



**California Department of Public Health
Center for Health Care Quality
AFC Skilled Nursing Facilities Infection Prevention Call
July 28 & 29, 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:

- **CDC Health Alert** (July 27, 2021): Vaccination to Prevent COVID-19 Outbreaks with Current and Emergent Variants <https://emergency.cdc.gov/han/2021/pdf/CDC-HAN-447-COVID-19-Vaccine-to-Prevent-Outbreak-and-Variants-07-27-2021.pdf>
- **State Public Health Officer Order** (July 26, 2021): California Implements First-in-the-Nation Measures <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-of-the-State-Public-Health-Officer-Unvaccinated-Workers-In-High-Risk-Settings.aspx>
- **New All Facilities Letters (AFLs)**
 - **AFL 20-74.1** (Updated 7/22/21) Recommendations for PPE, Resident Placement/Movement, and Staffing <https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-74.aspx>
 - **AFL 20-75.1** (Updated 7/22/21) COVID-19 Outbreak Investigation and Reporting Thresholds <https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-75.aspx>
 - **AFL 21-23** (Updated 7/22/21) Ending of the Emergency Blanket Waiver of MDS Timeframe Requirements <https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-23.aspx>
 - **AFL 21-26** (7/26/2021) Mandated Reporting Requirements of Potential Abuse, Neglect, Exploitation, or Mistreatment of Elders or Dependent Adults <https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-26.aspx>
- **Tracking COVID-19 in CA** <https://covid19.ca.gov/state-dashboard/#location-california>
- **Testing Task Force Updates:**
 - Average test positivity past 7 days: 5.9%
 - Up 1.4% from last week, and up 5.1% from early June

Vaccine Data Reports Available to all Nursing Homes

HSAG is producing weekly vaccine data reports for all nursing homes that can be accessed through HSAG's Quality Improvement and Innovation Portal (QIIP) at: <https://qiip.hsag.com>. If you need access to the QIIP, email the [HSAG QIIP Administrator Form](#) to canursinghomes@hsag.com.

Vaccine Resources can be found at: www.hsag.com/covid-19/vaccine-resources.

Register for 5-Part 30-minute "Quickinars" for vaccine strategies at <https://www.hsag.com/en/covid-19/vaccine-resources/#Full Speed Ahead COVID 19 Vaccination Recognition Program>

State Public Health Officer Order Questions & Answers

Q-1: With the new State Public Health Order, does the county test positivity rate matter?

A: Yes, the county test positivity rate still matters for universal PPE requirements, but it no longer affects testing frequency. For example, CMS QSO-20-38-NH requires twice a week testing of unvaccinated staff if the county positivity rate is >10% (<https://www.cms.gov/files/document/qso-20-38-nh-revised.pdf>). However, the new California public health order requires all unvaccinated HCP to be tested twice a week, regardless of the county test positivity rate. Universal PPE (eye protection, respiratory protection) is still tied to county incidents and test percentage positivity. Note that the CDC launched a new website "COVID-19 Integrated County View" with defined indicators and thresholds of transmission <https://covid.cdc.gov/covid-data-tracker/#county-view>. CDPH is having active discussions in review of the CDC's community transmission level algorithms. For now, current California guidance is to continue to use the county test positivity rates published by CDPH at <https://covid19.ca.gov/state-dashboard/#location-california>.

Q-2: Does the 70% guidance from CDPH AFL 20-53.4 still apply?

A: Previous testing guidance from CDPH AFL 20-53.4 is now outdated regarding discontinuing routine diagnostic screening testing of fully vaccinated asymptomatic HCP if ≥70% of residents and ≥70% HCP that work in the facility are fully vaccinated. Now the 70% guidance is not applicable. Fully vaccinated staff only need to be tested if they are symptomatic. However, fully vaccinated workers may consider continuing diagnostic screening testing if they have underlying immunocompromising conditions which might impact the level of protection provided by the COVID-19 vaccine. In addition, asymptomatic unvaccinated or incompletely vaccinated workers are required to undergo diagnostic screening testing at least twice weekly with either PCR testing or antigen testing. The old guidance was they had to be tested once weekly; but now acute health care and long-term care settings must be tested at least twice a week with either PCR testing or antigen testing in this new public health order.

Q-3: Does the new State Public Health Officer Order apply to ICF/DD-H and ICF/DD-N facilities?

A: Yes, the state public health order applies to intermediate care facilities. Please see the list of facilities specified in the public health officer order at <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-of-the-State-Public-Health-Officer-Unvaccinated-Workers-In-High-Risk-Settings.aspx>. Intermediate care facilities are listed under the category "Acute Health Care and Long-Term Care Settings".

Q-4: The public order states that unvaccinated workers are "strongly encouraged" to wear respirators. Does "strongly encouraged" mean the same as "required/mandated"? If yes, my understanding is that respirators for unvaccinated HCP are now required in all patient care areas (green, yellow & red zones; and in common areas where patients could enter like hallways. However, fully vaccinated HCP only need to wear respirators when caring for residents in the yellow and red zones. Is that correct?

A: It is not mandated, but it is required that you make respirators available to staff and ensure that part of your plan is to encourage the respirator's use.

Q-5: To clarify, for SNFs and ICFs in LA County, do we adhere to the 70% vaccination rate of staff and clients to change testing guidelines? Or do we follow the "new" guidelines for testing in the state public health order?

A: For LA County, ICFs can find their guidance under the Community Care Facilities (CCF) guidance for now: <http://publichealth.lacounty.gov/acd/ncorona2019/healthfacilities/ccf/#guidance>. LAC DPH is in the middle of re-evaluating their testing guidance in regard to routine screening testing for SNFs and CCFs including ICFs given the new public health order and following any new AFLs that come out related to the new public health order.

Quarantine/Isolation Questions & Answers

Q-6: If a fully vaccinated employee with no signs and symptoms tests positive from a rapid test, should the employee be quarantined pending the PCR results?

A: The person should be isolated until the PCR test results are received. The PCR should be performed within 24 hours of the positive antigen test. If the PCR is positive, the person should isolate for 10 days from the date of the positive antigen test, or from the date of symptom onset, provided the individual's fever has resolved and symptoms are improving.

Q-7: If fully vaccinated staff calls off for signs and symptoms of COVID-19, do they need to isolate?

A: Fully vaccinated staff who have signs and symptoms of COVID-19 should be tested for COVID-19. If the test is positive, the 10-day isolation period begins from the date of symptom onset, provided the individual's fever has resolved and symptoms are improving.

Testing Questions & Answers

Q-8: We already have a CLIA waiver but want to use the VBL to obtain the POC and PCR supplies. We applied but were told to contact the MHOAC instead to get the cards because we have a CLIA.

A: We recommend all facilities that want to use the state resources, VBL PCR antigen testing or both, to apply through the testing taskforce website testing.covid19.ca.gov and the state will work with you to make sure you have the supplies you need. If you need further help for an existing application please contact testing.taskforce@state.ca.gov.

Q-19: Why are fully vaccinated staff not required to be tested? They can spread the virus as well.

A: Because of the rarity of this occurring, testing is not required.

Q-10: Will there be some support from public health to operationalize the testing of unvaccinated healthcare workers?

A: The testing taskforce is working to help operationalize testing of unvaccinated healthcare workers. Please go to testing.covid19.ca.gov for state resources.

Q-11: For testing asymptomatic unvaccinated HCP twice weekly, can we do a combination of PCR and antigen tests? For example, test 1 is antigen test; test 2 is PCR?

A: Yes. The worker has a choice of either test as long as the test is done twice.

Q-12: What if the employee is per diem and only works 2 weekends a month. Are they required to come in and test twice weekly when they are not at the facility?

A: A reasonable approach for those individuals would be to have one of their tests be within 48 hours of their shift and getting the second test at some point in the week.

Q-13: Do unvaccinated administrative SNF staff (billing, HR department) that never enter the patient care space) need to be tested twice a week and wear a respirator?

A: We need to investigate this further and will address this question soon.

Personal Protective Equipment (PPE) Questions & Answers

Q-14: If an HCP is allergic to N95 and surgical mask, what face covering can be an alternative? Cloth mask?

A: Cloth masks are not acceptable. A viable option would be to wear an elastomeric respirator or PAPR.

Q-15: Is it required for SNF staff to be fit tested with an N95 respirator?

A: Yes, fit testing is required for wearing an N95 respirator.

Q-16: Can unvaccinated staff wearing proper PPE, care for COVID-19 positive residents in the red zone?

A: Yes, they can as long as they are utilizing the correct PPE.

Q-17: Please clarify if Los Angeles county SNFs now need to wear universal eye protection?

A: LA County DPH sent out an email blast to all SNFs in LA County on Monday July 26th and updated the online guidance on July 27th to indicate that eye protection, which can be goggles or face shields, should be worn when staff are providing resident care, within 6 ft of residents, or while in resident rooms in all cohorts including the green zone.

<http://publichealth.lacounty.gov/acd/ncorona2019/healthfacilities/snf/prevention/>

Group Activities Questions & Answers

Q-18: Is there going to be new guidance regarding group activities?

A: On a CDC call, they made it clear that infection prevention and control guidance for SNFs has not changed. Group activities need to be preserved for resident wellbeing, so there have been no changes. See CDPH AFL 20-22.8 for guidance on group activities.

<https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-22.aspx>

Q-19: Can faith-based services be held in a SNF?

A: Yes, faith-based services can be held in a SNF and would be considered a group activity. Ensure the group activities guidance in CDPH AFL 20-22.8 is followed.

<https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-22.aspx>

Q-20: Our SNF has a special treatment program because our residents all have a mental health diagnosis. 92% of our residents are vaccinated. One HCP wearing an N95 in the green zone tested positive after travel, so now our green zone is a yellow zone. Our residents' mental health is suffering because they are now in a yellow zone (i.e. increased suicidal ideation; verbal and physical outbursts). Can we continue with small mental health groups outside with the same small groups social distancing? All residents are monitored for symptoms and remain asymptomatic.

A: Yes, you can continue with small groups that are necessary for resident wellbeing as long as masks for source control are utilized and groups of residents are not mixed together. We suggest you contact your local health department or CDPH HAI team at CovHAI@cdph.ca.gov for further infection prevention and control guidance for doing this safely. Facilities need to do the best they can to ensure residents have the physical, social and emotional well being they need, while preventing transmission.

Vaccination Questions & Answers

Q-21: Is the J&J vaccine effective against the Delta variant?

A: Overall, all COVID-19 vaccines currently authorized in the United States are effective against COVID-19, including serious outcomes of severe disease, hospitalization, and death. Studies are underway to learn more about the effectiveness of Johnson & Johnson/Janssen vaccine. Latest CDC info can be found at: <https://www.cdc.gov/coronavirus/2019-ncov/science/science-briefs/fully-vaccinated-people.html>.

Cohorting Questions & Answers

Q-22: Are we expected to remove all plastic barriers/walls in the red zone and yellow zone areas? If so how would advise us to keep these areas separate from each other and from the green zone?

A: Physical barriers between zones are not required, but they could be utilized in the red zone under limited circumstances. If you don't have a red zone, you do not need to have plastic barriers. Please take them down unless there are specific reasons for keeping them up. If you need to keep them up you will need to fill out a 5000a waiver and submit it to CHCQ. A July 8, 2021 OSHPD memo states "Pursuant to AFL 20-26.8 from CDPH issued on May 17, 2021, stating that CDPH provided 60-day advance notice that temporary waivers of specified regulatory requirements will expire on July 17, 2021, facilities that have a continued need for flexibility can submit a Form 5000a (PSF) Emergency Program Flexibility request to CHCQDutyOfficer@cdph.ca.gov or Form 5000 (PDF) Program Flexibility request to their local district office. All other temporary changes of use or modification to the physical environment must be restored to original condition by September 1, 2021." Contact Jason Belden jbelden@cahf.org for direction and clarification.

Visitation Questions & Answers

Q-23: Do you recommend antigen testing to all walk-in visitors that cannot provide proof of vaccination?

A: As a best practice, it is reasonable and safe to provide antigen testing to all visitors. However, it is important to honor resident rights. Unvaccinated visitors are allowed to visit their loved ones. The vaccination status is what determines whether or not they need to wear a mask and socially distance while they are with the resident. Adding testing as a requirement is reasonable, but we need to follow up on the issue of resident rights.

Q-24: Is it acceptable for facilities to end visitation for visitors who refuse to follow infection control guidelines? For example, visitors refuse to follow county masking guidance; or unvaccinated visitors refuse to socially distance?

A: You need to re-educate the visitor on your facility's policies and health department guidelines first. You can offer visitation off premises if possible. Consult with your facility's legal advisors for guidance.

Q-25: When it comes to visitors, we need help understanding how to balance resident rights with safety? For example, can SNFs require testing prior to visitor entry? Can we require unvaccinated visitors to only do outdoor visits?

A: Visitation guidance from CDPH AFL 20-22.8 has not changed as of this moment. For unvaccinated visitors, your facility can offer testing as part of your resident visitation procedures; and outdoor visitation can be an option, but if the visitor prefers to have an indoor visit, you need to try to

accommodate their request. Please consult with your local health department if you feel conflicted about resident rights versus safety.

Q-26: In Los Angeles County, can indoor visits only be done if the visitor shows proof of being fully vaccinated and is tested before entry; or shows proof of a negative viral test taken within 2 days of the visit? Does this mean that unvaccinated visitors are not allowed to have indoor visits?

A: Indoor visits are permitted in Los Angeles county SNFs, regardless of vaccination status.

<http://publichealth.lacounty.gov/acd/ncorona2019/healthfacilities/snf/prevention/#groupactivities>. LAC DPH gives an example that outdoor visits are an option, but the visits are not limited to that. SNFs can come up with other ways to make the visitation safer with lower risk for transmission, with another example (again, not limited to this) being requesting for the visitor to wear an N95 respirator, etc. LAC DPH says that for the cohorts where visitation is allowed based on their table, that the facility must permit indoor visits and this is not contingent on providing proof.

Other Questions & Answers

Q-27: In the beginning of the pandemic we were told COVID-19 was transmitted via droplets, but now it is aerosol? When did this change?

A: CDPH has always acknowledged the role of aerosol transmission of this virus and has consistently required respiratory protection for HCP caring for residents with suspected or confirmed COVID-19.

Note that CDC updated their guidance in May of 2020. <https://www.cdc.gov/coronavirus/2019-ncov/science/science-briefs/sars-cov-2-transmission.html>

Q-28: Are SNFs required to accept new COVID admissions? If yes, where is that documented?

Facilities are refusing new COVID admissions and will only take readmissions.

A: CDPH has never take a position to direct any facility to take admissions. Facilities should accept admissions for residents they are able to take care of. COVID status itself isn't a condition for which a SNF doesn't have the capacity or capability to provide care for. It is our understanding that facilities are reluctant to re-open their red zone because of staffing, because it's financially difficult to justify opening a red zone for one or two residents. A solution would be to contact your local hospitals and local public health department to coordinate movement of admissions in the safest way possible to your facility so that SNFs can staff for more than one COVID-19 patient at a time.