



# **Outbreak Response Plan for New Jersey Developmental Centers**

June 21, 2023

## Introduction

The Department of Human Services' Division of Developmental Disabilities' (Division) first priority is the health and safety of the individuals it serves and the critical staff that support them, including at the five developmental centers (centers) operated by the Division.

Green Brook Regional Center 275 Green Brook Road Green Brook, NJ 08812 Phone: 732.968.6000   Fax: 732.968.8125 <a href="https://nj.gov/humanservices/ddd/individuals/developmental/">https://nj.gov/humanservices/ddd/individuals/developmental/</a>	Vineland Developmental Center PO Box 1513 1676 E. Landis Avenue Vineland, NJ 08362-1513 Phone: 856.696.6000   Fax: 856.696.6056 <a href="https://nj.gov/humanservices/ddd/individuals/developmental/">https://nj.gov/humanservices/ddd/individuals/developmental/</a>
Hunterdon Developmental Center PO Box 4003 40 Pittstown Road Clinton, NJ 08809-4003 Phone: 908.735.4031   Fax: 908.730.1311 <a href="https://nj.gov/humanservices/ddd/individuals/developmental/">https://nj.gov/humanservices/ddd/individuals/developmental/</a>	Woodbine Developmental Center 1175 DeHirsh Avenue Woodbine, NJ 08270 Phone: 609.861.2164   Fax: 609.861.5176 <a href="https://nj.gov/humanservices/ddd/individuals/developmental/">https://nj.gov/humanservices/ddd/individuals/developmental/</a>
New Lisbon Developmental Center PO Box 130, Route 72 New Lisbon, NJ 08064 Phone: 609.726.1000   Fax: 609.726.1159 <a href="https://nj.gov/humanservices/ddd/individuals/developmental/">https://nj.gov/humanservices/ddd/individuals/developmental/</a>	

This document outlines protocols that the Division's centers utilize related to prevention, detection, and mitigation related to outbreaks of infectious disease. They are based on best practices recommended by various U.S. public health authorities including the Centers for Disease Control & Prevention (CDC) and the New Jersey Department of Health (NJDOH).

Each center resident's health is monitored regularly for signs and symptoms of illness. More frequent monitoring occurs in living areas where one or more residents or staff are confirmed to be positive for an infectious disease (Ex. Influenza, COVID-19, etc.). Any changes in health are immediately reviewed by healthcare professionals and appropriate actions and care provided. The centers have access to resources to facilitate laboratory testing to confirm the presence of infectious disease. In addition, each center complies with reporting requirements to their local health departments based on the presenting circumstance.

The centers are prepared in the event of a staffing shortage. The centers have the ability to hire temporary staff as needed, re-deploy staff from non-resident areas to resident areas and share staffing resources with each other if needed.

## Core Principles of Infection Prevention

The Centers for Disease Control and Prevention provides direction on [Core Infection Prevention and Control Practices for Safe Healthcare Delivery in All Settings](#). These core principles are in place at each center. Below is a summary of what these practices are:

- Leadership Support – Allocation of sufficient human and material resources to infection prevention to ensure consistent and prompt action to remove or mitigate infection risks and stop transmission of infections.
- Education and Training of Staff on Infection Prevention – Provision of job-specific infection prevention education and training to all center healthcare personnel.
- Resident and Visitor Education – As appropriate for the circumstance, provision of infection prevention education to residents and visitors.

- Performance Monitoring and Feedback – Identification and monitoring of adherence to infection prevention practices and infection control requirements.
- Standard Precautions to Minimize Potential Exposures – Hand hygiene, environmental cleaning, risk assessment with appropriate use of personal protective equipment, medication safety, etc.
- Transmission Based Precautions – As appropriate for the circumstance, proper care for persons with confirmed or suspected exposure to infectious disease (Ex. Provision of care, cohorting, higher level personal protective equipment, etc.).
- Temporary Invasive Medical Devices for Clinical Management – Assessment of the medical necessity of any invasive medical device (e.g., vascular catheter, indwelling urinary catheter, feeding tubes, ventilator, surgical drain) in order to identify the earliest opportunity for safe removal.
- Occupational Health – Recommendations to residents and staff related to recommended vaccination(s) by the CDC and NJDOH, directives to staff to remain home when sick and report suspected illness, provision of appropriate personal protective equipment to staff based on the presenting circumstance.

Center staff are instructed not to come to work if they feel ill. Staff are also instructed to inform their supervisor if they become ill while at work so that appropriate actions can be taken to relieve them of duty. The center reserves the right to screen staff for signs and symptoms of illness depending on prevailing public health guidance at the time.

### **Visitation**

Visitors are instructed to report to a specified location at the center when they arrive and not to visit if they feel ill. The center reserves the right to screen visitors for signs and symptoms of illness depending on prevailing public health guidance at the time. Residents can engage in visits outside of the center with family and friends, as well as engage in off-site visits with center staff.

Indoor and outdoor visitation are permitted for center residents per the center’s visitation policies. While at the center, visitors shall comply with the prevailing requirements communicated to them by the facility around infection prevention and control. This may include wearing source control (Ex. Masks and other types of personal protective equipment) provided and physically distancing from others not in their group.

### **Isolation, Cohorting, and Personal Protective Equipment (PPE)**

Based on prevailing public health guidance, each center has a protocol in place for cohorting infected and at risk residents in the event of an outbreak of contagious disease. This involves having an isolation and/or quarantine area available if needed. Staff working at the facility will be made aware of any pertinent outbreak of infectious disease, be appropriately trained on how to address, and assigned relevant PPE. Center staff are trained on proper donning and doffing of PPE with regular re-enforcement. All areas of the center are frequently cleaned to mitigate the risk of infection.

### **Communication**

Centers are committed to communicating with residents, families/guardians, visitors and staff. Whenever a resident tests positive for an infectious disease, or comes in close contact with a resident or staff who tests positive for one, the center will inform the resident (as appropriate based on direction from the guardian and team) and reach out within 24 hours of the positive test result to inform the family/guardian. In addition to in-person visitation, each center will provide for interaction with the resident via telephone or other virtual methods.

For questions, complaints or to schedule a telephone call or other virtual interaction with a resident please contact the Social Services Department of the center in which the resident lives. Contact information for each center can be found in the [Introduction](#) section of this document.