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## TECHNICAL BULLETIN

DATE: June 5, 2023

TOPIC: Updated COVID-19 Infection Prevention and Control Guidance for Health Care Personnel

CONTACT: Bureau of Health Care Quality and Compliance Infection Prevention and Control Team

TO: All licensed health care facilities

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### UPDATED COVID-19 INFECTION PREVENTION AND CONTROL GUIDANCE FOR HEALTH CARE PERSONNEL

On May 8, 2023, the Centers for Disease Control and Prevention (CDC) and Centers for Medicare and Medicaid Services (CMS) updated their infection control guidance for the health care setting surrounding face coverings and testing. The purpose of this technical bulletin is to supply state-licensed health care facilities, including those that are CMS certified, with access to the updated CDC and CMS guidance.

#### Centers for Medicare and Medicaid Services-Certified Health Care Facilities

Facilities such as nursing homes, hospitals, ambulatory surgical centers, hospice, home health agencies and other facilities that are CMS-certified must continue to follow CMS infection prevention and control regulatory requirements, including the requirement to adhere to nationally recognized infection prevention and control guidelines, as indicated. The nationally recognized infection prevention and control guidelines would be those applicable to the facility setting, for example, [the Centers for Disease Control and Prevention \(CDC\) Infection Control: Severe acute respiratory syndrome coronavirus 2 \(SARS-CoV-2\) | CDC](#) would be an acceptable guideline for facilities to follow.

With the end of the public health emergency on May 11, 2023, CDC will no longer receive data needed to publish Community Transmission metrics for SARS-CoV-2. These metrics informed CDC's recommendations for broader use of source control in health care facilities to allow for earlier intervention, to avoid strain on the health care system, and to better protect individuals seeking care in these settings.

- As described in CDC's Core infection prevention and control (IPC) Practices, source control remains an important intervention during periods of higher respiratory virus transmission. In the absence of the Community Transmission metrics, health care facilities should identify their local metrics that could reflect increasing community respiratory viral activity to determine when broader use of source control in the facility might be warranted (see appendix in CDC's [Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 \(COVID-19\) Pandemic](#)). Each facility should perform a risk assessment that includes the type of residents/patients being cared for, what opportunities for exposure exist within the facility, and how well the facility is prepared to handle such risks. This ensures the safety of the residents/patients and staff by implementing appropriate and timely mitigation measures to address the identified risks. In addition, facilities should be aware of the U.S. Department of Labor,

Occupational Safety and Health Administration (OSHA), standards for use of personal protective equipment (PPE) to keep employees working in health care facilities — including those working with communicable diseases — safe.

### Federal visitation guidelines

CMS-certified facilities are required to follow CMS federal regulations regarding patient/resident rights concerning visitation.

CMS guidance on visitation and face coverings for nursing homes can be found in [QSO20-39-NH](#).

### State-licensed facilities

State-licensed facilities are required to follow all applicable state laws and regulations regarding infection prevention and control and regulations related to patient/resident safety, including the use of masks and respirators where indicated. Each facility is responsible for understanding the laws and regulations that apply to them.

See updated CDC guidance: [Infection Control: Severe acute respiratory syndrome coronavirus 2 \(SARS-CoV-2\) | CDC](#).

### State visitation guidelines

NRS 449A.106(9) notes that every patient of a medical facility or facility for the dependent has the right to receive, within reasonable restrictions as to time and place, visitors of the patient's choosing, including (without limitation) friends and members of the patient's family.

Visitations in all facility types should follow the core principles of COVID-19 infection prevention to reduce the risk of COVID-19 and protect residents/patients and staff, including but not limited to, the use of masks, hand hygiene, cleaning and disinfection, physical distancing and appropriate staff use of PPE.

Information on infection control practices in these settings can be found at the following links:

- <https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html>
- <https://www.leg.state.nv.us/NRS/NRS-439.html#NRS439Sec860>

### Questions

For updated guidance, review [the Division of Public and Behavioral Health Technical Bulletin](#) web page regularly. The Bureau of Health Care Quality and Compliance (HCQC) infection prevention and control team is available for consultations and risk assessment; onsite technical support; outbreak support; and questions about infection prevention and control issues. The team has also [posted online general resources for health facilities](#). Email [hcqcipteam@health.nv.gov](mailto:hcqcipteam@health.nv.gov) regarding any of the services listed above; for questions regarding this technical bulletin; or other infection prevention and control issues.



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