STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

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Ned Lamont Governor Susan Bysiewicz Lt. Governor

Hospital Discharges to Nursing Homes During COVID-19 Pandemic (Released April 14, 2020)

Nursing homes are an essential component of the statewide surge plan. At the same time, they have been challenged with COVID-19 outbreaks and limited resources in staffing and personal protective equipment while caring for a population at great risk for morbidity and mortality associated with COVID-19.

This guidance for both hospitals and nursing homes, based on guidance from the Centers for Disease Control and Prevention (CDC)^{2,3}, allows for safe and timely transfer of hospitalized patients when they are ready for hospital discharge and have a need for skilled nursing care.

There will be 3 types of nursing home facilities to serve patients who require nursing home care after hospitalization:

- 1. Existing/Traditional Nursing Homes: These may or may not have COVID-positive residents. Those with residents that develop suspected or confirmed COVID-19 should cohort residents and staff appropriately.
- 2. COVID Recovery Facilities: existing nursing homes dedicated to accepting COVID-positive patients from hospitals, particularly those demonstrating a likelihood for continued nursing home care after recovery from acute illness
- 3. Alternate COVID Recovery Facilities: previously vacated spaces that are being reoccupied to care for COVID-positive patients from hospitals who demonstrate a likelihood for discharge back to the community afterwards

Patient Type Definitions:

- 1. **COVID status unknown**: patients who were not tested for COVID-19 because they never had signs or symptoms of COVID-19 OR patients who tested negative for COVID-19
- 2. COVID-positive: patients who have tested positive for COVID-19

Hospital Discharges to Existing/Traditional Nursing Homes

COVID status unknown patients should be transferred to Existing/Traditional Nursing Homes, provided:

- The patient has no current COVID-19 symptoms; AND
- One nasopharyngeal (NP) or oropharyngeal (OP) specimen from the patient tests negative for SARS-CoV-2 RNA; AND
- The patient is quarantined in their room for 14 days upon arrival at the nursing home. If symptoms develop during the quarantine period, they should be tested for COVID-19.

COVID status unknown nursing home residents can return to their home after an Emergency Department visit or same-day procedure without COVID-19 testing if the resident is not admitted to an inpatient floor and hospital stay is ≤ 48 hours. They should be quarantined for 14 days at the nursing home upon return.

COVID-positive patients should be transferred to Existing/Traditional Nursing Homes, provided:

- Resolution of fever without the use of fever-reducing medications for ≥ 72 hours; AND
- Improvement in respiratory symptoms (e.g. cough, shortness of breath); AND
- Two consecutive NP or OP specimens (collected > 24 hours apart) test negative for SARS-CoV-2 RNA
- The patient is quarantined in their room for 14 days upon arrival at the nursing home. If symptoms develop during the quarantine period, they should be tested for COVID-19.



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Hospital Discharges of COVID-Positive Patients to COVID Recovery Facilities

Patients testing positive for COVID-19 can be transferred to a COVID Recovery Facility if an Existing/Traditional Nursing does not accept the patient due to inability to care for the patient.

COVID-positive patients should be transferred to COVID Recovery Facilities if:

- An existing/traditional nursing home does not accept the patient; AND
- The patient resided in a nursing home immediately prior to hospitalization OR the patient demonstrates need for skilled nursing after recovery from acute illness

COVID-positive patients should be transferred to Alternate COVID Recovery Facilities if:

- An existing/traditional nursing home does not accept the patient; AND
- The patient demonstrates potential for discharge to the community after recovery from acute illness

Table: Discharge guidance for hospitalized patients requiring skilled nursing.

Discharge to:	COVID-Positive Patient	COVID Status Unknown Patient
Existing/Traditional Nursing Home if	1. Fever-free without fever-reducing	1. Patient has no current COVID-
- Nursing Home is aware of the	medications ≥ 72 hours;	19 symptoms;
patient's COVID status and accepts	AND	AND
the patient;	2. Improvement in respiratory symptoms;	2. One nasopharyngeal NP or OP
AND	AND	specimen tests negative for
- Adequate infection control	3. Two consecutive NP or OP specimens	SARS-CoV-2 RNA;
measures can be taken by the	(collected ≥ 24 hours apart) test negative	AND
Nursing Home to contain COVID-19.	for SARS-CoV-2 RNA;	3. Patient is quarantined for 14
	AND	days upon arrival at the nursing
	4. Patient is quarantined for 14 days upon	home. If symptoms develop
	arrival at the nursing home. If symptoms	during the quarantine period,
	develop during the quarantine period,	they should be tested for
	they should be tested for COVID-19.	COVID-19.
COVID Recovery Facility if:	1. Traditional Nursing Home will not	1. Rule-out testing is positive
- The patient resided in a nursing	accept the patient	(patient becomes COVID-
home immediately prior to		positive)
hospitalization;		
OR		
- The patient demonstrates potential		
need for skilled nursing after		
recovery from acute illness		
Alternate COVID Recovery Facility if:	1. Traditional Nursing Home will not	1. Rule-out testing is positive
- The patient demonstrates potential	accept the patient	(patient becomes COVID-
for discharge to the community after		positive)
recovery from acute illness		

Questions about these guidelines for transfer to nursing homes and infection control issues can be directed to the DPH Infectious Diseases Section at 860-509-7995. Other questions about COVID-19 can be emailed to COVID19.dph@ct.gov

References:

- 1. CT Office of the Governor. State Medical Surge Plan for Long-Term Care Facilities, Press Release: https://portal.ct.gov/Office-of-the-Governor/News/Press-Releases/2020/04-2020/Governor-Lamont-Coronavirus-Update-April-11
- 2. CDC. Discontinuation of Transmission-Based Precautions and Disposition of Patients with COVID-19 in Healthcare Settings (Interim Guidance): https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-hospitalized-patients.html
- 3. CDC. Interim Guidelines for Collecting, Handling, and Testing Clinical Specimens from Persons for Coronavirus Disease 2019 (COVID-19): https://www.cdc.gov/coronavirus/2019-nCoV/lab/guidelines-clinical-specimens.html