

Policy Name:	1. Initial Action Plan / Rapid Response Guides		
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Revision Date:		,09/10/2020,10/10/2020	
Reference:	CPG 101 CMS §483.73 (A)(2) NYSDOH DAL 05-11 10 CRR-NY 415.26 (f)(1) TJC 02.02.01 EP1,2,4,5,8		

1.12B Infectious Disease/Pandemic Emergency

The circumstances of infectious disease emergencies, including ones that rise to the level of a pandemic, vary due to multiple factors, including type of biological agent, scale of exposure, mode of transmission and intentionality. Infectious disease emergencies can include outbreaks, epidemics and pandemics. The facility must plan effective strategies for responding to all types of infectious diseases, including those that rise to the higher level of pandemic.

The following Infectious Disease/Pandemic Emergency Checklist outlines the hazard-specific preparedness, response, and recovery activities the facility should plan for that are unique to an incident involving infectious disease as well as those incidents that rise to the occasion of a pandemic emergency. The facility should indicate for each checklist item, how they plan to address that task.

The Local Health Department (LHD) of each New York State county, maintains prevention agenda priorities compiled from community health assessments. The checklist items noted in this Annex include the identified LHD priorities and focus areas. Nursing homes should use this information in conjunction with an internal risk assessment to create their plan and to set priorities, policies and procedures.

This checklist also includes all elements required for inclusion in Hopkins Center Pandemic Emergency Plan (PEP), as specified within the new subsection 12 of Section 2803, Chapter 114 of the Laws of 2020, for infectious disease events that rise to the level of a pandemic.

To assure an effective, comprehensive and compliant plan, Hopkins Center should refer to information in Annex K of the CEMP Toolkit, to fully understand elements in the checklist including the detailed requirements for the PEP.

A summary of the key components of the PEP requirements for pandemic situations is as follows:

- o development of a Communication Plan,
- o development of protection plans against infection for staff, residents, and families, including the maintenance of a 2-month (60 day) supply of infection control personal protective equipment and supplies (including consideration of space for storage), and

- o A plan for preserving a resident's place in and/or being readmitted to a residential health care facility or alternate care site if such resident is hospitalized, in accordance with all applicable laws and regulations.

Finally, any appendices and documents, such as regulations, executive orders, guidance, lists, contracts, etc. that the facility creates that pertain to the tasks in this Annex, and/or refers to in this Annex, should be attached to the corresponding Annex K of the CEMP Toolkit rather than attached here, so that this Annex remains a succinct plan of action.

Infectious Disease/Pandemic Emergency Checklist	
Preparedness Tasks for <u>all Infectious Disease Events</u>	
X Required	<p>Provide staff education on infectious diseases (e.g., reporting requirements (see Annex K of the CEMP toolkit), exposure risks, symptoms, prevention, and infection control, correct use of personal protective equipment, regulations, including 10 NYCRR 415.3(i)(3)(iii), 415.19, and 415.26(i); 42 CFR 483.15(e) and 42 CFR § 483.80), and Federal and State guidance/requirements</p> <p><i>-All HCRHC personnel will be provided with education and training regarding the above during orientation, annually, periodically as needed and whenever there are new CDC, local department health regulatory guidelines, and requirements.</i></p> <p><i>Hopkins Center will refer to its Policies and procedure on same to ensure continuity of process and compliance.</i></p>
X Required	<p>Develop/Review/Revise and Enforce existing infection prevention, control, and reporting policies.</p> <p><i>-Policies in regard to the overall infection control program and implementation will be reviewed annually and as needed and whenever there are new CDC, local department health regulatory guidelines, and executive orders/ requirements.</i></p> <p><i>-All reportable events will be reported to Local health department, as applicable- to CDC via NHSN. Tests that the facility conducted under CLIA waiver (Point of care tests -Covid-19 rapid antigen testing)will be reported to ECLRS</i></p> <p><i>-Reportable events/infectious diseases are reported to the Infection Control Preventionist/ Designee, within one hour of receipt so that additional guidance to the staff could be provided and reporting activities may begin promptly.</i></p> <p><i>Hopkins Center will refer to its Policies and procedure on same to ensure continuity of process and compliance.</i></p>
X Recommended	<p>Conduct routine/ongoing, infectious disease surveillance that is adequate to identify background rates of infectious diseases and detect significant increases above those rates. This will allow for immediate identification when rates increase above these usual baseline levels.</p> <p><i>-Hopkins Center will continue its Infection Control and prevention program which investigates and scrutinize all aspect of occurrence and spread of infectious diseases, to identify rates and help detect a significant increase from baseline levels. Early</i></p>

	<p><i>identification will help in the early implementation of effective control, preventative measures, and outbreak prevention. Laboratory and antibiotic reports are submitted to the Infection Preventionist regularly.</i></p> <p><i>Hopkins Center will refer to its Policies and procedure in place to ensure safe process and compliance.</i></p>
X Recommended	<p>Develop/Review/Revise plan for staff testing/laboratory services</p> <p><i>-HCRHC will conduct/ arrange facility testing and coordinate with Empire Laboratories(for staff testing) and Centers Laboratories(for resident testing) to ensure tests are done for residents and staff as per physician's assessment/order. The facility will insure that when tests are conducted, IC protocol and procedures are- followed at all times</i></p> <p><i>Hopkins Center will refer to its Policies and procedure in place to ensure continuity of process and compliance.</i></p>
X Required	<p>Review and assure that there is, adequate facility staff access to communicable disease reporting tools and other outbreak specific reporting requirements on the Health Commerce System (e.g., Nosocomial Outbreak Reporting Application (NORA), HERDS surveys</p> <p><i>-Hopkins Center trained designated staff members to access, report necessary information/ reportable events, and complete surveys required by NYSDOH via health via Health Commerce System (e.g. Nosocomial Outbreak Reporting Application (NORA), and HERDS surveys, and as applicable, CDC via NHSN . File of incidents reported will be found in the RN Supervisor's office.</i></p> <p><i>Hopkins Center will refer to its Policies and procedure in place to ensure continuity of process and compliance. Policies will be reviewed annually and revised as needed.</i></p>
X Required	<p>Develop/Review/Revise internal policies and procedures, to stock up on medications, environmental cleaning agents, and personal protective equipment as necessary. (Include facility's medical director, Director of Nursing, Infection Control Practitioner, safety officer, human resource director, local and state public health authorities, and others as appropriate in the process)</p> <p><i>-Hopkins Center is currently maintaining an adequate emergency supply of medications, PPE'S and cleaning disinfectants. Director of Nursing/Infection control coordinator,</i></p> <ul style="list-style-type: none"> <i>• Monitors PPE burn rate and ensures a 60 days' worth off PPE supplies are maintained and properly stored.</i> <i>• Ensures PPEs are accessible to HCRHC staff, and are utilized as per IC standards.</i> <i>• Coordinates with Specialty Rx for emergency medication supplies.</i> <p><i>Hopkins Center will refer to its Policies and procedure in place to ensure continuity of process and compliance. Policies will be reviewed annually and revised as needed.</i></p>
X Recommended	<p>Develop/Review/Revise administrative controls (e.g., visitor policies, employee absentee plans, staff wellness/symptoms monitoring, human resource issues for employee leave).</p>

	<p>- <i>Visitation, screening and infectious disease or respiratory s/s monitoring of staff and resident are currently implemented as per policy and procedures for same in accordance with current CMS directives and CDC recommendations. Any employee with a positive test for infectious disease and/or manifesting signs and symptoms of infection shall be furloughed from their duties.</i></p> <p><i>Hopkins Center will refer to its Policies and procedure in place to ensure continuity of process and compliance. Policies will be reviewed annually and revised as needed.</i></p>
X Required	<p>Develop/Review/Revise environmental controls (e.g., areas for contaminated waste)</p> <p><i>-Any waste of resident on Isolation/Precaution shall be deposited in the container provided to the resident and will be collected and disposed of as regulated medical waste.</i></p> <p><i>Hopkins Center will refer to its Policies and procedure in place to ensure continuity of process and compliance. Policies will be reviewed annually and revised as needed.</i></p>
X Required	<p>Develop/Review/Revise vendor supply plan for re-supply of food, water, medications, other supplies, and sanitizing agents.</p> <p><i>-Aside from the amount of emergency supply requirements and regular weekly deliveries, HCRHC has an existing contract with vendors food, water, medication, and other medical supplies for emergency deliveries.</i></p> <p><i>Hopkins Center will refer to its administrative policies and procedure on same to ensure continuity of process implementation and compliance. Policies will be reviewed annually and revised as needed.</i></p>
X Required	<p>Develop/Review/Revise facility plan to ensure that residents are isolated/cohorted and or transferred based on their infection status in accordance with applicable NYSDOH and Centers for Disease Control and Prevention (CDC) guidance</p> <p><i>-The use of rooms in a part of a unit or end of the unit, such as at the end of the hallway, or the entire unit, will be designated for a pandemic related infection. Signage and/or any kind of demarcation will be posted by the door to inform staff members' of the type of Transmission Based Precaution to observe. Infection control measures will be instituted as per policy and procedure on Transmission- Base Precautions, which is in accordance with the standard of practice and most current guidance/requirement by the CMS and CDC.</i></p> <p><i>Hopkins Center will refer to its Policies and procedure on Transmission- Base Precautions to ensure continuity of process and compliance. Policies will be reviewed annually and revised as needed.</i></p>
X Recommended	<p>Develop plans for cohorting, including using of a part of a unit, dedicated floor, or wing in the facility or a group of rooms at the end of the unit, and discontinuing any sharing of a bathroom with residents outside the cohort.</p> <p><i>- The use of rooms in a part of a unit or end of the unit, such as at the end of the hallway, or the entire unit, will be designated for a pandemic related infection. Signage and/or any kind of demarcation will be posted by the door to inform staff members' of the type of</i></p>

	<p><i>Transmission Based Precaution to observe. Infection control measures will be instituted as per policy and procedure on Transmission- Base Precautions, which is in accordance with the standard of practice and most current guidance/requirement by the CMS and CDC. Hopkins Center will refer to its Policies and procedure on Transmission- Base Precautions to ensure continuity of process and compliance. Policies will be reviewed annually and revised as needed.</i></p>
X Recommended	<p>Develop/Review/Revise a plan to ensure social distancing measures can be put into place where indicated.</p> <p><i>-Hopkins Center placed demarcation lines, alerts /signage on the floor, chairs and walls for staff to be aware and maintain required social distancing between residents/HCRHC personnel / other individuals.in accordance with the most current guidance/requirement by the CMS and CDC.</i></p> <p><i>Hopkins Center will refer to its Policies and procedure on same to ensure continuity of process and compliance. Policies will be reviewed annually and revised as needed.</i></p>
X Recommended	<p>Develop/Review/Revise a plan to recover/return to normal operations when, and as specified by, State and CDC guidance at the time of each specific infectious disease or pandemic event e.g., regarding how, when, which activities /procedures /restrictions may be eliminated, restored and the timing of when those changes may be executed.</p> <p><i>-Hopkins Center will follow any recommendations, guidance, and guidelines from CDC and NYSDOH on safe communal dining, unit activities, visitations, staffing, management of supplies, inventory of medical equipment, communication with families, vendors and other agencies relative to ensuring a smooth and safe transition to recovery/return to normal operations.</i></p> <p><i>Hopkins Center will refer to its policies and procedure to provide guidance with process implementation and compliance. Policies will be reviewed annually and revised as needed.</i></p>
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Additional Preparedness Planning Tasks for <u>Pandemic Events</u>	
X Required	<p><i>In accordance with PEP requirements,</i> Develop/Review/Revise a Pandemic Communication Plan that includes all required elements of the PEP</p> <p><i>-The Medical Director/ Designee, Administration, Infection Control Preventionist and the rest of the Emergency Management team shall be involved in the planning, implementation and review of the pandemic plan annually and as needed. The plan will include: communication plan, emergency staffing, safety and protection plans or measures- including maintenance of a 2 months (60 day supply) of PPE, preserving resident's room in the facility in the event that resident is hospitalized, in accordance with all applicable laws and regulations.</i></p> <p><i>Hopkins Center will refer to its policies and procedure to provide guidance with process implementation and compliance. Policies will be reviewed annually and revised as</i></p>

	<i>needed.</i>
X Required	<p><i>In accordance with PEP requirements</i>, Development/Review/Revise plans for protection of staff, residents and families against infection that includes all required elements of the PEP.</p> <p><i>-The Medical Director, Infection Preventionist /Designee and the Emergency Management team shall review the policies and procedures in place related to core infection control measures to protect staff, residents and families against infection. These measures will include: screening, implementation of specific transmission- based precautions, monitoring of residents and staff molecular viral testing, hand hygiene, use of PPE's, social distancing, disinfection/ terminal cleaning of equipment and environment in accordance with all applicable laws and regulations.</i></p> <p><i>- Hopkins Center will refer to its policies and procedure to provide guidance with process implementation and compliance. Policies will be reviewed annually and revised as needed.</i></p>
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Response Tasks for <u>all Infectious Disease Events</u>:	
X Recommended	<p>The facility will implement the following procedures to obtain and maintain current guidance, signage, advisories from the NYSDOH and the U.S. Centers for Disease Control and Prevention (CDC) on disease-specific response actions, e.g., including management of residents and staff suspected or confirmed to have disease:</p> <p><i>-Hopkins Center shall use any signage, guidance, and advisories from the NYSDOH and the U.S Center for Disease Control and Prevention (CDC) on disease-specific response actions to mitigate spread. Signage will be posted at locations that are highly visible. Guidance and advisories will serve as guide during reinsrvce and training of HCRHC personnel, and when disseminating information to residents and families.</i></p>
X Required	<p>The facility will assure it meets all reporting requirements for suspected or confirmed communicable diseases as mandated under the New York State Sanitary Code (10 NYCRR 2.10 Part 2), as well as by 10 NYCRR 415.19. (see Annex K of the CEMP toolkit for reporting requirements).</p> <p><i>-Any outbreak or a significant increase in nosocomial infections above the norm or baseline in Hopkins Center residents or employees will be reported to NYSDOH. This will be done by trained staff members electronically via the Nosocomial Outbreak Reporting Application (NORA). Reports will also be made to the New York State Department of Health's Bureau of Communicable Disease Control and need to be submitted within 24 hours of diagnosis. However, Some diseases warrant prompts action and will be reported immediately via phone.</i></p> <p><i>Hopkins Center will refer to its policies and procedure on infectious diseases reporting, including Covid -19 infection reporting.</i></p>

<p>X Required</p>	<p>The facility will assure it meets all reporting requirements of the Health Commerce System, e.g. HERDS survey reporting.</p> <p><i>-All reporting requirements will be done by trained staff member's electronically via the Nosocomial Outbreak Reporting Application (NORA). Reports will also be made to the New York State Department of Health's Bureau of Communicable Disease Control and need to be submitted within 24 hours of diagnosis, However, some diseases warrant prompt action and will be reported immediately via phone.</i></p> <p><i>Hopkins Center will refer to its Policies and procedure in place to ensure safe process and compliance.</i></p>
<p>X Recommended</p>	<p>The Infection Control Practitioner will clearly post signs for cough etiquette, hand washing, and other hygiene measures in high visibility areas. Consider providing hand sanitizer and face/nose masks, if practical.</p> <p><i>-Signage on: cough etiquette, hand washing, and other hygiene measures were posted on high visibility areas in the building - units, entrance of the facility, front desks, elevators basement and dining rooms etc. Hand sanitizers and PPEs were made easily accessible to all HCRHC staff, residents and other individuals granted access to the building.</i></p>
<p>X Recommended</p>	<p>The facility will implement the following procedures to limit exposure between infected and non-infected persons and consider segregation of ill persons, in accordance with any applicable NYSDOH and CDC guidance, as well as with facility infection control and prevention program policies.</p> <p><i>-Hopkins Center strictly adheres to implementing infection control measures as per policies and procedures on transmission –based precautions, surveillance, screening and staff work restrictions.</i></p> <p><i>-Please refer to Hopkins Center policies and procedure on same. Policies will be reviewed annually and revised as needed.</i></p>
<p>X Recommended</p>	<p>The facility will implement the following procedures to ensure that as much as is possible, separate staffing is provided to care for each infection status cohort, including surge staffing strategies:</p> <p><i>-Department Directors and Staffing Coordinator assigns dedicated staff members to the unit(s) with confirmed and suspected residents with infections. Staff members may take their break on the unit and they will be restricted from going to other floors/areas in the building. Please refer to Emergency Staffing Policy for surge staffing protocol</i></p> <p><i>Hopkins Center will refer to its policies and procedure in place to ensure continuity of process and compliance.</i></p>
<p>X Recommended</p>	<p>The facility will conduct cleaning/decontamination in response to the infectious disease in accordance with any applicable NYSDOH, EPA and CDC guidance, as well as with facility policy for cleaning and disinfecting of isolation rooms.</p> <p><i>-Hopkins Center will follow its policy and procedure on terminal cleaning, disinfection of</i></p>

	<p><i>equipment and environment. EPA approved disinfectant will be used and contact time will be followed. Fogging of units, rooms and offices will be done as per schedule by the environmental services personnel</i></p> <p><i>Hopkins Center will refer to its policies and procedure in place to ensure implementation of process as per protocol and compliance.</i></p>
X Required	<p>The facility will implement the following procedures to provide residents, relatives, and friends with education about the disease and the facility's response strategy at a level appropriate to their interests and need for information.</p> <p><i>-Hopkins Center will disseminate pertinent information about the disease and the facility's response strategy via website postings, signage placed at highly visible areas such as the entry door and units, phone calls to families, and during resident's visitation by clinical staff.</i></p>
X Required	<p>Subject to any superseding New York State Executive Orders and/or NYSDOH guidance that may otherwise temporarily prohibit visitors, the facility will advise visitors to limit visits to reduce exposure risk to residents and staff.</p> <p>If necessary, and in accordance with applicable New York State Executive Orders and/or NYSDOH guidance, the facility will implement the following procedures to close the facility to new admissions, limit visitors when there are confirmed cases in the community and/or to screen all permitted visitors for signs of infection:</p> <p><i>Hopkins Center will refer to its policies and procedure on: Visitation, Reopening of visitation, Residents admission and readmission to the facility- in accordance with the most current CMS regulations/executive orders/ recommendations by CDC- to ensure continuity of process and compliance.</i></p>
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Additional Response Tasks for <u>Pandemic Events</u>:	
X Recommended	<p>Ensure staff are using PPE properly (appropriate fit, don/doff, appropriate choice of PPE per procedures)</p> <p><i>-All staff members are continuously educated, trained and competencies verified on the use of PPE's and hand hygiene regularly and as needed.</i></p> <p><i>Hopkins Center will refer to its policies and procedure in place to ensure continuity of process and compliance to IC standards of practice.</i></p>
X Required	<p><i>In accordance with PEP requirements</i>, the facility will follow the following procedures to post a copy of the facility's PEP, in a form acceptable to the commissioner, on the facility's public website, and make available immediately upon request:</p> <p><i>-Hopkins Center will post the required PEP on the facilities website by September 15th 2020. A copy will be available upon request.</i></p> <p><i>Hopkins Center will refer to its policies and procedure on same that will serve as guidance</i></p>

	<i>and protocol for implementation of process.</i>
X Required	<p>In accordance with PEP requirements, the facility will utilize the following methods to update authorized family members and guardians of infected residents (i.e., those infected with a pandemic-related infection) at least once per day and upon a change in a resident's condition:</p> <p><i>-Hopkins Center assigns the Infection Preventionist/ Infection Coordinator, assigned licensed nurse/ attending physician to notify the authorized family members and/or guardian of the infected residents from infected related infection / changes in condition daily, via telephone conference/call.</i></p> <p><i>Hopkins Center will refer to its Policies and procedure in place to ensure safe process and compliance.</i></p>
X Required	<p>In accordance with PEP requirements, the facility will implement the following procedures/methods to ensure that all residents and authorized families and guardians are updated at least once a week on the number of pandemic-related infections and deaths at the facility, including residents with a pandemic-related infection who pass away for reasons other than such infection:</p> <p><i>-Hopkins Center updates authorize family members and guardians via web site postings on the number of pandemic-related infections and deaths at the facility, including residents with a pandemic-related infection who pass away for reasons other than such infection. Frequency of notification is as per CMS current requirements. Facility contact number and e- mail were also provided, should any authorized families/individuals require further information/clarification.</i></p> <p><i>Hopkins Center will refer to its policies and procedure on same for process implementation and compliance.</i></p>
X Required	<p>In accordance with PEP requirements, the facility will implement the following mechanisms to provide all residents with no cost daily access to remote videoconference or equivalent communication methods with family members and guardians.</p> <p><i>-Hopkins Center updates the family members using facetime, video calls, and any other social media means to continue the line of communication between the residents and the family members regularly. Authorized family members, guardians, and residents request video calls through either unit- social worker or administrative concierge staff.</i></p>
X Required	<p>In accordance with PEP requirements, the facility will implement the following process/procedures to assure hospitalized residents will be admitted or readmitted to such residential health care facility or alternate care site after treatment, in accordance with all applicable laws and regulations, including but not limited to 10 NYCRR 415.3(i)(3)(iii), 415.19, and 415.26(i); and 42 CFR 483.15(e):</p> <p><i>-Hopkins Center will readmit residents previously admitted to the facility, in accordance with all applicable laws and regulations, including but not limited to 10 NYCRR 415.3(i)(3)(iii), 415.19, and 415.26(i); and 42 CFR 483.15(e):</i></p>

<p>X Required</p>	<p><i>In accordance with PEP requirements</i>, the facility will implement the following process to preserve a resident's place in a residential health care facility if such resident is hospitalized, in accordance with all applicable laws and regulations including but not limited to 18 NYCRR 505.9(d)(6) and 42 CFR 483.15(e):</p> <p><i>-Hopkins Center will readmit residents previously admitted to the facility.</i></p>
<p>X Required</p>	<p><i>In accordance with PEP requirements</i>, the facility will implement the following planned procedures to maintain at least a two-month (60-day) supply of personal protective equipment (including consideration of space for storage) <u>or any superseding requirements under New York State Executive Orders and/or NYSDOH regulations governing PPE supply requirements executed during a specific disease outbreak or pandemic</u>. As a minimum, all types of PPE found to be necessary in the COVID pandemic should be included in the 60-day stockpile.</p> <p>This includes, but is not limited to:</p> <ul style="list-style-type: none"> - N95 respirators - Face shield - Eye protection - Gowns/isolation gowns - Gloves - Masks - Sanitizer and disinfectants (meeting EPA Guidance current at the time of the pandemic) <p><i>-Hopkins Center adapted the Center for Disease Control (CDC) guidance on Optimizing PPE and other supply strategies. Currently, in addition to the daily par level, the facility has in storage of a two-month (60-day) supply of personal protective equipment.</i></p> <p>Conventional capacity consists of providing resident care without any change in daily contemporary practices. CDC'S optimization strategies for PPE offer options for use when PPE supplies are stressed, running low, or absent. Contingency Strategies will help stretch PPE supplies when shortages are anticipated, for example, if facilities have sufficient supplies now but are likely to run out soon. Crisis Strategies will be considered during severe PPE shortages and will be used with the contingency options to help stretch available supplies for the most critical needs. As PPE availability returns to normal, healthcare facilities should promptly resume standard practices.</p> <p>-</p> <p><i>Hopkins Center has been in agreement with Gerimedex, vendor that will ensure deliveries and replenishment of critical supplies .</i></p> <p><i>Currently, in addition to the daily par level, the facility has in storage of a two-month (60-day) supply of personal protective equipment.</i></p> <p><i>Hopkins Center will refer to its Policies and Procedures in place to ensure safe process and compliance.</i></p>
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Recovery for all Infectious Disease Events

<p>X Required</p>	<p>The facility will maintain review of, and implement procedures provided in NYSDOH and CDC recovery guidance that is issued at the time of each specific infectious disease or pandemic event, regarding how, when, which activities/procedures/restrictions may be eliminated, restored and the timing of when those changes may be executed.</p> <p><i>-Hopkins Center will implement, maintain and review periodically the guidance and procedures provided by NYSDOH and CDC. re: recovery guidance that is issued at the time of each specific infectious disease or pandemic event, regarding how, when, which activities/procedures/restrictions may be eliminated, restored and the timing of when those changes may be executed.</i></p>
<p>X Required</p>	<p>The facility will communicate any relevant activities regarding recovery/return to normal operations, with staff, families/guardians and other relevant stakeholders.</p> <p><i>-Hopkins Center shall communicate with all staff members, authorized families, and guardians all necessary guidance and procedures regarding recovery and return to normal operations from NYSDOH and CDC, via email, website postings, telephone calls, video conference .</i></p>
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