



## **Outbreak Response Plan**

### **PURPOSE**

*To provide guidance to the employees/contracted staff of Leisure Chateau as well as our patients/residents and their families on how to prepare for new and/or newly evolved/evolving infectious diseases whose incidence in humans has increased, or threatens to increase, in the near future and that has the potential to pose a significant public health threat and danger of infection to the patients/residents, employees/contracted staff and families of Leisure Chateau. Our Outbreak Plan complies with the guideline monitoring and compliance set forth by the Centers for Disease Control (CDC), Centers for Medicare and Medicaid Services (CMS), New Jersey Department of Health and Communicable Diseases, New Jersey Department of Health (NJDOH), and Ocean County Health Department and is continually evolving based on current guidelines and further understanding of COVID-19 and its variants for which our clinical leadership closely monitors and keeps administrative leadership abreast of changes or potential risks of new infections in their geographic area. Our goal remains to protect our patients/residents, employees/contracted staff and families from harm resulting from exposure to any emergent infectious disease(s) (EIDs), i.e., COVID-19/Influenza, which may/has occurred in our community/facility.*

Leisure Chateau's Outbreak Plan includes, but is not limited to:

- a. Infection Control and Prevention
- b. Control Measures
- c. Screening/Testing
- d. Suspected Case
- e. Staffing
- f. Resident's Quality of Life
- g. Transparency through communication
- h. Education
- i. Vaccination Program
- j. Reporting Requirements
- k. Knowledge Acquired and Lessons Learned
- l. Influenza Program

### **Infection Control and Prevention**

Continuing to take precautions to reduce the risk of transmission of COVID-19 remains vitally important. In addition, individuals can spread COVID-19, including new variants, even if they are vaccinated and up to date with COVID-19 vaccinations. Having a strong IPC program and staff adherence is critical to protect both residents and health care personnel (HCP)

### **Employer Considerations**

Leisure Chateau will consider its requirements under OSHA, CMS, state licensure, Equal Employment Opportunity Commission (EEOC), American Disabilities Act (ADA) and other state or federal laws in determining the precautions it will take to protect its patients/residents, employees, and contracted staff. Protecting the patients/residents, employees and contracted staff shall be of paramount concern. Management shall take into account the likelihood of the infectious disease being transmitted to the patients/residents and employees/contracted staff, the method of spread of the disease and the precautions which can be taken to prevent the spread of the infectious disease. Once these factors are considered, management will weigh its options and determine the extent to which exposed employees/contracted staff, or those who are showing signs of the infectious disease, must be precluded from contact with patients/residents or other employees. Reasonable accommodations for employees would be considered such as permitting employees to work from home if their job description permits this. Employees will be able to use sick leave, vacation time, and FMLA where appropriate while they are out of work. Employees/contracted staff who refuse at any time to take the precautions may be subject to discipline.

## **Control Measures**

Leisure Chateau will take measures for protecting their patients/residents, employees/contracted staff, and families. Control measures have been instituted in an attempt to reduce and/or eliminate spread from exposure to any emergent infectious disease(s) (EIDs), i.e., COVID-19/Influenza. Some measures include, but are not limited to, universal masking- well-fitting surgical masks and/or NIOSH approved N95, and PPE including disposable gowns, face shield/goggles, gloves, social distancing, hand hygiene, isolating ill patients/residents by cohorting patients/residents including guidance from NJ DOH to cohort in place as appropriate, utilizing transmission-based precautions and utilizing environmental/ housekeeping and engineering infection control protocols.

## **Transmission Based Precautions**

Transmission based precautions are followed based upon the mode of transmission of the infectious organism. Employee/contracted staff have received education regarding modes of transmission e.g., standard, contact, droplet, and airborne precautions. The type of precautions will affect isolation requirements, visitation, and/or equipment use. These precautions will be communicated to patients/residents, appropriate, employees/contracted staff and family through a variety of alerts including signage on facility entrance doors and patient/resident rooms as required by CDC and federal and state regulations.

## **Environmental Infection Control Protocol**

Leisure Chateau will follow current CDC guidelines for environmental cleaning specific to the EID in addition to routine cleaning for the duration of the threat including, but not limited to, more frequent cleaning of high touch areas.

## **Engineering Controls Protocol**

Leisure Chateau will utilize appropriate physical plant alterations such as use of private rooms for high-risk patients/residents, plastic barriers, sanitation stations, and special areas for contaminated wastes as recommended by local, state, and federal public health authorities.

## **Supply Inventory Protocol**

As part of the emergency operations plan, Leisure Chateau will maintain a supply of PPE including moisture-barrier gowns, face shields/goggles, surgical masks, assorted sizes of disposable N95 respirators, and gloves. The amount that is stockpiled will minimally be enough for several days of center-wide care but will be determined based on storage space and costs. Leisure Chateau will develop plans with their vendors for re-

supply of food, medications, sanitizing agents and PPE in the event of a disruption to normal business including an EID outbreak.

### **Signage Protocol**

Leisure Chateau posts signs regarding hand sanitation and respiratory etiquette and/or other prevention strategies relevant to the route of infection at the entry of Leisure Chateau along with the instruction that anyone who are sick must not enter our building.

.

.....

### **Screening/Testing Requirements**

Leisure Chateau will log and screen everyone (except for EMS personnel) entering our facility per regardless of their vaccination status. We will advise everyone entering our facility to monitor for signs and symptoms of COVID-19 for at least 14 days after exiting our facility, and if symptoms occur, to self-isolate at home, contact their healthcare provider, and immediately notify our facility of the date they were in the facility, the individual(s) with whom they were in contact, and the locations within the facility they visited. Leisure Chateau shall immediately screen the individuals who are a reported contact, and implement necessary actions based on findings.

Leisure Chateau will inform visitors of the possible dangers of exposure to COVID-19 for both the resident and the visitor, and that they will follow the visitation rules set by the facility. Visitors must strictly comply with our facility policies during visitation. We have established a designated area for visitors to log in and be screened upon entry. The screening process for visitors is to consist of the completion of a kiosk questionnaire about symptoms and potential exposure which shall include at a minimum whether, a) in the last 14 days, the visitor has had an identified exposure to someone with a confirmed diagnosis of COVID-19, someone under investigation for COVID-19, or someone with respiratory symptoms, b) the visitor has been diagnosed with COVID-19 and has not yet met criteria for the discontinuation of isolation per guidance issued by NJDOH and CDC, and c) the visitor is experiencing and signs and symptoms of illness. We will prohibit entry into our building for those who meet one or more of the following criteria, regardless of vaccination status if they a) have current SARS-CoV-2 infection; b) have symptoms of COVID-19; c) have had close contact with someone with SARS-CoV-2 infection in the prior 14 days or have otherwise met criteria for quarantine or d) tests positive antigen or PCR. Visitors who have a positive viral test for COVID19, symptoms of COVID19, or currently meet the criteria for quarantine should not enter the facility until they meet that criteria used for residents to discontinue transmission based precautions. Leisure Chateau screens all who enter for these visitation exclusions.

### **Testing**

Leisure Chateau, being a CMS-certified facility, is covered by CMS rules and guidance and follows QSO-20-38-NH and CMS-415- IFC and will conduct testing adhering to the more frequent standard (e.g., if NJ's CALI score).

To enhance efforts to keep COVID-19 from entering our facility, required testing will be performed on residents and staff based on parameters and a frequency set forth by the HHS Secretary. “Facility staff” includes employees, consultants, contractors, volunteers, and caregivers who provide care and services to residents on behalf of the facility, and students in the facility’s nurse aide training programs or from affiliated academic institutions We meet the testing requirements through the use of rapid point-of-care (POC) diagnostic testing devices and through an arrangement with an offsite laboratory.

Testing Trigger	Staff	Residents
Symptomatic individual identified	Staff, regardless of vaccination status, with signs or symptoms must be tested.	Residents, regardless of vaccination status, with signs or symptoms must be tested.
Newly identified COVID19 positive staff or resident in a facility that can identify close contacts	Test all staff, regardless of vaccination status, that had a higher-risk exposure with a COVID-19 positive individual.	Test all residents, regardless of vaccination status, that had close contact with a COVID-19 positive individual.
Newly identified COVID19 positive staff or resident in a facility that is unable to identify close contacts	Test all staff, regardless of vaccination status, facility wide or at a group level if staff are assigned to a specific location where the new case occurred (e.g., unit, floor, or other specific area(s) of the facility).	Test all residents, regardless of vaccination status, facility-wide or at a group level (e.g., unit, floor, or other specific area(s) of the facility).
Routine testing	Twice weekly for staff who are exempted from COVID19 vaccine and staff who are 50 yrs and older and not up to date with COVID19 vaccines	Not generally recommended

Staff with symptoms or signs of COVID-19, regardless of vaccination status, are tested as soon as possible and restricted from the facility pending the results of COVID-19 testing. If COVID-19 is confirmed, staff will be excluded from work as per (CDC) guidance "Interim Guidance for Managing Healthcare Personnel with SARS-CoV-2 Infection or Exposure to SARS-CoV-2."

Staff who do not test positive for COVID-19 but have symptoms are advised to follow up with their medical provider and return to work when symptoms resolve.

Residents who have signs or symptoms of COVID-19, regardless of vaccination status, are tested as soon as possible. While test results are pending, residents with signs or symptoms are placed on transmission-based precautions (TBP) in accordance with CDC guidance.

Once test results are obtained, appropriate actions are taken based on the results.

A series of three screening tests is now recommended for asymptomatic individuals following close contact or a high-risk healthcare exposure to someone with SARS-CoV-2 infection, regardless of test type used (i.e., PCR/NAAT vs. antigen). Individuals should be tested immediately after being identified as a contact (but not earlier than 24 hours after the exposure) and, if negative, again 48 hours after the first negative test and, if negative, again 48 hours after the second negative test. This will typically be at day 1 (where day of exposure is day 0), day 3, and day 5.

Due to challenges in interpreting the result, testing is generally not recommended for asymptomatic

people who have recovered from SARS-CoV-2 infection in the prior 30 days. Testing will be considered for those who have recovered in the prior 31-90 days; however, an antigen test instead of a PCR/NAAT (nucleic acid amplification test) will be used. This is because some people may remain PCR/NAAT positive but not be infectious during this period.

During specimen collection, proper infection control will be maintained and use of personal protective equipment (PPE), which includes a NIOSH-approved N95 or equivalent or higher-level respirator (or facemask if a respirator is not available), eye protection, gloves, and a gown, when collecting specimens.

#### Testing of Staff with a Higher-Risk Exposure and Residents who had a Close Contact

Higher-risk exposures are classified as HCP who had prolonged close contact with a resident, visitor, or HCP with confirmed SARS-CoV-2 infection and:

- HCP was not wearing a respirator (or if wearing a facemask, the person with SARS-CoV-2 infection was not wearing a cloth mask or facemask)
- HCP was not wearing eye protection if the person with SARS-CoV-2 infection was not wearing a cloth mask or facemask
- HCP was not wearing all recommended PPE (i.e., gown, gloves, eye protection, respirator) while present in the room for an aerosol-generating procedure

#### Following a higher-risk exposure, HCP should:

Have a series of three viral tests for SARS-CoV-2 infection.

Testing is recommended immediately (but not earlier than 24 hours after the exposure) and, if negative, again 48 hours after the first negative test and, if negative, again 48 hours after the second negative test.

This will typically be at day 1 (where day of exposure is day 0), day 3, and day 5.

Follow all recommended infection prevention and control practices, including wearing well-fitting source control, monitoring themselves for fever or symptoms consistent with COVID-19, and not reporting to work when ill or if testing positive for SARS-CoV-2 infection.

Any HCP who develop fever or symptoms consistent with COVID-19 should immediately self-isolate and contact their established point of contact (e.g., occupational health program) to arrange for medical evaluation and testing.

Work restriction is not necessary for most asymptomatic HCP following a higher-risk exposure, regardless of vaccination status.

Examples of when work restriction may be considered include:

HCP is unable to be tested or wear source control as recommended for the 10 days following their exposure.

HCP is moderately to severely immunocompromised.

HCP cares for or works on a unit with patients who are moderately to severely immunocompromised.

HCP works on a unit experiencing ongoing SARS-CoV-2 transmission that is not controlled with initial interventions

#### Testing of Staff and Residents During an Outbreak Investigation

An outbreak investigation is initiated when a single new case of COVID-19 occurs among residents or staff to determine if others have been exposed. An outbreak investigation would not be triggered when a resident with known COVID-19 is admitted directly into TBP, or when a resident known to have close contact with someone with COVID-19 is admitted directly into TBP and develops COVID-19 before TBP are discontinued.

Upon identification of a single new case of COVID-19 infection in any staff or residents, testing begins immediately (but not earlier than 24 hours after the exposure, if known). Outbreak testing is performed through two approaches, contact tracing or broadbased (e.g. facility-wide) testing.

If close contacts of the individual with COVID-19 are identified, focused testing is conducted based on known close contacts. If all close contacts are unable to be identified, the outbreak testing will be conducted at a facility-wide or group-level (e.g., unit, floor, or other specific area(s) of the facility) . Broader approaches might also be required if directed to do so by NJ DOH, or in situations where all potential contacts are unable to be identified, are too numerous to manage, or when contact tracing fails to halt transmission. As part of the broad-based approach, testing is continued on affected unit(s) or facility-wide every 3-7 days until there are no new cases for 14 days.

If antigen testing is used, more frequent testing (every 3 days), will be considered

#### Routine Testing of Staff

Leisure Chateau will conduct routine testing of staff who are exempted from the COVID19 vaccine staff who are 50 yrs and older and not up to date with COVID19 vaccines

#### Resident Testing/New Admissions

Newly admitted residents and residents who have left the facility for greater than 24 hours will be tested upon admission: -Testing is conducted upon admission, the resident should be tested on the date of admission and, if negative, again 48 hours after the first negative test and, if negative, again 48 hours after the second negative test and wear source control for the 10 days following admission/return.

Transportation services (such as non-emergency medical transportation) and receiving healthcare providers (such as hospitals) will be informed regarding a resident's COVID-19 status to ensure appropriate infection control precautions are followed. Routine communication with other entities about the resident's status will occur prior to the resident leaving the facility for treatment. Coordination between the Leisure Chateau and the other healthcare entity is vital to ensure healthcare staff are informed of the most up to date information relating to the resident's health status, including COVID-19 status, and to allow for proper planning of care and operations. Additionally, communications will be maintained with the local ambulance and other contracted providers that transport residents between facilities, to ensure appropriate infection control precautions are followed as described by the CDC.

Leisure Chateau may elect to perform routine testing of staff beyond the minimum outlined within Executive Directive No. 21-012; antigen testing may be used as an alternative to molecular diagnostic PCR tests. Antigen testing may be used to fulfill any testing requirements and also may be used on asymptomatic individuals at our discretion. We will use only antigen tests that have received an Emergency Use Authorization or approval from the United States Food and Drug Administration (FDA) may be used to fulfill our screening/testing requirements. Consistent with QSO-20-39-NH, facilities in counties with substantial or high level of community transmission(CALI Scores) are encouraged to offer testing to visitors. Visitors are not required to be tested or vaccinated as condition of visitation. Leisure Chateau will monitor CALI scores weekly. We have the ability to perform COVID-19 point of care (POC) antigen tests and possess a federal Clinical Laboratory Improvement Amendment (CUA) Certificate- CLIA ID Number: 31D06771475 with current Expiration Date: 8/31/22.

#### **Laboratory Testing/Radiology Protocols**

When infection or colonization with epidemiologically important organisms is suspected, cultures may be sent, if appropriate, to a contracted laboratory for identification or confirmation. Cultures will be further screened for sensitivity to antimicrobial medications to help determine treatment measures. Radiological testing may also be required that may

include onsite x-rays. All findings will be discussed with the attending physician and reported as required to local, county and state public health agencies. Disease specific testing protocols are implemented to quickly identify all affected individuals, initiate infection control actions and implement treatments. Lab and radiology testing are disease specific and these decisions are guided by CDC and NJDOH directives. Designated legal responsible parties and representatives will be notified of individual testing results and findings documented in each individual patient's/resident's medical record.

### **Refusal of testing**

Staff who have signs or symptoms of COVID-19 and refuse testing are prohibited from entering the building until the return to work criteria are met. If outbreak testing has been triggered and a staff member refuses testing, the staff member should be restricted from the building until the procedures for outbreak testing have been completed. Leisure Chateau will also seek guidance from NJ DOH for asymptomatic staff who refuse testing.

Residents (or resident representatives) may exercise their right to decline COVID-19 testing in accordance with the requirements under 42 CFR § 483.10(c)(6). In discussing testing with residents, staff will use person-centered approaches when explaining the importance of testing for COVID-19. Residents who refuse testing wear source control as recommended for the 10 days following their exposure. Will be placed on Transmission - Based Precautions for 10 days following the exposure/development of symptoms.

### **Suspected Case**

Leisure Chateau will place a patient/resident who exhibits symptoms of the EID/COVID-19/Influenza in an isolation room. We will make every attempt, depending on staffing, to keep the number of staff assigned to enter the room of the isolated person to a minimum. Ideally, only specially trained employees/contracted staff and prepared (i.e. vaccinated, medically cleared and fit tested for respiratory protection) will enter the isolation room. All assigned staff is provided additional "just in time" training and supervision in the mode of transmission of this EID, and the use of the appropriate PPE. If feasible, the isolated patient/resident may be asked to wear a facemask while employee/contracted staff is in the room. Management of infectious wastes, terminal cleaning of the isolation room, contact tracing of exposed individuals, and monitoring for additional cases, under the guidance of local health authorities keeping with guidance from the CDC will be conducted. While it is safer for visitors to practice remote visits, visitors must still be allowed to visit at discretion of resident or their representative. Visitors are made aware of the potential risk of visiting during transmission based precautions and adhere to the core principles of infection prevention i.e. of wearing well fitting face mask, frequent hand hygiene, distancing, limiting number of visitors. Visitors should promptly exit facility after the visit.

### **Cohorting**

A resident with suspected or confirmed SARS-CoV-2 infection will ideally be placed in a single-person room with door kept closed (if safe to do so) and a dedicated bathroom. These residents will be cared for by dedicated HCP, to care for patients with SARS-CoV-2 infection when the number of patients with SARS-CoV-2 infection is high. Dedicated means that HCP are assigned to care only for these patients during their shifts. Dedicated units and/or HCP might not be feasible due to staffing crises or a small number of patients with SARS-CoV-2 infection. Transport and movement of the patient outside of the room will be limited to medically essential purposes. Information about patients with suspected or confirmed SARS-CoV-2 infection to appropriate personnel before transferring them to other departments in the facility (e.g., radiology) and to other healthcare facilities.

Quarantine might also be considered if the resident is moderately to severely immunocompromised.

## **EXCEPTIONS TO BE CONSIDERED:**

There may be circumstances when quarantine of asymptomatic residents who are up to date with all recommended COVID-19 vaccine doses and have a viral test that is negative for

SARS-CoV-2 or have a viral test that is positive SARS-CoV-2 in the past 90 days might be recommended (e.g., resident is moderately to severely immunocompromised). In the event of ongoing transmission within a facility that is not controlled with initial interventions, strong consideration should be given to use of quarantine for the residents of the affected units, regardless of vaccination status.

If a patient/resident experiences new symptoms consistent with COVID-19 and an evaluation fails to identify a diagnosis other than SARS-CoV-2 infection (e.g., influenza), then repeat viral diagnostic testing and quarantine may be warranted even if they have clinically recovered within 3 months.

CDC defines up to date as receiving all recommended COVID-19 vaccines including any boosters based on CDC Stay Up To Date with your Vaccines.

If there are multiple cases on the wing/unit and when movement would otherwise introduce COVID-19 to another occupied wing/unit, do not relocate them. Limit the movement of all patients/patients/residents and employees/contracted staff in general.

## **Screening/Testing of Employees/Contracted Staff**

Self-screening – Employees/contracted staff will be educated on Leisure Chateau’s plan to control exposure to the patients/residents. This plan may include, but not be limited to a) Reporting any suspected exposure to the EID while off duty to their supervisor; b) Possible precautionary removal of employees who report an actual or suspected exposure to the EID dependent upon their vaccination status; c) Self-screening for symptoms prior to reporting to work; d) Prohibiting employees/contracted staff from reporting to work if they are sick until cleared to do so by appropriate medical authorities and in compliance with appropriate labor laws.

## **Contingency Employees/Contracted Staffing Capacity Strategies**

Leisure Chateau will review and adjust employees/contracted staff schedules, hire additional healthcare personnel (HCP) when possible, and rotate HCP to positions that support patient/resident care activities within Leisure Chateau and will follow conventional, contingency and crisis strategies when applicable. Additional guidance includes, but is not limited to, a) cancel all non-essential procedures and visits; b) shift HCP who work in other areas to support patient/resident care activities in the facility; c) ensure these HCP have received appropriate cross-training to work in these areas that are new to them; d) initiate employees/contracted staff communication meetings to attempt to address social factors in that might prevent HCP from reporting to work such as transportation or housing if HCP with vulnerable individuals; e) identify additional HCP to work in the facility via agency assistance; f) be aware of state-specific emergency waivers or changes to licensure requirements or renewals for select categories of HCP assistance, and g) request that HCP postpone elective time off from work where applicable.

## **Resident Quality of Life Protocol**

### **Visitation- Outdoor/Indoor**

Visitation will be allowed for all patients/residents of Leisure Chateau at all times even during the current COVID Omicron variant surge. When necessary, we are in contact with Ocean County Health Department for guidance managing outbreaks. Only in very rare instances would visitation be paused, or scheduling required. Our facility will maintain masking and social distancing requirements for visitors. Our Activities Department remains creative during any outbreak we might experience. Leisure Chateau also offers patients/residents to be



visited outdoors with social distancing; we purchased 3 beautiful open gazebos which are located outside the building. Leisure Chateau also utilizes alternative means of “in person visitation” for all patients/residents such as virtual communications (phone calls, video-communication, facetime, WhatsApp video). The Activities department offers and arranges for these communications to any patient/resident that wishes to utilize these services. The visitor(s) agree(s) to notify us if they test positive for COVID-19 or exhibit symptoms of COVID-19 within fourteen (14) days of their visit.

Residents have the right to receive visitors of their choosing at the time of their choosing and in a manner that does not impose on the rights of another resident, such as a clinical necessity or safety restriction (see 42 CFR § 483.10(f)(4)(v)). Leisure Chateau facilitates in-person visitation consistent with the applicable CMS regulations, which can be done by applying the guidance stated below. Failure to facilitate visitation, without adequate reason related to clinical necessity or resident safety, would constitute a potential violation of 42 CFR § 483.10(f) (4), and Leisure Chateau would be subject to citation and enforcement actions.

Adherence to the core principles of infection prevention and control is an evidence-based way to reduce the risk of COVID-19 transmission. Residents and/or their representatives have the right to make choices about aspects of their lives in the facility that are significant to their well-being.

All visitors entering the facility are screened in the main lobby, regardless of their vaccination status, for the following criteria: a positive viral test for COVID-19, symptoms of COVID-19, or if they have had close contact with someone with COVID-19 infection.

Visitors should follow the same isolation and quarantine guidance as residents and should not visit for 10 days if they are a close contact of a positive case or have had a positive viral test. Community guidance for isolation and quarantine does not apply to individuals visiting long-term care facilities.

Facilities must allow indoor visitation at all times and for all residents as required under the CMS visitation rules (QSO-20-39-NH).

Although there is no limit on the number of visitors that a resident can have at one time, visits should be conducted in a manner that adheres to the core principles of infection prevention and control and does not increase COVID-19 infection risk to other residents. Visitors, regardless of vaccination status, should wear source control- well fitting face mask and physically distance themselves from other residents or HCP.

The safest practice is for residents and visitors to wear source control and physically distance, particularly if either of them are at risk for severe disease or are unvaccinated. If a resident’s roommate is not up to date with COVID-19 vaccinations or immunocompromised (regardless of vaccination status), visits should not be conducted in the resident’s room, if possible.

While it is safer for visitors not to enter the facility during an outbreak investigation and/or residents on transmission based precautions, visitors must still be allowed in the facility. Remote visits are encouraged.

Visitors are made aware of the potential risk of visiting during an outbreak investigation and adhere to the core principles of infection prevention. If residents or their representative would like to have a visit during an outbreak investigation, they should wear face coverings or masks during visits, regardless of vaccination status, and visits should ideally occur in the resident’s room. Leisure Chateau will continue to follow guidance from NJDOH for direction on how to structure our visitations to reduce the risk of COVID-19 transmission during an outbreak investigation.

Visitors who are unwilling or unable to adhere to the core principles of COVID-19 infection prevention and control should not be permitted to visit or should be asked to leave.

There may be times when the scope and severity of an outbreak warrants NJDOH to recommend a pause or limitations on visitation as a temporary, short-term intervention. These situations are expected to be extremely rare and only occur after the facility has been working with NJDOH to manage and prevent escalation of the outbreak. If the outbreak is severe enough to warrant pausing visitation, it would also warrant a pause on accepting new admissions (as long as there is adequate alternative access to care for hospital discharges).

### **Compassionate Care Visits**

While end-of-life situations have been used as examples of compassionate care situations, the term “compassionate care situations” does not exclusively refer to end-of-life circumstances. Compassionate care

visits and visits required under federal disability rights law are allowed at all times regardless of a resident's vaccination status, the community transmission levels, or an outbreak.

## **Communication Plan Methods Strategy/Procedures**

Leisure Chateau utilizes the following communication methods to notify patients/patients/residents, their families or guardians and employees/contracted staff about any infectious disease outbreaks:

- Established email list to update families via email.
- Information Officers serve as primary contact to families for inbound calls and conducting regular outbound calls to keep families up to date and offers phone line with a voice updated at set times (e.g., daily) with the facility's general operating status.
- Leisure Chateau updates the website accordingly to share the status of the facility and include information that helps families know what's happening in the loved one's environment.
- In the event that there is a new single confirmed infection of Covid-19, Leisure Chateau will notify families via email no later than the following day. Patients/Residents will be notified via a written communication with their meal service and/or in person notification by the SS and Activities Departments.

## **Education**

Leisure Chateau will regularly train employees and practice the EID response plan through drills and exercises as part of the center's emergency preparedness training. Education includes and focuses on but is not limited to a) transmission-based precautions; b) donning and doffing PPE; c) PPE; d) handwashing; e) social distancing; f) signs and symptoms of COVID-19/Influenza; g) vaccination program/mandates; h) exposure and/or positive diagnosis to COVID-19 notification to supervisor.

## **Vaccination Program**

COVID-19 vaccinations are offered to all patients/residents or their representative if they cannot make health care decisions, employees/contracted staff unless such immunization is medically contraindicated, per CDC guidance, or the individual has already been immunized. All will be educated on the COVID-19 vaccine they are offered, in a manner they can understand, including information on the benefits and risks consistent with CDC and/or FDA information. This education will, at a minimum, include the FDA EUA Fact Sheet or Vaccine Information Sheet for the vaccine(s) being offered: a) Pfizer-BioNTech; b) Moderna and c) Bivalent Booster Vaccines. All patients/residents or their representative employees/contracted staff will be offered the opportunity to ask questions about the risk and benefits of vaccination. If the vaccine involves two doses, the same counseling indicated above, including risks, benefits and the fact sheet, before requesting consent for the second dose will be offered. Patients, residents, representatives will be provided the opportunity to refuse the vaccine and/or change their decision about vaccination at any time.

## **Staff Vaccine Requirements**

Leisure Chateau developed a process to comply with the Federal Mandate and Executive Order No. 283 that that all staff are vaccinated against COVID-19 unless they have a medical or religious exemption to help reduce the risk residents and staff have of contracting and spreading COVID-19. Unvaccinated covered workers must obtain their first dose of the primary series of a COVID-19 vaccination by January 27, 2022 and all covered workers must provide adequate proof that they are up to date with their COVID-19 vaccination by February 28, 2022 provided however, that as to having received a booster dose, covered workers must provide adequate proof that they are up to date with their COVID-19 vaccinations by February 28, 2022, or within 3 weeks of becoming eligible for a booster dose, whichever is later. New hires will be subject to the same requirements as current staff and must have received, at a minimum, the first dose of a two-dose COVID-19 vaccine or a one-dose COVID-19 vaccine by the regulatory deadline or prior to providing any care, treatment, or other services

for the facility and/or its patients. Employees/contracted staff may be eligible for a medical or religious exemption but must meet the criteria for the exemption to qualify. Employees/contracted staff without proper documentation or valid exemption are considered noncompliant with the vaccination requirements.

### **Additional Precautions and Contingency Plans for Unvaccinated Staff of Leisure Chateau**

Employees/contracted staff who receive an exemption to the COVID-19 vaccine will be subjected to additional precautions to mitigate the transmission and spread of COVID-19, which may include a) requiring at least weekly testing for exempted staff, and staff who have not completed their primary vaccination series for until the regulatory requirement met, regardless of whether the facility or service site is located within a county with low to moderate community transmission, in addition to following CDC recommendations for testing unvaccinated staff in facilities located in counties with substantial to high community transmission; b) requiring employee/contracted staff who have not completed their primary vaccination series to use a NIOSH approved N95 or equivalent or higher-level respirator for source control, c) eye protection (e.g. goggles or a face shield that covers the front and sides of the face) should be worn during all patient/resident care encounters and when in areas of Leisure Chateau where they could encounter patients/residents (e.g. common halls/corridors); d) maintaining adequate physical distancing (approximately 6 feet or more) when around patients/residents, staff who have not completed their primary vaccination series will follow additional CDC-recommended precautions, such as adhering to universal source control and physical distancing measures in areas that are restricted from patient access (e.g., staff meeting rooms, kitchen), even if our facility is located in a county with low to moderate community transmission and e) reassigning duties may be considered, whenever possible, to not involve direct interactions with patients/residents.

In the event of an emergency or low staffing, Leisure Chateau will utilize agency staffing that can provide vaccinated staff to meet resident needs. When vaccinated staff are not sufficient to meet resident needs, the temporary utilization of unvaccinated staff may be facilitated until sufficient vaccinated staff are identified to meet resident needs. However, these staff will be required to meet the additional precautions identified above.

### **Documenting COVID-19 Vaccine for Staff and Residents**

Leisure Chateau will maintain documentation for all residents and staff/contracted workers on COVID-19 vaccination, including the primary series, boosters and additional doses. Employees and contracted staff may demonstrate adequate proof they are up to date with their COVID-19 vaccinations by presenting documents if they list COVID-19 vaccines authorized for EUA in the United States and/or the World Health Organization (“WHO”), along with an administration date for each dose such as a) Their CDC COVID-19 Vaccination Card issued to the vaccine recipient by the vaccination site, or an electronic or physical copy of the same; b) Official record from the New Jersey Immunization Information System (NJIS) or other State immunization registry; c) A record from a health care provider’s portal/medical record system on official letterhead signed by a licensed physician, nurse practitioner, physician’s assistant, registered nurse or pharmacist; d) military immunization or health record from the United States Armed Forces; or e) Docket mobile phone application record or any state specific application that produces a digital COVID-19 health record. For patients/residents, the information will be documented in their medical record. Documentation will include either for the patient/resident and/or employee/contracted staff which vaccine and dosage was administer, any additional doses or boosters administered and date of administration.

### **Reporting Requirements COVID-19 Vaccine**

- 1. Daily Novi-Survey/line listing during an outbreak**
- 2. NHSN nightly**

**3. Weekly NHSN-** Leisure Chateau will report on a weekly basis via NHSN by Sunday at 11:59pm ET, the COVID-19 vaccination status of patients/residents and employees/contracted staff which includes the total numbers of patients/residents and employees/contracted staff vaccinated, each dose of vaccine received, COVID-19 vaccination adverse events, supply availability and therapeutics administered to patients/residents for treatment of COVID-19.

4. Weekly vaccination reporting per Executive Directive 21-011 including an ongoing report of the immunization status of our employees/contracted staff submitted to the Department of Health (DOH) is completed and compiled by the Tuesday of each week after all appropriate COVID-19 vaccination and testing records for our employees and contracted staff is reviewed. It includes the data for the preceding Tuesday through Monday; the number of employees and contracted staff who are fully vaccinated, those who are submitting to once or twice weekly testing. Noncompliance is tracked for those who have not submitted to once or twice weekly testing each week, during the prior week, and are not excluded from testing due to recent COVID-19 diagnosis and may have refused vaccination and testing; noncompliance results with resultant disciplinary actions/counseling.

### **Knowledge Acquired- Lessons Learned**

Having experienced this extremely difficult pandemic which is soon approaching now nearly two (2) years, Leisure Chateau has gained a wealth of knowledge and insight into many areas involving our healthcare community. No nation, state, hospital system, LTC organization or single individual could have and/or can foresee the challenges associated with a pandemic, however, we can learn valuable information along the way from our response to, and experience with COVID-19. The lessons drawn from the Corona Virus remain a focus within the facility as follows:

- ✓ Follow the guidance/develop a collaborative partnership with healthcare experts such as the CDC, HHS, NJDOH and our local board of health
- ✓ Continual review and revision of Infection Control policies and procedures.
- ✓ Continued education in Infection Control policies and procedures.
- ✓ Importance of the Screening Process.
- ✓ Importance of Testing and Continued Testing.
- ✓ Continued Notification of patients/residents, families and employees/contracted staff on COVID-19 updates.
- ✓ Hypervigilance of and oversight of the environment to search anything reminiscent of activity or threat of the spread of COVID-19.
- ✓ The importance of proper use of PPE
- ✓ The importance of limiting visitors when there is a potential pandemic

### **Influenza Program**

Leisure Chateau maintains compliance with Statute N.J.S.A. 26:2H-18.79 which requires facilities to establish and implement an annual influenza vaccination program. Healthcare workers are required to get a flu vaccine unless they have a valid medical contraindication.

### **References**

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html>

<https://www.cms.gov/files/document/qso-20-38-nh-revised.pdf>

<https://www.cms.gov/files/document/nursing-home-visitation-faq-1223.pdf>

<https://www.nj.gov/health/cd/documents/topics/NCOV/Cohorting-PAC.pdf>

Revised: February 15, 2022

October 31, 2022

