

Movement of Patients/Residents Across the Healthcare Continuum During Surges

Healthcare-Associated Infections Program
Center for Health Care Quality
California Department of Public Health



Objectives

- Understand guidance for admission and readmission of skilled nursing facility (SNF) residents during hospital surges in the context of the COVID-19 pandemic, including:
 - SARS-CoV-2 testing and quarantine of new SNF admissions
 - Management of residents re-admitted to the same SNF after a hospital stay or ED visit
- Describe considerations for limitations on new admissions to SNF during an outbreak

CDPH All Facilities Letter 20-87



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GAVIN NEWSOM

Governor

AFL 20-87

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TO: Skilled Nursing Facilities
General Acute Care Hospitals

SUBJECT: Movement of Patients/Residents in the Healthcare Continuum During Seasonal Surges and the Coronavirus Disease 2019 (COVID-19) pandemic

All Facilities Letter (AFL) Summary

- This AFL provides guidance for admission and readmission of skilled nursing facility (SNF) residents during seasonal hospital surges and the COVID-19 pandemic.
- This AFL provides guidance on working with local public health departments (LHD) and hospital discharge planners to ensure appropriate placement of resident following hospital discharge.

<https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-87.aspx>



SARS-CoV-2 Testing and Quarantine of New SNF Admissions – Unknown COVID-19 Status

- **Test and quarantine in yellow-observation area for 14 days** since the date of their last likely potential exposure outside the SNF (might be in community or transferring facility)
 - Two tests 24 hours apart test-based strategy is not a strategy for screening asymptomatic new admissions whose COVID status is unknown
 - **One screening test collected during the hospitalization within 48 hours of discharge date is sufficient**

SARS-CoV-2 Testing and Quarantine of New SNF Admissions – Positive/Recovered COVID-19 Status

- Use **symptoms or time-based strategy** (not test-based strategy) for discontinuing isolation and transmission-based precautions for SARS-CoV-2 positive individuals
- COVID-19 recovered individuals who have met criteria for discontinuation of transmission-based precautions, and:
 - Are **within 90 days** of a positive test can be admitted to **green "recovered"** area of a SNF
 - **> 90 days** have passed since prior positive test should be admitted to **"yellow" observation area** of the SNF for 14 days since the date of their last potential new exposure

Management of Residents Re-admitted to the Same SNF after a Hospital Stay or ED Visit

- When no suspected SARS-CoV-2 transmission at an outside facility, re-admitted residents do not necessarily require testing and quarantine upon readmission to same SNF
 - Consider periodic testing of individuals who frequently leave the facility (for example, for dialysis)
- SNF residents hospitalized and requiring transmission-based precautions for COVID-19 or influenza should be discharged from the acute care setting when clinically appropriate, not based on the period of potential virus shedding or recommended duration of transmission-based precautions

Limitations on New Admissions During an Outbreak

- Demonstration of containment should not be the sole basis for determining closures to new admissions
- Local public health should consider the following:
 - SNF has implemented outbreak control measures
 - SNF has no staffing shortage or operational problems (e.g., administrator or director of nursing out sick)
 - SNF must have a trained infection preventionist
 - SNF has adequate personal protective equipment (PPE), hand hygiene and environmental cleaning supplies
 - SNF has a well-demarcated "yellow" COVID-19 observation area (unit or wing) for new admissions

Movement of Patients/Residents Across the Healthcare Continuum During Surges – Key Messages

- Hospitals should **proactively communicate** with SNFs early to facilitate transfers
- SNFs should **work collaboratively** with hospital discharge planners and local public health to facilitate the safe and appropriate placement of SNF residents
- SNFs should **be prepared to provide care safely** without putting existing residents at risk during the COVID-19 pandemic and influenza season

Request for Review or Guidance

- Hospitals or SNFs that encounter difficulty in transitioning new or returning residents from an acute care hospital to a SNF based on their COVID-19 status or COVID-19-related admission should contact:
 - Local department of health
 - CDPH healthcare associated infections program, or
 - CDPH district office
- Will review the admission decision and assist with suggestions for next steps.

Alternative Care Site (ACS) Best Practices

- Revised AFL for ACS
- Work with local Public Health Officer and local leaders
- Decompress COVID-19 positive patient population
- Create Med Surge and SNF level spaces
- Ensure proper equipment, beds, electrical, gas etc
- Provide wrap around services
- Design spaces for proper clean supply and dirty utility work flows

Questions?

For more information,
email

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