

## **Pandemic Emergency Plan (PEP)**

### **Rosa Coplon Jewish Home and Infirmary (“Facility”)**

#### **1. COMMUNICATION**

Authorized family members and guardians will be notified by phone if a resident becomes symptomatic and MD order is obtained for testing of COVID-19 and will also be notified when the results are available. Authorized family members and guardians shall also be notified by phone whenever there is a change in the resident’s condition.

The Weinberg Campus website will be updated daily with the number of presumed, confirmed and deaths of residents/employees related to COVID-19.

All residents will have daily access to free remote videoconferencing through the Social Work and Activities Department to communicate with authorized family members and guardians. This is available 7 days a week. Family members and guardians can call or email the social work department to schedule.

Authorized family members and guardians shall receive a weekly family letter with Facility updates as well as a monthly newsletter.

All communications will be made by electronic means unless an authorized family member or guardian chooses another method, which will be accommodated.

#### **2. INFECTION CONTROL**

The Facility will work with federal, state and local agencies as needed to monitor and prevent/minimize the spread of coronavirus among our residents and staff.

Policies and procedures have been created in order to provide structure and guidance to Facility staff in the event of a COVID-19 outbreak for residents and/or staff.

The Management Team and Medical Director will meet at least weekly and as needed to review policies/procedures based on current information. The Management Team will follow guidelines for dealing with residents and staff that may have had exposure, symptoms and/or positive for COVID-19. Interim guidelines will be based on CDC Guidelines, NYS DOH guidance.

Communication with NYSDOH will be ongoing, in order to receive guidance and best practice in order to ensure our residents and staff remain as safe as possible. The Director of Nursing or designee will stay in contact with the NYSDOH frequently to obtain further guidance.

Assessment and treatment plans will be on a case-by-case basis and will be determined by the provider, Medical Directors and Director of Nursing. These decisions will be made based on the guidelines from the CDC and NYS DOH.

The Medical Director, Administrator and Director of Nursing are responsible for maintaining awareness of the recommendations from the CDC, NYSDOH and for communicating information to the management team and other appropriate staff.

### **3. ADMISSION AND READMISSION**

Readmission of residents after hospitalization for COVID-19 shall comply with applicable State and Federal laws and regulations, including but not limited to 10 NYCRR 415.19, 415.3(i)(3)(iii) and 415.26(i), and 42 CFR 483.15(e).

In accordance with Dear Administrator Letter (DAL) #20-14 issued on 5/11/2020, the admission team will confirm the resident was tested for COVID-19 prior to discharge from the hospital with a negative result.

New admissions and readmissions will be placed in a Yellow Zone (see Cohorting, below) on precautions and monitored for 14 days for symptoms of COVID-19. The Facility has designated rooms as overflow rooms for admissions and readmissions. Residents being admitted in the overflow rooms will also be placed on 14-day precautions.

Residents will remain on precautions on both the Yellow Zones and admission/readmission overflow rooms for at least a total of 14 days.

### **4. SURVEILLANCE**

All residents shall be monitored for respiratory symptoms and elevated temperatures, Staff shall document if any medications were given to mask temperatures in the past 72 hours.

Residents will continue to be monitored every shift for elevated temperatures greater than 99 degrees Fahrenheit. The Medical Director/Director of Nursing will be updated with any elevated temperatures and a RN respiratory assessment will be completed.

All residents who are being tested for COVID-19 will be put on droplet/contact precautions immediately until test results are obtained. If they have a roommate, the roommate will also be placed on droplet/contact precautions. Roommates of potential COVID-19 positive residents will be tested related to potential exposure to COVID-19.

### **5. COHORTING**

Residents will be placed in zones identified as Red, Yellow or Green Zones based on risk level following guidance from the New York State Department of Health Bureau of Communicable Disease Control or NYSDOH Public Health Duty Officer. Appropriate signage will be placed identifying precaution rooms/areas.

Any resident who tests positive for COVID-19 will be placed in the “Red Zone.” The “Red Zone” is a designated unit within the Facility for all confirmed COVID-19 positive residents.

Red stop signs will be at the entrance of the unit/hallway designating this a red zone.

Red tape will be on the floor entering the designated area. This will alert the staff the unit is a red zone with positive COVID-19 residents.

Red Zone bathrooms shall not be shared with residents outside this cohort.

Residents who have potentially been exposed to COVID-19 shall be placed in the “Yellow Zone”. The residents in the yellow zone will be on contact/droplet precautions Yellow zone residents will include those in admission/readmission overflow rooms.

Yellow stop signs will be at the entrance of the unit/hallway designating a yellow zone.

Yellow tape will be on the floor entering the designated area. The yellow zone will alert the staff the residents has been potentially exposed to COVID-19.

Yellow Zone bathrooms shall not be shared with residents outside this cohort.

Residents who have not been exposed to COVID-19 and who have a negative test result shall be placed in the “Green Zone

Green Zone bathrooms shall not be shared with residents outside this cohort.

Facility administrators shall monitor cohorting needs and capabilities on a regular basis. If the Facility is no longer able to set up cohorting areas or sustain cohorting efforts for residents during the pandemic, the Administrator will contact the regional Department of Health’s epidemiologist to obtain guidance on the next steps, including a possible transfer of residents from the Facility to a more appropriate healthcare setting that may be better able to meet their needs.

If the Facility is not able to provide adequate care to a COVID-19 positive resident, the Facility will contact the regional Department of Health to assist with any relocation needs, including but not limited to assistance with arranging transportation to an alternate facility that can provide adequate care needed for the resident. Residents may be transferred to a hospital emergency room if the nursing home is unable to manage and provide adequate medical care to the resident.

## **6. PERSONAL PROTECTIVE EQUIPMENT**

The Facility will store in a designated storage area within the Facility, the required personal protective equipment supply, such as N95 respirators, face shields, eye protection, gowns/isolation gowns, gloves, and masks, in order to meet the needs of the residents and to protect the employees caring the for residents in accordance with State and Federal laws and regulations.

Personal protective equipment includes: N95 respirators, face shields, eye protection, gowns/isolation gowns, gloves, masks sanitizer and disinfectants in accordance with current EPA guidance.

Supply needs are based on the Facility's census and not capacity. The Facility shall possess and maintain a supply of all PPE for at least 60 days at a rate of usage equal to the average daily rate that PPE was used between April 19, 2020 and April 27, 2020.

Any residents confirmed positive for COVID-19, will be on contact/droplet precautions and the staff entering those rooms will utilize an N-95/K-95 mask, eye protection, gloves, gowns and other PPE as necessary.

Any confirmed positive COVID-19 residents will wear a procedure mask while receiving care.

## **7. BED PRESERVATION**

If a resident is hospitalized due to COVID-19, the resident's bed shall be preserved in compliance with applicable State and Federal laws and regulations, including but not limited to 18 NYCRR 505.9(d)(6) and 42 CFR 483.15(e), and in accordance with the Facility's Bed Reservation Policy.