

Residents in long-term care facilities are at greater risk of developing illness when exposed to communicable diseases. Merion Gardens has developed a comprehensive infection prevention and outbreak response plan for early detection of an outbreak and implementation of control measures to reduce further transmission.

When the facility suspects an outbreak, whether due to a cluster of symptomatic residents or staff or through laboratory confirmation, the following steps will occur:

1. When possible, laboratory confirmation will be obtained through a laboratory contracted with the Merion Gardens or by a lab at the state Public Health and Environmental Laboratory (PHEL) if the health department requests that the specimen be sent to a PHEL
2. Surveillance of residents, staff and visitors is increased to alert for new onset of illness or a recent history of illness which may previously have been recognized as a part of the outbreak. Individuals who present with illness will not be allowed to enter the facility. A line listing of affected residents and staff will be maintained.
3. Efforts will be made to identify and eliminate possible sources of transmission.
4. Control measure will be initiated which can include:
 - a. Cohort residents according to symptoms, exposure and test results.
 - b. Residents may be placed on transmission-based precautions.
 - c. Visitors may be restricted.
 - d. Residents, staff and visitors will be reminded to perform frequent hand hygiene.
 - e. Additional education will be provided to staff related to the disease process and infection practices specific to the outbreak.
 - f. Staff will be assigned to designated units and not allowed to float between units.
5. Notify residents, resident's families, visitors, staff, and physicians of the outbreak with routine updates.
6. Notify public health officials of the outbreak and provide routine updates of the status of the outbreak.
7. Ensure adequate staffing and implement crisis staffing if needed.

The outbreak plan will be reviewed annually and as necessary and will be revised in accordance with CDC, NJDOH and the Association of Professional in Infection Control and Epidemiology (APIC) guidelines.

The facility has created disease-specific outbreak plans. For additional information on our COVID-19 Outbreak Plan click here [\[link to plan\]](#).

MERION GARDENS ASSISTED LIVING
Infection Prevention and Outbreak Response Plan

COVID-19

- Communication/Notification: use of the Incident Command Structure, notification of staff, notification of residents/families, and notification of external sources.
- Resources and Assets: staffing, PPE, supplies, equipment, transportation and evacuation, and testing.
- Safety and Security: Patient/staff/visitor Access.
- Patient Management: clinical needs, resident rights, support activities, cohorts, and physician visits.
- Facilities: sanitation/disinfection and regulated medical waste and storage.
- Mandatory Reporting Compliance: NHSN, NJHA, OEM and DOH.

DEFINITION OF AN OUTBREAK

A COVID-19 outbreak in a LTC facility is defined as ≥ 1 facility-acquired COVID-19 case in a resident or ≥ 1 laboratory confirmed COVID-19 case among staff.

SIGNS AND SYMPTOMS

COVID-19 may be difficult to differentiate from other illnesses due to common signs and symptoms. The most common signs and symptoms associated with COVID-19 include: cough, new shortness of breath, sore throat, URI symptoms, fever, chills with or without shaking, new fatigue, new body aches, nausea, vomiting, diarrhea or new loss of sense of taste or smell.

TESTING

The facility has entered into agreements Delaware Diagnostic Laboratory to preform testing for staff and resident.

Merion Gardens Assisted Living completed initial point prevalence testing and subsequent testing requirements in accordance with Executive Directive 20-013 and submitted the required attestation of compliance to the NJ DOH. Ongoing testing and retesting will be in accordance with CDC and NJ DOH guidance, as amended and supplemented.

COMMUNICATION

Merion Gardens Assisted Living maintains channels of communication and transparency with residents, families, and employees. In addition to local and state offices.

Merion Gardens Assisted Living has established a mechanism for residents and their families to contact the facility with urgent questions or concerns that are not being responded to via normal communication methods. These mechanisms are posted on our website and are monitored by the Administrator and other key personnel. Contact may be made:

- By calling the Urgent Communications Hotline at (856-299-0300 ext 2).
- By email to administratormerion@comcast.net
- The facility maintains updated phone lists to contact other staff, physicians, residents, families/responsible parties, and other necessary agencies in a timely manner.

Specific to COVID-19, general communication will be at least weekly and by way of email to families and text messages to staff. Residents will be notified of updates. These general communications may include up to date statistics, mitigation efforts, changes to normal operations, and a point of contact for any questions or concerns.

If Merion Gardens Assisted Living receives a positive test result for a resident or staff (an outbreak) the facility shall notify all residents, the resident's representative (one), and all staff by 1700 hours on the calendar day after the date the result is received by the facility.

During an outbreak, positive test results for individual residents shall be reported directly (in person or by phone) to the resident, the resident's representative, the Director of Wellness, the Administrator, and the resident family member. Positive test results will also be shared with Infectious Control Physician and Salem County Department of Health.

During an outbreak, positive test results for staff shall be reported directly (in person or by phone) to the individual staff member, his/her manager, the Director of Wellness, the Administrator, and the Infectious Control Physician and Salem County Department of Health.

The facility shall use a line list to document test results and will submit the line list to the local and State Departments of Health as required and/or instructed.

RESIDENT PROTOCOL

Monitoring Residents for COVID-19

Current Residents

Monitor for sign and symptoms of COVID-19 at least once daily and notify physician if resident develops corresponding signs or symptoms.

New Admissions and Re-admissions from the Community or Hospital

All new admissions and re-admissions will be screened for COVID-19 prior to acceptance into the facility and upon admission. If the resident was tested at a facility prior to admission, the sending facility must provide lab results to the receiving facility. The resident will be placed in a cohort based upon their COVID-19 status. All new admissions will be placed in quarantine for fourteen days. Residents who routinely leave the facility for services such as dialysis, will remain in private accommodation.

Management of Residents

Residents will remain in private accommodations based upon their COVID-19 test results, symptoms, and exposure to COVID-19.

Transmission Based Precautions

Residents who are newly admitted and residents who are COVID-19 positive or were exposed to someone who tested COVID-19 positive, will be placed on transmission-based precautions with the use of full PPE until the resident meets criteria for discontinuation of transmission-based precautions.

Transfer to an Acute Care Facility

If a resident who is confirmed to be COVID-19 positive or is under investigation for COVID-19 requires transfer to an acute care facility, staff will notify the transferring EMS/ambulance agency of the resident's COVID status when placing the call to arrange transport, document the COVID status on the Universal Transfer Form and contact the receiving facility and inform them of the resident's COVID status.

Death

If a resident who is confirmed to be COVID-19 positive or is under investigation for COVID-19 dies, inform the funeral home of the resident's COVID status.

STAFF PROTOCOL

As long as COVID-19 is present in the surrounding community, there exists a risk of it entering the facility. To mitigate the risk of this occurrence by staff, the following staff-specific interventions are in place:

- Staff is required to complete a wellness questionnaire daily before entering building.
- Staff receives education specific to COVID-19.
- Staff receives on going in-servicing specific to infection control and PPE.
- Staff are provided with PPE.
- Staff are primarily assigned to a designated unit as able.
- Staff are directed not to report work if they feel ill.

Screening

Prior to entering the facility, all staff are screened for COVID-19. Staff who do not pass the screening process will be evaluated by a nurse who will determine if they can work.

Staff who develop signs and symptoms during their shift must inform their supervisor or manager on duty and be tested for COVID-19 prior to leaving the facility. They will be restricted from work while test results are pending.

Staff Testing

All staff will undergo testing in accordance with current CDC and/or NJ DOH guidelines. For employees who work at more than one facility, Merion Gardens Assisted Living will accept the results from another facility, provided that the testing is compliant with Merion Gardens Assisted Living current testing process and the employee consents to have the test results made available to Merion Gardens Assisted Living simultaneously with the facility where the employee was tested.

Management of Symptomatic or Exposed Staff

If staff are exposed to a COVID-19 case, the Director of Wellness or designee must be informed of the exposure. The risk of exposure and need for work restrictions will be determined by using the *Revised NJDOH Exposure to Confirmed COVID-19 Case Risk Algorithm*.

Management of COVID-19 Positive Staff

Staff who test positive for COVID-19 will be restricted from work until they meet the criteria to return.

The Director of Wellness or their designee will initiate contact tracing, notify the local Health Department, notify staff, residents, resident representatives and others per the facility's communication plan, and report the case in the mandated NJDOH and CMS reporting systems.

Return to Work Criteria

Staff who test positive will be restricted from work and allowed to return when they meet CDC criteria for discontinuation of isolation.

Crisis Staffing

Crisis staffing will be implemented during times of potential or actual staffing shortages to ensure continuity of operations and the ability to meet the needs of the residents. All departments will work collaboratively to implement the initiatives.

1. Each department director will document the minimum staffing requirements for their area, based on census and resident acuity where appropriate.
2. All current full-time, part-time, and per diem employees will be notified when a staffing emergency is in effect and requested to provide additional availability to work.
3. Department directors may implement any/all the following initiatives with currently working staff: change shift length (from 8- to 10- or 12-hour shifts), adjust the start and/or end times for existing staff, implement mandatory overtime in accordance with state regulation and facility policy.
4. Additional initiatives may include:
 - a. Use temporary staff through contracted agencies.
 - b. Use physical therapists, occupational therapists, and speech therapists for resident care tasks as appropriate to their discipline.
 - c. When approved through CMS and NJ DOH waivers, recruit Certified Homemaker Home Health Aides and other health care workers to assist with resident care.
 - d. Communicate the need among staff to postpone elective time off from work.
 - e. Reassign health care personnel (e.g., nursing administrative and MDS staff) to support essential patient care activities in the facility.
 - f. Address social factors that might prevent health care personnel from reporting to work such as transportation and housing.
 - g. Determine the priority of nursing care and services during staffing shortages and consider initiatives to modify the workload of staff.

5. Communicate with local healthcare coalitions, federal, state, and local health partners to identify additional healthcare personnel.
6. As a last resort, and in collaboration with the Administrator, transfer residents to healthcare facilities or alternate care sites with adequate staffing to provide safe patient care.

VISITOR PROTOCOL

Due to the vulnerability of our residents, and to reduce the risk of introduction of COVID-19 into the facility as community transmission becomes widespread, the facility will restrict the access of visitors and non-essential personnel in accordance with NJ Department of Health (NJDOH) guidelines and Executive Directives. Agency staff and essential medical providers will continue to be allowed into the facility.

Prior to entering the facility, all visitors are screened for COVID-19. Individuals who do not pass the screening process will be restricted from the facility.

Visitors who test positive for COVID-19 or have symptoms of COVID-19 within 14 days of visiting will be directed to self-isolate and notify the facility immediately.

Resident Visitation

When resident visitation is restricted, virtual visitation will be available to residents and families to stay in touch. Families will be able to schedule visits by contacting staff at 856-299-0300. The use of facetime if families have supporting technology.

In-person visitation will be permitted in accordance with NJ DOH guidelines, subject to facility policies and procedures.

If at any point during the public health response the state returns to the maximum restriction state, the community may return to the maximum restriction for the health and wellness of residents and employees.

Indoor visitation will be scheduled by contacting Merion Garden Assisted Living directly. This indoor visitation will occur once the facility is at the proper stage as in Executive Order.

Agency Staff/Essential Medical Provider

Physicians and other clinicians will be encouraged to use telemedicine when available.

MANDATORY REPORTING

During a COVID-19 pandemic the facility will complete mandatory reporting to the following agencies: CDC, NHSN Portal, NJDOH, NJHA, OEM.