



Updated 11/1/2020

## **COVID-19 Infection Prevention and Outbreak Response Plan**

The following areas were identified as key components to the successful management of an outbreak.

- Communication/Notification: Notification of staff, notification of residents/families, and notification of external sources.
- Resources and Assets: Staffing, PPE, supplies, equipment, transportation and evacuation, and testing.
- Safety and Security: Patient/staff/visitor Access.
- Patient Management: Clinical needs, resident rights, support activities, and physician visits.
- Facilities: sanitation/disinfection.
- Reporting Compliance.



## **SIGNS AND SYMPTOMS**

COVID-19 may be difficult to differentiate from other illnesses due to common signs and symptoms. The most common signs and symptoms associated with COVID-19 include: cough, new shortness of breath, sore throat, URI symptoms, fever, chills with or without shaking, new fatigue, new body aches, nausea, vomiting, diarrhea or new loss of sense of taste or smell.

## **TESTING**

The facility has an agreement with a local lab to assist with testing our residents. Staff may utilize other local free testing sites (such as CVS) as long as the results are made available to management. .

Goldenview completed initial point prevalence testing and subsequent testing requirements in accordance with Executive Directive 20-013 and submitted the required attestation of compliance to the NJ DOH. Ongoing testing and retesting will be in accordance with CDC and NJ DOH guidance, as amended and supplemented.



## COMMUNICATION

Goldenview has developed a communication plan to assure that, in an emergency or infectious disease outbreak, the necessary resources are in place to ensure:

1. Facility staff have cell phone contacts to contact management, other staff, residents families ,and other necessary people and/or agencies in a timely manner;
2. Resident families/responsible parties have a means to stay in touch with residents and facility staff.
3. Facility staff have resources to guide thought processes in the event of a primary telephone system failure.

### Emergency Notification

Goldenview Living shall notify the residents families/responsible parties of situations which affect routine operations; for example, infectious disease outbreaks and emergency preparedness measures such as utility failure, evacuation, etc.

The primary means of communication may include contact by phone, email, and or text message.

Specific to COVID-19:

- During an outbreak or suspected positive case: Goldenview will communicate at least weekly and by way of email, text and/or letters to resident's families and staff.



- ☛ If the facility receives a positive test result for a resident or staff (an outbreak), the facility shall notify all resident's representatives (one), and all staff by the next calendar day after the date the result is received by the facility.
- ☛ During an outbreak, positive test results for individual residents shall be reported directly (in person or by phone) to the resident's family member. Positive test results will also be shared with the facility Physician.
- ☛ During an outbreak, positive test results for staff shall be reported directly (in person or by phone) to the resident's family member, all staff, as well as the facility physician.

### **Alternate Means of Communication**

- ☛ During circumstances where in-person visitation is restricted, virtual visitation may be scheduled by calling the facility directly.

### **Urgent Communications**

Goldenview maintains channels of communication and transparency with families, and employees. In addition to local and state offices.

Goldenview families shall have the personal cell phone number of The administrator as well as our nurse. Goldenview families are able to reach our direct care staff 24/7 by calling our house phone number. This phone number is provided to all families upon admission.



## **RESIDENT PROTOCOL**

### **Monitoring Residents for COVID-19**

#### *Current Residents*

Monitor for signs and symptoms of COVID-19 at least once daily and notify physician if resident develops corresponding signs or symptoms.

#### *New Admissions and Readmissions from the Community or Hospital*

All new admissions and readmissions will be screened for COVID-19 prior to acceptance into the facility and upon admission. If the resident was tested at a facility prior to admission, the sending facility must provide lab results to the receiving facility. The resident will be placed in a private room upon entrance to the facility through the required isolation period as deemed appropriate by the facility nurse.



## **Management of Residents**

### *Transmission Based Precautions*

Residents who are newly admitted and residents who are COVID-19 positive or were exposed to someone who tested COVID-19 positive, will be placed on transmission-based precautions with the use of full PPE until the resident meets criteria for discontinuation of transmission-based precautions.

### *Transfer to an Acute Care Facility*

If a resident who is confirmed to be COVID-19 positive or is under investigation for COVID-19 requires transfer to an acute care facility, staff will notify the transferring EMS/ambulance agency of the resident's COVID status when placing the call to arrange transport, document the COVID status on the Universal Transfer Form and contact the receiving facility and inform them of the resident's COVID status.

### *Death*

If a resident who is confirmed to be COVID-19 positive or is under investigation for COVID-19 dies, inform the funeral home of the resident's COVID status.



## STAFF PROTOCOL

As long as COVID-19 is present in the surrounding community, there exists a risk of it entering the facility. To mitigate the risk of this occurrence by staff, the following staff-specific interventions are in place:

- Staff are receiving education specific to COVID-19.
- Staff are provided with PPE.
- Staff are directed not to report work if they feel ill



### **Screening**

Prior to entering the facility, all staff are screened for COVID-19. Staff who do not pass the screening process will be evaluated by the Goldenview nurse who will determine if they can work.

Staff who develop signs and symptoms during their shift must inform the Nurse or Administrator and be tested for COVID-19 ASAP. They will be restricted from work while test results are pending.

### **Staff Testing**

All staff will undergo testing in accordance with current CDC and/or NJ DOH guidelines. For employees who work at more than one facility, Goldenview will accept the results from another facility, provided that the testing is compliant with Goldenview's current testing process and the employee consents to have the test results made available to Goldenview simultaneously with the facility where the employee was tested.

### **Management of Symptomatic or Exposed Staff**

If staff are exposed to a COVID-19 case, Goldenview Nurse or designee must be informed of the exposure. The risk of exposure and need for work restrictions will be determined by using the *Revised NJDOH Exposure to Confirmed COVID-19 Case Risk Algorithm*.



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### **Management of COVID-19 Positive Staff**

Staff who test positive for COVID-19 will be restricted from work until they meet the criteria to return.

The Goldenview Nurse or their designee will initiate contact tracing, notify the local Health Department, notify staff, resident representatives and others per the facility's communication plan.

### **Return to Work Criteria**

Staff who test positive will be restricted from work and allowed to return when they meet CDC criteria for discontinuation of isolation.



## **Crisis Staffing**

Crisis staffing will be implemented during times of potential or actual staffing shortages to ensure continuity of operations and the ability to meet the needs of the residents.

1. All current full-time, part-time, and per diem employees will be notified when a staffing emergency is in effect and requested to provide additional availability to work.
2. Management may implement any/all the following initiatives with currently working staff: change shift length, adjust the start and/or end times for existing staff, implement mandatory overtime in accordance with state regulation and facility policy.
3. Additional initiatives may include:
  - a. Use temporary staff through contracted agencies.
  - b. Communicate the need among staff to postpone elective time off from work.
  - c. Address social factors that might prevent health care personnel for reporting to work such as transportation and housing.
  - d. Provide incentives for staff to pick up additional shifts
4. Communicate with local healthcare coalitions, federal, state, and local health partners to identify additional healthcare personnel.



## **VISITOR PROTOCOL**

Due to the vulnerability of our residents, and to reduce the risk of introduction of COVID-19 into the facility as community transmission becomes widespread, the facility will restrict the access of visitors and non-essential personnel in accordance with NJ Department of Health (NJDOH) guidelines and Executive Directives. Agency staff and essential medical providers will continue to be allowed into the facility.

Prior to entering the facility, all visitors are screened for COVID-19. Individuals who do not pass the screening process will be restricted from the facility.

Visitors who test positive for COVID-19 or have symptoms of COVID-19 within 14 days of visiting will be directed to self-isolate and notify the facility immediately.

## **Resident Visitation**

When resident visitation is restricted, virtual visitation will be available through face-time, zoom or other virtual methods for residents and families to stay in touch. Families will be able to schedule visits by calling the facility directly.

In-person visitation will be permitted in accordance with NJ DOH guidelines, subject to facility policies and procedures.

## **MANDATORY REPORTING**

During a COVID-19 pandemic the facility will complete mandatory reporting to the appropriate agencies.