

## COVID-19 Point Prevalence Testing Considerations

A point prevalence survey, or PPS, is an epidemiologic tool to assess the number of people in a group with a disease or condition at a specific point in time. The New Jersey Department of Health (NJDOH) recommends that when LTCFs perform facility-wide COVID-19 point-prevalence testing, they should plan in advance to take quick actions based on the results and to adopt a strategy to re-test patients/residents and staff who were found to be negative on the initial round of testing. A PPS for COVID-19 requires collection and testing of a surveillance specimen from all patients/residents and staff in a facility or unit. A PPS can provide useful information for healthcare facilities to guide infection prevention efforts and identify patients/residents who are at risk of spreading or developing COVID-19 infections.

LTCFs that perform a PPS for COVID-19 should use these results to describe the scope and magnitude of the facility outbreak and to help inform allocation of resources and additional interventions to further limit transmission. Because asymptomatic and pre-symptomatic persons likely play an important role in transmission in this high-risk population, additional prevention measures merit consideration, including using PPS to guide work exclusion, isolation, and cohorting strategies. Successful implementation of interventions lead to efficient use of PPE, effective implementation of infection control strategies and reduce ongoing transmission within a facility. **Testing should not supersede existing infection prevention and control interventions.** Results from testing should help inform and build upon already existing infection prevention and control measures recommended by NJDOH and the Centers for Disease Control and Prevention (CDC).

Early reports from nursing homes impacted by COVID-19 suggest that at the time a confirmed case of COVID-19 is identified in a patient/resident, there are already asymptomatic patients/residents with COVID-19 present in the facility. PPS of all persons in the facility can help further identify asymptomatic or pre-symptomatic infections. When undertaking a facility-wide PPS, facility leadership should be prepared for the potential outcomes, which may include identifying multiple COVID-19 positive persons. When a COVID-19 PPS is conducted the results may be used to:

- Determine the burden of COVID-19 across the facility.
- Inform cohorting of patients/residents and separate those with laboratory confirmed COVID-19 infection from others.
- Inform resource allocation.
- Support discontinuation criteria for transmission-based precautions for those existing patients/residents who are laboratory confirmed COVID-19.
- Identify staff with COVID-19 infection for work exclusion.
- Enable staff to return to work after being excluded for COVID-19 infection.

**NOTE:** A PPS captures information at a single point in time. Patients/residents who test negative on the day of the survey could be incubating and later test positive for COVID-19. Repeat testing (i.e., serial PPSs) may be recommended if transmission continues in the facility. COVID-19 containment and response is often a rapidly evolving situation in LTCFs and therefore those who tests positive/negative for the virus can change day by day.

## Inclusion criteria for COVID-19 PPS

Not every LTCF is an ideal candidate for conducting COVID-19 PPSs. LTCFs with known widespread transmission of COVID-19 will likely not change infection prevention and control practices based on these results. Additionally, LTCFs already facing crisis levels of staffing shortages might not be able to mitigate multiple positive staff being furloughed. Plans should be made in advance of testing to determine strategies to handle a potential large number of positive results. When determining appropriateness of facility participation multiple factors should be considered. Criteria should include that the facility:

- Identified as having single or few COVID-19 case(s) or is COVID-19 naive.
- Established cohorting plan including an implementation plan.
- Developed a staffing plan to allow exclusion of COVID-19 positive staff.
- Established testing capacity to identify COVID-19 to include a relatively fast (1-2 days) turnaround time for results.
- Established occupational health protocols regarding consent for testing and timely notification and disclosure of results.

## Testing considerations

When a PPS is pursued, and if testing capacity allows, a PPS should include **ALL** patients/residents and staff at an impacted facility or unit. However, when resources are limited alterations may need to be considered. See below for further considerations for testing of HCP and patients/residents when testing capacity is not sufficient for facility-wide PPS.

### Considerations for limited testing of patients/residents:

- Prioritize PPS testing on units with symptomatic patients/residents.
- If testing capacity is not sufficient for unit-wide PPS, testing should be prioritized for symptomatic patients/residents and other high-risk persons. This may include persons admitted from another facility, such as a hospital, or those who leave the facility regularly for dialysis or other services.

### Considerations for limited testing of staff:

- Prioritize PPS testing for symptomatic staff or staff with high-risk exposures.
- If staff are not available the time/day of the PPS testing, it is still recommended that they are tested as soon as possible to be captured in the PPS testing event. It is **not** recommended that staff are excluded from work if they are not available for the facility-wide testing.
- Consider not testing staff who do not work in any patient/resident care areas and limited contact with other staff. This may include kitchen staff, groundskeeping, delivery personnel.

## Data Collection for PPS

Data collection surrounding the PPS is important to ensure that appropriate actions are implemented when the results of the PPS are available. Information should be collected before, during and after the PPS to help further define the scope and severity of COVID-19 within the facility. Data collection will help summarize the circumstances before the PPS was undertaken, what was found in the initial testing effort, and what impact the testing had on transmission and other factors at the facility. Information gathered is vital to tailor infection prevention and control measures and minimize the scope and severity of COVID-19 at the facility.