







# California Department of Public Health (CDPH) Infection Prevention Webinar

Wednesday, June 9, 2021

### **Upcoming Calls**



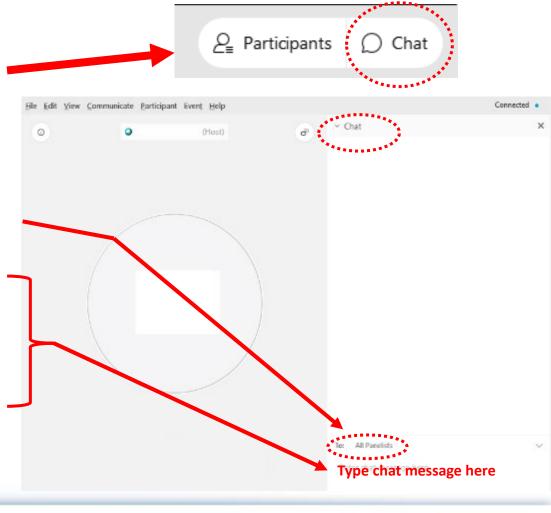


- CDPH Tuesday, 8 a.m., All-Facilities Phone Calls:
  - Call in: 1.844.721.7239
  - Access code: 799 3227
- CDPH Wednesday, 3 p.m., SNF Infection Prevention (IP) Webinars:
  - Register at: hsag.com/cdph-ip-webinars
  - Recordings, notes and slides are posted at registration site
  - Trouble logging in: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

- 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.

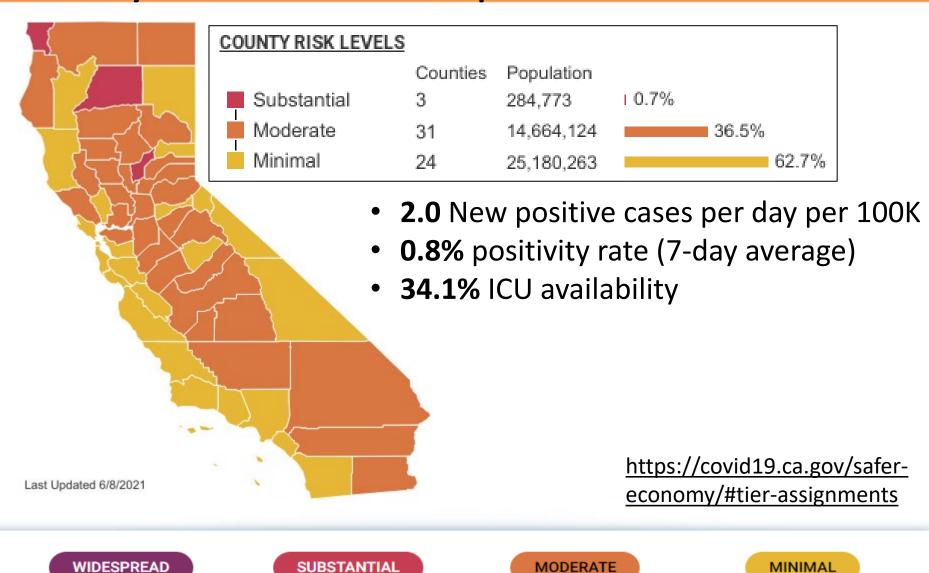
### Agenda





- CDPH All-Facilities Letter (AFL) Updates
- Testing Task Force Update
- National Healthcare Safety Network (NHSN)
   Vaccine Reporting Update
- Project Firstline Infection Prevention Program
- Q&A

# Blueprint for a Safer Economy County Risk Levels—Updated June 8



### Beyond the Blueprint

https://covid19.ca.gov/safer-economy/#beyond-blueprint

- On June 15, California is expected to fully re-open and the county tier system will no longer be in effect.
- CMS publishes COVID-19 county-level positivity rates at: <a href="https://data.cms.gov/stories/s/COVID-19-Nursing-Home-Data/bkwz-xpvg">https://data.cms.gov/stories/s/COVID-19-Nursing-Home-Data/bkwz-xpvg</a>)
  - Rates of county positivity are posted in a zip file at:
     <a href="https://data.cms.gov/download/hsg2-yqzz/application%2Fzip">https://data.cms.gov/download/hsg2-yqzz/application%2Fzip</a>
- CDPH Blueprint website may continue to publish county rates:
  - https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/COVID19CountyMonitoringOverview.aspx
- Local health department may have preferences on the data source

#### California Variants as of June 2, 2021

https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/COVID-Variants.aspx https://www.who.int/en/activities/tracking-SARS-CoV-2-variants/

#### **Known Variants of Concern (VOC) in California**

WHO Label	Variant	Background Information	# of CA Cases
Alpha	B.1.1.7	Detected in United Kingdom, September 2020	8,582
Beta	B.1.351	Detected in South Africa, May 2020	102
Gamma	P.1	Detected in Brazil, November 2020	1,164
Epsilon	B.1.427	Detected in California, February 2021	6,739
Epsilon	B.1.429	Detected in California, February 2021	12,840

#### **Known Variants of Interest (VOI) in California**

WHO Label	Variant	Background Information	# of CA Cases
lota	B.1.526	Detected in New York, November 2020	532
Not available	B.1.526.1	Detected in New York, October 2020	372
Eta	B.1.525	Detected in United Kingdom and Nigeria, December 2020	48
Zeta	P.2	Detected in Brazil, April 2020	78
Delta, Kappa	B.1.617	Detected in India, October 2020; Includes sublineages B.1.617.1 (Kappa), B.1.617.2 (Delta), and B.1.617.3;	258





### **CDPH Update**





### **Testing Task Force Update**





# NHSN Vaccine Reporting Update sams.cdc.gov





# CDPH AFL Updates AFL 20-22.8 & AFL 20-53.4

## **AFL 20-22.8**: Guidance for Limiting the Transmission of COVID-19 in Long-Term Care

- <a href="https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-22.aspx">https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-22.aspx</a>
- Provides updated guidance for group activities and communal dining based upon vaccination status of residents.
- Aligns with April 27, 2021, CMS QSO-20-39-NH
   <a href="https://www.cms.gov/files/document/qso-20-39-nh-revised.pdf">https://www.cms.gov/files/document/qso-20-39-nh-revised.pdf</a>
   and CDC guidance <a href="https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-after-vaccination.html">https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-after-vaccination.html</a>



State of California—Health and Human Services Agency

California Department of Public Health



March 8, 2021

13

AFL 20-22.6

TO: Long-Term Care Facilities

SUBJECT: Guidance for Limiting the Transmission of COVID-19 in Long-Term Care Facilities

(This AFL supersedes guidance provided in AFL 20-22.5)

#### **Updates to General Visitation**

- All visitors, regardless of vaccination status, must wear a face mask and perform hand hygiene upon entry and in all common areas in the facility.
- Fully vaccinated visitors may remove their face masks when interacting with the resident they are visiting.
- All visitors, regardless of vaccination status, must follow physical distancing guidelines with visitors from different households, facility staff, and other residents.





#### Indoor, In-Room Visitation Requirements

- Indoor in-room visitation is allowed for all residents in green and yellow zones in all counties, regardless of vaccination status.
- Indoor, in-room visits between fully vaccinated residents and fully vaccinated visitors may be conducted without face masks and physical distancing and include physical contact.
- Masks and distancing are required for indoor visits between unvaccinated or partially vaccinated visitors and residents.
- Visits for residents with roommates should be conducted without the roommate present or in a separate indoor space.
- In the yellow zone, provide visitors personal protective equipment (PPE) (e.g., gloves, gown, eyewear, and N95 respirator) and instruct them how to do a seal check.

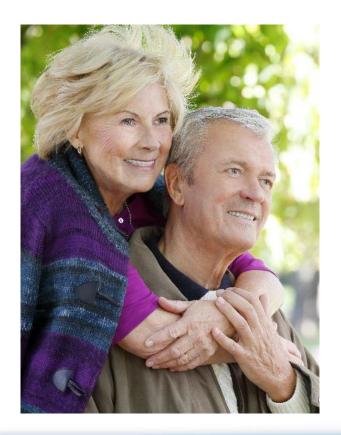
#### Large Communal Space Visitation Requirements

- Facilities shall accommodate visitation in large communal indoor spaces where distancing is possible between visitor-resident groups.
- Rearranging the space and adding barriers for space separation may be needed to accommodate visitation of multiple residents.
- Visits between fully vaccinated residents and fully vaccinated
  - visitors may be conducted without face masks and distancing and include physical contact while in designated spaces.
- Masks and distancing are required for unvaccinated or partially vaccinated visitors and residents.



#### **Outdoor Visitation Requirements**

 Outdoor visitation options must continue for all residents, regardless of vaccination status.



- Visits between fully vaccinated residents and fully vaccinated visitors may be conducted without masks and distancing and include physical contact while in designated spaces for visitation that maintain distancing between facility staff and other residents.
- Masks and distancing are required for unvaccinated or partially vaccinated visitors and residents.

#### Communal Dining and Group Activities

- Fully vaccinated residents in the green zone may participate in group/social activities and eat in the same room without masks or physical distancing.
- If unvaccinated residents are present, all residents need to wear masks, and unvaccinated residents need to physically distance.
- When it is not possible to ensure all persons are fully vaccinated, then all participants should wear a mask and physically distance.
- Carefully plan out activities in advance so that vaccination status can be verified and monitored.



#### Frequently Asked Question

- Question: If unvaccinated healthcare personnel (HCP) are around fully vaccinated residents while they are engaged in a group activity, do the fully vaccinated residents have to keep their masks on?
- Answer: It depends on the involvement of the HCP.
  - If an unvaccinated HCP is actively participating with the residents, then they would be considered a participant, so the fully vaccinated residents would need their masks on.
  - If the unvaccinated staff member is not actively participating and is just observing or overseeing the activity with source control and distancing, then the fully vaccinated residents in the same room do not have to wear a mask.
- Note that HCP always have to wear a mask when they are in the presence of residents, regardless of vaccination status.

#### Residents Who Leave and Return to Facility

- Residents who leave for <24 hours do not need to quarantine and be tested upon return, regardless of vaccination status.
- Fully vaccinated residents who leave for >24 hours do not need to quarantine or be tested upon return.
- Unvaccinated and partially vaccinated residents who leave for >24 hours need to quarantine in the yellow-observation zone for 14 days and be tested prior to return to the green zone.
- Residents exposed to COVID-19 while outside the facility should quarantine and be tested immediately and 5–7 days after exposure, regardless of vaccination status.



#### **Exception to Visitation Requirements**

- The following may have access to visits residents in any zone regardless of vaccination status:
  - Healthcare workers: employees, consultants, contractors, volunteers, caregivers
  - Surveyors
  - Ombudsman
  - Students
  - Legal matters

- Protection and advocacy (P&A) programs
- Individuals authorized by federal disability rights laws
- Compassionate care visitation



#### AFL 20-53.4: COVID-19 HCP and Resident Testing

- https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-53.aspx
- Provides updated CDPH guidance for routine diagnostic screening testing based on vaccination status.
- Aligns with April 27, 2021, CMS QSO-20-38-NH
   <a href="https://www.cms.gov/files/document/qso-20-38-nh-revised.pdf">https://www.cms.gov/files/document/qso-20-38-nh-revised.pdf</a>
   and CDC guidance <a href="https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-after-vaccination.html">https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-after-vaccination.html</a>



State of California—Health and Human Services Agency

California Department of Public Health



June 7, 2021

AFL 20-53.4

TO: Skilled Nursing Facilities

SUBJECT: Coronavirus Disease 2019 (COVID-19) Mitigation Plan Recommendations for Testing of Health Care Personnel (HCP) and Residents at

Skilled Nursing Facilities (SNF) (This AFL supersedes AFL 20-53.3)

# Updated Testing Guidance Based on COVID-19 Vaccination Progress

- Approximately 82% of all California SNF residents are fully vaccinated as of May 6, 2021.
- Facilities can discontinue routine diagnostic screening testing of fully vaccinated asymptomatic HCP only if ≥70% of residents and ≥70% HCP that work in the facility are fully vaccinated.
- Facilities must continue weekly routine diagnostic screening testing of unvaccinated and partially vaccinated HCP.

Example: Week of May 30-June 5, 2021								
Census	Fully Vaccinated	Partially Vaccinated	Unvaccinated	Percentage Fully Vaccinated				
100 Residents	80	15	5	$80 \div 100 = 80\%$				
300 Staff	195	130	175	$195 \div 300 = 65\%$				

# Updated Testing Guidance Based on COVID-19 Vaccination Progress (cont.)

- Symptomatic residents and HCP should be tested immediately to identify current infection, regardless of vaccination status.
- Testing should continue for HCP with higher-risk exposures (e.g., response testing).
  - Asymptomatic fully vaccinated HCP with higher-risk exposures do not need to be excluded from work following their exposure (AFL 21-08.2).
- SNFs must daily monitor the percentage of their residents and HCP who are fully vaccinated.
  - Screening testing of all HCP must be resumed within one week if the percentage of residents and HCP fully vaccinated drops below 70%.
  - Testing should continue for 2 weeks and continue until the required
     ≥70% of fully vaccinated residents and HCP is met for one full week.

### Testing and Quarantine for Newly Admitted and Readmitted Residents

- Testing and quarantine is no longer required for fully vaccinated newly admitted and readmitted residents, unless they had a known exposure in the prior 14 days.
- Unvaccinated and partially vaccinated newly admitted and readmitted residents need to quarantine in the yellow zone for 14 days and then be retested before moving to the green zone.
  - If the hospital does not test the patient within 72 hours prior to transfer, the SNF must test upon admission.
  - SNFs may consider acute care hospital days as part of the quarantine observation period for unvaccinated or partially vaccinated new admissions.

#### Testing and Quarantine for Dialysis Residents

- Residents who leave the facility for dialysis (regardless of vaccination status) do not need to be quarantined in a "yellow-observation" or "yellow-exposed" zone, unless there was a known exposure at the dialysis facility.
- When there is suspected or confirmed COVID-19 transmission at a dialysis facility (or other outside facility), testing and 14-day quarantine are recommended for unvaccinated or partially vaccinated residents.
- SNFs should consider periodic diagnostic screening testing for unvaccinated and partially vaccinated residents who regularly leave the SNF for dialysis.

#### Residents Who Test Positive for COVID-19

- Residents who test positive and are symptomatic should be isolated, regardless of vaccination status.
- Unvaccinated or partially vaccinated residents that test positive and are asymptomatic should be isolated for 10 days.
- Fully vaccinated residents who test positive and are asymptomatic should be isolated and observed for symptoms while evaluation is conducted with the local health department.



#### HCP Who Test Positive for COVID-19

- HCP who test positive and are symptomatic should be excluded from work, regardless of vaccination status.
- Unvaccinated or partially vaccinated HCP who test positive and are asymptomatic should be excluded from work for 10 days.
- Fully vaccinated HCP who test positive and are asymptomatic should be excluded from work and observed for symptoms while evaluation is conducted with the local health department.
- If staffing shortages are present, asymptomatic, COVID-19
   positive HCP can continue to work with residents in the red zone
   while following CDC Guidance on Mitigating Staffing Shortages
   <a href="https://www.cdc.gov/coronavirus/2019-ncov/hcp/mitigating-staff-shortages.html">https://www.cdc.gov/coronavirus/2019-ncov/hcp/mitigating-staff-shortages.html</a>

#### Response Testing & Cohorting Plan

- After a COVID-19 positive individual is identified, begin serial retesting of all residents and HCP who test negative upon the prior round of testing (regardless of vaccination status).
- Retest every 3–7 days until no new cases are identified among residents in sequential rounds of testing over 14 days.
- The facility may then resume their previous routine diagnostic screening testing schedule for HCP.
- Place residents into three separate cohorts (green, yellow, red)
   based on the test results, regardless of vaccination status.
- SNFs that currently do not have any positive cases should remain prepared to quickly re-establish the red zone to provide care for, and accept admission of, COVID-19 positive residents.

### 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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