, a person on quarantine cannot go out into the community.

PPE Questions & Answers

Q-19: What PPE do visitors need to wear for essential/compassionate care visits with COVID-19 positive or Tuberculosis residents?

A: They should wear the same PPE as health care workers who are caring for the patient. A respirator would not necessarily be fit tested, but the facility is required to instruct the visitor how to wear the N95 respirator and how to conduct a seal check to provide optimal protection. End of life considerations need to be taken on a case-by-case basis. The facility must explain the risk to the visitor if the visitor chooses to have physical contact with a loved one who has a contagious disease without the recommended PPE.

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.

Visitation Questions & Answers

Q-21: The CMS QSO 20-39-NH mandate that says that visitation must be suspended when a new case of COVID-19 among residents or staff is identified. Visitation can resume once at least one round of facility-wide testing is completed, etc. How do you reconcile that with the CDPH mandate that indoor visitation be allowed for green and yellow zones at all times, even when there is an outbreak?

<https://www.cms.gov/files/document/qso-20-39-nh-revised.pdf>

A: In California, CDPH guidance in AFL 20-22.9

(<https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-22.aspx>; updated 8/12/2021) allows more visitation opportunities for residents (especially for yellow zone residents) than the CMS guidance in QSO 20-39. During an outbreak, the local health department might temporarily require suspension of visitation similar to what is described in the CMS QSO, but otherwise California SNFs are expected to follow CDPH visitation guidance.

Industrial Hygiene/Ventilation Best Practices Questions & Answers

Q-22: Are transparent zipped door coverings recommended for rooms with ability to exhaust air to the outside only? We are assisted by our Engineering Department for HVAC.

A: We'll be discussing the transparent doors for isolation on next week's call. Working with your engineering department or with an HVAC consultant is optimal.

Q-23: It is quite tricky to exhaust dirty air to the outside; our facility is located in a mix commercial and residential area in Milpitas. My brother is a mechanical Engineer and is in charge in cleaning ducts, changing filters. Knowing COVID is easily transmissible- our choices are HEPA filters or having negative pressure rooms, but at the same time; only 3 rooms at our SNF possibly can be converted into a negative pressure room

A: There's a way to control how much fresh air is going into the system. In the building code, there is a requirement to have your fresh air filter a certain number of feet away. Exhausting air may be done in any kind of neighborhood. Return air should have the highest level of filtration that the facility can handle.

Other Questions & Answers

Q-24: What guidance is available to SNFs to prevent and manage influenza outbreaks?

A: CDPH provides guidance in the following document "Recommendations for the Prevention and Control of Influenza in California Skilled Nursing Facilities (SNF) during the COVID-19 Pandemic." <https://www.cdph.ca.gov/Programs/CHCQ/HAI/CDPH%20Document%20Library/RecsForPreventionControlFluInCASNFsDuringCOVIDFINAL100120.pdf>. There are no substantive changes to the document that was posted in October 2020.

Q-25: Are nursing homes required to have a full-time infection preventionist (IP)?

A: Yes. California nursing homes are required to have an IP 40 hours a week per AFL 20-52, AFL 20-84, and AB 2644, which states that effective January 1, 2021, SNFs are required to have a full-time, dedicated IP. The IP role may be filled either by one full-time IP staff member or by two staff members sharing the IP responsibilities, if the total time dedicated to the role equals at least the time of one full-time staff member. The IP must be an RN or LVN and shall not be included in the calculation of 3.5 hours of direct patient care per day provided to residents. The IP must complete 10 hours of continuing education in the field of IPC on an annual basis. www.leginfo.ca.gov/faces/billTextClient.xhtml?bill_id=201920200AB2644

Q-26: Which training courses meet the requirements for IP training in AB 2644?

A: Examples of approved courses include the following:

- CDPH Infection Preventionist Training for SNFs 14-hour Online Course: cdph.ca.gov/Programs/CHCQ/HAI/Pages/IP_TrainingForSNFs_OnlineCourse.aspx
- CDC Nursing Home Infection Prevention Training Course: <https://www.cdc.gov/longtermcare/training.html>
- CAHF: AHCA Infection Preventionist Specialized Training (IPCO) <https://www.cahf.org/Education-Events/QCHF-Education-Foundation/AHCA-Infection-Preventionist-Specialized-Training-IPCO>

Q-27: Last year, AFL 20-82 "CDPH Influenza Vaccination and Masking Policy" informed health care facilities of the CDPH policy requiring all CDPH employees who enter health care facilities to wear a specific sticker to indicate Influenza vaccination for the 20/21 season. I believe SNF workers also were required to wear some form of ID on their badge to indicate Flu shot received. Will this be updated for the 21/22 season?

A: Surveyors do usually wear stickers to verify flu vaccination. We are unsure of a requirement for SNF staff, but local health departments or facilities may have their own guidance regarding the use of stickers. All HCP are strongly recommended to receive influenza vaccination.

Q-28: Are skilled nursing facilities still able to be considered referring employers under the Cal/OSHA Aerosol Transmissible Diseases standard (California Code of Regulations, title 8, section 5199) to reduce the risk of ATD infection to their employees?

A: Yes. Nursing homes are referring employers. While SNFs may refer individuals with tuberculosis and other infections covered by ATD standards to other facilities, all SNF are expected to meet all CDPH expectations for the mitigation of COVID-19 and be able to care for residents with COVID-19 safely during this pandemic. See Cal/OSHA's website for more information: "Interim Guidance for Protecting Workers at Skilled Nursing and Long-term Care Facilities from Exposure to Coronavirus Disease (COVID-19)": <https://www.dir.ca.gov/dosh/Coronavirus/Skilled-Nursing.html>