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COVID-19 Discharge & Transfer Guidance for Santa Barbara County Hospitals & Long-Term Care Facilities

This guidance is provided by the Santa Barbara County Public Health Department in order to maintain standards for coordinated discharge of COVID-19 positive and non-COVID patients from hospitals and emergency departments to skilled nursing, congregate care settings, and homes. This guidance will change according to current guidance from CDPH and the CDC.

Facilities may choose to implement policies that provide stricter guidelines for standard and transmission-based precautions (e.g., contact, droplet) and isolation periods. The Public Health Department is available for consultation regarding each facility’s individual situation and residents via phone 805-681-5280 or email dc@sbcphd.org.

The following discharge guidance is covered in this document:

- [Patients with Laboratory Confirmed COVID-19 Discharged to SNF/LTC and Congregate Living](#)
- [Patients without COVID-19 Discharged to SNF/LTC and Congregate Living](#)
- [Patients Transferred from SNF/LTC to another SNF/LTC](#)
- [Patients with Laboratory Confirmed COVID-19 Discharged to Non-Congregate Isolation Settings](#)
- [Patients Awaiting Laboratory Results Discharged to PHD Non-Congregate Isolation Settings](#)
- [Patients with Laboratory Confirmed COVID-19 Discharged to Home Settings](#)

Additional guidance:

- [COVID-19 Hospital Reporting for Confirmed Cases, Discharges and Deaths- Santa Barbara County](#)
- [AFL 20-53- Mitigation Plan Recommendations for Testing of Health Care Personnel \(HCP\) and Residents at Skilled Nursing Facilities](#)
- [PIN 20-23-ASC Guidance on Testing, Visitation, Infection Prevention in Adults and Senior Care Facilities](#)

Contact Information:

Santa Barbara County PHD Disease Control	805 681-5280	<ul style="list-style-type: none"> • Routine reporting of confirmed cases in HCWs and residents in SNFs/LTC or congregate settings, call between 8 a.m-5 p.m. 7/days/week • Urgent concerns regarding confirmed cases in HCWs and residents in SNFs/LTC or congregate settings, call 24/7
COVID-19 Discharge to PHD COVID-19 Non-Congregate Hotel Setting	805 681-5165 24/7	<ul style="list-style-type: none"> • In-patients: 8 am- 5pm M-F. PHD will not accept weekend discharges of confirmed COVID-19 inpatients • ED patients: Confirmed or suspect cases pending discharge from the ED that are unsheltered or unable to isolate or quarantine

Patients with Laboratory Confirmed COVID-19 Discharged to SNF/LTC³ and Congregate Living

If patient is being RETURNED to the SNF/LTC of origin:

- Patient may be transferred when clinically indicated
- If transmission-based precautions are still required, the patient should go to a facility with the ability to adhere to infection prevention and control recommendations ¹.
- **If SNF/LTC facility patient is being returned to is experiencing an outbreak**, hospitals must contact **PHD 805-681-5280** for approval for discharges to the facility. Facilities experience outbreaks are closed to new admissions, they are not necessarily closed to returning admits.

If patient is a new admission to the receiving SNF/LTC:

- Patients with confirmed COVID-19 may be transferred if they meet one of the **discharge criteria below**.

If patient is being transferred to congregate living (non-medical setting- e.g. Assisted Living, Adult Residential Facility, or unlicensed congregate living):

- Patients with confirmed COVID-19 may only be transferred when one of the following criteria are met

Discharge Criteria:

For patients with mild/moderate illness who are not severely immunocompromised:

10 days have passed since symptom onset **AND** at least 24 hours have passed since last fever without the use of fever-reducing medications **AND** symptoms have improved. ²

For patients with severe to critical illness or who are severely immunocompromised:

20 days have passed since symptom onset **AND** no fever x 24 hours without the use of fever reducing medications.

Facilities should be prepared to accept confirmed COVID-19 patients when the transfer requirements are met.

¹ Patient should be preferably placed in a location designated to care for COVID-19 patients. The patient may be placed in a shared room with other confirmed COVID patients. Patients should not be transferred if the receiving facility cannot maintain transmission-based precautions.

² If patient has persistent symptoms from COVID-19 (e.g., persistent cough), they should be placed in a single room, be restricted to their room, and wear a facemask during care activities until all symptoms are completely resolved or until 20 days after symptom onset, whichever is longer.

³ Applies to the following facility types- skilled nursing facilities, assisted living facilities, adult residential facilities, hospice facilities, intermediate care facilities, mental health rehabilitation centers and special treatment facilities.

[CDC Discontinuation of Transmission-Based Precautions and Disposition of Patients with COVID-19 in Healthcare Settings \(Interim Guidance\)](#)

Discharge criteria can be changed by Santa Barbara County Public Health Department at any time.

Patients with Negative COVID-19 Discharged to SNF/LTC³ and Congregate Living Settings

All hospitalized patients not admitted for COVID-19 will be tested and have results for COVID-19 within 3 days prior to admission or re-admission to a skilled nursing facility, long term care facility, or non-medical congregate living setting³.

Patients that have previously tested positive for COVID-19 do not need to be tested prior to discharge to a skilled nursing facility, long term care facility, or non-medical congregate living setting for 90 days (3 months)⁴ following symptom onset for initial COVID-19 infection or if the patient was asymptomatic use the date of the positive test. Upon completion of this 90-day period patient should be tested prior to discharge to SNF/LTC and congregate living settings.

- SNF/LTC and Congregate living setting may **not** require two negative tests prior to transfer from the hospital or from another SNF/LTC and congregate living facility.
- **Non-SNF receiving facility**, at their discretion, may implement transmission-based precautions and quarantine time upon new admit or readmit of a resident. Residents going to a non-SNF receiving facility must have results prior to discharge from inpatient setting. Testing is not required for patient in the ED that is not admitted.
- **Skilled Nursing Facility (SNF):**
 - **New Admits:** Tested prior to discharge from hospital and quarantined for 14 days and then retested by the SNF. SNF may consider acute care hospital days as part of the quarantine observation period from the start of last potential exposure for new admissions as long as following conditions are met:
 - SNF is in regular communication with PHD and/or hospital infection preventionist and occupation health program, and there is not suspected or confirmed COVID-19 transmission among patients or staff at the hospital.
 - SNF has verified via PHD or hospital that the hospital is testing all patients upon admission and has designated COVID-19 unit(s) with dedicate staff and minimal cross-over.
 - Results for asymptomatic patients tested in the hospital do not have to be available prior to a SNF transfer.
 - New admits are placed in a single occupancy rooms or separate observation unit wing, and may NOT be placed in the area for confirmed or suspect COVID-19 residents.
 - **Returning Admits:** Additional testing and quarantine after admission to the facility are not required for residents readmitted after hospitalization, or for who leave the SNF for ambulatory care (e.g. emergency department, or clinic) unless there is suspected or confirmed COVID-19 transmission at the outside facility.
 - **See AFL 20-53 for additional information:**
<https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-53.aspx#>
- **If SNF/LTC facility is experiencing an outbreak¹**, hospitals **must contact PHD 805-681-5280** for approval for discharge to the facility or home.
 - If patient's departure from the SNF/LTC facility was less than 14 days prior patient may be allowed to return to SNF/LTC with prior approval from PHD.
 - While facilities experiencing outbreaks¹ are closed to new admissions, they may be able to take to returning patients within the 14-day exposure period if they can isolate the readmission for 14 days, implement cohorting, meet infection control guidelines, and provide adequate staffing.
 - If the patient's departure from the SNF/LTC was greater than 14 days prior and the patient has remained symptom free, the patient should be transferred to a different facility, if their original facility is still closed to admissions.

¹ Skilled nursing facility/ LTC outbreaks are at least one case of laboratory-confirmed COVID-19 in a resident.
<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/OutbreakDefinitionandReportingGuidance.aspx>

³ Applies to the following facility types- skilled nursing facilities, assisted living facilities, adult residential facilities, hospice facilities, intermediate care facilities, mental health rehabilitation centers and special treatment facilities.

⁴ CDC has provided additional guidance on retesting - <https://www.cdc.gov/coronavirus/2019-ncov/hcp/duration-isolation.html>

Patients Transferred from one SNF/LTC³ to another SNF/LTC³ or Home

Residents that have previously tested positive for COVID-19 do not need to be tested prior to transfer to a new facility for 90 days (3 months)⁴ following symptom onset for initial COVID-19 infection or if resident was asymptomatic use the date of the positive test. Upon completion of this 90-day period residents should be tested prior to transfer to SNF/LTC facility or admission from community.

<p>SNF/LTCs experiencing confirmed outbreaks of COVID-19</p>	<ul style="list-style-type: none"> • <u>Do not transfer/discharge</u> into or out of SNF/LTC facility or home unless approved by Santa Barbara County Public Health Department contact 805-681-5280 or email dc@sbcphd.org <p>If resident is cleared for transfer to another facility:</p> <ul style="list-style-type: none"> • Receiving facility should be notified prior to transfer that the patient is potentially COVID-19 exposed/or positive AND • Patient should be tested prior to transfer • Upon arrival at the receiving facility or home, the resident should be maintained in quarantine for 14 days and tested at the end of quarantine time. <p>Admissions during outbreak:</p> <ul style="list-style-type: none"> • SNF/LTC facility will consult with SBC PHD on all admissions and discharges during an outbreak by calling 805-681-5280. Admissions will be on a case by case basis.
<p>SNF/LTC facility <u>not</u> experiencing confirmed or suspect outbreaks of COVID-19</p>	<ul style="list-style-type: none"> • <u>May transfer</u> residents without prior approval of Santa Barbara County Public Health: <ul style="list-style-type: none"> ○ Resident has a negative COVID-19 PCR test result within 3 days prior to transfer. • New admissions to a SNF are placed on quarantine for 14 days and retested prior to being released from quarantine. • Long term care and other congregate care facilities may choose to quarantine new admissions for 14 days and retest prior to releasing the resident from quarantine.

³ Applies to the following facility types- skilled nursing facilities, assisted living facilities, adult residential facilities, hospice facilities, intermediate care facilities, mental health rehabilitation centers and special treatment facilities.

⁴ CDC has provided additional guidance on retesting - <https://www.cdc.gov/coronavirus/2019-ncov/hcp/duration-isolation.html>

Patients with Laboratory Confirmed COVID-19 Discharged to PHD Non-Congregate Isolation Setting

The Santa Barbara County Public Health Department will accept patients for PHD COVID-19 Non-Congregate Setting that meet the following criteria:

- Cannot go home due to the fact that they live in a congregate living setting (non-medical), current living situation doesn't allow them to isolate, or are without a home.
- Do not require assistance with Activities of Daily Living (ADL), or has a caregiver/ home health agency arranged to provide assistance.
 - If the patient requires home health, hospice or private care, the hospital will arrange for and coordinate home health, hospice, or private caregiver services prior to discharge.
- If patient needs additional medical equipment (e.g. oxygen, nebulizer etc.) hospital must arrange provision of equipment. Patient must be medically stable and able to conduct activities of daily living without assistance.

PHD COVID-19 Non-Congregate Setting is NOT able to provide the following services:

- Substance detoxification services
- Mental health services or management of disruptive behavior
- Maintenance of persons who cannot comply with health officer isolation orders

Process to discharge to PHD COVID-19 Non-Congregate setting:

- **In-patients:** 8 am- 5 pm Monday – Friday.
- PHD will not accept weekend discharges of confirmed COVID-19 inpatients.
- **ED patients:** Requires discharge planning with PHD. All discharges of confirmed positive ED patients must be coordinated through PHD Disease Control at **805-681-5165 (8am – 5pm) 7 days a week and 805-681-5280 after hours**. We ask that patients be held, if at all possible, until the next business day.

Patients Awaiting Laboratory Results Discharged to PHD Non- Congregate Isolation Setting

The Santa Barbara County Public Health Department will accept ED patients who need to be isolated awaiting test results into the PHD Non-Congregate Setting that meet the following criteria:

- Live in a congregate living setting (non-medical), current living situation doesn't allow them to isolate, or are without a home.
- Do not require assistance with Activities of Daily Living (ADL), or they have a caregiver/ home health agency arranged to provide assistance.
 - If the patient requires home health, hospice or private care, the hospital will arrange for and coordinate home health, hospice, or private caregiver services prior to discharge.
- If patient needs additional medical equipment (e.g. oxygen, nebulizer etc.) hospital must arrange provision of equipment. Patient must be medically stable and able to conduct activities of daily living without assistance.

Process to discharge ED patients awaiting test results to PHD COVID-19 Non-Congregate setting:

- Contact PHD Disease Control: **805-681-5165 (8am – 5pm) 7 days a week** and 805-681-5280 after hours.

Patients with Laboratory Confirmed COVID-19 Discharged to Home

<p>10 days since symptom onset AND no fever x 24 hours without the use of fever reducing medications, and improvement of symptoms.</p>	<ul style="list-style-type: none"> • No restrictions. Patient is considered non-infectious for the purpose of discharge. • https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-hospitalized-patients.html
<p>Less than 10 days since symptom onset or febrile</p>	<ul style="list-style-type: none"> • If the patient requires home health, hospice or private care, the hospital will arrange for and coordinate home health, hospice, or private caregiver services prior to discharge. • Transport home by private conveyance or medical transport (No public transportation, no rideshare/taxi) • Provide guidance on self-isolation until end of infectious period. • Advise any household members that they will need to self-quarantine for at least 14 days after last contact with this patient. Provide home quarantine instructions. • The self-quarantine period of all household members will be extended to 14 days after the end of the patient’s isolation period • If the patient lives with others and is not able to adequately self-isolate advise that: <ul style="list-style-type: none"> ○ Persons who are unable to isolate at home due to lack of a private room or exposure to vulnerable members of the household should be referred to Public Health for consideration for temporary or alternate housing. See page 4 for process and contact information. ○ Every effort should be made to relocate household members at risk for experiencing severe illness if infected (e.g., age>65 years, pregnant, and/or medical co-morbidities)