



Guidelines for Transfer to Skilled Nursing Facilities, Assisted Living and Congregate Settings

S Situation	Skilled nursing facilities (SNFs) assisted living communities (AL) and congregate settings may have intermittent closures due to COVID-19 outbreaks, lack of staff or other constraints. Safe discharge planning, increased collaboration as well as proactive vaccine administration and testing will help facilitate more timely discharges.
B Background	Skilled nursing facilities follow recommendations from the Centers for Disease Control (CDC), Centers for Medicare and Medicaid (CMS), and state health departments. The state and local departments of health can apply additional requirements that may supersede CMS or CDC guidance. Per the CDC, SNF and long-term care patients are the most vulnerable in our population. The current focus continues to be preventing further infections, removing from, or isolating any COVID-19 patients in SNF and congregate settings.
A Assessment	Patients that have been fully vaccinated and have had current COVID-19 testing are more desirable for placement. To remove potential barriers and expedite patient readiness for transfer, offering vaccines and facilitating testing will assist in placement process.
R Recommendation	• Encourage patient to be “fully vaccinated” prior to transfer to SNF, AL or congregate setting (fully vaccinated includes booster). Offer vaccine if needed prior to transfer. See appendix below for specific CDC guidelines. Per CDC guidelines, all unvaccinated patients who are new admissions and readmissions should be placed in a 14-day quarantine, even if they have a negative test upon admission. • Obtain COVID-19 testing 24-72 hours prior to transfer in patients who have not had COVID-19 within the last 90 days. Any new admits to congregate settings should be placed in isolation until cleared by medical staff at the site. • Care Management to work closely with PAN SNF program managers to remove barriers to transition.

	Following are the CDC guidelines for Testing of SNF New Admissions and Readmissions, last updated September 2021
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Testing In Congregate Settings

Anyone with even mild symptoms of COVID-19, regardless of vaccination status, should receive a viral test as soon as possible.

Asymptomatic HCP with a higher-risk exposure and residents with close contact with someone with SARS-CoV-2 infection, regardless of vaccination status, should have a series of two viral tests for SARS-CoV-2 infection. In these situations, testing is recommended immediately (but not earlier than 2 days after the exposure) and, if negative, again 5–7 days after the exposure. Criteria for use of post-exposure prophylaxis are described elsewhere.

Testing is not recommended for people who have had SARS-CoV-2 infection in the last 90 days if they remain asymptomatic, including if they have had close contact or a higher-risk exposure; this is because some people may be non-infectious but have detectable virus from their prior infection during this period (additional information is available).

In nursing homes located in counties with low community transmission, expanded screening testing for asymptomatic HCP, regardless of vaccination status, is not recommended. Per recommendations above, these facilities should prioritize resources to test vaccinated and unvaccinated symptomatic people and all close contacts, as well as be prepared to initiate outbreak response immediately if a nursing home-onset infection is identified among residents or HCP.

Duration of Transmission-Based Precautions Information

https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html#anchor_1631031505598

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