Health Advisory

Re-admitting patients being discharged from a hospital back to health care or residential facilities

January 13, 2021

Situational Awareness

- Patients being discharged from hospitals who have recovered from COVID-19 should be offered re-admission and resumption of health care services at facilities in which they previously received services.
- This health advisory is based on California Department of Public Health guidance:
  - AFL 20-33.2 (supersedes AF 20-33.1): *Interim Guidance for Transfer of Residents with Suspected or Confirmed Coronavirus Disease (COVID-19)*, available at [https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-33.aspx](https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-33.aspx)
  - AFL 20-87: *Movement of Patients/Residents in the Healthcare Continuum During Seasonal Surges and the Coronavirus Disease 2019 (COVID-19) Pandemic*, available at [https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-87.aspx](https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-87.aspx)

Expectations and Recommendations

- Skilled nursing facilities (SNFs) should prepare to receive patients who are clinically stable for discharge from hospitals or alternate care sites in the following scenarios:
  - Patients with no clinical concern for COVID-19 may be transferred from hospitals or alternate care sites to SNFs following usual procedures.
  - SNFs may not require a negative test result for COVID-19 as criteria for admission or readmission of residents hospitalized or receiving treatment at an alternate care site with no clinical concern for COVID-19.
  - Hospitals and alternate care sites are NOT required to perform COVID-19 testing on patients solely for discharge considerations unless the patient develops new respiratory infection symptoms.
- SNFs are encouraged to develop plans for placement and observation of new admissions and readmissions without COVID-19 testing, such as single rooms or a separate observation unit, wing or building.
- Health care service providers (dialysis, physical therapy, etc.) should prepare to resume health care delivery to patients who have recovered from COVID-19 as determined by their healthcare provider.
• No patient should be denied health care services or residential care due to prior COVID-19 infection.
• Testing (or verification of a negative test) for COVID-19 infection is not required for readmission to or resumption of health-care services.
• Re-admitting residents to the same SNF after a hospital stay or ED visit
  o When there is no suspected SARS-CoV-2 transmission at an outside facility, re-admitted residents do not necessarily require SARS-CoV-2 testing and quarantine upon readmission to the same SNF.
  o Rather than quarantine, SNFs can consider periodic SARS-CoV-2 testing of individuals who frequently leave the facility (for example, for dialysis).
  o In addition, SNF residents hospitalized and requiring transmission-based precautions for COVID-19 or influenza should be discharged from the acute care setting when clinically appropriate, not based on the period of potential virus shedding or recommended duration of transmission-based precautions.
  o SNFs must prepare for and have the necessary staffing and PPE supplies available to implement transmission-based precautions as needed for residents re-admitted after hospitalization.

Additional Resources
• San Francisco Department of Public Health
  o Health advisories and alerts are posted at www.sfcdcp.org/health-alerts-emergencies/health-alerts/.
  o See www.sfcdcp.org/covid19hcp for additional COVID-19 information and guidance for San Francisco health care providers.
• California Department of Public Health
  o AFL 20-33.2: Interim Guidance for Transfer of Residents with Suspected or Confirmed Coronavirus Disease (COVID-19), available at https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-33.aspx