

The Lutheran Home at Johnstown Implementation Plan for Reopening In Accordance with the Pennsylvania Department of Health's Interim Guidance for Skilled Nursing Facilities and Personal Care Homes During COVID-19

The Lutheran Home at Johnstown includes both a licensed long term care nursing facility and a licensed personal care home. This Implementation Plan for reopening includes information for both the nursing facility and personal care home and is posted on the Allegheny Lutheran Social Ministries website and made can be made available to all residents, families, advocates such as the Ombudsman and the Department upon request.

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

The Lutheran Home at Johnstown

2. STREET ADDRESS

807 Goucher Street

807 Goucher Street	
3. CITY	4. ZIP CODE
Johnstown	15905
5. NAME OF FACILITY CONTACT PERSON	6. PHONE NUMBER OF CONTACT PERSON
Brenda Blough	814-255-6844

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

July 27, 2020

DATE AND STEP OF REOPENING

8. SELECT THE STEP AT WHICH THE FACILITY WILL ENTER REOPENING – EITHER STEP 1 OR STEP 2
(CHECK ONLY ONE)

X□ Step 1

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>)

☐ Step 2- Anticipated to begin 8/10/20

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>)

AND

Have the absence of any new facility onset of COVID-19 cases for 14 consecutive days since baseline COVID-19 testing

9. HAS THE FACILITY EXPERIENCED A SIGNIFICANT COVID-19 OUTBREAK? (IF NO, SKIP TO #11)

No, the personal care home and nursing home have not experienced any significant COVID-19 outbreak.

10. DATE THE FACILITY WAS SURVEYED BY THE DEPARTMENT OF HEALTH TO ENSURE THE FACILITY IS ADEQUATELY PREVENTING TRANSMISSION OF COVID-19

Infection Control Survey completed 6/15/20

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

July 8, 2020 to July 10, 2020 (test results were not reported until July 23, 2020 due to laboratory delays).

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

The Lutheran Home at Johnstown has the capacity to administer COVID-19 diagnostic tests to all residents showing symptoms of COVID-19 and to do so within 24 hours. Test kits are located on site and licensed nursing staff have been trained to perform the test.

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

The Lutheran Home at Johnstown has the capacity to administer COVID-19 diagnostic tests to all residents and staff if the facility experiences an outbreak. Test kits are on site and licensed nursing staff have been trained to perform the test within required time frames.

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

The Lutheran Home at Johnstown has the capacity to administer COVID-19 diagnostic tests to all staff including asymptomatic staff. Test kits are on site and licensed nursing staff have been trained to perform the test within required time frames.

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

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

VOLUNTEERS

The Lutheran Home at Johnstown has the capacity to test all non-essential personnel. Volunteers are not currently permitted in the licensed nursing facility or personal care home. However, in the future if volunteers are permitted the facility has the capacity to include any volunteers for required testing.

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

Procedures have been developed to address residents and staff that decline or are unable to be tested. Residents would be moved to the designated area and isolated for 14 days and monitored for signs and symptoms of COVID-19. Staff who decline testing are placed on administrative suspension and will not be reinstated until they comply with the testing requirement. If the employee fails to comply with the testing requirement the employee's position will not be held and the employment status will be changed to inactive.

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.

A co-horting plan was developed. Specific rooms have been identified in the licensed health care center on A Hall for care and treatment of suspected or diagnosed COVID positive residents. If it is determined that the medical needs can be met at the facility the resident(s) would be required to move to the designated area to minimize exposure to other residents. Depending on the number of residents diagnosed with COVID-19 the resident may have a private room or may be co-horted with another COVID positive resident.

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 Lutheran Home at Johnstown and owned and operated by Allegheny Lutheran Social Ministries (ALSM). The Lutheran Home at Johnstown campus has a current supply of PPE to adequately meet the resident and staff needs at this time. PPE inventory is monitored on a daily basis (M-F) to ensure adequate supplies are available. PPE orders are submitted to contracted vendors as needed. ALSM offers support with PPE procurement and has emergency PPE stock available if the individual site has an emergent need. PPE supplies have also been received by both state and federal programs.

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

At the current time there is adequate staffing. Per regulation a sustainable staffing plan has been developed that outlines staffing contingency plans for each department. The plan includes a combination of cross training from internal departments, utilizing staffing agencies, and other employees within ALSM. Ancillary departments will assist with tasks not required to be completed by certified nursing assistant or licensed personnel. Department managers and administrative staff will assist in various capacities and therapy and contract vendor staff are also available to assist as 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

Should Cambria County revert back to a Red Phase all residents, resident representatives, employees, non-essential personnel, vendors and required local and state agencies will be made aware of the immediate cessation of the re-opening plan. The company website, Facebook, and electronic communication will be utilized to effectively communicate the change.

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

Residents are screened daily for signs and symptoms of COVID-19. Any resident with signs and symptoms are added to line list and placed on precautions until further assessment is conducted. Isolation precautions are maintained until cause is determined. All new admissions or readmission from an acute care facility are isolated for 14 days after admission and monitored for signs and symptoms of COVID-19. If at any time a resident is suspected of having COVID-19 or is confirmed with COVID-19 the resident is assessed to determine if care needs can be met in facility. If needs can be met resident is moved to designated co-horting area of community for suspected or COVID-19 positive residents. All the necessary reporting would be conducted as appropriate for the licensed facility. PA DOH and CDC recommended guidelines will be followed for resident screenings.

22. STAFF

Staff team members are currently screened at the beginning and end of each shift for signs and symptoms of COVID-19. If at any time an employee would fail the screening they would not be permitted to enter the facility and would be required to self-isolate and seek medical attention as appropriate. If a staff team member would be suspected or test positive for COVID-19 the company will follow the PA DOH and CDC recommended guidelines in place at that time for return to work protocols. All necessary reporting would be conducted as appropriate for the licensed facility.

23. HEALTHCARE PERSONNEL WHO ARE NOT STAFF

All healthcare personnel who are not staff are screened for symptoms of COVID-19 upon entry. If any healthcare personnel would fail the screening they would not be permitted to enter the community.

24. NON-ESSENTIAL PERSONNEL

All non-essential personnel are screened for signs and symptoms of COVID-19 upon entry. If any non-essential personnel would fail the screening they would not be permitted to enter the community.

25. VISITORS

Visitors are restricted at this time. Upon successful movement into Step 2 and Step 3 of the Reopening plan visitors will be screened for signs and symptoms of COVID-19 prior to entry. If any visitor should fail the screening they would not be permitted to enter the community.

26. VOLUNTEERS

Volunteers are restricted at this time. Upon successful movement into Step 2 and Step 3 of the Reopening plan volunteers will be screened for signs and symptoms of COVID-10 prior to entry. If a volunteer should fail the screening they would not be permitted to enter the community.

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

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

All dining areas for both personal care and healthcare care will be reopened for communal dining. Only one resident per table and tables will be spaced appropriately to ensure social distancing. Two seatings will be offered for all three meals. Residents will still have a choice to dine in their room or enjoy communal dining.

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

Tables will be arranged in 3 locations to accommodate 20 residents in the personal care dining areas per seating and 18 residents per seating in the healthcare designated dining areas. An additional chair may be placed at a table for a staff member to utilize to assist residents who need assistance with set up and/or assistance with feeding.

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

Residents will be monitored while traveling to and from the dining rooms to ensure social distancing, masks are worn, and residents do not gather in hallways. Food orders will be taken at the table and all staff team members will wear a mask and residents will wear a mask while giving the food preference. Residents will remove mask or be assisted to remove mask for eating. Residents will be assisted as needed to hand sanitize before meals. Paper napkins and placemats will be used, no linens. Each table and chair will be cleaned with an approved cleaner after each meal. Staff will wash hands or hand sanitize after assisting residents with mask and in between offering feeding assistance. Staff will wear mask at all times.

30. DESCRIBE ANY OTHER ASPECTS OF COMMUNAL DINING DURING REOPENING

Personal Care residents may also choose to utilize the private dining room if they prefer to dine outside of their room but not in a large room with other residents. Healthcare Center residents may choose to utilize the lounge if they prefer to dine outside their room but not in a large room with other residents. Infection prevention measures would be the same for these areas.

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.

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

- Small group activities consisting of 5 or less residents unexposed to COVID-19.
- Residents to wear mask upon exiting their room, and will remain masked in common areas.
- Residents will maintain 6 or more feet in distance from one another.
- Hand hygiene to be completed before use of activity supplies and after use.
- Individual supplies to be provided for each resident. Supplies are not to be shared among residents.
- Supplies to be sanitized between residents. Allow 24 hours between uses for supplies that cannot be sanitized.
- Sanitize all surfaces before and after use.

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

- Small group activities consisting of 10 or less residents unexposed to COVID-19.
- Residents to wear mask upon exiting their room, and will remain masked in common areas.
- Residents will maintain 6 or more feet in distance from one another.
- Hand hygiene to be completed before use of activity supplies and after use.
- Individual supplies to be provided for each resident. Supplies are not to be shared among residents.
- Supplies to be cleaned between residents. Allow 24 hours between uses for supplies that cannot be sanitized.
- Sanitize all surfaces before and after use.

33. DESCRIBE ACTIVITIES PLANNED FOR STEP 3

- Groups of any size permissible to residents unexposed to COVID-19, while still allowing for proper social distancing. Size will differ according to room size.
- Residents to wear mask upon exiting their room, and will remain masked in common areas.
- Residents will maintain 6 or more feet in distance from one another.
- Cross over visitation between levels of care will be offered.
- Hand hygiene to be completed before use of activity supplies and after use.
- Individual supplies to be provided for each resident. Supplies are not to be shared among residents.
- Supplies to be clean between residents. Allow 24 hours between uses for supplies that cannot be sanitized.
- Sanitize all surfaces before and after use.

34. DESCRIBE OUTINGS PLANNED FOR STEP 3

- Offered to residents unexposed to COVID-19.
- Outings only to locations where proper social distancing can be practiced.
- Residents & team members to follow masking procedures.
- Social distancing to be maintained at all times.

In Step 2, non-essential personnel <u>deemed necessary</u> 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, <u>all</u> 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

Non-essential personnel will be permitted on an as needed basis. Non-essential personnel will be screened prior to entry and if screening is failed not permitted to enter. Masks will be worn at all times and non-essential personnel will be educated verbally upon entry to maintain social distancing and use proper hand hygiene. Specific measures will be taken for beautician and barber services.

- Beautician Services available to residents unexposed to COVID-19.
- Beautician to follow proper screening process upon arrival and exit of building.
- Beauty Shop to operate at 50% capacity.
- Residents & beautician to remain masked while services are provided.
- Residents to maintain proper social distancing while in the beauty shop.
- All surfaces & supplies to be sanitized between residents.
- Beautician to practice proper hand-hygiene and infection control practices between residents.
- Beauty Shop to be cleaned after daily use.
- Services not available to residents exposed to COVID-19

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

Non-essential personnel will be screened prior to entry and are not permitted to enter resident area without mask and designated PPE. Non-essential personnel will be informed of social distancing and hand hygiene requirements upon entry.

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

Non-essential personnel would not be in contact with any COVID-19 positive resident. If COVID positive residents were receiving care and treatment at the facility visitors and non-essential personnel would be restricted.

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

Each resident will be given the opportunity to have one outdoor 30 minute visit per week.

Scheduled visits will be Mon, Wed, & Fri 1PM – 3PM; Tues & Thurs 3PM – 7PM for HCC residents and on Tues & Thurs 1PM – 3PM; Wed 1PM – 7PM for PC residents. Saturday visits are available on an as needed basis to accommodate families unable to schedule during the week.

39. DESCRIBE HOW SCHEDULING VISITORS WILL OCCUR

Family members are to call 814-255-6844 to make a reservation. Reservations for next week should be made by Friday at 4pm of the current week.

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

Outdoor visitation areas will be sanitized after each visit by assigned team member.

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

One visit per resident per week for a maximum of 30 minutes. Maximum of two visitors per visit. Children can visit but must be able to maintain social distancing and wear a mask at all times during the visit. Children two and under do not need to wear a mask.

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

Scheduled visits will be prioritized in the order which they're received. However, in the instance that a resident or visitor requires special accommodations to be made, the need will be individually reviewed by management and prioritized appropriately.

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 on isolation precautions are not permitted outdoor visits. The facility will accommodate any resident who is unable to be transported to the outdoor visitation area or the designated neutral location on a case by case basis.

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

Outdoor visitation will take place on the Health Care Center patio located at the front of the building. The patio is covered by an awning for shade & easily accessible to visitors by cement sidewalk pathway to the location. Patio is accessible to residents with assistance from staff team members through the exit doors directly to patio from C-Hall. If inclement weather, the visits will be moved to a neutral location (the multi-purpose room on the lower level that has a separate entrance). Visitors can access the multiple-purpose room from an entrance directly into the room from the back of the building. Residents will be assisted to the lower level by

STEP 2

elevator.

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

Tables would be used to ensure social distance for visitors. Chat boxes with plexi glass are set up to ensure barrier between resident and visitor.

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

If inclement weather, the visits will be moved to a neutral location (the multi-purpose room on the lower level that has a separate entrance). Visitors can access the multi-purpose room from an entrance directly into the room from the back of the building. Residents will be assisted to the lower level by elevator.

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

8 foot tables would be used to ensure 6 feet social distance for visitors. Chat boxes with plexi glass are set up to ensure barrier between resident and visitor.

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)

Residents on isolation precautions are not permitted outdoor visits.

49. WILL OUTDOOR VISITATION BE UTILIZED AT STEP 3? IF NO, SKIP TO QUESTION #52

Weather permitting, outdoor visitation will continue to be utilized.

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")

Same.

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")

Tables would be used to ensure social distance for visitors. Chat boxes with plexi glass are set up to ensure barrier between resident and visitor.

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")

Same.

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")

Same.

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

Visitors will be screened at the Healthcare Center entrance. If any visitors fail the screening process they will not be permitted to visit. All visitors are required to wear a mask for duration of visit and required PPE. Resident will be required to wear mask at all times during visit. Visitors to maintain 6 feet of distance at all times from staff team members & residents. Visitors will utilized pre-arranged chairs in resident room to ensure social distance is maintained for duration of visit. If resident has roommate, the roommate will be offered to leave the room if able to be transported. If roommate is unable to be transported from room that resident will also wear a mask, and curtain will be pulled for privacy. After visit, surface areas possibly contaminated by visitors will be sanitized by LHJ team members (chairs, table tops, etc.)

TEP 3

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 educated on infection prevention and campus protocols prior to returning to volunteer services on the campus.
 - Volunteer Services will be made available to residents unexposed to COVID-19. Volunteers
 would not be in contact with any COVID-19 positive resident as if any resident would test
 positive volunteer services would be restricted.
 - Volunteers will follow proper screening process upon arrival and exit of building as previously described above.
 - Volunteers will wear masks provided by facility upon entering the building and will wear at all times, except to take a break in appropriate area.
 - Volunteers will be monitored and required to use proper hand washing or hand sanitizer per protocols.

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

- Volunteers will assist residents unexposed to COVID-19 with family visits by transporting them to and from designated indoor or outdoor neutral zones.
- Volunteers to assist during designated visitation hours.
- Volunteers will assist with monitoring length of visits and that all participants follow social distancing guidelines.
- Volunteers may assist in properly sanitizing chat box surfaces before & after use.

The Nursing Home Administrator (NHA) and Personal Care Home Manger are responsible for the accuracy of the Implementation Plan and the facility's adherence to it.

57. NAME OF NURSING HOME ADMINISTRATOR- Brenda Blough, Nursing Home Administrator

NAME OF PERSONAL CARE MANAGER- Melony Porada, PCHA

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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.

Brenda Blough, NHA		
SIGNATURE OF NURSING HOME ADMINISTRATOR	DATE	

59. 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.

neloy nan, TCHA		
	7/27/20	
SIGNATURE OF PERSONAL CARE HOME ADMINISTRATOR	DATE	