



California Department of Public Health (CDPH) Infection Prevention Webinar

Wednesday, August 4, 2021

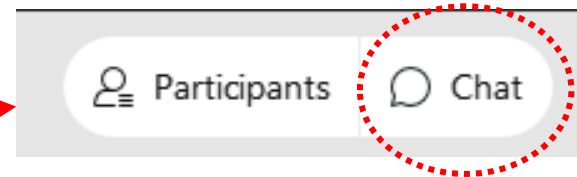
Upcoming Calls



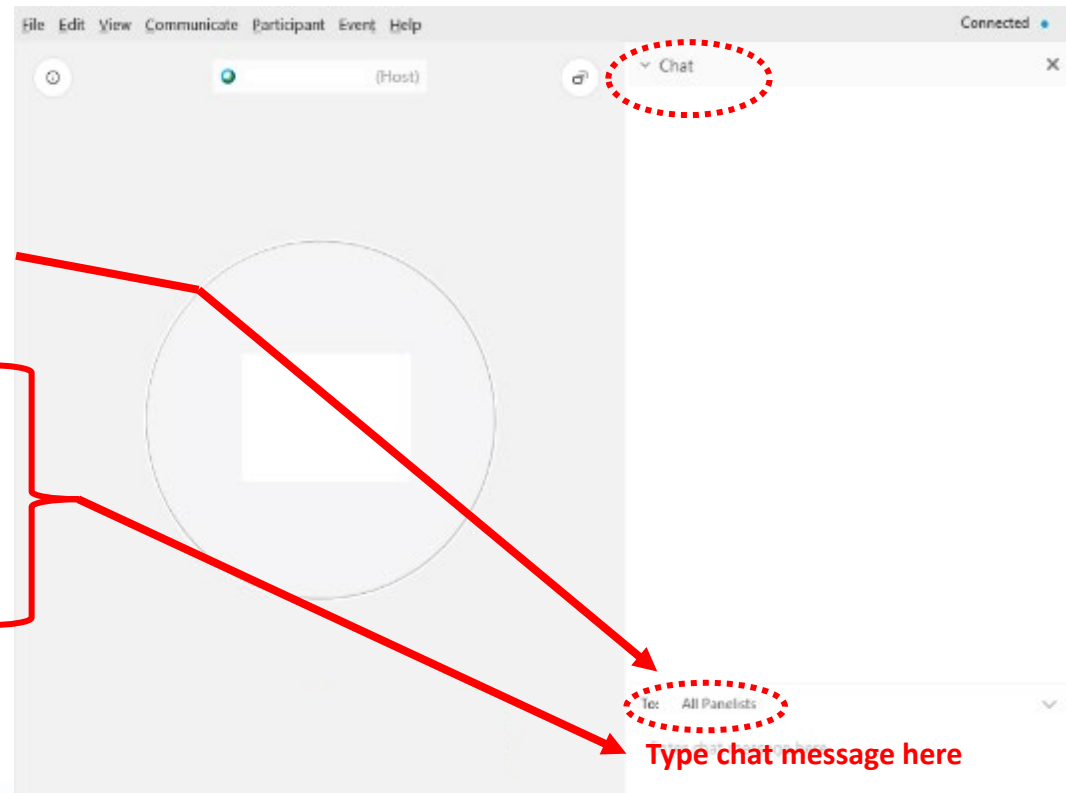
- CDPH Tuesday, 8 a.m., All-Facilities Phone Calls:
 - Call in: **1.844.721.7239**
 - Access code: **799 3227**
- CDPH Wednesday, 3 p.m., SNF Infection Prevention (IP) Webinars:
 - Register at: hsag.com/cdph-ip-webinars
 - Recordings, notes, and slides are posted at registration site
 - Trouble logging in: check link and date at registration site
- 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 Updates
- Testing Task Force Updates
- National Healthcare Safety Network (NHSN) Reporting Updates
- Healthcare-Associated Infections (HAI) Update
- The Pandemic is Not Over:
Where SNF IPs should Focus Now!
- Q&A



CDPH Updates

New All Facilities Letters (AFLs)

Distributed August 3, 2021

- AFL 21-27: Testing, Vaccination Verification and PPE for HCP at GACHs
 - <https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-27.aspx>
- 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>
- AFL 21-29: Testing, Vaccination Verification and PPE for HCP at Health Care Facilities
 - <https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-29.aspx>
- AFL 21-30: Testing, Vaccination Verification and PPE for HCP at ICFs
 - <https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-30.aspx>
- AFL 20-88.2: Testing Recommendations for Patients and HCP at GACHs
 - <https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-88.aspx>
- AFL 20-53.5: Mitigation Plan Recommendations for Testing of SNF HCP and Residents
 - <https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-53.aspx>



Testing Taskforce Updates



NHSN Reporting Updates

Data Reporting Reminders

- CMS COVID-19 Nursing Home Data:
<https://data.cms.gov/covid-19/covid-19-nursing-home-data> (updated weekly)
- CDPH NHSN data upload process review
- HSAG outreach and technical assistance
 - CMS referral
 - Facility-Specific COVID-19 Vaccine Data Report available at: <https://qiip.hsag.com>
 - Common missing data scenarios



HAI Updates

California State Public Health Officer Order

July 26, 2021

- Order shall take effect on August 9, 2021.
- Facilities must be in full compliance by August 23, 2021.
- Facilities must have a plan in place for tracking vaccination status.
- Workers who are not fully vaccinated, or for whom vaccine status is unknown or documentation is not provided, must be considered unvaccinated.
- Facilities must provide respirators to all unvaccinated workers, and strongly encourage the use of respirators at all times, including the green zone and common areas.
- Unvaccinated workers are required to undergo diagnostic screening testing at least twice weekly with either PCR or antigen testing.

Settings that Public Health Order Applies

Acute Health Care and Long-Term Care Settings:

- General Acute Care Hospitals
- Skilled Nursing Facilities (including Subacute Facilities)
- Intermediate Care Facilities

High-Risk Congregate Settings

- Adult and Senior Care Facilities
- Homeless Shelters
- State and Local Correctional Facilities and Detention Centers

Other Health Care Settings:

- Acute Psychiatric Hospitals
- Adult Day Health Care Centers
- Adult Day Programs Licensed by the CA Department of Social Services
- Program of All-Inclusive Care for the Elderly (PACE) and PACE Centers
- Ambulatory Surgery Centers
- Chemical Dependency Recovery Hospitals
- Clinics & Doctor Offices (including behavioral health, surgical)
- Congregate Living Health Facilities
- Dental Offices
- Dialysis Centers
- Hospice Facilities
- Pediatric Day Health and Respite Care Facilities
- Residential Substance Use Treatment and Mental Health Treatment Facilities

Definition of “Worker”

- “Worker” refers to all paid and unpaid persons serving in SNFs who have the potential for direct or indirect exposure to patients/clients/residents or SARS-CoV-2 airborne aerosols.
- Workers include, but are not limited to:
 - Nurses
 - Nursing assistants
 - Physicians
 - Technicians
 - Therapists
 - Phlebotomists
 - Pharmacists
 - Students and trainees
 - Contractual staff not employed by the health care facility, and persons not directly involved in patient care, but who could be exposed to infectious agents that can be transmitted in the health care setting, for example:
 - Clerical
 - Dietary
 - Laundry
 - Security
 - Billing
 - Environmental services
 - Engineering and facilities management
 - Administrative
 - Volunteer personnel

New AFLs Distributed August 3, 2021

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- 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>
- AFL 21-29: Testing, Vaccination Verification and PPE for HCP at Health Care Facilities
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- AFL 21-30: Testing, Vaccination Verification and PPE for HCP at ICFs
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- AFL 20-88.2: Testing Recommendations for Patients and HCP at GACHs
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AFL 21-28: Healthcare Personnel (HCP) Vaccine Status Must Be Verified

- SNFs are required to have a plan in place for tracking verified worker vaccination status. Documentation must be kept on file at the facility and made available upon request by CDPH or the local public health department.
- Only the following modes may be used as proof of vaccination:
 1. COVID-19 Vaccination Record Card
 2. Photo of a Vaccination Record Card
 3. Photo of the Vaccination Record Card stored on phone/electronic device
 4. Documentation of vaccination from healthcare provider
 5. Digital record that includes a QR code
(e.g., Digital COVID-19 Vaccine Record <https://myvaccinerecord.cdph.ca.gov/>)
 6. Documentation of vaccination from other contracted employers who follow vaccination records guidelines and standards

Q: Can the California Immunization Registry (CAIR2) be used to verify vaccine status of workers?

A: No, CAIR2 (<https://cairweb.org/enroll-now/>) cannot be used to verify vaccine status of workers. The uses of CAIR are limited by law:

- Providers are permitted to look up vaccination status of patients only.
- According to law, to protect confidentiality providers may not access CAIR2 for vaccination status of workers or visitors unless those individuals are patients of the provider.
- Even if a visitor or staff member asks the facility to access their information in CAIR2, they may not. Those who do not have the proof of vaccination may access it from CAIR2 via the California Digital COVID-19 Vaccine Record <https://myvaccinerecord.cdph.ca.gov/>.
- California Legislative Information, Chapter 2.5. Disclosure of Immunization Status:
https://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?lawCode=HSC§ionNum=120440

Q: Is it a HIPAA violation to ask visitors and HCP for proof of their COVID-19 vaccination status?

A: Per State Public Health Officer Order: “Workers who are not fully vaccinated, or for whom vaccine status is unknown or documentation is not provided, must be considered unvaccinated.”

- Asking for proof of COVID-19 vaccination status is not a HIPPA violation.
- Pre-COVID, healthcare facilities have had requirements for other vaccines, like influenza. Vaccines are for the protection of residents.
- It is not a HIPPA violation to ensure that the employee has met the state requirement.
- Visit HHS website <https://www.hhs.gov/answers/if-my-employer-requires-proof-of-my-covid-19-vaccination-status/index.html>:
 - “In general, the HIPAA rules do not apply to employers or employment records. HIPAA only applies to HIPAA covered entities—healthcare providers, health plans, and healthcare clearinghouses—and, to some extent, to their business associates. If an employer asks an employee to provide proof that they have been vaccinated, that is **not a HIPAA violation**, and employees may decide whether to provide that information to their employer.”

AFL 21-28: Updated Routine Diagnostic Screening Testing of Asymptomatic HCP

- HCP who are unvaccinated or incompletely vaccinated must undergo **at least twice-weekly** diagnostic screening testing.
- HCP who are unvaccinated or incompletely vaccinated and work no more than one shift per week must undergo **weekly** diagnostic screening testing within 48 hours before their shift.
- HCP who are unvaccinated or incompletely vaccinated and work less often than weekly must undergo diagnostic screening testing within 48 hours before **each shift**.
- HCP who are unvaccinated or incompletely vaccinated and do not work in areas where care is provided to patients, or to which patients do not have access for any purpose, must undergo **weekly** SARS-CoV-2 diagnostic screening testing.

Q: Does the 70% guidance from CDPH AFL 20-53.4 still apply to testing fully vaccinated HCP?

A: Yes, the 70% testing guidance still applies. See AFL 20-53.5.

- Facilities can discontinue weekly routine diagnostic screening testing of fully vaccinated asymptomatic HCP only if $\geq 70\%$ of residents and $\geq 70\%$ HCP that work in the facility are fully vaccinated.
- Fully vaccinated workers in facilities that have not met the 70% threshold and are asymptomatic, must be tested weekly with either antigen or PCR test once weekly.
- Fully vaccinated workers need to be tested if they are symptomatic or if there is an outbreak as part of response testing.
- 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.
- Check with your local public health department for more stringent testing requirements in your county.

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

A: Unvaccinated workers in the long-term care industry that never enter the patient care space, and never come in contact with any workers who could be exposed to infectious agents that can be transmitted in the workplace, do not need to be tested twice a week and wear a respirator.

Testing twice a week and respirators are required if there is potential for them to have direct or indirect exposure to infectious agents that can be transmitted in the healthcare setting.

Definition of HCP*—workers who could be exposed to infectious agent in the workplace.

*(V. Definitions, F.— <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>)

Additional PPE and Masking for Unvaccinated HCP

- Pursuant to the State Public Health Order, SNFs must strictly adhere to current CDPH Masking Guidance that was updated on July 28, 2021, (<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/guidance-for-face-coverings.aspx>) and Cal/OSHA's standards for Aerosol Transmissible Diseases (ATD), which requires respirator use in areas where suspected (yellow zone) and confirmed (red zone) COVID-19 cases may be present and the Emergency Temporary Standard (ETS) for workers not covered by the ATD standard.
- SNFs must provide respirators to all unvaccinated or incompletely vaccinated workers who work in settings where:
 - (1) care is provided to patients or residents, or
 - (2) to which patients or residents have access for any purpose.
- Workers must be instructed on proper use of respirators and are strongly encouraged to wear respirators.



The Pandemic is Not Over: Where SNF IPs should Focus Now!

Questions?





This material was prepared by Health Services Advisory Group (HSAG), a Quality Innovation Network-Quality Improvement Organization (QIN-QIO) under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services (HHS). Views expressed in this material do not necessarily reflect the official views or policy of CMS or HHS, and any reference to a specific product or entity herein does not constitute endorsement of that product or entity by CMS or HHS. Publication No. CA-12SOW-XC-08042021-01