



Arkansas Department of Health

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Governor Asa Hutchinson
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ADH Guidance for Reducing Spread on COVID-19 in Long-Term Care Facilities

The Arkansas Department of Health (ADH) recommends the following actions when a health care worker or resident at a long-term care facility tests positive (regardless of symptoms) for COVID-19:

1. Immediately place a resident on contact and droplet precautions. Staff should wear personal protective equipment (PPE) as recommended by the Centers for Disease Control and Prevention for COVID-19, which would include a mask (surgical or N95), eye protection (face shield or goggles), gown, and gloves. Specifically, staff should wear N95 masks when providing direct care to positive residents during procedures that may generate aerosols. A surgical mask or cloth mask can be placed on the resident while staff are providing care for source control, especially if they are coughing.
2. Any worker that is symptomatic (fever, cough, shortness of breath, or other COVID-19 symptom) must be excluded from work, regardless of test result.
3. All staff should wear masks (surgical) while in the building and residents should wear a facemask when they are out of the building. Residents that regularly leave the building due to medically necessary appointments, such as dialysis, should wear a surgical mask while they are in the building and not in their rooms.
4. The facility should plan to test all residents and staff for COVID-19 as quickly as possible. There are situations in which the date of testing needs to be determined that includes consideration of the incubation period of the virus. Due to the variability in this matter, facility-wide testing strategies can be discussed with the ADH to maximize effectiveness of results to halt transmission. The facility should implement cohorting based on available information and adequate PPE precautions taken until receipt of a negative result.
 - a. **Priority should be given to residents that reside on the same hall as a positive resident or had direct contact with a positive health care worker.**
 - b. If testing supplies are not limited, all residents and healthcare workers should be tested at the same time.
 - c. If testing supplies are limited, the testing should be prioritized in the following order. This will allow actionable results to be obtained as quickly as possible.
 - 1) Staff who are assigned to the hallway of a positive resident or had close contact (more than just walking by) with the positive resident or health care worker.
 - 2) All other residents.
 - 3) All other staff.
5. Facilities should identify a specific wing or hall in the building that can be a designated area for positive residents that is separate from negative residents. All positive residents should

be placed in this area (ideally each in a private room). This wing or hall should have dedicated staff who only work in this area. Residents can have transmission-based precautions discontinued after 21 days from onset of symptoms or date of test result (for asymptomatic residents) and who have had an improvement in symptoms, such as no fever in the last 24 hours without the use of a fever-reducing medication. The test-based strategy is no longer recommended. Please comply with all CMS and DHS rules related to movement and treatment of residents.

6. Facilities should identify a specific wing or hall in the building that can be a designated quarantine area for residents who have had a prolonged direct exposure (within 6 feet of the person for more than 15 consecutive minutes) to a positive resident or healthcare worker. All exposed residents should be placed in this area for quarantine (ideally each in a private room) for 14 days from the date of last exposure. The same personal protective equipment should be worn as with a positive resident. Please comply with all CMS and DHS rules related to movement and treatment of residents.
7. Residents that test positive can be housed together in the same room.
8. Symptom monitoring should be increased to at least 3 times a day for residents when a positive resident or worker is identified in the facility.
9. Asymptomatic health care workers with pending tests can continue to work with a mask on. Symptom monitoring should continue throughout their shift. If they develop symptoms they should immediately be excluded from work. This should be strictly enforced.
10. Health care workers who are identified as close contacts and have pending tests or who have been exposed but do not know their COVID-19 status should follow ADH guidance to fully quarantine when not at work.
11. Healthcare workers that test positive can return to work during their isolation period under the following circumstances once a waiver has been received from DHS to allow them to do so:
 - a. There is a critical shortage of workers and The Administrator of the facility determines that medically necessary care cannot occur without the use of these workers. If you would like ADH assistance in this decision making process, please email us.
 - b. Positive workers are only allowed to care for positive residents located in a dedicated COVID-19 positive area.
 - c. Positive workers will always wear a mask and symptom monitor throughout their shift, if a positive worker becomes symptomatic (cough, fever, shortness of breath) they will be immediately excluded from work.

NOTE: Positive staff who continue to work should avoid contact with other staff, isolate at home and avoid contact with others when commuting (e.g. no shared rides, no shopping).

Questions: Email us at ADH.HAI@ARKANSAS.GOV