

**Implementation Plan for Reopening
In Accordance with the Pennsylvania Department of Health's
Interim Guidance for Skilled Nursing Facilities During COVID-19**

FACILITY INFORMATION	
This section contains the name and location of the facility along with contact information for an individual designated by the facility. That individual does not have to be the Nursing Home Administrator but should be someone available to respond to questions regarding the Implementation Plan.	
1. FACILITY NAME	
Communities at Indian Haven	
2. STREET ADDRESS	
1675 Saltsburg Avenue	
3. CITY	4. ZIP CODE
Indiana	15701
5. NAME OF FACILITY CONTACT PERSON	6. PHONE NUMBER OF CONTACT PERSON
Kimberly Cobaugh, RN, C., Administrator	724-465-3900

DATE AND STEP OF REOPENING
The facility will identify the date upon which all prerequisites will be met for reopening and the Step at which the facility will enter reopening. Those facilities that experienced a significant COVID-19 outbreak will identify the date the Department of Health survey was conducted (that is required prior to reopening).
7. DATE THE FACILITY WILL ENTER REOPENING
8/12/2020
8. SELECT THE STEP AT WHICH THE FACILITY WILL ENTER REOPENING – EITHER STEP 1 OR STEP 2 (CHECK ONLY ONE)
<input checked="" type="checkbox"/> Step 1 <i>The facility must meet all the Prerequisites, including the baseline universal test for COVID-19 administered to staff and residents (in accordance with the <u>June 8, 2020, Order of the Secretary of Health</u>)</i>
<input type="checkbox"/> Step 2 <i>The facility must meet all the Prerequisites, including the baseline universal test for COVID-19 administered to staff and residents (in accordance with the <u>June 8, 2020, Order of the Secretary of Health</u>)</i> AND <i>Have the absence of any new facility onset of COVID-19 cases for 14 consecutive days since baseline COVID-19 testing</i>
9. HAS THE FACILITY EXPERIENCED A SIGNIFICANT COVID-19 OUTBREAK? (IF NO, SKIP TO #11)
NO
10. DATE THE FACILITY WAS SURVEYED BY THE DEPARTMENT OF HEALTH TO ENSURE THE FACILITY IS ADEQUATELY PREVENTING TRANSMISSION OF COVID-19
7/1/2020

STRATEGY FOR TESTING, COHORTING, PERSONAL PROTECTIVE EQUIPMENT, AND STAFFING

To ensure the facility has taken appropriate measures to protect residents and staff, descriptions of those strategies are required in this section (prerequisites to reopening).

11. DATE RANGE FOR THE BASELINE UNIVERSAL TEST ADMINISTERED TO STAFF AND RESIDENTS (BETWEEN MAY 24, 2020 AND JULY 24, 2020) IN ACCORDANCE WITH THE JUNE 8, 2020, ORDER OF THE SECRETARY OF HEALTH

6/22/2020 to 6/23/2020

12. DESCRIBE THE CAPACITY TO ADMINISTER COVID-19 DIAGNOSTIC TESTS TO ALL RESIDENTS SHOWING SYMPTOMS OF COVID-19 AND TO DO SO WITH 24 HOURS

Registered Nurses were trained by Indiana Regional Medical Center to administer the Covid 19 nasopharyngeal swab test to all Residents and Employees. Tests can be transported directed to the hospital lab upon completion with 24-hour turnaround time under physician orders of the Medical Directors, Matthew Klain and Jamil Ahmed. Facility completes resident assessments to monitor for elevated temperature, lung auscultation, incidence of cough, nasal congestion, lethargy to assure early intervention with any symptoms. The facility is contacted upon positive lab finding by telephone and fax.

13. DESCRIBE THE CAPACITY TO ADMINISTER COVID-19 DIAGNOSTIC TESTS TO ALL RESIDENTS AND STAFF IF THE FACILITY EXPERIENCES AN OUTBREAK

The facility received extra test kits from the Department of Health with 50 remaining and Indiana Regional Medical Center (IRMC) Lab provides test kits upon request via lab delivery or facility pick up. The lab has a 24-48 hour turnaround. Because IRMC has limited capacity, the facility is also utilizing other vendors to complete testing. Local Med Express/Urgicare can provide tests seven days a week with a turn around time of three to five days via LabCorp.

14. DESCRIBE THE CAPACITY TO ADMINISTER COVID-19 DIAGNOSTIC TESTS TO ALL STAFF, INCLUDING ASYMPTOMATIC STAFF

All newly hired staff will receive a Covid 19 swab test prior to hire. The facility Registered Nurses will perform the tests for all employee needs with analysis by Indiana Regional Medical Center Lab. Employees may not begin employment until a negative covid 19 result is received. Because IRMC has limited capacity, the facility is also utilizing other vendors to complete testing. The facility will also utilize two local pharmacies: Rite Aid and CVS for testing.

15. DESCRIBE THE PROCEDURE FOR ADDRESSING NEEDED TESTING OF NON-ESSENTIAL STAFF AND VOLUNTEERS

All non-essential staff and volunteers will be tested at the facility by a Registered Nurse. The tests will be processed by Indiana Regional Medical Center lab. A policy was implemented to educate and inform all volunteers and non-essential staff of the Covid 19 testing requirements. The Medical Directors will provide physician orders for the testing of these individuals. No volunteers or non-essential staffs will be permitted into the facility until a negative test results are obtained and daily screening of temperature/questionnaire completed.

16. DESCRIBE THE PROCEDURE FOR ADDRESSING RESIDENTS OR STAFF THAT DECLINE OR ARE UNABLE TO BE TESTED

Residents that decline or are unable to be tested will be placed in the yellow zone and isolated with full precautions including staff wearing gown, mask, goggles/face shield, gloves.

Staff that refuse to have a covid 19 test are not permitted to work as it is a condition employment at Communities at Indian Haven.

STRATEGY FOR TESTING, COHORTING, PERSONAL PROTECTIVE EQUIPMENT, AND STAFFING

17. DESCRIBE THE PLAN TO COHORT OR ISOLATE RESIDENTS DIAGNOSED WITH COVID-19 IN ACCORDANCE WITH PA-HAN-509 PURSUANT TO SECITON 1 OF THE *INTERIM GUIDANCE FOR SKILLED NURSING FACILITIES DURING COVID-19*.

Communities at Indian Haven has a designated red zone that consists of private and semi-private rooms with dedicated staff with a separate entrance. The red zone consists of two private resident rooms with isolation set up in each room with floor to ceiling vinyl zippered barrier. The unit has the capacity to expand to five additional private rooms (108,109,110, 111 and 113and six semi-private rooms (104,105, 106, 107, 115 and 117, if cohorting of residents is necessary. The unit has a designated bathroom at the nurse's station and a designated employee lounge employee for red zone designated staffs. The Red zone has signage on closed entrance/exit doors of the unit. All admissions and readmissions to the facility will be place on this unit, in the yellow zone, utilizing full PPE (Personal Protective Equipment – gown, gloves, goggles, foot covers, head covers) . Residents will remain in full precautions until CDC and DOH criteria are met for discontinuing precautions.

18. DESCRIBE THE CURRENT CACHE OF PERSONAL PROTECTIVE EQUIPMENT (PPE) AND THE PLAN TO ENSURE AN ADEQUATE SUPPLY OF PPE FOR STAFF (BASED ON THE TYPE OF CARE EXPECTED TO BE PROVIDED)

The facility currently has 16,600 procedure masks, 4,256 N95 masks, 63,420 gloves, 5,620 disposable gowns, 243 washable gowns, 50 reusable face shields and 214 disposable face shields, Fit kit test, 1, 6 bottles sweet, 16 gallons of alcohol based hand sanitizer, 210 bottles of 6 ounce alcohol based hand sanitizer and 1950 pairs of shoe covers. The facility continues to order weekly supplies from multiple vendors. Indiana County Emergency Management has been providing facility with extra supplies as available bi-weekly. Inventory is monitored on a weekly basis.

19. DESCRIBE THE CURRENT STAFFING STATUS AND THE PLAN TO ENSURE NO STAFFING SHORTAGES

Current Staffing is at 3.1 to 3.6 PPD(Per Patient Day) .Facility is staffed to meet resident needs. To augment staffing during crises staffing shortage due to the pandemic, the facility has three Temporary Nurse Aides working on our units, one who just completed certified nurse aide training, Seven additional departmental employees completed the temporary Nurse Aide Program and competencies to assist with care. Nursing Administration and Administor are Registered Nurses and will assist with providing resident care and services as needed. The facility is pursuing contracts with staffing agencies, in the event additional staffing is needed.

20. DESCRIBE THE PLAN TO HALT ALL REOPENING FACILITIES IF THE COUNTY IN WHICH THE FACILITY IS LOCATED IS REVERTED TO A RED PHASE OF THE GOVERNOR'S REOPENING PLAN

All Residents, Family and Staff will be contacted via telephone or email and letter regarding halt of reopening immediately upon notification of the Governor or Secretary of Health of Pennsylvania. This would include the NO visitations or communal dining and group activities.

SCREENING PROTOCOLS

In each block below, describe the screening protocol to be used including where screening occurs, method of determining symptoms and possible exposure, and action taken if screening reveals possible virus.

21. RESIDENTS

All residents are screened each shift in their room via a Covid Assessment that includes vital signs (temperature, blood pressure, pulse, respirations), auscultation of lung sounds, any cough, lethargy, other symptoms by PA Department of Health and the CDC. If a resident displays any signs and symptoms of Covid 19, the resident will be moved to the yellow zone and placed in full isolation precautions, the physician will be notified and a Covid 19 test will be obtained. The family will be notified of the condition change. If the test is positive for Covid 19, the resident will be transferred to the red zone and placed in full isolation precautions and will remain in isolation until criteria to discontinue transmission-based precautions is met.

SCREENING PROTOCOLS

22. STAFF

All Staff are screened prior to and at the end of their shift. The screening consists of temperature (with no entrance at 100.4 to units), symptom monitoring, questionnaire regarding exposure risks, testing status, travel, compliance with PPE (mask, gloves, gown) and social distancing of six feet and hand hygiene upon entrance and exit of the facility. If the screening reveals signs/symptoms of Covid 19, the employee is sent home and a test is scheduled. If employees become ill during work hours, they will be sent home and must see their Primary Care Physician or Med Express. ALL STAFF must wear a MASK at all times in the facility. Staff will not be permitted to return to work until CDC and DOH criteria to return to work are met.

23. HEALTHCARE PERSONNEL WHO ARE NOT STAFF

The criteria for Staff in 22 are also in effect for healthcare personnel who are not staff.

24. NON-ESSENTIAL PERSONNEL

The criteria for Staff in 22 above are also in effect for Non-essential personnel.

25. VISITORS

All visitors must enter through the rear entrance of the facility. The facility has visual/auditory monitors at all entrances to see and speak to anyone at the doors. They must explain the purpose of the visit and who they are here to see prior to entrance. Staff must allow admittance to the facility via the door system. Visitors must have the same screenings as staff as well as education. Masks are required for entrance and remain on during the visit. The facility will permit two visitors per resident visit in the designated visiting area by appointment only if there are no signs/symptoms that could indicate covid 19 or other type of infection. Staff will escort the visitor to the resident. All visitors will be screened prior to and at the end of their visit. All visitors will be required to enter in the rear of the facility to conduct screening of symptom monitoring, exposure risk, testing status, PPE compliance, social distancing of six feet, hand hygiene and temperature taken. If visitor displays any symptoms, of Covid 19, they will be denied access to the facility and instructed to see their family physician or go to the Med Express. Visitors are advised to monitor for symptom development for 14 days post visit and to contact facility immediately with symptom occurrence. Masks will be provided by the facility if the visitor does not have a mask prior to entrance.

26. VOLUNTEERS

Volunteers will utilize the same protocol as Staff in 22 above

COMMUNAL DINING FOR RESIDENTS UNEXPOSED TO COVID-19

Communal dining is the same for all steps of reopening so there is no need to differentiate among the three steps.

COMMUNAL DINING FOR RESIDENTS UNEXPOSED TO COVID-19

27. DESCRIBE COMMUNAL DINING MEAL SCHEDULE, INCLUDING STAGGERED HOURS (IF ANY)

Facility Plan developed to seat only two residents per table, space of at least six feet apart in the main dining room (outside of kitchen), and social dining rooms (300 dayroom) for all three meals. Residents will be for preference to dine each meal in the Main dining area and first choice will attempt to be honored to maintain six residents per setting. Forty-five minutes will be allotted per setting, tables will be disinfected between settings by Dietary staff. We will begin two settings per meal with six residents, with two per table, in phase I in the Green Zone (300 and 200 units). All residents will receive hand hygiene before and after each meal. Staff serving and assisting will wear masks and practice hand hygiene between residents. . Residents will wear masks to and from the dining room. Fine Dining (Independent, minimal assistance with set up) designated times are as follows: Breakfast 8:00 AM and 8:45 AM. Lunch 11:40 AM and 12:20 PM Dinner 4:40 PM and 5:35 PM. The tables will be cleaned after each setting by the dietary staff using the appropriate disinfectant. Social Dining (one to one assistance, cueing) will begin on the 300-unit activity room with six residents, two per table, six feet apart, three tables. Hand hygiene will be completed before and after the meal by staffs. Staffs will assist with one to one feeding, one per table. Post meal grooming will be done prior to transporting back to rooms. Staff will clean and disinfect tables after each meal. Residents on the RED and YELLOW zones will not participate in communal dining and room service will be provided for all meals. Nostalgia Way (400) is practicing social distancing at tables and all residents eat in the two-day rooms next to the nurse's station. Residents will be required to wear a mask to and from the dining room and while in the dining unless they are eating.

28. DESCRIBE ARRANGEMENT OF TABLES AND CHAIRS TO ALLOW FOR SOCIAL DISTANCING

Tables will be spaced six feet apart with two residents per table sitting across from each other. There will be markings on the floor as the six feet of social distancing.

29. DESCRIBE INFECTION CONTROL MEASURES, INCLUDING USE OF PPE BY STAFF

All staff will wear masks and complete hand hygiene prior to assisting residents. Tables/chairs will be disinfected after each meal by staff using gloves. There will be a 10 to 15 minutes break between each meal setting. Staffs assisting two residents will hand sanitize between assisting each resident. All Residents will mask to and from the dining areas. Cleaning and disinfecting products will be used by staffs wearing gloves to clean as needed.

30. DESCRIBE ANY OTHER ASPECTS OF COMMUNAL DINING DURING REOPENING

Pre and Post meal grooming will be completed for residents. Residents will wear a mask, if capable upon entering and exiting dining areas. All residents will have a defined time for meals and defined dining area which will be coordinated with them prior to the start of dining.

ACTIVITIES AND OUTINGS

In each block below, describe the types of activities that will be planned at each step and the outings that will be planned at Step 3 (an all-inclusive list is not necessary). Include where they will be held and approximately how many residents will be involved. Describe how social distancing, hand hygiene, and universal masking will be ensured. Also include precautions that will be taken to prevent multiple touching of items such as game pieces.

ACTIVITIES AND OUTINGS

31. DESCRIBE ACTIVITIES PLANNED FOR STEP 1 (FIVE OR LESS RESIDENTS UNEXPOSED TO COVID-19)

Activities will occur on individual units with social distancing and proper infection control practices being followed. Residents may sit in doorways wearing a mask to engage in activities. Items used will be disposable or easily disinfected such as paper bingo cards and macaroni markers, individual pen/pencils for adult coloring, individual craft projects and disposable bowls /cups. Activity will be limited to five or less being socially distanced with two residents per table in green zone units in the Main Dining room, Activity room on 300 or lounges on 200/400. All residents will have hands cleaned pre post activity and wear masks. Items will be provided to residents in their rooms on the red and yellow zone for activities as per their interests and talents individually by the Activity staffs. No communal activities will be permitted on the red and yellow zones. Any tables used will be cleaned and disinfected by the activity staff after completion of the activity.

32. DESCRIBE ACTIVITIES PLANNED FOR STEP 2 (TEN OR LESS RESIDENT UNEXPOSED TO COVID-19)

Activities will increase the number of participants in communal activities to ten with continuing infection control practices as in #31. They will continue to wear masks. The main dining area will be used, outdoor patio/gazebo and lounges for groups maintaining social distancing. Activities will include increased physical activities as shuffle board, bowling, ring toss, parachute, balloon pop. All items will be sanitized in between residents use with disinfecting product by activity staff. All residents will use hand sanitizer before and after activity.

33. DESCRIBE ACTIVITIES PLANNED FOR STEP 3

Activities will resume with residents throughout the facility as they wish to attend. Activity Director will meet with residents prior to completing the monthly calendar for their input. Calendars will be placed in each room and on the bulletin board. Continue hand sanitizing activity pre and post each activity with continued use of masks. All items used will be disinfected or disposed of after use by the activity staffs. Activities will occur in the Activity Room of 300 unit, Main Dining Room and in Lounges on Green Zones. Staff will assure Social Distancing is maintain when residents arrive for the activity of at least six feet apart. Residents will continue to wear masks during activities.

34. DESCRIBE OUTINGS PLANNED FOR STEP 3

Weather permitting, Residents may go on van outings as appropriate for interest and availability of assistance. Residents must wear a mask during all planned outings. Continued practice of hand sanitizer pre and post trip for the Residents. The van driver will sanitize all handles, seats, and van transport wheelchair after each Resident use. The interior of the van will be disinfected with vindicator spray and allow to remain empty for a minimum of fifteen minutes .

NON-ESSENTIAL PERSONNEL

In Step 2, non-essential personnel deemed necessary by the facility are allowed (in addition to those already permitted in Section 4 of *Interim Guidance for Skilled Nursing Facilities During COVID-19*). In Step 3, all non-essential personnel are allowed. Screening and additional precautions including social distancing, hand hygiene, and universal masking are required for non-essential personnel.

35. DESCRIBE THE LIMITED NUMBER AND TYPES OF NON-ESSENTIAL PERSONNEL THAT HAVE BEEN DETERMINED NECESSARY AT STEP 2

Hair Care Services; Mail service, UPS, FedEx

NON-ESSENTIAL PERSONNEL

36. DESCRIBE HOW SOCIAL DISTANCING, HAND HYGIENE, AND UNIVERSAL MASKING WILL BE ENSURED FOR NON-ESSENTIAL PERSONNEL AT STEPS 2 AND 3

The barber/beauty services person will return after providing a negative covid 19 testing and education regarding infection control as well as mask wearing. Only one resident at a time will be permitted in the shop. The resident will be transported by staff to shop wearing a mask at a scheduled appointment time. The beautician will close the door of the shop, wear a mask and gloves to provide service. After the service is completed, the staff will be notified and the resident returned to her/his unit. The items and area will be disinfected between each resident by the beautician. The mail will be retrieved by office staff wearing gloves and a mask. It will be sorted and delivered by Activity staffs wearing gloves and a mask to residents.

37. DESCRIBE MEASURES PLANNED TO ENSURE NON-ESSENTIAL PERSONNEL DO NOT COME INTO CONTACT WITH RESIDENTS EXPOSED TO COVID-19

Non-essential personnel will not be permitted on the red zone. If they enter a yellow zone, he/she must wear complete PPE and be escorted by staff and assisted to don and doff PPE> Residents who have signs and symptoms of respiratory illness or residents of the red/yellow zone may not receive barber/beauty services at the shop until the criteria are met for transmission-based precautions to be discontinued. Nursing staff will provide hair care to residents residing in the red and yellow zones.

VISITATION PLAN

For visitation to be permitted in Steps 2 and 3 of reopening (as described in Section 6 of *Interim Guidance for Skilled Nursing Facilities During COVID-19*), the following requirements are established. Screening and additional precautions including social distancing, hand hygiene, and universal masking are required for visitors.

38. DESCRIBE THE SCHEDULE OF VISITATION HOURS AND THE LENGTH OF EACH VISIT

Visits will be Monday to Friday from 10 AM to 5 PM. Additional visitation days and times can be arranged on a case by case basis especially for hospice, severely demented and acutely ill Residents. Each visit will be 30 minutes with up to two visitors. Advance of a 24-Hour Notice will be required.

39. DESCRIBE HOW SCHEDULING VISITORS WILL OCCUR

Visits will be scheduled via the main facility number at 724-465-3900. A schedule book will be maintained and all visits recorded with name of resident, family member and time. A form will be placed on each unit so staff can prepare Resident for the visit and transport.

40. DESCRIBE HOW VISITATION AREA(S) WILL BE SANITIZED BETWEEN EACH VISIT

Areas will be disinfected with appropriate disinfectant after the visitor leaves (bench, shield) by staff person monitoring visit

41. WHAT IS THE ALLOWABLE NUMBER OF VISITORS PER RESIDENT BASED ON THE CAPABILITY TO MAINTAIN SOCIAL DISTANCING AND INFECTION CONTROL?

Two visitors who have been screened prior to visit at rear entrance, and have an appointment can participate in visitation. Children are permitted to visit when accompanied by an adult visitor, within the number of allowable visitors as determined by the facility. Adult visitors must be able to manage children, and children older than 2 years of age must wear a facemask during the entire visit. Children must also maintain strict social distancing.

42. DESCRIBE THE ORDER IN WHICH SCHEDULED VISITS WILL BE PRIORITIZED

Priority will be given to long term care residents first on a first come, first serve basis and those who are end of life (hospice, palliative care) and with Alzheimer's or similar diagnoses and residents experiencing feelings of loneliness

VISITATION PLAN

STEP 2

43. DESCRIBE HOW THE FACILITY WILL DETERMINE THOSE RESIDENTS WHO CAN SAFELY ACCEPT VISITORS AT STEP 2 (CONSIDERING SUCH SAFETY FACTORS AS EXPOSURE TO OUTDOOR WEATHER AND TRANSPORTING RESIDENT TO VISITOR LOCATION)).

Residents with a negative Covid 19 status and free of respiratory illness will be eligible to safety accept visitors

Red and Yellow zones have restriction of visitors. Any resident who reside on the red and yellow Zones may use tablets to video chat or families may have window visits. Residents of the green zones are able to have visits in the outdoor visit area located in the front of the building which is a covered area. Residents must wear a mask when being transferred to the visiting area. Social distancing of at least six feet will be maintained and a plexiglass shield will be placed between the resident and visitor. A bench will be provided for the visitor in the area. The visitor must be screened at the rear entrance of the facility with temperature taken and appropriate screening related to Covid 19 questionnaire. If there are no issues, the visitor will be given the approval to drive to the front visiting area after hand sanitizing with a mask on. Disposable masks will be available if the visitor does not have a mask. Staff will reiterate that a MASK is Mandatory to visit and to remain in the designated visit location only. The visit will be a thirty-minute interval and must be scheduled prior to the visit with the facility front office. Alcohol based hand sanitizer will be available and used after the visit is completed.

44. DESCRIBE THE OUTDOOR VISITATION SPACE FOR STEP 2 TO INCLUDE THE COVERAGE FOR SEVERE WEATHER, THE ENTRANCE, AND THE ROUTE TO ACCESS THE SPACE T

All Visitors must first report to the rear of the building entrance for the temperature check and screening questionnaire. This area will have a list of all pre-approved visitors. The facility will provide various locations for visitation. The residents residing in the green zones will have visitation in the courtyard on the 400 unit which has a retractable awning with entrance on the end of the unit exit door and porch area which has a roof over it for 300 unit with the entrance at the rear of the building then proceed out the upper coded door. All visitors must be escorted directly to the visiting area by staff where there loved one will be waiting.

A staff member will be present for monitoring to assure social distancing is maintained at all visits. The staff member will maintain a distance to assure privacy during the visit. In the event of severe weather, we will encourage visitors to stay home for the protection of the health of the Residents. If the visit is insisted upon with a scheduled time, a space will be provided in the front lobby or front conference room of the facility. The visitor will first be screened at the rear entrance to assure the safety of the residents. They will then enter at the front of the building and be directed to the assigned area. Video chats and facetime will remain available if an in-person visit cannot be facilitated. The visiting areas may have only 2 visitors with one resident at a time.

Nostalgia Way (400) unit Residents will be assessed on a case by case basis for visits based on cognition levels and behaviors to allow transport to a neutral zone (front lobby and front conference room.) If the resident is ineligible due to negative health issues, staff will take the visitor after the screening process to the resident room. The roommate will not be in the room. Visitors will be provided and assisted with PPE use during the visit. Both resident and visitor will be required to wear a mask, maintain social distancing and complete hand hygiene upon arrival and when they leave the visit.

45. DESCRIBE HOW A CLEARLY DEFINED SIX-FOOT DISTANCE WILL BE MAINTAINED BETWEEN THE RESIDENT AND THE VISITOR(S) DURING OUTDOOR VISITS

The area will have a marked place on the floor/surface area designating 6 feet

VISITATION PLAN

	<p>46. DESCRIBE THE INDOOR VISITATION SPACE THAT WILL BE USED IN THE EVENT OF EXCESSIVELY SEVERE WEATHER TO INCLUDE THE ENTRANCE AND THE ROUTE TO ACCESS THE SPACE</p> <p>Nonresident areas will be used and residents will be transported in the green zone by staff. The Front lobby entrance and front conference room areas will be utilized.</p>
	<p>47. DESCRIBE HOW A CLEARLY DEFINED SIX-FOOT DISTANCE WILL BE MAINTAINED BETWEEN THE RESIDENT AND THE VISITOR(S) DURING INDOOR VISITS</p> <p>Plexiglass screen panel and/or a marking on the floor, area designating six feet. Furnishings will be arranged six feet apart for the visit</p>
STEPS 3	<p>48. DESCRIBE HOW THE FACILITY WILL DETERMINE THOSE RESIDENTS WHO CAN SAFELY ACCEPT VISITORS AT STEP 3 (CONSIDERING SUCH SAFETY FACTORS AS TRANSPORTING RESIDENT TO VISITOR LOCATION)</p> <p>Resident must be free of any signs/symptoms of respiratory or other infection, not have an elevated temperature. Residents with a negative Covid 19 status and free of respiratory illness will be eligible to safely accept visitors. Resident can be safely transported via wheelchair, Luminex recliner or ambulate with walker, cane to the designated area with escort of staff, volunteer</p>
	<p>49. WILL OUTDOOR VISITATION BE UTILIZED AT STEP 3? IF NO, SKIP TO QUESTION #52</p> <p>Yes. Weather permitting</p>
	<p>50. DESCRIBE THE OUTDOOR VISITATION SPACE FOR STEP 3 TO INCLUDE THE COVERAGE FOR SEVERE WEATHER, THE ENTRANCE, AND THE ROUTE TO ACCESS THE SPACE (IF THE SAME AS STEP 2, ENTER "SAME")</p> <p>The facility will assess the temperature and weather conditions prior to scheduling outdoor visitations. If the temperatures are above 65 degrees and the resident wish to have an outdoor visitation, the facility will accommodate the request.</p>
	<p>51. DESCRIBE HOW A CLEARLY DEFINED SIX-FOOT DISTANCE WILL BE MAINTAINED BETWEEN THE RESIDENT AND THE VISITOR(S) DURING OUTDOOR VISITS (IF THE SAME AS STEP 2, ENTER "SAME")</p> <p>The facility has a plexiglass three panel shield that is five feet in height that will be placed in front of the resident. The visitor bench, seating area will be marked at six feet from the plexiglass screen. The visitor will be educated regarding the importance of social distancing.</p>
	<p>52. DESCRIBE THE INDOOR VISITATION SPACE THAT WILL BE USED TO INCLUDE THE ENTRANCE AND THE ROUTE TO ACCESS THE SPACE (IF THE SAME AS STEP 2, ENTER "SAME")</p> <p>Same</p>
	<p>53. DESCRIBE HOW A CLEARLY DEFINED SIX-FOOT DISTANCE WILL BE MAINTAINED BETWEEN THE RESIDENT AND THE VISITOR(S) DURING INDOOR VISITS (IF THE SAME AS STEP 2, ENTER "SAME")</p> <p>Staff will monitor and there will be appropriate markings on the floor noting six feet.</p>
	<p>54. FOR THOSE RESIDENTS UNABLE TO BE TRANSPORTED TO THE DESIGNATED VISITATION AREA, DESCRIBE THE INFECTION CONTROL PRECAUTIONS THAT WILL BE PUT IN PLACE TO ALLOW VISITATION IN THE RESIDENT'S ROOM</p> <p>Residents that are free of respiratory illness and negative covid status and unable to be transported to designated visiting areas will be eligible to safely accept visitors in their room. Staff will escort the visitor or visitors (2) after the screening process with hand sanitizing, with a mask in place, to the resident room. The room mate will not be in the room for the visit. Visitors will be assisted with PPE for use during their visit. During transport and for the duration of the visit, resident and visitors will wear a mask, maintain social distancing and complete hand hygiene before and after the visit. The facility will continue with Facetime and video chats until face to face visits can resume.</p>

VOLUNTEERS

In Step 2, volunteers are allowed only for the purpose of assisting with outdoor visitation protocols and may only conduct volunteer duties with residents unexposed to COVID-19. In Step 3, all volunteer duties may be conducted, but only with residents unexposed to COVID-19. Screening, social distancing, and additional precautions including hand hygiene and universal masking are required for volunteers.

55. DESCRIBE INFECTION CONTROL PRECAUTIONS ESTABLISHED FOR VOLUNTEERS, INCLUDING MEASURES PLANNED TO ENSURE VOLUNTEERS DO NOT COME INTO CONTACT WITH RESIDENTS EXPOSED TO COVID-19

All volunteers will be screened at the rear entrance with temperature, and screening questionnaire. If there is a negative finding, they will be denied entrance into the facility and directed to their Physician. All volunteers will be required to wear a mask during the visit and hand sanitize in and out of the facility, and between residents. Volunteers are restricted to the Green Zones ONLY. All volunteers will be educated regarding the red and yellow zone areas, which they are not permitted to enter.

All Volunteers will hand sanitize in and out of the facility and between any interaction with a Resident. All Volunteers will be educated on where the Red and Yellow zones are and that they are Not permitted access to these areas designated with signage. All volunteers are required to have a baseline Covid -19 test prior to returning to the facility. The facility will provide the test free of charge.

56. DESCRIBE THE DUTIES TO BE PERFORMED BY VOLUNTEERS DURING STEP 2

Volunteer activities will be assigned by the activity director or assist which will include: Assisting with inside and outdoor visits for residents of the Green zones (300 and 400) and screening in and out of staffs/visitors at the rear entrance.

ATTESTATION

The Nursing Home Administrator (NHA) is responsible for the accuracy of the Implementation Plan and the facility's adherence to it. Upon completion of blocks 1-57, the Implementation Plan should be printed and the signature and date affixed by the NHA in block 58.

57. NAME OF NURSING HOME ADMINISTRATOR

Kimberly D. Cobaugh RN, C. NHA

58. ATTESTATION

I attest that the information provided in this Implementation Plan is an accurate representation of the facts and that this facility will adhere to the Implementation Plan as written. I further attest that the county in which this facility is located is in a Yellow or Green phase per the Governor's Reopening Plan. This Implementation Plan will be posted on our website (if one exists) or made available to all residents, families, advocates such as the Ombudsman and the Department upon request. This facility will progress to the next step of reopening only when the criteria is met as described in the *Interim Guidance for Skilled Nursing Facilities During COVID-19*. If at any point during reopening the facility fails to meet the criteria for reopening, I will ensure the facility ceases reopening immediately. Further, if at any point during reopening this facility is operating under a contingency staffing plan, I will ensure the facility ceases reopening immediately.

SIGNATURE OF NURSING HOME ADMINISTRATOR

DATE