

	Department: Administration	Initial Date: March 2020 April 8, 2021 September 1, 2021 December 5, 2021 December 22, 2021 Revised: January 19, 2022 July 15, 2022 July 26, 2022 August 20, 2022 August 22, 2022
	Policy Name: Outbreak Response Plan	Location: Parker at Somerset

PSO Outbreak Response Plan

Purpose: To provide a plan which limits direct person contact within the facility and can be used in case of an outbreak.

Outbreak in a long-term care facility is defined as:

- ≥1 facility-onset case in a resident or
- ≥ 2 confirmed cases among HCP within a 14-day period.
- 1 case in HCP is considered an investigation.

In the event of an outbreak, the Incident Command system will commence.

Communication Plan:

- Employees
 - Town Halls to review Response Plan with all staff in advance of the zoning (in advance if time permits).
 - Talking Points for huddles and in-services.
 - Informative flyers throughout the facility on all infection control practices, Group Emails for all employee with updates as/if needed.

- WebEx to be used for necessary meetings with and opportunities to connect with staff while practicing social distancing.
- Well-being support groups and EAP services can be offered to employee care partners.

- Elders/Families
 - Notification via in person, phone and/or written informing the residents and families that the facility has visitor precautionary measures based on status of the home.
 - Notification will be made via in person, phone calls, letter and/or email when there is a positive case.
 - Follow up calls to families and conversations with elders as needed.
 - Video call visits provided as needed.
 - Notification includes education on how employees and families are screened prior to entering the facility.
 - Inform families of the routine monitoring process of residents and staff to quickly identify signs of a communicable disease and institute isolation protocols if needed.
 - Social Worker may provide virtual support group as needed.

- Screening Process Communication (if not restricting visitors)
 - Screening process will be determined based on the type of outbreak the home has.

- Miscellaneous
 - Notification of lab testing if applicable.
 - Reporting to OEM, local health department, state department of health, CDC, NJHA, as required

Incident Command:

- Incident Commander: Administrator/designee execute the plan, establishes strategy (approach) and specific actions to accomplish the goals and objectives.
- Logistics: Director of Nursing, supports commander and operations in their use of personnel, supply, and equipment. Performs technical activities required to maintain the function of operations facilities and processes

- Planning: will be identified by the Incident Commander upon execution of the plan. Coordinates support activities for incident planning as well as contingency, long-range, and demobilization planning. Supports Command and Operations in processing incident information. Coordinates information activities across the response system.
- Admin/Finance: Will be identified by the Incident Commander upon execution of the plan, Supports Command and Operations with administrative issues as well as tracking and processing incident expenses. Includes such issues as licensure requirements, regulatory compliance, and financial accounting, group Emails or all River Road employee emails.
- Public Information Officer/Note Taker: will be identified by the Incident Commander upon execution of the plan.
- Safety Officer: Plant Operations Manager or designee

Work Zones:

Parker at Somerset will be divided into zones based on location and type of outbreak.

- Cohort 1 for positive outbreak will be located behind a physical barrier if the outbreak is located in the neighborhood where negative pressure rooms are not available and there are more than 2 cases.
- There will be one entrance for all employee care partners – the back entrance unless otherwise directed by Incident Commander/designee or next ranking employee.

Screening:

- Screening will be determined by the type of outbreak the home has.
- Appropriate Masks are maintained at the employee screening area. (Note: The mask will be kept in each employee's designated cubby.
- All staff have been fit tested for a N95 mask.
- The master list is maintained with the IP. Administrative Services has a copy of the master list and provide mask as needed.

Staff Assignments and Travel Within the Facility:

- Employees who have work assignments on the neighborhoods are to work in their neighborhood. This includes Nurses, C.N.A.s, Recreation, Dining Assistants and Housekeepers.
- Per diem – every effort will be made to ensure per diems do not cross homes or it is kept at a minimum. If they are floated, it will be tracked by the Scheduling Coordinator.
- If there are deployed Health & Wellness and Adult Day employees, they will report to their assigned neighborhood to support with activities, dining and other as defined by the Administrator and DON.
- Social Worker, EVS Manager, Recreation Manager, Food Services, Dietician and Maintenance Supervisor will float between those neighborhoods unless otherwise indicated by the Administrator or DON.
- Nurse Manager, MDS Coordinator, and Infection Control Preventionist Nurse to cover for vacant positions.
- Therapy Department will support with activities, dining, ADLs, etc. and will continue to follow infection control protocols with their equipment.
- DON supports the home.
- Informatic Nurse or IT Department would reassign EMAR when necessary.
- Concierge will remain at the reception desk of the home.
- Main Kitchen Staff are strictly assigned to the kitchen unless otherwise instructed by the Incident Commander.
- Staff will work on their designated assignments on their specific neighborhood. To the best of our ability, attempts will be made to adjust individual staff assignments in the same neighborhood. If this cannot be accomplished, an employee may be floated with Incident Commander approval and the change in whereabouts will be tracked.

***In the event an employee must float, he or she must perform hand hygiene to the point of exit of his/her neighborhood and perform hand hygiene at the point of entrance.

Breaks and Lunch

- Plastic dividers may be used on each table as a barrier for social distancing.
- If needed, breaks and lunch will occur in a designated area on affected neighborhood. Each break room will be equipped with a small refrigerator, microwave, table, and chairs.
- If not in an outbreak, breaks and lunch will occur in the Existing Staff Lounge. Maximum occupancy in the staff lounge will be 2 care partners per table.

- Dining will stock the break rooms with condiments, plastic utensils, etc.
- Employees with offices will dine in their offices with a limit of 2 employees if social distancing permits
- Employee meal delivery – Main Kitchen staff will deliver the food at the point of entry of the zone at designated times for day and evening shift (11:15 a.m. and 4:45 p.m.)
- Main kitchen staff will leave the 11-7 staff meals in the break room refrigerators.
- Breaks and lunch times may be staggered.
- Main staff lounge will be cleaned by the EVS team and employees in between usage using the provided disinfecting wipes.
- EVS staff in the zones will clean the break room frequently
- Maintenance will be responsible for setting up tables and chairs in each zone break area.

Dining

- Paper products will be used on all neighborhoods when necessary.
- Staff working on their specific neighborhoods will be responsible for delivering meals,
- Any resident on isolation or surveillance will receive paper products and will be disposed of in the elder's room trash and the bag will be tied and disposed of properly.

Recreation

- Recreation staff member will be assigned to each zone as appropriate.
- Depending on the outbreak, activities may occur room to room, 1:1 basis, or doorway programming as needed.
- Nursing and Recreation staff will walk with elders on the neighborhood. Other support staff such as Rehab and Health & Wellness can assist.
- Clinical Assistant will deliver the mail to the zone for distribution to elders.
- Newspaper will go to the outside of the zone for distribution to the elders on top of the meal carts. Manager will deliver mail and newspapers to the outside of the zone for distribution to elders.
- Recreation Manager will manage supplies/inventory and will deliver to outside of the zone needed.
- Recreation Department will support with activities, dining, etc. and will continue to follow infection control protocols with their equipment.

PPE

- All PPE will be safeguarded with access to all individuals and will be distributed as needed
- All Nurse managers and Infection Control Preventionist Nurse will ensure staff are educated on utilization and competencies on application of PPE will be completed.
- All elders should be wearing surgical mask (if possible) when walking outside and/or in common areas. Surgical masks will be replaced daily or as needed.
- Elders who are affected by the outbreak, under surveillance, and/or under quarantine should be wearing a surgical mask during care and when with the employee care partner if they are able to tolerate.
- All visitors, caregivers/compassionate care visitors/vendors must follow PPE protocol.
- New /re- admission must follow PPE as required.

Nursing

- Medication delivery will be directed to the Nursing Manager/Designee.
- If an employee is from another Parker Home, He/She will need to exit their location and enter through the designated entrance of the facility. Screening is required any time an employee enters a new Parker Location or home.
- Vital Signs will be checked per physician order.
- Monitoring back up supplies – Nursing Management E Kits / pharmacy / IV supplies with sufficient corresponding items required.
- PPE – Director of Nursing or designee determines the use of PPE and coordinates the retrieval of PPE with Central Supply and distribution. PPE must be disposed of at the point of use.

Therapy

- Therapists will support elders with therapy services as well as with ancillary needs.

Egress

- In the event of an emergency evacuation, all egress in all neighborhoods is accessible.

Personal Laundry

- Personal laundry will be washed and dried in the designated laundry area/room, all laundry from the outbreak locations must be placed in soluble bags.
- Dirty clothing bundles will be covered when transported to the laundry area/ room and again covered when transported back to the resident's room.

Linen

- Each neighborhood will continue to use their existing linen closets.
- Maintenance or EVS designee will accept the linen delivery in the rear entrance. The vendor will not enter the facility.
- EVS will drop off the clean linen in each neighborhood linen closet three times a week (M, W, F). Outbreak designated area will receive daily linen on each shift.
- Dirty linen will be bagged, tied and left in the utility room. Dirty linen will be left outside of the zone during the morning, afternoon, and evening hours.

Supplies

Personal Care Supplies/Incontinence Supplies:

- Supply Chain staff member will be responsible for delivering medical supplies to each neighborhood. If unexpected items are needed, email Material Services and it will be delivered. In the event of an urgent need and receiving is not onsite, call Receiving to the facility to distribute them.

Medication Rooms:

- Nurse Manager to make rounds and check supplies needed (oxygen, water, PPE, sanitizer, disinfectant wipes, etc.) and send an email to Parker Material Services (Pat).
- Supplies will start to be delivered at 8 am.
- An employee from supplies room will stock the items.

EVS

- Trash removal occurs daily during morning, afternoon, and evening hours. Outdoor route to be used where able.
- Linen removal occurs daily during morning, afternoon, and evening hours. Outdoor route to be used where able.
- Nursing to swipe EVS into the medication room to clean.
- Lifts to be cleaned by each nursing care partner as needed. Use disinfectant wipes.
- Wheelchairs to be cleaned by each nursing care partner. Use spray and wipe down.
- Cross train nursing and EVS staff to clean chairs.
- Routine cleaning and disinfecting of the areas.
- Biohazard waste boxes will be in the designated biohazard closet. Each biohazard waste box should be lined with a red biohazard bag. Biohazard waste pick up will be scheduled by the EVS Manager.

- There will be an increase frequency of cleaning during an outbreak especially in high touch areas. Nurses will be responsible for disinfecting medication carts and nursing equipment supported by EVS.
- Halo machine utilized for terminal cleaning.
- External professional cleaning company cleaned the facility on two occasions and will be called in if needed.
- EPA registered disinfectant in use.

Employees Permitted to Float (without prior approval unless otherwise directed)

Administrator
 Director of Nursing
 Social work Manager
 Corporate Support Personnel
 Recreation Manager
 Plan Ops Manager
 Porters and Maintenance Staff
 Environmental Services Manager
 Rehab Staff
 Feeding assistants as assigned to each neighborhood
 Supply Chain Staff
 Stein Hospice aides will limit interaction to the Stein Hospice elders.
 Nurse manager on duty
 Clinical Assistant

Employees permitted to float minimally:

Designated EVS
 Maintenance Mechanics
 Per Diem Care Partners
 Information Technology Services

***Note: The Incident Commander or designee may grant float access at his/her discretion.

Outbreak Testing:

Employees Testing

Determination of employee testing will be done based on the type of outbreak and with the direction of the Infection preventionist with communication and guidance of the local and state Department of Health.

Resident Testing

1. Elders and families will be notified of the testing when ordered.
2. A nurse will administer the test in accordance with infection control protocol.
3. Results of the test will be provided to the elder and family member when available.
4. Testing will occur on and as needed basis until further notice.

Cohorts

- In the event of any isolation need, all Parker infection control policies will be followed.

- The type and number of cohorts will be determined by the Incident Commander or Infection Preventionist based on the type of outbreak.

Cohorting

Residents in need of isolation/Cohorting will be transferred to the appropriate area with family/elder notification.

See Cohorting policy for more details.

1. Cohort 1 – Isolation
 - a. Assigned neighborhood will be the designated outbreak unit
 - b. Residents display typical symptoms.
 - c. Staff are designated and will not move throughout the home to the best of our ability.
 - d. Proper PPE will be worn per policy.
 - e. Infectious Disease/Physician to serve as a consultant if needed.
 - f. Telehealth implemented if needed.

2. Cohort 2 – Defined as anyone with known high-risk exposure and is at risk for developing symptoms. The residents may be placed on Transmission Based

Precautions, depending on vaccination status, tested per protocol, and monitored for symptoms.

- a. Resident monitoring will be in place.
 - b. All symptomatic residents will be evaluated for causes of their symptoms.
 - c. Separated from other sections of the home and be easily identified and inaccessible to unaffected residents.
 - d. Resident on transmission-based precautions will remain in their room and tested per protocol.
 - e. Infectious Disease will be notified.
 - f. Proper PPE designated will be worn
 - g. Meals will take place in room.
 - h. Recreation and Social Workers will provide audio/visual methods of communication as needed.
3. Cohort 3 – Not Exposed
4. Cohort 4 – New or Re-Admission Observation
- a. New and re-admission residents from the community or other homes will be monitored for symptoms as per protocol.
 - b. New and re-admission will be tested based on outbreak requirements as determined by the IP and in communication with the Local and State Department of Health.
 - c. Proper PPE designated will be worn.
 - d. Risk assessment to be identified.
 - e. Level of restriction to be maintained (residents remain in rooms).
 - f. Meals will take place in room.
 - g. Recreation and Social Workers will provide audio/visual methods of communication.
 - h. Communication with POA/responsible party will remain fluid for the duration of the time.

Emergency Staffing/Contingency Plan

See Emergency Staffing policy for more details.

- a. Identify internal staffing capability including additional shifts, potential loyalty or incentive pay, and/or outsource agencies for assistance.
- b. Coordinate with sister facility within Parker to determine if staff can be utilized.
- c. Inform OEM for other potential resources.
- d. Should a labor stoppage or shortage occur, the DOH will be notified.
- e. All data required to be reported will continue to be reported.