

POLICY AND PROCEDURE
COVID-19 Pandemic Guided Plan

Department: Nursing

Subject: COVID-19 Pandemic Guided Plan

Policy Initiated: 03/2020

Revised:

Mission Statement

Seacrest Village, a quality adult health care community, is committed to providing comprehensive health care to its residents and members.

The owners, staff and volunteers are guided by our moral and ethical responsibility to our fellow man.

Seacrest Village will provide the services necessary to enhance the physical, emotional, recreational, social and spiritual needs of our residents, members, and family members.

Vision Statement

Seacrest Village will plan and develop a continuum of health care services for older adults in a community setting. We will affiliate, network and associate with other health service organizations to meet our goal of a seamless health care community.

I. Decision Making and Coordination: Administration

A. Crisis Communication/Media*Relation Policy.

II. Surveillance and Laboratory testing: Medical Director/DON/ Infection Preventionist

A. Identification and Testing: Professional staff will be trained on testing procedures upon availability by the Department of Health/ CDC. Symptomatic residents will be placed on isolation according to the Isolation protocol. Local Health Department will be contacted for any Person Under Investigation (PUI) to be tested according to procedures from the State Lab. Early identification is important.

III. Triage of Patients: Medical Director/ DON/ Infection Preventionist (add)

A. Staff will follow the facility policies on infection control issues.

IV. Human Resources for Patient Care: Administrator/HR /Accounting Manager

A. Staffing:

➤ **Time-off Policies/Longer work Hours:**

- ◆ Anyone approved for time off prior to the outbreak would be subject to having this approval revoked if necessary until the outbreak is abated.
- ◆ Possible 12hr shifts and 6 day work weeks. Incentives will be offered.
- ◆ Employees will have extra uniforms on hand at all times.

- **Use of Staff not usually involved in Patient Care:**
 - ◆ All departments will perform tasks not usually in their area of service and help care of the residents.
- **Use of Community Volunteers:**
 - ◆ Local church help
- **Staffing Related to Non-Traditional Facilities:**
 - ◆ In the event that evacuation is required:
 - Emergency Transfers Agreements will take effect with local nursing homes (Mystic Meadows, Barnegat Nursing Home, Health Center at Galloway, SONAR).
 - Medical records (chart) will be sent with the resident.
 - Resident medications will be transferred.
 - Staff will be deployed as necessary to the evacuation site to care for the residents transferred.
 - Staff prepared to set up additional holding areas for individuals with the COVID-19.
- Employees will be screened for respiratory symptoms including temperatures, recent travels and close contact with symptomatic individuals.

V. Physical Resources for Patient Care: Maintenance Director/Dietary Director/ Housekeeping Director

A. Bed Availability including Intensive Care:

- SOCH-12 beds
- APMC-12 beds

B. Equipment: Maintenance and Central Supply

- Ample supply of cots available from Maintenance
- Isolation Materials on hand from Central Supply.
 - ◆ Gloves
 - ◆ Gowns
 - ◆ Mask
 - ◆ Protective Eyewear
- Isolation carts/ set-up
- Isolation trash and linen containers.
- Designated Equipment: Recommended disposable thermometers, head strips, available wipes.

C. Supplies:

Dietary

- **Clear Liquid Availability**- Apple juice, tea, jello, individual packets of chicken broth, consommés
- **Emergency food items on hand**- a 2-week supply of various food items are kept on hand at all times in the event of any type of occurrence. (See attached menu).
- **Disposables**-approximately 2000-3000 pieces of plastic cutlery, assorted sized plates, drinking cups and soup cups are available.
- **Individual single serve condiments**- all condiments are available in single serving proportions.
- **The ability to serve in numerous different areas**- The Dietary Dep't. has the ability to serve meals in areas not normally designated for meals service if there is a segregated population.
- **A back up full-service distributor**- in the event of an outbreak. U.S. Foods is the facility's distributor.

Housekeeping

- **Cleaning Supply Availability** – 1- week supply of various cleaning materials are kept on hand at all times in the event of any type of occurrence.(add)

VI. Education and Training: Medical Director/ Infection Preventionist

- A. Training and in-services will be made by the Medical Director and Infection Preventionist for the entire facility.
- B. Educational materials are available for staff and family members.

VII. COVID-19 Vaccination of Staff: Infection Preventionist

- A. COVID-19 vaccination when available. There is currently no vaccine to prevent Coronavirus Disease 2019 (COVID-19).

VIII. Care of Deceased: Nursing

A. Morgue Capacity:

- Medical Examiners office has capacity of 6 (used by them 1st)
- SOCH has capacity of 5
- APMC has capacity of 5
- Refrigerated vehicles would be necessary if the amount of deceased is great.
- Local funeral homes would need to be contacted (Woods, Maxwell)

B. Religious/Cultural Issues Surrounding Death:

- Local Priest, Ministers and Rabies are available and 24 hour contact information is available to the facility.
- Social Workers will call families and provide support to the families.

C. Issues surrounding Autopsies:

- Family member, Primary Physician and Mortuaries are responsible for ordering autopsies.

D. Policy and Procedures:

- Corpse Removal from Premises Policy
- Death of Resident Policy
- Post Mortem Care Policy

IX. Mental health issues for patients and staff:

- A. Facility Psychiatrist and Psychologist will be available.

X. Business Continuity: Administrator/Accounting Manager

A. Preparation for possibility of Covid-19 Epidemic with Business Associate/Suppliers.

- A formal letter has been sent to our Business Associate/Suppliers in regards to establishing a strategic plan to continue serving us in an event there is an outbreak. We also will be prepared with alternative service and or/supply sources.
- Management will keep safe IT information.
- Banking, Payroll and Billing will continue as usual.

XI. Infection Control: Medical Director/Infection Preventionist

A. Each of the Units and all departments has been given educational materials that contains Infection Prevention and COVID-19 specific to their job duties.

- Isolation Precautions
- Contact Precautions
- Droplet Precautions
- Standard Precautions

B. Standard Precautions:

- Standard Precautions are designed to reduce the risk of transmission of microorganisms from both recognized and unrecognized sources of infection.
 - ◆ Handwashing
 - ◆ Gloves
 - ◆ Mask, Eye Protection, Face Shields
 - ◆ Gown
 - ◆ Patient Care Equipment
 - ◆ Environmental Control
 - ◆ Linen
 - ◆ Patient Placement

C. Droplet/ Airborne Precautions:

- Droplet or Appropriate Precautions as designated by the local health department are designed to reduce the risk of droplet transmission of infectious agents. Droplet transmission involves contact of the conjunctivae or the mucous membranes of the nose or mouth of a susceptible person with large-particle droplets.
- In addition to Standard Precautions, use Droplet Precautions, or the equivalent, for a patient known or suspected to be infected.
- Seacrest does not have negative pressure room.

D. Respiratory hygiene/cough etiquette:

- Posters are posted in the facility and handouts are available.

E. Staff Education:

- Training and In-Services will be made by the Medical Director and Infection Preventionist for the entire facility.
- Employees who have recently traveled or showing signs of respiratory illness will be screened. Appropriate quarantine period might have to be imposed. Employees work eligibility will be determined by the clinical team if they develop respiratory symptoms.

F. Bed Management:

- Cohorting can be communicable for two days prior to symptoms.
- Cohort can be done by room, by wing, by floor.

G. Patient Transport:

- Limit the movement and transport of the patient from the room to essential purposes only. If patient is transported out of room, ensure that precautions are maintained to minimize the risk of transmission of microorganisms to other patients and contamination of environmental surfaces and or equipment.

H. Cleaning, Disinfection, and Sterilization:

- Housekeeping and Maintenance Departments will take care of all cleaning and disinfection of the facility.

I. Patient Education:

- Hygiene and Cough Etiquette
- Handwashing
- Drinking lots of Fluid
- Plenty of Rest

J. Visitation Policy:

- The Administrator and the Medical Director has the authority to prohibit facility visitation during communicable disease outbreaks.
- Visitors should be discouraged from visiting when they have infectious conditions.
- Screening for visitors who should be restricted including those who have had recent travels, respiratory symptoms, and close contacts with people who had recent travels and exhibiting respiratory symptoms.
- Appropriate Isolation signage will be placed in the facility.
- Visitors and Vendors will be redirected to use the main lobby (Manor) for screening purposes. Movement of vendors inside the facility will be limited to nurses' station.
- Restriction of visitations will be based on CDC/OCHD recommendations and administrative decisions.

K. Admission Screening

- All admissions/ readmissions will be screened upon referral and admission for active respiratory symptoms. Vital signs every shift for 14 days will be taken.

L. Contact Tracing:

- Patient Symptoms Line Listing form will be implemented by Infection Preventionist. This list will be submitted to the Ocean County Health Department if warranted.

M. Outbreak Control:

- If more than two residents on the same floor present the same symptoms, the Infection Preventionist/ DON will be notified.
- Strict hand washing will be emphasized, as well as contact precautions.
- Symptomatic residents should remain in their rooms if possible and placed on isolation.
- The same staff will be maintained to prevent the spread of infection.

N. Reporting:

- DON, Administrator, Owner, Medical Director, PCP, Infection Preventionist
- Department of Health and Senior Services
- Local Health Department
- CDC