Criteria for Closure and Reopening to New Admissions in Long-term Care Facilities with COVID-19

Summary of Changes: These criteria have been updated as of

- 10/22/20 to include guidance for new admissions of residents who have tested positive and are within their fourteen-day isolation period or are COVID-19 recovered (positive lab within the last three months).
- 12/24/20 due to the current surge experienced throughout the State of California and need to accommodate discharges from hospitals in Ventura County to LTCFs. The flexibilities applied in this update will likely be terminated once the health system is no longer in a major surge event. The update also reflects the isolation period criteria that was updated by the VCPH Health Officer on 12/15/20.

The Ventura County Public Health (VCPH) Communicable Disease Long-Term Care Facility (LTCF) Outbreak Team investigates outbreaks in licensed facilities including Skilled Nursing Facilities (SNF), Intermediate Care Facilities (ICF), Congregate Living Health Facilities (CLHF), Residential Care Facilities for the Elderly (RCFE), Continuing Care Retirement Communities (CCRC), Adult Residential Facilities (ARF), and Social Rehabilitation Facilities (SRF).

During the course of a COVID-19 outbreak, facilities will often need to close to new admissions as instructed by public health. Depending on the extent of the outbreak and infection control practices in place, the closure may only be temporary to allow for time to focus on implementing Health Department directives related to testing, cohorting, and infection control practices. These practices – combined with a full-time infection preventionist, ample Personal Protective Equipment (PPE), and an engaged medical director – are critical tools in preventing further transmission and fully containing an outbreak.

The VCPH Communicable Disease LTCF Outbreak Team follows a standard protocol to determine when a LTCF will be required to close to new admissions for the purposes of containing a COVID-19 outbreak.

Guiding Principles

- The purpose of this protocol is to determine when a facility should close or temporarily close to new admissions in the context an outbreak or significant exposure. It does not address staffing or supply shortages that jeopardize resident care or disrupt operations which would trigger facility-wide evacuations and closure.
The objective of closures is to decrease potential exposure to unexposed residents, as well as to provide sufficient time for the facility to contain an outbreak, implement rigorous infection control practices, and cohort appropriately.

Surge

These criteria are subject to change in the event of a surge or disaster that impacts all or part of the healthcare system in Ventura County. Due to the level of surge currently experienced, these criteria have been modified to allow flexibility for LTCFs to continue admitting new residents ONLY from hospitals in Ventura County before outbreak containment is demonstrated. When relief from the current surge has been felt, the criteria will likely revert to the 10/22/20 version. In order for LTCFs to apply the flexibilities outlined in this updated guidance, the following factors must be met:

- LTCF has implemented outbreak control measures, as appropriate, such as response testing, cohorting, dedicated staff for the COVID-19 positive zone with no crossover, transmission-based precautions, and chemoprophylaxis (for influenza, assuming adequate availability)
- LTCF has no staffing shortage or operational problems (e.g., administrator or director of nursing out sick). Long term staffing plans should be documented.
  - Have a contingency staffing plan for increased employee absences and staffing shortages.
    - Create a backup/on-call system if one is not already in place.
    - Consider developing staffing agreements, utilize staffing registries.
    - Identify minimum staffing needs to continue essential services if on-site operations must be reduced.
- LTCF has adequate personal protective equipment (PPE), staff from all shifts have access to N95 respirator fit testing and all staff have been fit-tested to the respirator model(s) currently available for use in the facility, and access to adequate hand hygiene and environmental cleaning supplies
- LTCF has a well-demarcated "yellow" COVID-19 observation area (unit or wing) for new admissions
- Transfers should be carefully controlled and planned to avoid unnecessary exposures when moving through the building. The ability of the receiving LTCF to keep the resident from wandering after transfer should be considered.
- Facilities must implement and follow the Interim Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed Coronavirus Disease 2019 (COVID-19) in Healthcare Settings.
Facility Closure

- Staff member(s):
  - Single infected staff member: not closed to admissions. Follow current testing guidance per licensing and regulatory entities and as directed by VCPH.
  - Two or more staff infected: Facility can continue admitting new residents unless instructed otherwise by VCPH Communicable Disease. Follow current testing guidance per licensing and regulatory entities and as directed by VCPH.

- Resident(s):
  - One or more resident infected: Facilities will be closed to new admissions until rigorous infection control measures have been verified via phone call with VCPH Communicable Disease.
  - A facility may be allowed to continue admissions if VCPH verifies that infection control practices are in place with appropriate cohorts during the course of an outbreak investigation; however, if at any time during the outbreak investigation there is concern for transmission in the facility – VCPH will determine whether they should remain closed to further new admissions.
    - A facility may admit new residents who have tested positive and are within their ten-day isolation period into the COVID-19 positive unit (red zone) provided the resident and family/legal guardian are made aware of the facility’s current outbreak. Residents should be placed in the COVID-19 recovered unit (green zone) once they complete their isolation period. Resident should be stable and appropriate for LTCF level of care.
      - Facility medical director should be prepared to care for COVID-19 positive resident - Interim Clinical Guidance for Management of Patients with Confirmed Coronavirus Disease (COVID-19)
    - A facility may admit new residents who have recovered from COVID-19 (positive lab within the last three months) into the COVID-19 recovered/naïve unit (green zone) provided the resident and family/legal guardian are made aware of the facility’s current outbreak. Resident should be stable and appropriate for LTCF level of care.
    - A facility may admit new residents who are COVID-19 naïve (no known exposure or positive test result) into the COVID-19 exposed unit (yellow zone) provided the resident and family/legal guardian are made aware of the facility’s current outbreak. Resident should be stable and appropriate for LTCF level of care.

- Regardless of facilities’ admission status, facilities are expected to implement response driven testing in alignment with their licensing and regulatory requirements or at the frequency directed by the VCPH Communicable Disease LTCF Outbreak Team.

Reopening for New Admissions After Closure Due to Confirmed Case(s)

- If the LTCF is able to abide by the above criteria, the LTCF may reopen to admissions during their outbreak in times of surge.
Resources

- [LTCF Accepting New Admissions CHECKLIST](#)
- Yellow Zone Resident Quarantine Tracking Placards: Observation/Unknown Status, Asymptomatic Exposed, Symptomatic Exposed
- [CDPH COVID-19 PPE, Resident Placement/Movement, and Staffing Considerations by Resident Category (PDF)](#)
- [CDC COVID-19 PPE for Healthcare Personnel](#)

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