

# WARM SPRINGS MEDICAL CENTER NURSING HOME REOPENING PLAN

In an effort to reopen our facility in accordance with DPH Code Section 31-7-12.5, Warm Springs Medical Center Nursing Home has implemented the following protocol per the Administrative Order from DPH for Long Term Care Facilities. The Re-Open date for this facility is 4/19/2021.

Meriwether County's positivity rate is 6.0% indicating we are in the YELLOW zone. We are in Phase II according to guidelines set forth by the Department of Public Health.

Warm Springs Medical Center Nursing Home currently has 0 residents in house who are positive for COVID-19. Our last resident who tested positive was on 2/27/21. We do have an Observation Unit established which currently houses 0 residents under Observation.

Warm Springs Medical Center Nursing Home participated in an in-depth review of our facility's Re-Open Plan on 4/15/21 with the following Infection Preventionists from Department of Public Health: Teresa Fox, Renee Miller, Donovan Stephens and Cyndra Bystrom. Also attending the call was WSMC staff, Karen Daniel, RN, Chief Executive Officer, Jacob Austin, Licensed Nursing Home Administrator, and April Bunn, Infection Preventionist. Our plan was accepted as presented and is as follows:

## **RECOMMENDATIONS FOR PROGRESSION THROUGH PHASES**

Consideration for relaxing visitor restrictions in our facility will be based on the following components:

- 1. Positivity rate in local community Each Monday the Infection Preventionist or designee will log into the DPH website @ <u>COVID-19 Nursing Home Data | Data.CMS.gov</u> to check Meriwether County's positivity rate. This information will be relayed to the COVID-19 Task Force Team
- 2. Positivity rate in our facility The positivity rate within our facility is determined by the Infection Preventionist by dividing the # of residents who have tested positive for COVID-19 divided by the total # of residents in the facility.
- 3. Written plan to support reopening This Reopening Plan serves as our written plan to support reopening.
- 4. Testing Plan Our testing plan includes the following components:
  - > Testing is conducted on all symptomatic residents and staff; all asymptomatic staff; and in response to an outbreak

- > Warm Springs Medical Center Nursing Home has the availability and resources to test and detect SARS-CoV-2 virus. Our facility does not use "antibody" test results to diagnose active SARS-CoV-2 infection
- > Our facility uses antigen testing using the CDC algorithm found at (<a href="http://www.cdc.gov/coronavirus/2019-ncov/downloads/hcp/nursing-home-testing-algorithm-508.pdf">http://www.cdc.gov/coronavirus/2019-ncov/downloads/hcp/nursing-home-testing-algorithm-508.pdf</a>
- > Our protocols address seasons with high volumes of influenza where residents and staff are tested for both SARS-CoV-2 and Influenza
- 5. Adequate staffing Warm Springs Medical Center will NOT reopen to visitors if our facility is under a contingency staffing plan and/or is not receiving supplemental staffing from the state. Warm Springs Medical Center Nursing Home does utilize agency staffing from time to time who are well trained in infection control protocols and monitored accordingly through our Infection Control & Prevention Program.
- 6. Access to adequate Personal Protective Equipment (PPE) for staff Our Infection Preventionist, Safety Officer, and Central Supply Clerk carefully monitors inventory of PPE and keeps a spreadsheet of all in stock items and submits orders as necessary to ensure we do not fall below required inventory.
- 7. Local hospital capacity Our facility is attached to a 25-bed critical access hospital which is ready and able to accept nursing home residents as needed.

Our written plan to support reopening contains the following minimum elements:

- 1. Protocols for surveillance and detection of epidemic and pandemic diseases in residents and staff;
- 2. A communication plan for sharing information with public health authorities, residents, residents' representatives or their legal surrogates, and staff;
- 3. An education and training plan for residents and staff regarding infection control protocols;
- 4. An infection control plan that addresses visitation for all reopening phases, cohorting measures, sick leave and return to work policies, and testing and immunization policies;
- 5. A screening protocol for all visitors and healthcare workers that includes temperature checks, questions about signs and symptoms and exposures to a COVID-19 contact in the past 14 days regardless of vaccination status and entry denial for those with reported or observed signs, symptoms or exposures.
- 6. COVID-19 Management and treatment protocols for residents have been developed, updated and are monitored by the Infection Preventionist of Warm Springs Medical Center Nursing Home in conjunction with the Director of Nurses of the facility;
- 7. Protocols to vaccinate residents and staff, including procedures to vaccinate newly admitted residents and hired staff, for residents and staff that decline vaccination; and for residents and staff that have been exposed or are COVID-19 positive;
- 8. The Infection Preventionist will maintain a line list of resident and staff COVID-19 vaccination and post COVID status;
- 9. A surge capacity plan that addresses protocols for contingency staffing and supply shortages;
- 10. An Infection Preventionist with dedicated time for on-site infection prevention implementation and monitoring;
- 11. Risk Assessment for reopening following an outbreak or levels of high community transmission (See attached Risk Assessment)
- 12. A visitation policy that addresses safe management of residents' visitation.

13. Warm Springs Medical Center Nursing Home has implemented its water management plan to reduce Legionella growth and spread in our building by adhering strictly to a bottled water system. There are no water fountains in the nursing home. CMS COP: <a href="https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGeninfo/Downloads/QSO17-30-HospitalCAH-NH-REVISED-.pdf">https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGeninfo/Downloads/QSO17-30-HospitalCAH-NH-REVISED-.pdf</a>.

#### **CRITICAL COMPONENTS OF INFECTION PREVENTION & CONTROL**

In order to ensure the facility includes all critical components of an active Infection Prevention & Control Program, the following areas are addressed in our re-opening plan:

#### UNIVERSAL SOURCE CONTROL FOR STAFF, RESIDENTS & VISITORS

Source control refers to respirators, surgical facemasks, and well-fitting cloth masks. These masks are designed to contain respiratory secretions when one breathes, talks, sneezes or coughs. Education on the importance of utilizing source control effectively has been provided to both staff and residents. All visitors will receive education regarding the same PRIOR to entry into the building for visits. It is imperative that we protect our residents and staff from infection that could be introduced into this facility from outside sources.

Avoid touching the outside of your mask. If you must re-adjust your mask, please use an alcohol-based hand sanitizer before and after mask adjustment. **Masks with exhalation valves are not allowed.** 

- A. Staff Source Control All facility staff must wear either a respirator (preferred), a surgical facemask or well-fitting cloth mask. When N-95 respirators are not available for direct care our facility may utilize the K-N95 mask well-fitting with a nose wire.
- B. Resident Source Control Residents should wear a surgical facemask or well-fitted cloth mask if tolerated. *Cloth masks must be laundered daily.* **Respirators are not recommended for our residents per DPH.**
- C. Visitor Source Control
  - Visitors must wear at minimum a surgical mask or well-fitted cloth mask. Cloth masks should be laundered daily. Visitors who are unable or unwilling to maintain these precautions will be restricted from entrance into the building.
  - All visitors must maintain social distancing during their visits with their resident
  - All visitors must perform hand-washing or sanitizing upon entry to and frequently during their visit at the facility
  - Follow any other additional guidance provided by the facility
  - If a visitor does not adhere to core infection control practices, they will not be allowed to visit and will be asked to leave the facility. This is for the protection of our residents.
- D. UNIVERSAL PPE will be implemented during periods of high to moderate transmission. Staff may wear eye protection (face shield or goggles). All facility staff and essential healthcare personnel will wear appropriate PPE when they are interacting with residents, in accordance with CDC PPE optimization strategies. PPE policies are in place for visitors and PPE will be provided to visitors if and when supplies are sufficient.

NOTE: To ensure proper usage of mask, consult with a DPH Infection Preventionist @ HAI@dph.ga.gov

#### HVAC (HEATING, VENTILLATION, AND AIR CONDITIONING SYSTEM

For our residents and staff protection, Warm Springs Medical Center Nursing Home has evaluated its HVAC system to ensure adequate ventilation and protective barriers are in place in order to control the spread and cross contamination of COVID-19 virus. An upgrade to our HVAC system was provided to include a negative pressure environment in specific rooms in which to house residents testing positive for COVID-19 virus.

#### **COVID-19 UNIT (Residents in QUARANTINE)**

Warm Springs Medical Center purchased an Edge Guard System which can be erected within the facility when there is a need for a distinct COVID Unit. The Edge Guard system is portable and can be removed when there is no longer a need to provide strict cross contamination prevention measures. This system allows a negative pressure environment to be established for all rooms within that existing structure to improve infection control measures.

All COVID-19 residents are housed together within the same unit in a negative pressure setting and are treated by a dedicated staff during the shift for a minimum of 20 days until they are cleared to return back to the general population. This Unit also houses admitted residents with a history of COVID-19 who have not met criteria for discontinuation for transmission-based precautions.

The COVID Unit contains a separate entrance and exit for staff as not to have them contaminate other portions of the building. These dedicated staff members are also provided with separate breakrooms and bathrooms.

Extended use of gowns should only be practiced if the facility is operating in contingency or crisis capacity

Extended use of gowns can be worn on the COVID-19 Unit if there are no residents with other epidemiologically significant organisms such as MDROs, C-Diff, Influenza, Norovirus, etc.

Gowns CANNOT be worn OUTSIDE the COVID Unit.

Assigned staff are dedicated to the COVID Unit

# **Residents appropriate for the COVID-19 Unit:**

- Residents with confirmed COVID-19 who have not met criteria for discontinuation of transmission-based precautions
- Residents with a history of COVID-19 that have not met criteria for discontinuation for transmission based precautions

#### **OBSERVATION UNIT**

Warm Springs Medical Center Nursing Home has also implemented an Observation Unit for admissions and re-admissions into the facility. This Unit is separate from the COVID-19 Unit and is utilized for admissions and re-admissions who are not fully vaccinated and/or have an unknown COVID-19 status. All residents in the Observation Unit are monitored carefully for 14 days before integrating into the general population.

#### **Residents appropriate for the Observation Unit:**

New admissions and readmissions whose COVID-19 status is unknown or are not fully vaccinate

#### **GENERAL POPULATION**

A resident may be placed in General Population if the following criteria are met:

- Resident has fully recovered from COVID-19 and completed transmission-based precautions AND
- Is within 3 months of COVID-19 onset (either first positive test or symptom onset, whichever occurred first) AND
- Is ASSYMPTOMATIC

OR

- Is fully vaccinated (i.e. equal to or greater than 2 weeks following receipt of second dose in a 2-dose series or equal to or greater than 2 weeks following receipt of one dose of a single dose vaccine, AND
- Has not had prolonged close contact (within 6 feet for a cumulative total of 15 minutes over a 24 hour period) with someone with SARS CoV-2 infection in the past 14 days.

<u>With the exception of compassionate care visits, residents in quarantine should NOT have visitors until they have met criteria for discontinuation of transmission-based precautions.</u>

Residents who are undergoing hemodialysis at outpatient clinics or for resident day outpatient visits are not required to be quarantined. Instead, DPH recommends that residents returning from outpatient visits, be monitored very closely for signs and symptoms.

#### **WIDE-SPREAD TESTING PLAN**

Given the need to implement wide-spread testing within the facility, residents are not to be moved or relocated UNTIL their test results are available.

## **MANAGEMENT OF RESIDENTS WHO ARE EXPOSED & SYMPTOMATIC**

If a resident develops COVID-19 symptoms:

- Test the resident in their room and wait for results before moving the resident.
- If the symptomatic resident has a roommate, ensure that the roommate is tested and leave the roommate in place UNLESS there is a single room available to which to move them
- VACCINATED residents should quarantine following exposure to an individual with confirmed or suspected COVID-19 (within 6 feet for a cumulative total of equal to or greater than 15 minutes over a 24 hour period). Currently the CDC does not have data on the potential for transmissibility of COVID-19 from vaccinated individuals.
- If testing indicates a positive resident with a negative roommate, move the positive resident to the COVID-19 Unit and leave the negative roommate in the room by themselves. For the negative resident, quarantine in place X 14 days.

#### **MITIGATION STEPS BY PANDEMIC PHASE**

The Department of Public Health has condensed this Pandemic into TWO PHASES within which long term care facilities may operate within, Phase I and Phase II. Warm Springs Medical Center Nursing Home has outlined components of each phase as we may find ourselves in either phase depending on the positivity rate within our county and within our own facility.

# **PHASE I**

Phase I includes the following components:

- > Is designed for vigilant infection control during heighted virus spread in our local community and low resident vaccination rates;
- ➤ 14-day COVID-19 COUNTY positivity rate = **RED** AND
- > < 70% of residents are vaccinated, OR
- ➤ New facility onset cases COVID-19 (regardless of community transmission rate or facility resident vaccination rate) in the last 14 days.

Warm Springs Medical Center Nursing Home uses the following website to view Meriwether County's positivity rate: https://dph.georgia.gov/covid-19-daily-status-report

Currently our facility has a county positivity rate of 6.8% and we are in the designated YELLOW zone.

84"% of our residents have been fully vaccinated

There are 0 active cases of COVID-19 in our building

We have 1 resident in the Observation Unit

#### **Window Visitation**

Window visits (not in the resident's room) may be facilitated for non-symptomatic and non COVID-19 positive residents where the resident will be brought into the commons area UNLESS the facility is undergoing an outbreak. At that point window visits are placed on hold.

During inclement weather, Warm Springs Medical Center Nursing Home has constructed a visitation booth with dividers created between resident and visitor. Visitation periods are limited to 15-30 minutes, depending on the volume of appointments wishing to utilize the visitation booth. The booth is cleaned with disinfectant between each use.

#### **Outdoor Visitation**

If the facility is undergoing an outbreak, outside visits may occur IF the facility has staffing to effectively support outbreak containment and observation of outside visits. **Outdoor visits are ONLY for non-symptomatic and non-COVID positive residents.** 

#### **Indoor Visitation**

#### For facilities with an Outbreak:

- > COVID-19 positive residents regardless of vaccination status will defer visitation until transmission-based precautions are discontinued, with the exception of *COMPASSIONATE CARE VISITS*.
- > Visitation will be paused during an Outbreak for both the resident, staff, and family member/friend's protection.

#### For facilities WITHOUT an Outbreak:

- ➤ Limited visitation may be allowed for fully vaccinated residents Our facility will determine the number and schedule of visits to reduce the potential for importing the virus from the community into the facility.
- > <u>UNVACCINATED</u> residents will be limited to compassionate care visits ONLY.

## **COMPASSIONATE CARE VISITS**

Compassionate care situations are for those residents who:

- Recently admitted struggling to adapt to a new home;
- Recent grief from loss;
- > Experiencing weight loss and dehydration;
- > Exhibiting signs of emotional distress

Compassionate care visits also include CLERGY and are required under the federal disability rights law.

Warm Springs Medical Center Nursing Home requires the following protocols for compassionate care visits:

- Screen visitors upon arrival
- > Assist visitors with PPE donning and doffing
- > Escort to and from the resident's room
- > Limit visitor access to other areas within the facility
- > Conduct ongoing assessments of resident's need for compassionate care visits including but not limited to, end of life care
- > Continuously monitor residents for social distancing, placement of mask & correct usage and placement of furniture to support social distancing
- > Instruct residents and visitors to avoid touching the outside of their masks (it is **contaminated**, and if an adjustment is needed to perform hand hygiene before and after.
- > Instruct **VISITORS** to conduct hand hygiene frequently during visit; at a minimum upon entrance to the facility, exit from the resident's room, and exit from the facility.
- > Instruct **RESIDENTS** to perform hand hygiene prior to leaving their room and don a mask (if tolerated). Upon re-entry to the facility or re-entry to their room, perform hand hygiene.
- > RESIDENTS MUST REMAIN IN THEIR ROOM IF:
  - They are COVID-19 POSITIVE
  - Symptomatic and awaiting test results

- On QUARANTINE
- In OBSERVATION UNIT

#### **Non-Essential Healthcare Personnel**

Non-essential healthcare personnel & contractors are allowed entrance into our facility UNLESS:

- they have been given a work exclusion due to exposure to COVID-19 OR
- if they fail screening at the screening station.

Workers are expected to following Warm Springs Medical Center Nursing Home's infection control precautions, including social distancing, hand hygiene, and surgical facemask or well-fitted cloth mask. Workers must participate in our Screening, testing, source control, and social distancing requirements. *During an OUTBREAK, our facility will consider temporarily limiting or pausing non-essential staff entry.* 

# **Resident Trips Outside Our Facility for NON-MEDICAL Reasons**

- > NON-MEDICAL trips will not be allowed
- > Telemedicine will be utilized whenever possible

# **Resident Trips Outside Our Facility for MEDICAL Reasons**

For medically necessary trips away from the facility:

- ➤ The resident MUST wear a surgical mask or facemask if tolerated;
- > The facility must share the resident's COVID-19 status with the transportation personnel and entity with whom the resident has an appointment;
- > Transportation staff, at a minimum, must wear a surgical mask or well-fitted cloth mask. Additional PPE may be required.
- > Transportation staff should use alcohol-based hand sanitizer upon entry and exit to facility. Residents should use alcohol-based sanitizer prior to leaving facility and upon re-entry.
- > Transportation equipment should be sanitized between transports.
- > Resident screening for signs and symptoms three (3) times a day for 14 days upon return
- > Family members must notify the facility if they develop symptoms upon returning their resident back to the facility after a social excursion

# **Communal Dining**

# Communal dining will be limited to residents not exhibiting any signs or symptoms and only if the facility has completed baseline testing and is without any new facility-onset COVID-19 cases for 14 days.

- Residents may eat in the same room with social distancing with no more than two (2) residents at one table socially distanced apart. Tables are 6 foot in diameter which allows the 6 feet requirement for social distancing
- Warm Springs Medical Center Nursing Home has constructed plexi-glass partitions for each dining room table to help contain the spread of infection during the resident's dining experience.
- Our facility will not allow greater than 50% of our in house volume UNLESS that number would be less than 10.
- If staff assistance is required during communal dining, STAFF MUST:
  - 1. Use alcohol-based hand sanitizer BETWEEN EACH RESIDENT, and
  - 2. Use appropriate PPE
  - 3. Clean and disinfect all tables, chairs, and dining area AFTER EACH USE.
- **✓ DURING AN OUTBREAK, communal dining will be PAUSED UNTIL OUTBREAK IS CONTAINED.**

# **GYMS**

- > In Phase I, the therapy gym will be CLOSED DURING AN OUTBREAK.
- ➤ If an outbreak is not occurring, gym access will be limited to COVID=19 NEGATIVE or asymptomatic residents who meet criteria for discontinuation of transmission based precautions. Visitors will NOT be allowed in gyms.
- > Physical Therapy is addressed under medically necessary visits (see Residents trips outside the facility for medically necessary reasons.)

#### **Screening of Residents & Staff**

Warm Springs Medical Center Nursing Home has developed an Infection Control policy which addresses screening of residents/staff/visitors.

#### **RESIDENTS:**

> Screened three (3) times a day during Phase I. This screening is documented on the resident's Medication Activity Record for easy tracking and monitoring purposes;

#### STAFF:

> Upon entrance into the building at the beginning of their shift. Screening includes electronic monitoring of temperature in addition to a series of questions regarding signs & symptoms of infection and potential or actual exposure.

# **Group Activities**

#### **OUTBREAK:**

If our facility experiences an Outbreak,

- > the doors on affected residents will remain closed if tolerated
- > Facility group activities will be PAUSED until the outbreak is contained.

#### NO OUTBREAK:

If our facility is NOT experiencing an Outbreak,

> Small group activities (10 or less) participants may be implemented. Activities requiring contact by multiple residents are not allowed (i.e. tossing ball where multiple residents touch the ball, etc.) All other items used during activities must be wiped down with disinfectant after each use.

# **Beauty Salon**

Currently these services are not provided at Warm Springs Medical Center Nursing Home.

# PHASE II

Phase II includes the following components:

- > ONE-TIME baseline testing of RESIDENTS and DIRECT CARE STAFF has been conducted AND
- > No new facility onset of COVID-19 cases in the last 14 days, AND
- > 14 day COVID-19 county positivity rate is **RED** with greater than 70% of residents vaccinated, OR
- > 14-day COVID-19 county positivity rate is YELLOW or GREEN (regardless of facility vaccination rate).

Warm Springs Medical Center Nursing Home uses the following website to view Meriwether County's positivity rate: <a href="https://dph.georgia.gov/covid-19-daily-status-report..">https://dph.georgia.gov/covid-19-daily-status-report..</a>

Our facility has conducted baseline testing of residents and direct care staff and there have been 0 positive cases of COVID-19 within the last 14 days and we are in the YELLOW zone with a county positivity rate of 6.8%. 84% of our residents have been fully vaccinated.

#### **Window Visitation**

Window visits (not in the resident's room) may be facilitated for non-symptomatic and non COVID-19 positive residents where the resident will be brought into the commons area if this type of visit is requested, UNLESS the facility is undergoing an outbreak. At that point window visits are placed on hold.

During inclement weather, Warm Springs Medical Center Nursing Home has constructed a visitation booth with dividers created between resident and visitor. Visitation periods are limited to 15-30 minutes, depending on the volume of appointments wishing to utilize the visitation booth. The booth has a separate entrance for residents and visitors. The booth is cleaned with disinfectant between uses.

#### **Outdoor Visitation**

If the facility is undergoing an outbreak, outside visits may occur IF the facility has staffing to effectively support outbreak containment and observation of outside visits. Outdoor visits are ONLY for non-symptomatic and non-COVID positive residents.

#### **Indoor Visitation**

Warm Springs Medical Center Nursing Home will NOT conduct indoor visitation UNLESS it has completed one-time baseline testing and be without any new facility onset of COVID-19 cases for 14 days.

Indoor visitation volume will be based upon:

- > Staff availability to screen visitors
- > Availability of supplies to support universal source control (facemasks)
- > Ability to monitor visitor compliance with safe visitation practices, AND
- > Disinfection of area between visits

In order to ensure smooth indoor visitation, our facility has developed a policy which addresses visitation and outlines the following components:

- ➤ Limiting the number of visitors per resident at one time. Our facility will allow 1 visitor at a time per resident and will support up to 5 visitations at one time in the commons area of the facility.
- ➤ Length of visits Visits will be limited to 30 minutes in length in order to ensure all residents wishing to visit with family members have an equal opportunity.
- > Utilization of proper infection control practices during visits
- > When to allow visitation (preferably after full vaccination status)
- > Screening of visitors
- > Limiting visitor movement within the facility
- > Designated areas for visitation
- Documentation of visitor's visit w/contact information

## **Compassionate Care Visits**

Refer to Compassionate Care Visits under PHASE I SECTION of this plan

#### **Non-Essential Healthcare Personnel**

Refer to Non-Essential Healthcare Personnel under PHASE I SECTION of this plan

# Resident Trips Outside the facility for NON-MEDICAL Reasons

We do limit trips outside the building for NON-MEDICAL reasons. Residents who quality for outside trips are:

- ➤ COVID-19 NEGATIVE
- > Residents who meet the discontinuation of transmission-based precautions and are ASYMPTOMATIC (regardless of vaccination status).
- > Residents who qualify for outside trips must be educated as well as their family members on the importance of wearing a well-fitting masks, hand hygiene, and social distancing while the resident is on their outside
- > Social Excursions: Occasionally family may wish to take a resident on a day trip away from the facility

Residents with multiple co-morbidities and immunodeficiencies (at increased risk for severe illness) are NOT RECOMMENDED to participate in NON-MEDICAL resident trips.

For limited non-medical trips away from the facility – SOCIAL EXCURSIONS:

- > Not allowed for residents on transmission based precautions
- Families will be educated on appropriate infection control, including mask wearing, social distancing, hand hygiene, and avoidance of crowds and poorly ventilated indoor spaces. (Families may be asked to sign an acknowledgement form on the facility's social excursion protocol before resident release.)
- > The resident MUST wear a surgical mask or well-fitted cloth mask; and
- > Transportation staff, at a minimum, must wear a facemask. Additional PPE may be required. Transportation staff must don PPE after facility entry to ensure clean PPE are used in facility
- > Transportation staff must use alcohol-based hand sanitizer upon entry and exit to the facility and upon re-entry.
- > Transportation equipment must be sanitized between transports
- > Resident screening for signs and symptoms will be put into place three times a day for 14 days upon return
- ➤ If a resident is absent from the facility for > 24 hours OR if the facility is uncertain that the resident and family followed the facility excursion protocol, the resident should be placed back into QUARANTINE x 14 DAYS as per admission protocol.
- > Family members must notify the facility if they develop symptoms of COVID-19 after returning their resident back to the facility after a social excursion.

# **Resident Trips Outside Our Facility for MEDICAL Reasons**

Refer to Resident Trips Outside Our Facility for Medical Reasons in PHASE I SECTION of this plan

#### **Communal Dining**

Refer to Communal Dining under PHASE I SECTION of this plan

# **GYMS**

- > In Phase II, Gym access is limited to COVID-19 NEGATIVE or asymptomatic residents or residents who meet criteria for discontinuation for transmission based precautions.
- > All applicable rules for operation of gyms and fitness facilities set forth in the Governor's Executive Orders shall be followed.

> Physical Therapy is addressed under medically necessary visits (See Residents tips outside the facility for medically necessary reasons.)

# **Screening of Residents & Staff**

Refer to Screening of Residents & Staff under PHASE I SECTION of this plan; however, in Phase II if the community positivity rate is in the GREEN Zone, residents can be assessed daily vs. 3 times/day.

#### **GROUP ACTIVITIES**

- > Small group activities may occur with social distancing, hand hygiene, and use of a surgical mask or well-fitted cloth mask and no more than 10 people or such that social distancing can be maintained;
- > Staff and residents will wear source control face coverings at all times
- > Our facility will establish resident cohorts for activities (same group of residents dine and engage in activities consistently)
- > All communal high touch surfaces are disinfected after residents or staff vacate the area
- > We will work to prioritize outdoor settings for activities when possible
- > Restrict activities that encourage multiple residents to handle the same objects (i.e. ball toss)

#### **PHASE REGRESSION**

Warm Springs Medical Center Nursing Home will continue to monitor for the presence of COVID-19 in our facility. We will accomplish this through:

- > daily resident screening three (3) times per day
- > staff screening before each shift and entry into the building
- > Review of the facility COVID-19 data, which includes COVID-19 cases, availability of PPE, laboratory testing, and alcohol-based sanitizer. These findings are reported through up to our COVID TASK FORCE TEAM three (3) times per week.

If one or more staff member or facility onset resident is confirmed positive for COVID-19, our facility will return to PHASE I.

After 14 days have passed with NO ADDITIONAL RESIDENT/STAFF MEMBER testing positive for COVID-19, the facility has demonstrated the ability to mitigate the spread of COVID-19 and may return to PHASE II of the reopening process.

Our facility will also return to PHASE I when the data criteria for PHASE II are no longer met.

#### **TESTING REQUIREMENTS & GUIDANCE**

Warm Springs Medical Center Nursing Home adheres to the following testing requirements for long term care facilities:

- 1. Baseline testing
- 2. Test symptomatic residents and staff
- 3. Outbreak testing
- 4. Serial testing of staff during non-outbreak status

These requirements may be found at <a href="http://www.cms.gov/files/document/qso-20-38-nh.pdf">http://www.cms.gov/files/document/qso-20-38-nh.pdf</a>

Our facility utilizes both Antigen and PCR (polymerase chain reaction) testing, primarily using antigen testing; however, there are times where PCR testing is used for confirmatory purposes. Our facility has the capability of using rapid point of care testing and are covered under the CLIA waiver to provide this service for rapid turn-around times of test results for the enhanced protection of our residents.

# **Antigen Testing**

This type of testing is used for:

- Rapid testing of SYMPTOMATIC residents and staff. All negative antigen tests on residents/staff who are SYMPTOMATIC will be followed by a collection and shipment of a specimen for PCR testing within 48 hours. Our facility uses Clinical Pathology Lab for PCR testing.
- > Our facility also uses Antigen testing for asymptomatic staff to meet CMS nursing home staff serial testing requirements based on local incidence of COVID-19.
- > Antigen Testing is also used in our facility to test asymptomatic residents and staff as part of a COVID-19 outbreak response. Outbreaks are reported to our district health department.

Because all residents/staff may not present with the typical symptoms of fever and acute respiratory illness but may in fact present with other symptoms such as altered smell or taste, clinicians will consider testing for other causes of respiratory illness such as influenza as it is possible that co-infections may exist.

Our facility reports all antigen testing results using NHSN @ https://sendss.state.ga.us

#### **Baseline Testing**

Per the Department of Public Health and CMS, baseline testing is mandatory. According to O.C.G.A. 31-7-12.6, all long term care facilities must complete a one-time baseline testing for all residents and direct care staff. This was due no later than 9/28/2020 and this was completed at Warm Springs Medical Center Nursing Home. This had to be completed prior to progressing to PHASE II.

# **Additional Testing Guidance for Residents/Staff**

- 1. Warm Springs Medical Center Nursing Home will immediately test any resident or staff with symptoms, REGARDLESS OF previous infection.
- 2. Asymptomatic residents or staff who have previously tested positive for SARS-CoV-2 and recovered, should NOT BE RETESTED FOR 3 MONTHS.
- 3. Any staff who reports having had close contact with an individual and is considered high risk either at work or in the local community that has tested positive for COVID-19. <u>In these instances</u>, our facility will test the staff member during 14 days post exposure period and staff members will be closely monitored by our Infection Preventionist during this time to ensure safe return to work.

# **Outbreak Response Testing**

Should our facility experience an Outbreak (one or more cases in staff or facility onset resident case, Warm Springs Medical Center Nursing Home will conduct testing every 3-7 days of ALL STAFF AND RESIDENTS **EXCEPT THOSE** previously testing positive in the past 90 days. <a href="https://www.cdc.gov/coronavirus/2019-ncov/hcp/nursing-homes-testing.html">https://www.cdc.gov/coronavirus/2019-ncov/hcp/nursing-homes-testing.html</a>

- > Testing will be conducted every 3-7 days until there are no new cases among staff or nursing home onset cases among residents for the previous 14 days. At a minimum testing will be conducted at least twice.
- > Once our facility is no longer conducting weekly outbreak response testing, we will immediately return to testing any residents or staff with symptoms.
- ➤ Direct patient care staff directly exposed to residents through job responsibilities but decline testing will be treated as having a positive or unknown COVID-19 status and be required to dress in full PPE and be required to sign a declination of testing form. Declination forms are maintained by the Infection Preventionist. Also refer to <a href="https://www.cdc.gov/coronavirus/2019-ncov/hcp/return-to-work.html">https://www.cdc.gov/coronavirus/2019-ncov/hcp/return-to-work.html</a>.

# **Serial Testing of Asymptomatic Nursing Home Staff**

| Community COVID-19 Activity | County Positivity Class | Minimum Testing<br>Frequency |
|-----------------------------|-------------------------|------------------------------|
| LOW < 5%                    | GREEN                   | Once a MONTH                 |
| MEDIUM 5-10%                | YELLOW                  | Once a WEEK                  |
| HIGH 10% or >               | RED                     | Twice a WEEK                 |

Warm Springs Medical Center Nursing Home will monitor our county's positivity rate weekly on Monday and adjust our frequency of testing based on results. Testing will be conducted based on the result from the past week.

Should the county positivity rate INCREASES to a higher level of acuity, our facility will begin testing staff at the frequency shown in the table above as soon as the criteria for the higher activity are met.

If the county positivity rate DECREASES to a lower level of acuity, our facility will continue testing staff at the higher frequency level until the county positivity rate has remained at the lower acuity level for at least two (2) weeks before reducing testing frequency.

#### **Reporting Test Results**

COVID-19 has been added to the Notifiable Disease List. All baseline testing and subsequent testing results are reported to our district health department @ https://dph.georgia.gov/epidemiology/disease-reporting.

Reporting to OSHA (300 log): <a href="https://www.osha.gov/recordkeeping/RKforms.html">https://www.osha.gov/recordkeeping/RKforms.html</a>.

Daily report to Healthcare Facility Regulations: (Open with Explorer) – <a href="https://covid19.hfrddb.dch.ga.gov/">https://covid19.hfrddb.dch.ga.gov/</a>

Warm Springs Medical Center Nursing Home also reports mandated data to the National Healthcare Safety Network (NHSN) <a href="https://www.cdc.gov/nhsn/ltc/covid19/index.html">https://www.cdc.gov/nhsn/ltc/covid19/index.html</a>

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Our facility will notify residents and their representatives or legal surrogates by 5:00 p.m. the next calendar day following the occurrence of either a single confirmed infection of COVID-19 or three or more residents or staff with new onset of respiratory symptoms occurring within 72 hours of each other via the electronic Everbridge System.

ALL onsite Antigen testing will be reported to DPH for all testing completed for each individual tested.

#### **GUIDANCE FOR TIME OUTDOORS, WINDOW VISITS, AND OUTDOOR VISITS**

# Safe Transport of Resident to Outdoor Activity

- > Staff should wear face mask and eye covering (face shield/goggles) and any other appropriate PPE;
- > Resident should wear a surgical mask or well-fitted cloth mask if tolerated;
- > Resident treatments should be performed in the resident's room (except in emergency situations);
- > Prior to departing room, the resident should void/have incontinence care provided and put on clean clothes/gown. The resident should use soap/water for hand hygiene after using the bathroom;
- ➤ If resident utilizes a dedicated wheelchair/assistive devices, staff should use multiple appropriate disinfectant wipes to wipe down all parts of the chair/device (i.e. handles, arm rest, seat back, seat, and wheels clean areas from the cleanest to dirtiest) following the disinfectants instructions for use (dwell/contact/kill time) and prior to resident being placed in wheelchair and/or prior to exiting their room, and again upon exiting the common areas, dining room, therapy gym, etc.
- > Prior to departing room, ensure that the resident has performed hand hygiene with alcohol-based hand rub or washed hands with soap and water (If hands are visibly soiled) and donned clean clothes. Teach the resident how to properly perform hand hygiene with alcohol-based hand rub and soap/water. Validate comprehension by return demonstration by staff.
- > Staff will perform hand hygiene before and after resident contact (after leaving resident in visitation area and prior to retrieving resident) as well as other hand hygiene indications.
- > Upon re-entry to the facility, staff and residents should perform hand hygiene.

# **Other Considerations for Outdoor Activity**

#### OUTDOOR ACTIVITY WILL NOT BE ALLOWED DURING WIDESPREAD OUTBREAKS.

- > Outdoor activity will be determined on the size of space available for outdoor activity and the number of residents/staff who can safety go out at once while adhering to social distancing.
- > Staff must accompany residents outside. While residents are outside, at least one (1) staff member should be present.
- > Residents who are suspected or confirmed of having COVID-19 will not be allowed to attend outdoor activities
- > Residents participating in outdoor activities will NOT be transported through the COVID-19 Unit or Observation Unit to get outside for the activity.

#### **Visitation & Hours**

Please refer to Warm Springs Medical Center Nursing Home's Visitation Policy: Interim COVID-19 Visitation Policy. *Visitor Logs will include the following: name, contact information, date/time of visit and who they visited. This information is necessary for contact tracing.* 

#### **HAND HYGIENE**

Hand hygiene education is provided upon hire, annually and as needed. Competency is validated by return demonstration and education includes the following components:

- > ABHR (Alcohol-based Hand Rub) is the preferred method for performing hand hygiene
- > The process for using ABHR is more convenient, faster and simpler
- > Soap and water should be used before EATING, after using the BATHROOM, when hands are VISIBLY SOILED and when dealing with C-DIFF and NOROVIRUS.

ABHR will be readily available throughout the facility and is mounted in each resident's room

ABHR kept in a clinician's pocket or clipped onto their person will be considered contaminated; however, the contents of the bottle is still effective. Take these steps to preserve infection control:

- ✓ Cleaned the outside of the ABHR bottle before placing it back into the clinician's pocket
- ✓ ABHR bottles should not be refilled. IF refilling is absolutely necessary refill when bottle is completely empty DO NOT top it off and refill after the bottle has been cleaned/disinfected.
- ✓ Pull ABHR out of pocket and dispense adequate amount of gel or foam into one hand;
- ✓ Use the ABHR to disinfect the outside of the bottle;

- ✓ Dispense more ABHR into hands to perform hand hygiene
- ✓ Place bottle back in pocket with other hand before performing hand rub;
- ✓ Perform hand rub, thoroughly coating all surfaces of both hands. Allow to dry;
- ✓ Go directly to resident without touching anything else or re-entering hands into pockets.

#### **PPE DONNING & DOFFING**

PPE donning and doffing sequence should be posted at point of use and can be found at <a href="http://www.cdc.gov/hai/pdfs/ppe/PPE-sequence.pdf">http://www.cdc.gov/hai/pdfs/ppe/PPE-sequence.pdf</a>

These sequence instructions will be located on isolation caddies, EVS carts, wound care carts and other areas for an easily accessible reference wherever PPE is frequently donned and doffed.

Clean (Donning) and Dirty (Doffing) areas will be separate.

## **Respiratory Protection Program**

Warm Springs Medical Center Nursing Home maintains a good plan for respiratory fit testing in regards to the N-95 mask and are fit testing per OSHA requirement. If the employee is unable to perform fit testing, it is documented that the testing was attempted and why the facility was unsuccessful in this procedure (i.e. supplies on backorder. *The KN-95 is also a respiratory but does NOT require fit testing.* 

The Respiratory Therapy Department conducts medical screening to assess staff ability to tolerate wearing a respirator. OSHA medical screening questionnaire for all staff who will wear the KN-95 or N-95: <a href="https://www.osha.gov/Publications/OSHA3789info.pdf">https://www.osha.gov/Publications/OSHA3789info.pdf</a>.

All staff should perform a user seal/fit check anytime the N-95 of KN-95 is worn: https://www.cdc.gov/niosh/docs/2010-131/pdfs/2010-131.pd or <a href="https://www.youtube.com/watch?v=pGXiUyAoEd8&t=2s">https://www.youtube.com/watch?v=pGXiUyAoEd8&t=2s</a>

An N-95 or higher will be worn during aerosol generating procedures.

# **FOOD & BEVERAGE CONSUMPTION**

- Remove gown/gloves and perform hand hygiene before entering break area
- ❖ In a separate area within a break area, remove face shield and mask and perform hand hygiene

- If operating in Conventional capacity strategies, place shield and mask in a designated location to prevent contamination of other items and away from the area in which the employee will be eating and drinking (i.e. store in paper bag)
- At the completion of the break, the staff should disinfect the eating area and perform hand hygiene
- ❖ Face shield and face mask should be donned and hand hygiene performed
- Separate tables and chairs at least 6 feet apart

# **EVS**

#### **Education:**

- Ensure all staff responsible for cleaning and disinfection (clinical and non-clinical) receive education and training
- Competency should be validated by return demonstration
- Education should be provided on hire, annually and as needed (i.e. when products change)
- Education should include reading the disinfectant label so that staff know if the product is effective against the targeted organism, what PPE is recommended to safely use the disinfectant and the disinfectant kill time
- ❖ The kill time is the amount of time that the surface must be wet with the disinfectant to kill the organism.

All shared equipment should be cleaned and disinfected between uses. Items such as stethoscopes and thermometers are sometimes overlooked. Although an infared thermometet does not touch the skin, it should be cleaned and disinfected between uses.

When a resident with suspected or confirmed COVID-19 is moved, the room should be terminally cleaned and disinfected.

Warm Springs Medical Center Nursing Home's Reopen Plan has been written based on the most recent STATE OF GEORGIA Department of Public Health Administrative Order Long Term Care Facilities Reopening Guidance information.

It is our facility's desire to support our residents and staff in the safest manner possible while reconnecting them with their loved ones during this COVID-19 Pandemic.