

COVID-19 OUTBREAK MANAGEMENT AND RESPONSE

This facility shall take all reasonable and necessary measures to respond to outbreaks of COVID-19 within the facility to stop transmission of pathogens and prevent additional infections.

COMMUNICATION AND REPORTING

1. The Infection Preventionist shall notify facility Administration, Medical Director and Infectious Disease Physician (if available) if a threat of emerging diseases is detected in the community and if illnesses is present in the facility.
2. Any suspect or confirmed outbreak shall be reported to local health department (LHD) and/or state health department as per the reporting requirements for communicable diseases and work-related conditions.
3. The facility administration shall notify staff, patients/residents and their families of the presence of a COVID-19 case and/or outbreak in the facility.
4. The facility administration shall comply with the testing and reporting requirements mandated by local, state, and federal governing bodies.

GENERAL FACILITY CONTROL MEASURES

The facility shall:

1. Log and screen everyone entering the facility, regardless of their vaccination status.
2. Conduct routine and outbreak testing for all patients/residents and facility staff to limit exposure and control the spread of COVID-19 infection. Refer to updated COVID-19 Testing Policy.
3. Ensure that communal dining, group activities and provision of services (e.g., beauty shop, physical therapy gym sessions) follow the most recent federal and state guidelines. See VISITATION, GROUP ACTIVITIES AND PROVISION OF SERVICES, DURING THE COVID-19 PANDEMIC Policy.
4. Evaluate personal protective equipment (PPE) and report levels to local, state, and federal agencies, as appropriate.

INFECTION PREVENTION AND CONTROL

The facility shall:

1. Increase accessibility of hand hygiene resources in the facility.
2. Educate on infection prevention practices, including control measures for COVID-19 such as wearing well-fitted source control, maintaining social distancing, and hand hygiene.
3. Identify unused space such as therapy gyms, activity, and dining rooms to cohort patients/residents, as needed.
4. Make necessary PPE available in areas where patient/resident care is provided and where COVID-19 testing is conducted.
5. Make adequate waste receptacles available for used PPE. Position these near the exit inside the room to make it easy for staff to discard PPE prior to exiting, or before providing care for another patient/resident in the same room.
6. Implement Standard and Transmission-Based Precautions including use of a N95 respirator or higher (or facemask if unavailable), gown, gloves, and eye protection.
7. Conduct routine cleaning and disinfection of high touch surfaces and shared medical equipment using an EPA-registered, hospital-grade disinfectant and consider increasing the frequency of routine cleaning and disinfection.
8. Prioritize rounding in a "well to ill" flow to minimize risk of cross-contamination (i.e., beginning with standard precaution care areas and working toward transmission-based precaution, then finally outbreak rooms).
9. Educate the residents and/or their families and facility staff of the risks and benefits of receiving COVID-19 vaccination..

COVID-19 OUTBREAK MANAGEMENT AND RESPONSE (Cont.)

PATIENT/RESIDENT MANAGEMENT (COHORTING)

The facility shall:

1. Implement cohorting plan that allows for separation of patients/residents, dedicating staff and medical equipment to each of these cohorts and allowing for necessary space to do so at the onset of an outbreak.
2. Identify the COVID-19 positive cohort (RED ZONE) and place signage that instructs HCP they must wear eye protection and an N95 or higher-level respirator (or facemask, if unavailable) at all times while in that area. Gowns and gloves should be added when entering patient/resident rooms.

STAFF MANAGEMENT

The facility shall:

1. Implement use of universal well-fitted source control for staff while in the facility, in addition to active screening for everyone entering the facility.
2. Identify staff who may be at higher risk for severe COVID-19 disease and attempt to assign to unaffected wings/units.
3. Educate and train staff on COVID-19 infection prevention and control, sick leave policies, including not to report to work when ill.
4. Assess staff competency on infection prevention and control measures including demonstration of putting on and taking off personal protective equipment (PPE).
5. Bundle tasks to limit exposures and optimize the supply of PPE and consider cross-training staff to conserve resources.
6. Review emergency staffing and/or staff contingency plans to mitigate anticipated shortages.

Thank you for your continued understanding and support during these unprecedented times. To ensure that we are responding timely to any of your concerns, please reach out to the following Center Representatives:

Trevor Dublin, Administrator - 201-768-6222 Ext: 407