



California Department of Public Health (CDPH) Infection Prevention Webinar

Wednesday, August 11, 2021

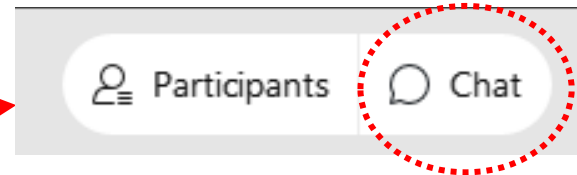
Upcoming Calls



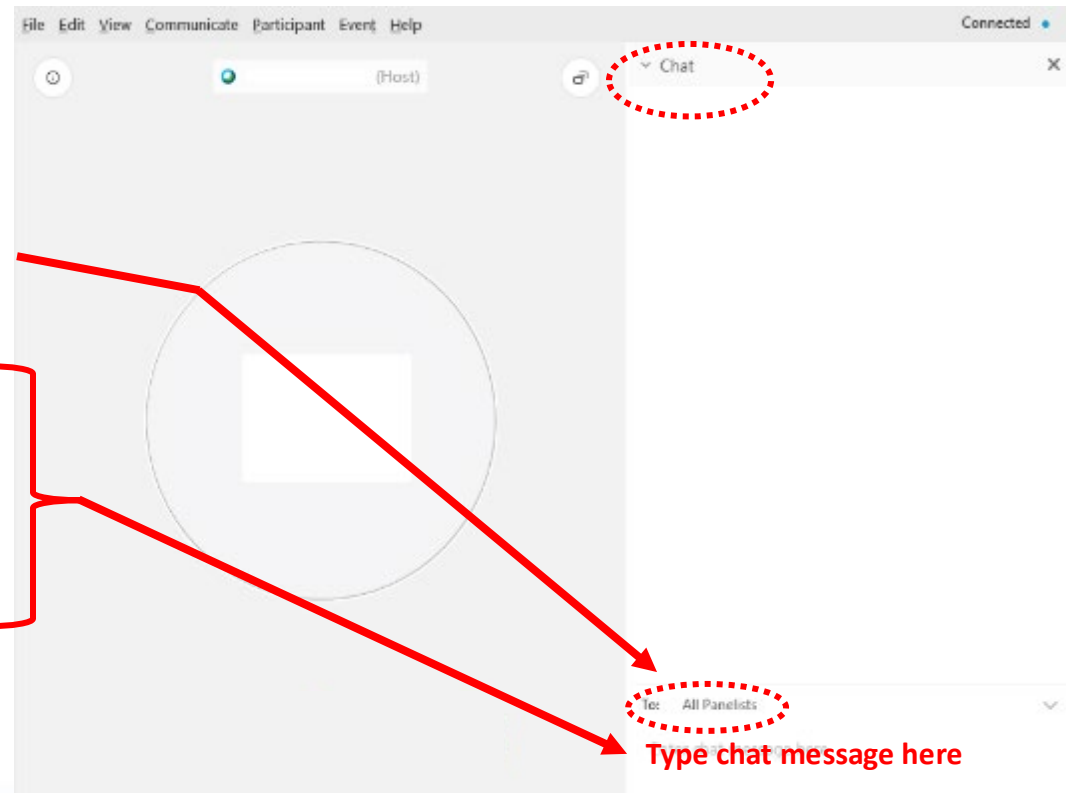
- CDPH Tuesday, 8 a.m., All-Facilities Phone Calls:
 - Call in: **1.844.721.7239**
 - Access code: **799 3227**
- CDPH Wednesday, 3 p.m., SNF Infection Prevention (IP) Webinars:
 - Register at: hsag.com/cdph-ip-webinars
 - Recordings, notes, and slides are posted at registration site
 - Trouble logging 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
- Healthcare-Associated Infections (HAI) Updates
- Cal/OSHA* Updates
- Q&A



CDPH Updates

California Requires Workers in Health Care Settings to be Fully Vaccinated, August 5, 2021

Health Care Worker Vaccine Requirement

The order requires workers in health care settings to be fully vaccinated or receive the first dose of a single dose regimen (J&J) or the second dose of a two-dose regimen (Moderna, Pfizer) by September 30, 2021.

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-of-the-State-Public-Health-Officer-Health-Care-Worker-Vaccine-Requirement.aspx>

Requirements for Visitors in Acute and Long-Term Care Settings

The order directs hospitals, SNFs, and intermediate care facilities to verify that visitors are fully vaccinated or have tested negative for COVID-19 in the prior 72 hours before indoor visits.

<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.aspx>

Q: What is the process to request staffing and PPE supplies from CDPH?

- Contact your county's Medical and Health Operational Area Coordinator (MHOAC) to relay staffing or PPE assistance needed from CDPH.
- **MHOAC County Contact Information can be found at:**
<https://emsa.ca.gov/medical-health-operational-area-coordinator/>
- For counties outside of Los Angeles, sign-up for an account at: <https://caloes.force.com/s/cal-sign-up>.
- Once your account is setup you can order supplies from the MHOAC through that process. See CDPH AFL 20-46 for more details.
<https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-46.aspx>



Testing Taskforce Updates



HAI Updates

California State Public Health Officer Order

July 26, 2021

- Order took 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.

<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>

AFL 21-28: Testing, Vaccination Verification and PPE for HCP at SNFs

- 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 20-53.5 still apply to testing fully vaccinated HCP?

A: Yes, the 70% testing guidance still applies.

- 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 at least weekly (PCR) or twice weekly (antigen).
- Fully vaccinated workers need to be tested if they are symptomatic or if there is an outbreak as part of response testing.
- Consider continuing diagnostic screening testing for fully vaccinated workers 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: Why is testing frequency for unvaccinated HCP different in AFL 20-53.5 and AFL 21-28?

- The new requirements for testing unvaccinated HCP in AFL 21-28 and the SPHO supersede the minimum testing frequency for unvaccinated HCP in AFL 20-53.5
- AFL 21-28 and the SPHO require all unvaccinated or incompletely vaccinated SNF workers to be tested twice weekly.
- In addition, per AFL 20-53.5, facilities that have **NOT** reached the 70% vaccination threshold for residents and staff, are still required to test their fully vaccinated staff once weekly.

PPE and Masking for Unvaccinated HCP

- Pursuant to the July 26, State Public Health Officer Order, SNFs must strictly adhere to current CDPH Masking Guidance updated on July 28: (<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.

Q: Are masks and eye protection considered source control or PPE in the Green Zone?

- Per AFL 21-28 and the July 26 SPHO, N95s worn by unvaccinated or partially vaccinated HCP at all times, including the green zone and common areas, are considered **source control**.
- Per CDPH AFL 20-74.1, In counties with moderate or higher levels of community COVID-19 transmission, or during a facility outbreak, in the green zone, :
 - Eye protection (face shields, goggles) in the green zone is required as **universal PPE** for all direct resident care.
 - N95 are recommended as **universal PPE** while caring for residents undergoing aerosol generating procedures.

- Search county COVID-19 transmission rates at: <https://covid19.ca.gov/statedashboard/#location-California>
- CDPH AFL 20-74.1 <https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-74.aspx>
- AFL 20-74.1 Attachment: COVID-19 PPE, Resident Placement/Movement, and Staffing Considerations by Resident Category <https://www.cdph.ca.gov/Programs/CHCQ/LCP/CDPH%20Document%20Library/AFL-20-74-Attachment-01.pdf>

Hospital Vaccine Recommendations Prior to Discharge

- Per AFL 21-20, CDPH recommends that hospitals offer COVID-19 vaccinations to eligible individuals prior to discharge from hospital admission, 24-hour observation, or emergency department, including those at highest risk of morbidity and mortality from COVID-19 such as:
 - Patient age 65 years or older
 - Patient being discharged to congregate care or residential settings, including: post-acute medical facilities, skilled nursing facilities, residential care facilities for the elderly, correctional facilities, behavioral health facilities, and homeless shelters
 - Psychiatric patient being discharged
- Collaborate with your local hospitals to coordinate vaccine administration prior to admission to your nursing home.

<https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-20.aspx>



Cal/OSHA Update

Q: If N95s are being used as source control in the green zone, is fit testing required?

- Fit testing is not required for N95s in the green zone if they are being used for source control. Instruct HCP to do a seal check to ensure the N95 fits well.
- Fit testing is required when N95s are used as PPE.

Conventional Capacity Strategies for N95s

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/face-masks.html>

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/respirators-strategy/index.html>

- Cal/OSHA has removed all guidelines allowing for contingency capacity (extended use) or crisis capacity (reuse) because the supply and availability of NIOSH-approved respirators has increased significantly. All respirators must be used in accordance with their NIOSH certification without exception.
- **Conventional Capacity Strategies**
 - When used as PPE, N95s should be removed and discarded after each patient encounter.
 - When used for source control in the green zone or non patient care areas, N95s may be used for multiple patient encounters until soiled or damaged.
- ~~**Contingency Capacity Strategies** (extended use)~~
- ~~**Crisis Capacity Strategies** (extended use and re-use)~~

Conventional Capacity Strategies for Eye Protection

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/eye-protection.html>

- Eye protection needs to be cleaned and disinfected as often when necessary for infection control and employee hygiene and not only when visibly soiled. PPE has to be replaced as recommended by the manufacturer.
- **Conventional Capacity Strategies** (goggles, face shields)
 - Use eye protection according to product labeling and local, state, and federal requirements
 - Disposable eye protection should be removed and discarded.
 - Reusable eye protection should be cleaned and disinfected after each patient encounter.
- **Contingency Capacity Strategies** (extended use)
 - HCP can wear the same eye protection (disposable or reusable devices) for repeated close contact encounters with several patients, without removing eye protection between patient encounters.
- ~~**Crisis Capacity Strategies**~~

Questions?





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