**Willow Point Rehabilitation and Nursing Center Pandemic Emergency Plan (PEP)**

1. **Preparedness Tasks for all Infectious Disease Events**
   1. All staff are educated on Infection Control Policies and Procedures upon hire, annually, and as needed. Education includes prevention, infection control, correct use of personal protective equipment (PPE), etc.
   2. The facility has multiple policies and procedures in place regarding infection control, infection prevention, and reporting requirements.
   3. As part of the facilities Quality Assurance and Process Improvement plan, infection rates are tracked and monitored monthly by type of infection and location. This is reported monthly to the QAPI Committee and necessary action is taken if necessary when infection rates exceed facility baseline rates.
   4. The facility has an executed contract with an outside lab for all employee and resident testing to determine presence of infection and prevent transmission to residents by way of early detection.
   5. The Deputy Administrator of Nursing Services, the Associate Director of Clinical Care, and the Infection Control Preventionist each have access to the Health Commerce System (HCS) and can submit reports to the New York State Department of Health (NYSDOH) via the Nosocomial Outbreak Reporting Application (NORA) and the Health Electronic Response Data System (HERDS) Survey.
   6. In the event of an infectious disease event and/or a pandemic, the facility will comply with all NYSDOH regulations regarding visitation, employee/visitor screening, etc. Employee attendance is tracked, and staff are asked to provide reason when they call-in so that symptoms can be tracked throughout the facility.
   7. The facility has a policies and procedures related to regulated medical waste to limit the transmission of any and all infections. Please refer to the *Regulated Medical Waste* policy and procedure for more information.
   8. At all times the facility has a three-day supply of food, water, medications, linen, and sanitizing agents.
2. **Communication Plans**
   1. In the event of an infection outbreak and/or a pandemic event family members and guardians of infected residents will be updated via phone call of their loved one’s condition. A phone call will be made daily with the responsible party to update them on the resident’s condition and provide them with an opportunity to ask questions.
   2. An automated phone call will be made to all resident contacts at a minimum of weekly to provide an update regarding facility situation to include information such as the number of infections, deaths, and any other relevant information.
      1. Authorized family members and guardians contact information will be kept on file within the facilities Electronic Medical Record System.
      2. Automated phone calls will be completed by the Office of Emergency Services
   3. The facility website will be updated to include facility specific information.
   4. Residents will be provided with, at no cost to them, technological devices to permit video conferencing to allow them to maintain contact with friends and family.
   5. Facility will report all necessary information to the NYSDOH as required and outlined in the facility policy *Recording/Reporting Infection Control Incidents and Outbreak Management*
3. **Protection Plans**
   1. A two-month supply of Personal Protective Equipment (PPE) is maintained on-site at all times. This includes surgical masks, N95 masks, face shields, isolation gowns, gloves, and hand sanitizer.
      1. Staff will be educated upon hire and re-educated annually regarding the proper use of PPE, including donning and doffing, and hand hygiene.
   2. Upon discovery of resident infection the Interdisciplinary Team will convene to determine appropriate action to include but not limited to:
      1. Necessity to cohort residents based on infection
      2. Where to cohort residents (i.e. within a room, a hallway, or a unit)
      3. Need to increase social distancing by eliminating group activities, visitation, etc.
      4. Need to eat meals in room.
   3. Isolation/Quarantine areas will be clearly indicated with signage instructing all individuals of necessary precautions and to prevent employees and residents from entering the area unless they are providing care.
   4. Any resident hospitalized or transferred as a result of infection will be readmitted to the facility in accordance regulations 10 NYCRR 415.3(i)(3)(iii)), 415.19, and 415.26(i); 42 CFR 483.15(e) and 42 CFR §483.80.
      1. Residents will be readmitted to their previous room if available or immediately upon the first availability of a bed in a semi-private room.