



COVID-19 Chicago Long Term Care Roundtable

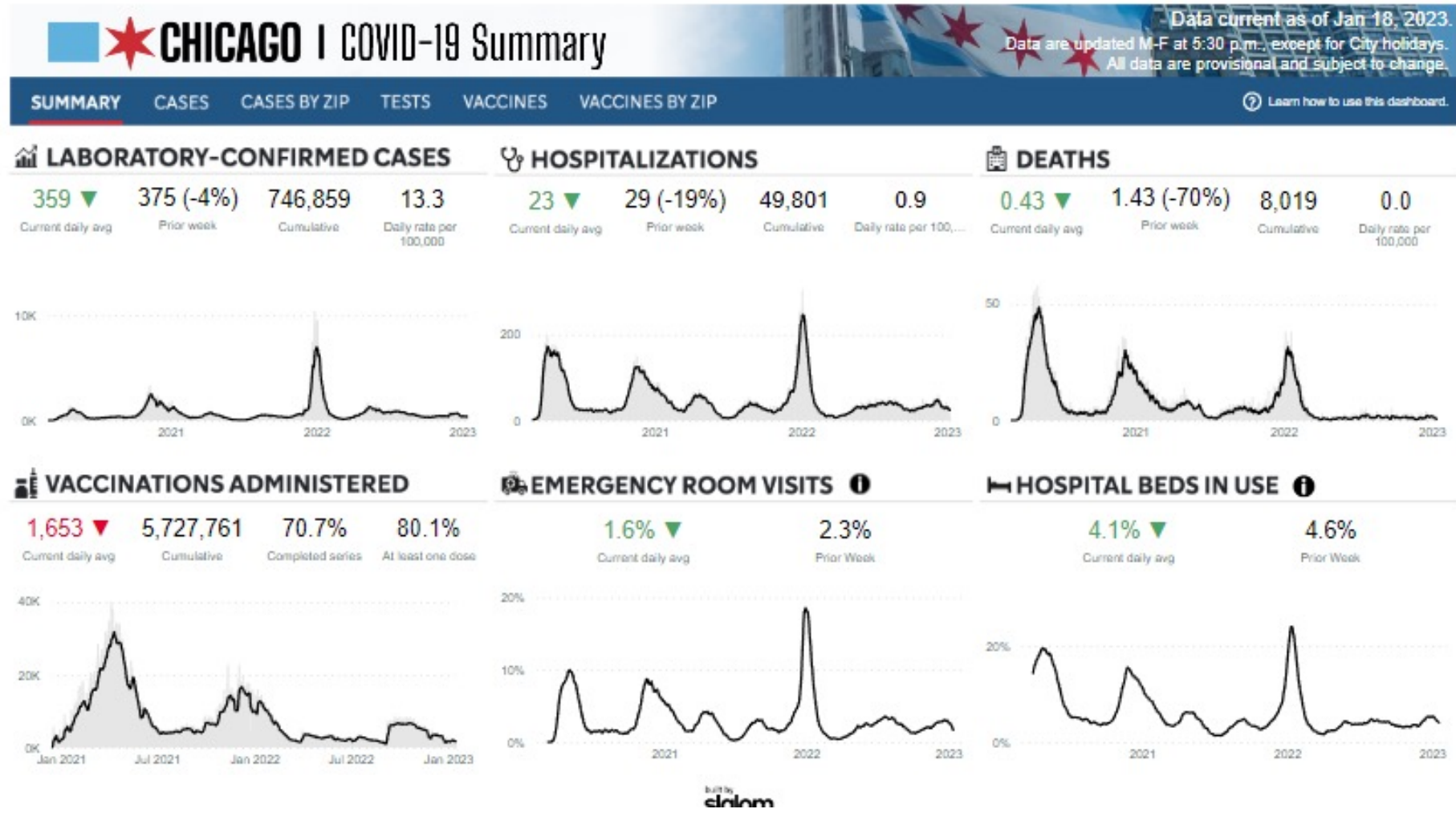
1-19-23



Agenda

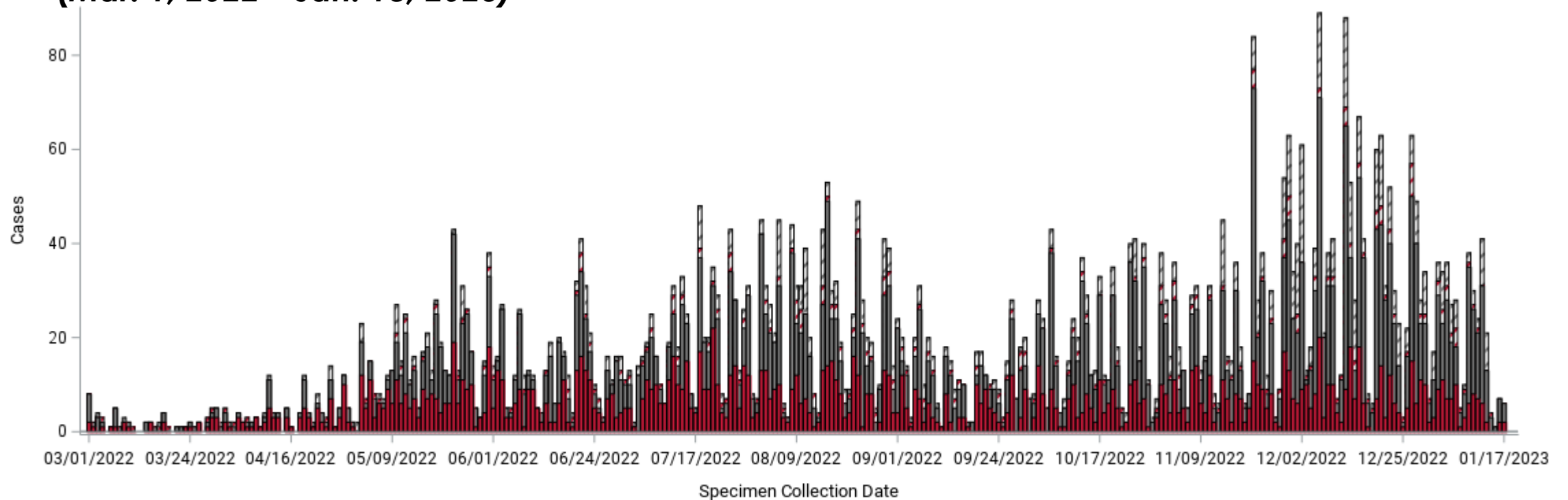
- COVID-19 Epidemiology
- COVID-19 Reminders, Updates, and FAQs
- Influenza Test Distribution
- Invasive Group A Strep 101
- Questions & Answers

Chicago Dashboard



SNF COVID-19 Cases

(Mar. 1, 2022 – Jan. 18, 2023)



Legend:
 / / Not Fully Vaccinated Resident
 / / Not Fully Vaccinated Staff
 ■ Fully Vaccinated Resident
 ■ Fully Vaccinated Staff

Data Sources: INEDSS (Illinois state) and REDCap (facility self report)

A fully vaccinated case occurs when the positive test specimen was collected at least 14 days after the individual completed their COVID vaccination

Fully vaccinated cases may be underestimated due to delayed reporting

**62 (78%) SNFs
have active
outbreaks**

COVID-19 Variant Proportions

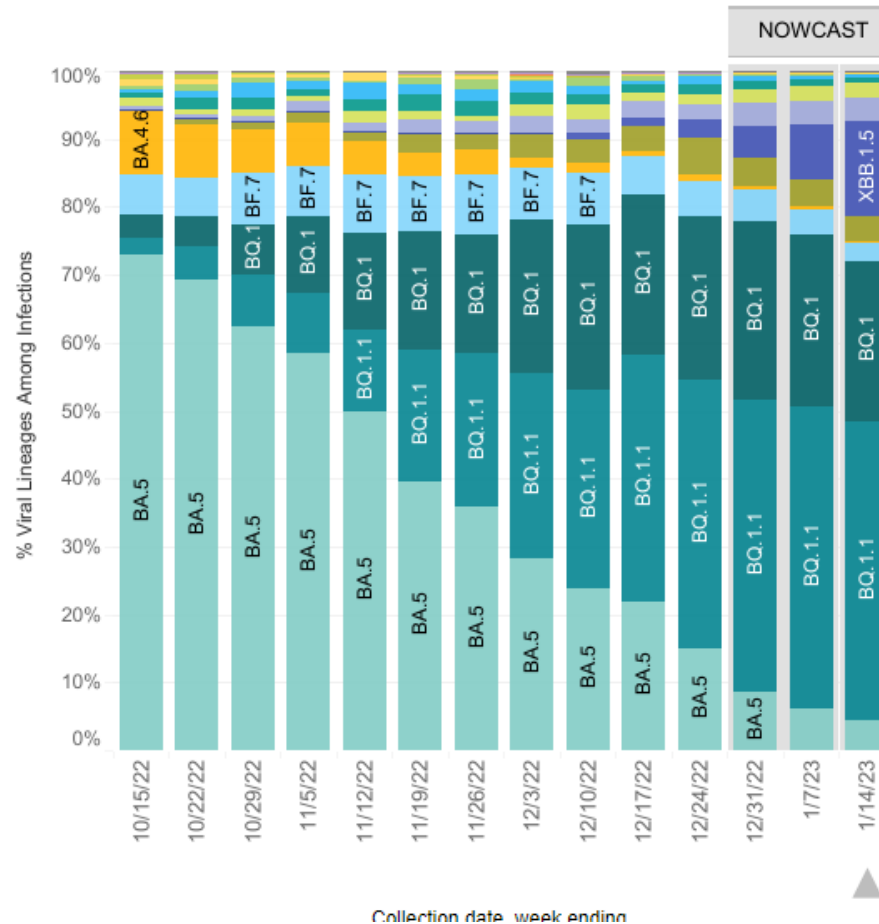


HHS Region 5: 1/8/2023 – 1/14/2023 NOWCAST

HHS Region 5: 10/9/2022 – 1/14/2023

Region 5 - Illinois, Indiana, Michigan, Minnesota, Ohio, and Wisconsin

WHO label	Lineage #	US Class	%Total	95%PI	
Omicron	BQ.1.1	VOC	44.0%	40.2-47.8%	
	BQ.1	VOC	23.4%	21.5-25.4%	
	XBB.1.5	VOC	14.0%	10.3-18.8%	
	BA.5	VOC	4.5%	3.9-5.3%	
	BN.1	VOC	3.6%	2.9-4.6%	
	XBB	VOC	3.5%	2.6-4.6%	
	BF.7	VOC	2.8%	2.3-3.5%	
	BA.2.75	VOC	2.2%	1.6-3.0%	
	BA.5.2.6	VOC	0.8%	0.6-1.1%	
	BF.11	VOC	0.4%	0.3-0.6%	
	BA.2	VOC	0.4%	0.3-0.5%	
	BA.4.6	VOC	0.2%	0.2-0.3%	
	BA.2.75.2	VOC	0.1%	0.1-0.1%	
	BA.4	VOC	0.0%	0.0-0.0%	
	BA.1.1	VOC	0.0%	0.0-0.0%	
	B.1.1.529	VOC	0.0%	0.0-0.0%	
	BA.2.12.1	VOC	0.0%	0.0-0.0%	
Delta	B.1.617.2	VBM	0.0%	0.0-0.0%	
Other	Other*		0.0%	0.0-0.1%	

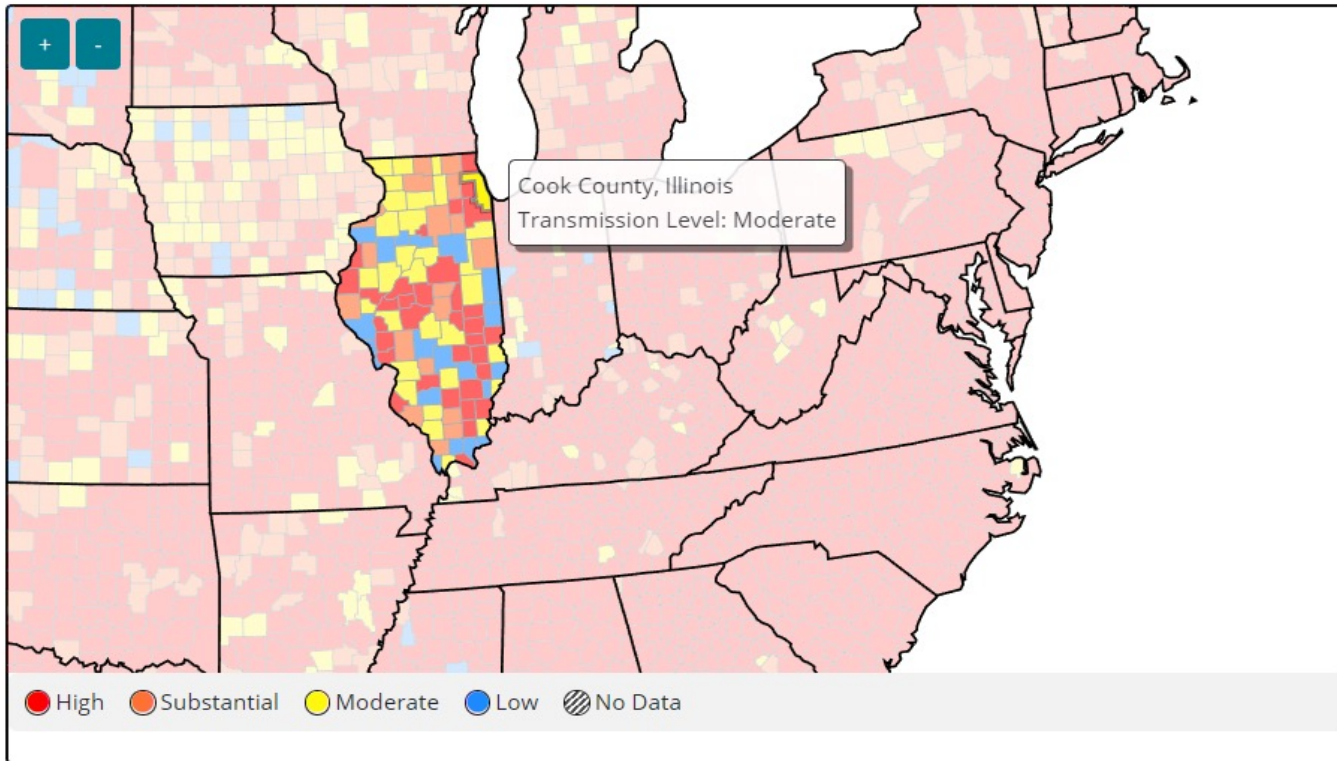


★ Reminder: CDC COVID Data Tracker

Indicator - If the two indicators suggest different transmission levels, the higher level is selected	Low Transmission Blue	Moderate Transmission Yellow	Substantial Transmission Orange	High Transmission Red
Total new cases per 100,000 persons in the past 7 days	0-9.99	10-49.99	50-99.99	≥100
Percentage of NAATs ¹ that are positive during the past 7 days	0-4.99%	5-7.99%	8-9.99%	≥10.0%

Note: Community transmission levels will now be updated weekly

CDC COVID Data Tracker: Cook County



IGNORE

CDC COVID Data Tracker: Cook County



- Data error on CDC website (e.g., it shows 0 cases per 100,000 residents over the last week)
- Wait until data error is fixed to see if Cook County has actually moved into moderate

Data through Wed Jan 11 2023

Total Cases	<10
Weekly Case rate per 100k	0.00
% Change in past week	-100
Total Deaths	
Weekly Death rate per 100k	0.00
% Change in past week	-100

Testing in Cook County, Illinc

Data through Sun Jan 15 2023

% Positivity	4.81
% Change (last 7 days)	-3.31



Chicago Respiratory Virus Surveillance Report

Respiratory Virus Laboratory Surveillance - Current Week and Cumulative *The table below includes respiratory viral PCR tests performed by several hospital laboratories in Chicago as well as two commercial laboratories serving Chicago facilities. Reporting facilities represent nearly half of all acute care hospitals in the city. Data reported include Chicago and non-Chicago residents.*

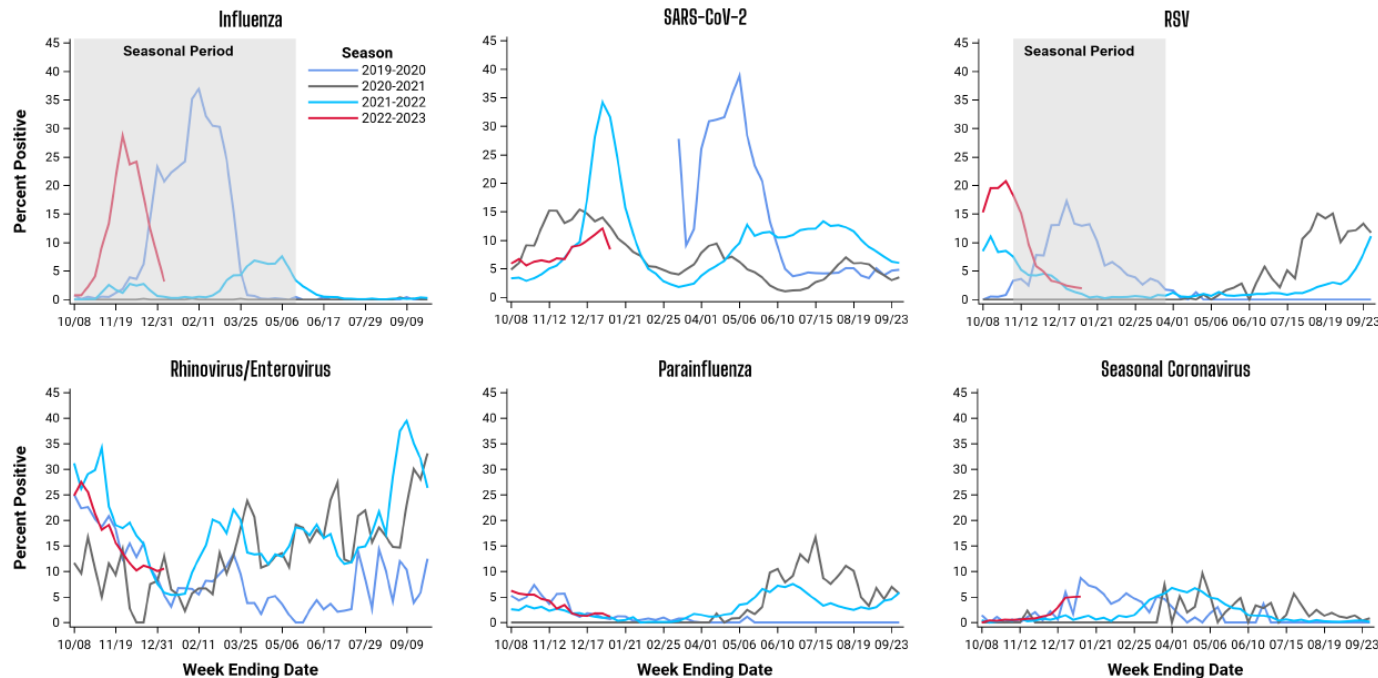
Respiratory Pathogen	Week Ending January 7, 2023		Since October 2, 2022	
	# Tested	% Positive	# Tested	% Positive
Influenza*	4,910	3.2	85,117	14.0
RSV*	3,415	2.0	65,029	9.4
SARS-CoV-2*	7,291	8.4	105,701	7.7
Parainfluenza	1,679	1.1	25,750	3.3
Rhinovirus/Enterovirus	1,052	10.6	18,536	16.2
Adenovirus	1,052	3.1	18,381	3.1
Human Metapneumovirus	1,052	2.6	18,626	0.8
Seasonal Coronaviruses [†]	1,676	5.1	26,209	1.7

*Represents both dualplex and multiplex PCR data. All other data represents only multiplex panels that include the specified pathogens;† Four seasonal coronavirus strains include 229E, NL63, OC43, and HKU1.



Chicago Respiratory Virus Surveillance Report – Seasonal Trends

Respiratory Virus Laboratory Surveillance - Seasonal Trends *These graphs show seasonal trends of selected respiratory virus testing data presented in the previous table. Typical seasonal periods when activity tends to increase for influenza and RSV are indicated by shaded areas. Elevated test positivity outside of typical seasonal periods suggests atypical activity, and increased clinician awareness and testing may be warranted. Yearly data can also be used to compare the timing and intensity of viral activity, although changes in testing patterns also influence yearly trends, and data should be interpreted in the context of other surveillance indicators.*





Reminder: Minimum Routine Staff Testing Frequency

Vaccination Status	Community Transmission Level	Testing Frequency
Not up to date	All	No required routine testing*
Up to date**	All	No required routine testing*

* Unless symptomatic, had a high-risk exposure, or your facility is in outbreak and performing unit/broad-based testing.

** An individual has received all COVID-19 vaccinations for which they are eligible



Reminder: Minimum Routine Resident Testing Frequency

Vaccination Status	Community Transmission Level	Routine Testing Frequency
Not up to date*	All	No required routine testing**
Up to date*	All	No required routine testing**
New and readmissions, regardless of vaccination status	Low, Moderate, Substantial	No required routine testing**
New and readmissions, regardless of vaccination status***	High	Upon admission, 48 hours after 1st negative test, 48 hours after 2nd negative test (i.e., days 0, 2, 4)

*Excluding new/readmissions when community transmission is high

**Unless symptomatic, following a high-risk exposure, or your facility is in outbreak and performing broad-based testing.

***Unless COVID+ within the prior 30 days

★ Staff Booster Posters

- Now available on our website ([link](#))
- Large posters will be distributed to the four facilities whose staff were featured in the campaign within the next few weeks
- Smaller posters will be distributed to all 79 Chicago-based SNFs within the next few months
- Once you receive the posters, please post them in areas frequented by staff (e.g., lobby, staff break room, time clock, nursing stations)
- Add upcoming vaccination clinic information (in a removable format) to the bottom of the poster

Thanks, Rose.

Thank you for keeping the dinner bell ringing during the pandemic. For keeping us healthy and well fed.

Thank you for putting up with us picky eaters. For listening to our off-menu requests.

Thanks for our special Mother's and Father's Day meals. All the preparation and care you put in.

For always serving up a smile. Thank you for your passion for cooking. The one you've had since you were a child.

Thank you most of all for feeding everyone at the nursing home.

**Thanks for choosing
to get boosted.**



Rose J.
Cook

To learn more about protecting yourself and the ones you care for:



Chicago.gov/boost

★ Resident Booster Posters

- English and Spanish versions of the posters will be available on our website soon
- We will distribute hard-copy posters to you in the near future
- Please post the resident posters in areas frequented by residents (e.g., activity rooms, resident hallways, dining rooms, therapy room)
- Consider sharing with family members of residents




NEW, UPDATED COVID-19 VACCINES ARE HERE!
Get Your Bivalent Booster Today!

- The new bivalent vaccine protects you and your loved ones against newer COVID-19 variants
- Previous vaccines only protected you from the original COVID strain
- Older adults and individuals with underlying medical conditions like diabetes or kidney disease are at highest risk for severe COVID-19 illness and death

“ I wanted to protect my family and others. I didn't want to get sick myself. I was trying to stay safe...”
- Nursing Home Resident

CDPH
Chicago Department of Public Health

If you are interested in getting the bivalent vaccine, talk to your Nursing Staff.



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If you are interested in getting the bivalent vaccine, talk to your Nursing Staff.



FAQ: A new admission is about to come from the hospital and tested positive for COVID five days ago. When they get here do we need to isolate them for an additional ten days?

- No, the isolation period would not restart once the resident arrives at the facility. The isolation period starts from the date of positive test or symptom onset, not from date of admission.
- The resident should be placed into isolation immediately upon arrival to the facility for an additional five days (assuming they are fever free without the use of fever-reducing medications and that their symptoms are improving by day 10). Isolation can be discontinued on Day 11.



NHSN: Reporting COVID-19 Vaccination Data

Leirah Jordan, Healthcare Settings



National Healthcare Safety Network (NHSN) Weekly COVID-19 Vaccination Module

- Long-term care facilities are required to track COVID-19 vaccination data for all residents and healthcare personnel (HCP) through the **Weekly COVID-19 Vaccination Module** in NHSN
 - This is used to collect data on summary COVID-19 vaccination counts among residents and staff of all LTCFs
 - Data should be submitted each week on the cumulative number of individuals who have received:
 - partial primary series
 - full primary series
 - additional doses and booster doses of the COVID-19 vaccine
 - up to date COVID-19 vaccine
 - have medical contraindications, declined vaccinations, or unknown vaccination status



Up to Date Vaccination Status: Surveillance Definition for LTC Facilities

New CDC Definition as of September 26, 2022

Individuals are considered up to date with their COVID-19 vaccines for the purpose of NHSN surveillance if they meet (1) of the following criteria:

- Received an updated (bivalent) booster dose or
- Completed their primary series less than 2 months ago

★ COVID-19 Bivalent Booster

- The updated bivalent Moderna and Pfizer-BioNTech boosters were recommended by the CDC on 9/2/2022
- Bivalent boosters include a component of the original virus strain to provide broad protection against COVID-19 and a component of Omicron spike proteins to protect against newer variants that are more transmissible and currently circulating





NHSN COVID-19 Vaccination Reporting Methods

Facilities can submit cumulative weekly COVID-19 Vaccination data to the Weekly COVID-19 Vaccination Modules in three ways:

- 1. Manually into the data entry screens of the COVID-19 Vaccination Module
- 2. .CSV upload into the Weekly COVID-19 Vaccination Module
 - See the recommended .csv formatting guidance for HCP and resident uploads: <https://www.cdc.gov/nhsn/ltc/weekly-covid-vac/index.html>
- 3. **Event- Level COVID-19 Vaccination Forms**
 - This option is most user friendly and preferred.

NHSN Event-Level Vaccination Forms

There are several advantages of using the Event-Level Vaccination Forms to submit weekly NHSN COVID-19 Vaccination Data:

- Simplifies reporting of summary data
- Allows facilities to just manage person-level information
- The NHSN application automatically calculates and displays weekly totals:
 - Once individual level information is added, NHSN calculates the sums and populates data from those forms into the COVID-19 Vaccination Module. Users simply select the "view reporting summary and submit" button to submit their weekly report. No manual calculations are needed.
- Captures changes in individuals' vaccination status over time
- Allows users to record religious exemptions

★ Accessing the Event-Level COVID-19 Vaccination Form

- Must have access to SAMS and be a Level 3 user
- Long-Term Care Dashboard
- Navigate to the COVID-19 tab
- Select Event-Level COVID-19 Vaccination Form
 - Make a selection for HCW or Residents

The screenshot displays the NHSN navigation menu on the left and the main content area on the right. The menu items are: NHSN Home, Alerts, Dashboard, Reporting Plan, Resident, Summary Data, COVID-19, Vaccination Summary, Import/Export, Surveys, Analysis, Users, Facility, and Group. The 'COVID-19' menu item is selected, and its dropdown menu is open, showing options: Dashboard, Pathway Data Reporting, POC Test Result Reporting, COVID-19 Event, COVID-19 Vaccination - HCW, COVID-19 Vaccination - Residents, Event-Level COVID-19 Vaccination Form - HCW, and Event-Level COVID-19 Vaccination Form - Residents. The 'Event-Level COVID-19 Vaccination Form - Residents' option is highlighted in yellow and has a blue arrow pointing to it. The 'Long Term Care Dashboard' and 'Action Items' sections are also visible in the main content area.



How to Enter Vaccination Information for an Individual

- Select "Add Row" to begin entering individuals' COVID-19 Vaccination data:
 1. Enter the required fields and vaccination status for each individual
 2. Click outside of the cell last edited before saving or submitting
 3. Click "Save Row"

NHSN Home

- Alerts
- Dashboard
- Reporting Plan
- Resident
- Summary Data
- COVID-19
- Vaccination Summary
- Import/Export

Event-Level COVID-19 Vaccination Form - Residents

1 + Add Row... View Reporting Summary & Submit... Upload CSV... Export CSV... Export SQL...

2 Resident identifier *	Resident Admit Date *	Resident Discharge Date	Resident First Name *	Resident Last Name *	Dose 1 vaccination date **	Dose 2 date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

3 Save Row Cancel

Required fields marked with * Conditionally required fields marked with **

★ Tips When Entering Information

The form will first ask you to enter an identifier:

- Can be any combination of numbers and letters
- Avoid starting the ID with a 0 (zero)
- May be a facility assigned resident ID number used in other systems to identify the resident, but must be unique to that individual and not reused for another resident in the future, such a room number

The screenshot shows the NHSN Home interface with a sidebar menu on the left containing: Alerts, Dashboard, Reporting Plan, Resident, Summary Data, COVID-19, Vaccination Summary, and Import/Export. The main content area is titled "Event-Level COVID-19 Vaccination Form - Residents". It features a toolbar with buttons for "Add Row...", "View Reporting Summary & Submit...", "Upload CSV...", "Export CSV...", and "Export SQL...". Below the toolbar is a table with the following columns: "Resident identifier *", "Resident Admit Date *", "Resident Discharge Date", "Resident First Name *", "Resident Last Name *", "Dose 1 vaccination date **", and "Dose 2 date **". A red circle with the number 1 is placed over the "Add Row..." button. A red circle with the number 2 is placed over the "Resident identifier" column header. A red circle with the number 3 is placed over the "Save Row" button. At the bottom, a legend indicates "Required fields marked with *" and "Conditionally required fields marked with **".

★ Entering Data Cont.

- Add additional individuals using the **+Add Row** button
- Once a row has been entered, it will turn green
- Note: **Green Row**= modified data that have not yet been submitted to the weekly summary form

Event-Level COVID-19 Vaccination Form - Residents

+ Add Row... View Reporting Summary & Submit... Upload CSV... Export CSV... Export SQL...

Required fields marked with * Conditionally required fields marked with **

	Resident Identifier *	Resident Admit Date *	Resident Discharge Date	Resident First Name *	Resident Last Name *	Dose 1 vaccination date **
+ 1	1	07/01/2018		B	Alpha	12/28/2020
+ 2	2	07/01/2018		C	Bravo	01/22/2021
+ 3	3	08/25/2018		D	Charlie	02/28/2021
+ 4	4	08/26/2018		E	Delta	03/18/2021
+ 5	5	09/02/2019		F	Echo	04/02/2021
+ 6	6	09/05/2019		G	Foxtrot	04/02/2021

★ View the Reporting Summary

- Select the week you want to submit data for
- Review the totals for that week to make sure they are correct

View Reporting Summary & Submit...

COVID-19 Vaccination Cumulative Summary for Long-Term Care Facility Residents	
TRACKING WORKSHEET	
Facility ID#:	11083
Vaccination type:	COVID19
Week of data collection first day (Monday):	3/7/2022 (Changed since submitted using the Tracking Worksheet) ▼
Week of data collection last day (Sunday):	1/10/2022 (Changed since submitted using the Tracking Worksheet) 1/17/2022 (Changed since submitted using the Tracking Worksheet) 1/24/2022 (Changed since submitted using the Tracking Worksheet) 1/31/2022 (Changed since submitted using the Tracking Worksheet) 2/7/2022 (Changed since submitted using the Tracking Worksheet) 2/14/2022 (Changed since submitted using the Tracking Worksheet) 2/21/2022 (Changed since submitted using the Tracking Worksheet) 2/28/2022 (Changed since submitted using the Tracking Worksheet) 3/7/2022 (Changed since submitted using the Tracking Worksheet)
1. *Number of residents staying in the facility	
2. *Cumulative number of residents vaccinated	
2.1. Only dose 1 of Pfizer-BioNTech COVID-19 vaccine	
2.2. Dose 1 of Pfizer-BioNTech COVID-19 vaccine	
2.3. Dose 1 of Moderna COVID-19 vaccine	
2.4. Dose 1 of Janssen COVID-19 vaccine	
2.5. Dose 2 of Moderna COVID-19 vaccine	
2.6. Dose 2 of Pfizer-BioNTech COVID-19 vaccine	
2.7. Dose 2 of Janssen COVID-19 vaccine	
* All Patients (Total)	
13	
here:	
3	
2	
0	
3	
0	

Review Totals Here

★ Save and Submit Data

- After reviewing the totals and confirming they are correct, data is ready to be submitted
- Select "Save and Submit Data" at the bottom of the screen to submit the weekly summary form

The screenshot shows a data entry interface. At the top right, there is a header for a table: "* All Patients (Total)". The table contains several rows of numerical data. Below the table, there are three dropdown menus with labels: "from your facility in the current", "reporting week (examples of)", and another unlabeled one. At the bottom of the screen, there are two buttons: "Save and Submit Data" and "Done". The "Save and Submit Data" button is highlighted with a red rectangular box.

* All Patients (Total)
13
3
2
0
3
0
1
6
3
1
0
0
0
2
4
1
0
0
2

from your facility in the current

reporting week (examples of)

Save and Submit Data Done

★ Reviewing Submitted Data

- Always check the calendar view to confirm that the weekly data has been saved and submitted properly
- The record will turn green in the calendar view, indicating the data has been successfully saved for the reporting week

Summary Data

COVID-19

Vaccination Summary

Import/Export

Surveys

Analysis

Users

Facility

28 February 2022 - 10 April 2022

Record Complete Record Incomplete

Weekly Vaccination Calendar

03/07/2022 (Monday) - 03/13/2022 (Sunday)

COVID-19: HCW

COVID-19: Residents

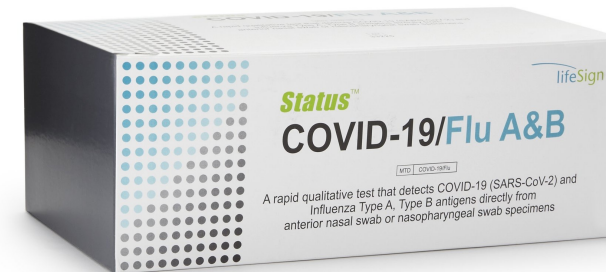


FAQ: I want to do event-level reporting in NHSN but I'm so bogged down with other work that I could use some help getting it set up. Can CDPH assist?

- Yes, if you are interested in getting on-site or virtual assistance, please reach out to Leirah Jordan (Leirah.Jordan@cityofchicago.org) and/or Matthew Mondlock (Matthew.Mondlock@cityofchicago.org)
- Note that we have **limited** bandwidth and, depending on the number of requests received, we may not be able to assist everyone who is interested at this time

★ Rapid Influenza/COVID-19 Tests for LTCFs

- Through available grant funds CDPH's Hospital Preparedness Team is purchasing **rapid COVID-19/Influenza A&B tests to be provided to all Chicago LTCFs, at no cost.**
- The tests will be shipped out directly to your facility via the supplier
- No need to fill out any forms for this effort, all locations will be receiving approximately 1 test kit (25 tests per kit) for every 50 beds at your facility
- Tests have an approximate 15-month shelf life
- **Expecting the shipments to occur around mid February,** pending final purchasing funds approvals.





Healthcare associated invasive group A Streptococcal disease

Long Term Care Roundtable

January 19th, 2023

Karrie-Ann Toews, MPH

★ Objectives

- Brief review of group A Streptococcal disease
- Identification of healthcare exposure
- Collecting additional exposure information
- Facility specific prevention guidance
- Possible additional facility follow-up if > 1 case in past year (outbreak)

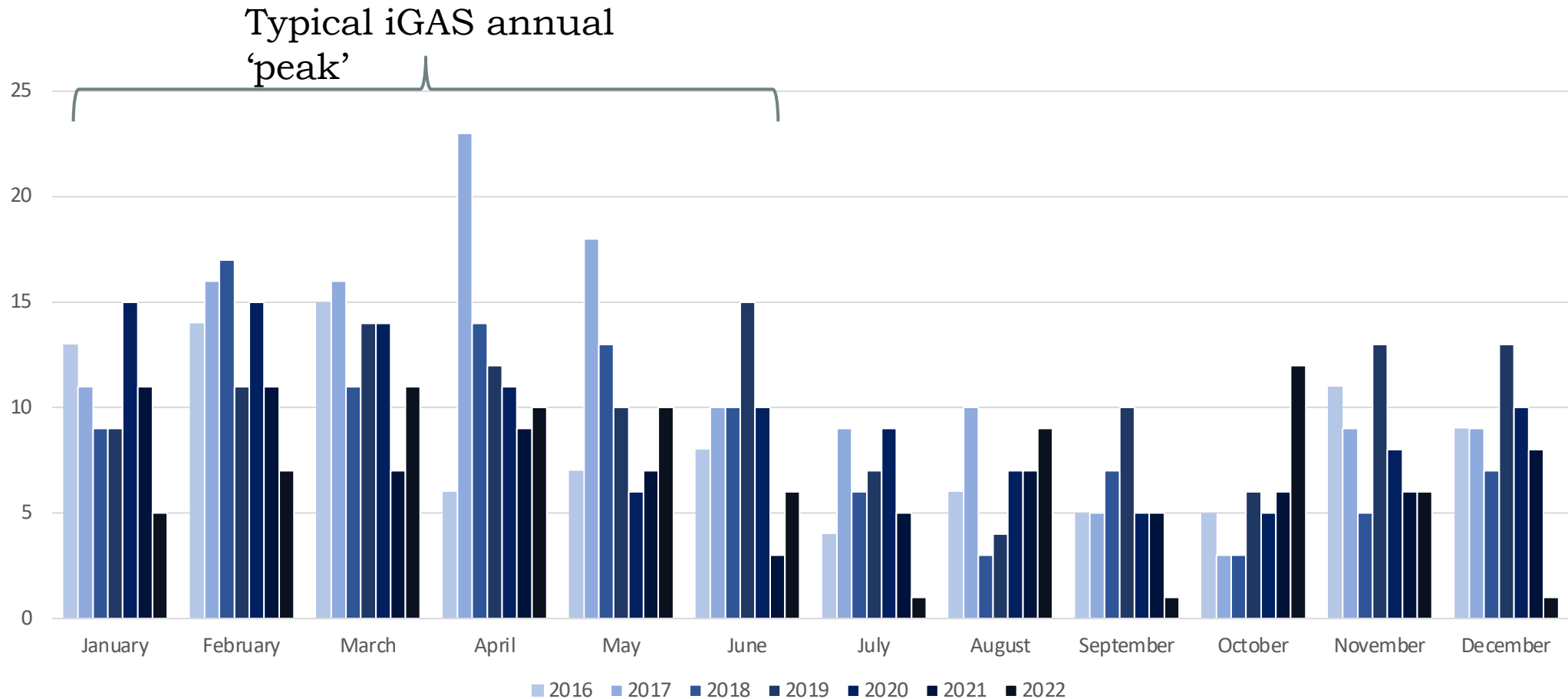


Group A Streptococcus

- Non-invasive disease
 - Strep throat
 - Scarlet fever
 - Impetigo
- Invasive disease- Reportable in IL
 - Cellulitis
 - Sepsis
 - Pneumonia
 - Septic arthritis
 - Streptococcal toxic shock syndrome (STSS) – nationally reportable
 - Necrotizing fasciitis



Invasive group A strep cases, Chicago, 2016-2022



 **Approximately one third of iGAS cases are in persons 65+ years**

Age group	Case count (% annual total)						
	2016	2017	2018	2019	2020	2021	2022
0-17	11 (11)	11 (7)	16 (15)	11 (9)	5 (4)	2 (2)	3 (3)
18-39	18 (17)	29 (21)	19 (18)	26 (21)	20 (17)	31 (36)	20 (23)
40-64	42 (41)	48 (35)	31 (30)	53 (43)	51 (44)	33 (39)	37 (42)
65+	32 (31)	51 (37)	39 (37)	34 (27)	39 (34)	19 (22)	28 (32)
Total	103 (100)	139 (100)	105 (100)	124 (100)	115 (100)	85 (100)	88 (100)

Risk factors for invasive group A Streptococcal disease (iGAS)

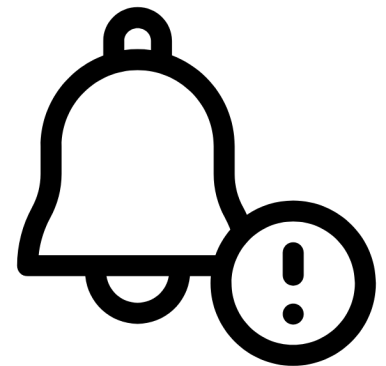
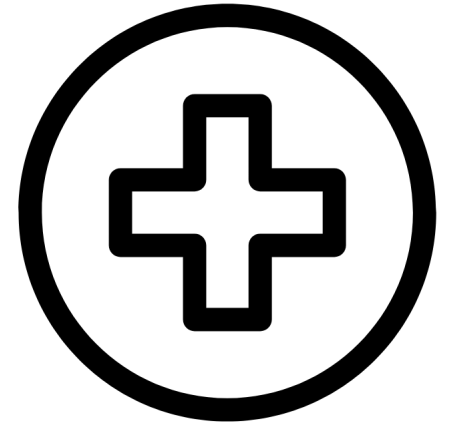
- Diabetes
- Cardiac disease
- Immune system suppression due to disease or medication
- Chronic wounds
- Recent surgery
- Trauma
- Indwelling devices
- History of IVDU
- Exposure to children with sore throats at home
- Recent post-partum





Identification of Healthcare Associated iGAS case

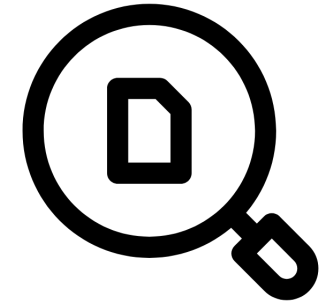
- Case address is a healthcare facility
- Medical records indicate case transferred from other healthcare facility
- Healthcare exposure identified during interview
 - Inpatient/resident, post partum or post-surgery during portion of exposure window



★ Healthcare facility associated iGAS

	# of healthcare facilities w/ associated iGAS cases						
	2016	2017	2018	2019	2020	2021	2022
Single case	7	2	2	4	1	3	5
> 1 case per facility	1 (2 cases)	3 (2 facilities with 3 cases, 1 facility with 2 cases)	1 (3 cases)	2 (2 cases each)	2 (2 cases each)	1 (2 cases)	0
Total	8	5	3	6	3	4	5

★ Healthcare exposure information



Inpatient/resident healthcare (14 days prior to culture collection)

- Room information
- Therapies/appointments
- Roommates
- Mobility
- Wounds/wound care team
- Underlying conditions
- Indwelling lines

Post-partum/post-surgical (14 days prior to culture collection)

- Procedure type/date/location
- Hx of ill HH members
- HCW in OR at time of delivery/surgery
- Type of delivery (vaginal or C-section)
- Lacerations/maternal fever at delivery
- Wounds
- Underlying conditions
- Indwelling lines

HEALTHCARE-ASSOCIATED INVASIVE GROUP A STREPTOCOCCUS
LONG-TERM-CARE-FACILITY-CASE-REPORT-FORM
CHICAGO-DEPARTMENT-OF-PUBLIC-HEALTH

Contact-information-for-person-completing-form: Date-form-completed: _/ _/ _

Name: → Role:

→ Phone-number: → Email: →

PATIENT-INFORMATION

1 Name:
..... Last First

2 Age: Date-of-birth:/...../.....

POSTPARTUM-AND-POSTSURGICAL INVASIVE GROUP A STREPTOCOCCUS
CASE-REPORT-FORM
CHICAGO-DEPARTMENT-OF-PUBLIC-HEALTH

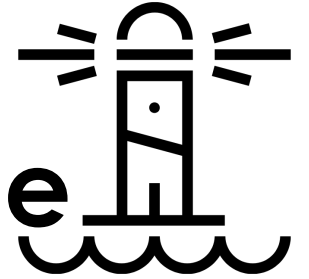
Contact-information-for-person-completing-form: Date-form-completed: _/ _/ _

Name: → Role:

→ Phone-number: → Email: →



★ Distributing facility specific guidance



- One facility associated case
 - Daily active surveillance for infection in all residents
 - Obtain culture of throat, wounds, device site for roommate(s)
 - Obtain throat cultures for any resident with sore throat
 - Reinforce hand hygiene (increase ABHR access)
 - Residents with fever/cough should be isolated
 - Staff members should not report to work ill
 - Symptomatic visitors should not be allowed to see residents
 - If post-partum/post-surgical, throat/wound/vaginal/rectal culture of HCWs in OR

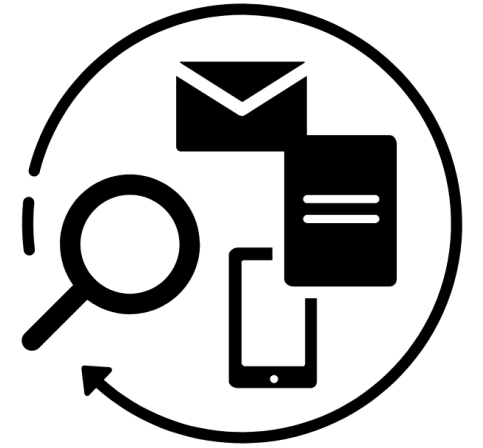
- > 1 facility associated case in past 12 months (outbreak)



Additionally, depending on conditions:

- Site visit (incl. IDPH)- HH, wound care observation
- Throat/wound cultures of residents on common case floors/rooms
- Throat/wound culture of associated HCWs
- HCW cohorting

★ Additional outbreak follow-up



- Lab reports of residents/HCW screening positive
- Capture treatment course and collect rescreening lab results to confirm clearance of carriage
- Recommendations on best practices for wound care
 - Wound carts for every floor
 - Individual packaging of ointments for each resident
- Continue to reinforce best hand hygiene/wound care practice
 - Improved access to alcohol-based hand gel
 - Covert observations on hand hygiene
 - Best practices for avoiding cross contamination when dressing wounds



Thank you!

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Questions & Answers

For additional resources and upcoming events,
please visit the CDPH LTCF HAN page at:
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