

State of California—Health and Human Services Agency

California Department of Public Health



AFL 23-12

January 24, 2023

TO: Skilled Nursing Facilities (SNFs)

SUBJECT: Coronavirus Disease 2019 (COVID-19) Recommendations for Personal Protective Equipment (PPE),

Resident Placement/Movement, and Staffing in Skilled Nursing Facilities

(This AFL supersedes AFL 20-74.1)

All Facilities Letter (AFL) Summary

- This AFL revision updates recommendations for PPE, resident placement/movement, and staffing based on the residents' COVID-19 status.
- This revision includes clarifications to recommendations for eye protections and N95 respirators.

This AFL revision provides updated CDPH recommendations for SNFs regarding use of personal protective equipment (PPE), resident placement/movement, and staffing, based on current understanding of the primary drivers of COVID-19 transmission in SNFs and in alignment with updated CDC infection control guidance. At this time, SNFs may move away from use of color-designated, e.g., red, yellow, and green "zones" and refer to the attached "COVID-19 PPE, Resident Placement/Movement, and Staffing Considerations by Resident Category" (PDF) for detailed requirements based on individual resident COVID-19 status.

SNFs should continue to ensure residents identified with confirmed COVID-19 are promptly isolated in a designated COVID-19 isolation area. The COVID-19 isolation area may be a designated floor, unit, or wing, or a group of rooms at the end of a unit that is physically separate and ideally includes ventilation measures to prevent transmission to other residents outside the isolation area. SNFs that do not have any residents with COVID-19 and do not have a current need for an isolation area should remain prepared to quickly reestablish the area and provide care for, and accept admission of, residents with COVID-19.

Symptomatic residents and residents identified as close contacts through individual contact tracing should generally remain in their current room while undergoing testing as described in AFL 22-13.1. Facilities should avoid movement of residents that could lead to new exposures, for example, moving a resident into a room where one of the new roommates is subsequently found to have unidentified infection. Residents who are identified as close contacts, regardless of vaccination status, should wear source control while outside their rooms but do not need to be quarantined or cared for by healthcare personnel (HCP) using the full PPE recommended for the care of a resident with COVID-19. Other residents on the same unit or wing who were not identified as close contacts through contact tracing are not considered exposed unless the facility is instructed by their local health department (LHD) to take a unit or facility-wide approach to determine exposures.

Dedicated HCP with separate break rooms and restrooms are **no longer** required for residents with confirmed COVID-19 or residents with COVID-19 exposures; however, HCP must understand the need to change gloves and gowns and perform hand hygiene between all residents, regardless of known COVID-19 or other infectious disease status.

If you have any questions about this AFL, please contact the Healthcare-Associated Infections Program via email at CovHAI@cdph.ca.gov.

Sincerely,

Original signed by Cassie Dunham

Cassie Dunham

Deputy Director

Resources:

- COVID-19 PPE, Resident Placement/Movement, and Staffing Considerations by Resident Category (PDF)
- CDC Summary of Strategies to Optimize Use of PPE in Presence of Shortages

Center for Health Care Quality, MS 0512 . P.O. Box 997377 . Sacramento, CA 95899-7377

(916) 324-6630 . (916) 324-4820 FAX

Department Website (cdph.ca.gov)



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