

SHS COVID19 Process for LTCF Patient Transfers: ACTIVE 4/10/20

This document outlines the process to be followed for movement of patients to and from LTCF and SHS hospitals during the COVID19 pandemic. The goal is to keep our patients at all sites safe and well cared for while maintaining access to potential limited resources in the hospital setting. This document provides process for COVID19 patient movement from LTCF to hospital, from hospital to LTCF, and suggestions for best practice within the LTCF.

Section I: LTCF to Hospital Transfer for suspected or known COVID19 patient

1. Transfer should only be considered if level of care needed exceeds LTCF capabilities
2. Confirmation recommending transfer from LTCF medical team should be obtained. If no medical director for facility exists, then the PCP should provide recommendation.
3. Prior to transfer, approval from patient and/or patient representative/family should be obtained
4. Patients at high risk for death (older age, lung or heart disease, immunocompromised state, diabetes) are discouraged for hospital transfer. This patient category has had very high mortality rates if require ICU level of care. Setting reasonable expectations and consideration for DNR with Limited Care Measures (as per POLST) are strongly encouraged.
5. Prior to transport arrangements, call to receiving ED and discussion between LTCF medical contact and ED doctor should take place for final transfer acceptance.

Section II: Hospital to LTCF transfer of known COVID19 patient

The following steps should be followed prior to transfer of suspected or confirmed COVID19 patients to any LTCF with or without known COVID19 patients.

1. **CDC Guidelines for removal of isolation precautions:** Pt should have no fever and improved respiratory symptoms for 72 hrs. Two COVID19 tests performed 24 hrs. apart need to be completed and negative
2. **DHS written approval is required.**
 - a. Contact LTCF DHS Policy Analyst via e-mail.
 - b. If not available, contact: Lance.PUGH@dhsola.state.or.us or Jeanne.m.bristol@dhsola.state.or.us
 - c. After hours emergency: (503) 586-9396

Section III: LTCF best practices guide

1. Care in place is best method unless transfer absolutely needed.
2. Follow CDC guidelines for LTCF COVID19 preparedness and best practices. Suspected positives can have testing performed on site (NH) or through PCP order and community testing sites. It is not appropriate to send patients to ED for testing purposes only.
3. Aggressive Oregon POLST update due to COVID19 pandemic. For high risk populations, DNR with limited care measures is strongly encouraged.
4. In Nursing Homes, daily clinician rounding on patients with fever, upper or lower respiratory symptoms or confirmed COVID19. If LTCF medical director not available or unable, SHS is prepared to offer local clinician support to accomplish daily rounding.