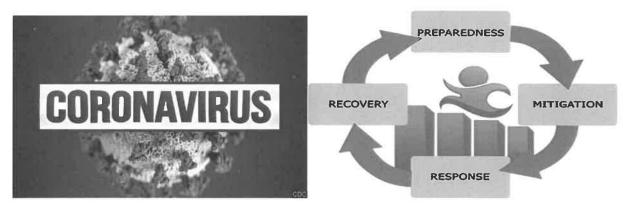
PICKERSGILL RETIREMENT COMMUNITY CORONAVIRUS DISEASE 2019 (COVID-19) INTERIM PANDEMIC PLAN

The World Health Organization defines a pandemic as "the worldwide spread of a new disease"



Policy and Procedure

It is the policy of this facility to prepare and implement a pandemic plan in the event of a determined worldwide spread of a new disease.

I. MITIGATION PHASE

- Facility leadership will identify members of the facility Pandemic Plan team: Governing Body, Administrator, DON, Medical Director, Infection Preventionist, Pharmacy Consultant, Interdisciplinary Department Leaders, Quality Assurance Coordinator, and Public health representative
 The pandemic plan will be coordinated and aligned with the facility Emergency Preparedness Plan.
 The facility leadership team will review the facility Emergency Preparedness Plan for effective plan implementation including: Roles and responsibilities, required tasks as
- effective plan implementation including: Roles and responsibilities, required tasks as outlined, plan implementation phases, and business continuity
- Outbreak management plan and actions
- ☐ Identification of current risks and hazards in the community
- ☐ Identification and assessment of risk to the facility residents and employees
- ☐ Goals and priorities will be identified to meet the quality needs of the residents and employees: Training, Supplies, Medications, Treatments, Equipment and Employee Management

II. PREPAREDNESS PHASE

The Pandemic Plan will include:

- ☐ Authority: Key Employees responsible for executing the Plan, Preparation of Emergency Contact, Resident, Staff Lists, and Contacts
- ☐ Communication Procedures: Collaboration with State/Local Health Department, acute care partners, other providers; Identify resources and partners. Communication Plan

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should govern within the facility with all the residents, their representatives, and employees. Review Community and Facility Risk: Complete a risk assessment as outlined in Emergency Preparedness Plan to determine facility risk. Coordinate and communicate with Local and State ☐ Health Department. If risk is identified, initiate Pandemic Plan in collaboration with Public Health authorities Review Resident Advance Directives and Emergency Operations Coordination. Follow the Emergency Preparedness Plan: re-educate employees on their roles, responsibilities and resource allocation. Employee Allocation: Identification of essential and non-essential staff, overall staffing needs, and contingency staffing plan. □ Conduct an Infection and Prevention Control Self-Assessment. • Long term care facility – Infection Control Self-Assessment Worksheet: https://gsep.cms.gov/data/252/A. NursingHome InfectionControl Worksheet11-819508.pdf ☐ Re-educate employees on roles and responsibilities per Emergency Preparedness Plan, outbreak management and pandemic plan. Determine essential and non-essential supplies, equipment, resources, clinical visits and operations in preparation for potential pandemic response Review and re-educate on Shelter in Place Plan per Emergency Preparedness Plan Review Business Interruption Plan as outlined in the Emergency Preparedness Plan **RESPONSE PHASE** □ Continue community surveillance: The Infection Preventionist will monitor active cases in community including but not limited to hospitals, other healthcare facilities, schools, and Public Health surveillance. ☐ Implement and continue facility surveillance system and process, identification, tracking and monitoring of resident condition change and employees for sign and symptoms. ☐ Initiate communication plan and reporting processes per Emergency Preparedness Plan. prepare messaging and responses in collaboration with State/Local Health Department Review diagnostic evaluation services, availability and response per Plan. ☐ Follow the response and facility management of ill residents per outbreak management plan. Implement dissemination of information processes per Plan with: Health care

III.

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	Providers, media, residents/representatives, employees/families, vendors, key
	stakeholders, Federal, State, and Local officials.
	Initiate supplies and equipment management plan: review contingency supplies,
	disinfectants, par levels of current inventory and equipment.
	Implement Facility Inventory Management Plan. Communicate and educate employees
	on use of supplies and equipment
	Employee Management and Communication plan: Sick Leave Policies and Procedures
	following the Centers for Disease Control and Prevention guidance. Review Staffing
_	Contingency Plan to determine essential and non-Essential Employees.
Ч	Facility Response Measures: Follow Standard and Transmission-Based Precautions;
	Implement Outbreak Management Plan
ш	Plan for Resident medical care (acute, diagnostic, interim and routine), continuation of
	Clinician/Physician visits either In-Person or virtual. Implement and communicate
	hospital coordination for potential influx of emergency room visits, admissions, testing and hospital triage process
	Implement Volunteer Restriction protocols and review as well as other communication
	options including Federal and/or State Guidelines, vendor management, transport
RECOVERY PHASE	
	Implement Re-Entry Plan in alignment with Public Health and Emergency Preparedness
	Plan for: Residents and representatives, employees, clinicians, physical plant, disinfection
	protocols completed, supplies, human resources, vendors, State and local officials,
	Governing Body, and key stakeholders.
	Review and implement continuity of operations plan and outcomes.
	Analyze the facility business and clinical impact
	Implement re-entry communication plan
	Monitoring the effectiveness of plan implementation and outcomes.
	Incorporate into the QAPI process

Resources:

IV.

1. Centers for Disease Control and Prevention. https://www.cdc.gov/flu/pandemic-resources.

2. The Occupational Safety and Health Administration (OSHA) developed a Pandemic Influenza Preparedness and Response Guidance for Healthcare Workers and Healthcare Employers at: https://www.osha.gov/Publications/OSHA pandemic health.pdf

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