



155 HAZEL STREET • CLIFTON, NJ 07011 • PHONE: (973) 772-3700/01/02 • FAX: (973) 253-5389
daughtersofmiriamcenter.org

- Skilled Nursing Facility
- Rothenberg Building
- Eva & Morris Feld Tower
- Gallen Institute for Subacute Care
- B.I. Cohen Family Building
- Memory Care Pavilion
- Esther & Sam Schwartz Building
- Respite Care Program

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A DAUGHTERS OF MIRIAM CENTER UPDATE REGARDING COVID-19

As of 5/4/21 at 1:30 PM:

145	Census
0	Residents have tested positive for COVID-19
0	Non-Facility acquired COVID-19 positive case(s)
13	Residents are considered Persons Under Investigation (PUI) for COVID-19
0	Center staff have tested positive for COVID-19
0	Center staff are considered Persons Under Investigation (PUI) for COVID-19

2020-21 Facility Review

COVID Fatalities	Apr-May 2021: 0	Jan-Mar 2021: 0	Oct-Dec 2020: 2	July-Sept 2020: 4
Avg. COVID+ Res/Day	Apr-May 2021: 0	Jan-Mar 2021: 1	Oct-Dec 2020: 3	July-Sept 2020: 1

- In conjunction with CVS and Partners Pharmacy, Daughters of Miriam has provided the Covid-19 vaccines to both its residents and its employees.
- The Center continues to remain open for both sub-acute and long term custodial care admissions.
- Residents who acquire COVID-19 are automatically placed in quarantine for 14 days. Newly admitted residents arriving from their home, or those who are transferred in from the hospital, are also in quarantine; however, they are placed separately from COVID+ residents.
- Current residents not considered persons under investigation who leave the facility for any reason, may not necessarily require to be quarantined. Appropriate placement is determined based upon the amount of exposure the resident may have had while out of the facility.
- Visitation is available by appointment only by contacting the activities department at 973-253-5290. All visitors must first complete the consent form which is posted on the website at daughtersofmiriamcenter.org and adhere to the visitation guidelines.
- The 2020-21 Facility Review table above illustrates the impact of COVID-19 at the Center. The average COVID-19 positive resident per day statistic shows the trajectory since the crisis began.

For questions or concerns, please reach out to the Director of Social Services, Myrna Gomez, at 973-253-5233 or via email at mgomez@daughtersofmiriamcenter.org.

Our thoughts are with the families of those lost to this unprecedented pandemic. Our entire staff continues to work tirelessly to care for all of our nursing home residents and sub-acute patients in this difficult situation. Together with everyone's help we will get through this.

Sincerely,
Frank DaSilva
CEO

Patient-Centered Indoor Visitation Guidelines Effective April 8, 2021

As per revised guidelines issued by the New Jersey Department of Health, indoor visitation in nursing homes is permitted when the County positivity rate is less than 10%. When the positivity rate is more than 10% and DMC's resident vaccination rate falls below 70%, only those residents who are fully vaccinated can receive visitors. At all times, outdoor visitation is preferred, weather permitting. Below is guidance on visiting vaccinated and unvaccinated residents.

Visitor Screening

- All visitors will be screened prior to visiting with a resident. Visitors will not be permitted to visit if they have symptoms of COVID-19, including fever, cough, shortness of breath, sore throat, muscle pain, chills, or new loss of taste or smell or a fever (100F or higher).
- A rapid (antigen) test may be administered, if requested.
- Visitors will not be permitted to visit if they have tested positive for COVID-19 in the past 7 days, have been ordered by a health care professional or public health official to quarantine due to exposure, or if have travelled from states (excludes Connecticut, Pennsylvania and New York) and have not quarantined for the required 14 days.
- Any individual who participates in a visitation and develops signs and symptoms of COVID-19 such as fever, cough, shortness of breath, sore throat, muscle pain, chills, or new onset loss of smell or taste within 14 days after visiting must immediately call the Nursing Director at 973-253-5745 of the date they were on site and with whom they were in contact.

Designated Visitation Area – 1 EAST NURSING UNIT PRIVATE VISITATION ROOMS

PLEASE PARK IN THE MAIN/REGULAR PARKING LOT

- Food, drink, celebration parties and pets are prohibited.
- Visitors may not roam throughout the building to reach the 1 East unit; rather, they may use the main elevator banks (capacity is 2/elevator) to access the resident's assigned private visitation room.
- Visitors will not be allowed entry beyond the main lobby without having gone through the visitor screening process.

Limitations on Visitors

- Visits will be limited to 1-2 visitors at a time per resident.
- Children under the age of 2 may not visit. All children must be masked.
- Residents who have been fully vaccinated may participate in close contact (including touch) if they wish to do so regardless of the vaccination status of the visitor so long as the person is wearing a tight-fitting mask.

Face Coverings

- During the visit, all visitors, including children aged 3 and older as well as staff, are required to wear a well-fitted face covering/mask, covering their mouth and nose, and must bring their own face covering.
- Residents will also be encouraged to wear face coverings to the extent they can do so safely.

Social Distancing and Supervision

- Visitors and/or residents who have been not been vaccinated will be permitted to visit, but must maintain social distancing of 6 feet and wear a well-fitted face covering. A DMC staff member trained in resident safety and infection control measures will remain in the visitation area during the visit.

Scheduling Visits in Advance by Appointment

- Informed Consents are required and must be signed prior to scheduling an appointment. Consents are found online at daughtersofmiriamcenter.org. Click on the upper right "Covid 19 Update" and complete the consent and email to kmatteis@daughtersofmiriamcenter.org
- Visitation is Monday, Tuesday, Wednesday, Thursday at 11:00am and 6:30pm.
- Visits must be scheduled in advance by calling the Activities Department at 973-253-5290 to allow coordination with others who may also want to visit. Please understand multiple visits will be accommodated once all residents have had the opportunity to have a family visit. Revised guidelines will be posted once outdoor visitation becomes available.
- Visits will be limited to no more than 30 minutes.
- Advance notification may ensure the resident is not under quarantine and that the individual served can be emotionally prepared for the visit.
- A log of all visitors, including name, date of visit, and staff on shift will be maintained.

Isolated Residents

- Indoor visitation is limited to residents with confirmed COVID-19 infections, whether vaccinated or unvaccinated, until they have met the criteria to discontinue transmission-based precautions.
- Visitations will not be permitted with anyone who is currently under isolation because they are persons under investigation (PUI) for COVID infection.
- DMC will continue to support alternative electronic methods for communication between residents and visitors, such as Zoom or Face Time for residents who remain in isolation.

Other Considerations

- Visitors understand that these visits create possible danger of exposure to COVID-19 and agree to abide by these visitation guidelines. Failure to adhere to these guidelines may require the termination of a visit and may result in a temporary ban on visitation.
- DMC reserves the right to change this policy with limited notice and as needed and reserves the right to prohibit visitation on a case-by-case basis if it is determined visitation cannot be safely accommodated.
- DMC reserves the right to limit the length of any visit, the days on which visits will be permitted, the hours during a day when visits will be permitted, and the number of times during a day or week a resident may be visited.

COVID-19 INFORMED CONSENT FORM

PATIENT CENTERED VISITATION

Below is Daughters of Miriam Center's (DMC's) Informed Consent which must be completed and emailed to kmattis@daughtersofmiriamcenter.org, Activities Department, prior to participating in patient centered visitation. If you are the authorized representative for your relative, please sign in both the representative and visitor areas below. If not, one form must be completed for each visitor. Please refer to the Patient Centered Visitation guidelines for full further guidance.

- One to two visitors at a time will be permitted into the building.
- Visitation will be limited to 30 minutes at 11am and 6:30pm, Monday through Thursday.
- A COVID-19 Informed Consent form must be completed and signed prior to visiting.
- All visitors must sanitize their hands prior to visiting.
- Each visitor should be mindful of proper safety protocols for their own protection and practice social distancing of 6ft.
- Emergency priority contacts (typically the first and second names listed on the patient's profile) will be prioritized for visitation.
- Visitors will be screened at each visit and questioned about their health; anyone with any symptoms of illness must **NOT** enter the facility.
- During the visit, all visitors and staff are required to wear a well-fitted face covering/mask, covering their mouth and nose. Residents will also be encouraged to wear face coverings to the extent they can do so safely.
- Visitors and non-vaccinated residents must follow social distancing guidelines and remain 6 feet apart.
- Visitors and vaccinated residents are permitted close contact including touch.

I, _____ (*resident or visitor name*), understand the novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. Furthermore, resident and visitors understand COVID-19 is extremely contagious, and, as a result, federal and state health agencies recommend social distancing. Given the nature of the COVID-19 virus, resident and visitors understand there is an inherent risk of becoming infected with COVID-19 by virtue of proceeding with this elective visit.

Resident and visitor acknowledge the existence of the COVID-19 virus, the dangers of the virus, and the potential exposure to the virus that could occur as a result of participating in a visit at Daughters of Miriam regardless of their vaccination status. Resident and visitors hereby acknowledge and assume the risk of becoming infected with COVID-19 through this elective visit and choose to participate in same. Resident and visitors hereby acknowledge that an infection with COVID-19 could result in severe illness, up to and including, death.

Resident and visitors represent that resident and visitors, each member of their respective households and immediate families, to the best of their knowledge, have not tested positive or shown signs of COVID-19, have not been in contact with any person in the past 14 days who has tested positive for COVID-19 or is waiting for results of a test for COVID-19, and have not within the last 14 days arrived from or been in contact with someone who has travelled abroad or to States identified by the NJ travel advisory board. Visitors and resident agree to notify the Director of Nursing, Candace Wishbow-Leto at 973-253-5745 immediately by phone if there is any change in this representation at any time up to 14 days after visitation.

RESIDENT AND VISITORS AGREE TO HOLD HARMLESS, RELEASE, AND INDEMNIFY DMC AND ITS EMPLOYEES, AGENTS, AND REPRESENTATIVES FOR ANY EXPOSURE TO, OR LAWSUIT, OR OTHER CLAIM BY ANYONE AS A RESULT OF THE COVID-19 VIRUS CAUSING INJURY, ILLNESS, OR OTHER DAMAGES ARISING FROM THE VISIT.

I AGREE TO FOLLOW ALL RULES OF VISITATION AT DMC. FAILURE TO COMPLY WITH THESE POLICIES WILL RESULT IN MY BEING DENIED PARTICIPATION IN VISITATION, AND ASKED TO IMMEDIATELY LEAVE THE PREMISES.

Resident/Authorized Representative Name	Visitor Name	Administrator/Designee Name
Dated	Dated	Dated

Daughters of Miriam Center Outbreak Response Plan 9/30/2020

Policy:

- To effectively manage and contain an outbreak when identified in the Center
- To promote an infection prevention and control program designed to provide a safe, sanitary, and comfortable environment
- To help prevent the development and transmission of communicable diseases and infections
- Outbreak investigations will be organized by the Infection Control Nurse (Infection Preventionist) or designee when an outbreak is suspected
- The team listed below will meet daily to monitor the outbreak and initiate any necessary changes. Local and State Department of Health will be apprised as required.

SECTION A

Infection Control Prevention Team:

- Infection Preventionist
- Medical Director
- Administration (Administrator and Nursing Director)
- Unit Nurses
- Housekeeping Director
- Dietary Director
- Maintenance Director
- Social Services
- Admissions Director

Outbreak investigation will be organized by the Infection Control Nurse (Infection Preventionist) or designee when an outbreak is suspected.

1. The Center will inform residents and their representatives within 12 hours of a single confirmed infection of COVID-19, influenza or norovirus.
2. The Center will inform residents and their representatives of a potential outbreak when there are one or more residents or staff with new onset of respiratory symptoms and /or gastrointestinal symptoms that occur within 72 hours.
3. Updates on facility status of residents and their representatives will be provided daily, or each subsequent time a confirmed infection of COVID-19 is identified and/or whenever there are three (3) or more residents or staff with new onset of respiratory symptoms occurring within 72 hours.
4. The Center's designee will include information on mitigating actions implemented to prevent or reduce the risk of transmission, including if normal operations in the nursing Center will be altered.
5. Immediate steps will be taken to the best of the Center's ability to isolate symptomatic individuals from those who may be pre-symptomatic or under investigation and residents who are asymptomatic to dedicated areas with dedicated staff.
6. Testing will be expansive and extensive Center-wide for COVID-19 and influenza.
7. Staff testing will also take place to stop the introduction, limit exposure to, and control the spread of these contagious diseases.

SECTION B

Procedure:

According to defined clinical parameters or state regulations:

COVID-19:

One resident/patient and/or staff in three (3) days become sick with these listed symptoms and at least one (1) of these has a positive test for COVID-19:

1. Confirm the existence of an outbreak:
 - a. Defined as one (1) Lab ID SARS-CoV-2 positive, that is an excess over expected (usual) level within the Center (i.e., normal rate is 0% and is now (1) positive Lab ID result.
 - b. Symptoms: Fever, dry cough, shortness of breath, fatigue, body aches, loss of taste and smell, GI symptoms
Elders may exhibit:
 - i. Increased confusion, worsening chronic conditions of the lungs, loss of appetite, and decreased fluid intake
 - ii. Less common: sore throat, headache
2. This Center will implement Center-wide testing of residents and all Center staff.
3. If resident/patient(s) refuses to undergo COVID-19 testing, those individuals will be treated as a Person Under Investigation (PUI).
 - a. Nursing will document resident/patient's refusal and notify responsible representative of refusal to be tested.
 - b. Resident/patient will be moved to the PUI unit for 14 days.
 - c. PUI:
 - i. Resident/patient will be cohorted accordingly
 - ii. Temperature monitoring will continue every shift
 - iii. Onset of elevated temperature or other related symptoms consistent with COVID-19 will require immediate cohorting with symptomatic residents

INFLUENZA:

1. Three (3) or more clinically defined cases or one (1) or more laboratory Identified results for Influenza in a Center within a 10-day period from October through May, should be viewed as an outbreak.

PNEUMONIA:

1. Two (2) or more with nosocomial cases of non-aspiration pneumonia within a 10-day period should be reviewed for outbreak potential.

SECTION C

1. Develop a case definition based on symptoms, characterized by disease cases
 - a. What: the pathogen, site, and/or sign/symptoms
 - b. Who: the population in which cases are occurring
 - c. Where: the unit location of case(s)
 - d. When: length of time case(s) has been occurring
2. Create line listing and search for additional causes and cases
 - a. Review surveillance and lab reports
 - b. Obtain appropriate lab specimens as directed by the physician or state/local health department
3. Use appropriate line listing forms when symptoms are identified for both resident and staff:
 - a. Respiratory Line Listing, Gastroenteritis Line Listing
4. Organize data according to time, place, and person
 - a. Time: duration of the outbreak and pattern of occurrence
 - b. Place: develop location and onset of dates of cases
 - c. Person: evaluate characteristics that influence susceptibility such as age, sex, underlying disease, immunization history
 - d. Exposure by nursing staff, or other infected residents
5. Formulate likely cause
 - a. identify (organism) source and possible mode of transmission
 - a. Identify (organism) source and possible mode of transmission

Notify:

- Administrator
- Director of Nursing
- Attending physician/Medical Director
- Staff and department directors
- Family of the affected resident(s)
- Local/state health department, according to regulations
- Nursing will inform residents and their representatives within 12 hours of the occurrence of a single confirmed infection of influenza, COVID-19, or norovirus. One or more residents or staff with new onset of respiratory symptoms and /or gastrointestinal symptoms that occur within 72 hours. Resident(s) and their responsible representatives will be informed of possible outbreak within the center.
- Social Services and nursing will notify all residents' responsible representatives of outbreak either by phone, email and/or written letter weekly or more frequently as needed.

SECTION D

1. Implement control measures based on sign, symptoms, diagnosis, mode of transmission, and location in the Center. Measures may include:
 - a. Transmission-based precautions
 - b. Restricting visitors
 - c. Screening all employees for elevated temperatures and signs/symptoms
 - d. Restricting affected residents from group activities
 - e. Suspending communal dining
 - f. Suspending admissions to affected unit
 - g. Suspending admissions to Center, if deemed necessary
 - h. Increasing housekeeping sanitation, intensive environmental cleaning with frequent cleaning of high touch areas
 - i. Staff Coordinator will implement staffing contingency plan for possible change in staffing levels

2. Once all has been reviewed with Administrator, Infection Preventionist, Medical Director and Nursing:
 - a. Conduct mandatory staff education
 - i. Hand hygiene
 - ii. Outbreak disease symptoms
 - iii. Reporting the occurrence of symptoms of resident and staff
 - iv. Transmission-based precautions
 - b. PPE will be made available in preparation for an outbreak
 - c. Advise staff who are exhibiting symptoms to stay at home
3. Monitor for effectiveness of investigation and control measures until cases cease to occur or return to normal level
4. Compare group of uninfected residents with infected residents
5. Conduct care practice observation IF cause implies a breakdown in resident care practices
6. Complete an Investigative Summary and submit a copy to
 - a. Nursing Director
 - b. Administrator
 - c. Medical Director

Summarize data/information collected; include case definition, contact tracing, cause, and final evaluation of outbreak.