

The Center for Nursing and Rehabilitation at Hoosick Falls Infectious Disease/Pandemic Emergency Plan Checklist

Preparedness Tasks for all Infectious Disease Events

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| <input type="checkbox"/> Required | <p>Provide staff education on infectious diseases (e.g., reporting requirements (see Annex K of the CEMP toolkit), exposure risks, symptoms, prevention, and infection control, correct use of personal protective equipment, regulations, including 10 NYCRR 415.3(i)(3)(iii), 415.19, and 415.26(i); 42 CFR 483.15(e) and 42 CFR § 483.80), and Federal and State guidance/requirements.</p> <p>Facility Process: CNR conducts staff education annually through Net learning, within orientation, and as needed.</p> |
| <input type="checkbox"/> Required | <p>Develop/Review/Revise and Enforce existing infection prevention, control, and reporting policies.</p> <p>Facility Process:</p> <ul style="list-style-type: none"> • Policy Number: 6821 Cleaning Corridors, Elevators and Stairways-CNR • Procedure ID: 6822 Cleaning Disinfecting of Computer Tablets Procedure-CNR • Procedure ID: 6837 Cleaning Linen Storage Carts Procedure-CNR • Procedure ID: 6823 Cleaning of Non-Critical Items-CNR • Policy Number: 6824 Cleaning Portable Commodes and IV Poles-CNR • Policy Number: 6825 Cleaning Procedure for Infectious Waste and Trash Removal_CNR • Procedure ID: 6826 Cleaning Resident Patient Room Procedure-CNR • Procedure ID: 6272 Department Equipment Cleaning-CNR Housekeeping • Procedure ID: 6270 Precaution Room Cleaning Procedure-CNR Housekeeping • Procedure ID: 6269 Room Cleaning-Routine Resident, Ancillary, and Discharge-CNR Housekeeping • Policy ID: 6741 Infection Prevention and Control Program • Policy ID: 6936 Coronavirus (COVID-19) Policy-CNR Infection Control |
| <input type="checkbox"/> Recommended | <p>Conduct routine/ongoing, infectious disease surveillance that is adequate to identify background rates of infectious diseases and detect significant increases above those rates. This will allow for immediate identification when rates increase above these usual Baseline.</p> <p>Facility Process:</p> <ul style="list-style-type: none"> • Policy ID: 6936 Coronavirus (COVID-19) Policy-CNR Infection Control • Policy ID: 6740 Infection Control Standards Policy • Policy ID: 6741 Infection Prevention and Control Program |

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| <input type="checkbox"/> Recommended | Develop/Review/Revise plan for staff testing/laboratory services. Facility Process: CNR follows NYS executive order guidelines for testing employees and residents. CNR works with Quest Laboratory Services. <ul style="list-style-type: none"> • Policy ID: 6936 Coronavirus (COVID-19) Policy-CNR Infection Control • Policy ID: 6940 Coronavirus Periodic Testing of Health Care Workers and Employees for SARS-CoV-2 • https://www.questdiagnostics.com/home/Covid-19/HCP/ |
| <input type="checkbox"/> Required | Review and assure that there is, adequate facility staff access to communicable disease reporting tools and other outbreak specific reporting requirements on the Health Commerce System (e.g., Nosocomial Outbreak Reporting Application (NORA), HERDS surveys) Facility Process: <ul style="list-style-type: none"> • Director of Nursing and Infection Control Nurse maintain facility reporting practices in regards to communicable disease. • Individuals with access: DON, Infection Prevention Nurse, Administrator, Assistant Administrator. |
| <input type="checkbox"/> Required | Develop/Review/Revise internal policies and procedures, to stock up on medications, environmental cleaning agents, and personal protective equipment as necessary. (Include facility’s medical director, Director of Nursing, Infection Control Practitioner, safety officer, human resource director, local and state public health authorities, and others as appropriate in the process) Facility Process: <ul style="list-style-type: none"> • Policy ID: 6345 Emergency Preparedness Plan General Information |
| <input type="checkbox"/> Recommended | Develop/Review/Revise administrative controls (e.g., visitor policies, employee absentee plans, staff wellness/symptoms monitoring, human resource issues for employee leave). Facility Process: <ul style="list-style-type: none"> • Policy ID: 6973 COVID-19 End of Life Visit Guidelines • Policy ID: 6974 COVID-19 Visitor Guidelines • Policy ID: 6752 Scheduling and Staffing |
| <input type="checkbox"/> Required | Develop/Review/Revise environmental controls (e.g., areas for contaminated waste) Facility Process: <ul style="list-style-type: none"> • Policy ID: 6825 Cleaning Procedure for Infectious Waste and Trash Removal |

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| <input type="checkbox"/> Required | Develop/Review/Revise vendor supply plan for re-supply of food, water, medications, other supplies, and sanitizing agents. Facility Process: <ul style="list-style-type: none"> Policy ID: 6345 Emergency Preparedness Plan General Information |
| <input type="checkbox"/> Required | Develop/Review/Revise facility plan to ensure that residents are isolated/cohorted and or transferred based on their infection status in accordance with applicable NYSDOH and Centers for Disease Control and Prevention (CDC) guidance Facility Process: <ul style="list-style-type: none"> Policy ID: 6742 Isolation and Removal Guidelines Policy |
| <input type="checkbox"/> Recommended | Develop plans for cohorting, including using of a part of a unit, dedicated floor, or wing in the facility or a group of rooms at the end of the unit, and discontinuing any sharing of a bathroom with residents outside the cohort. Facility Process: <ul style="list-style-type: none"> Policy ID: 6742 Isolation and Removal Guidelines Policy |
| <input type="checkbox"/> Recommended | Develop/Review/Revise a plan to ensure social distancing measures can be put into place where indicated. Facility Process: CNR follows CMS/NYSDOH guidelines on having no communal dining or group activities at this time. <ul style="list-style-type: none"> Reference NYS Forward Safety Plan. |
| <input type="checkbox"/> Recommended | Develop/Review/Revise a plan to recover/return to normal operations when, and as specified by, State and CDC guidance at the time of each specific infectious disease or pandemic event e.g., regarding how, when, which activities /procedures /restrictions may be eliminated, restored and the timing of when those changes may be executed. Facility Process: CNR will continue to adjust practices/policies to fit NYSDOH and CMS Guidelines. |
| Additional Preparedness Planning Tasks for <u>Pandemic Events</u> | |
| <input type="checkbox"/> Required | <i>In accordance with PEP requirements,</i> Develop/Review/Revise a Pandemic Communication Plan that includes all required elements of the PEP. <ul style="list-style-type: none"> Facility Communication Plan |
| <input type="checkbox"/> Required | <i>In accordance with PEP requirements,</i> Development/Review/Revise plans for protection of staff, residents and families against infection that includes all required elements of the PEP. <ul style="list-style-type: none"> Policy ID: 6973 Coronavirus End of Life Visit Guidelines Policy Policy ID: 6962 Coronavirus Personal Protective Equipment (PPE) Policy ID: 6941 Coronavirus Staff Frequently Asked Questions (FAQ) |

Response Tasks for all Infectious Disease Events:

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| <input type="checkbox"/> Recommended | The facility will implement the following procedures to obtain and maintain current guidance, signage, advisories from the NYSDOH and the U.S. Centers for Disease Control and Prevention (CDC) on disease-specific response actions, e.g., including management of residents and staff suspected or confirmed to have disease: <ul style="list-style-type: none"> • Signage from SVHC, CDC, NYSDOH • Sharing on Facility Webpage and Facebook |
| <input type="checkbox"/> Required | The facility will assure it meets all reporting requirements for suspected or confirmed communicable diseases as mandated under the New York State Sanitary Code (10 NYCRR 2.10 Part 2), as well as by 10 NYCRR 415.19. (see Annex K of the CEMP toolkit for reporting requirements. <ul style="list-style-type: none"> • Policy 6740: Infection Control Standards Policy • Policy 6828: Outbreak-Infectious Disease-Decision Making |
| <input type="checkbox"/> Required | The facility will assure it meets all reporting requirements of the Health Commerce System, e.g. HERDS survey reporting. <p>Facility Process:</p> <ul style="list-style-type: none"> • Director of Nursing and Infection Control Nurse maintain facility-reporting practices. Individuals with access: DON, Infection Prevention Nurse, Administrator, Assistant Administrator. |
| <input type="checkbox"/> Recommended | The Infection Control Practitioner will clearly post signs for cough etiquette, hand washing, and other hygiene measures in high visibility areas. Consider providing hand sanitizer and face/nose masks, if practical. |
| <input type="checkbox"/> Recommended | The facility will implement the following procedures to limit exposure between infected and non-infected persons and consider segregation of ill persons, in accordance with any applicable NYSDOH and CDC guidance, as well as with facility infection control and prevention program policies. <p>Facility Process:</p> <ul style="list-style-type: none"> • Policy ID: 6742 Isolation and Removal Guidelines Policy • Policy ID: 6828 Outbreak-Infectious Disease-Decision Making • Policy ID: 6937 Coronavirus Phase 1 |
| <input type="checkbox"/> Recommended | The facility will implement the following procedures to ensure that as much as is possible, separate staffing is provided to care for each infection status cohort, including surge staffing strategies: <p>Facility Process:</p> <ul style="list-style-type: none"> • Policy ID: 6742 Isolation and Removal Guidelines Policy |

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| | <ul style="list-style-type: none"> • Policy ID: 6828 Outbreak-Infectious Disease-Decision Making • Policy ID: 6937 Coronavirus Phase 1 |
| <input type="checkbox"/> Recommended | <p>The facility will conduct cleaning/decontamination in response to the infectious disease in accordance with any applicable NYSDOH, EPA and CDC guidance, as well as with facility policy for cleaning and disinfecting of isolation rooms.</p> |
| <input type="checkbox"/> Required | <p>The facility will implement the following procedures to provide residents, relatives, and friends with education about the disease and the facility's response strategy at a level appropriate to their interests and need for information.</p> <ul style="list-style-type: none"> • Website provides information to families on the following: <ul style="list-style-type: none"> ◦ SVHC information, CDC, NYSDOH • Periodic Letters to Families with updates • Handouts to families during approved visitation • Facility Communication Plan |
| <input type="checkbox"/> Recommended | <p>The facility will contact all staff, vendors, other relevant stakeholders on the facility's policies and procedures related to minimizing exposure risks to residents</p> <p>Facility Process:</p> <ul style="list-style-type: none"> • Letter, Emails, Board Meetings with updates. • Vendors are provide information prior to coming to the facility |
| <input type="checkbox"/> Required | <p>Subject to any superseding New York State Executive Orders and/or NYSDOH guidance that may otherwise temporarily prohibit visitors, the facility will advise visitors to limit visits to reduce exposure risk to residents and staff.</p> <p>If necessary, and in accordance with applicable New York State Executive Orders and/or NYSDOH guidance, the facility will implement the following procedures to close the facility to new admissions, limit visitors when there are confirmed cases in the community and/or to screen all permitted visitors for signs of infection:</p> <p>Facility Process:</p> <ul style="list-style-type: none"> • Policy ID: 6937 Coronavirus Phase 1 |
| Additional Response Tasks for <u>Pandemic Events</u>: | |
| <input type="checkbox"/> Recommended | <p>Ensure staff are using PPE properly (appropriate fit, don/doff, appropriate choice of PPE per procedures)</p> <p>Facility Process:</p> <ul style="list-style-type: none"> • Policy ID: 6962 Coronavirus Personal Protective Equipment (PPE) • Policy ID: 6941 Coronavirus Staff Frequently Asked Questions (FAQ) |

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| <input type="checkbox"/> Required | <p><i>In accordance with PEP requirements</i>, the facility will follow the following procedures to post a copy of the facility’s PEP, in a form acceptable to the commissioner, on the facility’s public website, and make available immediately upon request:</p> <p>Facility Process:</p> <ul style="list-style-type: none"> • Facility PEP will be posted on September 15, 2020 on the facility website. • Facility will repost with any changes or additions. |
| <input type="checkbox"/> Required | <p>In accordance with PEP requirements, the facility will utilize the following methods to update authorized family members and guardians of infected residents (i.e., those infected with a pandemic-related infection) at least once per day and upon a change in a resident's condition:</p> <p>Facility Process:</p> <ul style="list-style-type: none"> • Policy ID: 6936 Coronavirus (COVID-19) Policy |
| <input type="checkbox"/> Required | <p><i>In accordance with PEP requirements</i>, the facility will implement the following procedures/methods to ensure that all residents and authorized families and guardians are updated at least once a week on the number of pandemic-related infections and deaths at the facility, including residents with a pandemic-related infection who pass away for reasons other than such infection:</p> <p>Facility Process:</p> <ul style="list-style-type: none"> • Policy ID: 6936 Coronavirus (COVID-19) Policy |
| <input type="checkbox"/> Required | <p><i>In accordance with PEP requirements</i>, the facility will implement the following mechanisms to provide all residents with no cost daily access to remote videoconference or equivalent communication methods with family members and guardians:</p> <p>Facility Process:</p> <ul style="list-style-type: none"> • Policy ID: 6936 Coronavirus (COVID-19) Policy |
| <input type="checkbox"/> Required | <p><i>In accordance with PEP requirements</i>, the facility will implement the following process/procedures to assure hospitalized residents will be admitted or readmitted to such residential health care facility or alternate care site after treatment, in accordance with all applicable laws and regulations, including but not limited to 10 NYCRR 415.3(i)(3)(iii), 415.19, and 415.26(i); and 42 CFR 483.15(e):</p> <p>Facility Process:</p> <ul style="list-style-type: none"> • Follow NYS guidelines to admit/readmit following a negative COVID test. |

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| <input type="checkbox"/> Required | <p><i>In accordance with PEP requirements</i>, the facility will implement the following process to preserve a resident's place in a residential health care facility if such resident is hospitalized, in accordance with all applicable laws and regulations including but not limited to 18 NYCRR 505.9(d)(6) and 42 CFR 483.15(e):</p> <p>Facility Process:</p> <ul style="list-style-type: none"> • Policy ID: 6339 Bed Hold Notification • Job Aid ID: 6334 Bed Hold Notification Letter |
| <input type="checkbox"/> Required | <p><i>In accordance with PEP requirements</i>, the facility will implement the following planned procedures to maintain or contract to have at least a two-month (60-day) supply of personal protective equipment (including consideration of space for storage) <u>or any superseding requirements under New York State Executive Orders and/or NYSDOH regulations governing PPE supply requirements executed during a specific disease outbreak or pandemic</u>. As a minimum, all types of PPE found to be necessary in the COVID pandemic should be included in the 60-day stockpile. This includes, but is not limited to:</p> <ul style="list-style-type: none"> • N95 respirators • Face shield • Eye protection • Gowns/isolation gowns • Gloves • Masks • Sanitizer and disinfectants (meeting EPA Guidance current at the time of the pandemic) <p>Facility Process:</p> <ul style="list-style-type: none"> • Storage Location (Located in the basement-Shown on #10 Basement Floor Plan) • Vendors: Medline, Amazon, SVHC, Angelica, Greenex Chemical • Donations • Policy ID: 6962 Coronavirus Personal Protective Equipment (PPE) |
| Recovery for <u>all Infectious Disease Events</u> | |
| <input type="checkbox"/> Required | <p>The facility will maintain review of, and implement procedures provided in NYSDOH and CDC recovery guidance that is issued at the time of each specific infectious disease or pandemic event, regarding how, when, which activities/procedures/restrictions may be eliminated, restored and the timing of when those changes may be executed.</p> |
| <input type="checkbox"/> Required | <p>The facility will communicate any relevant activities regarding recovery/return to normal operations, with staff, families/guardians and other relevant stakeholders</p> |