



California Department of Public Health (CDPH) Infection Prevention Webinar

Wednesday, April 21, 2021

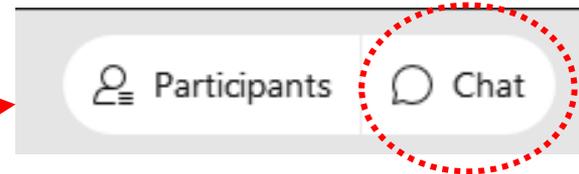
Upcoming Calls



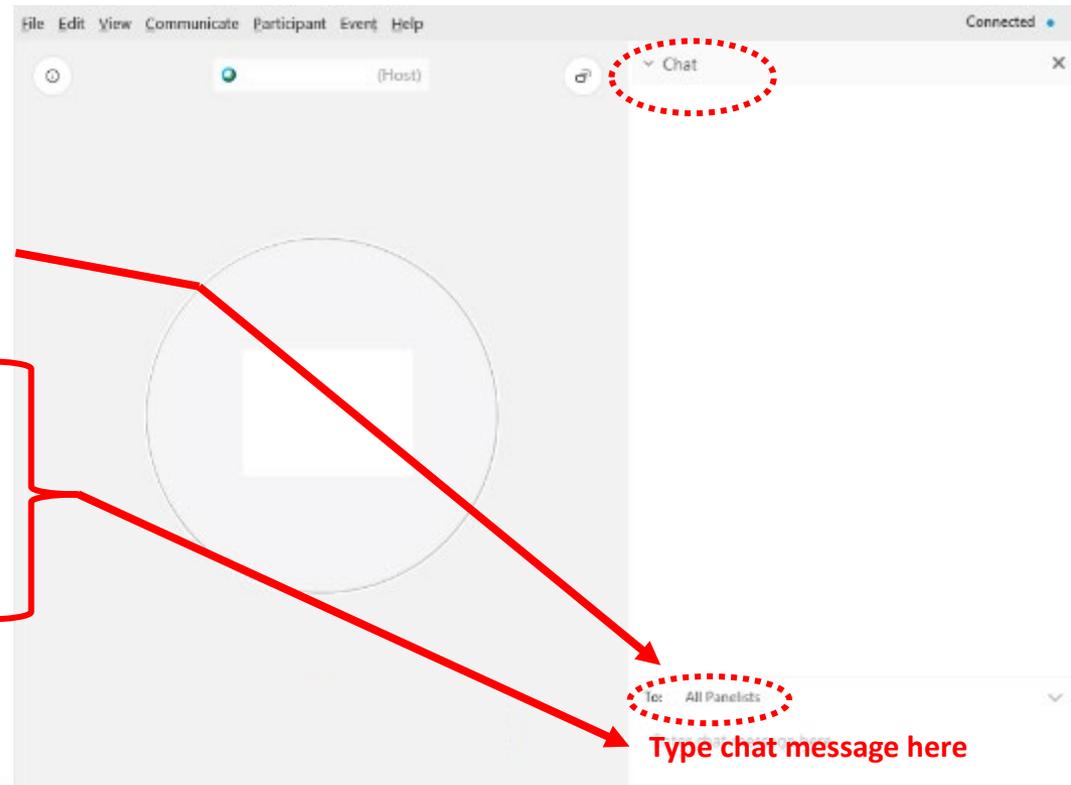
- CDPH Tuesday, 8 a.m., All-Facilities Phone Calls:
 - Call in: **1.844.721.7239**
 - Access code: **799 3227**
- CDPH Wednesday, 3 p.m., SNF Infection Prevention (IP) Webinars:
 - Register at: hsag.com/cdph-ip-webinars
 - Recordings, notes and slides are posted at registration site
 - **No webinar March 31**
- CDPH Thursday, 12 noon, SNF IP Phone Calls:
 - Dial-in: **1.877.226.8163**
 - Access Code: **513 711**

How to Find the Chat Button and Submit a Question

1. To submit a question, click on the **Chat Button** located in the bottom right corner of your Webex window.



2. The **Chat** panel will open on your right.



3. Indicate that you want to send a question to **All Panelists**.

4. Type your question in the box at the bottom of the panel.

5. Press **Enter** on your keyboard to submit your question.

To connect to the audio portion of the webinar, please have Webex call you.

Please Take 5 Seconds and Let Us Know



We want this call to be meaningful to you, so we need your input.

At the end of the webinar, you will be asked **one question** to determine if this call equipped your organization to manage COVID-19 and/or your infection prevention practices.

Agenda



- CDPH Update
- Testing Task Force Update
- NHSN Reporting Update
- ECHO Continuation Phase
- Immunization Branch Update
- Q&A



CDPH Update



Testing Task Force Update



NHSN Reporting Update
(National Healthcare Safety Network)
sams.cdc.gov

Long-Term Care Facility (LTCF) COVID-19 NHSN Module Review

- Surveillance Reporting Pathways
 1. Resident Impact and Capacity
 2. Staff and Personnel Impact
 3. Supplies and Personal Protective Equipment
 4. Ventilator Capacity and Supplies
 5. Therapeutics



- Point-of-Care (POC) Test Reporting Tool
- COVID-19 Vaccination

Recent Updates

The screenshot displays the NHSN (National Healthcare Safety Network) interface. On the left is a vertical navigation menu with the following items: NHSN Home, Alerts, Dashboard, Reporting Plan, Resident, Event, Summary Data, COVID-19, Vaccination Summary, Import/Export, Surveys, and Analysis. The 'COVID-19' item is highlighted in a darker blue. A dropdown menu is open from 'COVID-19', listing: Dashboard, Pathway Data Reporting (circled in red), POC Test Result Reporting, COVID-19 Vaccination - HCW, and COVID-19 Vaccination - Residents. On the right side of the interface, there is a header for 'NHSN Long Term Care Fac' with a globe icon, followed by a 'Long Term Care Dashboard' button and an 'Action Items' section.

Supplies and Personal Protective Equipment (PPE) Pathway—Need for Government Support or Assistance

Need for Government Support or Assistance

The information collected below will be shared with federal, state, and local partners to identify COVID-19 emergency response needs more rapidly. However, facilities should also continue to report urgent needs through established state and local reporting mechanisms - particularly in cases where those needs present immediate threats to the health and safety of residents or staff.

For the following questions, please report responses ***once during the reporting week.***

	Would your facility like outreach by local and/or state government for assistance with any of the items below? ±
Staffing Shortages	N - No ▼
Personal Protective Equipment Shortages	N - No ▼
SARS-CoV-2 (COVID-19) Testing Supply Shortages	N - No ▼
Infection Control/ Outbreak Management	N - No ▼
Staff Training	N - No ▼
COVID-19 Vaccine Access (for Residents and/or Staff)	N - No ▼

± Providing this information does not guarantee resources can be provided as local, state, and federal resources are allocated based on supply and priority of need. All facilities should continue to go through established local and state channels to request assistance.

NHSN Reporting Instructions

- Table of Instructions for 5 Reporting Pathways
 - [Resident Impact and Facility Capacity](#)
 - [Staff and Personnel Impact](#)
 - [Supplies and Personal Protective Equipment](#)
 - [Ventilator Capacity and Supplies](#)
 - [Therapeutics](#)

Data Collection Forms



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www.cdc.gov/nhsn

COVID-19 Module Long Term Care Facility: Resident Impact and Facility Capacity

Page 1 of 3	*Required to save; **Conditional
NHSN Facility ID:	CMS Certification Number (CCN):
Facility Name:	Facility Type:
*Date for which counts/responses are reported: / /	*Date Created: / /

Counts should be reported on the correct calendar day and include only the new counts for the calendar day (specifically, since counts were last collected). If the count is zero, a "0" must be entered as the response. A blank response is equivalent to missing data. **NON-count** questions should be answered one calendar day during the reporting week.

Facility Capacity
**ALL BEDS (enter on first survey only, unless the total bed count has changed)
*CURRENT CENSUS: Total number of beds that are occupied on the reporting calendar day

Resident Impact for COVID-19 (SARS-CoV-2)

ADMISSIONS: Number of residents admitted or readmitted from another facility who were previously diagnosed with COVID-19 and continue to require transmission-based precautions. *Excludes recovered residents.*

POSITIVE TESTS (previously called "Confirmed"): Number of residents newly positive for COVID-19 based on a viral test result.

**TEST TYPE: Based on the number of reported Positive Tests, indicate how many were tested using each of the following:

- _____ **Positive SARS-CoV-2 antigen test **only** [no other testing performed]
- _____ **Positive SARS-CoV-2 NAAT (PCR) **only** [no other testing performed]
- _____ **Positive SARS-CoV-2 antigen test **and** negative SARS-CoV-2 NAAT (PCR)
- _____ **Any other combination of SARS-CoV-2 NAAT (PCR) and/or antigen test(s) with at least one positive test

‡ Only include if the two tests were performed **within 2 days of each other**. Otherwise, count first test only. **Important:** The total for Test Type must equal the total for Positive Tests

CALCULATED TOTAL CONFIRMED (not editable by user):

** VACCINATION STATUS: For positives in each test type category, indicate how many residents received COVID-19 vaccination before the positive test:

Positive SARS-CoV-2 antigen test only [no other testing performed]:

- Not vaccinated with COVID-19 vaccine: _____
- Pfizer-BioNTech COVID-19 vaccine: Only 1 dose: _____; Dose 1 and dose 2: _____
- Moderna vaccine: Only 1 dose: _____; Dose 1 and dose 2: _____
- Janssen: Dose of Janssen COVID-19 vaccine: _____
- Unspecified: Complete COVID-19 vaccination series: unspecified manufacturer: _____

Assurance of Confidentiality: The voluntarily provided information obtained in this surveillance system that would permit identification of any individual or institution is collected with a guarantee that it will be held in strict confidence, will be used only for the purposes stated, and will not otherwise be disclosed or released without the consent of the individual, or the institution in accordance with Sections 304, 306 and 308(d) of the Public Health Service Act (42 USC 242b, 242k, and 242m(d)).

CDC estimates the average public reporting burden for this collection of information as 50 minutes per response, including the time for reviewing instructions, searching existing data/information sources, gathering, and maintaining the data/information needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-1317); CDC 57-144 (Form) v.7 (03-2021)



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www.cdc.gov/nhsn

COVID-19 Module

Long Term Care Facility: Staff and Personnel Impact

Page 1 of 2	*Required to save; **Conditional
NHSN Facility ID:	CMS Certification Number (CCN):
Facility Name:	Facility Type:
*Date for which counts/responses are reported: / /	Date Created: / /

Counts should be reported on the correct calendar day and include only new counts for the calendar day (specifically, since counts were last collected). If the count is zero, a "0" must be entered as the response. A blank response is equivalent to missing data. **NON-count** questions should be answered one calendar day during the reporting week.

Staff and Personnel Impact

POSITIVE TESTS (previously called "Confirmed"): Number of staff and facility personnel with a new positive COVID-19 viral test result.

**TEST TYPE: Of the number of reported staff and facility personnel above with a Positive Test, how many were tested using each of the following:

- _____ **Positive SARS-CoV-2 antigen test **only** [no other testing performed]
- _____ **Positive SARS-CoV-2 NAAT (PCR) **only** [no other testing performed]
- _____ **Positive SARS-CoV-2 antigen test **and** negative SARS-CoV-2 NAAT (PCR)
- _____ **Any other combination of SARS-CoV-2 NAAT (PCR) and/or antigen test(s) with at least one positive test.

‡ Only include if the two tests were performed **within 2 days of each other**. Otherwise, count first test only. **Important:** The total for Test Type should equal the total for Positive Tests.

_____ **RE-INFECTIONS: Of the number of reported staff and facility personnel above with a Positive Test, how many were considered as re-infections?

- _____ **SYMPTOMATIC:** Of the number of reported staff and facility personnel with Re-Infections, how many had signs and/or symptoms consistent with COVID-19?
- _____ **ASYMPTOMATIC:** Of the number of reported staff and facility personnel with Re-Infections, how many did **not** have signs and/or symptoms consistent with COVID-19?

COVID-19 DEATHS: Number of staff and facility personnel with COVID-19 who died.

Staff and Personnel Impact for Non-COVID-19 (SARS-CoV-2) Respiratory Illness

INFLUENZA: Number of staff and facility personnel with a new influenza (flu).

RESPIRATORY ILLNESS: Number of staff and facility personnel with acute respiratory illness symptoms, excluding COVID-19 and/or influenza (flu).

Assurance of Confidentiality: The voluntarily provided information obtained in this surveillance system that would permit identification of any individual or institution is collected with a guarantee that it will be held in strict confidence, will be used only for the purposes stated, and will not otherwise be disclosed or released without the consent of the individual, or the institution in accordance with Sections 304, 306 and 308(d) of the Public Health Service Act (42 USC 242b, 242k, and 242m(d)).

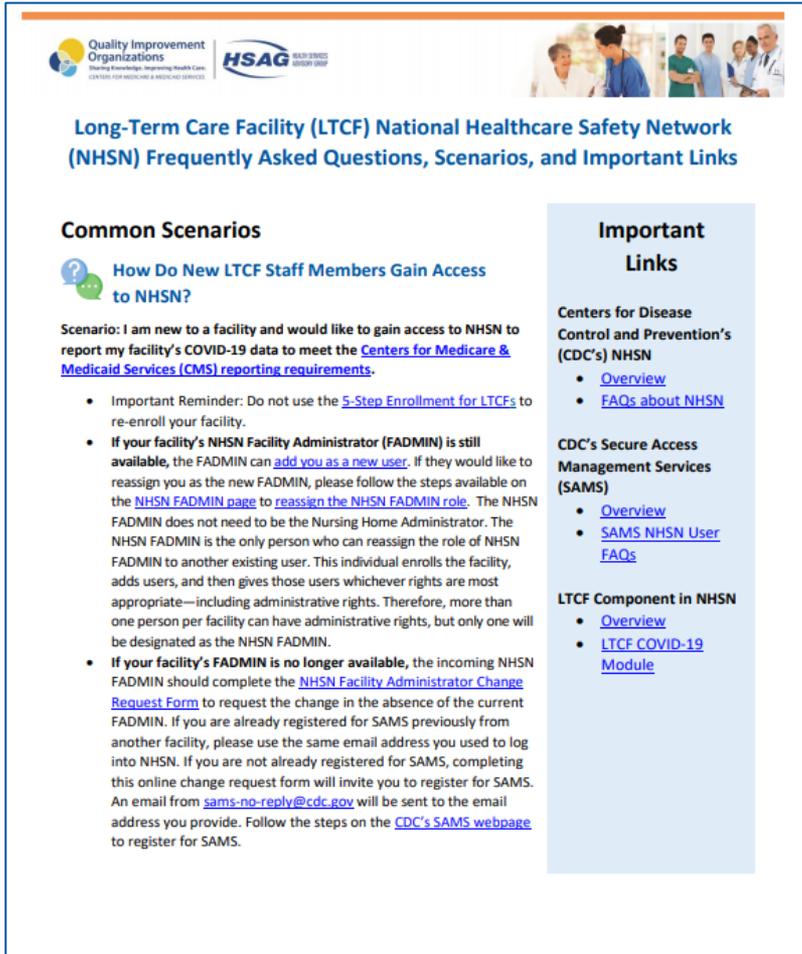
CDC estimates the average public reporting burden for this collection of information as 25 minutes per response, including the time for reviewing instructions, searching existing data/information sources, gathering and maintaining the data/information needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-1306).

CDC 57-145 (Form) v.2 (11-2020)

www.cdc.gov/nhsn/pdfs/covid19/lctcf/57.144-res-blank-p.pdf

www.cdc.gov/nhsn/pdfs/covid19/lctcf/57.145-staff-blank-p.pdf

LTCF NHSN FAQ: Scenarios and Important Links Handout



The handout cover features the Quality Improvement Organizations logo (HSAG) and the HSAG logo. It includes a photograph of healthcare workers in a clinical setting. The title is 'Long-Term Care Facility (LTCF) National Healthcare Safety Network (NHSN) Frequently Asked Questions, Scenarios, and Important Links'. The content is organized into two main sections: 'Common Scenarios' and 'Important Links'. The 'Common Scenarios' section includes a question 'How Do New LTCF Staff Members Gain Access to NHSN?' and a scenario for new staff members. The 'Important Links' section lists links for CDC's NHSN, CDC's SAMS, and the LTCF component in NHSN.

Quality Improvement Organizations
HSAG

HSAG HEALTH SERVICES ADVISORY GROUP

Long-Term Care Facility (LTCF) National Healthcare Safety Network (NHSN) Frequently Asked Questions, Scenarios, and Important Links

Common Scenarios

How Do New LTCF Staff Members Gain Access to NHSN?

Scenario: I am new to a facility and would like to gain access to NHSN to report my facility's COVID-19 data to meet the [Centers for Medicare & Medicaid Services \(CMS\) reporting requirements](#).

- Important Reminder: Do not use the [5-Step Enrollment for LTCFs](#) to re-enroll your facility.
- If your facility's **NHSN Facility Administrator (FADMIN)** is still available, the FADMIN can [add you as a new user](#). If they would like to reassign you as the new FADMIN, please follow the steps available on the [NHSN FADMIN page](#) to [reassign the NHSN FADMIN role](#). The NHSN FADMIN does not need to be the Nursing Home Administrator. The NHSN FADMIN is the only person who can reassign the role of NHSN FADMIN to another existing user. This individual enrolls the facility, adds users, and then gives those users whichever rights are most appropriate—including administrative rights. Therefore, more than one person per facility can have administrative rights, but only one will be designated as the NHSN FADMIN.
- If your facility's **FADMIN** is no longer available, the incoming NHSN FADMIN should complete the [NHSN Facility Administrator Change Request Form](#) to request the change in the absence of the current FADMIN. If you are already registered for SAMS previously from another facility, please use the same email address you used to log into NHSN. If you are not already registered for SAMS, completing this online change request form will invite you to register for SAMS. An email from sams-no-reply@cdc.gov will be sent to the email address you provide. Follow the steps on the [CDC's SAMS webpage](#) to register for SAMS.

Important Links

Centers for Disease Control and Prevention's (CDC's) NHSN

- [Overview](#)
- [FAQs about NHSN](#)

CDC's Secure Access Management Services (SAMS)

- [Overview](#)
- [SAMS NHSN User FAQs](#)

LTCF Component in NHSN

- [Overview](#)
- [LTCF COVID-19 Module](#)

- Available on HSAG website
 - FAQ
 - Common scenarios
 - Important links

ECHO Nursing Home COVID-19 Action Network

 **Stanford** | Stanford Center for
MEDICINE | Continuing Medical Education



- 16-week ECHO program concluded March 2021
- ECHO continuation phase launching next week
- All care providers are welcome
 - Hospitals, Assisted Living Facilities, Intermediate Care Facilities, Home Health/Home Care, Hospice, Medical Offices, etc.
- 11 sessions offered a week by California ECHO training centers: HSAG, Stanford, Alzheimer's Association
- Register for your preferred date/time at www.hsag.com/echo



CDPH Immunization Branch Update

Questions?





This material was prepared by Health Services Advisory Group, the Medicare Quality Innovation Network-Quality Improvement Organization for Arizona and California, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy.
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