

SULLIVAN COUNTY PUBLIC HEALTH SERVICES

<p>POLICY: Pandemic Disease Plan – COVID-19 SARS-CoV</p> <p>Patients with the COVID-19 virus will be identified and actions taken to limit the transmission, while adhering to local, state, and federal guidelines in cases of a pandemic.</p> <p>PURPOSE: To reduce the risk of further spreading the COVID-19 virus in cases of a pandemic outbreak.</p> <p>RESPONSIBLE PARTY: All staff of SCPHS and CHHA</p>	<p>Original Approval: 9/2020</p> <p>Revised:</p> <p>Reviewed:</p>
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PROCEDURE:

1. Sullivan County Public Health Services (SCPHS) will coordinate with the State Department of Health in the event of a pandemic for reporting protocols, securing testing and medical supplies including vaccine.
2. During a Pandemic “alert” period SCPHS will assure adequate supplies and equipment so that cross contamination from patient to patient will not occur.
 - a. The DPS will ensure that all staff have access to an appropriate amount of PPE for each patient seen on a daily basis.
 - b. Staff will review donning and doffing video and sign when completed.

[Donning and Removing PPE | Donning and Doffing PPE: Gown, Gloves, Mask, Respirator, Goggles](https://www.youtube.com/watch?v=quwzg7Vixsw)
<https://www.youtube.com/watch?v=quwzg7Vixsw>

- c. Supplies and PPE should include:
 - i. Surgical masks
 - ii. Fit tested N95 face mask respirator
 - iii. Gloves
 - iv. Goggles, face shield or protective eyewear.
 - v. Disposable gowns
 - vi. Alcohol based hand sanitizer (at least 60% Alcohol)
 - vii. Other disposable items such as surface barriers and trash bags
3. When making a home visit, SCPHS staff will identify patients at risk for having COVID-19 infections prior or immediately upon arrival to the home.
 - a. See separate Policy: Patient Screening COVID
4. Patients require emergency medical attention if the following occur: (not related to a pre-existing diagnosis)
 - a. Difficulty breathing or shortness of breath
 - b. Persistent pain or pressure in the chest
 - c. New confusion or inability to arouse
 - d. Bluish lips or face
 - e. Other concerning signs and symptoms
5. Managing of symptoms indicating possible COVID-19 infection during a pandemic will be handled by SCPHS:
 - a. Following any local, state, or federal guidelines during the pandemic

- b. Implement source control measures (i.e.: placing a face mask over the patients nose and mouth)
 - c. Update supervisor with information.
 - d. Separate patient with suspected infection from others in the household.
 - e. Educate patient, and family, on hand hygiene (proper hand washing technique and the use of at least 60% alcohol based hand sanitizer) and avoid touching eyes, nose and mouth with unwashed hands and proper disposal of tissues etc.
 - f. Instruct patient on cleaning all “high-touch” surfaces everyday such as counters, tabletops, doorknobs, bathroom fixtures, phones, toilets, etc. with recommended cleaners.
6. Staff should follow the agency’s standard precautions:
- a. Hand hygiene: Wash hands before and after patient contact, after contact with any potentially infectious material, and before and after donning protective equipment, including gloves and masks. This applies to patients and caregivers as well. If soap and water are not available then a 60% alcohol based hand sanitizer may be used.
 - b. Gloves: Wear gloves for any contact with potentially infectious material
 - c. Gowns: Gowns should be worn with patient care activity when contact with body fluids is likely, including respiratory secretions.
 - d. Staff should follow droplet precautions for patients with suspected, or confirmed, COVID-19 for 14 days, or longer. Droplet precautions include:
 - i. All standard precautions, plus:
 - ii. Placing the patient in a separate room away from other family members if possible
 - iii. Instruct on using tissue when coughing or sneezing and placing used tissues immediately in a plastic bag for disposal in regular trash
 - iv. Wear a mask (preferably N95) prior to entering home
 - v. Instruct patient to call ahead prior to visiting a health care facility
 - vi. Instruct patient to wear a mask, if possible, when leaving the home for appointments and to minimize visitors to the home.
7. If staff develop a fever or signs and symptoms of a respiratory infection while working:
- a. Immediately stop work, put on a face covering, and self-isolate at home.
 - b. Inform SCHPS immediate supervisor and/or DPS
 - i. The on-call SPHN/SCHN nurse must be notified at 845-292-5910
 - ii. Follow up will be done by SCPHS COVID-19 Team member
8. It is permissible for staff to perform virtual visits (via phone) to the extent possible- Telecommunications during the public health emergency can be utilized as long as such services do not substitute for in-person visits ordered on the plan of care. Telecommunications may include telephone calls (audio only and TTY), two-way audio-video telecommunication that allow for real-time interaction between the patient and the clinician. It is up to the clinical judgement of the home health agency clinician and the patients’ physician as to whether such technology can meet the patient’s needs. The use of telecommunications technology in furnishing service under the home health benefit is included in the plan of care the telecommunications technology will assist in achieving the goals as outlined in the plan of care.
- a. Staff will review their assigned patients’ needs during a pandemic to determine which visits can safely be performed remotely.
 - b. The physician will be contacted for approval of virtual visits including admission visits.
 - c. Clinicians will obtain approval from the physician to allow flexibilities in the patient care plan when remote virtual visits are performed. This includes omission of vital signs if the patient is asymptomatic or patients obtaining their own vital signs and reporting findings during remoted virtual visits. Telehealth equipment will be implemented to the extent

possible allowing patients/caregivers to obtain vital signs and wound photos and report the findings during a virtual or remote patient visit.

- d. Wound measurements may be omitted with physician approval during a remote virtual visit.
 - e. Virtual home health aide supervision may occur with Department of Health approval.
 - f. Other hand-on care and patient signatures on the laptop may be omitted during a remote virtual visit.
9. Staff will follow SCPHS sick leave policy if they report signs of illness or are told to self-isolate by their physician or the SCPHS Contact Tracer.
 10. The SCPHS CHHA will follow all local, state and federal Pandemic guidance as it becomes available.
 11. Employees will follow the return to work plan that is approved by the SCPHS HR department.
 12. Staff will follow respiratory etiquette protocol, home visit protocol, non-essential travel and social distancing protocol.
 13. Staff are discouraged from using shared devices such as computers and telephones and have received instruction on routine cleaning of their office space. Staff will be provided with masks, hand sanitizer and office cleaning supplies.

REFERENCES

<https://www.cdc.gov/coronavirus/2019-ncov/index.html>

<https://www.cdc.gov/coronavirus/2019-ncov/about/symptoms.html>

<https://cms.gov/files/documents/qso-20-18-hha.pdf>

Review Schedule: This Policy shall be reviewed every 3 years and as needed for regulation adjustment