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# We will start in a few minutes!

---

Please join us in our activity before we get started.

Enter “What is your spirit animal?” in the chat. 😊



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# San Diego Skilled Nursing Facility Infection Prevention Collaborative

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Grow - Collaborate - Succeed

Coordinated by the County of San Diego  
Healthcare-Associated Infections (HAI) Program



# Reminders

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Please keep your lines  
muted



Please enter your questions  
and comments in the chat box



You can email us at:  
[PHS.hai.hhsa@sdcounty.ca.gov](mailto:PHS.hai.hhsa@sdcounty.ca.gov)

# LAND ACKNOWLEDGEMENT STATEMENT:



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Public Health Services would like to begin by acknowledging the Indigenous Peoples of all the lands that we are on today. While we are meeting on a virtual platform, I would like to take a moment to acknowledge the importance of the lands, which we each call home. We respectfully acknowledge that we are on the traditional territory of the Kumeyaay. We offer our gratitude to the First Nations for their care for, and teachings about, our earth and our relations. May we honor those teachings.

# Agenda

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Welcome

County of San Diego Healthcare-Associated Infections (HAI) Program

San Diego Skilled Nursing Facility Infection Prevention (IP) Profile

General Updates

Featured Topic: Monkeypox (MPX)

Question of the Day

Wrap-up

# Welcome

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## A message from Dr. Raymond Chinn



# COSD HAI Program

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HHSA

• Health & Human Services Agency

PHS

• Public Health Services

EISB

• Epidemiology and Immunization Services Branch

EPI

• Epidemiology

HAI

• Healthcare-Associated Infections

# COSD HAI Program

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- **Vision:** Empower our community... to be the most prepared, most proactive, and most protected... against infectious diseases
- **The team:** Comprised of Public Health Nurses, Epidemiologists, Quality Assurance Specialist, Registered Nurses, Physician consultant
- **Role:**
  - Promote IPC practices throughout San Diego
  - Provide IPC consultation/education/in-services to various healthcare/congregate settings
  - Conduct epidemiological investigation and data analysis of emerging multidrug-resistant organisms
- We are **NOT** regulatory/licensing
- We want to partner with you!



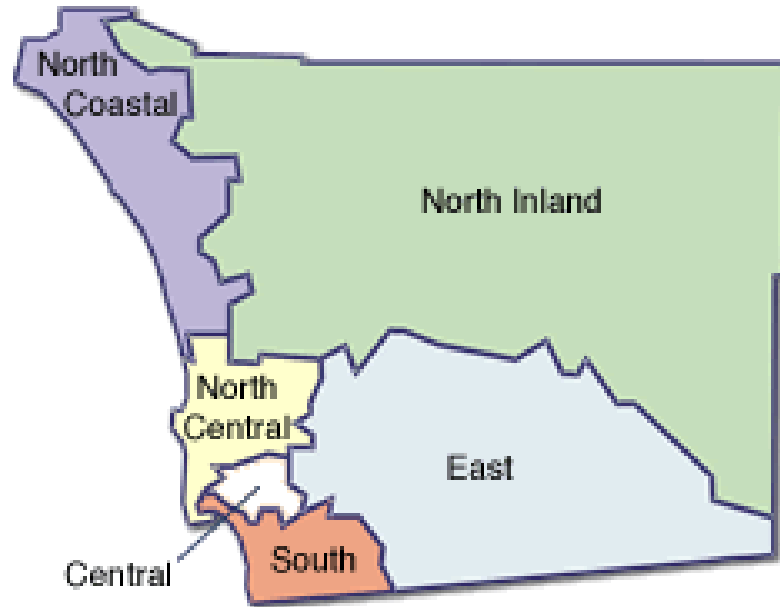


# San Diego IP Colleagues



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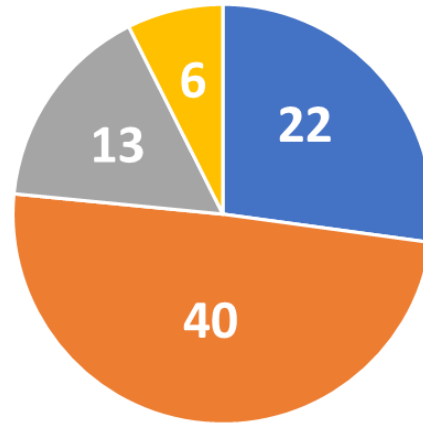
## San Diego County SNF IP Profile



## Facility (81/84 Responded)

How many licensed beds does your facility have?

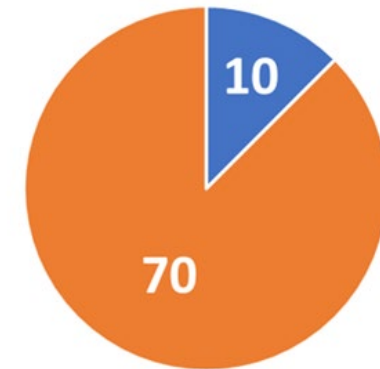
**Licensed Beds**



■ 1-59 Beds ■ 60-120 Beds ■ 120-200 Beds ■ 201+ Beds

Does your facility have a ventilator subacute unit?

**Ventilator Subacute Unit**



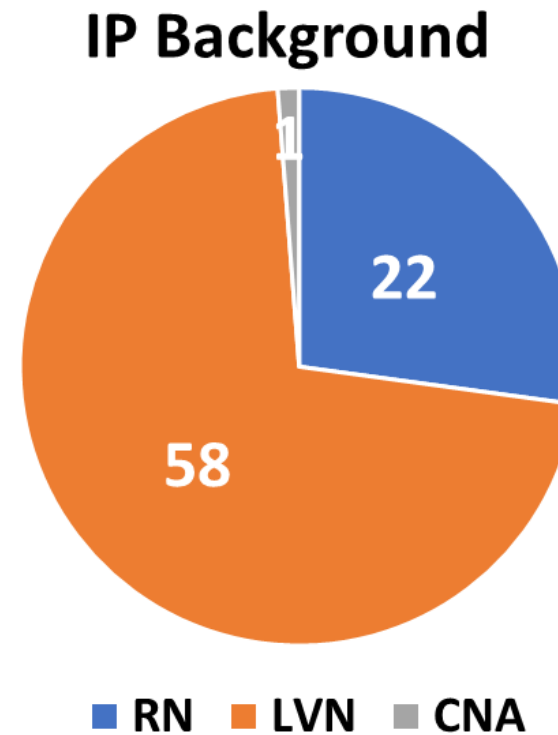
■ YES ■ NO



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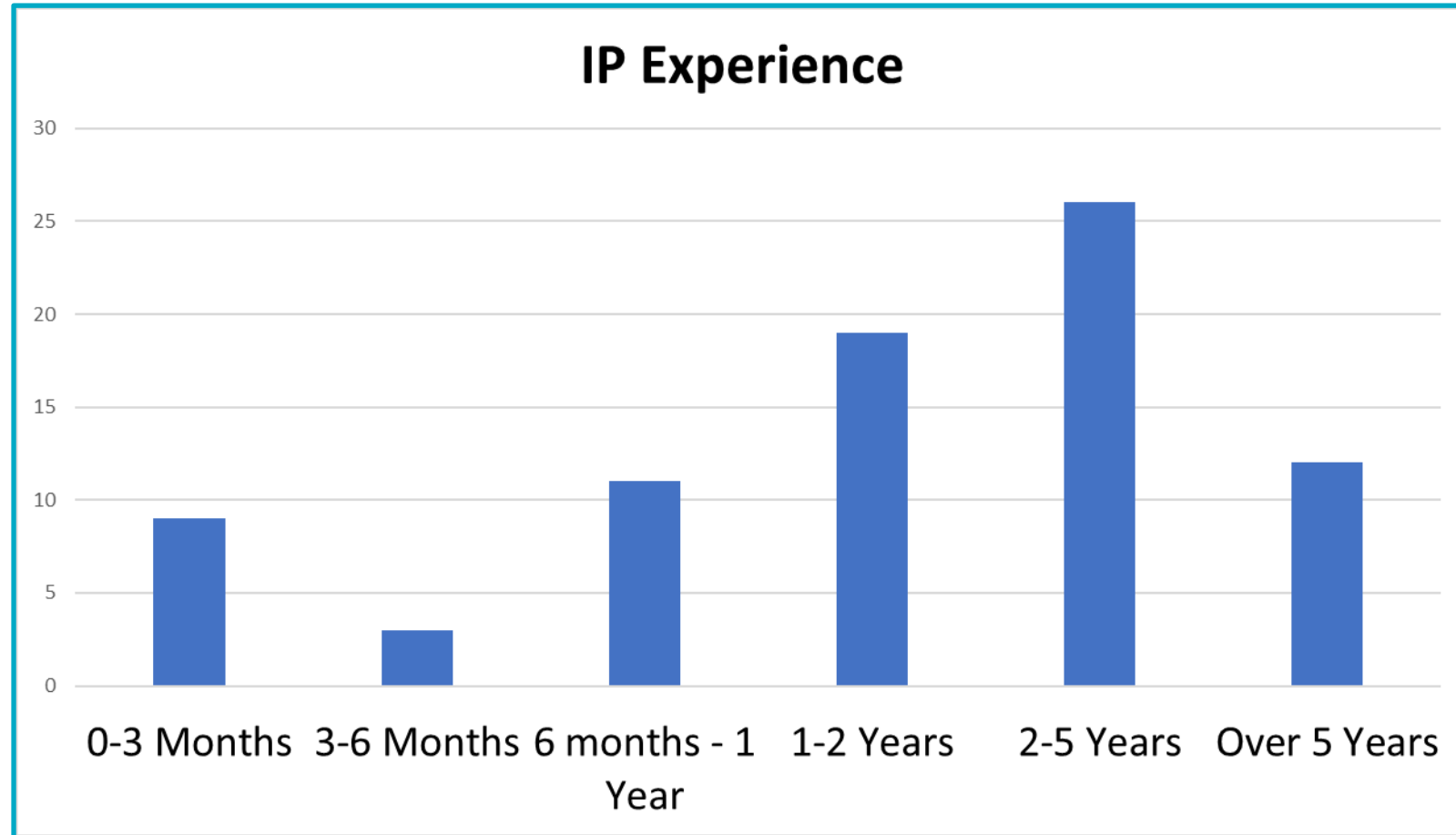
# IP Background

What is your background?



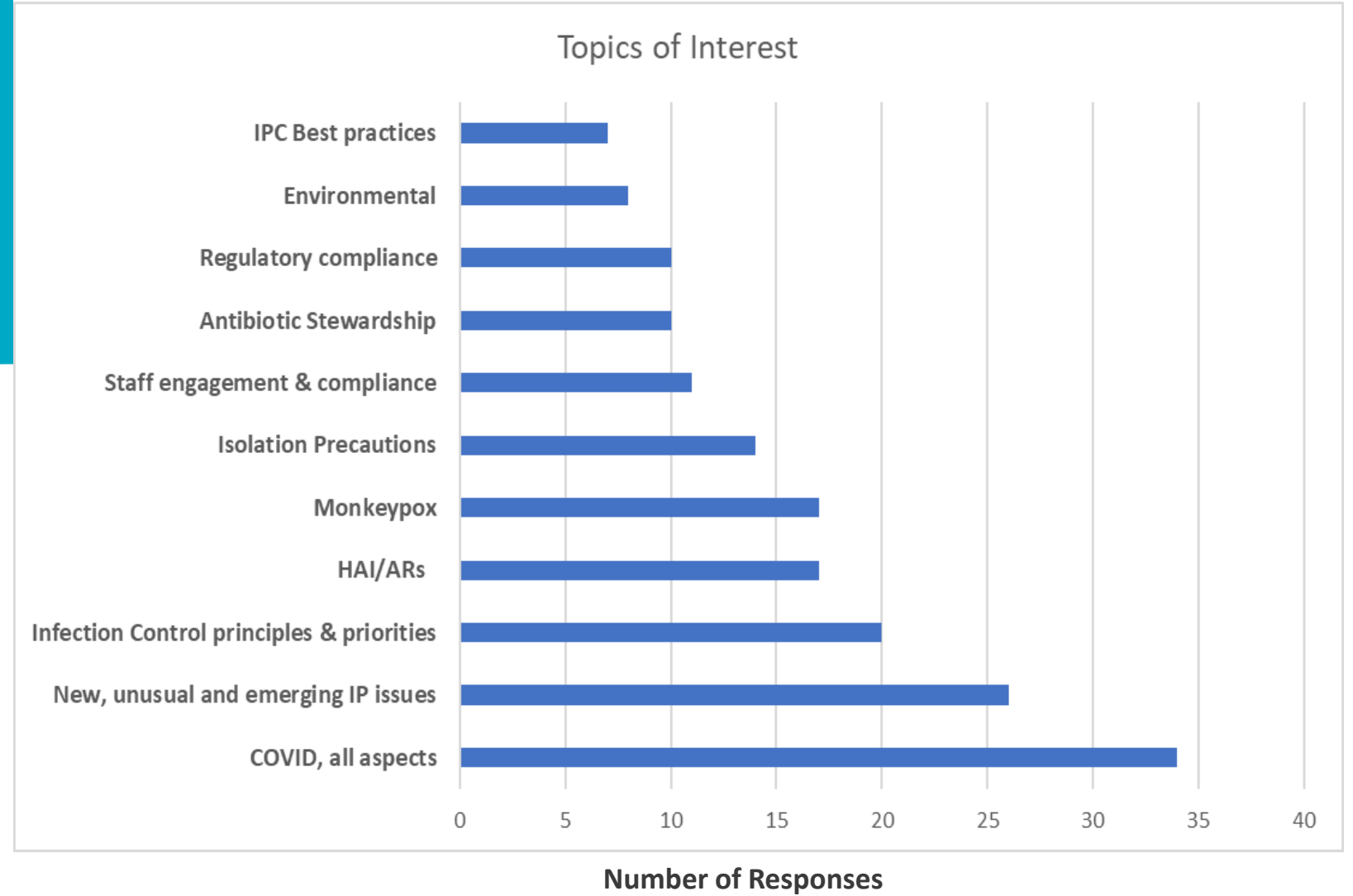
# IP Experience

How long have you been in IP?



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## Topics of Interest



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# General Updates



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- **New Health Alerts**
- **MPX epi-curve**
- **2021-2022 Influenza Season Summary**
- **COVID tracking**
- **Updates to CDPH COVID Policy**

# General Updates



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California Department of Public Health (CDPH) and local public health partners are alerting healthcare providers of the emergence of *Candida auris* cases linked to hospitals and skilled nursing facilities (SNF) in Southern Nevada state since August 2021. Since June 2022, we have identified two cases with reported exposure in Nevada healthcare facilities with known outbreaks. In addition to implementing routine infection prevention and control practices, CDPH is recommending healthcare facilities conduct colonization testing for individuals with unknown *C. auris* status transferring from any hospital or ventilator-equipped SNF in Nevada state, and place them on empiric Contact Precautions while awaiting results.

# General Updates



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The California Department of Public Health, in consultation with the California Conference of Local Health Officers, recently updated Title 17 section 2500 of the California Code of Regulations. New reporting requirements are now in effect for:

- **Monkeypox or orthopox virus infections** (report within one working day)
- ***Candida auris*, colonization or infection** (report within one working day)



# General Updates



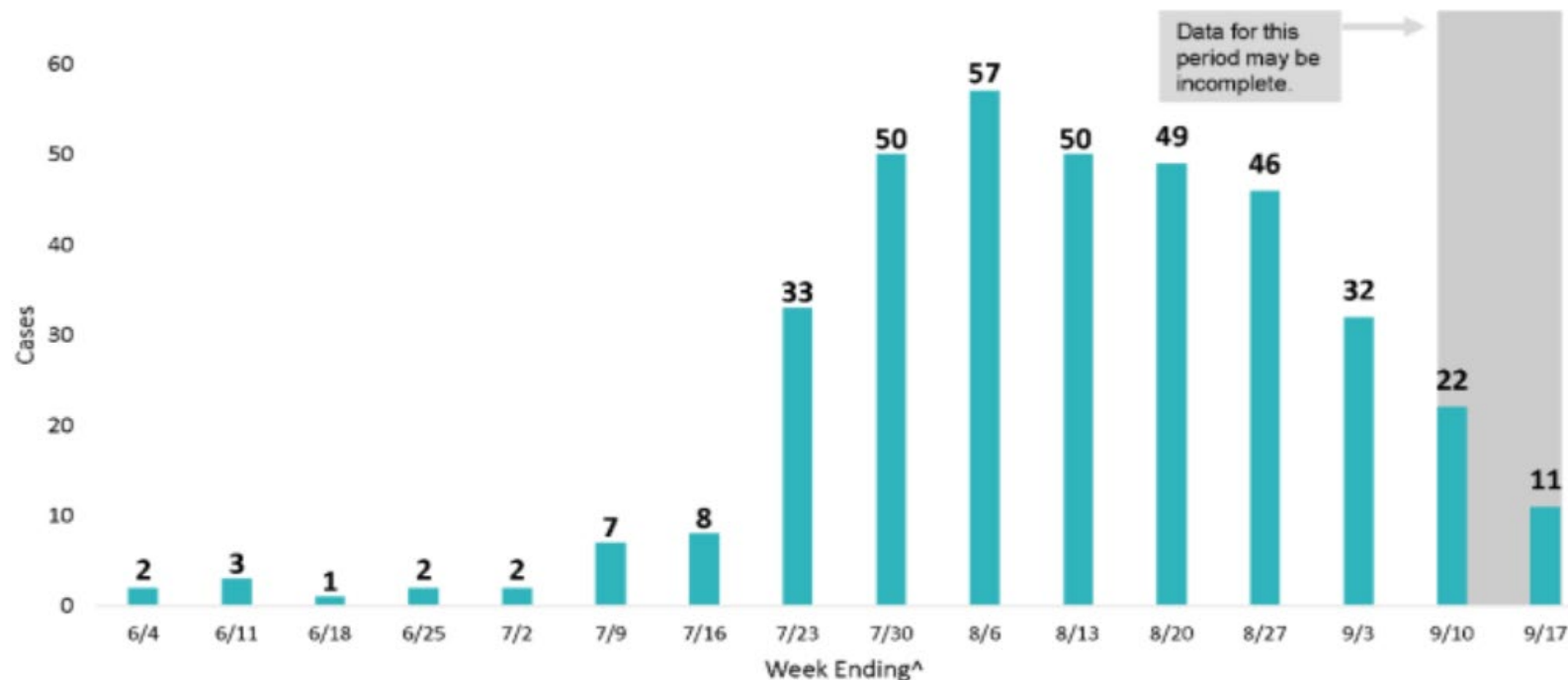
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## Monkeypox (MPX) Update

### MPOX CASES BY EPISODE DATE Updated Weekly (Tuesday) Data Through 9/17/2022

Confirmed and Probable MPOX Cases\* by Episode Date †  
San Diego County Residents, N=375



# General Updates



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## 2021-22 Season Summary

**4,192**

Total Cases

**8**

Deaths<sup>†</sup>

**1**

Outbreak<sup>\*</sup>

<sup>†</sup> Flu deaths less than 18 years of age are reportable to CDPH.

<sup>\*</sup> In a congregate living setting, outbreaks are defined as at least one laboratory-confirmed influenza case in the setting of a cluster (≥2 cases) of influenza-like illness (ILI) within a 72-hour period.

## Virus Characteristics

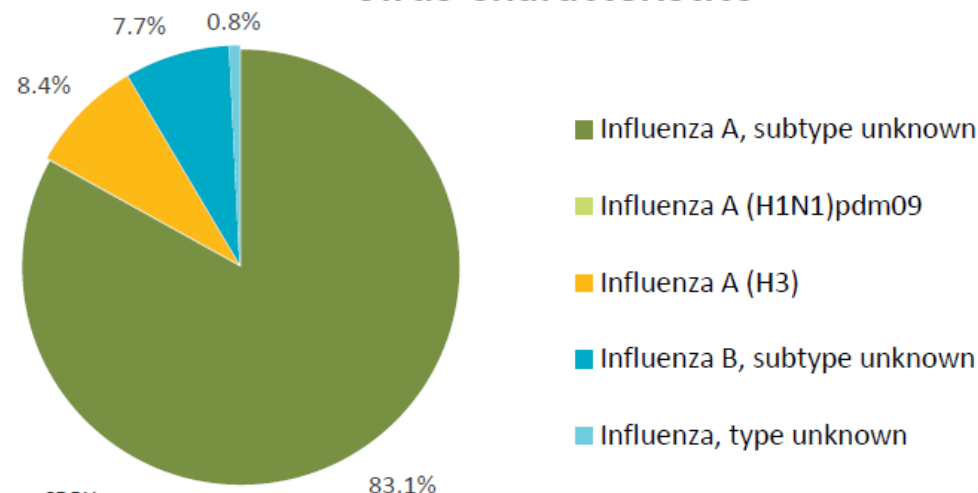


Table 1. Influenza Surveillance Indicators.

Surveillance Indicator	2021-22 Season	2020-21 Season	Prior 5-Season Average*
All influenza detections reported (rapid or PCR)	4,192	848	11,781
Number of influenza-related outbreaks reported <sup>∞</sup>	1	0	48
Number of influenza-related deaths reported <sup>^</sup>	8	2	123

\*Includes FYs 2016-17, 2017-18, 2018-19, 2019-20, and 2020-21. Influenza season is July 1 – June 30, Weeks 27-26.

# General Updates



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## How to determine COVID Transmission Levels

- Transmission levels give you cues to proactively implement IPC measures
- Per CDC: determined by two metrics, categorized as: low, moderate, substantial, high:
  - 7-day Rolling Case Rate (per 100k population)
  - Test positivity rate (%)
- If the two metrics do not match, use the **higher** of the two metrics

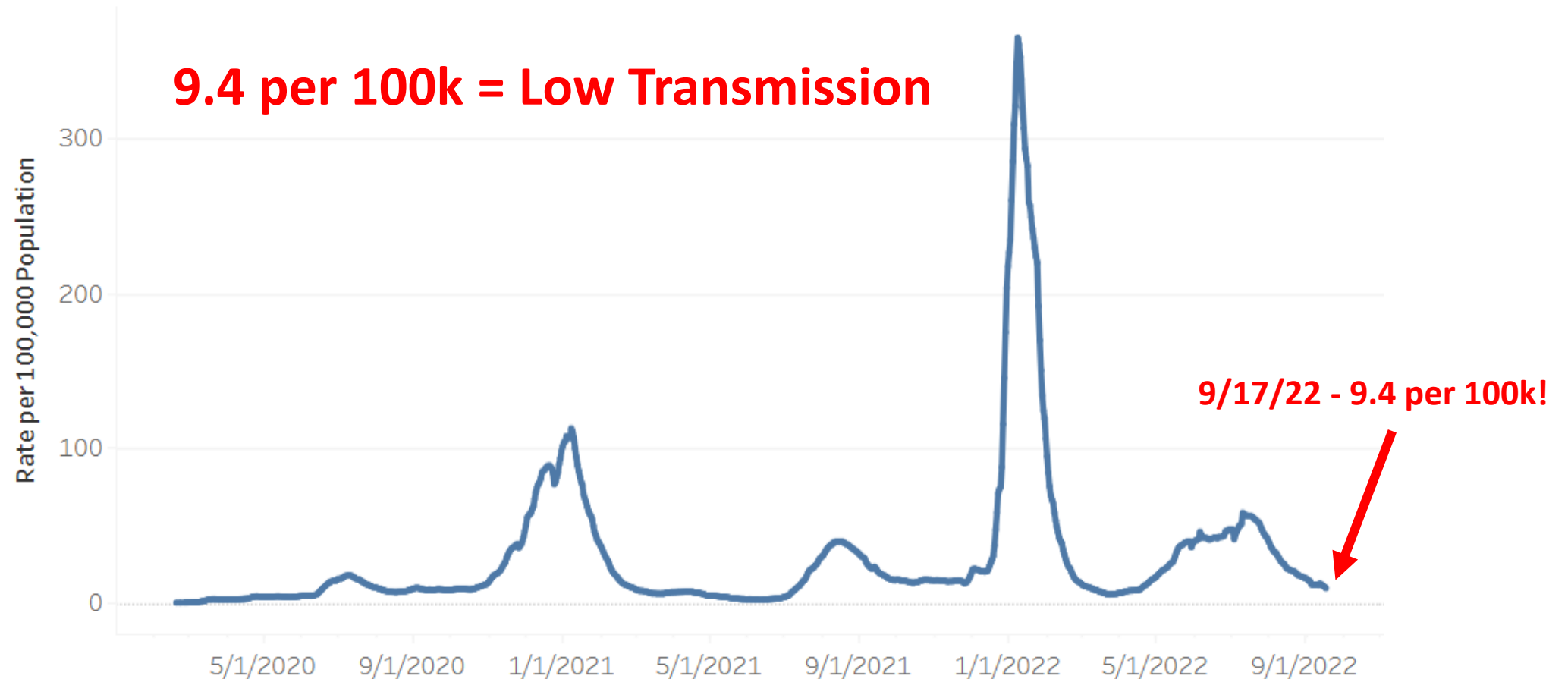
# General Updates



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COVID-19 Confirmed Cases by Episode Date\*\* - Case Rate: 7-Day Rolling Average



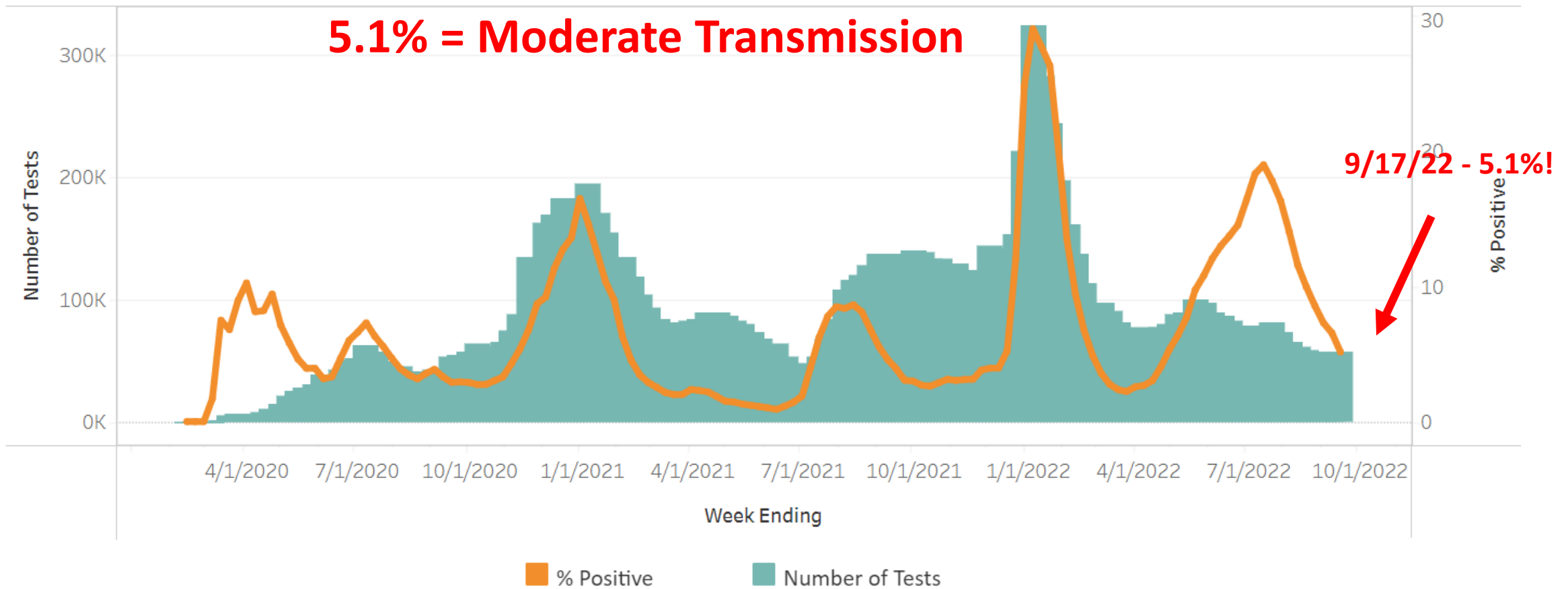
# General Updates



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COVID-19 Testing Volume and Positivity by Week of Specimen Collection,  
San Diego County



# General Updates



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## COVID Bivalent Vaccine

- FDA approved the COVID bivalent vaccine (Moderna/Pfizer)
  - Intended to cover both the original strain and omicron variants (BA.4/BA.5)
  - **Replaces the previous monovalent booster vaccine**
  - **Can be received 2 months after** receiving primary COVID vaccine series or previously received monovalent booster.
  - **Limited doses available at County vaccination sites**, on a walk-in basis

# General Updates



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## County Outpatient Therapy Centers (MARC)s Winding Down

- The Monoclonal Antibody Regional Centers (MARC)s winding down at end of September
- MARC phone line (619-685-2500) and email [COVIDTreatment@sdcounty.ca.gov](mailto:COVIDTreatment@sdcounty.ca.gov) will continue to be monitored.

# General Updates



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- **New/Updated AFLs:**
  - AFL 22-20 COVID-19 Treatment Resources for SNFs

Drug	Type	Information
Paxlovid	Oral pills	EUA for patients $\geq 12$ y/o; highly effective in reducing deaths/hospitalizations; drug-drug interaction risk; not recommended for severe renal or hepatic impairment; "rebound" with positive antigen test and symptom recurrence is possible upon completion of therapy.
Molnupiravir	Oral pills	EUA for patients $\geq 18$ y/o; moderately effective in reducing deaths/hospitalizations; may cause fetal harm for pregnant individuals
Remdesivir	IV	FDA-approved for patients $\geq 12$ years; EUA in patients younger than 12; highly effective in reducing deaths/hospitalizations; multi-day treatment
Bebtelovimab	IV	EUA for patients $\geq 12$ y/o; moderately effective; given in single dose
Evusheld	Injection	Indicated for immunocompromised individuals who cannot mount an immune response to COVID-19 vaccinations; taken <i>before</i> getting sick or exposed



# General Updates



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- **CDPH updated State Public Health Officer Orders:**
  - **Rescinded (9/13/22)**
    - Healthcare Worker Protections in High-Risk Settings
  - **Amended (9/13/22)**
    - Healthcare Worker Vaccine Requirement

# LTC IP Certification



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## Eligibility Requirements for the Long-Term Care Certification in Infection Prevention (LTC-CIP)

Successful long-term care infection prevention certification indicates competence in the practice of infection prevention and control within a long-term care setting. This includes:

- Responsibility for the infection prevention and control programs/activities in a long-term care setting. Candidates will fill out an attestation form confirming this information.
- Completed post-secondary education in a health-related field including but not limited to medicine, nursing, laboratory technology, public health, or biology. Post-secondary includes public or private universities, colleges, community colleges etc.

CBIC recommends, but does not require, one year of full-time infection prevention experience prior to taking the LTC-CIP examination.

<https://www.cbic.org/CBIC/Long-term-care-certification.htm>

# Poll Question

**Poll 1: How many of you have a plan to administer the new COVID-19 bivalent vaccine?**

- Yes
- No
- What vaccine??
- In progress
- Help!



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# Poll Question

## Poll 2: Are you prepared for the flu season?

- Yes
- No
- There is something other than COVID??
- WHAT!!



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# Featured Topic: Monkeypox (MPX)



**Mara Rauhauser**

**BSN, RN, PHN**

**Senior Public Health Nurse**

**County of San Diego**

**Healthcare-Associated Infections**

**Infection Preventionist**



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# Monkeypox (MPX) Overview



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Rare  
Zoonotic  
Infection

- Caused by monkeypox virus, an orthopoxvirus in the same family as smallpox, not related to chicken pox

Discovered  
in 1958

- Two outbreaks of a pox-like disease occurred in monkeys kept for research
- African rodents or non-human primates like monkeys are thought to be the primary host.

The first  
recorded human  
case was in  
1970

- Endemic in West and Central Africa
- Previous to the 2022 outbreak, almost all MPX cases in people outside of Africa were linked to international travel to countries where the disease commonly occurs or contact with imported animals from this region.



# MPX Incubation and Transmission

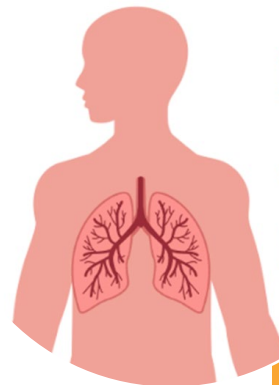


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The time from exposure to symptoms (incubation period) is typically 7 to 14 days but can range from 5 to 21 days.



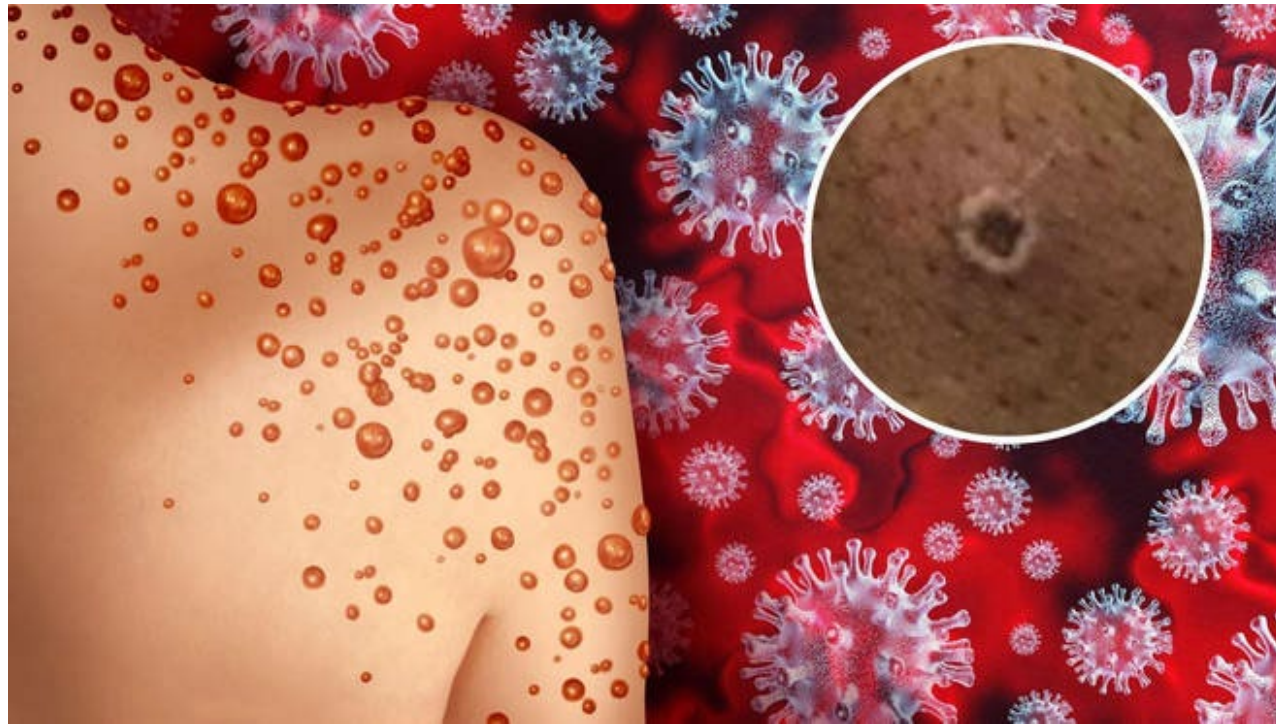
The virus enters the body through broken skin (even if not visible), the respiratory tract, or the mucous membranes (eyes, nose, or mouth).

# MPX Transmission



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- **Direct skin-to-skin contact** with the sores or scabs of people with MPX
- **Direct contact with body fluids** of people with MPX, such as drainage from skin sores or saliva that was in contact with mouth sores
- **Contact with the respiratory secretions** of people with MPX, such as saliva, during prolonged, face-to-face contact or during intimate physical contact, such as kissing, cuddling, or sex
- **Touching items** (such as bedding towels, clothing, cups and utensils) that previously touched the sores, scabs or body fluids of people with MPX

- A person with MPX can spread it to others from the time symptoms start until the rash has fully healed and a fresh layer of skin has formed (scab has to fall off).

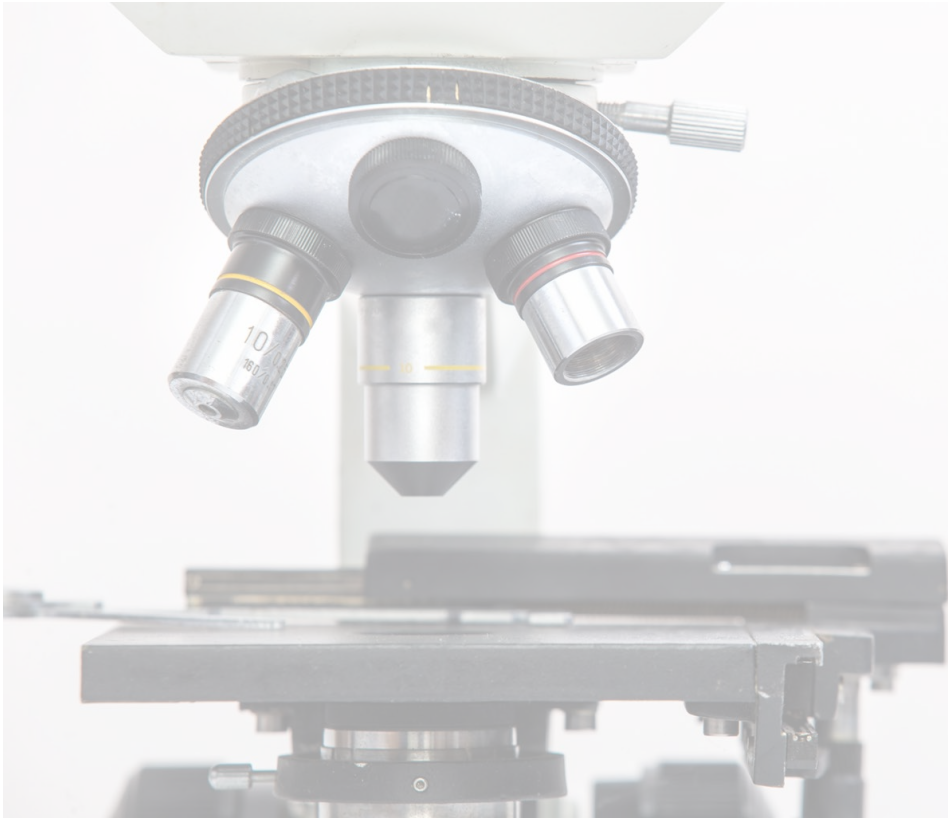


# MPX Incubation and Transmission



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To date, there has been no evidence that MPX is spread by:

- Attending an outdoor event with fully clothed people
- Trying on clothes or shoes at a store
- Traveling in an airport, on a plane or on other public transit
- Swimming in a pool or body of water
- Casual contact with other people

# Various Stages of the MPX Rash



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# MPX Signs and Symptoms



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- People with MPX get a rash that may be located on or near the genitals or anus and could be on other areas like hands, feet, chest, face, or mouth.
- The lesions can be in various stages of development at the same time. The rash can look like other infectious diseases such as herpes simplex, secondary syphilis, and shingles. It is important to obtain a sexual history and a history of contact with persons who had a rash. The majority of MPX cases have occurred in men who have sex with men (MSM).
- The rash can initially look like pimples or blisters and may be painful or itchy.
- The rash will go through several stages, then scab over before healing.

# Monkeypox – Signs & Symptoms

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Symptoms may precede rash and include:



Fever



Swollen lymph  
nodes



Chills



Headache



Backache



Muscle aches

The illness typically lasts 2 to 4 weeks

# Testing and Treatment of MPX



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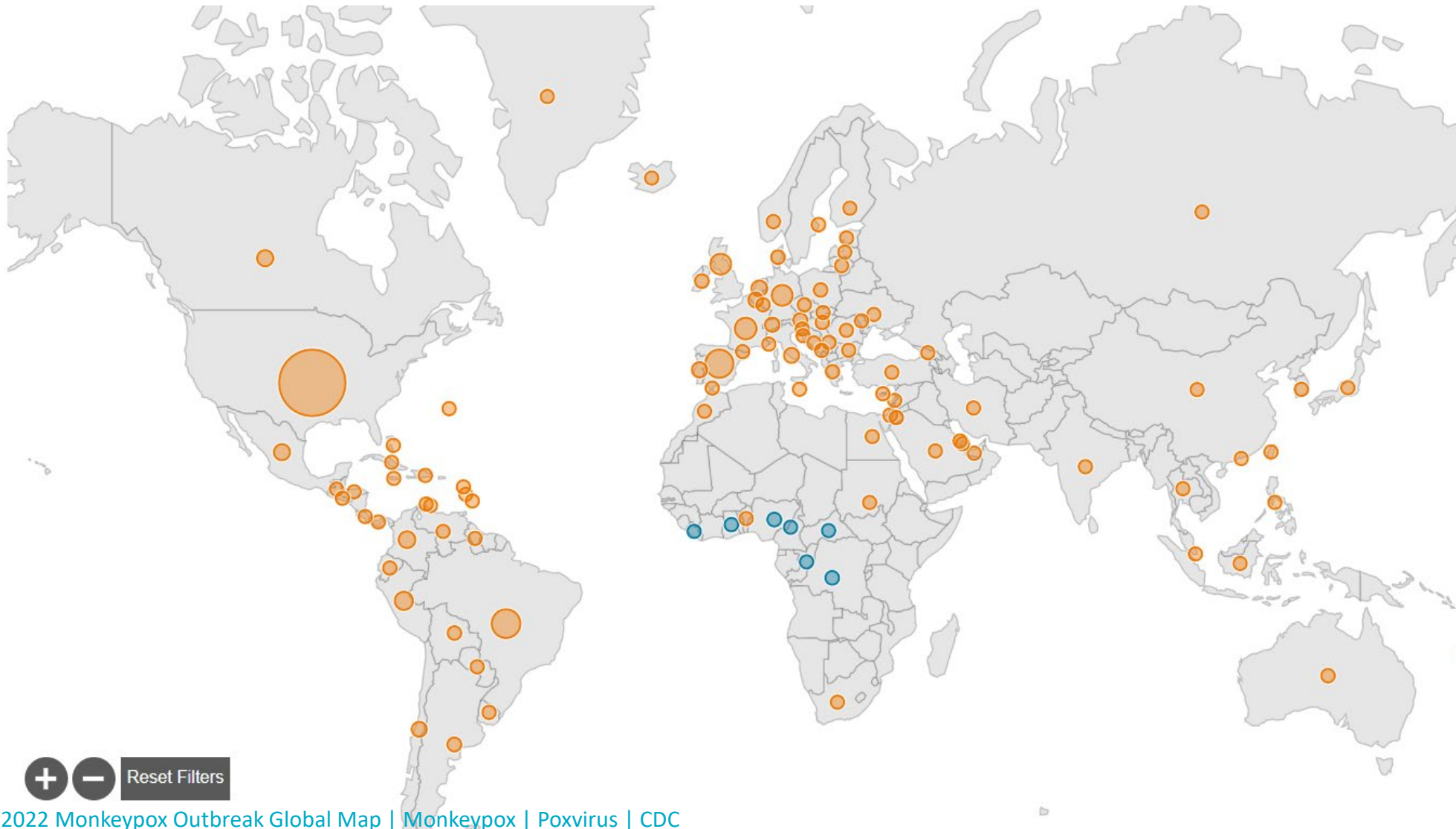
- Testing is now available through many commercial labs.
- Report any positive case to San Diego County Public Health.
- This is often a mild self-limiting disease course. Consider treatment for certain populations.
- Currently there is no treatment approved specifically for monkeypox virus infections. However, antivirals developed for use in patients with smallpox may prove beneficial against monkeypox.



# 2022 Global Map and Case Count



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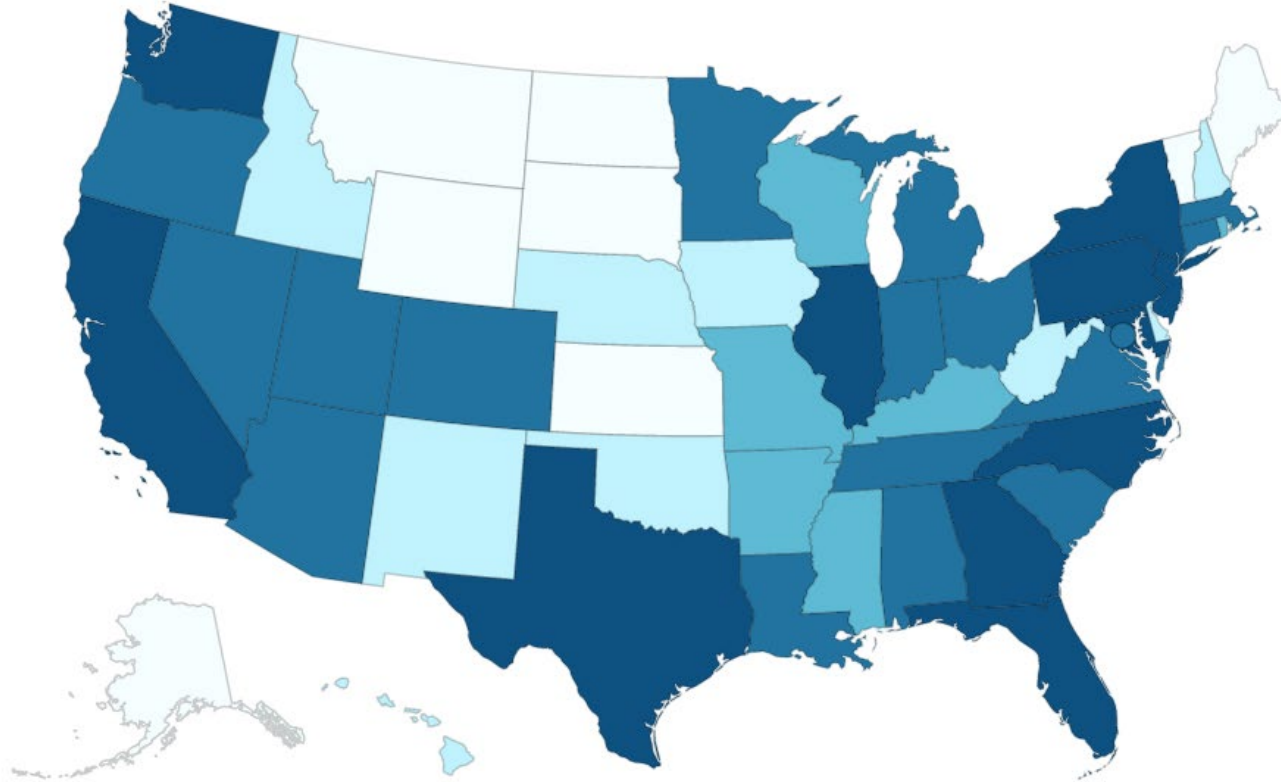
Total Confirmed  
Cases: 65,933

Data as of Sept 26,  
2022

# 2022 US Map and Case Count



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25,341 Total confirmed monkeypox/orthopoxvirus cases  
Data as of September 27, 2022

## Legend

1 to 10

51 to 100

>500

11 to 50

101 to 500

Territories

PR



# MPX Cases May-Sep 2022

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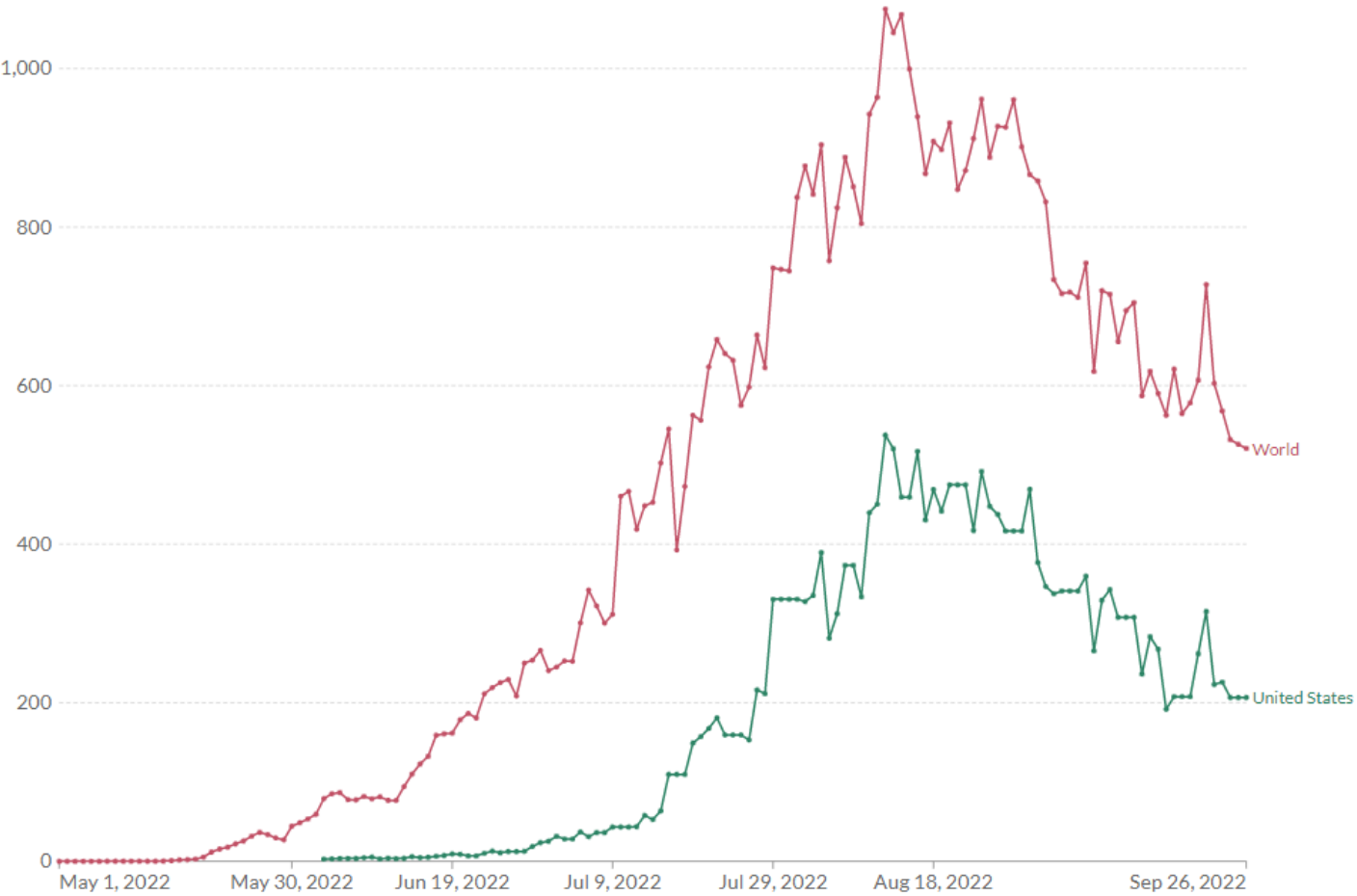


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## Monkeypox: Daily confirmed cases

7-day rolling average

LINEAR LOG



Source: World Health Organization

CC BY

[Monkeypox - Our World in Data](#)



# Epidemiology of 2022 Outbreak



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As of Sept 26, 2022: **Total Global Cases: 65,933**

As of Sept 27, 2022: **Total US Cases: 25,341**

As of Sept 26, 2022: **Total Cases in San Diego County: 407**

- Of the data available for the current monkeypox cases in San Diego County:
  - 100% occurred in men
  - 91% of whom reported being gay, same-gender loving or bisexual
  - Median Age: 35 years old
  - Race/Ethnicity data shows 45.9% Hispanic or Latino; 42.9% White  
8.5% Black or African American; and 2.7% Asian; with 62 cases unknown race/ethnicity



# MPX Vaccine

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- Jynneos vaccine is approved for the prevention of MPX and smallpox
- Due to the limitation of vaccine, people with exposures are being prioritized
- See the San Diego County Public Health Monkeypox webpage for more details

# MPX Healthcare Facility Guidance

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Positive  
Resident



- Place resident in **Transmission based precautions** in a single – person room
- Special air handling NOT REQUIRED
- If an aerosol generating procedure is needed, follow current facility policy
- Door should be kept closed (if safe to do so)
- Notify San Diego County Public Health
- Dedicated bathroom
- Dedicated equipment
- Visitors should be limited to those essential for the resident's care and wellbeing
- Movement outside of resident room should be limited to medically necessary purposes
- If transport is necessary, resident should use well-fitting source control and skin lesions should be covered (with clothing or a sheet)
- Isolation can be discontinued when all MPX lesions are fully healed, and a fresh layer of skin has formed at lesion sites and any other symptoms have been resolved for at least 48 hours

# MPX Healthcare Facility Guidance

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## Personal Protective Equipment

Staff entering the resident's room should use:

- Gown
- Gloves
- Eye protection (goggles or face shield)
- N95



## Waste Management

- It is appropriate to treat the waste with the standard disposal procedure
- If the case has a history of travel to west or central Africa in the last 21 days, contact the HAI team for further guidance

# MPX Healthcare Facility Guidance

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EVS

- EVS staff should wear PPE (gown, gloves, eye protection, and N95)
- Standard cleaning and disinfection procedures for a room under transmission based precautions, using a product on EPA List Q (Emerging Viral Pathogens)

Any cleaning process that would stir up infectious particles should NOT be done.

- Do not dry dust, sweep or vacuum.
- Wet cleaning methods are preferred
- Avoid the use of portable fans





# MPX Healthcare Facility Guidance

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## Handling Linens

- Staff handling linens should be in full PPE
  - Including staff in the resident's room and in the laundry room
- Do not shake or handle in a way that will disperse the infectious material
- Have a process that identifies the MPX contaminated soiled laundry
- Soiled laundry (including bedding, towels, personal clothing, etc.) should be placed gently and promptly in a laundry bag

## Food Service Items

Food service items can be performed with routine procedures

# MPX Healthcare Facility Guidance

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Positive  
HCW

- May not return to work until all skin lesions are healed (scabs have fallen off and a fresh layer of skin has formed) and any other symptoms have resolved for at least 48 hours.
- Consult San Diego County Public Health to assist with contact tracing and any PEP needed.



# MPX Healthcare Facility Guidance

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Exposed  
Residents  
and Staff

- In general, residents in healthcare facilities who have had a monkeypox virus exposure and are asymptomatic do not need to be isolated, but they should be monitored.
- Monitoring should include assessing the patient for [signs and symptoms](#) of monkeypox, including a thorough skin and oral exam, at least daily, for 21 days after their last exposure.
- Asymptomatic HCP with exposures to monkeypox virus do not need to be excluded from work but should be monitored for 21 days from their last exposure.



# Question of the Day



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## Case Study:

**A resident has a suspicious rash.**

**What are you going to do?!**



# Multi-answer: select all that apply

- **Poll:**

- Panic!!
- Transmission based precautions
- Hand hygiene
- Contact the MD
- Order skin scraping
- Call COSD Epidemiology Unit
- Call CDC
- Follow facility rash protocol



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# MPX Case Study

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If there is a rash  
protocol, follow it

Many rashes are similar,  
more information is needed

Many rashes are contagious,  
transmission-based isolation  
is necessary while more  
information is gathered

# MPX Case Study

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Questions  
to ask???

Any travel in the last  
21 day?

Close or intimate contact  
with someone with a  
similar rash or a  
confirmed infectious  
disease?



What other symptoms are  
present?

Close or intimate contact with  
someone in a setting at risk for  
MPX infection?

# MPX Case Study

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## Next Steps:

Communicate all details  
gathered with the PCP

Document the details of the rash:

- Where is it?
- When did it start?
- What has it looked like?
- What does it look like now?
- Is it itchy?
- Is it painful?
- Consider taking a photo.



# Resources



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- [Guidelines for Environmental Infection Control in Health-Care Facilities \(cdc.gov\)](#)
- [Monkeypox \(ca.gov\)](#)
- [Information For Healthcare Professionals | Monkeypox | Poxvirus | CDC](#)
- [Monkeypox 2022 \(MPX\) Factsheet \(cdc.gov\)](#)
- [San Diego County Public Health MPX Webpage](#)

# Q & A on Featured Topic



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# Poll Question

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- **Poll 3: Which topic would you MOST like to see featured in an upcoming IP Collaborative Meeting?**
  - *Candida auris*
  - Enhanced Standard Precautions
  - Antibiotic stewardship
  - Carbapenem resistant/carbapenemase producing organisms (CRE/CRO/CPOs)
  - Cohorting principles
  - Staff engagement and compliance

# Announcement

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- **HAI Program website**
- **County LTC Sector COVID Monthly Telebriefing:**
  - 4th Thursday @ 2P-3P
  - Next briefing is on 10/27/2022
- **CDPH Healthcare Facility Call:**
  - Bi-weekly Tuesday @ 8AM-9AM
  - Next call is on 10/4/2022
- **CDPH/HSAG SNF IP Webinars:**
  - 2nd/4th Wednesday @ 3PM-4PM
  - Next webinar is on 9/28/2022

# Announcement

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- The **Health Care Provider Status (HCPS) Team** is collecting contact information from facilities for **Blackboard Connect** use. If you have not already received a link to provide this information for your facility, please email the HCPS team at [COVID-HealthcareStatus@sdcounty.ca.gov](mailto:COVID-HealthcareStatus@sdcounty.ca.gov).

# Next Collaborative

**October 26, 2022**

**11:00 am – 12:00 PM**

**ZOOM**

**Featured Topic: COVID-19**

**Submit questions and scenarios about COVID-19**

**or**

**Feedback about today's collaborative meeting**

**to:**

**[PHS.HAI.HHSA@sdcounty.ca.gov](mailto:PHS.HAI.HHSA@sdcounty.ca.gov)**



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# THANK YOU!

---

[phs.hai.hhsa@sdcounty.ca.gov](mailto:phs.hai.hhsa@sdcounty.ca.gov)

