

San Simeon by the Sound

Department of Nursing

Lesson Plan

Inservice Title/Subject: Coronavirus (Covid-19) & Infection Control

Date: March 2020

Length of Presentation: 30 minutes

Presenter: Kathleen Laviano RN or Patricia Ezzard RN

Method of Instruction: Discussion, handouts, transfer of germs demonstration

Objectives of the program: Goal of the in-service is to educate the staff on the Coronavirus signs/symptoms, transmission, screening, prevention, and infection control in order to protect or residents and staff from the spread of the coronavirus throughout the facility.

Resources Used in the Preparation of the Program: Coronavirus Disease Prevention Policy, CDC Handwashing handout, CDC's "What You Need To Know About Coronavirus Disease 2019" handouts.

Contents of the Program: Coronavirus Facility Policy & see attached handout

Method of Evaluation of the Program in meeting its Objectives: Verbalization of understanding by all staff members in every department.

San Simeon by the Sound

In-Service

Topic: Coronavirus Disease 2019 (COVID-19) Prevention /Handwashing

Date: March 2020

What is the coronavirus disease 2019 (COVID-19)?

The Coronavirus (COVID-19) is a serious respiratory virus. There is not enough research on the virus and at times it can lead to death. It is very contagious, it was first discovered in China and has spread to almost 70 locations internationally.

How do I catch the coronavirus?

Person-to-person spread (thought to be the most common)

The virus is thought to spread mainly from person-to-person.

- Between people who are in close contact with one another (within about 6 feet).
- Through respiratory droplets produced when an infected person coughs or sneezes.

These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.

Can someone spread the virus without being sick?

- People are thought to be most contagious when they are most symptomatic (the sickest).
- Some spread might be possible before people show symptoms; there have been reports of this occurring with this new coronavirus, but this is not thought to be the main way the virus spreads.

Spread from contact with infected surfaces or objects

It may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the main way the virus spreads.

What are the symptoms?

- Fever
- Cough
- Shortness of Breath

Is there treatment?

There is currently no vaccine to prevent coronavirus. The **best way to prevent illness is to avoid being exposed to this virus.**

What is the best way to prevent coronavirus?

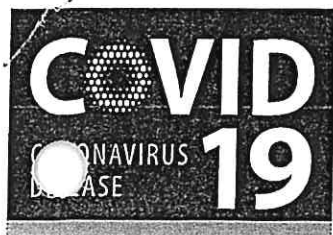
The best way to help stop the spread of respiratory diseases include:

- Wash your hands often with soap and water for at least 20 seconds, especially after going to the bathroom; before eating; and after blowing your nose, coughing, or sneezing.
- Avoid close contact with people who are sick.
- Avoid touching your eyes, nose, and mouth.
- Stay home when you are sick.
- Cover your cough or sneeze with a tissue, and then throw the tissue in the trash.
- Clean and disinfect frequently touched objects and surfaces using a regular household cleaning spray or wipe.
- Any residents showing s/s of respiratory illness should be kept away from other residents (preferably in their own room). Precautions should be initiated as necessary or per MD order.
- Any visitors that are sick with respiratory illness or who have travelled outside of the U.S. recently should not visit.

What should I do if I'm sick?

- Stay home
- Separate yourself from other people/animals in home
- WASH your hands
- Wear a mask if you have symptoms
- Cover your mouth if you cough or sneeze
- See a healthcare provider
- Clean surfaces well
- Monitor symptoms

NOTIFY FACILITY IF YOU ARE UNDER ISOLATION FOR CORONAVIRUS.



What you need to know about coronavirus disease 2019 (COVID-19)

What is coronavirus disease 2019 (COVID-19)?

Coronavirus disease 2019 (COVID-19) is a respiratory illness that can spread from person to person. The virus that causes COVID-19 is a novel coronavirus that was first identified during an investigation into an outbreak in Wuhan, China.

Can people in the U.S. get COVID-19?

Yes. COVID-19 is spreading from person to person in parts of the United States. Risk of infection with COVID-19 is higher for people who are close contacts of someone known to have COVID-19, for example healthcare workers, or household members. Other people at higher risk for infection are those who live in or have recently been in an area with ongoing spread of COVID-19. Learn more about places with ongoing spread at <https://www.cdc.gov/coronavirus/2019-ncov/about/transmission.html#geographic>.

Have there been cases of COVID-19 in the U.S.?

Yes. The first case of COVID-19 in the United States was reported on January 21, 2020. The current count of cases of COVID-19 in the United States is available on CDC's webpage at <https://www.cdc.gov/coronavirus/2019-ncov/cases-in-us.html>.

How does COVID-19 spread?

The virus that causes COVID-19 probably emerged from an animal source, but is now spreading from person to person. The virus is thought to spread mainly between people who are in close contact with one another (within about 6 feet) through respiratory droplets produced when an infected person coughs or sneezes. It also may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the main way the virus spreads. Learn what is known about the spread of newly emerged coronaviruses at <https://www.cdc.gov/coronavirus/2019-ncov/about/transmission.html>.

What are the symptoms of COVID-19?

Patients with COVID-19 have had mild to severe respiratory illness with symptoms of

- fever
- cough
- shortness of breath

What are severe complications from this virus?

Some patients have pneumonia in both lungs, multi-organ failure and in some cases death.

How can I help protect myself?

People can help protect themselves from respiratory illness with everyday preventive actions.

- Avoid close contact with people who are sick.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Wash your hands often with soap and water for at least 20 seconds. Use an alcohol-based hand sanitizer that contains at least 60% alcohol if soap and water are not available.

If you are sick, to keep from spreading respiratory illness to others, you should

- Stay home when you are sick.
- Cover your cough or sneeze with a tissue, then throw the tissue in the trash.
- Clean and disinfect frequently touched objects and surfaces.

What should I do if I recently traveled from an area with ongoing spread of COVID-19?

If you have traveled from an affected area, there may be restrictions on your movements for up to 2 weeks. If you develop symptoms during that period (fever, cough, trouble breathing), seek medical advice. Call the office of your health care provider before you go, and tell them about your travel and your symptoms. They will give you instructions on how to get care without exposing other people to your illness. While sick, avoid contact with people, don't go out and delay any travel to reduce the possibility of spreading illness to others.

Is there a vaccine?

There is currently no vaccine to protect against COVID-19. The best way to prevent infection is to take everyday preventive actions, like avoiding close contact with people who are sick and washing your hands often.

Is there a treatment?

There is no specific antiviral treatment for COVID-19. People with COVID-19 can seek medical care to help relieve symptoms.



For more information: www.cdc.gov/COVID19

San Simeon by the Sound

Department of Nursing

Lesson Plan

Inservice Title/Subject: Handwashing and Infection Control

Date: March 2020

Length of Presentation: 30 minutes

Presenter: Kathleen Laviano RN

Method of Instruction: Discussion, handouts, and staff return demonstration

Objectives of the program: Goal of the in-service is to educate the staff on importance of handwashing and infection control in order to reduce the spread of infection throughout the facility. All staff to be educated and must perform return demonstration for proper handwashing.

Resources Used in the Preparation of the Program: Coronavirus Disease Prevention Policy, CDC Handwashing handout, CDC's "What You Need To Know About Coronavirus Disease 2019" handouts.

Contents of the Program: Coronavirus Facility Policy & see attached handout

Method of Evaluation of the Program in meeting its Objectives: Verbalization of understanding and return demonstration of proper handwashing performed by all staff members in every department.

What are the symptoms?

- Fever
- Cough
- Shortness of Breath

Is there treatment?

There is currently no vaccine to prevent coronavirus. **The best way to prevent illness is to avoid being exposed to this virus.**

What is the best way to prevent coronavirus?

The best way to help stop the spread of respiratory diseases include:

- Wash your hands often with soap and water for at least 20 seconds, especially after going to the bathroom; before eating; and after blowing your nose, coughing, or sneezing.
- Avoid close contact with people who are sick.
- Avoid touching your eyes, nose, and mouth.
- Stay home when you are sick.
- Cover your cough or sneeze with a tissue, and then throw the tissue in the trash.
- Clean and disinfect frequently touched objects and surfaces using a regular household cleaning spray or wipe.
- Any residents showing s/s of respiratory illness should be kept away from other residents (preferably in their own room). Precautions should be initiated as necessary or per MD order.
- Any visitors that are sick with respiratory illness or who have travelled outside of the U.S. recently should not visit.

What should I do if I'm sick?

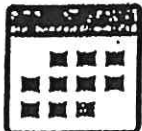
- Stay home
- Separate yourself from other people/animals in home
- WASH your hands
- Wear a mask if you have symptoms
- Cover your mouth if you cough or sneeze
- See a healthcare provider
- Clean surfaces well
- Monitor symptoms

NOTIFY FACILITY IF YOU ARE UNDER ISOLATION FOR CORONAVIRUS.

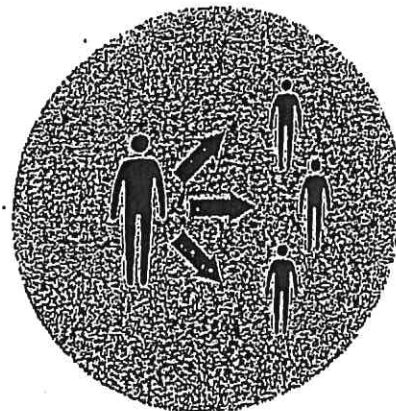
Coronavirus Disease (COVID-19)

Spreads

Through close personal contact with a sick person.



SYMPTOMS MAY SHOW UP
2-14 DAYS LATER

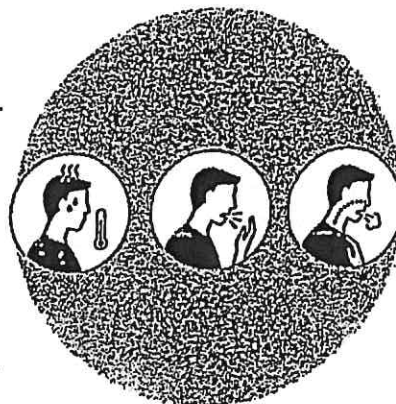


Symptoms

- Fever
- Cough
- Shortness of breath

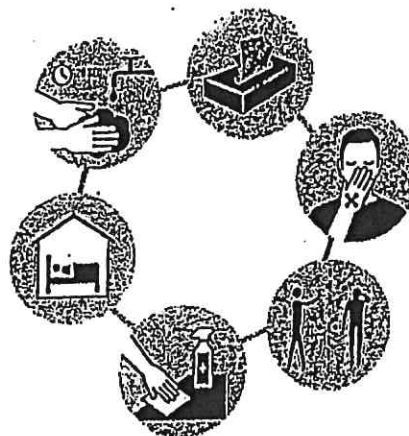
Call your healthcare provider if:

- You have symptoms and have been to a country that has experienced an outbreak within the last 2 weeks of your travel.
- You have symptoms and have been in close contact with a person with a confirmed case of COVID-19.



Prevention

- Wash your hands often.
- Cover your cough/sneeze with a tissue.
- Don't touch your eyes, nose, or mouth.
- Avoid close contact with sick people.
- Clean and disinfect high-touch surfaces often.
- Stay home when you are sick.

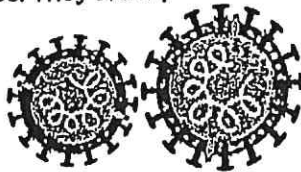


Coronavirus Disease (COVID-19)



Q. What are coronaviruses?

A: Human coronaviruses were first identified in the mid-1960s. They are a respiratory virus named for the crown-like spikes on their surface. We are currently aware of seven different types of human coronaviruses, four of which are associated with mild to moderate upper-respiratory tract illnesses, like the common cold. Other types of the virus include severe acute respiratory syndrome (SARS), the Middle East Respiratory Syndrome, (MERS) and Coronavirus Disease (COVID-19), which is responsible for the latest outbreak. Although COVID-19 is similar to the other types of coronaviruses, it is unique in many ways and we are still learning more each day.



Q. How do you get infected with COVID-19?

A: COVID-19 is spread by close person-to-person contact from droplets from a cough or sneeze, which can get into your mouth, nose, or lungs. Close contact is defined as being within approximately 6 feet of another person. There aren't many cases in the U.S., so the risk of contracting COVID-19 is low.

Q. How do I know if I have COVID-19?

A: If you were recently exposed to someone with a confirmed case of COVID-19 or have been in a place where an outbreak has occurred within the last two weeks

the following symptoms could indicate you have contracted COVID-19:

- fever;
- cough; or
- shortness of breath.

Unless your symptoms are severe, it is recommended

you call your healthcare provider first before entering a healthcare facility. When speaking with a healthcare provider in-person or on the phone, be sure to note your symptoms, travel history, or if you were exposed to a person diagnosed with the virus.

Q. How severe is this illness?

A: The World Health Organization says 80% of people with COVID-19 have a mild form of the illness with cold- or flu-like symptoms. The people most likely to get seriously ill from this virus are people over 60 and/or those with pre-existing health conditions. It is estimated that for every 100 cases of COVID-19, between two and four people would die. This is very different from a coronavirus like SARS, where nearly ten in 100 sick people died from the illness.

Q. I see people wearing masks, should I be doing that?

A: Health officials in the U.S. do not recommend the use of masks among people not showing symptoms of COVID-19. People in places where spread is more likely, may have been instructed to wear masks to prevent infecting others and to possibly prevent getting ill from close contact in crowded places.

Q. What can I do to prevent getting sick from COVID-19?

A: The following tips will help to prevent COVID-19 as well as other respiratory viruses:

- Wash your hands often with soap and water for at least 20 seconds. If soap and water are not available, use an alcohol-based hand sanitizer with at least 60% alcohol.
- Don't touch your eyes, nose, or mouth, especially with unwashed hands.
- Avoid close contact with people who are showing symptoms of illness.
- Clean and disinfect frequently touched objects and surfaces.
- Cover your cough or sneezes with a tissue or sneeze into your elbow. Throw the tissue in the garbage and make sure to clean your hands afterwards.
- Stay home when you are sick.



Stop Germs! Wash Your Hands.

When?

- After using the bathroom
- Before, during, and after preparing food
- Before eating food
- Before and after caring for someone at home who is sick with vomiting or diarrhea
- After changing diapers or cleaning up a child who has used the toilet
- After blowing your nose, coughing, or sneezing
- After touching an animal, animal feed, or animal waste
- After handling pet food or pet treats
- After touching garbage



How?



Wet your hands with clean, running water (warm or cold), turn off the tap, and apply soap.



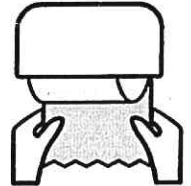
Lather your hands by rubbing them together with the soap. Be sure to lather the backs of your hands, between your fingers, and under your nails.



Scrub your hands for at least 20 seconds. Need a timer? Hum the "Happy Birthday" song from beginning to end twice.



Rinse hands well under clean, running water.



Dry hands using a clean towel or air dry them.

Keeping hands clean is one of the most important things we can do to stop the spread of germs and stay healthy.

LIFE IS BETTER WITH

CLEAN HANDS



www.cdc.gov/handwashing

This material was developed by CDC. The Life is Better with Clean Hands Campaign is made possible by a partnership between the CDC Foundation, GOJO, and Staples. HHS/CDC does not endorse commercial products, services, or companies.



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What you need to know about coronavirus disease 2019 (COVID-19)

What is coronavirus disease 2019 (COVID-19)?

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Can people in the U.S. get COVID-19?

Yes. COVID-19 is spreading from person to person in parts of the United States. Risk of infection with COVID-19 is higher for people who are close contacts of someone known to have COVID-19, for example healthcare workers, or household members. Other people at higher risk for infection are those who live in or have recently been in an area with ongoing spread of COVID-19. Learn more about places with ongoing spread at <https://www.cdc.gov/coronavirus/2019-ncov/about/transmission.html#geographic>.

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How does COVID-19 spread?

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What are the symptoms of COVID-19?

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- cough
- shortness of breath

What are severe complications from this virus?

Some patients have pneumonia in both lungs, multi-organ failure and in some cases death.

How can I help protect myself?

People can help protect themselves from respiratory illness with everyday preventive actions.

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- Avoid touching your eyes, nose, and mouth with unwashed hands.
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If you are sick, to keep from spreading respiratory illness to others, you should

- Stay home when you are sick.
- Cover your cough or sneeze with a tissue, then throw the tissue in the trash.
- Clean and disinfect frequently touched objects and surfaces.

What should I do if I recently traveled from an area with ongoing spread of COVID-19?

If you have traveled from an affected area, there may be restrictions on your movements for up to 2 weeks. If you develop symptoms during that period (fever, cough, trouble breathing), seek medical advice. Call the office of your health care provider before you go, and tell them about your travel and your symptoms. They will give you instructions on how to get care without exposing other people to your illness. While sick, avoid contact with people, don't go out and delay any travel to reduce the possibility of spreading illness to others.

Is there a vaccine?

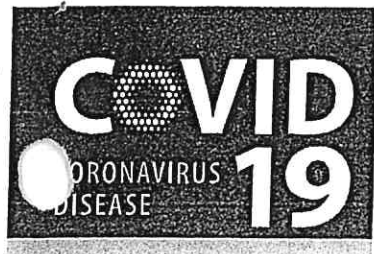
There is currently no vaccine to protect against COVID-19. The best way to prevent infection is to take everyday preventive actions, like avoiding close contact with people who are sick and washing your hands often.

Is there a treatment?

There is no specific antiviral treatment for COVID-19. People with COVID-19 can seek medical care to help relieve symptoms.



For more information: www.cdc.gov/COVID19



COVID-19 Personal Protective Equipment (PPE) for Healthcare Personnel

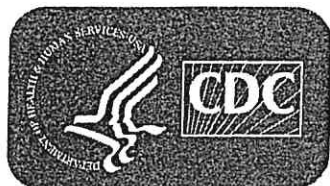
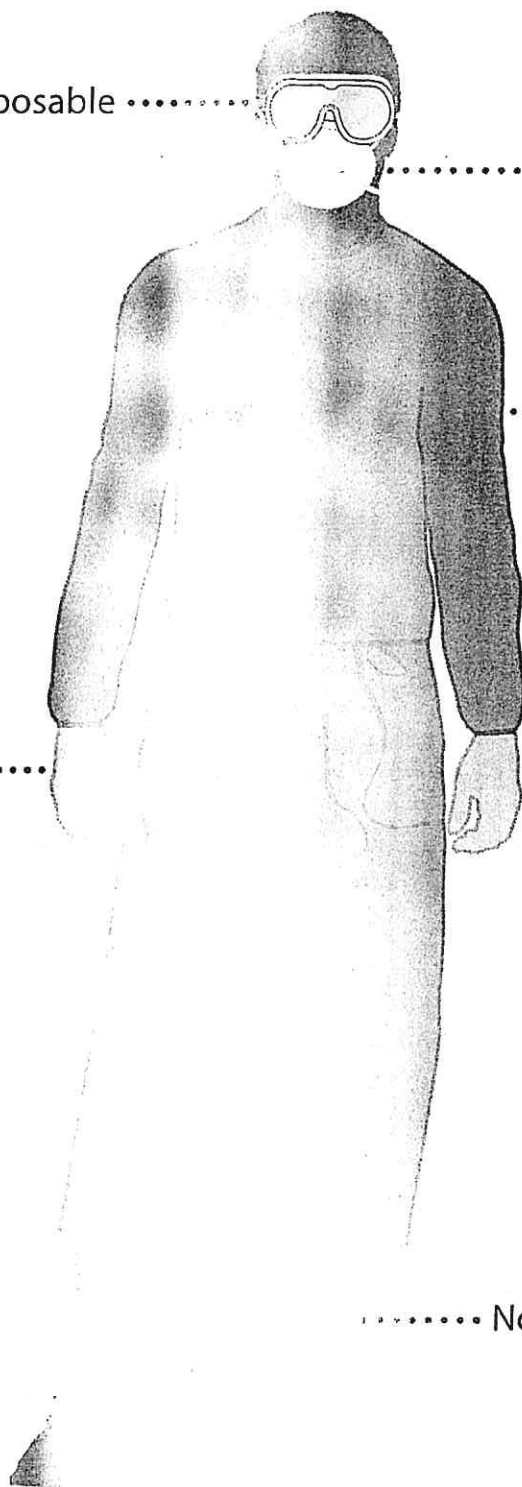
Goggles or disposable
full-face shield

..... NIOSH-approved N95
filtering facepiece
respirator or higher

..... Gown

One pair of clean,
nonsterile gloves.....

..... No shoe or boot covers



For more information: www.cdc.gov/COVID19

San Simeon by the Sound

In-Service

Topic: Coronavirus Disease 2019 (COVID-19) Prevention /Handwashing

Date: March 2020

Our facility is implementing a process for the prevention of Coronavirus Disease based on the CDC and CMS guidelines. This is a rapidly changing situation therefore; we will be reviewing the facility plan and providing updates as needed.

What is the coronavirus disease 2019 (COVID-19)?

The Coronavirus (COVID-19) is a serious respiratory virus. There is not enough research on the virus and at times it can lead to death. It is very contagious, it was first discovered in China and has spread to almost 70 locations internationally.

Visitor Tracking: Visiting hours are restricted at this time.

Employee Tracking

Employees are responsible to report if:

- International Travel within past 14 days
- S/S of respiratory infection, such as fever, cough and sore throat
- Contact with someone with or under investigation for COVID-19

Health care providers who have respiratory infections should not report to work. You should notify the facility of your absence and immediately consult your PCP. Employees must communicate any transmissible infections that they may have to the infection control nurse at ext. 419, in addition to notifying the facility. If the infection control nurse is not available, the employee is to leave a message including the shift and unit worked on and contact information for any follow up communication. Additionally, the facility will need documentation from your physician in order to return to work full duty.

Any staff that develops s/s of a respiratory infection while on the job should:

- Immediately stop work & put face mask on, notify supervisor – upon assessment from supervisor they will send the employee home to get immediate evaluation by a physician for testing and treatment.
- The employee must inform the infection control coordinator of any individuals, equipment and locations the individual came into contact with – this investigation is to be initiated immediately & will be initiated by the Supervisor when the infection control nurse is not present.

Resident Screening

It is the responsibility of the unit nurse to screen all residents on a ongoing basis. Additionally, any resident that goes OOP should have an assessment documented in the EMR. Any resident that meets the following criteria will be immediately isolated in place, face mask placed on the resident if tolerated, physician to be notified immediately and infection control coordinator:

- International Travel within the last 14 days to restricted countries
- S/S of respiratory infection, such as fever, cough and sore throat
- Contact with someone under investigation for COVID-19

The physician will determine if nasal swab is to be completed and will give guidance for the following steps in conjunction with the medical director, nursing administration and infection control nurse.

The units are to maintain a respiratory line list on-going until it has been determined by medical director as no longer necessary.

How do I catch the coronavirus?

Person-to-person spread (thought to be the most common)

The virus is thought to spread mainly from person-to-person.

- Between people who are in close contact with one another (within about 6 feet).
- Through respiratory droplets produced when an infected person coughs or sneezes.

These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.

Can someone spread the virus without being sick?

- People are thought to be most contagious when they are most symptomatic (the sickest).
- Some spread might be possible before people show symptoms; there have been reports of this occurring with this new coronavirus, but this is not thought to be the main way the virus spreads.

Spread from contact with infected surfaces or objects

It may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the main way the virus spreads.

San Simeon by the Sound

Department of Nursing

Lesson Plan

Inservice Title/Subject: Face Mask Compliance

Date: March 2020

Length of Presentation: 15 minutes

Presenter: Kathleen Laviano RN

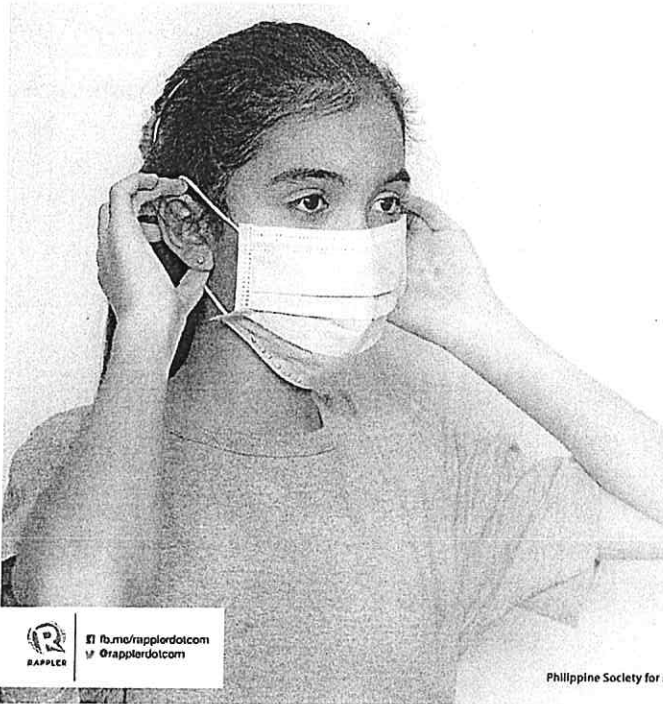
Method of Instruction: Discussion and handout

Objectives of the program: Goal of the in-service is to educate the staff on face mask compliance in order to protect residents and staff from the spread of the coronavirus throughout the facility.

Resources Used in the Preparation of the Program: "How to wear a face mask" handout

Contents of the Program: ALL employees must sign to acknowledge face mask compliance

Method of Evaluation of the Program in meeting its Objectives: Verbalization of understanding by all staff members in every department that approved (surgical, N95, or cloth and surgical together) face mask must be worn at all times while in the building.



A joint advisory from



HOW TO WEAR A FACE MASK

COLORED is OUT and WHITE is IN

Face masks or surgical masks are designed to protect the user from droplets and splashes. The colored, non-absorbent layer will prevent infected fluid from reaching the user's nose and mouth. The white, absorbent inner layer will absorb the moisture from the mouth of the user. **THUS, MASKS ARE ALWAYS WORN COLORED SIDE OUT.**

TIPS ON WEARING MASKS PROPERLY

1. The colored side of the mask faces outwards and the white side of the mask faces the skin.
2. Gently press the thin metal wire against the bridge of the nose.
3. The mask should cover the nose, the mouth, and the underside of the chin.
4. Dispose the mask after use, touch the straps and not the surface of the mask.
5. Perform hand hygiene after removing the mask.

https://www.rhp.gov.ph/files/pdf/face_mask_properly.pdf

Philippine Society for Microbiology and Infectious Diseases (PSMID) and Philippine Hospital Infection Control Society (PHICS)

Attn: ALL STAFF

Any staff member not wearing a mask properly will receive disciplinary action.

Staff members who do not comply with this policy will be sent home immediately.

Thank you for your cooperation in protecting our staff and residents.

San Simeon by the Sound

Department of Nursing

Lesson Plan

Inservice Title/Subject: Proper PPE and Donning/Doffing PPE

Date: May 2020

Length of Presentation: 30 minutes

Presenter: Kathleen Laviano RN

Method of Instruction: Discussion, handouts, CDC Donning and Doffing PPE video

Objectives of the program: Goal of the in-service is to educate the staff on proper PPE (gowns, gloves, masks, and face shields), as well as donning and doffing of PPE in order to protect our residents and staff from the spread of the coronavirus throughout the facility.

Resources Used in the Preparation of the Program: CDC Donning and Doffing PPE video via youtube, CDC "Sequence for putting on person protective equipment (PPE)" and CDC "How to safely remove person protective equipment example 1"

Contents of the Program: See attached handout and video

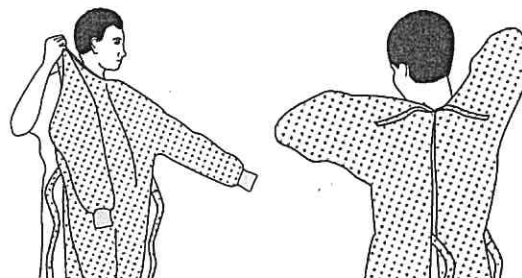
Method of Evaluation of the Program in meeting its Objectives: All staff are required to verbalize understanding of use of PPE as well as demonstrate proper donning and doffing of PPE

SEQUENCE FOR PUTTING ON PERSONAL PROTECTIVE EQUIPMENT (PPE)

The type of PPE used will vary based on the level of precautions required, such as standard and contact, droplet or airborne infection isolation precautions. The procedure for putting on and removing PPE should be tailored to the specific type of PPE.

1. GOWN

- Fully cover torso from neck to knees, arms to end of wrists, and wrap around the back
- Fasten in back of neck and waist



2. MASK OR RESPIRATOR

- Secure ties or elastic bands at middle of head and neck
- Fit flexible band to nose bridge
- Fit snug to face and below chin
- Fit-check respirator



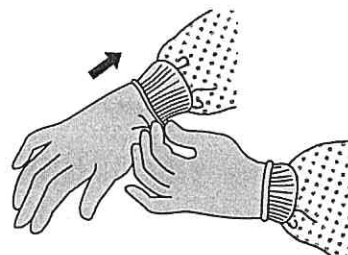
3. GOGGLES OR FACE SHIELD

- Place over face and eyes and adjust to fit



4. GLOVES

- Extend to cover wrist of isolation gown



USE SAFE WORK PRACTICES TO PROTECT YOURSELF AND LIMIT THE SPREAD OF CONTAMINATION

- Keep hands away from face
- Limit surfaces touched
- Change gloves when torn or heavily contaminated
- Perform hand hygiene



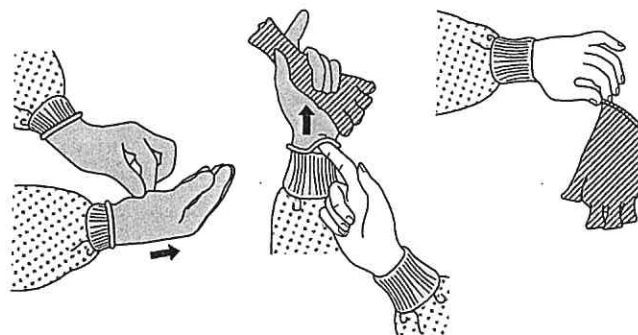
HOW TO SAFELY REMOVE PERSONAL PROTECTIVE EQUIPMENT (PPE)

EXAMPLE 1

There are a variety of ways to safely remove PPE without contaminating your clothing, skin, or mucous membranes with potentially infectious materials. Here is one example. **Remove all PPE before exiting the patient room** except a respirator, if worn. Remove the respirator **after** leaving the patient room and closing the door. Remove PPE in the following sequence:

1. GLOVES

- Outside of gloves are contaminated!
- If your hands get contaminated during glove removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Using a gloved hand, grasp the palm area of the other gloved hand and peel off first glove
- Hold removed glove in gloved hand
- Slide fingers of ungloved hand under remaining glove at wrist and peel off second glove over first glove
- Discard gloves in a waste container



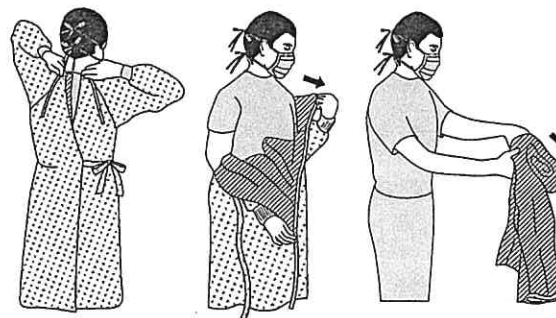
2. GOGGLES OR FACE SHIELD

- Outside of goggles or face shield are contaminated!
- If your hands get contaminated during goggle or face shield removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Remove goggles or face shield from the back by lifting head band or ear pieces
- If the item is reusable, place in designated receptacle for reprocessing. Otherwise, discard in a waste container



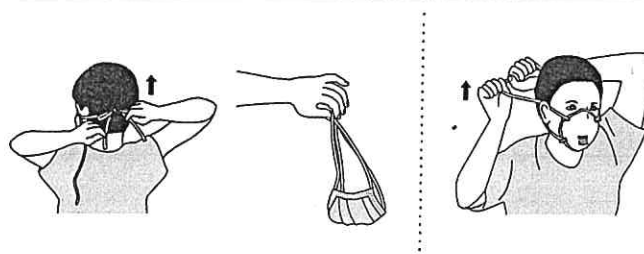
3. GOWN

- Gown front and sleeves are contaminated!
- If your hands get contaminated during gown removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Unfasten gown ties, taking care that sleeves don't contact your body when reaching for ties
- Pull gown away from neck and shoulders, touching inside of gown only
- Turn gown inside out
- Fold or roll into a bundle and discard in a waste container

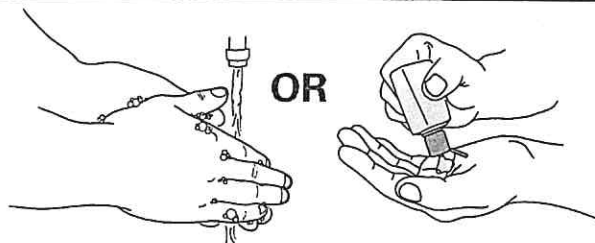


4. MASK OR RESPIRATOR

- Front of mask/respirator is contaminated — DO NOT TOUCH!
- If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp bottom ties or elastics of the mask/respirator, then the ones at the top, and remove without touching the front
- Discard in a waste container



5. WASH HANDS OR USE AN ALCOHOL-BASED HAND SANITIZER IMMEDIATELY AFTER REMOVING ALL PPE



PERFORM HAND HYGIENE BETWEEN STEPS IF HANDS BECOME CONTAMINATED AND IMMEDIATELY AFTER REMOVING ALL PPE



LESSON PLAN

TOPIC: Infection Control Practices

TARGET AUDIENCES: All Staff

METHOD: Direct lecture by Infection Control Coordinator/Inservice Coordinator

TIME: 1 - 1½ Hours

OBJECTIVES:

1. Staff will have knowledge of the facility Infection Prevention Program
2. Staff will understand the basics on Infection Control Practices
3. Staff will know the proper principles and techniques of hand-hygiene practices
4. Staff will have knowledge of the facility Exposure Control Plan, TB Control Plan and Respiratory Protection Plan

CONTENT OUTLINE

I. INFECTION CONTROL PREVENTION PROGRAM

- a. Provides a safe environment within the facility for the protection of residents, employees, physicians and visitors
- b. Implements systematic, effective policies and procedures for detecting, reporting and preventing healthcare associated infections
- c. Tracks resident and employee infections and analyzes data to minimize or prevent the spread of infection
- d. Maintains accurate records of healthcare associated infections, infection control measures and surveillance

II. BASIC PRINCIPLES OF INFECTION

- a. **Chain of Infection**
 1. Presence of a Pathogen
 - ♦ bacteria ♦ virus
 - ♦ fungi ♦ parasite
 2. Reservoir
 - ♦ animate ♦ inanimate
 3. Portals of Exit
(*mechanism by which the pathogen leaves the body*)
 - ♦ drainage of blood or other body substance
 - ♦ coughing, sneezing, respiratory or oral secretions
 - ♦ draining lesions
 - ♦ diarrhea
 4. Modes of Pathogenic Transmission
 - ♦ direct contact ♦ indirect contact
 - ♦ droplet spread ♦ common vehicle
 - ♦ airborne ♦ vectorborne (insects)
 5. Portals of Pathogen Entry

a) Entry sites:

- ◆ mucous membranes
- ◆ GI tract
- ◆ genito-urinary tract
- ◆ non-intact skin
- ◆ respiratory tract

b) Introduction sites:

- ◆ percutaneous injury
- ◆ surgical incision
- ◆ vascular access
- ◆ invasive tests/devices

6. Susceptible Host

- ◆ Frail Elderly
- ◆ Sick or Immunocompromised
- ◆ Diabetes
- ◆ Surgery

b. **How to Break the Chain of Infection**

- i. Rapid Accurate Identification of Organisms
- ii. Employee Health
- iii. Environmental Cleaning and Sanitization
- iv. Proper Handwashing and hand hygiene
- v. Control of Excretions and Secretions
- vi. Proper Food handling
- vii. Proper Isolation Precautions
- viii. Aseptic Wound Dressing Technique and Catheter Care
- ix. Treatment of Underlying Diseases

III. PREVENTING THE SPREAD OF INFECTION

a. **HANDWASHING**

42 CFR 483.65 (b) – Preventing the Spread of Infection:

The facility must require staff to wash their hands after each direct resident contact for which handwashing is indicated by accepted professional practice

Handwashing is the single most important measure in preventing the Spread of Infection

1. WHEN TO WASH HANDS
2. HANDWASHING TECHNIQUE
3. ALCOHOL-BASED HAND RUBS
4. ALCOHOL-BASED TECHNIQUE

b. **USE OF GLOVES**

GLOVES NEVER REPLACE HANDWASHING!

- Use disposable gloves when contact with blood or body fluids is likely
- Remove disposable gloves after caring for resident and when leaving a resident room or care area
- Dispose of soiled gloves in proper receptacles
- Wash hands after removing gloves
- Never wear gloves in hallway that have been worn caring for a resident or cleaning a resident care area

c. **LINEN HANDLING**

- Linen must be covered at all times to prevent contamination, including during transport and on linen racks in hallway
- Do not carry clean linen against body
- Keep clean and dirty linen separate
- Never store items such as boxes of gloves, personal care items or books on carts with clean linen
- Bag all soiled linen in plastic bags before transport

d. **ENVIRONMENTAL CONTROL MEASURES**

- Organisms live on hard surfaces
- Cleansing surfaces removes most bacteria
- Use of facility approved cleaning agents
- Removal of gloves and washing hands after cleaning resident room or resident area
- Waste Management
- Eye Wash Stations
 - Locations in facility
 - Proper use

e. **ENGINEERING CONTROLS**

- Safe Devices
- Proper sharp use and disposal
- Appropriate Employee Training
- Appropriate QA Monitoring, including staff competency

IV. PERSONAL PROTECTIVE EQUIPMENT (PPE)

Selection and use of barriers and/or personal protective equipment for preventing patient and healthcare worker contact with potentially infectious material

Definitions:

Personal Protective Equipment (PPE) - specialized clothing or equipment worn by a healthcare worker for IV. protection

Barrier - A material object that separates a person from a hazard

A. **Types of PPE and Barriers:**

1. Gloves
 - sterile/non-sterile
2. Cover Garments (non-permeable)
 - gowns
 - aprons
 - lab coats
3. Masks (types)
 - Fluid shield
 - surgical

- N95 Particulate Respirators
- 4. Face shields
- 5. Eye protection
 - goggles
 - safety glasses

B. **Choosing PPE** (based on task determination)

- Blood or body fluid splash
- Contact with bleeding/drainage
- Contact with large volume bleeding/drainage (likely to soak through contact area)
- Respiratory droplets vs. Airborne pathogens
- Inspect PPE for damage before putting it on
- Turn in and replace any PPE that is damaged

C. **Use and Care of PPE**

- Remove and care for PPE properly
- Remove PPE immediately when it becomes contaminated
- Remove PPE when task is completed
- Remove PPE before entering a clean area
- Remove PPE from the top down
- Place used PPE in designated containers

V. **TRANSMISSION BASED PRECAUTIONS**

1. **Type of Precautions**

b. **Standard Precautions**

- i. Apply to all Residents regardless of suspected or confirmed infection status
- ii. Include:
 1. Proper Handwashing and hand hygiene
 2. Use of gloves, gowns, mask or eye shield when contact with blood or body fluids is likely
 3. Safe injection practices
 4. Proper cleaning of resident equipment and the environment

c. **Contact Precautions**

- i. Infection is spread by direct or indirect contact with the infectious agent
- ii. Presence of wound drainage, infected fecal material or other discharges from the body
- iii. Possible environmental contamination
- iv. PPE- gloves, gown when soiling is likely

d. **Droplet Precautions**

- i. Infection is spread through close respiratory or mucus membrane contact with infected respiratory secretions
- ii. Infectious agent does not remain airborne for a long period of time

iii. PPE – gloves, gown and mask or N95 respirator

e. Airborne Precautions

- i. Infection is spread through close respiratory or mucus membrane contact with infectious agents that remain suspended in the air over a long distance for an extended period of time
- ii. PPE – gloves, gown and N95 respirator

2. Identification of Residents on Transmission Based Precautions

- a. Stop Sign – posted at entrance to resident rooms. Alerts staff and residents to see nurse before entering room or providing care
- b. Precautions Card located in CNA Accountability Record
- c. Notification form to all departments when resident is placed on or removed from transmission based precautions

3. Isolation Rooms

- a. Location on each unit

VI. Immunization Program

a. Influenza Program

- i. Resident/Family/Designated Representative Education upon admission and annually at start of flu season
- ii. Employee Education upon initial hire and annually prior to start of flu season
- iii. Overview of resident and employee vaccination procedures
- iv. Documentation of resident/employee education, consent or refusal of vaccine

b. H1N1 Vaccine

- i. Resident/Family/Designated Representative Education upon admission and at start of H1N1 vaccination program
- ii. Employee Education upon initial hire and prior to start of flu H1N1 vaccination program
- iii. Overview of resident and employee vaccination procedures
- iv. Documentation of resident/employee education, consent or refusal of vaccine

c. Pneumococcal Vaccine

- i. Resident/Family/Designated Representative Education upon admission and annually if vaccine is refused
- ii. Employee Education upon initial hire and annually if vaccine is refused
- iii. Overview of resident and employee vaccination procedures
- iv. Documentation of resident/employee education, consent or refusal of vaccine

VII. Blood Borne Pathogens/Exposure Control Plan

- a. **Blood Borne Pathogens** – HIV and Hepatitis B
- b. **Transmitted** through sexual contact, sharing needles, blood and body fluid exposure, blood transfusion and oral sex, especially if person has open sores in mouth of gum disease
- c. **HIV – Human Immunodeficiency Virus**
 - i. Causes AIDS
 - ii. Attacks body immune system, reducing its ability to fight infection
- d. **HBV - Hepatitis B**
 - i. Affects the persons liver
 - ii. More common than HIV
 - iii. Symptoms include: fever, jaundice, abdominal pain, nausea and vomiting
 - iv. Hepatitis B Vaccination
 - 1. Available to all employees identified at risk, at no cost
 - 2. Series of three injections
 - 3. Consent or Declination
 - a. If Hepatitis B is initially declined, may request vaccine at any time during employment
- e. **Exposure Incident**
 - i. Cleanse exposure site immediately
 - 1. Needle sticks and cuts should be washed with soap and water
 - 2. Splashes to nose, mouth or skin should be flushed with water
 - 3. Eyes should be irrigated with clean water or saline. (eye wash station)
 - ii. Notify Nursing Supervisor
 - iii. Nursing Supervisor to complete Exposure Report
 - iv. Employee referred to hospital ER for emergency Treatment
 - v. Employee will be referred to private physician for post-exposure follow-up
- f. Use Standard Precautions at all times

VIII. Tuberculosis Control Plan

Tuberculosis (TB) is a disease caused by germs that are spread from person to person through the air.

- a. Symptoms of TB
 - i. Feelings of sickness or weakness
 - ii. Weight loss
 - iii. Fever
 - iv. Night sweats
 - v. Coughing or coughing up blood
 - vi. Bloody saliva
- b. Resident Testing
 - i. 2-Step PPD testing upon admission and annual PPD testing done thereafter
 - ii. CXR and/or medical evaluation if PPD positive

- c. Employee Testing
 - i. 2-Step PPD testing prior to start of employment and annual PPD testing done thereafter
 - ii. CXR and/or medical evaluation if PPD positive
- d. Care of Resident with Suspected TB
 - i. Placement in facility negative-pressure isolation room during evaluation
 - ii. Transfer to hospital
 - iii. Staff to use N95 Respirator when providing direct care to resident
 - iv. Resident to wear surgical mask when leaving his/her room

IX. Respiratory Protection Plan

- a. Applies to all employees who may require respiratory protection for infection control purposes
- b. Program is limited to the use of disposable N95 respirators for care of residents with Influenza-like symptoms or s/s of Tuberculosis
- c. Program Components
 - i. Medical Evaluation for Use of N95 Respirator
 - ii. Selection of N95 Respirator
 - iii. Fit Testing
 - iv. Importance of proper fit
 - v. Proper use, storage and inspection
 - vi. Limitations of respirator
 - vii. Damaged Respirators
 - viii. Proper donning and seal check
 - ix. When to discard and reuse

X. Questions and Answers

CONTACT PRECAUTIONS

1. Masks are indicated if splashing of infected material is likely.
2. Gowns are indicated if soiling is likely.
3. Gloves are indicated for touching infective material.
4. HANDS MUST BE WASHED AFTER TOUCHING THE PATIENT OR POTENTIALLY CONTAMINATED ARTICLES AND BEFORE TAKING CARE OF ANOTHER PATIENT.
5. Articles contaminated with infective material should be discarded or bagged and labeled before being sent for decontamination and reprocessing.

DROPLET PRECAUTIONS

1. Masks or N95 Respirators are indicated for those who come close to patient.
2. Gowns are indicated.
3. Gloves are indicated.
4. HANDS MUST BE WASHED AFTER TOUCHING THE PATIENT OR POTENTIALLY CONTAMINATED ARTICLES AND BEFORE TAKING CARE OF ANOTHER PATIENT.
5. Articles contaminated with infective material should be discarded or bagged and labeled before being sent for decontamination and reprocessing.

AIRBORNE PRECAUTIONS

1. N95 Respirator Masks are indicated at all times.
2. Gowns are indicated.
3. Gloves are indicated.
4. HANDS MUST BE WASHED AFTER TOUCHING THE PATIENT OR POTENTIALLY CONTAMINATED ARTICLES AND BEFORE TAKING CARE OF ANOTHER PATIENT.
5. Articles should be discarded, cleaned or sent for decontamination and reprocessing.



PERSONAL PROTECTIVE EQUIPMENT

What is PPE?

Personal Protective Equipment is the term used to define the equipment or apparel used to protect a healthcare worker and others within the healthcare environment. PPE such as gloves, masks, gowns or aprons, goggles, face shield, head and foot coverings and respirators help reduce the risk of accidental exposure to hazardous chemicals.

When there is the potential for occupational exposure, the facility shall provide, at no cost to the employees, appropriate personal protective equipment. The employee should always ask their supervisor, especially when working in a new area, the location of the Personal Protective Equipment.

Protective devices may include:

- Gloves
- Face masks
- Eye shield or goggles
- Gowns or aprons
- Foot and head coverings
- N95 Respirators

Knowing the following information about the proper use of a PPE can help you prevent an accidental exposure to hazardous chemicals:

- Before starting any job, identify the hazards that require PPE
- Select PPE that protects against the hazard
 - Gloves prevent skin contact with chemicals, burns, etc.
 - Safety glasses, goggles or face mask protect against chemicals that may splash
 - Gowns, aprons or other body coverings protect against chemicals or splashes
 - N95 Respirators help to prevent inhaling hazardous substances
- Prepare PPE before use
 - Check that you are using the right PPE for the job
 - Inspect PPE for damage before putting it on
 - Turn in and replace any PPE that is damaged
- Remove and care for PPE properly
 - Remove PPE immediately when it becomes contaminated
 - Remove PPE when task is completed
 - Remove PPE before entering a clean area
 - Remove PPE from the top down
 - Place used PPE in designated containers

San Simeon by the Sound Center for Nursing & Rehabilitation

Visitor Screening

Have you been in restricted countries (China, Iran, Italy, Japan,
or South Korea) within the past 14 days

Yes_____ No_____

Have you traveled outside of New York State within
the last 14 days

Yes_____ No_____

If Yes, where did you travel: _____

Have you been in contact with someone with confirmed
novel Coronavirus (COVID-19) in the past 14 days

Yes_____ No_____

Do you have any of the following symptoms that started in the last 14 days:

Fever at or higher than 100.4 F or 38C

Yes_____ No_____

Cough

Yes_____ No_____

Shortness of Breath

Yes_____ No_____

Temperature: _____

Name: _____

Address: _____

Day Phone Number: _____

Evening Phone Number: _____

Email Address: _____

Resident you are visiting: _____

Date: _____

Time of Visit: _____

San Simeon by the Sound Center for Nursing & Rehabilitation

Have you been in restricted countries (China, Iran, Italy, Japan
Or South Korea) within the past 14 days?

Yes_____ No_____

Have you been in close contact with someone with confirmed novel Coronavirus
(COVID-19) in the past 14 days?

Yes_____ No_____

Do you have of the following symptoms that started in the past 14 days:

Fever at or higher than 100.4F or 38C

Yes_____ No_____

Cough

Yes_____ No_____

Shortness of Breath

Yes_____ No_____

TEMPERATURE:

NAME: _____

DEPARTMENT _____

DATE: _____

New York State Department of Health

PFI: M778 Limited Service Laboratory Registration CLIA: 33D0160592

San Simeon by the Sound Center for Nursing and Rehabilitation

61700 Rte 48 North Rd
Greenport NY 11944

Director:
Lewis Anreder, M.D.

Owner:

San Simeon by the Snd Ctr for Nursing Rehab

is hereby authorized to perform the following procedures in accordance
with Article 5, Title V, Section 579 of the Public Health Law.

COVID-19 ANTIGEN

Glucose
Occult Blood

COVID-19 MOLECULAR

Amended

Effective Date: August 9, 2020

Expiration Date: November 1, 2020

Single Site

Certification Type: WAIVER

Subject to Revocation

Registration Not Transferable

POST CONSPICUOUSLY

Serial: LIM 36417

Visitation Guidelines

- Visitation will be allowed by appointment only.
- To make an appointment, you must contact **Judy** at **(631) 477-2110** Monday through Friday between the hours of 9:30am to 5:30pm
- Visitation must be limited to outdoor locations only, weather permitting
- Visiting hours will be by appointment only, during the hours of 10am to 12 noon and 2pm to 4pm, Monday through Friday
- Visits are limited to 45 minutes to allow for proper disinfecting in between visits
- The maximum number of people in the “visitation area” at any given time is (10) ten
- The maximum number of visitors per resident is (2) two
- Visitors will be required to complete a health screening form and have their temperature taken at the time of visit
- Visitors and residents must wear masks and practice proper social distancing the entire time during visitation
- Visitors and residents are not permitted to leave the “visitation area” for any reason
- Any visitor who fails to follow these protocols will be prohibited from visitation for the remainder of the COVID-19 state declared public health emergency
- With the limited number of visitation appointment slots, we reserve the right to deny frequent visit requests to allow for fair and equitable distribution of visits for all residents
- We reserve the right to modify our above procedures as necessary