



April 27, 2021

Dear Fellow Employees,

Although my updates are not as frequent as in previous times, please know that we remain in a pandemic and that our continued dedication to protecting ourselves, our patients and residents as well as family members will continue to be key to our ongoing success. The CDC as well as the NYS Department of Health continue to communicate in regards to changes in guidelines and protocols as it relates to the pandemic. In today's update I will summarize recent communications addressing return to work guidelines.

Please note the following:

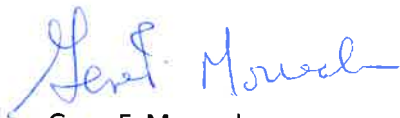
1. COVID Positive Update- We performed 129 rapid tests yesterday, and 3 were positive. We currently have 3 COVID positive inpatients and the ECF remains at 0 COVID residents. We recently had 2 hospital deaths bringing our total number of deaths since the start of the pandemic to 20. This virus, although infection rates remain low in our region, continues to be lethal for some.
2. PPE Instructions for ACF and Quick Care- I have attached to today's update a revised hospital policy regarding the use of PPE. Please ensure that you review the updated version of this policy in particular the top section under "All Patient Care" as this is where the changes in the policy have been made. Please feel free to contact your manager or the Infection Control Office if you have any questions regarding this directive as it relates to appropriate PPE. We will gladly provide any clarification requested.
3. Revised Protocols for Personnel in Healthcare Including Quarantine and Furlough Requirements-
 - a) **Healthcare Professional (HCP) Return to Work After Exposure to COVID 19:**
 - Asymptomatic, fully vaccinated against COVID HCP do not need to quarantine or furlough after exposure to COVID 19. Due to the potential impact for those staff who may be immunocompromised, it still is important that you note this exposure on your daily log and bring this to the attention of your manager who can follow up with the Infection Control Office.
 - All fully vaccinated HCP working in the **nursing home** must continue to participate in diagnostic COVID 19 testing twice per week at this time per the Commissioner of Health. If a fully vaccinated HCP working in a nursing home is exposed to a COVID 19 positive individual, we should assign that HCP to areas in which they will only have contact with vaccinated residents.
 - b) **Asymptomatic HCP Recently Recovered from COVID 19:**
 - Asymptomatic HCP who have recently recovered do not need to quarantine or furlough after exposure to COVID 19. The exception is for those staff with underlying immunocompromising conditions as they are at higher risk for re-infection. It remains important that you document on your daily log that exposure and share that with your immediate manager who can then speak to the Infection Control Office regarding any other precautions that need to be taken.

- Exposed/Recovered HCP working in the nursing home must continue to participate in diagnostic COVID 19 testing twice per week as required by the Commissioner of Health. These recovered individuals who have been exposed should also be assigned to areas in which they will only have contact with vaccinated residents.
- c) Asymptomatic HCP Not Fully Vaccinated and Not Recently Recovered from COVID 19:
- Asymptomatic HCP who have had exposure to a confirmed or suspected case of COVID 19 may return to work after completing a 10 day quarantine without testing if no symptoms have been reported during the quarantine period. The HCP must continue daily symptom monitoring through day 14 and maintain strict adherence to all PPE requirements.
 - These individuals who work in the nursing home, they must furlough for 14 days.
4. Visiting Hours- There appears to have been some confusion with the recent change in our visiting hours. I have attached to today's update the current visitor response plan outlining the recent change to certain areas of the hospital for visitation. Please read the full plan as some areas such as OB, visitation remains as previously noted.

We have been discussing in Senior Leadership the continued need for cleaning of high touch areas within the organization. Although there has been documentation that the likelihood of transmission from most surfaces is minimal, we prefer that we continue cleaning as often as possible high touch areas to continue to protect all who may come in contact with those high touch areas. Of note is documented decrease in the flu and common cold among many these days due in part to mask wearing and I believe in regards to additional cleanliness pursued during the height of the pandemic. Of course, handwashing remains the gold standard in regards to protecting yourself.

Please continue down the path we are currently on in regards to our response to the pandemic throughout our organization. It is the appropriate path and it appears to be making a difference.

With Sincerest Gratitude,



Gene F. Morreale