California Department of Public Health (CDPH) Infection Prevention Webinar

Wednesday, July 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
  - 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

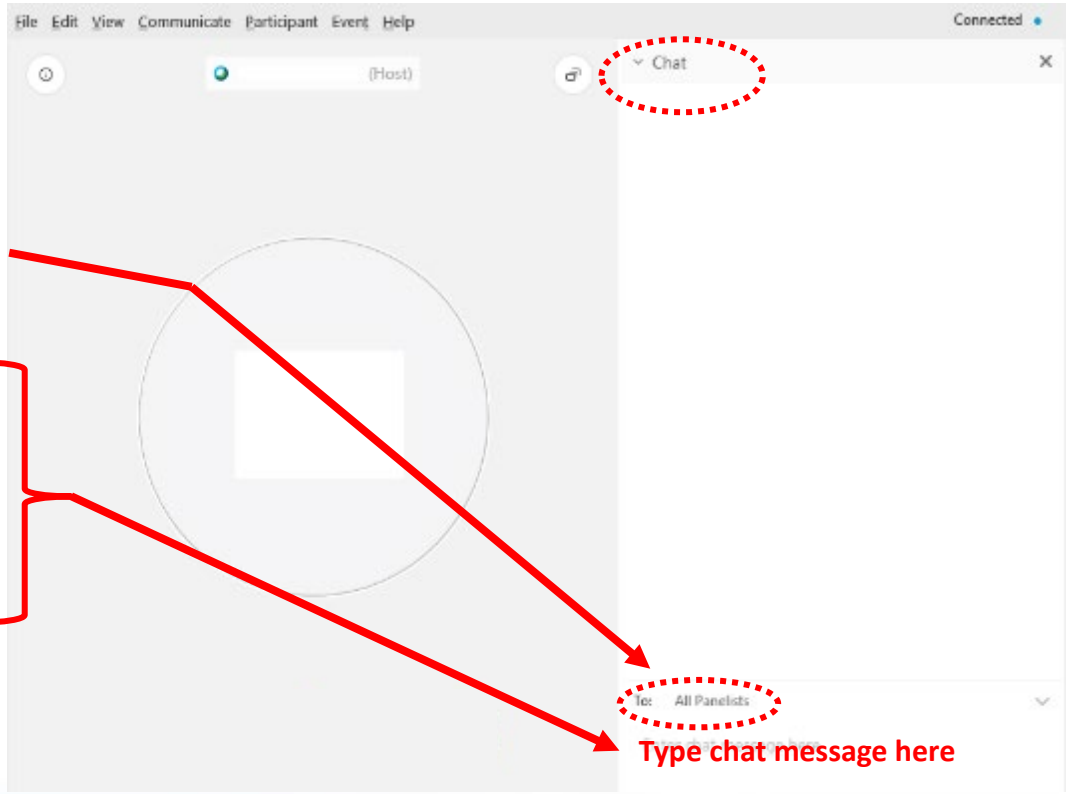
1. To submit a question, click on the **Chat Button** located in the bottom right corner of your Webex window.

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
- Immunization Branch Updates
- Indoor Environmental Quality in Long-Term Care
- Healthcare-Associated Infections (HAI) Update
- The Pandemic is Not Over: Where SNF IPs should Focus Now!
- Q&A

CDPH Updates

HAI Update:
Frequently Asked Questions (FAQs)

Q: How often do we need to monitor vital signs for our residents if we have no COVID-19 cases?

- In facilities that don't have suspected or confirmed COVID-19, the recommendation is to monitor residents at least daily.
- For facilities with suspected or confirmed COVID-19 cases, facilities need to monitor vital signs (including pulse oximetry) every shift for all residents and every 4 hours for residents with COVID-19 infection in the red zone.
- Keep in mind that frequent monitoring is necessary due to the rapidity with which people with COVID-19 can deteriorate, especially for residents unable to appreciate changes and unable to self-report changes in clinical status.
- This CDPH guidance aligns with the CDC's current guidance

https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html#evaluating-managing

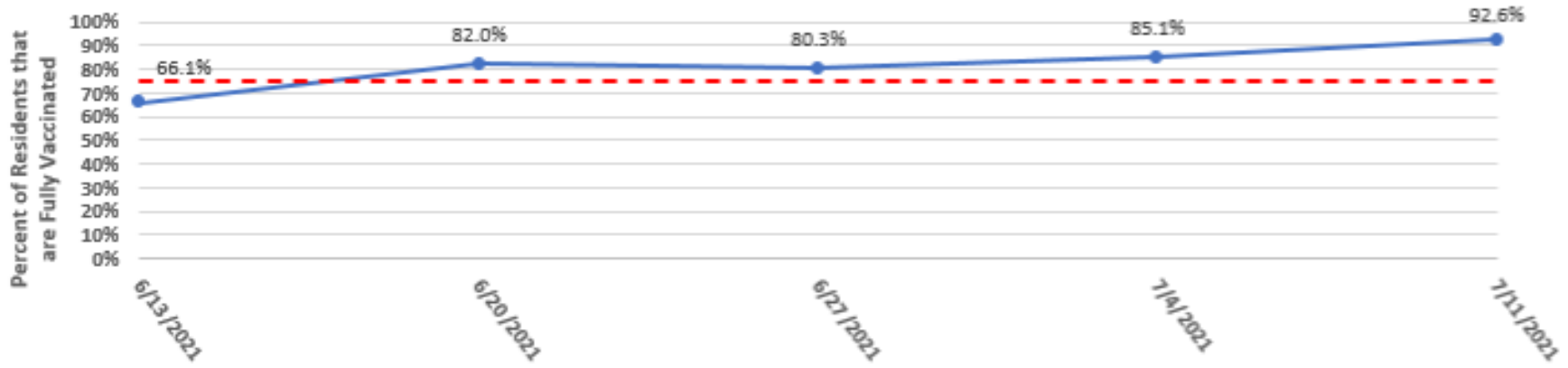
Q: Do we still need a separate break room, bathroom, and dedicated staff if our SNF has only one COVID-19 positive resident?

- CDPH AFL 20-74 states “The COVID-19 positive cohort should be housed in a separate "red area" (building, unit or wing) of the facility and have dedicated HCP who do not provide care for residents in other cohorts and should have separate break rooms and restrooms if possible.
- We recognize there are situations now where there may be only one or two COVID-19 positive residents in the “red zone.”
- If possible, it would be optimal to maintain a separate breakroom and restroom for the assigned HCP.
- The “red zone” should be located in a less-busy area (e.g., end of hallway) with clear signage indicating the PPE required when entering the room.
- A separate dedicated staff member may not be feasible due to staffing considerations. In that case, the designated HCP should perform routine care of the resident in the “red zone” after care of other residents. Optimally, another HCP could be assigned as a “buddy” to monitor and ensure appropriate donning and doffing and hand hygiene.

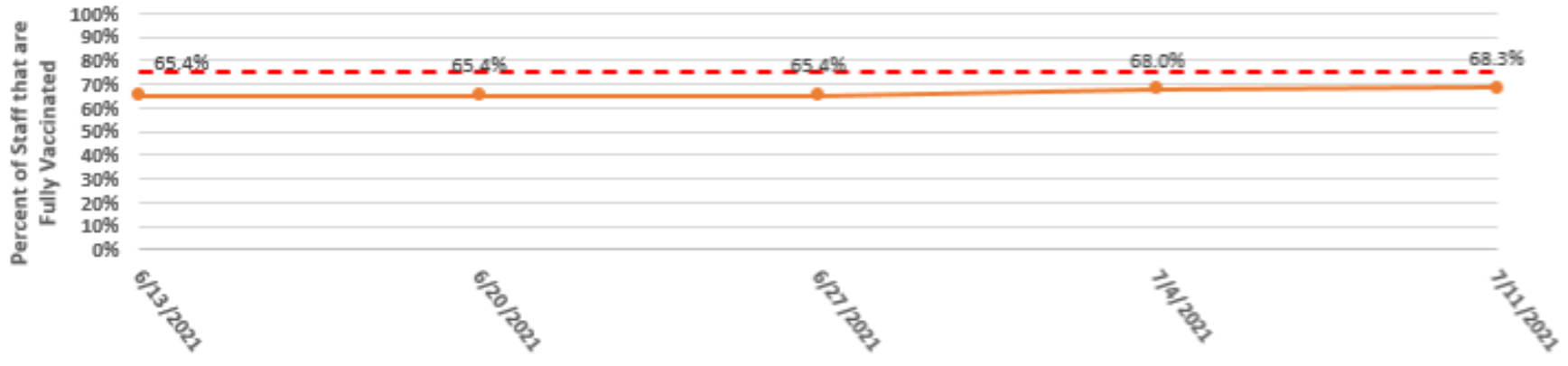
https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-74.aspx

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

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

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

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"

Questions?

Quality Improvement Organizations
Sharing Knowledge. Improving Health Care.
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HSAG HEALTH SERVICES ADVISORY GROUP

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