

# Villa Raffaella Assisted Living Outbreak Response Plan

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It is the goal of Villa Raffaella Assisted Living to protect our residents, families, and staff from harm resulting from exposure to an emergent infectious disease while they are in our care center.

The Villa Raffaella emergency operation program will include a response plan for a community-wide infectious disease outbreak such as pandemic influenza. This plan will:

- i. build on the workplace practices described in the infection prevention and control policies
- ii. include administrative controls (screening, isolation, visitor policies and employee absentee plans)
- iii. address environmental controls (isolation rooms, plastic barriers sanitation stations, and special areas for contaminated wastes)
- iv. Address human resource issues such as employee leave
- v. Be compatible with the care center's business continuity plan b.

Villa Raffaella leadership will be vigilant and stay informed about EIDs around the world to be knowledgeable of potential risks of new infections in their geographic location through the changes to existing organisms and/or immigration, tourism, or other circumstances.

Once notified by the public health authorities at either the federal, state and/or local level that the EID is likely to or already has spread to the surrounding community, the center will activate specific surveillance and screening as instructed by Centers for Disease Control and Prevention (CDC), state agency and/or the local public health authorities.

The Wellness Director will research the specific signs, symptoms, incubation period, and route of infection, the risks of exposure, and the recommendations for assisted living centers as provided by the CDC, Occupational Health and Safety Administration (OSHA), and other relevant local, state and federal public health agencies.

Working with advice from local and state public health authorities, and others as appropriate, management will review and revise internal policies and procedures, review the need to stockpile food, supplies, environmental cleaning agents, and personal protective equipment as indicated by the specific disease threat.

Staff will be educated on the exposure risks, symptoms, and prevention of the EID. Place special emphasis on reviewing the basic infection prevention and control, proper use of PPE, isolation, and other infection prevention strategies such as hand washing.

Provide residents and families with education about the disease and the Villa Raffaella's response strategy at a level appropriate to their interests and need for information.

Brief other relevant stakeholders on the care center's policies and procedures related to minimizing exposure risks to residents.

Post signs regarding hand sanitation and respiratory etiquette and/or other prevention strategies relevant to the route of infection at the entry of the care center along with the instruction that no one who is sick must enter the building. Villa Raffaella may at management's discretion restrict visitation to all non-essential persons.

To ensure that staff, and/or new residents are not at risk of spreading the EID into the facility, screening for exposure risk and signs and symptoms may be done PRIOR to admission of a new resident and/or allowing new staff persons to report to work. Villa Raffaella may at management's discretion restrict new admissions to the facility.

**Testing:**

Laboratory testing will be performed based on guidance from the resident's primary care physician and or at the direction of the local or state department of health. In the event that customary laboratory testing providers are unable to respond to the request, facility will refer the request to the local department of health or local office of emergency management for guidance and arrangements.

Facility will obtain prescription from physician, document testing order and results in the medical record.

**Testing for COVID 19:**

Effective May 12, 2020 in compliance with New Jersey Department of Health Executive Order # 20-013 the following COVID 19 testing procedure will be implemented.

All residents and staff will undergo mandatory testing for COVID 19 no later than May 26, 2020. After initial mandatory testing, any resident who exhibits signs or symptoms will undergo testing. Any staff member who exhibits signs or symptoms while on duty will undergo testing. If employee is off duty and calls and reports to management that they are experiencing signs or symptoms will be required to contact their own PCP or arrange to undergo testing at a community testing location.

Initial baseline testing shall be performed on all residents and staff members.

Persons who test negative at baseline will be re-tested within 3-7 days after baseline testing. Any further follow-up testing will be based on CDC and NJ Department of Health guidance.

Further retesting will be completed in accordance with CDC and NJ Department of Health guidance. As a practical guideline, Villa Raffaella will test residents and staff every two weeks during the Covid 19 pandemic unless we receive alternate guidelines from local or State DOH and or CDC.

Any resident or staff who is newly symptomatic consistent with Covid 19 will be tested at the onset of symptoms, regardless of the interval between the most recent negative test and the symptom onset.

Based on DOH and CDC guidelines, residents or staff members who have tested positive will utilize symptom-based criteria to determine resolution of the virus. Residents or staff who have tested positive for the virus will be excluded from further routine testing.

Staff written authorization shall be obtained for the release of laboratory test results to Villa Raffaella Assisted Living and Local and State Department of Health agencies as may be required.

Testing will be performed onsite when possible. Documentation of testing and results will be included in the resident's medical record or the staff member's health information file.

### **Notification Guidelines:**

In the event of an Infectious outbreak, Villa Raffaella Assisted Living will make all reasonable efforts to provide proper notification to staff members, residents, family members, community stakeholders as well as applicable local and state agencies.

**Staff members:** Communication of outbreak status will be conducted via written communication as well as face to face on-site training (signature attendance sheet will be implemented) as well as facility postings. If need be notification may also be conducted via telephone and then documented.

**Residents:** Communication will be conducted face to face by management staff (this may be done individually or in-group meetings) and/or via written communication.

**Family Members:** Family notification will occur utilizing any of the following methods, email, written communication, facility postings, telephone contact. For notification purposes, the responsible party on record will be contacted. In addition, when applicable, relevant information will also be posted on facility website. During times of suspended visitation facility updates will be provided at least weekly.

**Community Stakeholders:** Relevant information will be posted on Facility website. Facility postings will also be utilized.

**Local and State Agencies:** The management will report outbreaks to public health officials in compliance with current laws and regulations. Based on established reporting criteria facility management will provide notification via telephone and/or written communication. Management will document. Applicable telephone numbers are available in the administrator office.

### **Guidelines specific to COVID 19 Outbreak:**

Effective 4/4/2020 Notification is to be completed within 24 hours to all facility residents, staff members, permissible visitors and the contact person whenever or in each instance a case of COVID 19 has been diagnosed in a resident or staff member of the facility or the facility has a resident or staff member who is a person under investigation for COVID 19, in the following manner:

1. In person and in writing for all residents as appropriate
2. In person and in writing for all staff members
3. In person and in writing for all permissible visitors; and
4. Notification via telephone, email, or other methods of communications the facility is using to notify the residents family member, guardian or designated person during this time of restricted visitation, as well as any visitors, to be followed up in writing within three days.

Notification for subsequent confirmed or person under investigation cases may be done via telephone, email, or other method of communication the facility is using to notify the resident's family member, guardian or designated person during this time of restricted visitation, as well as any visitors, to be followed up in writing within three days.

### **Guidelines for monitoring staff and residents:**

Staff Self-screening – Staff will be educated on Villa Raffaella’s plan to control exposure to the residents. This plan will be developed with the guidance of public health authorities and may include:

- i. Reporting any suspected exposure to the EID while off duty to their supervisor and public health.
- ii. Precautionary removal of employees who report an actual or suspected exposure to the EID.
- iii. Self-screening for symptoms prior to reporting to work and required written certification that they do not meet any of the posted criteria for exclusion to entering the facility prior to beginning each shift. Furthermore, each staff member shall complete a health screening questionnaire in conjunction with temperature check by employer each shift prior to commencing work.
- iv. Prohibiting staff from reporting to work if they are sick until cleared to do so by appropriate medical authorities and in compliance with appropriate labor laws.

Resident Screening: Residents will be screened through daily observations for signs and symptoms of the EID by staff. Procedure may be implemented at the discretion of management to implement vital sign measurement on a scheduled basis for screening purposes. Residents will also be educated on the importance of self-reporting any symptoms to nursing staff.

### **Environmental interventions:**

Environmental cleaning – Villa Raffaella will follow current CDC guidelines for environmental cleaning specific to the EID in addition to routine cleaning for the duration of the threat.

Engineering controls – Villa Raffaella will utilize appropriate physical plant alterations such as use of private rooms for high-risk residents, plastic barriers, sanitation stations, and special areas for contaminated wastes as recommended by local, state, and federal public health authorities.

### **Facility Guidelines for isolating and cohorting of infected and at-risk residents**

Facility statement of resources:

Villa Raffaella is licensed to provide services to 60 residents, however at the time of creating this policy, choose to limit occupancy to 55 residents, thus providing for 5 additional private suite accommodations. Given this decision, the facility currently has 37 available private suites, and 9 companions suites each which include two private bedrooms, one shared bath and common use area.

As an assisted living residence isolation and/or co-horting of residents will be satisfied by isolating the resident in their room. Set up an isolation supply cart outside the resident’s room and keeping it supplied with appropriate PPE, masks, gloves, etc. The same PPE **cannot** be worn in common hallways en route to another COVID resident.

- Ensure there is sufficient dedicated staff to provide care for each group of residents.
  - Maintain social distancing at the onset of and through the outbreak.
  - Follow current CDC infection control guidance, including appropriate use of PPE.
- **For the purpose of isolation and or co-horting facility will Identify the 3 groups of residents:**
    - Those who are confirmed positive for COVID-19/or symptomatic
    - Those who have been exposed to the virus/ asymptomatic
    - Those who are not ill and have NOT been exposed to COVID-19

#### Scenario 1:

Confirmed infected resident who resides in a private suite.

In this case no special accommodations are required, other than the normal procedures for isolating the resident in their suite. Resident will not be permitted to travel within the building with the exception for medical treatment purposes. Resident will have all meals delivered to their suite, additionally non-essential visitation will be restricted, unless end of life circumstances are considered present. A resident on isolation precautions will not be permitted participate in any communal activities or meals. If resident is required to travel outside of their individual isolation area, resident will always be required to wear a face mask and gloves while outside their individual isolation area.

. Staff should be guided by applicable facility infection control policies. Facility will provide all assigned staff additional training as needed and supervision in the mode of transmission of this EID, and the use of the appropriate PPE

#### Scenario 2:

Confirmed infected resident who resides in a companion suite.

Confirmed infected resident will go into isolation within their private bedroom.

- If available suitemate will be relocated to an alternate private suite.
- If alternate private suite is not available, then suitemate will be relocated to alternate companion suite.
- If no alternate location is available. Confirmed infected resident will remain in isolation within their private bedroom, if need be commode will be provided as well as other hygiene products will be located within bedroom area. Balance of suite will be cleaned and sanitized. Non-essential visitation will be restricted to the suite, unless end of life circumstances are considered present.

Primary care physician for non-positive suitemate will be informed, and appropriate follow-up testing will be performed.

Staff should be guided by applicable facility infection control policies. Facility will provide all assigned staff additional training as needed and supervision in the mode of transmission of this EID, and the use of the appropriate PPE.

Confirmed infected resident will not be permitted to travel within the building with the exception for medical treatment purposes. Resident will have all meals delivered to their suite, additionally non-essential visitation will be restricted, unless end of life circumstances are considered present. A resident on isolation precautions will not be permitted participate in any communal activities or meals.

If resident is required to travel outside of their individual isolation area, resident will always be required to wear a face mask and gloves while outside their individual isolation area.

### Scenario 3:

Multiple confirmed infected residents who reside in companion suites.

If available non- infected suitemates will be temporarily relocated to alternate locations within facility.

If alternate locations are not available, then confirmed infected residents will cohort within a single companion suite, each confirmed infected resident will remain in isolation within each of the private bedrooms.

Confirmed infected resident will not be permitted to travel within the building with the exception for medical treatment purposes. Resident will have all meals delivered to their suite, additionally non-essential visitation will be restricted, unless end of life circumstances are considered present. A resident on isolation precautions will not be permitted participate in any communal activities or meals. If resident is required to travel outside of their individual isolation area, resident will always be required to wear a face mask and gloves while outside their individual isolation area.

Staff should be guided by applicable facility infection control policies. Facility will provide all assigned staff additional training as needed and supervision in the mode of transmission of this EID, and the use of the appropriate PPE.

Non-infected residents will then temporarily cohort in a companion suite once cleaning and sanitation has occurred.

Primary care physician for non-infected suitemates will be informed, and appropriate follow-up testing will be performed.

### **Suspected case in the care center**

- a. Place a resident or on-duty staff who exhibits symptoms of the EID in on isolation precautions and notify local public health authorities. If resident, notify primary care physician and family also.
- b. Under the guidance of the primary care physician and public health authorities, determine if a transfer of the suspected infectious person to the appropriate acute care center via emergency medical services is needed.

c. If the suspected infectious person requires care while awaiting transfer, follow policies for isolation procedures, including all recommended PPE for staff at risk of exposure.

d. If resident will remain at facility, Keep the number of staff assigned to enter the room of the isolated person to a minimum. Ideally, only specially trained staff and prepared (i.e. vaccinated, medically cleared) will enter the isolation room. Provide all assigned staff additional training as needed and supervision in the mode of transmission of this EID, and the use of the appropriate PPE.

e. If feasible, ask the isolated person to wear a facemask while staff is in the room. Provide care at the level necessary to address essential needs of the isolated individual unless it advised otherwise by public health authorities.

f. Conduct control activities such as management of infectious wastes, terminal cleaning of the isolation room, contact tracing of exposure individuals, and monitoring for additional cases under the guidance of local health authorities, and in keeping with guidance from the CDC.

g. Activate quarantine interventions for residents and staff with suspected exposure as directed by local and state public health authorities, and in keeping with guidance from the CDC.

### **Visitation:**

In the event of a pandemic outbreak, resident visitation may be effected. Limits and/or suspension of in-person visits may take place for the health and safety of residents. Examples of resident in-person visits limits might be:

- Visit by reservation only
- Monitoring of visits for compliance of safety guidelines
- Mandatory use by residents, visitors and staff of designated forms of PPE
- Implementation of Health screenings for visitors prior to visit
- Facility management may limit visitation to immediate family members and responsible parties only
- Designation of a single site for in-person visits. This site may be in-doors or outdoors based on NJ Department of Health guidelines

In the event that in-person visitation must be suspended for the health and safety of residents Villa Raffaella will offer the following forms of virtual visitation and non-contact visits:

- Window visits – Villa Raffaella will arrange for residents to participate in visits at first floor windows in designated areas. Seating will be provided for visitors outside of the window. If need be these visits will be supplemented with the use of cells phone to permit better communication.
- Virtual visits can be scheduled for residents through the use of FaceTime and Skype. Staff will be available to facilitate this form of communication for residents who need assistance.

### **Communication:**

### **Employer Considerations**

Management will consider its requirements under OSHA, (Center for Medicare and Medicaid (CMS), state licensure, Equal Employment Opportunity Commission (EEOC), American Disabilities Act (ADA) and other state or federal laws in determining the precautions it will take to protect its residents. Protecting the residents and other employees shall be of paramount concern. Management shall take into account:

- The degree of frailty of the residents in the care center;
- The likelihood of the infectious disease being transmitted to the residents and employees;
- The method of spread of the disease (for example, through contact with bodily fluids, contaminated air, contaminated surfaces)
- The precautions, which can be taken to prevent the spread of the infectious disease
- Other relevant factors

Once these factors are considered, management will weigh its options and determine the extent to which exposed employees, or those who are showing signs of the infectious disease, must be precluded from contact with residents or other employees.

Apply whatever action is taken uniformly to all staff in like circumstances.

Do not consider race, gender, marital status, country of origin, and other protected characteristics unless they are documented as relevant to the spread of the disease.

Make reasonable accommodations for employees such as permitting employees to work from home if their job description permits this.

Generally, accepted scientific procedures, whenever available, will be used to determine the level of risk posed by an employee.

Permit employees to use sick leave, vacation time, and FMLA where appropriate while they are out of work.

Permit employees to return to work when cleared by a licensed physician, however, additional precautions may be taken to protect the residents.

Employees who refuse at any time to take the precautions set out in this and other sections of this policy may be subject to discipline up to and including exclusion from duty or termination.

### **Employer Staffing considerations:**

In the event that due to a pandemic outbreak staffing levels are reduced due to employee illness or other related events Villa Raffaella will incorporate the following measures:

- Conversion of work shifts from 8 hours to 12 hours.
- Implementation of 6 day work weeks.
- Enhanced payments for HCP workers
- Utilization of outside agencies for supplemental staffing as needed.

In the event that these measures are insufficient to meet the needs of the residents, facility will seek approval from NJ Department of Health to initiate a transfer of residents to other health care facilities and/or request supplemental staffing.

## **Employer Staffing considerations specific to Covid 19:**

In order to limit possible transmission of the virus, the following staffing protocols will be put in place in the event of that one or more residents are found to be Covid 19 positive:

- Staff members who are assigned to care for Covid positive residents will not provide care to other residents during the shift.
- Facility will endeavor to maintain consistent staff members who are assigned to Covid 19 positive residents to limit possible transmission of the virus.
- If staffing conditions are reduced to critical levels due to staff illness, facility will draw additional staff from our out of state “sister” facilities. Villa Raffaella will provide accommodations and meals for these additional staff members during their stay.

Employees who have been employed at least 30 days who are unable to work due to suspected or confirmed Covid 19 will be paid for the balance of their normal work hours after application of accrued benefit time for a period of two weeks. (This time period may be extended at the sole discretion of management)

Staff members shall be excluded from duty if they test positive for COVID 19, refuse to participate in COVID 19 testing, or refuse to authorize release of their testing results to Villa Raffaella until such time as the staff member undergoes testing and the results of such testing are disclosed to Villa Raffaella.

Villa Raffaella shall follow CDC guideline regarding return to Work Criteria for HCP with Suspected or Confirmed COVID-19

## **Symptomatic HCP with suspected or confirmed COVID-19**

Staff member will be excluded from work until:

- At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications **and** improvement in respiratory symptoms (e.g., cough, shortness of breath); **and**,
- At least 10 days have passed since symptoms first appeared

If a staff member tests positive for COVID 19 and is asymptomatic, the facility may permit them to return to work subject to CDC/NJ DOH recommendations as to timeframes and requirements. Such staff member shall only be permitted to work in areas where they will not come into contact with residents or other staff members, or will be assigned to work in areas reserved for COVID 19 positive or suspected residents. Such staff will be required to use enhanced PPE procedures.

## **Definitions:**

Emerging Infectious disease -- Infectious diseases whose incidence in humans has increased in the past two decades or threatens to increase in the near future have been defined as "emerging." These diseases, which respect no national boundaries, include:

- New infections resulting from changes or evolution of existing organisms .
- Known infections spreading to new geographic areas or populations
- Previously unrecognized infections appearing in areas undergoing ecologic transformation
- Old infections reemerging as a result of antimicrobial resistance in known agents or breakdowns in public health measures

Pandemic -- A sudden infectious disease outbreak that becomes very widespread and affects a whole region, a continent, or the world due to a susceptible population. By definition, a true pandemic causes a high degree of mortality.

Isolation – Separation of an individual or group who is reasonably suspected to be infected with a communicable disease from those who are not infected to prevent the spread of the disease.

Quarantine – Separation of an individual or group reasonably suspected to have been exposed to a communicable disease but who is not yet ill (displaying signs and symptoms) from those who have not been so exposed to prevent the spread of the disease.

Portions of this Policy were adopted from “Sample Policy for Emergent Infectious Diseases for Skilled Nursing Care Centers” created by AHCA and NCAL

