INFECTION CONTROL

COVID-19 Outbreak Management

POLICY: This Infection Control policy addresses the operational changes that are put into place during an active Coronavirus outbreak to minimize the number of residents and staff that contract COVID-19 within KSL's assisted living communities. The policy addresses visitation, health monitoring, segregation of staff and residents, transmission control, personal protective equipment and dining services. This policy is enacted by the community based on the guidelines set forth by the State of New York and will be discontinued based on phased openings as outlined by the State of New York.

PROCEDURES:

1. Visitation

- a. A "No Visitation" policy is enacted. No family members, non-essential medical services, entertainers, and other vendors are allowed into the building. Through a window visits by family members are allowed with family members remaining outside the building and communicating via phone.
- b. With Department of Health approval, carefully managed Outdoor Visitation may be allowed. The number of visitors at one time, social distancing, duration of visits and disinfecting are defined and closely monitored.
- c. Family members may be allowed humanitarian visits with loved ones at the end of life. This requires the approval of the Executive Director. Full transmission PPE is required to be worn by the visitor(s) and symptoms checks are conducted prior to entering the main building.
- d. Deliveries are made outdoors and brought into the building by Kensington Senior Living (KSL) staff. All non-essential maintenance services are delayed or cancelled. Deliveries are made to the garage levels and are disinfected by Kensington staff prior to being delivered into the building.
- e. Essential health services such dialysis continue to be supported.
- f. Families newsletters are sent out regularly, keeping family members informed on what is going on generally, and specifically with their loved ones. Facetime calls, Zoom and Slack are also used to connect residents and family members.

2. Health Monitoring

a. Team members are monitored for fever and other symptoms associated with COVID-19 at the start of their shift via the AccuShield machine. Any untoward result is sent via text to the DON. Concierge Team are required to ensure that the Staff, Non-team essential workers and visitors (as allowed)complete the questions and receive clearance to enter. If there is any malfunction of this machine the conceirge will ask the required questions take the temperature and record. Team members that are symptomatic are sent home, are required to be tested for COVID-19 and report the findings to the Executive Director.

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- b. All team members are required to be tested weekly for COVID -19. (at this time; initially twice weekly per Executive Order for ACF enacted by Governor Cuomo)
- c. Non-Staff Essential Personnel (PT, OT, Physicians) are required to be symptom and temperature checked and are also required to have the weekly COVID-19 test either through our testing or off site center with results submitted to nursing.
- d. Residents are monitored for fever and O2 levels every shift (three times daily). Residents are being tested for COVID -19 per physician order based on symptoms, and monthly by the community. Symptomatic residents are placed on isolation precautions until test results are received.
- e. New Admissions to the community are tested for COVID-19 within seven days of move in and are placed on isolation precautions for 14 days from move in. These residents are retested fourteen days after move in and can be released from isolation following the negative tests result. This is an additional precaution taken by the community.
- f. Residents who leave the community and are admitted to the hospital for any period must have a negative COVID -19 test prior to return and are placed on isolation precautions for 14 days. As with new admissions, these residents are retested fourteen days after return from the hospital or Rehabilitation. This is an additional precaution taken by the community.
- g. Residents are discouraged from leaving the community for home visits, if the family and the resident insist they must attest in writing (see attached document) that they understand that they require a rapid test on the day of return to the community and will be tested additionally upon return and placed on isolation for 14 days.
- h. Residents that test positive for COVID-19 are required to be isolated for fourteen 14 days. After the isolation period, the last 72 hours of which being symptom free, the resident will be released from isolation. Residents are maintained on the DOH Respiratory Line List for review by the Department as needed and reported on the daily HERDS survey.
- i. Team members that test positive for COVID-19 are to remain out of work for a minimum of ten (10) days. After this period, the last 72 hours of which must be symptom free, the team member may return to work. Team members with confirmed COVID-19 are maintained on the DOH Respiratory Line List for review by the Department as needed.

3. Segregation of Residents and Staff

- a. The typical Kensington assisted living community is made up of three (3) neighborhoods: The Assisted Living neighborhood and two (2) Memory Care neighborhoods. These neighborhoods are access controlled and Residents cannot move freely between them.
- Employees who provide direct care are assigned to neighborhoods and do not enter other neighborhoods. Activities are also assigned to a certain neighborhoods to prevent movement of staff through the community. .
 Movement between neighborhoods by staff members that provide other services, such as cleaning and maintenance is also minimized.
- c. Break rooms are closed to decrease team member congregation. As the Dining rooms are not utilized by residents at this time, Team members may take their meal breaks in the dining areas with social distancing. Movement of employees to their assigned neighborhoods takes place

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through lower garage entrance and staff are limited to two personnel on the elevator. Social distancing markers are placed throughout the community to remind team members of social distancing guidelines. Signage has been posted, limiting the number of persons on each elevator and on entry doors for Restricted Visitation

- d. Residents may need to be quarantined to their rooms for some period of time during an active outbreak. Close monitoring of residents is maintained to track unintended outcomes of isolation such as depression, increased incidence of falls, physical deconditioning, and increased incidence of decubitus.
- e. Life Enrichment Activities gatherings are eliminated. Due to the no visitation policy, vendors and entertainers that support activities are cancelled. Hallway life enhancement activities are conducted while residents are quarantined. In addition, one to one activity and increased application of single person activities including, adult coloring, puzzles and private concerts are utilized.
- f. Team members will adhere to travel and post travel guidelines as set forth by the State of New York.

4. Transmission control

- a. Staff are washing hands with soap and water multiple times during their shifts. Hand sanitizers are available in all public areas, back-of-the-house areas, and offices. Additionally, hand sanitizer dispensers are located outside the individual suites to be utilized prior to entering and at the exit of the suite.
- b. All team members are wearing masks throughout their shifts. Gloves are also worn when providing care, preparing food, serving meals to residents and cleaning the community.
- c. Team members providing care to residents that are awaiting test results, or are positive for COVID-19 or other communicable disease, are using transmission precautions. These include using a mask, face shield or goggles, isolation gown and gloves. Isolation carts are placed outside of the suites of residents under isolation precautions. Signage describing the appropriate PPE are placed on the doors of isolation suites as a reminder to the team members of the PPE requirements for that suite. Two Red Bins are placed inside the suite and are utilized for garbage and laundry.
- d. We are asking all residents to wear a mask during care and when in public areas but recognize that some may not be able to comply.
- e. All team members are required to attend Infection Control In-Services both on line and on site at the start of the pandemic and monthly for the length of the pandemic precautions.
- f. The entire building, common areas and residents' suites, are professionally disinfected. HVAC air filters were upgraded to merv 13 and exhaust fans programmed to run 24 hours per day. Use of disinfectant cleaners are used throughout the building by the environmental services staff. High traffic areas (i.e. elevator button, door knobs, handrails, etc.) are treated (4) times per day with sanitizing sprays.

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Personal Protective Equipment

c. Personal Protective Equipment storage access is controlled. Inventories are daily and reported to the NYS DOH and PPE shipments from our headquarters in Reston are coordinated with communities throughout the company. Adequate supplies of PPE are maintained at all times and staff is to be protected throughout the outbreak. The PPE inventory that is maintained includes gloves, masks (Respirator and Surgical), gowns, eye protection (goggles and face shields). The inventory is sufficient to last several months. In the event of shortage of disposable gowns, cloth gowns have been secured by the community and will be laundered each day to prevent shortage with regard to isolation precautions within the community.

Dining Services

The main dining room in the Assisted Living neighborhood is not utilized by residents. Those residents that require supervision during meal times are assisted by the care staff and nursing within their suites. Meals are delivered to residents' suites using disposable plates, cups and flatware. Bedside tables or TV table have been provided for all residents. (in the event that they do not currently have a table appropriate for meals) Memory Care residents that are not able to safely eat in their rooms are provided supervision in the dining rooms and other common areas. Appropriate social distancing between residents is maintained.

Team member meals are served in designated break areas that are set up for 1 to 2 people per table, maintaining at least 6 feet of social distance

Addendum to Current COVID Policy

- The Kensington completed the NY Safety Plan and submitted it to covidadultcareinfo@health.ny.gov
- We have complied with the staff testing requirements and do not have any staff shortages.
- All consenting in-house residents have undergone diagnostic COVID-19 testing and we submit daily the information via the Herds survey. If there are no resident or staff positive cases in 14 days limited visitation will be initiated per DOH protocol.
- We successfully completed our infection control survey on Saturday 6/27/20 with Sharon Zollner and Tracy Ravins from the Dept of Health and again on 1/7/2021 with Kristine Marrale and Itohan Edorisiagbon.
- We are compliant with all reporting requirements associated with COVID-19 response.
- We are in full compliance with all applicable state regulations, executive orders and state guidance related to COVID-19 Public Health Emergency.
- A copy of The Kensington's formal visitation Plan is posted and attached here.

The Visitation Plan

The Kensington will allow for visitors only if:

- Visitors are 18 years of age or older or accompanied by an adult 18 years of age or older.
- Visit Ambassadors have been designated and trained to allow for help with the transition of residents, monitoring of visitation, and cleaning and disinfecting visitation areas after each visit after screening is completed.
- The Kensington maintains signage regarding facemask utilization and hand hygiene practices and uses applicable floor markings to cue for social distancing.
- Visitors are screened for signs and symptoms of COVID-19
 prior to resident access and are refused access if they
 exhibit any symptoms or do not pass the screening
 questions. Screening consists of both temperature checks
 and asking screening questions to assess potential
 exposure to COVID-19 which includes questions regarding
 international travel or travel to other states designated
 under the Commissioner's travel advisory.
- Documentation of visitor screening will be maintained.
 Documentation will include:
 - -First & Last name of the visitor
 - -street address of the visitor

- -Daytime and evening telephone number
- -Email address if available; and
- -A notation indicating the visitor was cleared and screening (both temperature and questions) will be documented.
- Areas where visitors and residents meet are appropriately disinfected between visitations using EPA approved disinfectant.
- There will be adequate PPE to ensure residents wear facemask during visitation.
- Visitors will be required to wear facemask or covering at all times. The Kensington will provide a facemask in the event they show up without one.
- The Kensington will provide alcohol-based hand sanitizer to visitors and residents, and staff will be trained about proper use and/or handwashing.
- Visitation will not exceed 10% of the resident population and will be limited to outdoor areas weather permitting.
 Under certain limited circumstances, determined by The Kensington Administrator, visitation can be inside in a well ventilated common space with appropriate social distancing and face masks while in the presence of others.
- Residents who are on isolation will not be eligible for visitors.
- Hours of visitation will be between 11am to 3pm and at the community's discretion.