Who is at risk for severe disease from COVID-19?

Coronavirus disease (COVID-19) adversely affects older adults and persons with underlying health conditions or compromised immune systems. This population is at greater risk for severe illness from this virus. It is of the utmost importance to limit exposure to residents of long-term care facilities.

What is considered a long-term care facility?

- Nursing homes
- Residential care facilities
- Assisted living facilities
- Post-acute head injury retraining and residential care facilities
- Any other facility that provides long-term medical or personal care

What steps can be taken to limit exposure to residents?

The Arkansas Department of Health (ADH) directs all long-term care facilities to screen all visitors and employees.

How should screenings be conducted for visitors and employees?

- Facility staff must question all visitors regarding international travel within the last 14 days to countries with sustained transmission of COVID-19. Updated information on restricted countries can be found at: https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html
- Facility staff must question visitors if they have had contact with someone known to be infected with, or under investigation for, COVID-19.
- Facility staff must screen for signs or symptoms of respiratory infection, such as cough, sore throat, and fever by measuring their temperature. Temperature may not exceed 100.4 degrees Fahrenheit for any visitor entering the facility.
- Facilities should NOT allow visitors to enter if they meet any of the criteria above.
- Temperature screenings should be done for employees prior to every shift. Emergency Medical Services will be prescreened daily by the EMS Agency to meet this requirement.

For assistance with screening, an optional questionnaire can be accessed at www.healthy.arkansas.gov.

Who should be contacted with concerns?

Per CMS guidance on survey activities, the Office of Long-term Care will continue to work immediate jeopardy complaints, complaints alleging infection control concerns, annual surveys, re-visits, initial certifications, surveys of facilities that have had immediate-jeopardy level infection control deficiencies in the last three years, and surveys of facilities that have a history of infection control deficiencies at lower levels.

Where can additional guidance be found?