

COVID-19 Reopening Safety Plan

Name of Business: VillageCare Rehabilitation and Nursing Center

Industry: Nursing Home

Address: 214 Houston West Street New York, New York 10014

Manager of Business: Sandy D. Freeland, SVP Program Operations/Administrator

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I. PEOPLE

A. Physical Distancing. To comply with physical distancing requirements, the facility will do the following:

Ensure 6 ft. distance between personnel, unless safety or core function of the work activity requires a shorter distance. Any time personnel are less than 6 ft. apart from one another, personnel must wear acceptable face coverings.

Tightly confined spaces will be occupied by only one individual at a time, unless all occupants are wearing face coverings. If occupied by more than one person, will keep occupancy under 50% of maximum capacity.

Post social distancing markers using tape or signs that denote 6 ft. of spacing in commonly used and other applicable areas on the site (e.g. clock in/out stations, health screening stations)

Limit in-person gatherings as much as possible and use tele - or video-conferencing whenever possible. Essential in-person gatherings (e.g. meetings) will be held in open, well-ventilated spaces with appropriate social distancing among participants.

Establish designated areas for pick-ups and deliveries, limiting contact to the extent possible.

Common situations may not allow for 6 feet of distance between individuals. Measures implemented to ensure the safety of our employees in such situations includes:

Meetings and in person traffic may not allow for 6ft. of distance between individuals. To contain spread of infection:

Plexiglass dividers have been placed at the front desk.

For office spaces that are shared by multiple employees, schedules will be changed to limit the number of employees in one space.

Social distancing markers denoting 6 ft. will be in placed throughout the facility to assist in safety interactions.

In-person gatherings will be limited as much as possible and use of tele- or video-conferencing whenever possible.

Essential in-person meetings will be held in open, well-ventilated spaces with appropriate social distancing among participants.

Social distancing signage posted conspicuously throughout the facility and floor markers.

Communication of social distancing requirement via public website.

To manage engagement with customers and visitors on these requirements, as applicable:

Customers and Visitors will be asked to schedule appointments to meet with staff and visit patients.

Social distancing markers will be in placed throughout the facility to assist in safety interactions.

Anyone who enters the building will be screened and must wear a mask for the duration of their stay.

No walk-in visits will be allowed.

To manage industry-specific physical social distancing e.g., shift changes, lunch breaks:

Department schedules may be staggered, decreasing the number of employees in one area during shift changes and lunch breaks.

The Garden/Courtyard may be used for employee lunch breaks, once no visitation is scheduled.

Social distancing markers will be in place throughout the facility to assist in safety interaction.

II. PLACES

A. Protective Equipment. To ensure employees comply with personal protective equipment (PPE) requirements, the facility will do the following:

Provide employees with an acceptable PPE at no-cost to the employee and have an adequate supply on hand in case of replacement.

Maintain a 60 day supply of PPE on hand.

The Purchasing Manager will continuously monitor inventory and burn rate, ordering supplies when warranted.

The facility will ensure face coverings are not shared, cleaned or replaced after use when damaged or soiled, properly stored and or discarded. To comply, the facility will do the following:

Implement a mask protocol and a Personal Protective Equipment Policy which instructs all staff to discard damage or soiled masks and facial coverings.

Staff have also been educated on the way in which PPE is donned, doffed and discarded.

Limit the sharing of objects and discourage touching of shared surfaces; or, when in contact with shared objects or frequently touched areas, wear gloves (trade-appropriate or medical); or, sanitize

or wash hands before and after contact.

Common objects shared amongst employees are: thermometers, electronic devices, cleaning carts, food delivery carts, and medication carts.

Staff members have been educated and are required to disinfect all shared devices after use.

Gloves are used in situations where appropriate and hand sanitizer is available on the medication carts, as well as throughout the building.

A. Hygiene and Cleaning. To ensure employees comply with hygiene and cleaning requirements, the facility will do the following:

Adhere to hygiene and sanitation requirements from the [Centers for Disease Control and Prevention \(CDC\)](#) and [Department of Health \(DOH\)](#) and maintain cleaning logs on site that document date, time, and scope of cleaning.

The Housekeeping Manager will be responsible for maintaining the cleaning log. This log will be kept in the Housekeeping Manager's office.

Provide and maintain hand hygiene stations for personnel, including handwashing with soap, water, and paper towels, or an alcohol-based hand sanitizer containing 60% or more alcohol for areas where handwashing is not feasible.

Access to the appropriate hand hygiene and/or sanitizing products are available in the following areas:

- Front Entrance
- Lobby
- Employee Offices
- Hallways
- Medication and Cleaning Carts
- Conference Room
- Break Room
- Elevator Bay on all floors
- Garden/Courtyard

Ongoing education, signage and random competency testing have been implemented to promote good hand hygiene.

We conduct regular cleaning and disinfection at least after every shift, daily, or more frequently as needed. As well as frequent cleaning and disinfection of shared objects (e.g. tools, machinery) and surfaces, to include high transit areas, such as restrooms and common areas.

The following policies have been reviewed/ revised to ensure regular cleaning and disinfection of worksite and any shared objects or materials, using products identified as effective against COVID-19:

Cleaning Procedures: Policy# 06.01:10-Step Cleaning Process

Cleaning Procedures: Isolation Discharge and Daily Cleaning COVID-19- Policy # 6.08a

Infection Control: Policy# IC 1100-04 - Cleaning Disinfection of Patient Equipment

These policies provide standardized environmental cleaning protocols, which serves as a guide to eliminate contamination of surfaces, equipment and other related areas and prevent the spread and transmission of organisms from the environment to the hands of patients/residents, visitors and healthcare workers.

Education and training will be ongoing and will include proper understanding of hand hygiene appropriate use of PPE, waste and linen disposal.

B. Communication. To ensure the business and its employees comply with communication requirements, the facility will do the following:

Post signage throughout the facility to remind personnel to adhere to proper hygiene, social distancing rules, appropriate use of PPE, and cleaning and disinfecting protocols.

Establish a communication plan for employees, visitors, and customers with a consistent means to provide updated information.

Maintain a continuous log of every person, including workers and visitors, who may have close contact with other individuals at the work site or area; excluding deliveries that are performed with appropriate PPE or through contactless means; excluding customers, who may be encouraged to provide contact information to be logged but are not mandated to do so.

The Screener in collaboration with the Concierge/Security staff will maintain a log of each person that enters the building. This log is available electronically via SharePoint.

If a worker tests positive for COVID-19, we will immediately notify state and local health departments and cooperate with contact tracing efforts, including notification of potential contacts, such as workers or visitors who had close contact with the individual, while maintaining confidentiality required by state and federal law and regulations. The following employees will be responsible for notification:

- SVP of Program Operations/Administrator
- VP of Clinical Services
- Medical Director
- Infection Control Preventionist

III. PROCESS

C. Screening. To ensure the facility and employees comply with protective equipment requirements, the facility will do the following:

Implement mandatory health screening assessment (e.g. questionnaire, temperature check) before employees begin work each day and for essential visitors, asking about (1) COVID-19 [symptoms](#) in past 14 days, (2) positive

COVID-19 test in past 14 days, and/or (3) close contact with confirmed or suspected COVID-19


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case in past 14 days. Assessment responses must be reviewed every day and such review must be documented.

Train staff members in the role of Screener who will be stationed at the front entrance to screen all employees daily, upon entry to the building. Currently, the screening assessment includes a sign and symptom questionnaire and temperature check.

As new guidelines become available ongoing training and competency testing will be performed by the VP of Clinical Services and or Infection Control Preventionist/Educator.

The Screener will be provided with PPE daily as per facility protocol and as needed. Distribution of this supply is included in our PPE inventory monitoring. Supplies are provided by the Central Supply Clerk.

- D. Contact tracing and disinfection of contaminated areas.** To ensure the facility and its employees comply with contact tracing and disinfection requirements, we will do the following:

Have a plan for cleaning, disinfection, and contact tracing in the event of a positive case.

Ensure regular cleaning and disinfection of worksite and any shared objects or materials, using products identified as effective against COVID-19 in the event an employee test positive.

The facility is using Bleach, Oxivir and other EPA approved products under EPA List N, for use against COVID-19. Product acquisition is done through a contracted vendor.

In coordination with the Infection Prevention and Control Department, the Environmental Services staff will utilize EPA approved disinfectant and follow manufacturer's guidelines to sanitize and disinfect all surfaces that may have been touched by an employee that tested positive for COVID-19.

In the event any employee test positive for COVID-19 in the workplace, we will trace and inform close contacts that they may have been exposed to COVID in the following ways:

Maintain a continuous log of every person, including staff and visitors, who enter the facility.

Anyone entering the facility will be screened, including thermal screening for Covid-19.

Upon reopening of visitation all visitors will sign in and provide the following information on facility visitor log name, contact information including address, phone number, email address (if available) and date. An entry indicated the visitor passed the screening will also be logged.

The log will be kept electronically and via paper forms.

The VP of Clinical Services/Designee will maintain the log.

All visitors will be provided with a **Visitor Instruction Sheet** upon entry, which is also available on the facility's website. The Instruction Sheet will inform visitors to report if they develop symptoms or are diagnosed with Covid-19 after visiting the facility.



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If a staff member, patient/resident, or anyone from the contracted workforce visited the facility reports testing positive for COVID-19, the facility will immediately notify local health officials and follow all directives.

For a new onset of a positive Covid-19 case for a patient/resident, staff member or anyone from the contracted workforce, the Infection Preventionist/Educator will document all contacts and conduct contact tracing utilizing facility the Contact Tracing Form.

The facility reports all positive Covid-19 cases via the NYS HERDS reporting and NHSN.

The log will be used only to notify staff, visitors, and contracted workforce should an outbreak be identified at the Facility.

The facility will maintain all individuals' rights to the privacy of their health information and the confidentiality of Facility records.

IV. OTHER

The facility is in full compliance with all state and federal requirements, state Executive Orders and guidance, state reporting requirements including COVID-19 focus surveys, HERDS, and staff testing survey, and federally required submission of COVID-19 data to the National Healthcare Safety Network (NHSN).

A copy of the facility Visitation Safety Plan is kept where it is easily accessible and readily available upon DOH request. The facility will immediately communicate any changes to the plan to the DOH.

Visitation is not dependent on vaccination or COVID-19 testing status.

In the event of a confirmed confined outbreak limited to a single area or unit, the facility may allow patients in the unaffected units to have visitors. The facility will notify visitors of the existence of an outbreak and the potential for COVID-19 exposure in the facility (e.g., appropriate signage regarding current outbreaks).

Any restrictions placed on visitation will be based on adequate reason related to clinical necessity or patients' safety.

Compassionate care visitation may occur at any time on a case by case basis.

The facility has a testing plan that, at a minimum, ensures all consenting patients/residents have received a single baseline COVID-19 test. In addition, the facility has the capability to test all patients/residents upon identification of any individual with symptoms consistent with COVID-19.

If a staff member tests positive for the SARS-CoV-2 virus, the facility has the capacity to continue re-testing all facility staff and patients/residents, as applicable. The DOH will be notified via HERDS and the information will be promptly communicated to residents, staff and designated family members.

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The facility has an executed and operationalized arrangement with laboratories to process SARS-CoV-2 virus tests. The test, as recommended by CMS, is able to detect SARS-CoV-2 virus (e.g., polymerase chain reaction (PCR)) with greater than 95 percent sensitivity, with results obtained and rapidly reported to the facility.

The facility adheres to all written screening protocols for all staff during each shift, each patient/resident daily, and all persons entering the facility.

To ensure that we stay up to date on the guidance that is being issued by the State, the facility does the following:

Consult the NY Forward website at forward.ny.gov and applicable Executive Orders at: governor.ny.gov/executiveorders on a periodic basis or whenever notified of the availability of new guidance.

State and Federal Resources for Businesses and Entities

As resources are frequently updated, the facility will stay current on the State and Federal guidance below issued in response to COVID-19.

General Information:

[New York State Department of Health \(DOH\) Novel Coronavirus \(COVID-19\) Website](#) [Centers for Disease Control and Prevention \(CDC\) Coronavirus \(COVID-19\) Website](#) [Occupational Safety and Health Administration \(OSHA\) COVID-19 Website](#)

Workplace Guidance

[CDC Guidance for Businesses and Employers to Plan, Prepare and Respond to Coronavirus Disease 2019](#)
[OSHA Guidance on Preparing Workplaces for COVID-19](#)

Personal Protective Equipment Guidance:

[DOH Interim Guidance on Executive Order 202.16 Requiring Face Coverings for Public and Private Employees](#)
[OSHA Personal Protective Equipment](#)

Cleaning and Disinfecting Guidance:

[New York State Department of Environmental Conservation \(DEC\) Registered Disinfectants of COVID-19](#) [DOH Interim Guidance for Cleaning and Disinfection of Public and Private Facilities for COVID-19](#) [CDC Cleaning and Disinfecting Facilities](#)

Screening and Testing Guidance:

[DOH COVID-19 Testing](#)
[CDC COVID-19 Symptoms](#)