

## **Incarnation Children's Center**

### **Pandemic Plan**

#### **Introduction**

Incarnation Children's Center is committed to providing a safe and healthy facility for our residents, family members/guardians and our staff. We have developed a Pandemic Emergency Plan (PEP) for ICC's response to any pandemic infection that may occur. The purpose of this plan is to prepare in as many ways that we can anticipate to ensure a rapid and effective response to maintain the health and safety of ICC residents, staff, and families/guardians of residents, and others while they are at ICC. We cannot of course anticipate all the needs that we would face for an as yet unknown pathogen, but other general expert guidance on pandemic response, current experience with the COVID-19 pandemic, and past experience with the 2009 Influenza H1N1 pandemic have been used in developing this plan. A summary of key elements of the plan is presented below. We take pride in ensuring safety in our facility and community as and we want to prevent or mitigate the spread of communicable diseases to the best of our ability. We have implemented a plan that will follow the guidelines from the New York State Department of Health (NYS DOH) and the Centers for Disease Control and Prevention (CDC). Incarnation Children's Center's PEP builds on our existing Infection Prevention and Control Program

#### **Preparedness**

##### **a. Staff Education**

All departments are involved and participate in providing staff education. Staff education is provided by in-services, lectures, discussions and informational hand-outs, and online virtual programs Staff are provided with education on topics of infection control practices primarily from the Medical Director, as well as the Director of Nursing along with the Nursing Service Coordinator. This training encompasses exposure risks, signs and symptoms, prevention measures, diagnostic testing and treatment options available for infections (including especially Blood Borne Pathogens, Influenza, and COVID-19, and any pandemic infectious agent) as well as general Infection Prevention and Control Practices such as surveillance, handling of admissions, transfers and discharges to/from hospitals, room and roommate selection, sufficient staffing and organization of care provision to minimize any infection transmission, proper and consistent use of Personal Protective Equipment (PPE, such as N95 masks, gowns, and gloves) transmission based isolation precautions, clinical monitoring of residents and staff for signs and symptoms of an infection, and ensuring all residents, staff and visitors understand and practice Hand Hygiene, Cough Etiquette, and avoidance of working or visiting when feeling ill. Additionally, staff receive training about environmental cleaning and disinfection of the facility using EPA- registered hospital grade supplies.

##### **b. Infection Control Policies**

ICC's Infection Control Program follows expert guidelines, including those of the NYS DOH and the CDC. Currently, a number of measures are also in place due to the COVID-19 pandemic. Both general and COVID-19-specific policies and procedures are routinely reviewed and are updated as appropriate to incorporate new CDC, NYS DOH, and other expert guidelines. Residents are monitored for illnesses, and currently are monitored twice daily for any signs or symptoms of COVID-19 illness; any resident(s)

exposed to COVID-19 or suspected of or diagnosed with COVID-19 will be provided with a face mask and placed in quarantine or isolation, as indicated, in a private room with its own bathroom for use only by that resident. Discontinuation of quarantine or Isolation is done in accordance with CDC and NYS DOH guidelines. Existing infection prevention and control policies include (but are not limited to): proper hand hygiene, cough etiquette, transmission based isolation, proper use of PPE, environmental cleaning and appropriate bedroom assignments.

c. Communicable Disease Reporting

Facility staff with access to communicable disease reporting tools and other relevant surveys include the Executive Director, Administrator, Medical Director and the Director of Nursing. Required reporting of infections is done via several online applications, such as HERDS, NORA, and NHSN, as well as directly to the NYS DOH Regional Epidemiology Office and/or to the NYC DOHMH.

d. Medications/Cleaning Agents/PPE and Stock

Personal Protective Equipment and Environmental Agents are stockpiled to maintain a 60-day supply by the Environmental Services Department.

The Nursing Department communicates with the pharmacy regarding medications for new admissions. The pharmacy drops off the medication supplies to the facility. The facility works closely with pharmacy to make sure an adequate supply of medications would be delivered and stored onsite in case of an extended emergency situation.

e. Environmental Controls

Social Distancing (6 ft. minimum) is maintained whenever possible. We have affixed distancing floor decals in elevators, limited dining room seating, are holding meetings via zoom and teleconference, and rehabilitation is limiting rehab sessions. Physical barriers at the reception desk, the nurse's station, and the kitchen serving area have been installed. Dining is staggered in time and location to allow for physical distancing.

Disinfection of frequently touched areas are ongoing throughout the day and Alcohol-Based-Hand Rub dispensers are placed throughout the facility, including in the backyard; sinks for hand washing are also available in most common rooms.

Routine contaminated waste is collected and stored in the soiled utility room on our resident unit. Waste which merits additional precautions with its disposal, such as items which are heavily saturated with blood or other bodily fluids, is collected in Red bags and placed in the Red trash bin in the soiled utility room. Housekeeping personnel transport red bag wastes in designated bins to the hazardous medical waste storage room. Red bag waste is then placed in hazardous waste containers for pick up by our medical waste disposal vendor.

f. Vendor Supply Plan

Resupplying of food, water, medications, sanitizing agents and other supplies are handled through Dietary, Environmental Services, and Nursing Departments. The Center's Emergency Plan makes

provisions with its vendors and suppliers to ensure that the facility maintains and can receive adequate supply levels during an extended emergency situation.

g. Facility Plan

Residents are isolated/cohorted using available rooms off of the main resident floor and/or in a private room with its own bathroom on the main floor. Isolation rooms on the main floor are grouped at the end of the hallway, positioned behind a set of hallway doors which are closed. Residents would be transferred to the hospital if needed, with communication to transporters and receiving staff of their infection status and isolation needs. If ICC were unable to properly isolate or cohort residents, arrangements for transfer to another nursing home facility would be made.

h. Pandemic Communication Plan

Incarnation Children's Center updates authorized family members and guardians of residents infected with a pandemic illness such as COVID at least once per day and upon a change in the resident's condition. All residents and authorized family members and guardians are notified weekly on the facility web site of the number of infections and deaths at the facility. All residents of the facility are provided with daily access to free remote video conferencing or similar communication methods, with authorized family members and guardians. These communications are done by electronic means or other methods selected by family members or guardians.

i. Protection Against Infection for Staff, Residents and Families

Plans for protection of residents, staff and families/guardians, and visitors against infection include: posted signage at the facility, communication with and education on infection control practices including proper hand hygiene, cough etiquette, election and use of PPE, temperature check and exposure and symptoms screening upon arrival at ICC (for staff and visitors), posted educational material, social distancing markers, and cohorting of infected residents. Visitation may be restricted or limited with additional precautions as needed, in concert with CDC, and New York State Department of Health guidelines.

**Response**

a. Reporting Requirements

All reporting requirements for suspected or confirmed communicable diseases, as mandated, are adhered to when reporting through the Health Commerce System or NORA, as well as to the NHSN (National Health Safety Network), and the NYS DOH and NYC DOHMH.

b. Reporting on HERDS

Incarnation Children's Center reports required HERDS-reportable, suspected or confirmed communicable diseases on the HERDS website, as per DOH directive.

c. Education to Residents/Relatives/Friends

Education and the facility's response strategies and updates are provided to residents, family and friends by email, the facility website, family letters, resident council, phone calls and phone messaging and signage.

d. Visitation

The facility restricts and/or limits visitation in accordance with New York State Executive Orders and DOH guidance. Whenever in facility visitation is allowed during a public health emergency and/or pandemic, visitors will be screened and have their temperatures will be taken.

e. Posted Copy Procedure of PEP

By September 15, 2020, Incarnation Children's Center will post a copy of this plan on its public website. A hard copy will also be made available upon request.

f. Methods to Update Families/Guardians

Incarnation Children's Center updates family members and guardians of infected residents once per day. The Medical Director or Nursing Director contacts authorized family members and guardians via telephone calls.

g. Once a Week Update

All residents and authorized families and guardians are updated at least once a week on the number of pandemic infections and deaths at the facility either through its website, in-person, Resident Council Meetings, newsletter or by telephone. The facility will communicate with families and guardians via telephone if there is a resident with a pandemic related infection.

h. Videoconferencing

Incarnation Children's Center provides communication between resident and visitors when visitation restrictions are implemented. Alternative means of communication are in place as residents are potentially at risk for alteration in psychosocial wellbeing related to restriction of visitation due to a pandemic infection. Residents and visitors are informed by Social Services that alternative means of communication is available. Staff ensures that residents are able to utilize alternative means of communication. Virtual visits are arranged through Face Time and Zoom. If residents and visitors request, staff can be present to facilitate communication.

i. Process/Procedures for Hospitalized Residents Readmission

In accordance with all applicable laws and regulations, the facility will give priority for readmission to residents who were previously at the facility. If Incarnation Children's Center can meet the needs of the resident, the resident will be given the first appropriate bed.

j. Preserve a Resident's Place

Incarnation Children's Center will make every effort to hold the bed for any of its residents who are admitted to the hospital in accordance with Federal and State regulations.

Incarnation Children's Center will give priority for readmission to residents who were previously at the facility. If the resident's needs can be met, the resident will be given the first appropriate bed.

k. 60 Day Supply of PPE

As of September 30, 2020 Incarnation Children's Center will have a 60-day supply of N95 Respirators, facemasks, gowns, gloves, hand sanitizer and eye protection.

Alcohol based hand sanitizer dispensers are available throughout the facility on resident units, entrances, corridors and offices.

If the normal supply chains cannot provide supplies as needed, the following will be engaged to address potential supply shortages: New York State Department of Health, OEM, CCLC, and FEMA.

**Recovery**

a. Review NYS DOH and CDC Guidance

Administration and department heads will continue to review and implement procedures provided by the NYSDOH and CDC in regard to recovery guidance.

b. Communicate Process to Return to Normal Operations

Administration and department heads will continue to maintain communication with staff, families/guardians and other relevant stakeholders regarding recovery/return to normal operations.