- · 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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Samuel Brodie*
B.I. Cohen*

Eva Feld*

Herbert Gallen*
Joel J. Steiger

*Deceased



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

A DAUGHTERS OF MIRIAM CENTER UPDATE REGARDING COVID-19

As of 8/2/21 at 1:30 PM:

145	Census
2	Residents have tested positive for COVID-19
0	Non-Facility acquired COVID-19 positive case(s)
36	Residents are considered Persons Under Investigation (PUI) for COVID-19
1	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	Aug-July 2021: 0	Apr-Jun 2021: 0	Jan-Mar 2021: 0	Oct-Dec 2020: 2
Avg. COVID+ Res/Day	Aug-July 2021: 0	Apr-Jun 2021: 0	Jan-Mar 2021: 1	Oct-Dec 2020: 3

- With the exception of the 2 West nursing unit which remains under observation until August 14th, visitation <u>resumes</u> by appointment for <u>one hour</u> through the Activities department by calling <u>973-253-5290</u>. Visitation for the 1 East PUI Observation nursing unit specifically is available by appointment by contacting Eva Solano at 973-253-5245. All visitors must first complete the consent form which is posted on the website at <u>daughtersofmiriamcenter.org</u> and adhere to the visitation guidelines.
- In light of the increase in Covid-19 cases due to the Delta variant, the Center strongly encourages visitors to wear well-fitted masks at all times during their visit.
- 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. Residents and
 staff continue to be tested weekly.
- 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 in designated areas including the resident's room, the Day Care/Family Lounge, the gardens, and the courtyard. Directions to all locations are available on the nursing units.

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 CFO

Daughters of Miriam Center/The Gallen Institute is CMS 5-Star Rated



PATIENT-CENTERED VISITATION GUIDELINES & COVID-19 INFORMED CONSENT

Effective: July 30 2021

Below is Daughters of Miriam Center's (DMC's) Informed Consent and Visitation Guidelines. Please read in its entirety. Upon completion, the signed consent form must be emailed to kmatteis@daughtersofmiriamcenter.org, 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.

- All visitors will be screened regarding their health upon entering the Center and must sanitize their hands prior to visiting. Anyone who is sick or has any symptoms of illness must **NOT** enter the facility.
- Visitors, regardless of their vaccination status, are <u>required to wear a well-fitted mask</u> upon entering the Center as well as for their entire visit with their mask covering their mouth and nose. Residents will also be encouraged to wear face masks to the extent they can do so safely while in common areas of facility.
- Fully vaccinated visitors and residents while alone in the resident's room can choose to have close contact (including touch). Visitors must wear face masks and physically distance (6ft.) from other healthcare personnel and other residents/visitors that are not part of their group at all other times while in the facility.
- Residents or any visitor(s) **not** fully vaccinated must maintain physical distancing and wear face masks.
- Social visitation is available seven (7) days per week, except during an outbreak in the facility and except for circumstances when visitation is limited due to a high risk of COVID-19 transmission. Visitation will be available by appointment for a maximum of 2 visitors for residents who are COVID-19 free and for 1 hour in duration. As of May 12, 2021the NJ Department of Health has included Essential caregivers as part of social visitation.
 - Visitors must not wander throughout the facility, cannot approach the nurses' station, or approach any other residents or staff members. If you have questions about the resident's care or condition, please call the nurse's station after your visit.
 - Visitation will be suspended on an affected unit until the facility has no new cases identified in healthcare personnel or residents for 14 days.
 - Children must be accompanied at all times by someone over the age of 18 and children under the age of two (2) may not visit.
 - To book an appointment on a regular nursing unit, call the Activities department at 973-253-5290 or email: kmatteis@daughtersofmiriamcenter.org.
- <u>Compassionate care visits</u> will be held on the **1East COVID-19 Observation Nursing Unit** for <u>one (1) hour</u> and by available appointment. No one under the age of 12 will be permitted on 1East. Visitors will be required to wear all appropriate Personal Protection Equipment.
 - To book an appointment for the 1East nursing unit only, call 973-253-5245 or email Eva Solano at esolano@daughtersofmiriamcenter.org.
- <u>Outdoor visitation</u> is the preferred setting for visitation, weather permitting. Visitors may meet the resident on the unit, sign a log book taking responsibility for the resident and then return the resident back to the unit upon completion of their visit. The Designated Visitor Area will be in the front of the building.
 - With Attending Physician approval for *Out on Pass*, residents may participate in social excursions outside the facility. If residents are visiting friends or family in their homes or are in large social gatherings, they should wear well-fitting masks and maintain the physical distancing recommendation of 6 feet while visiting with others in private settings.
- <u>Hospice/End-of-Life visitation</u> will be individualized and can be conducted by any individual, vaccinated or unvaccinated, by appointment and for a maximum of two (2) visitors.

COVID-19 Informed Consent Form

Having read Daughters of Miriam Center's Vi	sitation Guidelines	
I,	ral and state health agencies recommend so the nature of the COVID-19 virus, reside	nd visitors understand COVID-19 is ocial distancing and a well-fitted face and visitors understand there is an
Resident and visitor acknowledge the exister the virus that could occur as a result of part status. Resident and visitors hereby ackno- elective visit and choose to participate in sar could result in severe illness, up to and inclu-	icipating in a visit at Daughters of Miriam wledge and assume the risk of becoming me. Resident and visitors hereby acknowledge.	Center regardless of their vaccination infected with COVID-19 through thi
Resident and visitors represent that reside families, to the best of their knowledge, has with any person in the past 14 days who COVID-19. Visitors who have travelled is must contact the Director of Nursing, Canon Director of Nursing immediately by phon visitation and for anyone arriving in the University of Nursing in the Universit	ve not tested positive nor shown signs of o has tested positive for COVID-19 nor internationally or have been in contact will dace Wishbow-Leto at 973-253-5745. Vine if there is any change in this representation.	CÔVID-19, have not been in contact is waiting for the results of a test for the someone who has travelled abroads is itors and resident agree to notify the
RESIDENT AND VISITORS AGREE TO	O HOLD HARMLESS, RELEASE, AN	ID INDEMNIFY DAUGHTERS OI
MIRIAM CENTER AND ITS EMPLOY		
OR LAWSUIT, OR OTHER CLAIM BY ILLNESS, OR OTHER DAMAGES ARIS		VID-19 VIRUS CAUSING INJURY
ILLINESS, OR OTHER DAMAGES ARE	SING PROW THE VISIT.	
I AGREE TO FOLLOW ALL RULES O		
COMPLY WITH THESE POLICIES WIL		TICIPATION IN VISITATION ANI
ASKED TO IMMEDIATELY LEAVE THE	E PREMISES.	
	Visitor Name	Administrator/Designee Name
	 Dated	 Dated

Revised: July 30, 2021

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.
- 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:

- 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.