



California Department of Public Health (CDPH) Infection Prevention Webinar

Wednesday, March 17, 2021

Upcoming Calls



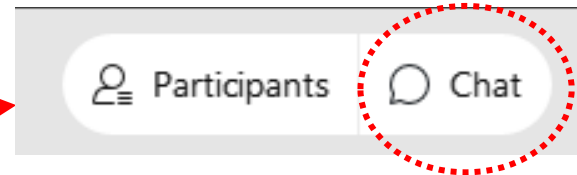
- CDPH Tuesday, 8 a.m., All-Facilities Calls:
 - Call in: **1.844.721.7239**
 - Access code: **799 3227**
- CDPH Wednesday, 3 p.m., SNF Infection Prevention (IP) Webinars:
 - Register at: hsag.com/cdph-ip-webinars
 - Recordings and slides are posted at registration site.
- CDPH Thursday, 12 noon, SNF IP Phone Calls:
 - Dial-in: **1.877.226.8163**
 - Access Code: **513 711**

Call notes for 2021 will be posted soon at the CDPH skilled nursing facility (SNF) infection prevention (IP) education website:

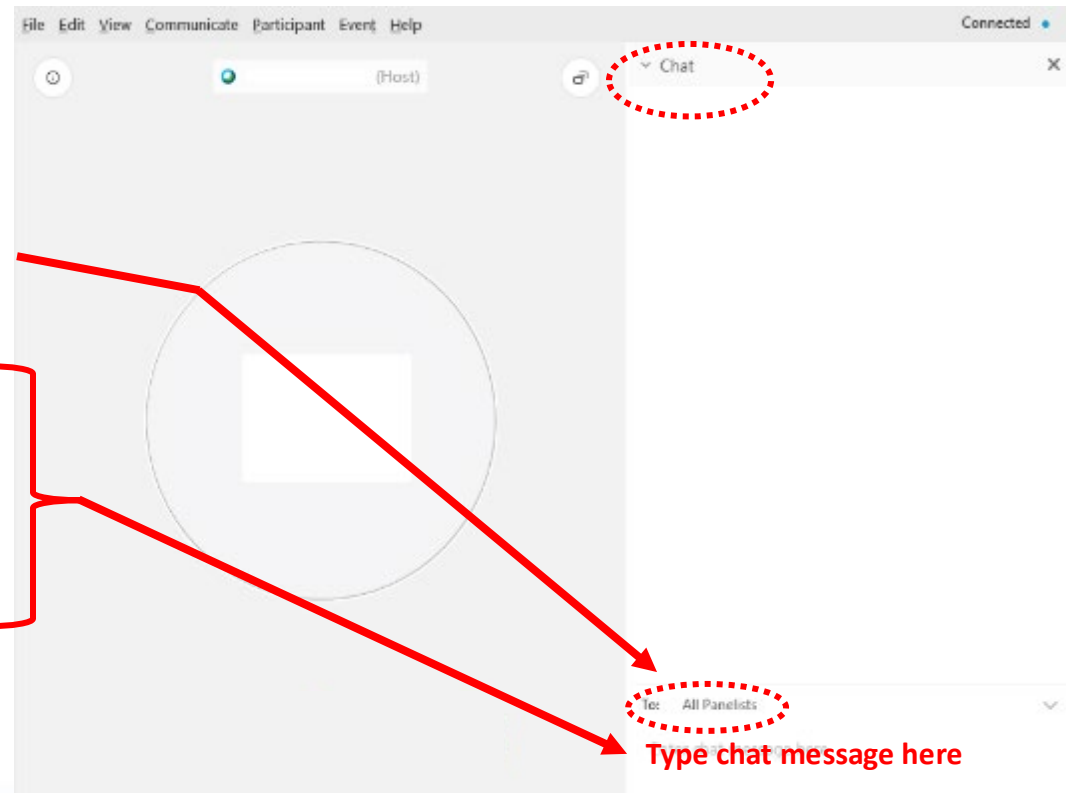
cdph.ca.gov/Programs/CHCQ/Pages/SNFeducation.aspx

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 Update
- Testing Task Force Update
- CDC Project Firstline Training for CNAs
- Updated Quarantine Guidance
- COVID-19 Vaccine Updates
- Q&A



CDPH Update

Poll: Seeking Feedback on Frequency of CDPH Weekly Calls

CDPH currently hosts three weekly calls:

- Tuesday 8 a.m. All Facilities Call
- Wednesday 3 p.m. SNF Infection Prevention Call/Webinar
- Thursday 12 Noon SNF Infection Prevention Call

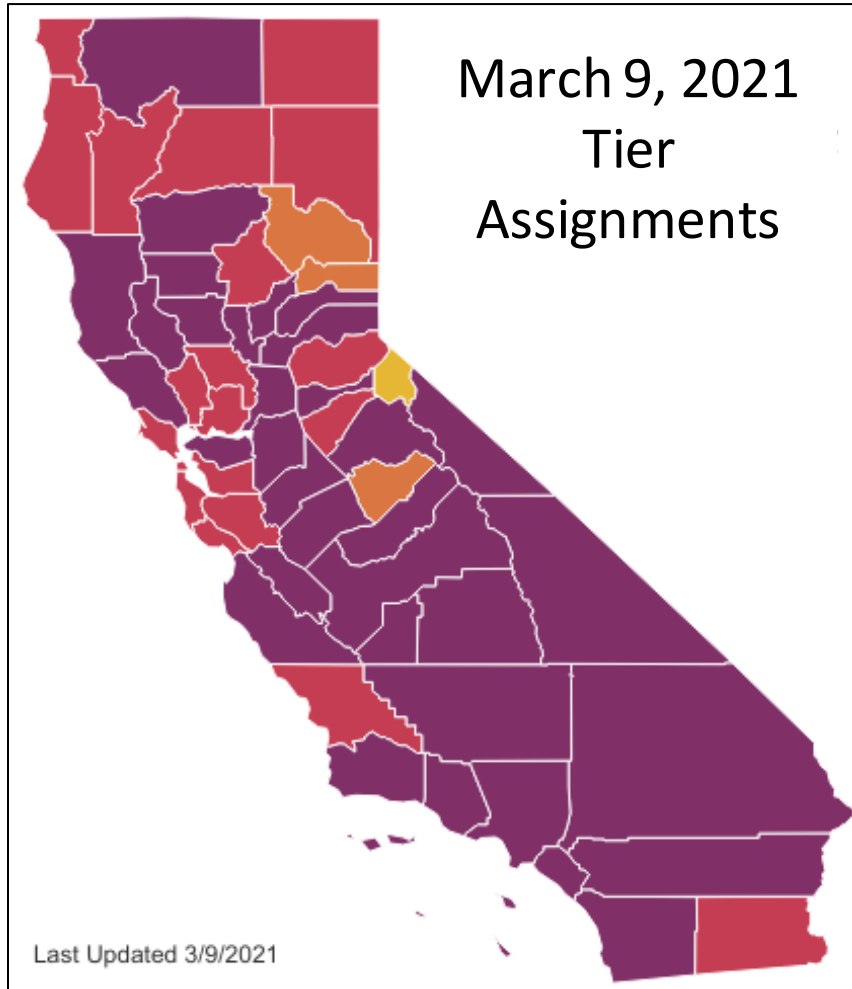
Please indicate your preference:

- A. Keep all three weekly calls
- B. Reduce to two calls per week
- C. Reduce to one call per week
- D. Reduce to one call every two weeks
- E. Reduce to one call every month

Please provide additional feedback/ideas in the chat box so we can ensure these calls are valuable.

California Blueprint for a Safer Economy

<https://covid19.ca.gov/safer-economy/>



WIDESPREAD

SUBSTANTIAL

MODERATE

MINIMAL

CDPH Visitation Fact Sheet

<https://www.cdph.ca.gov/Programs/CHCQ/LCP/CDPH%20Document%20Library/AFL-20-22-Attachment-01.pdf>



TOMÁS J. ARAGÓN, M.D., Dr.P.H.
Director and State Public Health Officer

State of California—Health and Human Services Agency California Department of Public Health



GAVIN NEWSOM
Governor

Visitation Fact Sheet - Skilled Nursing Facilities (nursing homes)

[CDPH All Facilities Letter 20-22.6](#) authorizes skilled nursing facilities (SNFs) to temporarily modify their facility's visitation policies in accordance with CMS and CDC COVID-19 guidance. Given progress with COVID-19 vaccination of SNF residents and healthcare personnel, CDPH recommends a cautious and gradual lifting of certain restrictions, while remaining vigilant for breakthrough infections and transmission in SNFs through ongoing surveillance and testing. This fact sheet provides a general overview of CDPH's visitation recommendations. Please refer to [AFL 20-22.6](#) for more detailed information.

Note: Visitation rules are subject to county public health orders, which may be more restrictive.

Outdoor Visitation	Indoor Visitation	General Visitation Rules
<p>All facilities shall permit outdoor visitation.</p> <p>Outdoor visitation is preferred and should be offered unless the resident cannot leave the facility, or outdoor visitation is not possible due to precipitation, outdoor temperatures, poor air quality, or other issues.</p> <p>Facilities should:</p> <ul style="list-style-type: none"> Facilitate scheduled visits on the facility premises with 6-feet or more physical distancing, use of face coverings by both residents and visitors, and staff monitoring of infection control guidelines Limit the number and size of visits occurring simultaneously to support safe infection prevention actions If outdoor visitation is not possible due to inclement weather, poor air quality, or other issues, accommodate visitation in large communal indoor spaces (e.g., lobby, cafeteria, activity room, or physical therapy room where 6 feet of distancing is possible) 	<p>Facilities shall allow indoor, in-room visitation for:</p> <ul style="list-style-type: none"> Fully vaccinated residents, regardless of the county tier under Blueprint for a Safer Economy. Unvaccinated or partially vaccinated residents in "green" (unexposed or recovered) or "yellow" (exposed or observation status) area for facilities in counties under Tier 2 (Red), Tier 3 (Orange), or Tier 4 (Yellow) in the Blueprint. <p>Indoor visitation shall meet the following conditions:</p> <ul style="list-style-type: none"> Visitors in Tier 1 (Purple) counties for fully vaccinated residents must test negative on a POC antigen or PCR test on a sample taken within the prior two days, regardless of the visitor's vaccination status. All visitors and residents should wear appropriate facial covering during their visit and should maintain 6-feet or more of physical distancing. Fully vaccinated visitors of fully vaccinated residents may have brief, limited physical contact with the resident (e.g., a brief hug, holding hands). Visits for residents who share a room should be conducted in a separate indoor space, or with the roommate not present in the room (if possible), regardless of the roommate's vaccination status. Full personal protective equipment (PPE) must be worn for yellow zone visitation. 	<p>Facilities:</p> <ul style="list-style-type: none"> Must adhere to the CMS core principles of COVID-19 infection prevention (PDF) at all times Must enable visits to be conducted with an adequate degree of privacy Should schedule visits at times convenient to visitors <p>Any visitor entering the facility, regardless of their vaccination status, shall:</p> <ul style="list-style-type: none"> Be screened for fever and COVID-19 symptoms, wear appropriate facial covering, and perform hand hygiene when in the facility If PPE is required for contact with the resident due to quarantine or COVID positive isolation status (including fully vaccinated visitors), it must be donned and doffed according to instruction by HCP If a visitor has COVID-19 symptoms or has been in close contact with a confirmed positive case, they must reschedule their visit <p>Support person visitors are encouraged (but not mandated), regardless of COVID-19 outbreaks, for residents with physical, intellectual, developmental disabilities and/or cognitive impairments.</p> <p>Specific individuals (e.g., healthcare workers, compassionate care visitors, Ombudsman) are exempt from a facility's visitation restrictions. See AFL 20-22.6 for the full list of visitation exceptions.</p>



Testing Task Force Update



CDC Project Firstline Training for CNAs



Updated Quarantine Guidance

Updated Guidance on Quarantine for Health Care Personnel (HCP) Exposed to COVID-19

- <https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-08.aspx>
- Fully vaccinated HCP who have a high-risk exposure no longer need to quarantine or be restricted from work for 14 days, unless there are underlying conditions that place them at higher risk.
- Fully vaccinated residents should continue to quarantine for 14 days following an exposure.
- New admissions that are fully vaccinated no longer need to quarantine in the yellow zone for 14 days if no known exposure.
- Fully vaccinated nursing home residents who leave for nonessential purposes do not need to quarantine upon return if they had no known exposure.
- HCP who travel domestic or international need to quarantine regardless of vaccination status.



COVID-19 Vaccine Updates

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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