



Arkansas Department of Health

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Guidance for Prevention and Management of COVID-19 in Long-Term Care Facilities

Background:

From reports characterizing the clinical course and epidemiology of COVID-19, caused by the novel coronavirus (SARS-CoV-2), the elderly and those with chronic medical conditions appear to be at highest risk for the development of severe illness. Given the close proximity in which residents, inherently at higher risk of severe illness, of Long Term Care (LTC) facilities reside, they represent an extremely vulnerable population. This document has been created to provide guidance related to monitoring and testing in LTC facilities in order to protect their residents and health care providers (HCP). This preliminary guidance is based on information from the Centers for Disease Control and Prevention (CDC) recommendations and may be subject to change on a regular basis.

Recommendations:

- **Restrict all visitation except for extenuating circumstances such as an end of life situation.**
- Restrict all volunteers and non-essential healthcare personnel.
- Cancel all group activities and communal dining within the facility.
- **Implement active screening of all persons who work in the facility for fever and respiratory symptoms such as cough and shortness of breath on a regular basis (see below).**
- **Any worker with fever or respiratory symptoms should be excluded from work.**
- Enforce frequent hand hygiene among HCP and residents.
- **Implement active screening of residents for fever and respiratory symptoms such as cough and shortness of breath on a regular basis (see below).**
- If residents develop new symptoms or a change in vital signs, place on contact and droplet precautions and monitor vital signs more frequently.
- Assign private rooms and bathrooms to residents suspected of having COVID-19.
- Cohort COVID-19 positive patients in a designated area, if possible.
- Decisions to transfer residents to a higher level of care should be based on clinical evaluation and not solely on COVID-19 test positivity.

Screening:

Evaluate residents every 8 hours for the following:

- **Common Signs and Symptoms**
 - Fever of 37.2°C (99.0°F) or greater
 - Cough
 - Shortness of breath. *Increased oxygen requirements or increased frequency of nebulizer treatments may be used instead of symptoms of shortness of breath.*
- **Less Common Signs and Symptoms**
 - New onset diarrhea
 - Nausea and vomiting
 - Confusion or change in mental status. *If noted, check pulse oximetry.*
 - Muscle aches
 - Headache
 - Sore throat
 - Runny nose
 - Chest pain

Probable COVID-19 case: for someone having any **two** of the common signs/symptoms do the following:

- *Segregate to a private room, if possible.*
- *Initiate contact and droplet precautions.*
- *Check pulse-oximetry on room air with increased frequency.*
- *Increase frequency of vital signs, including pulse oximetry.*
- **Screen for influenza AND COVID-19.**

Possible COVID-19 case: for someone having any **one** of the common sign/symptoms **PLUS** one or more of the less common signs/symptoms do the following:

- *Initiate contact and droplet precautions.*
- *Monitor pulse-oximetry on room air with increased frequency.*

For questions regarding this guidance call the ADH Physicians call line at 1-844-930-3023.

References:

The Society for Post-Acute and Long-Term Care Medicine. Revised 3/18/2020.

<https://paltc.org/sites/default/files/Active%20Screening%20rli-SG.pdf>

Guidance for Long-Term Care Facility (LCTF) with Confirmed COVID-19 Infection. Washington State Department of Health. Updated March 15th, 2020.

Center for Disease Control and Prevention (CDC).

<https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/prevent-spread-in-long-term-care-facilities.html>

Guidance for Infection Control and Prevention of the Coronavirus Disease 2019 (COVID-19) in Nursing Homes. Revised March 13th, 2020. Center for Medicare & Medicaid Services (CMS).

Interim Long-Term Care Setting Guidance for Residents with Suspected or Confirmed Coronavirus Disease 2019 (COVID-19) and Their Caregivers. North Carolina Department of Health and Human Services, Division of Public Health Communicable Disease Branch.