

## COVID -19 Response Plan

Phase 0	Phase I	Phase 2	Phase 3	Phase 4
No viruses in Country but risk exists ( foreign reports)	Virus reports in U.S.	Virus reported in community	Positive or suspected COVID-19 in facility	Surge capacity
<ul style="list-style-type: none"> <li><input type="checkbox"/> Respiratory surveillance and detection of the presence of pandemic respiratory virus in staff and residents</li> <li><input type="checkbox"/> DOH reports of resident with respiratory illness above baseline</li> <li><input type="checkbox"/> Vaccination program ongoing for residents and staff, Influenza and pneumovax</li> <li><input type="checkbox"/> Hand sanitizer and sinks full stocked to enable proper hand hygiene</li> <li><input type="checkbox"/> Ongoing education on proper hand hygiene and infection control</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Communications and correspondences sent out to families, vendors and staff regarding COVID-19 status , impact and IFC measures</li> <li><input type="checkbox"/> Resident council meetings inform residents regarding COVID-19 and infection control measures</li> <li><input type="checkbox"/> Respiratory Questionnaire for all visitors completed with each visit.</li> <li><input type="checkbox"/> Limited visitation initiated Designated visiting room with frequent sanitizing prior and after visits.</li> <li><input type="checkbox"/> Website ,Streaming TV and Signage posted at front desk and entrance regarding Visitor screening , limited visiting hours</li> <li><input type="checkbox"/> DON or Infection Preventionist Nurse review of all DOH and CDC guidance on COVID-19.</li> <li><input type="checkbox"/> Limit outside physician appoints to critical follow ups only, reschedule as appropriate as deemed by M.D. and consultant</li> <li><input type="checkbox"/> Limit out on pass for residents</li> <li><input type="checkbox"/> Employee log, questionnaire q shift. ( Daily temperature log and resp symptoms )</li> <li><input type="checkbox"/> Daily temp of all residents initiated.</li> <li><input type="checkbox"/> Hand washing competency</li> <li><input type="checkbox"/> EPA approved disinfectant for COVID-19</li> <li><input type="checkbox"/> Suspend community-based programs in the facilities.</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Visitation suspended except for hospice</li> <li><input type="checkbox"/> Signage posted at front desk and entrance : No visitation except hospice</li> <li><input type="checkbox"/> OOP suspended.</li> <li><input type="checkbox"/> Employee log, questionnaire q shift. ( Daily mask, temperature log and resp symptoms)</li> <li><input type="checkbox"/> Resident every shift respiratory eval and vital signs</li> <li><input type="checkbox"/> Daily report in HERDS on resident/employees with symptoms or not by 1pm</li> <li><input type="checkbox"/> Daily stand up COVID-19 Preparedness planning meeting</li> <li><input type="checkbox"/> Staffing contingency plan initiated for increased call outs, closed schools and daycare</li> <li><input type="checkbox"/> Tracking PPE supplies, engage CDC guidance on conservation of PPE</li> <li><input type="checkbox"/> DON or Infection Preventionist Nurse contacts local Department of Health weekly to determine level of local community involvement of COVID-19.</li> <li><input type="checkbox"/> Communal dining and group activities conducted with 6 ft compliance with social distancing</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Creation of step-down units/precautions for all new admits, resident with regular appts in community and residents suspected or positive COVID that do not require a higher level of care. Pvt room or cohorted units.</li> <li><input type="checkbox"/> Allocation of additional PPE to masks and gloves of gowns and eye protection</li> <li><input type="checkbox"/> No communal dining or activities, staff allocated to resident care tasks</li> <li><input type="checkbox"/> Accepting patients from a hospital with positive COVID - 19 or suspected placed in step down unit for 14 days ( isolation) if no symptoms can go to regular unit.</li> <li><input type="checkbox"/> Expediting credentialing and training of non-facility staff to provide patient care when the facility reaches a staffing crisis ex. unlicensed assistive personnel : additional resident aides, certified feeders, transportation aides</li> <li><input type="checkbox"/> Planning and contact with area hospitals</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Engage emergency disaster plan for temporary adaptable space for use as expanded inpatient beds</li> <li><input type="checkbox"/> Crisis Contingency staffing plan in conjunction with legal counsel and state health department</li> <li><input type="checkbox"/> Plan to address supply shortages, OEM, federal local charities etc. CDC guidance</li> <li><input type="checkbox"/> Planning with local and regional contracts regarding disposition of deceased residents /create temporary morgue, increased demand for post mortem care.</li> <li><input type="checkbox"/> Close to new admissions</li> </ul>