



## ORDER OF THE HEALTH OFFICER FOR CONTROL OF COVID-19 Prevention of COVID-19 Transmission in Skilled Nursing Facilities

Revised Order Issued: **January 5, 2022**  
Effective as of 12:01am on **Friday, January 07, 2022**

This Order supersedes the **December 3, 2021** Prevention of COVID-19 Transmission in Licensed Congregate Health Facilities Order, as it relates to Skilled Nursing Facilities.  
This Order is in effect until rescinded by the Health Officer.

### Recent Updates (Changes highlighted in yellow):

#### 1/5/2022:

Due to rapidly increasing cases and hospitalizations that are impacting skilled nursing facilities, Public Health is enacting further measures to protect the residents and staff in this setting following the [California Department of Public Health State Public Health Officer Order issued on 12/31/2021 on "Requirements for Visitors in Acute Health Care and Long-Term Care Settings."](#) Skilled nursing facilities are now required to verify a negative SARS-CoV-2 test within 48 hours for a PCR test or within 24 hours for an antigen test for indoor and outdoor visits for all visitors regardless of their vaccination and booster status. Additionally, for indoor visits, visitors must show proof of their fully vaccinated status and, if booster-eligible, receipt of a booster dose.

#### 12/3/2021:

Due to the introduction of the newly identified Omicron variant of the SARS-CoV-2 virus in Los Angeles County, California and other states and until more information is known about this variant's transmissibility, its impact on vaccine effectiveness and breakthrough infections, including in individuals who have received booster doses, whether it is associated with more severe disease, and whether it is susceptible to currently available COVID-19 treatments, additional infection control precautions are indicated and necessary for Skilled Nursing Facilities because residents are at heightened risk for poor health outcomes should transmission occur within the facility. Beginning December 15, 2021 through January 31, 2022, all Skilled Nursing Facility residents, employees, and contractors, regardless of vaccination status, who may encounter residents must test for COVID-19 infection on a once weekly basis. In addition, to obtain entry into a Skilled Nursing Facility, all visitors, regardless of vaccinations status, must provide proof of either:

- A negative PCR test taken within 72 hours prior to entry, OR
- A negative Antigen test taken within 24 hours prior to entry.
- Antigen test kits will be made available to Skilled Nursing Facilities on an as needed basis.

Those who show documentation of recovery from COVID-19 within the last 90 days (i.e., a positive COVID-19 viral test result on a sample taken no more than 90 days before) are exempt from weekly testing and from showing proof of a negative viral test for entry.

**Summary:** During a State of Emergency, California law empowers the County of Los Angeles Health Officer (Health Officer) to take necessary protective measures to protect the public from a public health hazard. The spread of COVID-19 remains a substantial danger to the health of the public and to patients/residents in licensed skilled nursing facilities (SNFs) in Los Angeles County.

Infection control, regular testing of residents and employees, screening testing for all visitors and

**COUNTY OF LOS ANGELES DEPARTMENT OF PUBLIC HEALTH**  
**ORDER OF THE HEALTH OFFICER**



social (physical) distancing measures are needed to stem or slow the spread of COVID-19 and decrease the risk of transmission to vulnerable patients/residents in high-risk health care settings. Accordingly, the Health Officer hereby requires all licensed skilled nursing facilities (“Facility”), operating within the Los Angeles County Public Health Jurisdiction, to comply with all measures in this Order. The required measures are intended to reduce the transmission of COVID-19 in these facilities and to protect vulnerable residents, as well as personnel.

This Order is effective immediately and will remain in effect until rescinded, superseded, or amended in writing by the Health Officer.

This Order continues to be based upon scientific evidence and updated best practices known to protect patients, personnel, and the public from the avoidable risk of serious illness and death resulting from COVID-19, as well as protect the Health Care system from a surge of cases. The required actions are consistent with guidance from the Centers for Disease Control and Prevention (“CDC”), the U.S. Centers for Medicare & Medicaid Services (“CMS”), the California Department of Public Health (“CDPH”), and the Los Angeles County Department of Public Health (“LAC DPH”).

Compliance with this Order is required because the County Health Officer has determined that:

- There continues to be substantial community transmission of COVID-19 in Los Angeles County, which also continues to present a significant risk of harm to the health of residents, with the threat of the newly circulating Omicron variant of the SARS-CoV-2 virus.
- Until more information is known about the Omicron variant’s transmissibility, its impact on vaccine effectiveness and breakthrough infections, including in individuals who have received booster doses, whether it is associated with more severe disease, and whether it is susceptible to currently available COVID-19 treatments, it is prudent to implement additional safety measures.
- The communal nature of SNFs, and the population served (generally older adults often with underlying medical conditions) put those living in SNFs at increased risk of infection and severe illness from COVID-19 if infected.
- Social (physical) distancing measures alone may not be effective in SNFs due to the concentration of individuals and the nature of the services provided to them.
- Due to the current rates of community transmission of COVID-19 within Los Angeles County, visitors to SNFs and staff may be unknowingly infected with COVID-19 (i.e., are asymptomatic or pre-symptomatic) and unknowingly transmit the virus to patients/residents or staff. Limiting non-essential contact and prohibiting access from individuals with fever or respiratory symptoms and individuals who have been in contact with people who have COVID-19 reduces the chance for exposure to COVID-19 for vulnerable patients/residents.
- In addition, influenza viruses circulate beginning in the Fall and through the Spring of the following year. Influenza can cause symptoms similar to COVID-19 and causes hundreds of deaths among Los Angeles County residents annually. Mitigating influenza transmission and morbidity will facilitate improved control of COVID-19 in SNFs.
- Not adhering to the measures required by this Order will likely impair efforts to mitigate the spread of COVID-19 within the Facility and within the County and State.

UNDER THE AUTHORITY OF CALIFORNIA HEALTH AND SAFETY CODE SECTIONS  
101040, 101085, AND 120175, THE HEALTH OFFICER ORDERS  
THE FOLLOWING FOR ALL LICENSED SKILLED NURSING FACILITIES,  
IN THE LOS ANGELES COUNTY PUBLIC HEALTH JURISDICTION:

**1. Entry and Access to the Facility**

a. The Facility can only allow entry and access to staff, contracted healthcare professionals, service providers, first responders including emergency service personnel, essential visitors, and other permitted visitors, as per latest California Department of Public Health (CDPH) All Facilities Letter (AFL), posted at: <https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-22.aspx> and reflected in LAC DPH SNF Guidance: <http://ph.lacounty.gov/acd/ncorona2019/healthfacilities/snf/prevention>.

b. The Facility must require all persons to undergo an entry screening as described in the LAC DPH SNF Guidance: <http://publichealth.lacounty.gov/acd/ncorona2019/healthfacilities/snf/prevention/#preventi> onpractices. This includes all staff, residents, and essential and non-essential (general) visitors. Anyone with a fever, symptoms of COVID-19, or close contact with a confirmed case in the past 14 days is prohibited from entering the Facility.

The only exception to entry screening is Emergency Medical Service (EMS) workers.

c. Between December 15, 2021 and January 31, 2022, Facilities shall ensure that all Facility residents, employees, contracted healthcare professionals including consultants and services providers, and other staff, regardless of their COVID-19 vaccination or booster status, who may encounter residents shall undergo once weekly COVID-19 testing to screen for infection. Those who show documentation of recovery from COVID-19 within the last 90 days (i.e., a positive COVID-19 viral test result on a sample taken no more than 90 days before) are exempt from this requirement.

d. For purposes of this Order: "Premises" includes, without limitation, the buildings, grounds, facilities, driveways, parking areas, and public spaces within the legal boundaries of the Facility.

**2. Follow LAC DPH Guidance regarding Staff Return to Work**

a. All healthcare workers must follow the LAC DPH Guidance for Monitoring Healthcare Personnel: <http://ph.lacounty.gov/acd/ncorona2019/healthfacilities/HCPMonitoring>.

**3. Follow LAC DPH Guidance and COVID-19 Testing Requirements regarding Visitation**

a. Visitation should only be resumed and conducted in compliance with LAC DPH Guidance: <http://ph.lacounty.gov/acd/ncorona2019/snf.htm#groupactivities>

b. Between January 7, 2022 and February 7, 2022, prior to visitation at a Facility for both indoor and outdoor visits, all visitors who are two years of age or older, regardless of vaccination or booster status, must provide the Facility with their proof of the following:

- i. A negative PCR test result taken within 48 hours prior to entry, OR
- ii. A negative FDA-approved Antigen test result taken within 24 hours prior to entry,
- iii. Additionally, for indoor visits, all visitors who are five years of age or older, must

provide the Facility with their proof of all recommended doses including the primary series and, if booster-eligible, a booster dose per **Table A** in the [California Department of Public Health's State Public Health Officer Order on "Requirements for Visitors in Acute Health Care and Long-Term Care Settings" issued 12/31/2021](#).

- iv. Visitors who visit for multiple consecutive days are required to show proof of a negative FDA-approved SARS-CoV-2 test at least every third day (e.g., test on day 1, day 4, day 7, and so on).
- c. Visitors who have not undergone testing for COVID-19 prior to the visit should not be refused visitation at the Facility and should be provided an FDA-approved antigen test, if possible, at the Facility on the day of the visit prior to beginning the visit.
- d. Visitors who show documentation of recovery from COVID-19 within the last 90 days (i.e., a positive COVID-19 viral test result on a sample taken no more than 90 days before) are exempt from this requirement.
- e. Visitors who are 18 years of age or older must present photo identification with their proof of a negative test result.
- f. Emergency medical services personnel and essential visitors (as defined in CDPH AFL 20-22 <https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-22.aspx>) are exempt from the vaccination verification and testing requirements above and cannot be restricted access to any zone within the Facility.
- g. Facilities must have a plan in place for tracking verified visitor vaccination status and documentation of a negative FDA-approved SARS-CoV-2 test. These records must be made available, upon, request, to Public Health for purposes of case investigation.

#### **4. Follow LAC DPH Guidance regarding Communal Dining and Group Activities**

The Facility should only resume and conduct communal dining and group activities in compliance with LAC DPH Guidance:

<http://ph.lacounty.gov/acd/ncorona2019/snf.htm#groupactivities>.

#### **5. Maintain Separate Areas and Staff for Patients with or Suspected of Having COVID-19**

- a. The Facility shall establish separate areas within the Facility for residents/patients who have tested positive for COVID-19 and for those who are displaying symptoms associated with COVID-19, as described in the "Cohorting" section of the LAC DPH SNF Guidance: <http://ph.lacounty.gov/acd/ncorona2019/snf.htm#cohorting>.

#### **6. All Facility Staff and Residents Must Wear Appropriate Personal Protective Equipment (PPE)**

- a. The Facility shall require all staff to wear appropriate PPE as described in the LAC DPH SNF Guidance: <http://ph.lacounty.gov/acd/ncorona2019/snf.htm#InfectionPrevention>.
- b. The Facility is required to provide each resident daily with a clean non-medical face covering. Please refer to "Universal Source Control" section of LAC DPH SNF Guidance: <http://ph.lacounty.gov/acd/ncorona2019/snf.htm#InfectionPrevention>.



**7. Follow Recommended Infection Control Guidelines**

- a. The Facility must follow all infection control guidance in the “Infection Prevention and Control Considerations” section of the LAC DPH SNF Guidance: <http://ph.lacounty.gov/acd/ncorona2019/snf.htm#InfectionPrevention>.

**8. Review and Comply with Recommended Interfacility Transfer Rules**

- a. The Facility shall review and comply with State and local guidelines regarding the transfer of patients to a licensed acute care hospital or another congregate health care facility and regarding the return of patients to the Facility from a licensed acute care hospital or another congregate health care facility, including LAC DPH COVID-19 Interfacility Transfer Rules: <http://ph.lacounty.gov/acd/NCorona2019/InterfacilityTransferRules.htm>. LAC DPH will make final determinations regarding a Facility's inability to comply with State and LAC DPH guidance regarding the transfer and return of patients to the Facility.

**9. Take Any Additional Actions, as Directed by LAC DPH to Prevent and Mitigate Outbreaks**

- a. These additional actions may include, but are not limited to, testing of patients/residents and staff. This may include individuals with and without symptoms, as requested or per guidance provided by LAC DPH and the California Department of Public Health. All testing results should be submitted to LAC DPH within 24 hours of receipt.

**10. Take the Following Actions to Mitigate Influenza Introduction and Transmission**

- a. Offer influenza immunization to all Facility residents.
- b. Maintain a record of influenza immunization status of residents; this should document the date a person was immunized or the reason for declination.
- c. Maintain a record of influenza immunization status of staff; this should document the date the staff was immunized.
- d. Provide information on influenza vaccination status of residents and staff to LAC DPH if requested.
- e. Encourage all allowed, non-essential persons to get immunized for the current influenza season at least two weeks prior visiting the Facility. This will help decrease the risk of influenza transmission to residents and staff within the Facility.
- f. For influenza immunization information, toolkits, and locations, please visit: <http://ph.lacounty.gov/ip/influenza.htm> and <https://vaccinefinder.org/find-vaccine>.

**11. Report ALL Facility Staff and Residents with Suspected/Confirmed COVID-19 Illnesses and Deaths to LAC DPH**

- a. The Facility shall report all confirmed or suspected COVID-19 cases and deaths within 24 hours to LAC DPH. Find more information below and on the Coronavirus Disease 2019: Provider and Laboratory Reporting Guidelines for COVID-19 accessible here: <http://publichealth.lacounty.gov/acd/ncorona2019/reporting.htm#reporting>
  - i. Healthcare providers must report all patients with a positive PCR/NAAT or antigen test for COVID-19 within one day. Report positive test results via the web-based [Medical Provider COVID-19 Report form](#). If you are unable to submit a web-based report, please complete a [PDF version of the Medical Provider COVID-19 Report form](#) and submit by Email, using secure transmission, to



[COVID19@ph.lacounty.gov](mailto:COVID19@ph.lacounty.gov)—or—Fax 310-605-4274

- ii. COVID-19 associated deaths must be reported by healthcare providers within 24 hours by: Completing the [Novel Coronavirus Death Report Web form](#)—or—Completing the [Novel Coronavirus Death Report PDF form](#) and send via secure by email to [COVIDdeath@ph.lacounty.gov](mailto:COVIDdeath@ph.lacounty.gov)—or—Telephone 888-397-3993 or 213-240-7821.

## **12. Offer, Track and Report COVID-19 Immunizations, as Directed by LAC DPH**

- a. The Facility must offer COVID-19 immunization as the vaccine is made available to the facility to all residents and Facility staff including directly employed staff and staff not directly employed by the Facility, paid and non-paid, who regularly enter Facility premises one time per week (7 days) or more.
  - i. For residents who have been discharged or transferred to another facility by the time the second dose is due, the Facility that administered the first dose should ensure follow-up to offer the second dose.
  - ii. For staff who no longer regularly work at or visit the Facility that administered the first dose by the time the second dose is due, the same Facility should ensure follow-up to offer the second dose if requested.
- b. The Facility must maintain a record of COVID-19 immunization status of residents; for residents who were immunized at the Facility, this record should document the date(s) the resident was immunized, the specific immunization administered, and other information as specified by the State.
- c. The Facility must maintain a record of COVID-19 immunization status of staff; this should document the date(s) the staff member was immunized; for staff members who decline immunization, there must be documentation of a signed declination statement that indicates the reason for declination.
- d. The Facility must provide information on COVID-19 immunization status of residents and staff to LAC DPH, if requested.
- e. For COVID-19 immunization information, toolkits, and locations, please visit:  
<http://ph.lacounty.gov/acd/ncorona2019/vaccine/>

## **13. Follow LAC DPH Requirements for Infection Preventionist Staffing, Infection Prevention and Control Training, and Quality Improvement**

### **a. Infection Preventionist Requirement:**

- i. The Facility's number of full-time Infection Preventionists (IPs) must be adequate to implement an Infection Prevention and Control (IPC) Program as required by [CDPH AFL 20-84](#). Facilities deemed by LAC DPH to have insufficient IPs to meet these requirements will be directed to attain additional IPs.
- ii. At least one full-time facility IP must meet training requirements and carry out functions set forth by [CDPH AFL 20-84](#) and by Assembly Bill (AB) 2644. Additional IP(s) as required above can be persons with approved training and at least one-year full-time experience as an IP.
- iii. These full time IP position(s) can be achieved by dividing responsibilities among



more than one staff member; each staff member must meet the full-time IPC training requirements for sharing the IP position. The Facility must have a documented plan in place on how IPC Program responsibilities are assigned over multiple staff members to meet the 40 hours per week requirement for one full-time IP.

- b. Mandatory Training for Infection Preventionist:** All staff designated as IP must complete an approved Infection Prevention and Control (IPC) training within 90 days of beginning the IP position as a new facility staff or within 30 days of designation to the IP position if previously employed, and annually thereafter. The Facility IP meeting the CDPH AFL 20-84 requirements must complete the approved initial IPC training no later than January 1, 2021. Additional IP(s) must complete approved initial IPC training no later than February 1, 2021.
- c. Mandatory Training for Facility Staff:** All staff directly employed by the Facility, including ancillary staff and non-patient facing staff (including, but not limited to, dietary, environmental services, cleaning, laundry, administration, medical records, etc.) must complete an approved IPC training within 30 days of hire and annually thereafter. All facility staff who has not completed an approved initial IPC training must complete the training no later than February 1, 2021.
- d. Re-training for an Outbreak:** All Facility staff must complete an approved IPC training within 21 days of the outbreak's opening as deemed by LAC DPH, unless Facility staff recently completed another approved IPC training within the past 60 days.
- e. Approved Infection Prevention and Control (IPC) Training:**
  - i. Please refer to the webpage "COVID-19: LAC DPH Guidance & Resources": <http://ph.lacounty.gov/acd/ncorona2019/healthfacilities/snf/> for a list of all approved IPC trainings. Other training programs not listed may be considered on a case-by-case basis and must be first approved by LAC DPH, by contacting [LACSNF@ph.lacounty.gov](mailto:LACSNF@ph.lacounty.gov).
  - ii. After completion of approved training, both the staff member and SNF must retain records of training. The Facility must provide these records for review by LAC DPH, upon request.
- f. Infection Prevention and Control (IPC) Program Quality Improvement:** The Facility must comply with LAC DPH in review and recommendations for improvement of their IPC Program and Quality Assurance Performance and Performance Improvement (QAPI) plan as it relates to IPC both during outbreak settings and non-outbreak settings.

#### 14. Additional Terms

- a.** This Order does not, in any way, restrict: (i) First responder access to the site(s) named in this Order during an emergency or (ii) local, state or federal officers, investigators, or medical or law enforcement personnel from carrying out their lawful duties at the site(s) named in this Order.
- b.** If any subsection, sentence, clause, phrase, or word of this Order or any application of it to any person, structure, gathering, or circumstance is held to be invalid or unconstitutional by a decision of a court of competent jurisdiction, then such decision will not affect the validity of the remaining portions or applications of this Order.
- c.** This Order is issued in accordance with and incorporates by reference, the March 4, 2020

**COUNTY OF LOS ANGELES DEPARTMENT OF PUBLIC HEALTH  
ORDER OF THE HEALTH OFFICER**



Proclamation of a State of Emergency issued by Governor Gavin Newsom; the March 4, 2020 declarations of a local and public health emergency issued by the Los Angeles County Board of Supervisors and Los Angeles County Health Officer, respectively; and guidance issued by the California Department of Public Health, as each of them have been and may be supplemented.

- d. The violation of any provision of this Order constitutes an imminent threat and creates an immediate menace to public health, safety, and welfare. To protect the public's health, the County Health Officer may take additional action(s) for failure to comply with this Order.
- e. Violation of this Order is a misdemeanor punishable by imprisonment, fine or both under California Health and Section Code Section 120275 et seq and Los Angeles County Code Section 11.02.080.

The County Health Officer will continue to monitor the rate of COVID-19 disease spread, the severity of the resulting illnesses and deaths caused, California Department of Public Health and Centers for Disease Control and Prevention recommendations, and the effect of this Order. If needed, this Order may be extended, expanded, or otherwise modified to protect the public's health.

If you have any questions about this Order, please call the Los Angeles County Department of Public Health at (213) 240-7941. Visit the LAC DPH website: <http://ph.lacounty.gov/Coronavirus>, for updated guidance and reference documents related to preventing COVID-19 transmission in skilled nursing facilities.

**IT IS SO ORDERED:**

1/5/2022

---

**Muntu Davis, M.D., M.P.H.**  
Health Officer,  
County of Los Angeles

---

**Date**

**RESOURCES**

- **California Department of Public Health All Facilities Letters:**  
<https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/LNCAFL20.aspx>
- **Los Angeles County Department of Public Health COVID-19 Health Facilities Guidance:**  
<http://ph.lacounty.gov/acd/ncorona2019/snf.htm>