

# WELLSPRINGS RESIDENCE ASSISTED LIVING FACILITY

## *SUPPLEMENTAL PLAN: HIGH-CONSEQUENCE INFECTION EDUCATION AND VISITATION PROCESS*

This document has been updated to include standards in accordance with Florida Statutes §§ 408.823 and 429.28(1)(d):

- Infection control education for staff and visitors is attached.
- Screening, personal protective equipment, and other infection control protocols for staff and visitors are addressed below.
  
- Length of visits.
  - i. General visiting hours are unrestricted and at any time the Resident, Family member/POA decide to visit, within reason.
  - ii. Visitation includes unrestricted private communications.
  - iii. Per Resident Rights, Resident can receive and send unopened correspondence, have access to a telephone, and visit with any person of his or her choice (or per POA/Legal Guardian's choice, when applicable), at any time between the hours of 9 a.m. and 9 p.m. at a minimum.
  
- Number of visitors.
  - i. There is no license-specific criteria for a specific minimum or maximum number of visits at Wellsprings Residence. However, if a large number of persons are visiting, please be mindful of the other residents, to allow for their use of common area spaces.
  
- The Administrative Team, the Administrator or his/her Designee are responsible for staff adherence to Wellsprings Residence visitation policies and procedures:
  - i. Summer Moon – Admin Assistant
  - ii. Susan Kornegay - Auth. Manager
  - iii. Reginald Kornegay – Administrator
  
- Visitors are not compelled to show or provide proof of vaccination or immunization status.
- Consensual physical contact is permitted between a resident and their visitor(s).

**Completed by:** Reginald J. Kornegay, Administrator

**Amended by:** Susan I. Kornegay, Auth. Manager

**Published Date:** October 2025

**Purpose:** Pursuant to Emergency Rules, this document constitutes the supplemental plan for Wellsprings Residence to respond and manage a high-consequence infection at the facility.

**Scope:** This plan will ensure a comprehensive response by the organization and its supporting partners to identify, isolate, and coordinate for the healthcare of any residents that have a high contagious infection at the facility. This plan will also manage infection prevention to control the spread of infection with staff, contracted service workers, second-party care providers, and other visitors to the facility.

**Definition.** High Consequence Infections (HCI) are those pathogens that have a potential to cause a high mortality among otherwise healthy people and no routine vaccine exists. Some types of direct clinical specimens pose generalized risks to healthcare personnel treating the infected, as risk of secondary airborne spread or with an unknown mode of transmission.

**Mitigation.** Wellsprings Residence (WSR) will take necessary steps to prevent the impacts of an HCI event in the community by implementing active measures to control exposure to the specific pathogen to the facility.

**Personnel Screening.** Upon the identification of an emerging infection, the Administrator will direct the implementation of screening operations for entry into the facility. This will involve the immediate restriction of personnel entering the WSR grounds to essential personnel and family under special circumstances with hospice residents. The screening will involve visual and verbal assessments of all persons seeking entry into the facility or contact with the residence and staff. All residents will be screened upon the emergence of an HCI pathogen and restricted to the campus during the entire event or when such a time that the Florida Department of Health (FDOH) provides guidance to allow movement of vulnerable populations.

All personnel should be screened for cough, respiratory symptoms, fever, rash, and travel to areas of outbreaks. This determines the granting of access to the facility or the need for respiratory etiquette. The implementing and maintaining of respiratory etiquette measures must remain throughout any health care encounter for all personnel. If there is no subjective or documented fever or other pronounced symptoms, the screened person will follow routine standard precautions per CMS guidelines or Florida State law (when applicable).

**Isolation.** If a resident screens positive for the suspicion of the HCI, they will be deemed a person under investigation (PUI) and moved to a private room with a closed door. WSR does not have an airborne isolation room, so the staff will control access to the resident until they can be sent to the hospital to confirm the status of infection – this is conducted within minutes, and county fire rescue paramedics will transport to the nearest receiving emergency room. The staff on duty will post appropriate signage to alert other staff of the isolation.

**Evaluation.** While a PUI is waiting for transportation to the hospital. A designated staff member will monitor the resident, keeping them isolated from other residents and staff, ensure that symptoms do not become adverse or pose immediate risk to the person. The staff member

and all health care providers (HCP) who have had contact with the suspected HCI person will be tracked for potential exposure. WSR will track all the HCP who have entered the resident's room for symptoms, if they continue to visit the facility. If they exhibit symptoms during any screening or notify WSR of their symptoms, they will not be allowed to return until they have been cleared by the applicable state or federal Department of Health and/or CMS guidelines, or test negative for the infection, after symptoms have subsided.

If a resident is sent to the hospital and have tested positive for the HCI, they must complete two consecutive negative tests after symptoms have subsided, or have been cleared by the applicable state or federal Department of Health and/or CMS guidelines, before they can return to the facility.

If a resident is sent to the hospital for other health reasons during an emergence of an HCI, they must be tested at the hospital prior to discharge to the facility. If this cannot take place at the site of care, the resident may return to the facility, but must remain restricted to their room until they have been cleared by the applicable state or federal Department of Health and/or CMS guidelines.

***Infection Prevention.*** The spread of infection can be limited, if personnel take the appropriate steps to prevent cross-contamination of viral material.

***Facial Coverings/Masks.***

Governor DeSantis signed into law SB 988, the “No Patient Left Alone” Act (2022). This bill created new requirements for facilities regarding visitation policies and procedures and affects all assisted living facilities in Florida. Thus, pursuant to Emergency Rule 59AER23-1 and 59AER23-2, which implement updated requirements from SB 988, “Protection from Discrimination Based on Health Care Choices” Act (2023), and in accordance with Florida Statute § 408.824 and Florida Statute § 381.026, the Florida Patient Bill of Rights and Responsibilities, Wellsprings Residence has updated its policy and opted-out of requiring its staff, residents and visitors from wearing facial coverings or masks, but requests that folks refrain from visiting if they are experiencing flu-like signs and symptoms. Should the future need again arise in the face of a respiratory pandemic similar to “COVID-19,” then WSR will again require facial coverings and the stricter standards implemented in accordance with state and federal laws, and department of health regulatory authority.

~~If the pathogen is airborne or transmitted through droplets, all attendees to the facility will be expected to wear a facial covering that prevents or reduces the introduction of droplets from nasal and oral exhalation. Facial coverings will be required by all persons on the entire premises, except for residents who do not leave the premises. This includes vendors, 3<sup>rd</sup>-party HCPs, contracted employees, property management companies and facilities maintenance personnel. Facial coverings can include cloth masks, dust masks, bandanas, or other facial screens that catch droplets from the nose and mouth directly after expulsion.~~

Respirators are not required for staff, unless they are entering a room where a known PUI is present. Disposable N95 respirators and half-face elastomeric respirators are available

for WSR staff who must enter a room to provide assistance to a PUI, while they are waiting transportation to the hospital. Staff is only allowed to wear a respirator if they have been medically screened by an occupational health physician and are properly fit-tested for the specific respirator. The Director of Operations will conduct the fit-testing for WSR staff. Residents are not allowed to wear a respirator, as these devices can complicate breathing and place the resident in unintended risk of asphyxiation. Residents may use a facial covering, if they are at risk of exposure from a PUI or may have contact with an unscreened person.

***Hand Washing and Sanitizing.*** All staff will wash their hands with soap and water and/or employ the use of alcohol-based sanitizer available throughout the community, in accordance with CDC Guidelines on Hand Hygiene in Healthcare Settings, when using the toilet, blowing their nose, coughing or sneezing, in between handling residents for ADL's, such as when toileting, providing care to residents, touching garbage or soiled items, assisting with self-administration of medications, to prevent the spread of germs and keep hands clean.

***Facility Maintenance and Housekeeping.*** WSR will maintain an aggressive maintenance program to reduce the risk of exposure to an HCI pathogen through contact with surfaces and the ambient air. All staff are responsible for ensuring that these measures are adhered to.

***Surface Cleaning.*** All staff will periodically wipe surfaces in their workspace throughout the shift, using a clean cloth or sanitizer wipes, saturated in an anti-microbial solution rated for effectiveness against viral or bacterial pathogens.

Housekeeping staff will clean all high-touch surfaces with a sanitizer solution a minimum of twice per shift. The kitchen along with housekeeping staff will also conduct sanitizing of all surfaces in the kitchen and dining area after every meal production and service.

***Air Conditioning Systems.*** WSR will coordinate with the property owner to clean or replace the air filters in the facility regularly to ensure their efficiency in cleaning the area an achieving the appropriate number of air exchanges in the living areas to support infection prevention.

## **REFERENCES:**

1. Comprehensive Emergency Management Plan, Wellsprings Residence Assisted Living Facility, Dated April 2023
2. **RECISSIONS:**  
NONE
3. **POC:**
  - Susan I. Kornegay; Auth. Manager (407) 951-0268;
  - Reginald J. Kornegay, Administrator (407) 310-0388



# Infection Prevention: Coronavirus Healthcare Workforce Training

By: Susan I. Kornegay



# Cleaning and Sanitizing Common Areas



## CLEANING FOR COVID-19

COVID-19 (novel coronavirus 2019) is a respiratory illness that primarily spreads through the air and through personal contact with surfaces and infected people. COVID-19 is an enveloped virus, meaning it is easily compromised by proper cleaning and sanitizing. It is unknown how long COVID-19 can survive on surfaces, but it is recommended to clean and sanitize high contact surfaces at home, school, and the work place.



Remove visible soil and dirt from surfaces using soap and water.



Apply an EPA registered disinfectant to kill pathogens, including COVID-19. Common cleaners include:



For effective sanitizing, wait the proper contact time as indicated on the product label.





## TIPS FOR CLEANING AND DISINFECTING



USE EFFECTIVE SOLUTIONS SUCH AS:

- EPA-REGISTERED HOUSEHOLD DISINFECTANTS
- DILUTED HOUSEHOLD BLEACH SOLUTIONS
- ALCOHOL SOLUTIONS WITH AT LEAST 70% ALCOHOL

IF SURFACES ARE VISIBLY DIRTY, FIRST WIPE TO CLEAN THE DIRT WITH DETERGENT OR SOAP & WATER. THEN APPLY DISINFECTANT.



WHEN YOU SPRAY DISINFECTANT, LEAVE THE SURFACE WET FOR AS MANY MINUTES AS LISTED ON THE BOTTLE BEFORE WIPING AWAY. THIS COMMONLY MISSED STEP IS KEY IN ALLOWING THE SOLUTION TO WORK.

SOURCE: [HTTPS://WWW.CDC.GOV/CORONAVIRUS/2019-NCOV/COMMUNITY/HOME/CLEANING-DISINFECTION.HTML](https://www.cdc.gov/coronavirus/2019-ncov/community/home/cleaning-disinfection.html)



## HIGH TOUCH SURFACES TO DISINFECT DAILY



TABLES  
COUNTER TOPS  
LIGHT SWITCHES  
DOORKNOBS  
REMOTES  
DESKS  
HARD-BACKED CHAIRS  
COMPUTERS & KEYBOARDS  
PHONES  
TABLETS  
TOILETS  
SINKS

SOURCE: [HTTPS://WWW.CDC.GOV/CORONAVIRUS/2019-NCOV/COMMUNITY/HOME/CLEANING-DISINFECTION.HTML](https://www.cdc.gov/coronavirus/2019-ncov/community/home/cleaning-disinfection.html)





# COVID-19: A Guide for Direct Care Workers

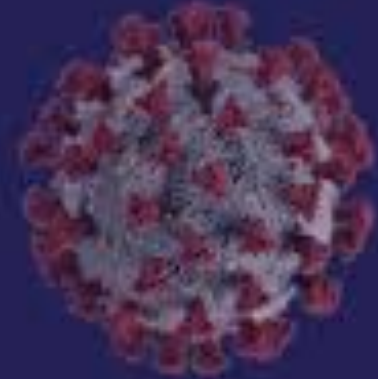


## Coronavirus | COVID-19 Update

We thank all healthcare professionals risking their lives to support patients and tackle the COVID-19 pandemic.

EACTS courses are cancelled until October 2020. Online resources are available to support your education and training requirements.

Stay safe and follow official advice



**Older adults and people who have severe underlying medical conditions** like heart or lung disease or diabetes seem to be at higher risk for developing more serious complications from COVID-19 illness.

# Prevention:



## COVID-19

### How is it prevented?



Wash hands  
often



Avoid touching  
eyes, nose, or  
mouth with  
unwashed hands



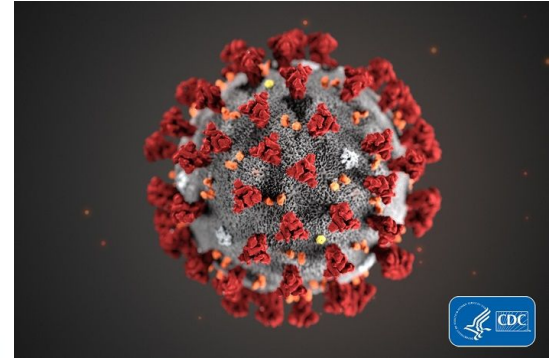
Avoid contact  
with sick people



Stay home while  
you are sick; avoid  
others



Cover mouth/  
nose with a tissue  
or sleeve when  
coughing or  
sneezing



If you have recently traveled to an area that has COVID-19 transmission and are experiencing symptoms such as fever, coughing or shortness of breath, call ahead to your health care provider before seeking medical care.



WELLSPRINGS RESIDENCE  
Assisted Living Facility

**People with COVID-19 have had a wide range of symptoms reported – ranging from mild symptoms to severe illness.**

**Symptoms may appear 2-14 days after exposure to the virus. People with these symptoms may have COVID-19:**

- **Cough**
- **Shortness of breath or difficulty breathing**
- **Fever**
- **Chills**
- **Muscle pain**
- **Sore throat**
- **New loss of taste or smell**



**This list is not all possible symptoms. Other less common symptoms have been reported, including gastrointestinal symptoms like nausea, vomiting, or diarrhea.**

# When residents in assisted living facilities are suspected or confirmed to have COVID-19



**Implement universal use of eye protection and respirators or facemasks, if respirators are not available, for all direct care personnel when on the unit to address potential for encountering a wandering resident who may be positive for COVID-19.**

Infection prevention strategies to prevent the spread of COVID-19 are especially challenging to implement in memory care units where numerous residents with cognitive impairment reside together. For example, residents can have a difficult time following recommended infection prevention practices such as social distancing, washing their hands, avoiding touching their face, and wearing a cloth face covering for source control.

Changes to resident routines, disruptions in daily schedules, use of unfamiliar equipment, or working with unfamiliar caregivers can lead to fear and anxiety resulting in increased depression and behavioral changes such as agitation, aggression, or wandering.

1. **Routines are very important for residents with dementia. Try to keep their environment and routines as consistent as possible while still reminding and assisting with frequent hand hygiene, social distancing, and use of cloth face coverings (if tolerated).**
2. **Continue to provide structured activities, which may need to occur in the resident's room or be scheduled at staggered times throughout the day to maintain social distancing.**
3. **Frequently clean often-touched surfaces in the memory care unit, especially in hallways and common areas where residents and staff spend a lot of time.**
4. **Continue to ensure access to necessary medical care, and to emergency services if needed**

# Donning & Doffing PPE On Positive COVID-19 Unit



**putting PPE ON** (ACE)

**What You Need**

Coveralls N95 Respirator Clean face shield Inner gloves Outer gloves

**Coveralls + Gloves**

- Batch work and plan ahead**, having items available outside each patient room.
- Sanitize hands.**
- Put on first pair of gloves.**
- Put on gown outside room.** Open-end faces your back. **Tie the back of the gown.**
- Sanitize gloves.**
- Put on second pair of gloves over the cuffs of the gown.**

**Respirator**

- Put on N95**, ensuring proper seal. **Ensure straps are not crossing.**
- Place hands over the front of the N95. Breathe an easy deep breath in and out.** If you **feel** air escape the edges, **refit and repeat.**
- Sanitize outer gloves.**

**Eyes + Entry**

- Put on face shield.**
- Sanitize outer gloves.**
- ENTER room**
- Do not touch face or re-adjust N95 or face shield inside room.**

**DO NOT enter the room if you do not achieve a proper respirator seal.**

WHO IS YOUR  
FAVORITE TEAM OF  
SUPER HEROES?  
X-MEN? JUSTICE LEAGUE?  
AVENGERS?

HEALTH CARE  
WORKERS.



FITZSIMMONS THE ASPEN DAILY STAR 2020 cartoonists.com.



# COVID-19 PANDEMIC PREPAREDNESS IN HEALTHCARE FOOD SERVICE

Learn More [🔗](#)



# 4 STEPS TO FOOD SAFETY



  
CLEAN



  
SEPARATE



  
COOK



  
CHILL



## FOOD RETAILERS' COVID-19 PROTECTION PRACTICES

Food retailers are protecting employees and customers in many ways during COVID-19.



Cleaning/  
Sanitizing



Social  
Distancing



Personal  
Hygiene



Redefined  
Customer Service

# WASHING PRODUCE



**YOU SHOULD  
WASH PRODUCE  
WITH WATER  
BEFORE  
EATING**



**DO NOT USE  
DISINFECTANTS,  
CLEANING WIPES  
OR SOAP ON  
PRODUCE**



**NC STATE**  
EXTENSION

Stay informed: [go.ncsu.edu/covid-19](https://go.ncsu.edu/covid-19)

©2020 NC State

**NC STATE**  
UNIVERSITY

  
**WELLSPRINGS RESIDENCE**  
Assisted Living Facility

COVID-19 GLOBAL SECTOR UPDATE

## Accommodation & Food Services



## Practise food safety

Even in areas experiencing outbreaks, meat products can be safely consumed if these items are **cooked thoroughly** and **properly handled** during food preparation.



# Clean & Sanitize All Kitchen Surface Areas



## Prevention



- Observe good infection prevention practices to minimize risk when handling, housing and transferring animals
- Minimise direct or prolonged contact with sick people and animals
- Wear protective clothing when in contact with animals and infected people
- CoV are easily killed on environmental surfaces so disinfect frequently touched surfaces often using a healthcare grade disinfectant such as Oxvir



**Sanitize hands using alcohol based hand rub**

Use alcohol hand rub unless hands are visibly soiled.

Or



**Frequent handwashing**

Wash hands with soap and water for at least 20 seconds.



**Cover your mouth and nose**

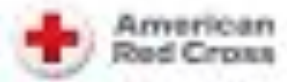
With a tissue or sleeve when coughing, sneezing and preparing & cooking food.



**Avoid close contact**

With anyone showing symptoms of respiratory illness.

# CORONAVIRUS SAFETY



Follow these easy steps to help prevent the spread of COVID-19.



Disinfect surfaces around  
your home and work.



Wash your hands for at  
least 20 seconds.



Sneeze or cough?  
Cover your mouth.

# Questions?

