Ventura County Public Health Department (VCPH) seeks to protect vulnerable populations from COVID-19. The most vulnerable population is the elderly. Seniors confined together in a **Long-term Care Facility (LTCF)** are at particular risk. An outbreak there might result in numerous deaths. VCPH has a zero-tolerance policy for COVID-19 cases in LTCFs. The following guidance outlines the strategy for holding patients in the **COVID-19 Holding Unit** within each hospital[1]. This document applies to all patients that are suspect or confirmed COVID-19 who may not be discharged back to their LTCF because doing so would pose a health threat to others living in the same environment.

For the purpose of this document, Long-term Care Facilities refers to nursing homes, skilled nursing facilities, intermediate care facilities, assisted living facilities, continuing care communities, residential facilities, and congregate living facilities that are licensed by the California Department of Public Health and/or the California Department of Social Services.

Discharge to Long-Term Care Facilities

Due to risk factors, such as advanced age, congregate living environment, and underlying chronic medical conditions, Long-Term Care Facility (LTCF) patients are at the highest risk of being affected by COVID-19. To protect this fragile population against COVID-19, VCPH is providing the following guidance.

1. Hospitals should not discharge any patient with a laboratory confirmed positive COVID-19 test to any LTCF until the following **LTCF discharge criteria** have been met:

> ### LTCF Discharge Criteria
>
> - 10 days have passed since the patient's admission **and**
> - No fever for 72 hours (without the use of fever reducing medications) **and**
> - Improvement in respiratory symptoms

2. Hospitals should be prepared to maintain such patients, either as an inpatient, or at a hospital COVID Holding Unit until **LTCF discharge criteria** have been met.
   - Standard, contact and droplet precautions should be implemented with each of these patients both inpatient and in the holding unit.

3. The COVID Holding Unit should be established by each hospital in the county.
   - COVID Holding Unit may be a part of a hospital's surge bed capacity.
   - The COVID Holding Unit will provide a lower level of care for patients and hospital staff may need to provide care with toileting, feeding, and the distribution of pharmaceuticals.

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[1] A Holding Unit need not be a specific designated unit. This function may be met by utilizing usual hospital beds or surge beds as long as these are capable of holding patients who are COVID-19 positive or suspect.

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LTCFs will be provided with COVID-19 testing kits and are expected to provide testing within their own facility. If a LTCF resident has a laboratory-confirmed positive result for COVID-19, the LTCF will notify the hospital **Emergency Department (ED)** to make arrangements for the hospital to receive and evaluate the resident.

- The LTCF resident should be isolated with standard, contact, and droplet precautions.
- The ED physician will determine if the LTCF resident requires in-patient hospitalization or transfer to the hospital COVID Holding Unit.
- For the hospitalized LTCF COVID-19 patient, once hospitalization is no longer necessary, the patient may be transferred to the COVID Holding Unit.
- The LTCF resident should remain in the hospital COVID Holding Unit until **LTCF discharge criteria** are met.

VCPH strongly recommends against LTCFs sending patients to the ED simply for COVID-19 testing. However, if a patient is sent to the ED from a LTCF for other reasons (fever and dysuria, sudden onset severe head pain, etc.,) and the ED physician deems a COVID-19 study is necessary but believes does not warrant hospitalization, that patient should **not** be sent back to the LTCF and should be placed in a hospital COVID Holding Unit until the test results are received. The COVID Holding Unit should have a section maintained for patients whose COVID-19 status is unknown. If a reliable rapid COVID-19 testing site is available to the ED, placement in a COVID Holding Unit may not be necessary. If the ED does not have reliable rapid COVID-19 testing, the specimen should be designated "Priority" and sent to the Public Health Laboratory.

- If COVID-19 testing results are negative, patient should be discharged back to LTCF, if no hospitalization required.
- If COVID-19 testing results are positive, patient should remain in COVID Holding Unit until **LTCF discharge criteria** are met.

Notification to Ventura County Public Health for LTCF and Home Discharges

Once a LTCF patient has met the **LTCF discharge criteria** and is to be discharged back to LTCF or home, the hospital must notify Ventura County Public Health by sending a secure email to: vcph-id@ventura.org with the following information:
- Patient name
- Date of Birth
- Medical Record Number
- Destination (home or long-term facility name)

All patients who have met LTCF discharge criteria and are discharged back to their LTCF should be instructed to wear a mask at that facility for the next four days (until day 14 from hospital admission) while interacting with others including LTCF staff.