To ensure the safety of both staff and patients, every healthcare facility in New York must take the following safety measures before reopening elective procedures. These detailed standards were developed from NYSNA’s broader reopening plan How to Move New York Forward, available online: bit.ly/reopenwithcare.

**ROBUST ENVIRONMENTAL CONTROLS**

- **All COVID-positive patients will be cohorted in separate units** with enhanced PPE standards, and administrative controls will be established to ensure efficient cohorting of walk-ins. All patients and visitors must be tested upon entering the hospital and required to wear surgical masks.

- The hospital must retain many of the current restrictions on patient visitation. Visitor policies must be clearly communicated to the public, visitors must be strictly tracked, with time restrictions on their visit, and there must be adequate non-nursing staff to enforce the policy. We cannot return to open-door unlimited visitation policies. Regular access for NYSNA reps will continue based on discussions at Labor Management meetings to ensure safety.

- **Elective procedures must be phased in only as the COVID-19 census falls**, and suspended automatically if it starts to rise again. All patients must be tested 24 hours prior to the procedures. COVID-specific standard precautions are instituted for operating rooms and labor and delivery.

- NYSNA and the Employer will conduct assessments of the entire facility’s HVAC and environmental control system, to determine a priority list for remediation and improvement. The goal will be to use ventilation and negative air filtration more effectively during future outbreaks. Pilot projects to test out new environmental controls should be conducted throughout Summer 2020.

- NYSNA and the Employer will conduct assessments of donning, doffing, and decontamination areas on remaining COVID units and make any necessary improvements to the space allocated and existing protocols. Pilot projects on converting new areas into donning/doffing spaces on COVID units and in procedural areas should be conducted Summer 2020.