

Adult Family Home Epidemic Preparedness Tool

Overview

An illness that spreads widely in communities is called an epidemic. Epidemics or illnesses that spread widely, will occur in the future, but it is not always clear when. We want you to be as prepared as possible. We created a tool to help you, an Adult Family Home (AFH) owner, plan how to safely care for your residents and staff safely during an epidemic. This is meant to be a supplemental document to your existing emergency response plan.

Instructions

There are four different sections you will review in this tool. Each section will give you ideas to prepare for an epidemic. When you review each section:

1. Check “Addressed” or “Not Addressed” if your AFH has that plan or procedure.
2. Use the notes section to include additional items for your plan or procedure.
3. Once you complete all sections, write down the top three items you want to focus on.

Once you have completed your plan, you should review and test it at least every 12 months to make sure it meets the current needs of your AFH. Thank you for preparing your AFH for future epidemics so you provide the best possible care for your residents and staff.

Top 3 Items You Want to Work On

1.
2.
3.



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Step 1: Assessment and Planning

AFH providers are encouraged to complete an annual assessment per best practice. Your annual assessment should include:

- Which infectious diseases your residents are most likely to get (e.g., influenza, COVID-19, norovirus)
- The different ways germs spread, such as touch, cough, sneeze, bug bites, or food preparation.
- How your AFH will put this plan into practice during an epidemic

Review your plan and outline how you will address the following items during an epidemic.	Addressed	Not Addressed	Notes
<ul style="list-style-type: none"> • A process for how you will get supplies to meet resident care needs: <ul style="list-style-type: none"> ○ Personal Protective Equipment (PPE) ○ Medications ○ Cleaning and disinfection supplies ○ Food ○ Water 			
<ul style="list-style-type: none"> • A process that includes how you will care for residents if the number of staff decreases or if the number of residents increases. 			
<ul style="list-style-type: none"> • A plan that includes how you will train all staff in infection control procedures, use of PPE, and cohorts upon hire, annually and as needed. 			
<ul style="list-style-type: none"> • A plan that includes how you will get medical treatment/care for residents and staff if needed. 			
<ul style="list-style-type: none"> • A plan that includes who and how environmental cleaning and disinfection will be done. 			
<ul style="list-style-type: none"> • A plan that includes how you will address an interruption in your supply chain. <ul style="list-style-type: none"> ○ An interruption in your supply chain can make it difficult to care for your residents and protect your workers. Examples of supplies that may be hard to access are PPE, medications, treatments, cleaning and disinfection supplies, food and water. 			



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Step 2: Procedures

AFH providers should have procedures for employee health and safety. Your employee health plan should ensure sick staff don't work and don't interact in spaces residents use when staff are unwell.

Include the information below in your employee health procedures:	Addressed	Not Addressed	Notes
<ul style="list-style-type: none"> • Guidance for symptomatic staff who should stay at home and not go to work <ul style="list-style-type: none"> ○ Centers for Disease Control and Prevention (CDC) ○ Local Health Jurisdiction (LHJ) ○ Department of Health (DOH) ○ Department of Social and Health Services (DSHS) ○ Labor & Industries (L&I) 			
<ul style="list-style-type: none"> • A process for when it is safe for staff to return to work after illness or exposure to suspected epidemic illness cases. 			
<ul style="list-style-type: none"> • Who staff will contact or report to if they are ill and cannot report to work. 			
<ul style="list-style-type: none"> • How you will care for residents if multiple staff become ill. 			
<ul style="list-style-type: none"> • How you will screen for illness in your AFH (e.g., visitors, visiting in-home providers, staff, residents) 			
<ul style="list-style-type: none"> • How you will monitor infections in your AFH. 			
<ul style="list-style-type: none"> • How and when you will use volunteers to assist you. 			
<ul style="list-style-type: none"> • A procedure in place for environmental cleaning and disinfection and as needed (spills or visibly soiled items). 			
Equipment and Supplies			
Include the information below in your plan:	Addressed	Not Addressed	Notes
<ul style="list-style-type: none"> • A description of all job assignments and worker tasks that need PPE, including respirators, to care for residents in isolation. 			
<ul style="list-style-type: none"> • A process that includes how you will order PPE during business 			



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hours and after-hours.			
• A list of suppliers that includes who to contact for medical supplies (PPE, medical equipment) and store it where staff can easily find it			
• How you will get PPE, and consumables required for infection prevention, such as alcohol-based hand sanitizer for extra staff.			
• How you will get additional PPE to care for residents in precautions.			
• Who will be responsible for monitoring, purchasing and rotating supplies on a continuous basis. Recommendation is to have enough PPE to cover 30 days of use when your AFH is at maximum capacity.			
• How you will get enough hand hygiene supplies, such as alcohol-based hand sanitizer and soap and clean water available for staff and visitors.			
• How you will make sure medical equipment used for sick or contagious residents is not shared or used with other residents, e.g., thermometers, blood pressure cuffs, etc.			
• How you will make sure equipment used for one resident is cleaned or disinfected before using the equipment with a different resident.			



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Step 3: Communication Plan

During an epidemic you need to know who to contact for different reasons to keep residents and staff safe. This includes residents' families or guardians, your local public health partners, and others.

Develop a communication plan that includes the following:	Addressed	Not Addressed	Notes
• A list of all residents and their emergency contact information.			
• Contact information for local public health partners			
• Local healthcare providers contact information. Example: Residents' care providers, home nurse delegator			
• Local Hospitals contact information			
• Contact information for Pharmacy providers			
• Contact information for Residential Care Services			
• How you will obtain information from primary care providers and vendors for staff and residents.			
• How you will tell residents and their representatives about any public health emergency. For example: email, phone trees, letters, social media.			
• How you will use signs to let visitors know about new changes or guidance. <ul style="list-style-type: none"> ○ Entrance or exit locations. ○ Check-in procedures ○ Visitation locations ○ Required PPE ○ Resident isolation 			
• How staff and residents will share concerns and ask questions.			

Step 4: Training

During an epidemic, it is important for you, your staff, and visitors to perform certain tasks correctly, so they do not spread illness. Always follow basic infection prevention and control practices.

Develop a training plan that includes the information below:	Addressed	Not Addressed	Notes
<ul style="list-style-type: none"> • How and when your home will practice epidemic response drills. <ul style="list-style-type: none"> ○ Recommend practice drills at least annually and maintain documentation of the drills. ○ Include family members and visitors in this process. ○ See Appendix D 			
Worker Health and Safety Practices			
	Addressed	Not Addressed	Notes
<ul style="list-style-type: none"> • Ensure all your staff have completed the following respiratory protection requirements: <ul style="list-style-type: none"> ○ Have completed fit testing that includes the medical evaluation and required training at time of hire and annually. ○ Have access to the mask they have been tested for. 			
<ul style="list-style-type: none"> • Ensure your plan includes training on how to manage staff illness. 			
Infection Prevention			
	Addressed	Not Addressed	Notes
General Education and Control Measures			
<ul style="list-style-type: none"> • How your staff will educate residents on basic infection prevention and control practices. 			
<ul style="list-style-type: none"> • How and when to use standard precautions and transmission-based precautions. 			
<ul style="list-style-type: none"> • When you will post isolation precaution signs and when your signs will be reviewed and replaced if necessary. 			

<ul style="list-style-type: none"> How and when to perform hand hygiene: <ul style="list-style-type: none"> You have soap, water, paper towels and alcohol-based hand rub readily available for staff. Staff know how to perform hand hygiene. 			
<ul style="list-style-type: none"> How and when to perform Respiratory Etiquette 			
<ul style="list-style-type: none"> How to put on (don) and take off (doff) masks, equipment, and other PPE. The training should require attendees to show you how they put on and take off their PPE safely. 420-380 Donning and Doffing PPE (wa.gov) 			
<ul style="list-style-type: none"> How staff will be trained on resident placement if there are shared rooms and residents with an infectious illness that requires isolation. 			
Environmental Cleaning and Disinfection			
<ul style="list-style-type: none"> How staff will determine what cleaning and disinfection product to use. 			
<ul style="list-style-type: none"> How and when to clean and disinfect resident care equipment. 			
<ul style="list-style-type: none"> Who will perform cleaning and disinfection, when it will be completed and how ongoing staff training will be addressed. 			
Injection (sharps) safety			
<ul style="list-style-type: none"> Which staff should be trained on safe injection practices* and how they will be trained *Use only one needle one time for one resident 			
<ul style="list-style-type: none"> How staff will be trained on sharps safety (work practices for safe use and disposal of needles). 			



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APPENDIX A: Emergency Contact List

Name of Adult Family Home: _____

Name of the Owner: _____

Address: _____

Phone Number: _____

For Emergencies call 911

Emergency Evacuations Reporting Reminder: Part of your emergency preparedness plan includes identification of a secondary site for residents, transportation, and overall emergency response. In the event of a facility/home evacuation, you must report it to Residential Care Services (RCS). Report online or call 1-800-562-6078.

Healthcare Services	Contact Number
Poison Control	1-800-222-1222
Resources	
Your Local Public Health Department	
Transportation	
Utilities	
Your County Public Utilities	
Your County Regional Wastewater	
NW Natural Gas *if you smell gas do not send an email	1-800-882-3377



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APPENDIX B: List of Vendors My Adult Family Home Relies on

Vendor	Critical Resources Supplied	Contact Name	Contact Number	Notes



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APPENDIX C: Resources

- [WA DOH Local Health Jurisdictions](#)
- [CDC Infection Control Website](#)
- [DSHS SHB 1218 Epidemic Preparedness and Response Guidelines](#)
- [Emergency Preparedness Workbook for Adult Family Homes](#)
- [Standard Precautions: Adult Family Homes](#)
- [Adult Family Home Influenza Toolkit](#)
- [COVID-19 Toolkit](#)
- [Environmental Protection Agency \(EPA\) Registered Disinfectants](#)



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APPENDIX D: Epidemic Response Drill

Adult Family Home: Infectious Disease Response Drill

Use this scenario to practice and improve your epidemic response plan for your adult family home (AFH).

October 13th, 11 am. The Local Health Jurisdiction (LHJ) is now warning about the increasing flu-like illnesses in the county. This is a virus without a vaccine. Additionally, three more residents are now ill. You're having trouble keeping enough staff. This is because of staff illnesses. You've borrowed staff from another facility. Unfortunately, that facility is now also facing shortages. So, those staff members must return. All the staff you have working are showing signs of burnout and fatigue. This makes them more likely to become ill. Your personal protective equipment and medication supplies are running low. These include:

- N95
- source control mask
- gowns
- gloves
- eye protection (face shields or goggles)
- Tamiflu

Also, it is harder to find these supplies in your area. The delivery of your supplies and medications will be delayed by 3-5 days. This is because your vendors are struggling to find healthy truck drivers. As a result, meeting your resident needs is becoming more difficult.

Emergency Staffing:

- a. Consider how your staff can protect residents, staff, family, and visitors better.
- b. Plan for extra staffing in emergencies after activating your policies.
- c. What are safe staffing ratios for the level of care of each resident?

Alternate Care Sites:

- a. At what point should you consider transferring your residents to another place to properly care for them?
- b. Identify back up care sites for residents if staffing or supplies become critical.

Supply Shortages:

- a. When crucial medications run out, who will you assign to prioritize resident's needs?