



COVID-19 LONG-TERM CARE FACILITY GUIDANCE: Movement of patients between hospitals and Long-Term Care Facilities (Skilled Nursing Facilities (SNFs) and Residential Care Facilities for the Elderly (RCFEs))

Guidance for hospitals receiving a patient from a Long-Term Care Facility (LTCF):

- Hospitals **should test** all patients who reside in or are being discharged to a congregate living facility who are unvaccinated, partially vaccinated, eligible for their COVID-19 booster, but haven't received it, or who had concern for a close contact to COVID-19 case, regardless of vaccination status, **within 72 hours prior to discharge to LTCF**. Patients **do not** need repeat testing if patient has tested positive within the prior 3 months. Results for asymptomatic patients tested in the hospital do not have to be available prior to SNF transfer. SNFs may not require a negative test result prior to accepting a new admission.
- Testing for patients being discharged to a LTCF should be done at a lab with a turn-around time of 48 hours or less. Discharges of residents without compatible symptoms of COVID-19 should not be delayed, if results are pending, as patient is to remain in quarantine upon arrival at facility.
- **Alert Contra Costa Public Health Department: email: cocohelp@cchealth.org** 7 days a week or call (925) 313-6740, 8am-4:30pm Monday – Friday to inform them about a confirmed COVID-19 positive patient that resides in a long-term care facility or a residential care facility.
 - Public Health will contact the facility to assess the situation.

Guidance for hospitals discharging a patient to a Long-Term Care Facility (LTCF):

- For unvaccinated, partially vaccinated patients, patients who are eligible for their COVID-19 booster, but haven't received it, or patients with a COVID-19 close contact with planned or anticipated discharge to LTCF who have not had a negative COVID-19 test within the past 72 hours:
 - Hospitals should retest patient for COVID-19.
 - Once the test result is available, discharge planning should follow the guidance below, based on the test result.
 - Discharges of residents without compatible symptoms of COVID-19 should not be delayed, if results are pending, as patient is to remain in quarantine upon arrival at facility.
- For patients who had tested **positive** for COVID-19, regardless of vaccination or booster status:
 - Hospitalized residents that tested positive for COVID-19 and meet criteria for discontinuation of isolation do not need any further testing for 3 months and do not require any quarantine upon SNF admission or readmission.

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- If the patient is still requiring isolation/transmission-based precautions:
 - Patients should NOT be discharged or readmitted to a **RCFE** if they cannot be maintained isolated in their room with appropriate transmission-based isolation precautions in place and if they do not have appropriate clinical monitoring capacity for the patient's status. Discharging hospitals should review the facilities isolation plan to ensure the patient can safely isolate at the facility.
 - Considerations for if a patient can isolate safely in the RCFE:
 - The patient is able to isolate in their room alone (ie doesn't have roommates) for their full isolation period with no concerns or problems with wandering /inability to keep them in the room.
 - The patient does not require caregiver(s) or they have dedicated caregiver(s) who work with COVID positive residents only wearing appropriate PPE. These staff do not work with other residents who are not COVID positive. Additionally, the staff working with COVID positive residents do not interact with other staff in the facility who work with non-COVID positive residents.
 - The facility has the staff and ability to appropriately monitor the COVID+ resident closely.
 - If the patient cannot isolate safely within the RCFE or they need higher level of monitoring due to their COVID status, discharges should be made to a SNF or Alternate Care Site (ACS), if appropriate for their care level, that is prepared to monitor and care for the patient until they are recovered and no longer require monitoring for COVID-19 infection or transmission-based precautions.
 - Patient may be discharged to a **SNF**.
 - Hospitals should review the patients isolation plan at the facility and ensure patient can safely isolate in a dedicated COVID unit with dedicated staff. Patients should be discharged to a COVID + wing where they can be cohorted and isolated appropriately.
 - Patients may return to their prior SNF bed without public health notification if they were previous residents of the facility and appropriate precautions are in place for the readmission. Facilities should be instructed to notify their county case investigator of these readmissions.
- If a facility (a SNF or RCFE) states they can isolate the patient safely within the facility, hospitals do not need approval for these discharges but should inform public health of the planned discharge to facilities so Public Health is aware of the COVID positive resident going to the facility and can follow up with the facility, as appropriate. Notifications to Public Health can be done by a email (preferred method) cocohelp@cchealth.org 7 days a week or call the Public Health Department (925) 313-6740; Monday-Friday, 8am-4:30pm .



- Information you will need to include when communicating these discharges:
 - Patient name and DOB
 - Symptoms onset date and test date
 - End date for clearance-based precautions,
 - Discharging hospital
 - Accepting facility name and address,
 - Accepting Facility contact information
 - If you have questions or concerns regarding discharges of COVID positive patients needing continued transmission-based precautions, contact the Public Health Department (925) 313-6740; Monday-Friday, 8am-4:30pm or email cocohelp@cchealth.org 7 days a week.
 - For patients with a hospital stay who test **negative** for COVID-19 or have pending lab results without compatible symptoms of COVID-19 maybe discharged to SNF or RCFE.
 - If the LTCF is **currently experiencing an outbreak** or closed to new admissions due to Public Health Monitoring patients/residents, patients/residents, including known positives who were in the facility prior to hospital admissions, may return to their prior SNF or RCFE bed. Facilities should be instructed to notify their county case investigator of these readmissions. Note: No Health Department notification is needed for transfers between hospitals.

Long term care facilities (LTCF) should accept the following types of patients:

- Patients who tested **negative** for COVID-19 or patients with pending results who did not have compatible symptoms of COVID-19. Note: If the hospital does not test the patient within 72 hours prior to transfer, the LTCF should test patients upon admission or readmission if unvaccinated, partially vaccinated, or eligible for their COVID-19 booster, but haven't received it:
 - **Readmissions** after stay at an outside facility **do not need to be placed in quarantine if they are up-to-date on their COVID-19 vaccine** (fully vaccinated and received their booster when eligible or fully vaccinated but not eligible for a COVID-19 booster), unless they were at a facility with suspected or confirmed COVID-19 transmission, or there was concern for COVID exposure at facility. If concerns exist, residents should be tested and quarantined according to guidance for new admits below. Residents who are unvaccinated, partially vaccinated, or eligible for their COVID-19 booster, but haven't received it and leave the facility for > 24 hours, including hospital admissions, or who had concern for COVID-19 exposure at a visit < 24 hours should be treated as a new admit to the facility as noted below.
 - **New admits to facilities** who are unvaccinated, partially vaccinated, fully vaccinated and eligible for their COVID-19 booster, but have not received it, or who had concern for COVID-19 exposure need to remain in quarantine for 14 days in an area reserved for quarantine of new admissions. Full PPE should be utilized with these patients in



quarantine. Re-testing should be done by the facility before removing patient from their quarantine. Facilities may consider using acute care hospital days as part of the quarantine observation period for new admissions as long as the hospital has no concern for transmission or outbreak between staff or residents within the facility, the acute care hospital is implementing a process for screening new admissions and monitoring patients for hospital-onset COVID-19, and has designated COVID-19 unit(s) with dedicated staff and minimal cross-over, and the patient had COVID testing prior to discharge to the facility. New admissions into long-term care facilities do not need to quarantine on admission if they are **fully vaccinated** (2 or more weeks after completing their vaccine series) and not eligible for their COVID-19 booster (16 years and older, and 6 months from their second shot of a COVID-19 mRNA vaccine (ie. Pfizer or Moderna) or 2 months after the single dose of Johnson and Johnson vaccine) or have been boosted when eligible, unless they are awaiting their COVID-19 test results, they had an exposure to someone with COVID-19 in the past 14 days, or there are other concerns prior to admission. **Facilities should also review new admission policies and procedures from their appropriate licensing body to ensure they are in adherence with these.** New admissions who are up-to-date on their COVID-19 vaccine still need to follow all preventive measures. Facilities should also continue to monitor these residents for any symptoms and immediately isolate and test for COVID-19 if any concerns arise. New admissions who are **not fully vaccinated** or up-to-date on their COVID-19 vaccines should always quarantine as a new admission and test.

- Regardless of the patient vaccination status, If the patient develops symptoms, re-testing should be conducted by the facility. If the patient remains asymptomatic, patient should be retested prior to release from quarantine.
 - **Note:** If the patient has had a COVID-19 infection in the past 90 days and have cleared their infection and currently have no symptoms or other concerns, they do not need to be quarantined, and may be placed/considered “green” zone residents. If it has been > 90 days since the patient’s infection they would need to be quarantined as a new admission as note above.
- Residents that have frequent visits to outside facilities for care needs do not require repeated quarantine, unless concerns for COVID-19 exposure, but should be considered for more frequent surveillance testing.
- For patients being discharged to a LTCF who tested **positive** for COVID-19 on their most recent test, **COVID-19 testing does not need to be repeated.**
 - Patients/residents maybe readmitted to their prior SNF or RCFE bed or admitted to a RCFE if they can safely isolate in their room with appropriate transmission-based precautions in place and adequate clinical monitoring.
 - Considerations for if a patient can isolate safely in the RCFE:



- The patient is able to isolate in their room alone (ie doesn't have roommates) for their full isolation period with no concerns or problems with wandering /inability to keep them in the room.
 - The patient does not require caregivers or they have dedicated caregiver(s) who work with COVID positive residents only wearing appropriate PPE. These staff do not work with other residents who are not COVID positive. Additionally, the staff working with COVID positive residents do not interact with other staff in the facility who work with non-COVID positive residents.
 - The facility has the staff and ability to appropriately monitor the COVID+ resident closely.
 - If residents are not able to isolate safely, they should be discharged to SNF or Alternate Care Site (ACS), if appropriate for their care level, that is prepared to monitor and care for the patient until they are no longer requiring isolation (e.g. Transmission-based precautions).
- Isolation/Precautions at the LTCF may or may not still be required, depending on the following:
 - Patients who tested positive should be isolated for a total of at least 10 days (or 20 days if hospitalized in the intensive care unit) after symptom onset with at least 24 hours of fever resolution and other symptoms improving (or 10 days from date of lab test if asymptomatic). Healthcare providers may instruct some hospitalized patients on discharge, who were not in the intensive care unit, that they need to remain in isolation up to 20 days. The total number of days is inclusive of hospital isolation.
- If the isolation period is over and patient is recovered, the LTCF should receive the patient **without requiring a negative COVID-19 test result** and without the need for transmission-based isolation precautions and maybe placed/considered "green" zone residents.
 - Patients who have cleared their infection in the hospital and no longer need transmission-based isolation precautions may be discharged to their RCFE.
 - Patients who were discharged to a SNF may return to their RCFE if they have cleared their infection and no longer need transmission-based isolation precautions.

Guidance for Transfers between LTCFs

- Transfers should never occur in context of outbreak investigation without notification and consultation with Public Health
 - LTCFs should call the Public Health Department (925) 313-6740; Monday-Friday, 8am-430pm or email cocohelp@cchealth.org 7 days a week at least 24-48 hours before the proposed transfer



- For patients who asymptomatic, vaccinated, and have previously tested **positive within the past 3 months** for COVID-19 and no longer in isolation period, do not need testing prior to transfer and do not need to be quarantined at accepting facility. Individuals who are unvaccinated and who have had COVID-19 within 3 months should quarantine on admission.
- For patients transferring from another LTCF who have previously tested **negative** for COVID-19 or have pending lab results without compatible symptoms of COVID-19:
 - Do not need to remain in quarantine as long as both transferring and accepting facility do not have current outbreak investigation or concern for exposure. Testing is still recommended prior to transfer for unvaccinated or partially vaccinated residents.
 - Up-to-date on COVID-19 vaccine, readmissions after stay of any length at an outside facility do not need to be placed in quarantine unless they were at a facility with suspected or confirmed COVID-19 transmission. Unvaccinated, partially vaccinated, or eligible for their COVID-19 booster, but haven't received it, residents with a stay > 24 hours should be placed in quarantine and follow new admission guidance.

For more information please visit:

<https://www.coronavirus.cchealth.org/> and <https://cchealth.org/covid19/clf/>

Resources:

DSS PIN on 21-17-2: <https://www.cdss.ca.gov/Portals/9/CCLD/PINs/2021/ASC/PIN-21-17-2-ASC.pdf>

DSS PIN: <https://www.cdss.ca.gov/inforesources/community-care-licensing/policy/provider-information-notices/adult-senior-care>

CDPH ALF 20-22: <https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-22.aspx>

CDPH AFL 20-53: <https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-53.aspx>

