



**California Department of Public Health  
Center for Health Care Quality  
AFC Skilled Nursing Facilities IP Call  
September 10, 2020, 12:00 pm**

**I: Questions & Answers:**

**Q:** Question regarding CalREADIE reporting requirements.

**A:** Any facility, regardless which state department it falls under, reporting antigen tests must report via CalREADIE.

**Q:** It appears that hospital, labs, and facilities are all reporting similar information. How is the risk of double or triple reporting on this information mitigated?

**A:** We have two parallel reporting mechanisms: reporting based on individuals and on a facility level. These two mechanisms for reporting are not aggregated together in order to prevent this issue of over-reporting. There are situations where staff working in multiple facilities may be counted more than once, however this is not an issue of double reporting but reporting two unique situations. We are aware of these concerns and constantly working to prevent over-reporting from happening.

**Q:** Question about reporting. Will lab reporting be incorporated into the daily survey?

**A:** No, this will not be the case. This information is separate, and it will not flow together.

**Q:** Question related to surgical mask and N95 masks, specifically related to extended use.

**A:** Surgical masks can be soiled or become wet far easier than N95 masks. Extended use for these pieces of PPE must be monitored more closely and not simply use a time-frame approach like with n95 masks that are more durable.

**Q:** During our SNF mitigation survey, we were told by CDPH staff to keep all screening paperwork for up to seven years. Is this accurate and can you please clarify?

**A:** The federal guidelines do not specify the amount of time, however Title 22 states seven years – this is probably why the surveyor made this comment. Let us double check with our policy team and clarify what is the accurate amount of time so we can stay consistent throughout the state.

**Q:** Question related to visitors. Do they need to have a negative COVID test to allow admittance into the facility?

**A:** Current guidelines do not require a negative test, but to pass a COVID screening prior to entering the facility.

**Q:** where can I find the notes from these meetings?

**A:** The notes from these meetings come from the CAHAN distribution list. We can make sure you are included on the CAHAN list to get these in the future.

**Q:** Question related to CMS guidelines for testing. We are the only SNF in county with zero COVID cases, do we still have to test our staff based on these guidelines?

**A:** Yes, you will still need to test your staff. Further guidance will be outlined in the AFL going out soon. Also, we recommend referring to your approved COVID mitigation plan and working with your local district health officer.

**Q:** Question related to a resident going to a hospital for surgery and retesting.

**A:** We do not recommend retesting residents who were previously positive and are now asymptomatic within the 90-day period. This can be tricky and requires a case by case approach. This person would not be considered a new case or trigger a new outbreak. If you have any additional questions, we are more than willing to work with you and your local health department.

**Q:** Question related to individual test reports on a daily and now a weekly basis. Can you please clarify this?

**A:** The weekly reporting is in addition to daily reporting. CalREADIE is only when the facility is doing point of care testing for purposes of local public health reporting – individual reporting and if the facility is doing antigen testing. Any tests reported from labs will be reported to CDPH, this is not something that facilities need to report. However, this would be included in the aggregate testing.

**Q:** Question regarding masks. We are giving residents surgical masks, is it okay to give them cloth masks as well?

**A:** For residents, this is okay. This is not advised for healthcare personnel though.

**Q:** Question related to AFL 20.46 and clarification on staffing resources reporting. Is this only for spike in staff absences when we are requesting extra staff? Or is this just general staff absences, can this be defined more?

**A:** CDPH would like to be reported when there is any spike in staff shortages, regardless if it is in the context of requesting more staff. Especially make note if it is a unique situation and if emergency actions are needed – such as CalMAT or HealthCorps. Please continue constant communication on staffing situations.