

BAILEY-BOUSHAY HOUSE

POLICY COVID-19 Infection Prevention and Control Plan	NUMBER A121
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POLICY: Bailey-Boushay House is responding to the world-wide COVID-19 pandemic by following directions of the Center for Disease Control (CDC), Virginia Mason Medical Center Infection Control and Prevention department, and Public Health Seattle and King County. Bailey-Boushay House will establish and continually review all aspects of facility operations and patient care to maximize safety of residents, clients, volunteers, staff, and guests. This policy will be updated as needed to direct practices to current standards and recommendations by local, State and Federal regulators.

REFERENCE:

PURPOSE: To prevent/contain the Bailey-Boushay House community from COVID-19.

PROCEDURE:

A. Vaccination

1. Receiving the vaccine is the best protection of COVID-19.
 - a. Staff, Volunteers, Consultants & Contractors: All staff and contractors are required to be fully vaccinated or have approved exemption to be at Bailey-Boushay House. Staff who have applied and were granted an exception to vaccination for either religious or medical reasons will be kept on file and will be tested for COVID-19 at least weekly when working or per COVID guidelines
 - b. Nursing Home Residents, Outpatient Clients and Shelter Guests: All patients will be given the education about the importance of the COVID-19 vaccine and the opportunity to have the vaccine. Agreement to get the COVID-19 vaccine is voluntary for this group.
2. Bailey-Boushay House will track all those that are vaccinated and keep a copy of their vaccine card.
3. Bailey-Boushay House will report vaccine totals weekly, or as required, to the CDC.

Reducing chances of exposure

1. Bailey-Boushay House will implement the following to limit exposure to the COVID-19 Virus:
 - a. **Masking**
 - i. All volunteers, staff, consultants, outpatients, shelter guests and visitors will wear a facility-approved face covering in the building except when eating and drinking. Those activities should not be within proximity to others or should be behind a protective barrier such as plexiglass dividers found in dining rooms.
 - b. **Protective eye gear**
 - i. All staff will wear protective eye gear (goggles, face shields) when in patient areas.
 - c. **Hand Hygiene**
 - i. All staff to perform hand hygiene before and after contact with any resident or client, when performing aseptic tasks, and as needed when soiled.
 - ii. All staff receive hand hygiene review in huddles and other staff gatherings.
 - iii. Staff use of hand hygiene will be audited at least monthly.
 - d. **Volunteers & Consultants**
 - i. Reduce volunteers and consultants when COVID-19 community transmission rates are high and as determined by the Infection Prevention ARNP.
 - ii. Provide COVID-19 testing at a minimum of what is required for nursing homes in King County.
 - e. **Staff**
 - i. Provide COVID-19 testing at a minimum of what is required for nursing homes in King County by CMS, CDC and Public Health.
 - f. **Nursing Home Residents - current**
 - i. Residents are to remain in their rooms unless with a staff member and wearing a mask. When participating in groups, nursing home residents should be distanced as much as possible.
 - a. Applies to vaccinated and non-vaccinated residents. Vaccination status of residents shall remain private and not be shared with other residents.
 - ii. When clinically appropriate, have a plan for a resident to walk in the hallways or patios with a staff member minimizing the number of residents in the hallway or in proximity to each other. The resident must be willing and able to successfully wear a face mask when out of their room.
 - iii. All residents may receive visitors 24/7. Visitors will participate in hand hygiene and be monitored as needed by staff. Visitors must wear face masks at all times in Bailey-Boushay House including when in

resident rooms. Visitors should not eat or drink as this would require them to remove their masks.

- iv. Residents are offered COVID-19 testing a minimum of what is required for nursing homes in King County. If a current resident refuses testing, then they will be unable to participate in activities with other residents to minimize potential transmission.
 - v. For any resident that leaves the facility the RN, ARNP, ADNS, or DNS will provide an assessment of the risk of that community contact. Routine controlled visits to medical appointments and dialysis are considered low risk, while unplanned visits unescorted in the community with others whose vaccination status is unknown are considered high risk.
 - vi. Residents that have a high-risk community visit will be placed in isolation based on current CDC guidelines.
- g. Skilled Nursing Home Resident – New Admissions**
- i. Individuals who wish to be admitted to the nursing home will be tested for COVID-19 prior to admission. An admission will not be declined due to the inability or refusal of testing.
 - ii. Unvaccinated new admissions will be quarantined for 14 days in their room with staff following isolation procedures listed below.
 - iii. All new admissions will be offered a COVID-19 test on admission within 24 hours, on day 7, and day 14 prior to coming off isolation. Testing is not required however new admissions that refuse testing will be placed in isolation for 14 days.
 - iv. Individuals who are seeking admission will be notified of the above practices by the admission coordinator scheduling their admission.
- h. Outpatients**
- i. During periods of high transmission, limit outpatient volumes while ensuring that they have access to medications, food, and essential life supplies.
- i. Emergency Shelter Guests**
- i. Shelter beds shall be physically distanced, or dividers used to prevent transmission.
 - ii. Sheets and blankets will be changed daily.
 - iii. Offer COVID-19 testing a minimum of what is required for shelters in King County.
- j. All individuals entering the facility**
- i. Screen all those who enter the facility for symptoms of COVID-19. The results of their screen shall be placed in a log book. The log book will be kept for at least 30 days.

B. Responding to signs and symptoms of possible infection of COVID-19

1. **Staff** will be educated to self-monitor for COVID-19 symptoms, and to not come to work if they have any symptoms of infection.
 - Staff will be screened on entrance to the facility for symptoms including:

- fever at or above 100 degrees
- chills
- myalgia
- fatigue
- dizziness
- cough
- shortness of breath
- sore throat
- runny nose
- Staff with symptoms will be sent home and instructed to call the Virginia Mason Employee Health COVID-19 hotline at 206-341-0200.
- All staff with symptoms will be tested for COVID-19.
- Staff that test negative will not return to work until symptoms have resolved and in accordance with Virginia Mason Employee Health recommendations.
- Staff that test positive will not return to work until cleared by Virginia Mason Employee Health following CDC guidance for HCW.

2. **Skilled nursing home residents** will be assessed twice per day for the above symptoms. A resident who shows any symptoms will immediately be put on aerosol contact precautions presuming that they have COVID-19 until test results are obtained. These precautions will be kept until either of the following occurs:
 - The resident tests negative for COVID-19 and symptoms have resolved for at least 72 hours.
 - The resident tests positive for COVID-19 and 10 days have passed post positive test.
 - Concern for outbreak or transmission will be immediately assessed by the Infection Prevention ARNP to mitigate risk. Contact-tracing or broad-based testing will be completed if indicated in accordance with CDC guidance.
3. **Outpatient clients and emergency homeless shelter guests** will be assessed daily on entrance to the facility for COVID-19 symptoms. Those who display any one symptom will be immediately masked, placed in isolation, assessed by an RN. They will be either cleared of suspected infection or sent to have COVID-19 testing. When sent for testing they may not return until either of the following occurs:
 - The client/shelter guest tests negative for COVID-19.
 - The client/shelter guest tests positive for COVID-19 and CDC quarantine period is complete.
4. **Contractors, delivery personnel, maintenance workers and others** will be screened on admission. Any individual with any COVID-19 symptom will not be allowed access.

C. Use of Protective Protection Equipment (PPE)

1. Staff will be trained to use the appropriate level of PPE as determined by the CDC, Public Health Seattle/King County, and the Virginia Mason Medical Center Infection Prevention department.
2. Bailey-Boushay House will keep daily inventory of necessary supplies and develop plans for the possible shortage of PPE.
3. PPE availability is defined using the following optimization strategies:
 - a. CONVENTIONAL Capacity – strategies as part of the general infection prevention and control plan.
 - b. CONTINGENCY Capacity – strategies that are used during periods of anticipated PPE shortages.
 - c. CRISIS Capacity – strategies that are used when supplies cannot meet the current or anticipated PPE utilization rate.
4. Bailey-Boushay House will measure current PPE on hand daily and adjust strategies as needed.
5. Resources for acquiring PPE are:
 - a. Virginia Mason Central Supply at (206) 583-6000
 - b. Healthcare Emergency Coordination Center, Northwest Healthcare Response Network, 24/7 Duty Officer Line: 425-988-2897, hecc@nwhrn.org

D. Communication to staff

1. The COVID-19 situation changes frequently. To keep staff informed the following measures will be used:
 - a. Review of current practices and changes at daily huddles.
 - b. Use of email and posting notices to explain changes and update staff.
 - c. Training and review of understanding of procedures.

E. Communication to authorities about COVID-19 status

1. Bailey-Boushay House will notify the following for any **positive COVID-19** tests:
 - a. COVID-19 positive staff, consultants, outpatients, shelter guests, visitors
 - <https://www.kingcounty.gov/depts/health/covid-19/providers.aspx>
 - Or if unable to file online, call the main line 206-477-3977.
 - Virginia Mason Infection Prevention and Control.
 - b. COVID-19 positive staff, consultants, nursing home residents:
 - DSHS Hotline: 1-800-562-6078
 - c. COVID-19 positive staff, consultants, shelter guests
 - Mary Baechler at mbaechler@kingcounty.gov or (206) 477-3214.
 - Mary Flowers at mary.flowers@seattle.gov.
2. Bailey-Boushay House will do routine reporting on current status to the following:
 - a. Centers for Disease Control (NHSN) – weekly
<https://www.cdc.gov/nhsn/ltc/covid19/index.html>
 - b. DSHS/RCS – every Monday and Thursday -
<https://fortress.wa.gov/dshs/adsaapps/lookup/FacilityStatus/UpdateStatus.aspx>

- c. Long Term Care Ombudsman – monthly reporting regarding contact information of next of kin and guardians of nursing home residents - fax # (253) 815-8173/Attn: King County Intake.
- d. Other as required by regulation.

F. Infection Control Review

1. The leadership team will review those connected to the facility who tested positive for COVID-19 and make necessary recommendations to lessen the spread of disease.
2. Daily review of presenting symptoms.
3. Auditing infection prevention activities of staff ensuring timing and technique for hand hygiene and PPE use.

G. Emergency Staffing

1. Bailey-Boushay House leadership will routinely review staffing trends and patient needs to ensure that there are enough trained staff. The following will be used to assist when there is deemed a shortage of staff:
 - a. Staff who are cross trained from other departments, or staff who have agreed to be cross trained.
 - b. Virginia Mason team members who have been released from departments with reduced workloads.
 - c. Offering overtime to current staff.
2. There is a manager on call 24/7 for any staffing emergency.

H. Cleaning and Sanitizing

1. All Bailey-Boushay House spaces, except for resident rooms, will be sanitized with germicidal or bleach wipes daily.
2. Bailey-Boushay House will sanitize any equipment that goes between patient rooms.
3. Bailey-Boushay House will work to limit the amount of equipment that is used between residents and clients who are positive for COVID-19 and negative for COVID-19. All equipment that must be shared will be sanitized between use.

I. Relaxing of restrictions

1. The LNHA is responsible for monitoring changes to requirements for relaxing of restrictions. The LNHA will review community transmission rates including: infection rates, positivity rates, and number of people diagnosed with COVID-19 per 100,000 residents of the county.
2. Relaxing of restrictions is controlled by directions from CMS, CDC, WA state DSHS, WA state governor's office, and Public Health – Seattle and King County.
3. This policy will be updated as regulations and guidance changes.

POLICY RESPONSIBILITY:

Executive Director/LNHA

DATE:

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April 2020
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ADMINISTRATIVE APPROVAL:

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