



Section: FINAL

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Policy Title: Pandemic Emergency Plan (PEP)

Applicable Program:

SNF	X	ADHCP	
LTHHCP		AL	
LHCSA		IL	
CHHA		MLTC	

**Policy:**

It is the policy of Wartburg to provide strategies for early identification of Infectious Disease/Pandemic Events and to control their spread in the facility.

**Purpose:**

To monitor for symptoms of Infectious Disease/Pandemic Events and to promptly initiate measures to control their spread to other residents and staff.

**Responsibility**

**Action**

**PREVENTION**

In the event of a Pandemic, follows all NYSDOH guidelines/directives in the management of the pandemic, and, as needed:

Administration

1. Limits all non-essential visitors, vendors, volunteers, and students/interns from entering the building. Ensures families, volunteers, vendors, and schools are notified of no visitation policy, and signs are placed at building entrances.
2. Where feasible, co-horts residents/patients who are positive or presumed positive together, either in a room, wing of a unit, or unit.

Admissions staff

3. Ensures for any new admission that, if they are confirmed positive or presumed positive, they are admitted to the wing/unit designated for positive patients.

Purchasing

4. Ensures wherever possible that an adequate supply of PPE (face masks, gloves, gowns, face shields), soap, cleaning supplies, and hand disinfectant is available.
5. Maintains or contracts to have at least a two-month (60-day) supply of personal protective equipment (including consideration of space for storage) or any superseding requirements under New York State Executive Orders and/or NYSDOH regulations governing PPE supply requirements executed during a specific disease outbreak or pandemic. As a minimum, all types of PPE found to be necessary in the pandemic should be included in the 60-day stockpile. This includes, but is not limited to:
  - N95 respirators
  - Face shield

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- Eye protection
- Gowns/isolation gowns
- Gloves
- Surgical Masks
- Sanitizer and disinfectants (meeting EPA Guidance current at the time of the pandemic)

Reception/Security

6. Wears mask. Screens all employees who are working in the skilled nursing facility at the beginning of their shift for symptoms of illness and takes their temperature (see attached screen). If they answer yes to any question, or has a temperature of 100.0 F or greater, notifies employee's supervisor, and employee is not to work and advised to see his/her physician.

7. Gives each employee who will be working a mask.

Administration

8. Upon discussion with nursing, social work, medicine, and engineering, determines what visits from families are essential for resident's medical care or for end of life care, and which vendors are considered essential, and then ensures that they are screened before going onto the units.

Reception & Engineering

9. Utilizes screening tool to ascertain that essential visitor/vendor is not at high risk for transmission. If they answer "yes" to any question, visit is not allowed and notifies administration.

10. If screen is negative, provides guidelines for visiting (see attached) and provides them with appropriate PPE to be worn when on the resident units.

Environmental Services

11. Provides additional cleaning of common areas and surfaces (door knobs, handrails, elevator buttons) with EPA-approved disinfectant.

12. Ensures hand sanitizer dispensers are refilled frequently and that bottles of hand sanitizer are available as able at all reception desks, and that soap and towels are stocked at all sinks.

All Staff

13. Is educated on infection control practices
  - a. Wash hands with soap and water for at least 20 seconds, or with anti-microbial hand sanitizer, before and after resident care
  - b. Wear gloves if hand contact with secretions or

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- potentially contaminated surfaces is anticipated
- c. Wear gown if soiling of clothes with resident's secretions is anticipated
- d. Change gloves after each resident encounter and wash hands
- e. Utilizes mask and eye protection for any resident on droplet precautions. If working with positive/presumed residents/patients, may use masks and eye protection for extended periods of time (for the shift) if PPE is in short supply.
- f. Does not report to work if sick, especially with fever and/or respiratory symptoms
- g. Social Distancing is required where indicated

Therapeutic Recreation, Nursing & Social Work

14. If visitation is restricted, facilitates virtual family visits and phone calls, and provides updates to families as needed due to restriction on visitation. Email is set up ([TR@wartburg.org](mailto:TR@wartburg.org)) for families to make such a request.

Therapeutic Recreation, Nursing & Dietary

15. As indicated, restricts communal dining and group recreation activities on affected units. Group activities allowed on non-affected units while maintaining social distancing and appropriate PPE.

Nursing

16. Facilitates residents to cover their face, noses and mouths with mask, tissue or cloth if able when staff are in their rooms to provide care.

17. Provides a face mask to residents if they are going out of the facility, if they can tolerate it.

Administration

18. Provides periodic updates and education to families through written and electronic communication.

19. Provides updates for all residents and authorized families and guardians at least once a week on the number of pandemic-related infections and deaths at the facility, including residents with a pandemic-related infection who pass away for reasons other than such infection.

### SURVEILLANCE

Nursing

20. Implements daily surveillance on all units to assess for residents with symptoms of illness. Ensures that any new case of illness is reported to the attending physician, DON/designee and Medical Director.

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Administration

21. Ensures that line listing is initiated and maintained for any/all residents with symptoms of illness. When able, creates wing/unit for dedicated to the care of patients/residents who are positive or presumed, and minimizes the floating of staff on/off the designated unit(s).

Attending Physician

22. When the diagnosis of infectious disease is suspected, appropriate laboratory diagnostic testing is ordered and other diagnostic testing such as x-ray, blood count, chemistries, etc. as determined by the attending physician.

Nursing

23. Places sign on door for required precautions, and provides PPE to staff, if not already being used.

TREATMENT

Nursing & Administration

24. If test is positive for infectious disease, ensures that resident/patient is either moved to a designated room/wing/unit, placed in a private room, or is co-horted with another positive/presumed resident/patient on the unit.

25. Roommates of confirmed cases are considered exposed, and will be kept quarantined in a single room, or co-horted with another potentially exposed resident, for 14 days, to assess for any symptoms of illness.

Clinical staff

26. Limits the number of different staff members caring for patient as possible.

27. Follows limitations and restrictions :

- Limit resident movement to affected unit/building.
- Minimize floating of staff to affected unit/building.
- Treat residents (rehabilitation, medical clinic) in affected unit(s)/building in the unit(s)/building and treat them last.
- Collect specimen or take X-rays in affected unit/building last.
- Schedule activities in the affected unit/building. Restrict residents from attending activities off-unit.
- Restrict volunteers from going to the affected unit/building.

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| Medicine                        | 28. Treats patient in-house as able. Orders transfer to hospital if patient's needs require increased clinical care capabilities as per patient's advance directives.  |
| Admissions                      | 29. Will implement procedures to assure hospitalized residents will be admitted or readmitted to the SNF or alternate care site after treatment, in accordance with all applicable laws and regulations, including but not limited to 10 NYCRR 415.3(i)(3)(iii), 415.19, and 415.26(i); and 42 CFR 483.15(e).<br><br>30. Will preserve a resident's place in the SNF if such resident is hospitalized, in accordance with all applicable laws and regulations including but not limited to 18 NYCRR 505.9(d)(6) and 42 CFR 483.15(e).  |
| Nursing                         | 31. If transfer to the hospital is ordered, ensures that receiving hospital and EMS are notified of patient's possible/actual infection.   |
| Nursing, Medicine & Social Work | 32. Ensures that family is kept updated with information on the status of the patient daily.<br><br>33. Informs families of all residents on the affected unit / in the facility about the outbreak and about visitor limitations.   |
| All Staff                       | 34. All staff will undergo testing as advised by the Department of Health.<br><br>35. Nursing Home employees who test positive for infectious disease may not return to work until the required number of days after the onset of symptoms, as determined by the NYSDOH, and have received a negative diagnostic test (if applicable).<br><br>36. Nursing Home employees who are asymptomatic contacts of confirmed or suspected cases should self-monitor twice/day (temperature, symptoms) and undergo temperature monitoring and symptom checks at the beginning of each shift and at least every 12 hours.<br><br>37. If a nursing home employee develops symptoms consistent with infectious disease, he/she should immediately stop work |

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and contact his/her physician for further assessment/testing.

Administration

- 38. Maintains contact with the NYS DOH and follows any other recommendations made in the treatment of the patient and in the control of the spread of the infection in the facility.
- 39. Implement procedures to obtain and maintain current guidance, signage, advisories from the NYSDOH and the U.S. Centers for Disease Control and Prevention (CDC) on disease-specific response actions, e.g., including management of residents and staff suspected or confirmed to have disease.
- 40. Will assure all reporting requirements of the Health Commerce System, e.g. HERDS survey reporting are met.
- 41. Posts a copy of the facility’s PEP, in a form acceptable to the commissioner, on the facility’s public website, and make available immediately upon request.

RECOVERY

Administration

- 42. Lifts restrictions per recommendation of NYSDOH epidemiologist.
- 43. Develops a plan to recover/return to normal operations when, and as specified by, NYSDOH and CDC guidance at the time of each specific infectious disease or pandemic event e.g., regarding how, when, which activities /procedures /restrictions may be eliminated, restored and the timing of when those changes may be executed.
- 44. Maintains review of, and implement procedures provided in NYSDOH and CDC recovery guidance that is issued at the time of each specific infectious disease or pandemic event, regarding how, when, which activities/procedures/restrictions may be eliminated, restored and the timing of when those changes may be executed.
- 45. Communicates any relevant activities regarding recovery/return to normal operations, with residents, staff, families/guardians and other relevant stakeholders.

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# Annex E: Infectious Disease/Pandemic Emergency

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The circumstances of infectious disease emergencies, including ones that rise to the level of a pandemic, vary due to multiple factors, including type of biological agent, scale of exposure, mode of transmission and intentionality. Infectious disease emergencies can include outbreaks, epidemics and pandemics. The facility must plan effective strategies for responding to all types of infectious diseases, including those that rise to the higher level of pandemic.

The following Infectious Disease/Pandemic Emergency Checklist outlines the hazard-specific preparedness, response, and recovery activities the facility should plan for that are unique to an incident involving infectious disease as well as those incidents that rise to the occasion of a pandemic emergency. The facility should indicate for each checklist item, how they plan to address that task.

The Local Health Department (LHD) of each New York State county, maintains prevention agenda priorities compiled from community health assessments. The checklist items noted in this Annex include the identified LHD priorities and focus areas. Nursing homes should use this information in conjunction with an internal risk assessment to create their plan and to set priorities, policies and procedures.

This checklist also includes all elements required for inclusion in the facility’s Pandemic Emergency Plan (PEP), as specified within the new subsection 12 of Section 2803, Chapter 114 of the Laws of 2020, for infectious disease events that rise to the level of a pandemic.

To assure an effective, comprehensive and compliant plan, the facility should refer to information in Annex K of the CEMP Toolkit, to fully understand elements in the checklist including the detailed requirements for the PEP.

A summary of the key components of the PEP requirements for pandemic situations is as follows:

- o development of a Communication Plan,
- o development of protection plans against infection for staff, residents, and families, including the maintenance of a 2-month (60 day) supply of infection control personal protective equipment and supplies (including consideration of space for storage), and
- o A plan for preserving a resident’s place in and/or being readmitted to a residential health care facility or alternate care site if such resident is hospitalized, in accordance with all applicable laws and regulations.

Finally, any appendices and documents, such as regulations, executive orders, guidance, lists, contracts, etc. that the

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facility creates that pertain to the tasks in this Annex, and/or refers to in this Annex, should be attached to the corresponding Annex K of the CEMP Toolkit rather than attached here, so that this Annex remains a succinct plan of action.

<b>Infectious Disease/Pandemic Emergency Checklist</b>	
<b>Preparedness Tasks for <u>all Infectious Disease Events</u></b>	
<input type="checkbox"/> Required	<p>Provide staff education on infectious diseases (e.g., reporting requirements (see Annex K of the CEMP toolkit), exposure risks, symptoms, prevention, and infection control, correct use of personal protective equipment, regulations, including 10 NYCRR 415.3(i)(3)(iii), 415.19, and 415.26(i); 42 CFR 483.15(e) and 42 CFR § 483.80), and Federal and State guidance/requirements.</p> <p style="background-color: yellow;">See 'Pandemic Emergency Plan Policy'</p>
<input type="checkbox"/> Required	<p>Develop/Review/Revise and Enforce existing infection prevention, control, and reporting policies.</p> <p style="background-color: yellow;">See 'Pandemic Emergency Plan Policy'</p>
<input type="checkbox"/> Recommended	<p>Conduct routine/ongoing, infectious disease surveillance that is adequate to identify background rates of infectious diseases and detect significant increases above those rates. This will allow for immediate identification when rates increase above these usual baseline levels.</p> <p style="background-color: yellow;">See 'Pandemic Emergency Plan Policy'</p>
<input type="checkbox"/> Recommended	<p>Develop/Review/Revise plan for staff testing/laboratory services</p> <p style="background-color: yellow;">See 'Pandemic Emergency Plan Policy'</p>
<input type="checkbox"/> Required	<p>Review and assure that there is, adequate facility staff access to communicable disease reporting tools and other outbreak specific reporting requirements on the Health Commerce System (e.g., Nosocomial Outbreak Reporting Application (NORA), HERDS surveys.</p> <p style="background-color: yellow;">See 'Pandemic Emergency Plan Policy'</p>
<input type="checkbox"/> Required	<p>Develop/Review/Revise internal policies and procedures, to stock up on medications, environmental cleaning agents, and personal protective equipment as necessary. (Include facility's medical director, Director of Nursing, Infection Control Practitioner, safety officer,</p>



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	<p>human resource director, local and state public health authorities, and others as appropriate in the process)</p> <p><b>See 'Pandemic Emergency Plan Policy'</b></p>
<input type="checkbox"/> Recommended	<p>Develop/Review/Revise administrative controls (e.g., visitor policies, employee absentee plans, staff wellness/symptoms monitoring, human resource issues for employee leave).</p> <p><b>See 'Pandemic Emergency Plan Policy'</b></p>
<input type="checkbox"/> Required	<p>Develop/Review/Revise environmental controls (e.g., areas for contaminated waste)</p> <p><b>See 'Pandemic Emergency Plan Policy'</b></p>
<input type="checkbox"/> Required	<p>Develop/Review/Revise vendor supply plan for re-supply of food, water, medications, other supplies, and sanitizing agents.</p> <p><b>See 'Pandemic Emergency Plan Policy'</b></p>
<input type="checkbox"/> Required	<p>Develop/Review/Revise facility plan to ensure that residents are isolated/cohorted and or transferred based on their infection status in accordance with applicable NYSDOH and Centers for Disease Control and Prevention (CDC) guidance.</p> <p><b>See 'Pandemic Emergency Plan Policy'</b></p>
<input type="checkbox"/> Recommended	<p>Develop plans for cohorting, including using of a part of a unit, dedicated floor, or wing in the facility or a group of rooms at the end of the unit, and discontinuing any sharing of a bathroom with residents outside the cohort.</p> <p><b>See 'Pandemic Emergency Plan Policy'</b></p>
<input type="checkbox"/> Recommended	<p>Develop/Review/Revise a plan to ensure social distancing measures can be put into place where indicated.</p> <p><b>See 'Pandemic Emergency Plan Policy'</b></p>
<input type="checkbox"/> Recommended	<p>Develop/Review/Revise a plan to recover/return to normal operations when, and as specified by, State and CDC guidance at the time of each specific infectious disease or pandemic event e.g., regarding how, when, which activities /procedures /restrictions may be eliminated, restored and the timing of when those changes may be executed.</p> <p><b>See 'Pandemic Emergency Plan Policy'</b></p>

**Additional Preparedness Planning Tasks for Pandemic Events**

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<input type="checkbox"/> Required	<p><b><i>In accordance with PEP requirements,</i></b> Develop/Review/Revise a Pandemic Communication Plan that includes all required elements of the PEP</p> <p>See 'Pandemic Emergency Plan Policy'</p>
<input type="checkbox"/> Required	<p><b><i>In accordance with PEP requirements,</i></b> Development/Review/Revise plans for protection of staff, residents and families against infection that includes all required elements of the PEP.</p> <p>See 'Pandemic Emergency Plan Policy'</p>
<b>Response Tasks for <u>all Infectious Disease Events:</u></b>	
<input type="checkbox"/> Recommended	<p>The facility will implement the following procedures to obtain and maintain current guidance, signage, advisories from the NYSDOH and the U.S. Centers for Disease Control and Prevention (CDC) on disease-specific response actions, e.g., including management of residents and staff suspected or confirmed to have disease:</p> <p>See 'Pandemic Emergency Plan Policy'</p>
<input type="checkbox"/> Required	<p>The facility will assure it meets all reporting requirements for suspected or confirmed communicable diseases as mandated under the New York State Sanitary Code (10 NYCRR 2.10 Part 2), as well as by 10 NYCRR 415.19. (see Annex K of the CEMP toolkit for reporting requirements).</p> <p>See 'Pandemic Emergency Plan Policy'</p>
<input type="checkbox"/> Required	<p>The facility will assure it meets all reporting requirements of the Health Commerce System, e.g. HERDS survey reporting</p> <p>See 'Pandemic Emergency Plan Policy'</p>
<input type="checkbox"/> Recommended	<p>The Infection Control Practitioner will clearly post signs for cough etiquette, hand washing, and other hygiene measures in high visibility areas. Consider providing hand sanitizer and face/nose masks, if practical.</p> <p>See 'Pandemic Emergency Plan Policy'</p>
<input type="checkbox"/> Recommended	<p>The facility will implement the following procedures to limit exposure between infected and non-infected persons and consider segregation of ill persons, in accordance with any applicable NYSDOH and CDC guidance, as well as with facility infection control and prevention program policies.</p> <p>See 'Pandemic Emergency Plan Policy'</p>
<input type="checkbox"/> Recommended	<p>The facility will implement the following procedures to ensure that as much as is possible, separate staffing is provided to care for each infection status cohort, including surge staffing strategies.</p>

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**See 'Pandemic Emergency Plan Policy'**

Recommended

The facility will conduct cleaning/decontamination in response to the infectious disease in accordance with any applicable NYSDOH, EPA and CDC guidance, as well as with facility policy for cleaning and disinfecting of isolation rooms.

**See 'Pandemic Emergency Plan Policy'**

Required

The facility will implement the following procedures to provide residents, relatives, and friends with education about the disease and the facility's response strategy at a level appropriate to their interests and need for information.

**See 'Pandemic Emergency Plan Policy'**

Recommended

The facility will contact all staff, vendors, other relevant stakeholders on the facility's policies and procedures related to minimizing exposure risks to residents.

**See 'Pandemic Emergency Plan Policy'**

Required

Subject to any superseding New York State Executive Orders and/or NYSDOH guidance that may otherwise temporarily prohibit visitors, the facility will advise visitors to limit visits to reduce exposure risk to residents and staff.

If necessary, and in accordance with applicable New York State Executive Orders and/or NYSDOH guidance, the facility will implement the following procedures to close the facility to new admissions, limit visitors when there are confirmed cases in the community and/or to screen all permitted visitors for signs of infection.

**See 'Pandemic Emergency Plan Policy'**

**Additional Response Tasks for Pandemic Events:**

Recommended

Ensure staff are using PPE properly (appropriate fit, don/doff, appropriate choice of PPE per procedures)

**See 'Pandemic Emergency Plan Policy'**

Required

***In accordance with PEP requirements***, the facility will follow the following procedures to post a copy of the facility's PEP, in a form acceptable to the commissioner, on the facility's public website, and make available immediately upon request.

**See 'Pandemic Emergency Plan Policy'**

Required

***In accordance with PEP requirements***, the facility will utilize the following methods to update authorized family members and guardians of infected residents (i.e., those infected with a pandemic-related infection) at least once per day and upon a change in a resident's condition.

**See 'Pandemic Emergency Plan Policy'**

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<input type="checkbox"/> Required	<p><b><i>In accordance with PEP requirements</i></b>, the facility will implement the following procedures/methods to ensure that all residents and authorized families and guardians are updated at least once a week on the number of pandemic-related infections and deaths at the facility, including residents with a pandemic-related infection who pass away for reasons other than such infection.</p> <p>See 'Pandemic Emergency Plan Policy'</p>
<input type="checkbox"/> Required	<p><b><i>In accordance with PEP requirements</i></b>, the facility will implement the following mechanisms to provide all residents with no cost daily access to remote videoconference or equivalent communication methods with family members and guardians.</p> <p>See 'Pandemic Emergency Plan Policy'</p>
<input type="checkbox"/> Required	<p><b><i>In accordance with PEP requirements</i></b>, the facility will implement the following process/procedures to assure hospitalized residents will be admitted or readmitted to such residential health care facility or alternate care site after treatment, in accordance with all applicable laws and regulations, including but not limited to 10 NYCRR 415.3(i)(3)(iii), 415.19, and 415.26(i); and 42 CFR 483.15(e).</p> <p>See 'Pandemic Emergency Plan Policy'</p>
<input type="checkbox"/> Required	<p><b><i>In accordance with PEP requirements</i></b>, the facility will implement the following process to preserve a resident's place in a residential health care facility if such resident is hospitalized, in accordance with all applicable laws and regulations including but not limited to 18 NYCRR 505.9(d)(6) and 42 CFR 483.15(e).</p> <p>See 'Pandemic Emergency Plan Policy'</p>
<input type="checkbox"/> Required	<p><b><i>In accordance with PEP requirements</i></b>, the facility will implement the following planned procedures to maintain or contract to have at least a two-month (60-day) supply of personal protective equipment (including consideration of space for storage) <u>or any superseding requirements under New York State Executive Orders and/or NYSDOH regulations governing PPE supply requirements executed during a specific disease outbreak or pandemic</u>. As a minimum, all types of PPE found to be necessary in the COVID pandemic should be included in the 60-day stockpile.</p> <p>This includes, but is not limited to:</p> <ul style="list-style-type: none"> <li>- N95 respirators</li> <li>- Face shield</li> <li>- Eye protection</li> <li>- Gowns/isolation gowns</li> <li>- Gloves</li> <li>- Masks</li> <li>- Sanitizer and disinfectants (meeting EPA Guidance current at the time of the pandemic)</li> </ul> <p>See 'Pandemic Emergency Plan Policy'</p>

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<b>Recovery for <u>all Infectious Disease Events</u></b>	
<input type="checkbox"/> Required	<p>The facility will maintain review of, and implement procedures provided in NYSDOH and CDC recovery guidance that is issued at the time of each specific infectious disease or pandemic event, regarding how, when, which activities/procedures/restrictions may be eliminated, restored and the timing of when those changes may be executed.</p> <p style="background-color: yellow;">See 'Pandemic Emergency Plan Policy'</p>
<input type="checkbox"/> Required	<p>The facility will communicate any relevant activities regarding recovery/return to normal operations, with staff, families/guardians and other relevant stakeholders</p> <p style="background-color: yellow;">See 'Pandemic Emergency Plan Policy'</p>