MVHS Rehabilitation & Nursing Center

Effective: 03/2022

Administration Approval

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Administrator	Medical Director	Department Director
		Department Director

Pandemic Communication and Updates

Mission: The purpose of this plan is to prevent the spread of illness/disease, to ensure the needs of the residents are met and to keep the families/guardians informed. In addition to this policy, MVHS Rehabilitation & Nursing Center will refer to MVHS Emergency Management Plan (MV-03-020/021), MVHS Pandemic Infectious Respiratory Disease Plan (MV-08-015), MVHS Rehabilitation Infection Control Policies (IC-64, IC-65 and IC-66), Standard & Transmission Based precautions (MV-08-008), Hazard Vulnerability Assessment (MV-03-011).

Definitions:

- AOC = Administrator on Call
- ADHC= Adult Day Health Care
- MV= Mohawk Valley
- MVHS= Mohawk Valley Health System
- NYS DOH= New York State Department of Health
- PPE = Personal Protective Equipment
- RNC = Rehabilitation & Nursing Center

Scope: All employees of MVHS Rehabilitation & Nursing Center

Responsibility	<u>Procedure</u>
RNC Administrator or AOC	As soon as a pandemic has been declared by the NYS DOH, the RNC Administrator or AOC will then refer to the MVHS Emergency Management Plan.
Director of Social Services	Communication Plan: As soon as a pandemic has been declared by the NYS DOH, the Executive Director or social service department will send letters to all families/guardian regarding the situation. The letter will include contact information for each nursing unit, the social service department and a telephone number to the RNC informational phone line. Persons calling this number will receive a recorded message that will include general details of the condition and activities within the facility. Included in the letter will be a description of the illness/disease and general information regarding what isolation measures will be initiated and how it will affect visitation. The Emergency Pandemic Plan will be posted on the MVHS website at this time.
Director of Social Services/Director of Nursing	Family/guardian of Residents who are infected with the pandemic illness will be notified within 24 hours of testing positive via phone call.
Therapeutic Recreation Department	Therapeutic Recreation staff will be responsible to manage and direct all Skype/Video conferencing calls between residents and their families/guardians. Calls can be as frequent as daily or as identified by the wants and needs of the resident and their family/guardian. These communication services will be provided to residents free of charge.
All Staff	All staff members can assist residents who wish to use their (the residents) personal phone to communicate as needed. Residents may use facility phones to communicate with family/guardians as needed.
Admission Liaison	All residents being admitted/re-admitted from a hospital or community must test negative prior to entering the facility. New admissions/re-admissions do not need to quarantine upon arrival to facility if up to date on vaccination status or recovered from COVID infection within the past 90 days unless otherwise specified by DOH guidelines.
Director of Plan Ops/Stock Room	The RNC will maintain at least a 90 day supply of PPE including gloves, isolation gowns, surgical masks, face shields, N95 respirator masks (in the event of airborne illness) along with a supply of disinfectant wipes and hand sanitizer.

MVHS Rehabilitation & Nursing Center

Policy and Procedure

IC-65

Effective: 03/2020, Revised: 7/2023 (last revision: 4/2023)

	Administration Approval	
Administrator	Medical Director	Department Director

COVID-19 Visitor Health Policy

Policy:

MVHS Rehabilitation & Nursing Center is taking action to prevent the spread of Coronavirus/COVID-19. All persons entering the RNC for in person visitation are required to follow the policy as outlined. Visitors are described as anyone not employed by MVHS RNC including but not limited to: vendors, family members, friends and resident loved ones, clergy, volunteers, etc. This policy applies to all visitors of MVHS RNC.

Abbreviations:

- COVID-19 = Coronavirus
- CDC = Centers for Disease Control & Prevention
- CMS = Centers for Medicare & Medicaid Services
- DOH = Department of Health

- PPE= Personal Protective Equipment
- RNC= Rehabilitation & Nursing Center
- RN= Registered Nurse

Equipment:

- Oral Thermometer
- Temporal Thermometer
- · Thermal Thermometer

Responsibility	<u>Procedure</u>
	Visitor Screening Guidance
Screening Personnel RN Licensed Staff	 Infection Control or designee places Hospital Admission Level sign at facility entrance notifying visitors about the COVID-19 hospital admission level, signs/symptoms of COVID; when masks, screening questions and temperature check is required. Hand hygiene will be available for visitors upon arriving to facility. All visitors will wear a face mask when COVID-19 Hospital Admission level is high and when visiting a unit experiencing a COVID-19 outbreak. Visitor COVID testing is not required; COVID tests are available at the Receptionist Desk if a visitor would like to test themselves prior to visiting. Visitors will answer screening questions when COVID-19 Hospital Admission Level is Medium or High utilizing the MVHS Visitor Sign In/Health Screen Sheet consistent with COVID-19 symptoms (including but not limited to cough, congestion, fever, aches and pains or new loss of taste and/or smell and/or COVID exposure) and will have their temperature taken via thermal
	 thermometer. If they answer yes to any of the respiratory questions or have a thermal temperature of 99.0F or greater, they will be asked to defer non urgent visits. If they must visit they will be asked to wear a mask. Visitors should maintain 6-foot social distancing as much as possible during their visit when
	 COVID-19 Hospital Admission level is high. Visitors need to adhere to cough etiquette, respiratory hygiene - covering nose and mouth when coughing and sneezing, wearing PPE if indicated and frequent hand hygiene in MVHS RNC. Change your mask if it becomes soiled or wet. All visitors must follow the specific guidance set forth in this policy.

Responsibility	<u>Procedure</u>	
	In-Person Visitation	
	 The RNC will allow social in person visitation between residents/patients and their family and loved ones in accordance with all guidelines set forth by the NYS DOH, CDC and CMS. Notification and guidance regarding social in person visitation will be communicated to all staff, residents/patients as well as families and designated resident representatives. All persons entering the RNC for social in person visitation when COVID-19 Hospital Admission Level is Medium or High will be screened utilizing the MVHS Visitor Sign In/Health Screen Sheet upon entering the facility per screening guidance. RNC will provide visitors with COVID rapid antigen tests to be completed by the visitor if requested and tests are available. Visitations will be conducted at the time of the residents/patients choosing. All infection prevention protocol will be maintained following CDC core principles of Infection Prevention. The RNC administration reserves the right to end a visit at any given time if visitors are unable to adhere to the CDC Core Principles of Infection Prevention per CMS QSO-23-39-NH. 	
	Visitors with COVID-19 Symptoms	
	If COVID 19 symptoms are suspected while at the RNC, visitors are to report to the Receptionist desk and inform of their symptoms.	
	 If COVID 19 symptoms are suspected before coming to the RNC, visitors are instructed to avoid entering the RNC until they have contacted their medical provider and symptoms have cleared. Visitors that are confirmed with COVID 19 must be reported to Infection Prevention and their RNC contact person. 	
	 Visitors exposed to a confirmed case of COVID will be evaluated by Infection Prevention and the Nursing Supervisor for risk of exposure and guidance. 	
Receptionist	Asks visitors who are reporting COVID-19 symptoms to defer non urgent visits until their symptoms have resolved and to contact their medical provider. If visitor is unable to defer their visit,	
	Notifies nursing supervisor of visitor(s) suspected COVID-19 symptoms.	
	Asks visitor (if unable to defer their visit) to wear a mask.	
	Visitation Return to MVHS RNC	
	 Positive COVID visitors will quarantine per NYS DOH/CMS/CDC guidance, whichever is more stringent. 	
	Asymptomatic visitors will follow the NYS DOH/CMS/CDC guidance, whichever is more stringent. Symptomatic visitors will follow the NYS DOH/CMS/CDC guidance, whichever is more stringent.	
	 Visitors will self-monitor for symptoms and seek medical attention if symptoms occur. 	

Forms / Assessments:

Hospital Admission Level Signs MVHS Visitor Sign In/Health Screen Sheet

MVHS Rehabilitation & Nursing Center

Policy and Procedure

IC-66

Effective: 03/2020, Revised: 4/2023

(last revision: 05/2021)

Administrator

Administration Approval

Medical Director

Department Director

COVID-19 Resident/Patient Health

Policy:

It is the policy of MVHS Rehabilitation & Nursing Center to prevent the transmission of COVID within the MVHS RNC facility by using the recommendations from the CDC and NYS DOH through their updates. This policy shall remain in effect until the pandemic is lifted by the NYS DOH.

Abbreviations:

- CDC = Center for Disease Control
- CMS = Center for Medicare & Medicaid Services
- COVID = Corona Virus Disease
- COVID-19 = Corona Virus Disease for year 2019
- DOH= Department of Health
- CNA = Certified Nursing Assistant
- EMAR = Electronic Medication Administration Record
- HERDS= Health Emergency Response Data System
- IP = Infection Prevention
- LTC = Long Term Care
- MDRO= Multi Drug Resistant Organism
- PPE = Personal Protective Equipment
- RN = Registered Nurse
- RNC = Rehabilitation & Nursing Center
- TBP = Transmission Based Precautions

Definitions:

Symptoms of COVID may include: fever, dry cough, shortness of breath, sore throat, muscle/body aches, congestion, runny nose, new loss of taste and smell, headache, nausea or vomiting. For full list refer to the CDC guidelines. Symptoms will progress over a short period of time.

Purpose/ Scope:

The facility focus is on standard and transmission based precautions (reference policy IC-4). Standard precautions include: hand hygiene, PPE use (gloves, gowns, mouth, nose & eye protection), respiratory etiquette, resident/patient care equipment and instruments/devices, care of the environment, linen and safe injection practices. It also includes transmission based precautions: airborne, droplet, contact precautions as well as considerations for the movement of residents/patients while on transmission based precautions and admission or a resident/patient with communicable disease/MDRO.

Equipment:

- COVID-19 Test
- · Oral thermometer

- Special droplet/contact precaution signs
- Temporal thermometer

Responsibility	<u>Procedure</u>	
	COVID Symptoms – Resident/Patients	
Nursing Staff	 Monitors residents/patients every shift for fever, dry cough, shortness of breath, sore throat. This is documented in the EMAR. Symptoms will progress over a short period of time. 	
	 Reports any symptoms to the charge nurse immediately after closing the door to the resident/patient room (if safe to do so) and pulling the curtain if it is a semi private room. 	
	Places residents/patients displaying any undiagnosed respiratory symptoms on special droplet/contact precautions until COVID can be ruled out. Door to the room remains closed (if safe to do so) and places a Special Droplet/Contact Precautions sign on the door.	
	 Wears PPE to enter the room which includes: gloves, gown, facial shield or goggles and surgical N95 mask. 	
Charge Nurse	Notifies the supervisor who will contact the Provider for further directions.	

Responsibility	Procedure Procedure
	COVID Testing - Residents/Patients
Nursing Staff	 Tests resident/patient as soon as possible if symptoms or signs of COVID-19 are present, regardless of vaccination status.
	 Keeps residents/patients room door closed (if safe to do so); special droplet and contact precautions remain in place until COVID is ruled out. Dedicated nursing staff are only allowed in the room to limit exposure risk as possible. Nursing will deliver laundry, empty the garbage, clean frequently touched surfaces with disinfectant wipe, etc.
	• Ensures residents/patients remain in their rooms unless medically necessary. If they leave their room, they must:
	a) Wear a surgical mask b) Perform hand hygiene before leaving their room c) Limit movement within the facility d) Practice social distancing e) Notifies receiving area of suspected or confirmed COVID status of the resident/patient
	COVID Negative Results – Resident/Patient
Nursing Staff	 Contacts Provider for further directions. Removes resident/patient from special droplet/contact precautions if directed by Provider; may need to change Special Droplet/Contact Precautions sign. The resident's/patient's door can remain open, the privacy curtain should remain pulled if in a semi private room until the resident/patient no longer displays respiratory symptoms.
	COVID Positive Results – Resident/Patient
Nursing Staff	 Contacts Provider for further directions. Cohorts or transfers resident/patient to the hospital per Provider. Places Special Droplet/Contact Precautions sign on resident/patient door and closes the door (If safe to do so). Wears PPE which includes N95 mask, face shield or goggles, gown and gloves during routine care. Performs aerosol generating procedures cautiously and avoids if appropriate alternatives exist. If aerosol generating procedure (likely to induce coughing) occurs, such as suctioning and nebulizers, must wear PPE which includes a N95 mask, face shield or goggles, gown and gloves. The number of staff procent during the agree of staff procent during the ag
	for resident/patientcare and procedure support. This procedure should take place in a private room with the door closed.
	 Clean and disinfect the room surfaces promptly with a hospital grade disinfectant. Assigns specifically designated caregivers to these residents/patients as able.
IP / Delegated Staff	Notifies local DOH of any positive COVID results and seeks further guidance.
Administration	Notifies residents/patients R/PR of the positive COVID status within 24 hours of receiving the positive result.
Nursing Staff	Transfers of residents/patients (if necessary) to a higher level of care must follow the most recent recommendations/guidance from NYS DOH and CMS:
	a) Ensures resident/patient wears a surgical face mask if tolerated b) Notifies the Ambulance Service c) Notifies receiving EMS personnel d) Notifies receiving hospital
	 Follows the NYS DOH or CMS Guidance, whichever is more stringent, for asymptomatic resident/patients who have been exposed. Wears recommended PPE (gloves, gown, face shield/goggles and face mask) for the care of all the
	residents/patients in the designated COVID area, regardless of symptoms.
	Conducts outbreak testing per NYS DOH/CDC guidelines, whichever is more stringent.

Responsibility	Procedure
	Resident Prevention
Staff	 Offers residents/patients face masks to wear if leaving their room, attending any activity group (activity groups may occur with alterations to adhere to the guidelines for preventing COVID transmission), going out on an appointment or to dialysis and performs hand hygiene before leaving their room. Screens residents/patients for fevers and COVID symptoms every shift during outbreak. Offers remote communications via Skype and face-time when requested for R/PR to contact resident/patient.
Admissions Coordinator	Ensures COVID testing is complete showing negative results before admission to RNC.:
Environmental Staff	Disinfects all high touched surfaces and areas more frequently.
IP	 Monitors residents/patients for respiratory symptoms through morning report; reports any clusters of symptoms to the DOH
Staffing Coordinator	 Maintains logs of screening sheets and absences; reports instances of employees with COVID symptoms to IP.
	Admissions, Readmissions & Residents/Patients who Leave the Facility for More
	than 24 Hours
Nursing Staff	 Follows the NYS DOH/CMS/CDC guidance, whichever is more stringent. Advises resident/patient to wear source control per the NYS DOH/CMS/CDC guidance, whichever is more stringent.
	Performing Swab Test
Nursing Staff	 Wears an N95 mask if they have been cleared by a fit test while performing a COVID swab test on a resident/patient; otherwise a surgical mask, face shield or goggles (covering the front and sides of the face) gown and gloves and perform the swab test in a Private Room. Personal glasses and contact lenses are not considered adequate eye protection. Hand Hygiene needs to be completed before donning and after doffing their PPE and before exiting the room.
	PPE
All Staff	 Adheres to Standard and TBP precautions when caring for staff, residents/patients of the facility. For any residents/patients suspected of COVID, employees are required to follow the special droplet/contact precautions advised by CDC and NYS DOH. Special droplet/contact precautions include: keeping the residents/patients room door closed (if safe to do so), wearing face shield or goggles (covering the front and sides of the face) N95 mask, gown and gloves when entering the room and performs frequent hand hygiene. Personal glasses and contact lenses are not considered adequate eye protection. Hand hygiene needs to be completed before donning and after doffing PPE and before exiting the room. Wears a surgical mask at all times except for eating and drinking and maintains social distancing while eating and drinking. Maintains a 6-foot social distance as much as possible during their work duties. Adheres to cough etiquette, respiratory hygiene (covering nose and mouth when coughing or sneezing; disposing of used tissues in the garbage immediately after use) and frequent hand hygiene in the workplace. Changes mask if it becomes soiled or wet or exiting a room on COVID precautions.

Responsibility	<u>Procedure</u>
	PPE (cont'd)
All Staff	 Performs hand hygiene in following instances: When entering a resident/patient room for any reason (there is a risk of unexpected contact with the resident/patient) Arriving on duty, returning from break and completion of duty After blowing or wiping nose, or after covering mouth from cough or sneeze Before and after eating Before and after applying make-up or contact lenses After using the restroom Before direct contact with resident's/patient's intact skin (blood pressure, etc.) After direct contact with residents/patients Before donning and after doffing facility provided gloves When moving from a contaminated body site to clean body site during resident/patient care After contact with inanimate objects in the immediate vicinity of the resident (including medical equipment) After contact with mucous membranes, non-intact skin, body fluids or excretions and wound dressings Before inserting indwelling urinary catheters, peripheral vascular catheters or other invasive devices

Comments:

- All references to "patient" or "patients" are deleted and replaced with "resident(s)/patient(s)" or "R/PR" may be substituted also.
- Facility staff to include employee's, consultants and contractors volunteers, and caregivers who provide care
 and services to residents/patients on behalf of the facility, will be tested per NYS DOH, CMS guidance,
 whichever is more stringent.

<u>Forms / Assessments:</u> Special Droplet/Contact Precautions - Orange

Special Droplet/Contact Precautions

If patient has diarrhea and/or C. difficile add Contact Enteric Precautions.

LIMIT VISITORS AND DOCUMENT ANYONE THAT HAS CONTACT WITH THE PATIENT.

Display sign outside the door. At patient discharge, remove sign after room is terminally cleaned.

For use with:

Respiratory viruses including COVID-19

Dishes/Utensils:

No special precautions. Kitchenware sanitized in dishwasher.

Equipment and Supplies:

- · Only essential supplies in room.
- Use dedicated or disposable equipment when available.
- · Minimize use of cellphones/pagers.
- Clean and disinfect reusable equipment including intravenous pumps, cell phone or pagers (if used in room), and other electronics, supplies, and other equipment prior to removing from patient's room.
- Ensure blood pressure cuff and stethoscope are cleaned and disinfected between patients.

Waste and Linen Management:

For COVID-19, follow local and state public health guidelines Category B for medical waste handling. Bag linen in the patient's room.

Private Room:

If not available, room with patients that have the same organism but no other infection.

Terminal Room Cleaning (Updated 4/6/20):

Routine cleaning procedures **can** be performed **immediately** if an Aerosol Generating Procedure (AGP) was **NOT** recently performed in the room with the addition of cubical curtain changes per hospital procedure. If an AGP was performed, follow the protocol below for wait times with closed door air circulation prior to entering room for cleaning:

- · Airborne Infection Isolation Rooms (AIIR) with negative pressure, allow 35 minutes.
- · Non-AllRs without a HEPA filtration unit present, allow 70 minutes.
- LARGE (OR, CT) non-AIIRs with a HEPA filtration unit, allow 20 minutes.
- SMALL (ED rooms, patient rooms) non-AIIRs with a HEPA filtration unit, allow 10 minutes.

Transport:

Essential transport only. Patient should remain in room except for medical necessity. Patient should wash their hands. Place patient in clean gown. Place surgical mask on patient. Clean and disinfect transport vehicle. Alert receiving department regarding patient's isolation precaution status.



Special Droplet/ Contact Precautions

IN ADDITION TO STANDARD PRECAUTIONS



Only essential personnel should enter this room.

If you have questions, ask nursing staff.

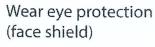
EVERYONE MUST (including doctors and staff):



Clean hands when entering and leaving room



Wear face mask





Gown and glove at door



When doing aerosolizing procedures fit tested N-95 with eye protection or higher required



Use patient dedicated or disposable equipment, clean and disinfect shared equipment

