Congregate Residential COVID-19 Prevention and Response Plan Template *(updated 1/19/21)*

Purpose: A tool to help facilities document their plans for the prevention of COVID-19, and to help prepare them for the possibility of an outbreak. A written COVID-19 plan is required per the Health Officer Order No. C19-09b.

Instructions: Use this template to draft protocols for your staff and facility. You may fill in the text fields with your facility's protocols OR use this as a reference and submit separate document(s). The product of this document should be actionable by your facility's leadership and staff. Please attach any appropriate supportive materials when you submit this plan to **SeniorSites@sfdph.org**. Supportive materials may include blank visitor/staff/resident screening logs, facility floor plans with Isolation and Quarantine units marks, etc. Note: in this template, "staff" refers to employees, private caregivers, and contracted staff (including janitorial and food service staff).

Facility Name:

Address:

Primary Administrator Name, Phone Number, and Email:

Secondary Administrator Name, Phone Number, and Email:

Date:

Type of Facility (RCFE, RCFCI, ARF, Other):

Section 1: Prevention

1. How are you ensuring that universal masking is in place for your staff, visitors, and (where possible) residents? What type of masks are allowed for each group? Who provides them? Where are they made available? How do you guarantee their use?

2. How do you ensure physical distancing (at least 6 feet apart) is maintained at all times, between and amongst staff, visitors and residents? What techniques do you use (such as signage, physical markings, removing furniture, changes to policies or scheduling practices, etc.)?

3. What procedures are in place to ensure dining is safe? Comment on physical distancing, the use of social pods/bubbles, maximum capacity in the room/at each table, techniques for ordering/delivering/clearing food, cleaning & disinfecting protocols, furniture arrangement, etc.

4. If you have any group activities, what procedures are in place to ensure that they are conducted safely? Comment on physical distancing, the use of social pods/bubbles, masking requirements, size of groups, outdoor vs indoor, ventilation if indoors, activity materials, use of equipment, etc.

5. Describe your cleaning & disinfecting procedures, including baseline cleaning, frequently touched surfaces (such as door knobs, light switches, faucet handles, railings), and as needed cleaning. How frequently are areas cleaned? How do you ensure that frequency of cleaning is adequate? Which products do you use?

6. How do you ensure that hand hygiene is performed regularly? Comment on the location and availability of hand sanitizer and sinks, methods used to promote hand hygiene, and which staff have been identified to oversee, promote, and monitor hand hygiene.

7. What are your rules regarding visitation?
Consider "necessary" visits (i.e., those visits that are necessary for legal or medical reasons) and "allowed" visits (i.e., most family or friend visits). How will you determine which category a visit falls under? Who will determine that?
Consider the different types of visitation, including indoor, outdoor in-person, facility window, and vehicle visits. Will you follow the SFDPH guidance or implement more restrictive policies due to facility space or staffing?

Section 2: Visitor and Staff Screening

8. What is your process to ensure proper screening of visitors and staff? Please include all questions asked and what information is recorded. You may attach additional documents as needed.

9. What staff members will be responsible for ensuring that screening of staff AND visitors is properly conducted upon entry? Please include their first and last names.

Section 3: Resident Screening

10. What staff members will be responsible for ensuring that resident screening is properly conducted? Please include their first and last names.

11. How are residents being screened and monitored for baseline changes? How often are they screened? How do you record the information?

Section 4: Responding to a symptom or case of COVID-19

12. How will your facility respond to a resident or staff person with a COVID-19 symptom?

13. How will you contact the resident's medical provider if they become symptomatic for COVID-19 or test positive? Include where this information is kept, who is responsible for making the contact and in what time frame.

14. Influenza is a contagious respiratory illness caused by influenza viruses. Flu and COVID-19 have similar symptoms, however influenza is not COVID-19. How is your facility ensuring influenza vaccinations are provided to staff and residents?

15. Given that influenza and COVID-19 have similar symptoms, where is information on these two different illnesses available to staff?

Section 5: Isolation and Quarantine Strategies

16a. In the event of an outbreak, what activities will be stopped or changed? Address visits, eating, common room use, etc.

17. During an outbreak, you will have to separate residents into 3 groups:

- **COVID-19 positive residents**
- **Symptomatic without confirmed COVID-19 and Close Contacts to COVID-19**
- **COVID-19 negative residents**

17a. Describe where in your facility you will physically place residents to ensure physical separation between these 3 groups of residents.

17b. During outbreaks in residential facilities, studies have found that staff introduce COVID-19 into facilities and transmit COVID-19 to residents.
Describe how you will ensure that you prevent this transmission by separating staff for the 3 groups of residents outlined above. Include specific plans for room and staff assignments.

18. If your facility has memory care and/or behavioral units (i.e. locked units), how will you manage suspected or confirmed COVID-19 cases in those units?

19. If you don't have the physical layout or staffing capacity to adequately prevent transmission, what is your isolation and quarantine plan?

```



```

20. COVID-19-positive patients will need more frequent monitoring and screening. How will you achieve this? How frequently? Where will the results be recorded?   Who will review the record and at what frequency?

```



```

21. Which staff member(s) will perform symptom checks of COVID-19 positive and symptomatic patients?

```



```

22. How will you respond to any findings of new or worsening COVID-19 symptoms? Where will residents go if they need more support (e.g. skilled nursing facility or hospital)?

```



```

23. What staff members will be responsible for identifying residents and staff who may have been exposed to COVID-19 (aka contact tracing)? Please include their first and last names.

24. How will these staff members identify who was exposed? How do you know/keep track of who interacts with which residents and staff when?

Section 6: Staffing

25. What are your minimum staffing requirements at baseline (when there are no COVID-19 positive or symptomatic residents)? Only count staff in one role even if they provide other duties.

AM shift	PM shift	Night shift
Unlicensed caregivers:	Unlicensed caregivers:	Unlicensed caregivers:
LVNs:	LVNs:	LVNs:
RNs:	RNs:	RNs:
Environmental:	Environmental:	Environmental:
Food service:	Food service:	Food service:
Other:	Other:	Other:

26. What would your minimum staffing requirements be if you had 1 COVID-19 positive resident and 1 symptomatic but unconfirmed resident? Consider need for separation, cohorting of staff, and symptom monitoring.

AM shift	PM shift	Night shift
Unlicensed caregivers:	Unlicensed caregivers:	Unlicensed caregivers:
LVNs:	LVNs:	LVNs:
RNs:	RNs:	RNs:
Environmental:	Environmental:	Environmental:
Food service:	Food service:	Food service:
Other:	Other:	Other:

27. What would your minimum staffing requirements be if you had 5 COVID-19 positive residents and 5 symptomatic but unconfirmed residents? Consider need for separation, cohorting of staff, and symptom monitoring.

AM shift	PM shift	Night shift
Unlicensed caregivers:	Unlicensed caregivers:	Unlicensed caregivers:
LVNs:	LVNs:	LVNs:
RNs:	RNs:	RNs:
Environmental:	Environmental:	Environmental:
Food service:	Food service:	Food service:
Other:	Other:	Other:

28. What is your plan for maintaining adequate staffing? Comment on:
- **backup/on-call system**
- **transfers of staff from sister facilities (provide facility name and type and number of staff that could be transferred)**
- **incentives for staff to work extra hours**
- **agreements with staffing agencies (provide agency name and type and number of staff that could be available)**

29. It is common for facilities with outbreaks to experience increased staff sick calls due to illness, stress, fear, etc. In the event of sudden staffing shortages, what would you do?

30. In the event of a COVID-19 outbreak, you will need to immediately provide a list of all staff and residents, including name and date of birth. Where is this list maintained? Who will be responsible? Include names of those responsible here.

Section 7: New Admissions and Re-entry

31. If residents have been transferred out of the facility either due to COVID-19 infection or a non-COVID reason, what is the facility plan for return of these residents to the facility? How is testing factored into that plan?

32. Is the facility currently accepting new admissions? Under what circumstances would the facility halt new admissions? For how long?

Section 8: Testing

33. Residential facilities should conduct regular COVID-19 testing of staff even if your facility currently does not have any diagnosed COVID-19 cases. This is because asymptomatic carriers of COVID-19 can transmit to residents and staff. Some facility types have specific requirements (CDSS PIN 20-38-ASC) but all facilities must ensure testing of 25 percent of all staff every 7 days. How often are your staff getting tested? How will you support and ensure staff testing?

34. How are you tracking staff testing and results?

35. If a resident develops symptoms, how will you get them tested quickly?

36. If your facility is conducting its own testing, what lab(s) are you using? What is the turn around time for results?

Section 9: PPE

37. What PPE supplies will you and your staff wear when caring for a COVID-19 positive or symptomatic resident?

38. What are your minimum 2-week PPE supply requirements? You can use the CDC's Burn Rate Calculator to calculate your quantities. What staff member will regularly track PPE inventory and burn rate? Who will they report this to? Include names here.

	PPE Supply		
Item	**Current Inventory**	**Quantity needed for 1 positive resident (2 week supply)**	**Quantity needed for 5 positive residents (2 week supply)**
Surgical Masks			
N95			
Face Shields			
Gowns			
Gloves			

39. How will you access PPE supplies? Who are your vendors/sources? Gather and include contact information here. How long does it take for you to receive supplies from your vendor? Are there any other known barriers?

40. What staff members will be responsible for ensuring that staff are regularly trained on how, when, and where to put on and take off (don and doff) PPE properly? Please include their first and last names.

41. How will staff access N-95 fit testing? What % of your staff have been FIT tested this year?

Section 10: Communications and Training

42. A paid sick leave benefit is helpful for ensuring that staff don't work while sick or experiencing symptoms. What is your paid sick leave policy? How will you ensure that all staff are aware of your paid sick leave policy?

43. How and how frequently do you communicate COVID-19 related information, resources, and employee policies to your staff? How do you share updated DPH guidelines and CCLD notices with your staff?

44. How and how frequently do you communicate COVID-related information and updates to residents and family members?

45. If a resident and/or staff tests positive, who will you report this to (e.g. agencies, families, primary care providers, etc)?

46. What are your methods for assessing staff understanding of Infection Prevention and COVID related policies and procedures?
What is your plan to ensure all new staff receive training around these policies and procedures?
How often will these policies and procedures be reviewed and updated?

47. In the event of an outbreak, which staff member(s) will be responsible for providing regular (daily, weekly) updates to residents, staff and families?