

CNRC

QUARTERLY COVID QAPI PLAN

DRAFT OCTOBER 8, 2020

APPROVED BY QAA 11/2/20

VISITATION

The facility recognizes that it may not restrict visitation without a reasonable clinical or safety cause:

If the facility has had no COVID-19 cases in the last 14 days and its county positivity rate is low or medium, in-person visitation consistent with the regulations will be facilitated.

The facility will use the COVID-19 county positivity rate in determining how to facilitate indoor visitation.

If the county positivity rate is greater than 10%, only Compassionate Care visits/situations will occur.

The facility will encourage visitors to be tested on their own prior to coming to the facility preferably within 2–3 days of visiting with proof of negative test results and date of test.

Residents who are on transmission-based precautions for COVID-19 will only receive visits that are virtual, through windows, or in-person for compassionate care situations only.

Key Points:

Visitation will be scheduled by the Social Service/Activities Department or designee.

Visitation will be person-centered, consider the residents' physical, mental, and psychosocial well-being, and support their quality of life.

Visits will be held outdoors whenever practicable

Conducted with an adequate degree of privacy.

Facilitated and monitored by Facility Staff

Visitors unable to adhere to the core principles of COVID-19 infection prevention should not be permitted to visit or should be asked to leave

The number and size of visits occurring simultaneously will support safe infection prevention actions and social distancing

The facility will facilitate outdoor, indoor visitation and Compassionate Care Situations as below:

OUTDOOR VISITATION

Outdoor visitation will be held in designated areas

Universal Masking, Social Distancing and adhering to core principles of infection control will occur

INDOOR VISITATION

Indoor visitation will occur in designated areas

In-room visitation will occur in room only upon approval of COVID team

Visitors will go directly to the resident's room or designated visitation area.

COMPASSIONATE CARE SITUATIONS

Guidance:

The interdisciplinary team will identify and prioritize residents who potentially qualify for a Compassionate Care Situation

Once the interdisciplinary team identifies the resident, the circumstances will be reviewed with the COVID team for approval

Under direction of the COVID team, to ensure the safety of residents and staff, the facility will:

Require caregivers to show proof of a negative COVID-19 test that was administered within the prior 7 days, preferably 72 hours if testing turn-around times allow, before initiating Caregiver duties. The Caregiver must be willing to adhere to ongoing testing requirements that apply to facility staff

Caregivers are responsible for arranging and covering the cost of testing.

Caregivers are to be screened prior to entering the facility, adhere to universal masking, frequently practice hand sanitization, and social distancing from staff and other residents.

Social distancing from the resident receiving Caregiving is strongly preferred but not required if distancing would not achieve the intended health outcomes of the visit.

Visitor instructions and the Compassionate Caregiver Situation Screening will be completed at time of visits

Caregivers should not visit more than 2 hours per day, and there should not be more than 2 Caregivers per resident at a time.

Once approved by the COVID team, the Interdisciplinary Team will:

Update the resident's care plan with measurable objectives and timeframes for action related to Compassionate Caregiving.

This will include number of times/days per week

The care plan team and documentation should carefully consider who is needed and at what frequency to maintain or improve the resident's health status

The resident may not have more than 2 Caregivers present at a time.

The care plan will determine what the appropriate PPE for the caregiver should be worn based on the reason for the compassionate care visit

The first Compassionate Care visit for each Caregiver will be observed by a member of the Interdisciplinary Team in the setting in which Caregiving will typically happen (e.g., the resident's room) to orient Caregivers to specific safety measures the Caregivers need to take to protect residents and staff.

During the first visit, staff will show the Caregiver where facility hand sanitizer stations are, instruct them on how to use hand sanitizer properly, check if mask is worn incorrectly, identify demarcations in the resident's room that should not be crossed to ensure social distancing from a roommate, etc. Staff will correct any deficiencies. Staff will continue to observe the visit until the Caregiver is fully oriented and any deficiencies are remediated.

Upon subsequent visits, staff will check-in, as possible, to ensure safety measures are being adhered to.

Staff will intermittently check-in to ensure adherence to universal masking, hand sanitizer has been used recently, distancing from other residents is being practiced, etc.

If caregiver is unwilling to adhere to infection control practices after re-education and remediation, the caregiver will be asked to leave facility and will be unable to continue in caregiver role for the resident

The facility will keep documentation of all Caregivers who enter the facility to include their name, address, phone number, e-mail address in the event contact tracing is necessary.

A list of approved Compassionate Caregivers will be kept in the COVID DOH Survey Readiness Binder along with testing results, and documentation re: the Compassionate Care Situation.

DINING

Main Dining Room services for lunch meal resumed 10/12/2020. Maximum occupancy is 22 under current guidelines for social distancing. Staff will wear masks and eye protection

On unit meal service continues per current guidance. i.e. eye protection and gowns for staff feeding

Hand hygiene will be performed with hand sanitizer when switching assistance between residents when assisting more than one resident at same time

ACTIVITIES

Group activities are occurring following social distancing guidelines and appropriate infection control core principles.

Outings for Medical Appointments

The facility will continue to encourage facility transportation to appointments. If a resident chooses to

have a family member or friend transport them, the facility will:

Ensure screening upon entering and returning to the facility

Provide documented education for masking of the resident and driver during transport

The facility will remain alert for notification of any known exposures.

If an exposure occurs, the facility will test the resident, begin contact tracing, quarantine and provide any necessary medical care.

Outings for Non- Medical Reasons

The facility recognizes resident rights and emphasizes person-centered care. The facility recognizes there will be situations that require outings for non-medical reasons. The facility COVID team in conjunction with the facility Medical Director will review each scenario on a case-by-case basis to ensure:

Infection prevention and control precautions including universal masking, hand hygiene and social distancing can be achieved based on the circumstances of the outing

The resident's level of vulnerability due to any chronic or immunocompromised conditions is identified, and risks vs. benefits of the outing are discussed and documented with the resident and Responsible Party.

The duration and location of the visit is identified to determine need for any recommended 14 quarantine upon return.

Testing upon return within 2-3 days from the outing will occur if determined to be a High-Risk outing

County positivity rate greater than or equal to 10% AND

Gathering of 10 or more People AND

Failure of consistent universal masking during the duration of the outing OR

Failure of physical distancing from resident (ex: hugging or riding in a vehicle with unmasked person