Guidance on Hospital Transfer and Admission of Patients to Long Term Care Facilities (LTCFs) During COVID-19 Emergency

April 22, 2020

Because COVID-19 disproportionately affects the elderly, LTCFs (nursing homes and assisted living facilities) are taking all necessary precautions to prevent the exposure of COVID-19 to their residents. At the same time, ensuring that acute care hospitals can discharge patients safely and timely to LTCFs is a critical component to maintaining available inpatient bed capacity to treat COVID-19 patients throughout Virginia. This guidance has been developed to protect the health and safety of LTCF residents while assuring patients can be transferred to these facilities when it is safe to do so.

Hospitalized patients must be assessed for respiratory illnesses and COVID-19 prior to transfer to a LTCF. Patients with progressing respiratory infections will not be discharged from the hospital until stable and ready. All patient transfers will be coordinated with the receiving LTCF in accordance with this protocol and in compliance with federal and state law. Accepting patients from the hospital is also contingent on the LTCF having adequate staffing levels and personal protective equipment (PPE) to meet the individual’s care needs.

Protocol to Discharge from Hospital to LTCF for New Admissions and Readmissions

Category 1: Patients with no clinical concern for COVID-19:
- Acceptable for transfer to the LTCF following standard procedures. Hospitals are NOT required to perform COVID-19 testing on patients solely for discharge considerations unless new respiratory infection symptoms develop.

Category 2: Patients investigated for possible COVID-19, but negative testing:
- If patient has negative testing and meets usual clinical criteria for discharge, then he/she is acceptable for transfer to LTCF. Hospitals should communicate results and any indication for continued transmissions-based precautions upon transfer.

Category 3: Patients under investigation for COVID-19, but test results pending:
- These patients will NOT be transferred to an LTCF until tests results are completed and provided to the facility.

Category 4: Patients positive for COVID-19 testing:
- An LTCF can accept a new admission and readmission with a diagnosis of COVID-19 and who is still requiring transmission-based precautions for COVID-19 as long as the facility can follow CDC infection prevention and control recommendations for the care of COVID-19 patients, including having adequate staffing levels and adequate supplies of PPE.
- If transmission-based precautions have been discontinued* AND patient's symptoms have resolved, a patient can be discharged back to the facility they came from. Hospital discharge planners should provide advanced notice to the LTCF for any transfer of a patient with COVID-19.

Hospitals and LTCFs will work cooperatively to implement these protocols and facilitate discharges and are encouraged to proactively develop transfer and admission plans within their communities in anticipation of the need to identify alternative facilities for appropriate transfer.

*Transmission-based precaution for COVID-19 should be used for at least 7 days from symptoms onset AND 3 days of recovery, defined as being afebrile without fever-reducing medication and improvement in respiratory symptoms (e.g., cough, shortness of breath). Lingering cough after 72 hours would not be an indication for continuation of transmission-based precautions. Consideration should be given to extending transmission-based precautions for individuals with immunocompromising conditions.