VDH FAQ on Expansion of Point Prevalence Surveys (PPS)

What is a Point Prevalence Survey (PPS)?
A point prevalence study involves testing staff and residents for the presence of SARS-CoV-2, the virus that causes COVID-19. The results from a PPS can describe the scope and magnitude of COVID-19 in a facility and can sometimes help inform additional prevention and control efforts designed to further limit transmission.

Who will be tested?
VDH recommends testing all staff and residents in facilities with two or more confirmed cases of COVID-19.

What is the purpose of testing all residents?
Early experience from long-term care facilities with COVID-19 cases suggests that when residents with COVID-19 are identified, there are often asymptomatic residents with SARS-CoV-2 present as well. Conducting a PPS of all residents in the facility can identify infected residents who can be cohorted on a pre-specified unit or transferred to a COVID-specific facility.

What is the purpose of testing all staff?
Early experience suggests that, despite healthcare personnel (HCP) symptom screening, when COVID-19 cases are identified in a long-term care facility, there are often HCP with asymptomatic SARS-CoV-2 infection present as well. HCP likely contribute to the introduction and further spread of SARS-CoV-2 within long-term care facilities.

How should my facility prepare?
Facility leadership should be prepared for the potential to identify multiple asymptomatic residents and staff. CDC guidance on responding to COVID-19 in long-term care facilities should be reviewed by the appropriate infection prevention staff in your facility.

How do I schedule a PPS?
A coordinator from VDH will reach out to the facility to schedule. VDH is prioritizing facilities with at least two laboratory confirmed cases of COVID-19 in residents.

How will I get the results?
VDH or the testing laboratory will inform you of the results. The results will be reported back to the facility within 24 hours of the testing laboratory receiving the specimens. General guidance about what to do with the results will be communicated with the facility point of contact.

What changes might happen based on the results?
Results from a PPS will lead to infection prevention and control actions such as:

1. Cohorting residents to separate those with SARS-CoV-2 infection from those without detectable SARS-CoV-2 infection at the time of testing to reduce the opportunity for further transmission.
2. Identifying HCP with SARS-CoV-2 infection for work exclusion.
3. Determining the SARS-CoV-2 burden across different units or facilities and allocating resources/training.

Is a PPS required?
No; a facility can opt out of a PPS.