

COMMUNITY WELLNESS PARTNERS

— Making life about you —

*An affiliation of LutheranCare® and Presbyterian Homes & Services*

Katherine Lutherine  
110 Utica Road  
Clinton, NY 13323

Presbyterian Home for CNY  
4290 Middlesettlement Rd.  
New Hartford, NY 13413

# **Pandemic Emergency (Infectious Disease) Plan**

Annex 19.5 of the Emergency Preparedness Plan

1. Definition:

- o Infectious diseases are caused by pathogenic microorganisms, such as bacteria, viruses, parasites or fungi. The circumstances of infectious disease emergencies, including ones that rise to the level of a pandemic, vary by multiple factors, including type of biological agent, scale of exposure, mode of transmission and intentionality.

2. Communication:

- o An initial letter goes out to current residents and responsible parties indicating that communication going forward will be conducted through a portal created at [www.communitywellnesspartners.org](http://www.communitywellnesspartners.org). All residents, authorized family members or guardians will be encouraged to sign up. New admissions will be notified of the portal communication process at the time of admission.
- o The sign up will go in for administrative approval. Once approved the participant will be able to log in daily and have access to all current information in the community. The site is updated as needed or directed by DOH guidelines set forth in each instance to ensure proper communication is given. For those who need specific accommodations or alternative forms of communication we will offer the following (suggested but not limited to): phone calls, emails, weekly resident council meetings, video conferencing or any other method selected by the responsible party.
- o All residents, authorized family members or guardians will be updated daily via email, phone, text or any private electronic means stated above or selected by the family member or guardian. Residents without electronic access are provided a written copy of any communication posted in the portal.
- o CWP will assign the VP of Development and Marketing responsibility for communications with staff, residents, visitors, family members and other persons coming into the facility. Contact information for family members & guardians will be kept up to date in the electronic health record.

3. Pandemic Campus Infection Control (preventing spread) Protocol:

- o CWP communities to display signage regarding pandemic wellness tips prominently at all communities, such as, building restrooms, lobbies, entrance doors or other public locations where allowed.
- o CWP communities are to display closed to visitor signs at all entrances. All non-essential visits by vendors, contractors, clients, etc. to the office are suspended as directed by DOH/Regional epidemiologist/ Infection prevention.
- o All individuals entering a CWP community will be screened for pandemic symptoms. A form for documentation of the screening will be located in the main lobby entrance at a screening station. A screener will be assigned to complete and document the interview and health assessment with the individual seeking admittance to the community. If symptoms are identified the individual will not be permitted entrance.
- o When entering the building the designated CWP screener will ask all team members or contractors a list questions including the following at a minimum:
  - Temperature will be taken and recorded.
  - Have you, or anyone in your family, been in contact with a person that has tested positive for named pandemic?
  - Have you, or anyone in your family, been in contact with a person that is in the process of being tested for named pandemic?
  - Have you, or anyone in your immediate family, traveled outside of the USA within the last 14 days? (Or the incubation period of the pandemic illness)
  - Are you having symptoms related to the pandemic- eg. Cough, SOB, Fever, Chills
- o Per CDC recommendations, if any answer is “yes”, the team member is to be removed from work immediately and will not be allowed to return to the jobsite without a doctor’s letter

verifying “OK to return to work” status or complete quarantine period as guided by CDC/DOH/Regional epidemiologist.

- Administrators are instructed to prevent stigma and discrimination in the workplace. Do not make determinations of risk based on race or country of origin.
- Employee testing will occur for any pandemic infection deemed necessary in accordance with NYSDOH guidelines
- No large group meetings: limit all meetings to ten people or less. Meetings should maintain the 6-foot spacing rule. Whenever possible necessary meetings are to be conducted with the use of conference calls, Facetime/video conference etc. particularly when distancing cannot be accomplished.
- All meetings should emphasize personal hygiene and the CDC’s recommendations to prevent illness.
- No visitors are permitted to enter a CWP community unless meeting an exception as defined by NYSDOH
- Limit elevator usage to 4 people per car. Use stairs when possible. Post signage at the elevator entrance and in the elevator of limited capacity of 4 persons.
- CWP may require all non-essential office staff to work remotely via the VPN network for all tasks that can be completed remotely. Please review with your immediate supervisor for specific details for your position.
- CWP assigns the CEO or designee to monitor public health advisories (federal & state). They will update the pandemic response coordinator and members of the pandemic planning committee when named pandemic is in the geographical area.
- CWP has infection control policies in place.
- CWP assigns the Administrator or designee to review IPC guidance for healthcare facilities caring for residents with suspected or confirmed cases of named pandemic CWP will utilize the information for other healthcare facilities located in the Oneida County Mutual Aid Evacuation & Safety Plan (*Refer to the Emergency preparedness binder for this information*).
- daily environmental cleaning:
  - Clean all frequently touched surfaces in the workplace eg. workstations, countertops, keyboards, remote controls, desks, door keypads, elevator buttons and doorknobs. Use the cleaning agents that meet or exceed EPA-registered disinfectants. Use disposable wipes as available. Clean following the directions on the label and the ([EPA Guidance for Cleaning and Disinfecting](#)).
- Follow all CDC/DOH protocol.

#### 4. Identification and Management of Infected Residents:

- CWP communities will have a process to identify and manage residents with symptoms of pandemic infection in all communities upon admission and daily throughout their stay. Appropriate transmission-based precautions will be implemented for any residents with suspected pandemic infection.
- Skilled nursing facilities will maintain a separate “screening unit” for segregating residents with potential exposure to a contagious pandemic infection to reside. Residents will be maintained in their room while on the “screening unit”. Staff will be dedicated to this unit and will not be floated to another unit in the facility during their shift.
- New admissions will be segregated for a minimum of 14 days (Or duration of incubation period of pandemic infection) to screen for the onset of pandemic symptoms. If the resident remains asymptomatic for the duration, the resident may be transferred to a bed off the screening unit. If the resident becomes symptomatic, the resident will remain on the unit until symptoms have subsided, in accordance with CDC/NYSDOH guidelines.
- If a resident develops symptoms consistent with named pandemic, the resident will be placed on appropriate preventative Transmission based precautions and the physician will be consulted.

- Testing for pandemic infection for residents will be at the direction of the physician of record or the facility medical director, based on the review of symptoms or as directed by CDC/NYSDOH.
- The facility will initiate active surveillance for pandemic infection among residents and healthcare personnel. A separate list will be maintained for each. CDC has resources for performing respiratory surveillance in long term care facilities during an outbreak. The Administrator, infection prevention, or designee will be responsible to notify the NYSDOH regarding any cluster of infections, or suspected pandemic infection.
- If a pandemic infection is prevalent in the county, or other direction if provided by NYSDOH related to prevalence of pandemic infection, communal dining and group activities will be halted. Dining rooms will only be used for groups of 10 or less residents who can always maintain social distancing of at least 6 feet.
- Individual nursing units will be closed for a period of 14 days (or illness incubation period) if there is noted to be 10 percent of the residents presenting with pandemic symptoms, or if a positive pandemic infection is noted on the unit.
- For residents who test positive for named pandemic: The resident will be transferred to an isolation room and have dedicated staff for the shift that do not care for any residents who have not been shown to be named pandemic positive.
- In the event of a widespread infection that encompasses multiple units, the facility will evaluate the ability to admit new residents to the facility. The deciding factor will be the ability to bring the new admission into a "screening unit" without any current pandemic positive residents, and an evaluation of current staffing to care for the resident.
- Residents returning from the hospital that have not been shown to be pandemic positive will be re-admitted to the facility on the screening unit for at least 14 days (Or duration of incubation period), as noted above.
- If there are signs of a widespread pandemic the facility will set up an isolation wing for infected residents (*see section 5*)
- Residents returning from the hospital that have tested positive for pandemic may only be readmitted if an isolation room is available in a pandemic unit, and staffing is sufficient to enable dedicated staff to care for only pandemic positive residents.
- If an appropriate bed is not available, alternate facility placement will be requested.
- CWP will consider discontinuing any sharing of a bathroom with residents outside an isolation area.

#### 5. Isolation Wing

- Review and select wing(s) for resident isolation in advance. Do not wait until a resident presents with symptoms.
- A wing will be selected that does not share airspace with other resident rooms, waiting areas, work areas or common space.
- Patient transport will be limited through staff or resident occupied areas.
- The isolation wing will consist of a red, yellow, and green area. The yellow area will serve as a clear area where PPE can be doffed. The yellow area will have a trash receptacle and a hand washing (sanitizing) station.
- The isolation wing will be properly identified and will have two sets of zippered heavy plastic walls to prevent residents and staff from entering the area.
- Consult with Facilities Engineering or Maintenance Staff about mechanical (forced air) ventilation to verify that contaminated air isn't exhausted into another room or area of the campus.
- CWP will consider purchasing HEPA-filter equipped fan units to place in selected rooms. Unless equipped with ducting and exhaust points such units do not create "negative pressure" but they do provide some air cleaning so that air escaping from the room has less potential for contamination.
- The Administrator, infection preventionist, or designee will be responsible to notify the NYSDOH if an isolation wing cannot be set up or can no longer sustain isolation efforts.

#### 6. Central Supply Chain

- o PPE needs will be based on facility census and based on current DOH guidance or CDC burn rate calculator.
  - o PPE supplies will be monitored and managed by the Purchasing Director or designee to ensure an adequate supply is available.
  - o During a pandemic PPE supply management will adopt protocols specific to the pathogen and illness to prevent shortfalls.
  - o The plan will provide a 90 day supply of the following but not limited to:
    - N95 respirators
    - Face shield
    - Isolation Gowns
    - Gloves
    - Eye protection
    - Hand sanitizer
    - Masks
7. Preserving residents place in the facility (18 NYCRR 505.9(d)(6)).
- o (In accordance with 18 NYCRR 505.9(d)(6), Reserving beds for recipients who are temporarily hospitalized. ICFs/MR, RTFs and specialty hospitals, as a condition of participation in the MA program, must make, extend and terminate bed reservations for MA recipients who are temporarily absent from such institutions for hospitalization as provided in subparagraphs (i) through (iv) of this paragraph. NFs must, as a condition of participation in the MA program, make, extend and terminate bed reservations for MA recipients who are either under 21 years of age, or receiving hospice services within the facility and temporarily absent from such institutions for hospitalization.

**EMERGENCY CONTACT NUMBERS**

Table 1: Emergency Contact Information  
(the following individuals should be contacted based on the situation and the location of the emergency)

<b>Position</b>
CEO
Administrator(s)
Director of Nursing (s)
Assistant Director of Nursing (s)
Director of Building Services
Operations Manager
Dietary General Manager
Dining Service Manager
Infection Preventionist
Controller

Chief Information Officer
Director of Health Information (HIM)
HR Manager Staff Rep
Chief Strategy Officer
Director of Education
Director of Rehab Therapy
Dietary General Manager
Director of Social Services
Purchasing Agent
Home Care

**Government Emergency Services (Local, County, State) Lutheran Care**

Agency	Contact Number
<b>Local</b>	
<b>Kirkland Police Department</b> 2 New Street Clarks Mills, NY 13321	315-853-2924
<b>Clinton Fire Department</b> 1 North Park Road Clinton, NY 13323	315-853-5031
<b>Oneida County Emergency Services</b> 120 Base Road Oriskany, NY 13424	315-765-2526
<b>County</b>	
<b>Oneida County Emergency Services</b> Edward Stevens, Program Director Dakota Hanley Program Coordinator 120 Base Road Oriskany, NY 13424	315-765-2527 315-927-7427
<b>State</b>	
<b>New York State DOH Regional Office</b> Corning Tower Empire State Plaza, Albany, NY 12237	(315) 477-8472
NYSDOH Duty Officer (Business Hours) NYS Watch Center (Warning Point) Non-Business Hours	866-881-2809 518-292-2200

**Community Agencies**

<b>New York State Office for the Aging</b>	800-342-9871
<b>Oneida County Department of Social Services</b> 800 Park Ave Utica, NY 13501	315-798-5632
<b>Oneida County Dept. of Aging</b> 301 W. Dominick St. Rome, NY 13440	315-798-5456
<b>Oneida County Health Department</b> 406 Elizabeth Street. Utica, NY 13501	315-798-6400

**Government Emergency Services (Local, County, State) Presbyterian Home**

<b>Agency</b>	<b>Contact Number</b>
<b>Local</b>	
<b>Police Department</b> 32 Kellogg Road New Hartford, NY 13413	315-724-7111
<b>Fire Department</b> 4 Oxford Road New Hartford, NY 13413	315-732-1710
<b>Oneida County Emergency Services</b> 120 Base Road Oriskany, NY 13424	315-765-2526
<b>County</b>	
<b>Oneida County Emergency Services</b> Edward Stevens, Program Director Dakota Hanley Program Coordinator 120 Base Road, Oriskany, NY, 13424	315-765-2527 315-927-7427
<b>State</b>	
<b>New York State Department of Health</b> Corning Tower Empire State Plaza, Albany, NY 12237	(315) 477-8472
NYSDOH Duty Officer (Business Hours)	866-881-2809
NYS Watch Center (Warning Point) Non-Business Hours	518-292-2200

**Community Agencies**

<b>New York State Office for the Aging</b>	800-342-9871
<b>Oneida County Department of Social Services</b> 800 Park Ave Utica, NY 13501	315-798-5632
<b>Oneida County Dept. of Aging</b> 301 W. Dominick St. Rome, NY 13440	315-798-5456
<b>Oneida County Health Department</b> 406 Elizabeth Street. Utica, NY 13501	315-798-6400

## Record of Changes

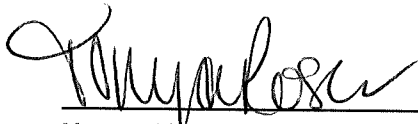
Table 2: Record of Changes

1. The contents of this pandemic plan are subject to change without prior notice. Should revisions become necessary, written updates will be developed and updated in all existing manuals. The Occupational Health & Safety Manager is responsible for ensuring manuals are updated and ensuring staff members are aware of updates as appropriate. When inserting revisions to this manual, the person revising the document shall complete and initial the table below.

Revision #	Date	Section/Page(s)	Change	Revised By
1.0	09/9/20	All	1 <sup>st</sup> Addition Submitted.	Michael Murphy
2.0	09/14/20	All	Updated various sections	Michael Murphy
3.0	3/11/21	ALL	Updated various sections. Full Review.	Michael Murphy
4.0	12/10/21	Emergency Contacts page 5	Updated.	Adam Pinkos
5.0	2/15/2023	All	Updated	Tonya Roser & Karen Dunne
6.0				
7.0				
8.0				

## Approval and Implementation

Pandemic Emergency Plan has been approved for implementation by:



Name Tonya Roser, RN  
Title Infection Preventionist

2/18/2023

Date