



California Department of Public Health (CDPH) Infection Prevention Webinar

Wednesday, July 14, 2021

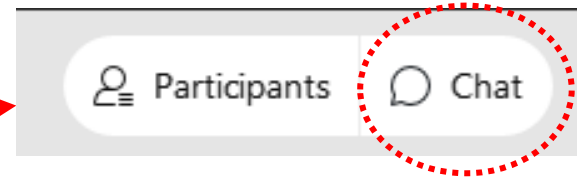
Upcoming Calls



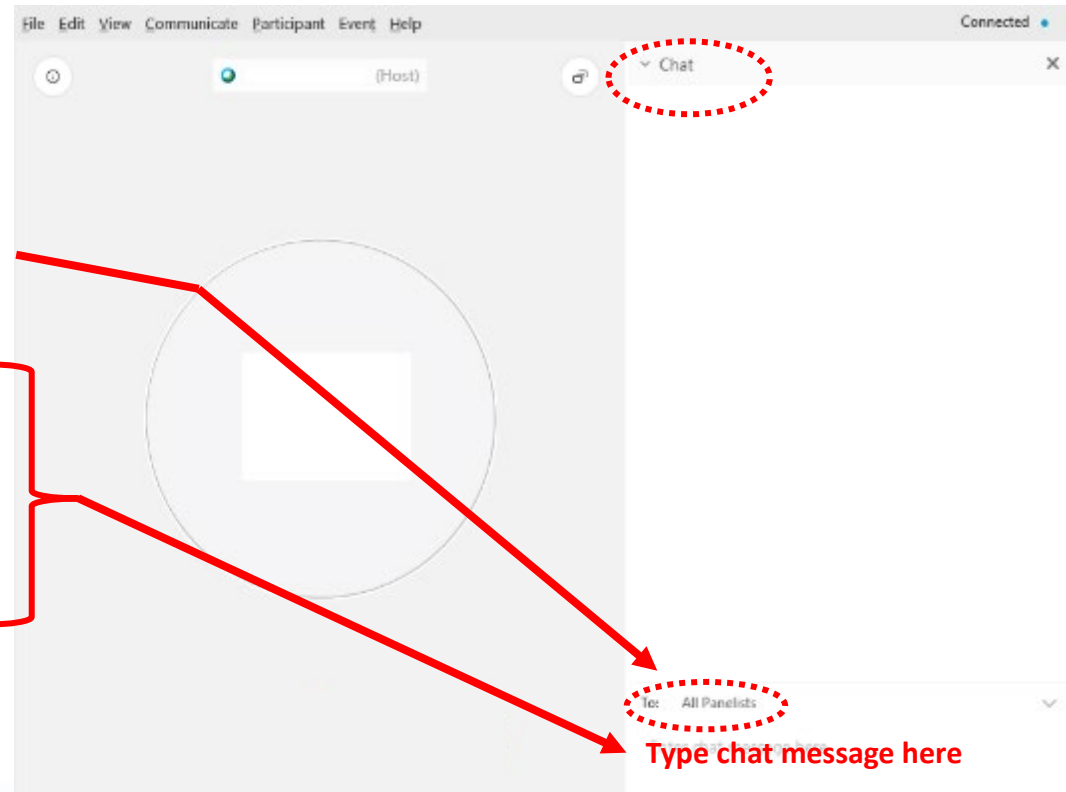
- CDPH Tuesday, 8 a.m., All-Facilities Phone Calls:
 - Call in: **1.844.721.7239**
 - Access code: **799 3227**
- CDPH Wednesday, 3 p.m., SNF Infection Prevention (IP) Webinars:
 - Register at: hsag.com/cdph-ip-webinars
 - Recordings, notes and slides are posted at registration site
 - Trouble logging 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
- COVID-19 Vaccine Update
- Healthcare-Associated Infections (HAI) Update
- Q&A



CDPH Updates



Poll Question

Poll Question

What is your facility's current staffing situation?

- A. Our facility is experiencing staffing shortages
- B. Our facility is not experiencing staffing shortages
- C. Unsure
- D. Not applicable

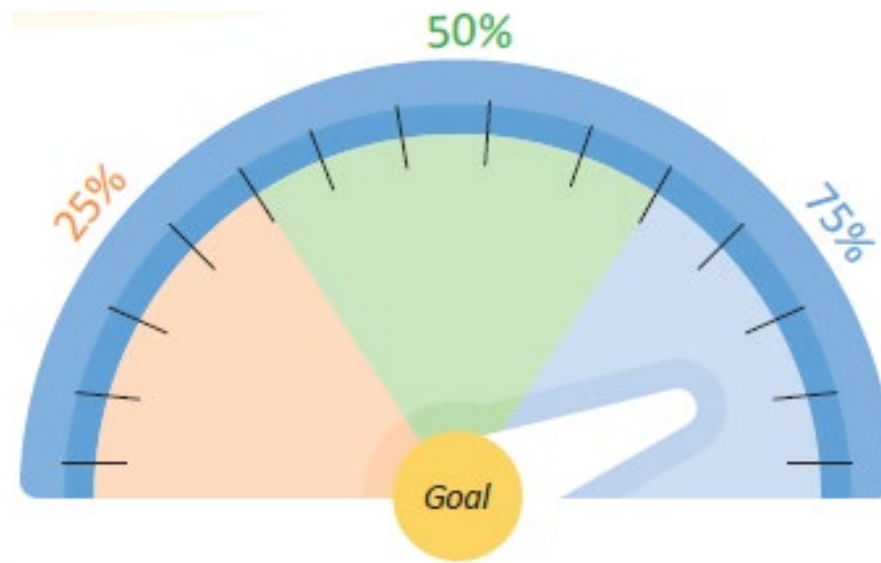


Testing Task Force Updates



Full Speed Ahead!

COVID-19 Vaccination Recognition Program



COVID-19 Vaccination Goal

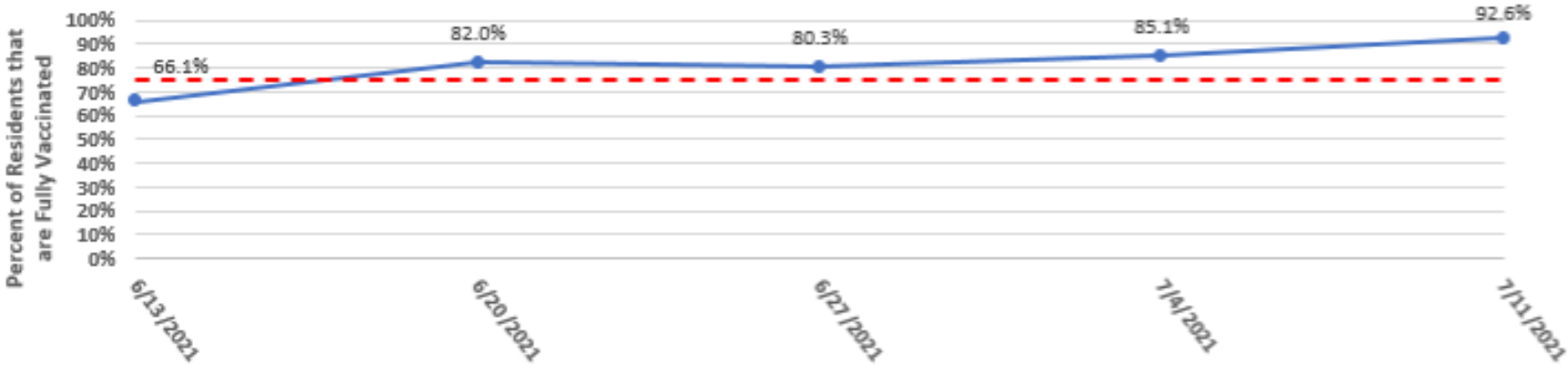
- Increasing nursing home COVID-19 vaccination rates is a CMS national priority.
- Using NHSN data, HSAG will recognize nursing homes that have met this challenge.
- Data will be reviewed quarterly and facilities will receive a certificate of achievement for meeting either of the following criteria:
 - Exceeding a 75% staff vaccination rate for 4 consecutive weeks.
 - Exceeding a 90% resident vaccination rate for 4 consecutive weeks.



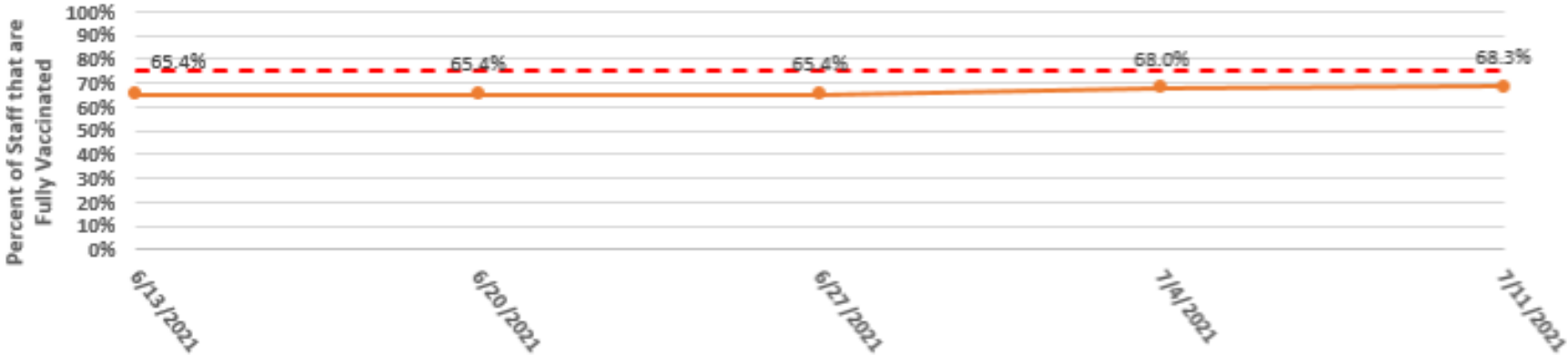
Facility-Specific COVID-19 Vaccine Data Report

Available at — <https://qiip.hsag.com>

Resident: Vaccination Rate



Staff: Vaccination Rate



Data Source: National Healthcare Safety Network (NHSN) Accessed on DD/MM/YYYY, HH:MM EST

Each data point represents the cumulative percent of residents or staff without contraindications to the COVID-19 vaccine that are fully vaccinated. The listed date indicates the end point of the week.

To Access the Quality Improvement Innovation Portal (QIIP) for Facility Report

Quality Improvement Organizations
Sharing Knowledge, Improving Health Care.
CENTERS FOR MEDICARE & MEDICAID SERVICES

HSAG HEALTH SERVICES ADVISORY GROUP

HSAG Quality Improvement and Innovation Portal (QIIP) Administrator Form

The HSAG QIIP is your centralized place for information in support of the quality initiatives and activities which you are working on with HSAG to achieve the Centers for Medicare & Medicaid Services' (CMS') national goals. CMS' goals include increasing quality scores, improving infection prevention, decreasing opioid misuse, preventing adverse drug events, improving quality of care transitions, and preventing avoidable readmissions. The HSAG QIIP will allow you to view your weekly COVID-19 Trend Report. Future enhancements include the ability to complete assessments, track interventions, and view your performance dashboards.

To get access to your weekly COVID-19 Trend Report please fill out the short form below to designate your QIIP Administrator(s) and return the completed form via email to canursinghomes@hsag.com.

The QIIP Administrator(s) will have the following rights:

- Access performance reports and dashboards.
- Attest to the completion of activities.
- Complete assessment forms.

- Add, edit, and remove users within the application.
- Upload/submit data.

Facility Information

Please provide the CMS Certification Number (CCN) and facility name for your facilities. **Please add additional rows to the table as needed if your organization has more than one facility.**

CCN	Facility Name

Administrator(s) Information

HSAG QIIP Administrator(s), please complete the table below. HSAG recommends having at least two staff members assigned to each facility. If there is no lapse in Administrator coverage.

Administrator Name	Email Address	Telephone Number

www.hsag.com/covid-19/long-term-care-facilities/

Under California Resources, click on

“California HSAG Quality Improvement and Innovation Portal (QIIP) Administrator Form”

Vaccine Resources

www.hsag.com/covid-19/vaccine-resources



Improve Vaccine Acceptance Using Motivational Interviewing (MI)

[Learn More](#)

NHSN Data Reporting



Improving Vaccine Acceptance



Vaccine Equity



National and State Vaccine Data



Vaccine Guidelines



Find the Vaccine



Vaccine Vision Board

Full Speed Ahead! COVID-19 Vaccination Program

Now that I am vaccinated I can...



Vaccination Goal

We are committed to protecting our residents from COVID-19 by increasing vaccinations. Our goal is to have ___% of our staff and ___% of our residents vaccinated by _____.

For more information, contact: _____ at _____.



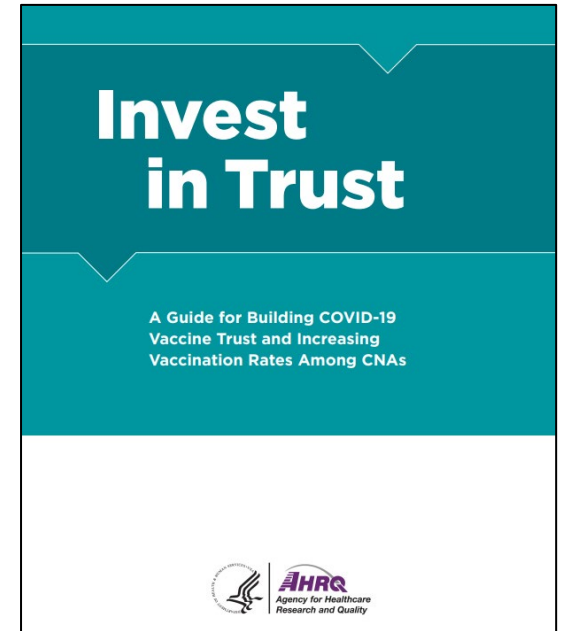
COVID-19 Vaccine Webinar

Invest in Trust: Building COVID-19 Vaccine Trust Among Nursing Home Staff Members

Monday, July 19, 2021
12 noon, PT

Register at:

www.hsag.com/covid-19-events





Frequently Asked Questions (FAQs)

California Variants as of July 7, 2021

cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/COVID-Variants.aspx

Known Variants of Concern (VOC) in California

WHO Label	Variant	# of CA Cases	% Variants Collected in May	% Variants Collected in June
Alpha	B.1.1.7	10,942	57.6%	30.6%
Beta	B.1.351	133	0.3%	0.2%
Gamma	P.1	1,774	11.5%	15.4%
Delta	B.1.617.2	1,085	5.8%	42.9%

Known Variants of Interest (VOI) in California

WHO Label	Variant	# of CA Cases	% Variants Collected in May	% Variants Collected in June
Epsilon	B.1.427; B.1.429	23,464	5.0%	1.2%
Zeta	P.2	91	0.0%	0.0%
Eta	B.1.525	56	0.2%	0.0%
Iota	B.1.526	1,579	10.7%	6.4%
Kappa	B.1.617	61	0.1%	0.1%
Not available	B.1.617.3	1	0.0%	0.0%

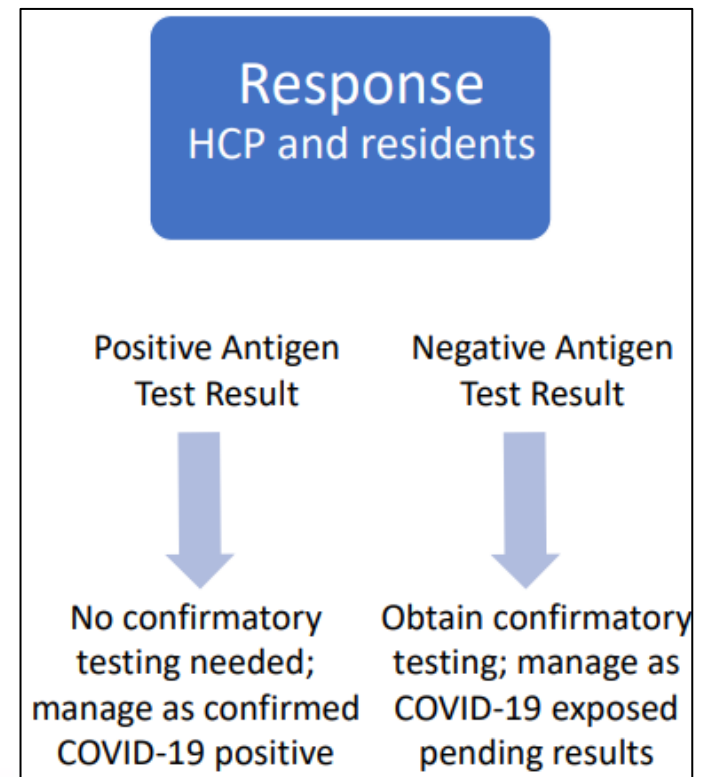
AFL 20-53.4: Guidance on Antigen Tests

Q: Can antigen tests be used for healthcare personnel (HCP) diagnostic screening testing?

A: Yes, antigen testing can be used for screening testing, but the testing needs to be done twice a week.

Q: Can antigen tests be used for HCP and resident response testing?

A: Yes, antigen testing can be used for response testing if used twice a week, and may be particularly helpful during the initial rounds of response testing to rapidly identify, isolate, and cohort positives; however, during response testing, negative antigen test results must be confirmed with PCR.



Q: Are visitors able to dine with residents in communal settings?

- Fully vaccinated visitors and fully vaccinated residents can dine with residents without the use of masks and physical distancing with the following considerations:
 - Dining can occur in the resident's room as long as the roommate(s) are not present.
 - Dining can occur in a large communal space or dining room as long as there is physical distancing between other resident/visitor groups.
- Unvaccinated visitors and/or unvaccinated residents are not able to dine with each other due to masking and distancing restrictions.

10-Day Isolation Period for Positive Individuals

Q: Our fully vaccinated resident tested positive at the hospital with symptoms. When the resident readmits to us, when do we start the 10-day isolation period?

A: The 10-day isolation period begins from the date of symptom onset, provided the individual's fever has resolved and symptoms are improving. If that date is unknown, or if asymptomatic, use the date of the positive test. 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 show the virus for a longer period of time. In that case, isolation may need to be extended up to 20 days.

State Guidance for Assisted Living Facilities

Q: Should assisted living facilities follow the CDPH AFL guidance?

A: No. Assisted living facilities should refer to state guidance from the California Department of Social Services (DSS) Provider Information Notices (PINs): www.cdss.ca.gov/inforesources/community-care-licensing/policy/provider-information-notice/adult-senior-care

Family Member COVID-19 Notifications

Q: AFL 20-43.3 and CMS QSO 20-29-NH require facilities to notify residents, representatives, and family members of COVID-19 cases to keep them informed of the conditions at the facility, and the safety measures being taken. At what point do the weekly notifications end? Once the outbreak is resolved?

A: Once there are no new cases or clusters, the facility can return to weekly cumulative updates, but under the current regulation, weekly updates must continue indefinitely. Advocates are encouraging CMS to modify this regulatory requirement.

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 document 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-07142021-01