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 The Patriot, A Choice Community	
2. STREET ADDRESS 495 West Patriot Street	
3. CITY Somerset	**4. ZIP CODE** 15501
5. NAME OF FACILITY CONTACT PERSON Barbara Smith	**6. PHONE NUMBER OF CONTACT PERSON** (814) 445-4549

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 August 25, 2020
8. SELECT THE STEP AT WHICH THE FACILITY WILL ENTER REOPENING – EITHER STEP 1 OR STEP 2 (CHECK ONLY ONE) ☐ **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 June 8, 2020, Order of the Secretary of Health)* x☐ **Step 2** *The facility must meet all the Prerequisites, including the baseline universal test for COVID-19 administered to staff and residents (in accordance with the June 8, 2020, Order of the Secretary of Health)* ***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) Yes
10. DATE THE FACILITY WAS SURVEYED BY THE DEPARTMENT OF HEALTH TO ENSURE THE FACILITY IS ADEQUATELY PREVENTING TRANSMISSION OF COVID-19 **06/26/20**

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

06-30-2020 to 07-01-2020

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

Varius licensed staff have been trained and competencied on administering the SARS-CoV-2 COVID-19 test. Multiple teams will be assembled to assist in this task. Additionally, this facility will work with multiple laboratory providers to attain results as quickly as possible. Laboratories that have been or will be utilized are Moleular Dx; UPMC Somerset/Quest Laboratory/Northwest Laboratory. The facility has capacity to test residents that are showing symptoms of Covid 19 within 24 hours of symptom onset

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

Various licensed staff have been trained and competencied on administering the SARS-CoV-2 COVID-19 test. Multiple teams will be assembled to assist in this task. Additionally, this facility will work with multiple laboratory providers to attain results as quickly as possible. Laboratory providers include Molecular Dx/UPMC Somerset/Quest Laboratory and Northwest Laboratory to perform covid testing to all residents and staff in the event of an outbreak

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

Various licensed staff have been trained and competencied on administering the SARS-CoV-2 COVID-19 test. Multiple teams will be assembled to assist in this task. This facility will work with multiple laboratory providers to attain results as quickly as possible.
The facility has contracts with with severallLaboratory providers: Molecular Dx/UPMC Somerset/Quest Laboratory and Northwest Laboratory to ensure capacity to test all staff.

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

All non-essential staff and volunteers will be screened prior to entering the facility. If any signs or symptoms arise as a result of the screening process they will not be able to enter the facility and will be referred to their personal care physician and the PA Department of Health.
All non-essential staff and volunteers that are able to return to the facility upon reopening will require a COVID 19 test with a negative result if they are in the facility 3 or more days per week.

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

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

Residents that refuse testing or are unable to be tested will be moved to the appropriate designated area (yellow zone) within the facility and will be isolated for a minimum of 14 days and remain isolated until CDC and DOH criteria are met to discontinue precautions

Employee testing is a condition of employment and will be mandatory. Failure to participate in COVID-19 testing jeopardizes current employment status up to and including termination. Re-employment in the future could be considered based on compliance with employee COVID-19 testing policy.

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

Residents testing positive for COVID-19 will be transferred to a designated COVID-19 positive (red) zone with full precuations. Residents that have been exposed will be transferred to the designated yellow zone and be placed in full precuations. The zones will be predominantly staffed by select employees as their primary assignment and work in full PPE. Residents will transition from the red and yellow zone when CDC and DOH criteria are met for discontinuation of isolation precatuions.

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 is continually reviewing inventory, calculating burn rate and ordering accordingly. Inventory is also based on availability.
PPE inventory is comprised of the following:
Goggles
Face shields
Gowns
Gloves
Surgical Masks
N95 Masks
KN95 Masks
PPE is ordered one to two times weekly. The facility attempts to maintain a 2 to 4 week supply at all times, even in the event of an increased burn rate. The facility has a plan in place for optimizing PPE in the event a shortage is to occur. PPE inventory is monitored on a daily basis.

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

Current staffing is within regulatory guidelines. Several administrative staff members have taken the Waiver Aide program and competency testing has been completed to provide additional support on the nursing units. The facility also has contracts with temporary staffing agencies and we are being assisted based on agency availability. Current agency use varies from 16-32 hours/day. Continued recruitment efforts are ongoing in addition to recruiting through the waiver aide program.

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

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

The facility will adhere to the guidelines received by the PA Department of Health, CMS and CDC. In the event that Somerset County reverts back to a red phase, any previous restrictions that had been eased including visitation, communal dining and/or activities will be suspended and full restrictions will be put back in place.

All families, responsible parties and facility staff will be notified immediately via phone call blast and will be noted on the facility website.

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 have Vital signs and an assessment that includesrespiratory checks and signs and symptoms of Covid-19, every shift. If the resident screening reveals signs and symptoms of COVID 19, the resident will be transferred to the yellow zone, placed in isolation with full precautions, and a COVID-19 test will be obtained. The physician and responsible party will be notified.

In the event the resident tests positive for COVID-19, the resident will be transferred to the red zone and placed in full precautions for a minimum of 14 days, and will remain in isolation until criteria to discontinue transmission based precautions are met.

All new admissions are also tested prior to admission to this facility for COVID 19 and will be admitted to the yellow zone for a minimum of 14 days and will transition to the green zone when CDC and DOH criteria are met.

22. STAFF

All staff are screened upon entrance and exit, at the front atrium. They are screened for potential signs and symptoms of COVID-19, potential exposure to COVID-19, recent travel and temperature is taken. At the time of screening if an employee fails the screening, the employee is not permitted entrance into the facility. The employee will be advised to go home, self isolate for a minimum of ten days and will be advised to contact their PCP and PA Community Health.
If staff become ill during their shift, they will be sent home and requested to follow up with their Primary Care physician. All staff will be required to wear masks while in the facility. Staff will remain off work until CDC and DOH criteria to return to work are met.

SCREENING PROTOCOLS
23. HEALTHCARE PERSONNEL WHO ARE NOT STAFF All HCP are screened upon entrance and exit at the front atrium. They are screened for potential signs and symptoms of COVID-19, potential exposure to COVID-19, recent travel and temperature is taken. At the time of screening if healthcare personnel fail the screening, they will not be permitted entrance into the facility The HCP advised to go home contact their PCP and PA Community Health. All healthcare personnell will be required to wear a mask and complete hand hygiene upon arrival and departure and practice social distancing.
24. NON-ESSENTIAL PERSONNEL All non-essential personnel are screened upon entrance and exit at the front atrium. They are screened for potential signs and symptoms of COVID-19, potential exposure to COVID-19, recent travel and temperature is taken. At the time of screening if healthcare personnel fail the screening, they will not be permitted entrance into the facility and will be referred to their PCP and PA Community Health. All non-essential personnel will be required to wear a mask and complete hand hygiene upon arrival and departure and practice social distancing.
25. VISITORS All visitors are screened upon entrance and exit at the front atrium. Visitors will be screened for potential signs and symptoms of COVID-19, potential exposure to COVID-19, recent travel and temperature is taken. At the time of screening, if visitor fails the screening, they will not be permitted entrance into the facility and will be referred to their PCP and PA Community Health. All visitors will be required to wear a mask and complete hand hygiene upon arrival and departure and practice social distancing. Visitors are educated to monitor their symptoms for 14 days after their visit and to contact the facility if symptoms occur.
26. VOLUNTEERS All volunteers will be screened upon entrance and exit at the front atrium. Visitors will be screened for potential signs and symptoms of COVID-19, potential exposure to COVID-19, recent travel and temperature is taken. At the time of screening, if visitor fails the screening, they will not be permitted entrance into the facility and will be referred to their PCP and PA Community Health. All visitors will be required to wear a mask and complete hand hygiene upon arrival and departure and practice social distancing.

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)

Residents residing in the Red and yellow zones will not have communal dining and will be provided in room service. Communal dining will be limited to residents unexposed to COVID-19 or who have tested negative.

In an effort to resume communal dining we will follow a step approach. Breakfast and lunch meals will be serviced in dining rooms/ atrium and will be alternated based on bed locations. Communal dining will resume in the third floor main dining room. Residents that need fed will resume dining in the third floor atrium, with tables being placed six feet apart.

In our phased approach, residents will participate if able in communal dining during breakfast and lunch Mondays through Fridays on a rotating schedule and room service will be provided for the dinner meal. The facility will tranition to communal dining for all three meals once program is fully established.

One resident only will be seated at each table but the goal would be to put two tables together, to allow some socialization, while maintaining social distancing. Residents will be required to mask during transfer to and from dining room.

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

One individual will be seated per 48 inch table. Two tables will be put together,to allow two residents to have some socialization while remaining at a safe distance. All tables in both dining areas will be adequately spaced to allow for social distancing.

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

Facility will sanitize dining room furniture, communal chair and table, between each use.
Face masks and gloves will be worn by all staff. Staff will take appropriate precautions with eye protection and gowns when feeding a resident that has a high-risk for choking. Staff members who are assisting more than one resident at the same time will perform hand hygiene with at least hand sanitizer each time when providing assistance between residents. Dietary will wear facemasks and gloves in addition to their current Serv Safe requirements. Residents will wear masks during transport to the main dining room and while in the dining room except while thy are eating.

Staff serving in the yellow or red zones will wear full PPE during meal service and will provide in room service. ABHR gel is available for all residents and staff to perform hand hygiene before and after meals.

30. DESCRIBE ANY OTHER ASPECTS OF COMMUNAL DINING DURING REOPENING

Meals are served off steam tables to allow room service to be completed after serving in the dining room.

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)

Limited activities will be conducted with 5 residents or less who are unexposed COVID-19, are symptom free and not covid positive. Activities will resume in the third floor dining room or third floor atrium if a small sensory group is held. Social distancing, hand hygiene, and universal masking will be required. Residents participating in communal activities will be required to wear a mask.

Disposable bingo cards, personal ink blotters, personal pool noodles for playing balloon tennis, bagging each bean bag for the playing of cornhole will be utilized.

Any reusable supplies will be cleaned and disinfected with an EPA approved disinfectant.

Residents residing the the yellow and red zones will not be able to participate in communal activities and will be provided in-room, individualized activities.

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

Limited activities will be conducted with 10 residents or less who are unexposed to COVID-19, are asymptomatic and not COVID positive. Social distancing, hand hygiene, and universal masking will be required. Residents participating in communal activities will be required to wear a mask. Larger groups can be safely gathered in the Main Dinig Room of the third floor. Small groups of five or less can be held in the third floor atrium.
Disposable bingo cards, personal ink blotters, personal pool noodles for playing balloon tennis, bagging each bean bag for the playing of cornhole will be utilized. Religious services can resume with clergy following the requirements noted in non-esential personell section of this plan. Chair exercises, reading groups and craft activities will be scheduled.
Any reusable supplies will be cleaned and disinfected with an EPA approved disinfectant.

Residents residing the the yellow and red zones will not be able to participate in communal activities and will be provided in-room, individualized activities.

33. DESCRIBE ACTIVITIES PLANNED FOR STEP 3

Activities will be conducted with residents who are unexposed to COVID-19, are asymptomatic and not COVID positive . Social distancing, hand hygiene, and universal masking will be required. Residents participating in communal activities will be required to wear a mask. Activities may be held in the Main Dining Room on the third floor, as well as smaller groups in the third floor atrium.

Disposable bingo cards, personal ink blotters, personal pool noodles for playing balloon tennis, bagging each bean bag for the playing of cornhole will be utilized. Crafts, chair exercise, religious services, balloon tennis and seasonal activities will be held.

Any reusable supplies will be cleaned and disinfected with an EPA approved disinfectant.

Activities for residents in the yellow or red zone will be provided with 1:1, in-room activities,with staff wearing full PPE, as well as being provided with disposable items for their personal use.
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34. DESCRIBE OUTINGS PLANNED FOR STEP 3

Outings are allowed only for residents unexposed to COVID-19, are asymptomatic and not COVID positive and reside in the green zone. Outings will be limited to no more than the number of people where social distancing between residents can be maintained.
Outing will be limited to sightseeing activities or public parks (weather permitting) where safe social distancing can be maintained. No outings will be permitted for shopping at this time.

Appropriate hand hygiene, and universal masking will be required. Outing areas will be conducted where social distancing will not be an issue.

The bus will be disinfected after each use.

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

Healthcare personnel, beautician and maintenance contracted services.

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 required to wear a facial mask, must use hand sanitizer and complete the visitor screening process prior to entrance. Any non-essential personnel will be educated on proper hand hygiene and use of PPE. They will require a COVID test, with a negative result if they are in the building 3 days or more days a week. The beautician will only provide service to residents that reside in the green zone. Residents receiving salon services will be required to wear a mask during transport and during salon service. The beautician will wear a surgical mask and gloves during service and will be educated to complete hand hygiene before, after and between residents.

No more than two residents can be in the beauty shop at one time, to maintain appropriate social distancing. The salon equipment/ chair will be disinfected between residents.
All nonessential personnel will be screened upon arrival, wear a mask while in the facility, and/or other personal protective equipment as directed, and maintain social distancing.

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

Non-essential personnel will be restricted from access to the red zone. If non-essential personnel are to enter a yellow zone, they will be required to wear full PPE and be escorted by a current staff member. Residents experiencing signs and symptoms of respiratory illness or resident in the yellow or red zone will not be able to receive barber and beauty services until criteria are met for transmission based precautions to be discontinued.

VISITATION PLAN

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.

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

Visitation hours will be scheduled from 10:00 AM through 3:00 PM, 7 days a week. Evening visitation will be coordinated by request. Each visit wil be 15 to 30 minutes. Compassionate care or end of life visits will be scheduled on a case by case basis.

39. DESCRIBE HOW SCHEDULING VISITORS WILL OCCUR

Visitors will call in advance to preschedule a visit at this facility, as per the hours outlined above. Visits will be coordinated through the Activities Director or the Social Service Director in her absence.

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

High touch areas along with seating surfaces will be disinfected between visitation.

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

Maximum number of visitors will be limited to two at a time, which may be adjusted on a case by case basis. 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

Visits will be on a first come, first served basis, however, priority will be given to residents with diseases that cause progressive cognitive decline and residents expressing feelings of loneliness

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)

All residents are screened each shift. Any resident that may appear to be symptomatic will have visits cancelled until the resident does not show any signs or symptoms of illness. Visitation is restricted for residents residing in a yellow or red zone. Any resident on a yellow or red zone may have visitation via video chat or window visits. Residents that reside in the green zone are able to participate in outdoor visits Residents must wear a mask while being transported thru the facility to the visitiation area and wear a mask during visits, unless unable to due to a medical condition. Social distancing of at least 6 feet will be maintained.

All visitors will be screened upon arrival for signs of illness. Visitors that fail the screening will not be permitted to visit.

Visitors must wear a face covering or facemask during the entire visit, use alcohol-based hand rub before and after visit, stay in designated facility locations for visitation, sign in and provide contact information, sign out upon departure; and adhere to screening protocols.

VISITATION PLAN	
	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 The outdoor visitation (weather permitting)area is located at the front of the building under the portico with clealy defined areas taped off to maintain minimum spacing of 6 feet between resident and visitor. Plexiglass barriers are available to place in front of the resident In cases of extreme weather, visitors will be permitted to enter through the main entrance and utilize the inside neutral zone areas. Residents will be transported to the visitation area with a mask on, and will be brought down in the elevator in the main corridor. Visitation is limited to residents who reside in the green zone and have tested negative for COVID-19 and show no signs and symptoms of illness. Visiting in a resident's room (within this facility's established protocols) will be permitted only if the resident is unable to be transported to the designated neutral zone and compassionate care visits. All visitors will be screened prior to being admitted to the facility. They will be provided education on hand hygiene, social distancing and appropriate use of surgical masks.
	45. DESCRIBE HOW A CLEARLY DEFINED SIX-FOOT DISTANCE WILL BE MAINTAINED BETWEEN THE RESIDENT AND THE VISITOR(S) DURING OUTDOOR VISITS The outside visitation area which is located at the front of the building under the portico has clealy defined reflective taped off areas with minimum spacing of 6 feet between resident and visitor, with a plexiglass barrier in front of the resident.
	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 Two areas within the facility will be designated as neutral zones near the main front entrance. Visitors should enter thru the main front entrance for screening. 2 neutral zones for indoor visitation have been designated. One area is right inside the front entrance door located in the Atrium and the second neutral zone location will be located adjacent to the Atrium in the main lobby area. Visiting in a resident's room (within this facility's established protocols) will be permitted only if the resident is unable to be transported to the designated neutral zones or is at end of life. This only applies to residents who reside in the green zone and are fre of s/s respiratory illness. No visitation of any kind will occur in residents in the yellow or red zones, unless approved by Administration. Facetime, videochats and window visits will continue for residents in the yellow or red zones.
	47. DESCRIBE HOW A CLEARLY DEFINED SIX-FOOT DISTANCE WILL BE MAINTAINED BETWEEN THE RESIDENT AND THE VISITOR(S) DURING INDOOR VISITS The inside visitation area will be clearly marked with reflective taped off areas with a minimum spacing of 6 feet between resident and visitor. A plexiglass barrier will be placed in front of the resident during visits in designated areas. Staff will remain in the general area to monitor that safe social distancing is maintained.
STEP 3	**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)** Any residents in yellow or red zones will not be able to have indoor visitation. Video chat and Facetime visits will continue to be offered. Residents that are free of respiratory illness and Any

VISITATION PLAN	
	resident that has a negative covid status will be eligible to safety accept visitors. If a resident is determined to not be eligible for neutral zone visits, staff will escort the visitor after the screening process to the resident room, ensuring that the roommate is not in the room. Visitors will be assisted with PPE for use during their visit. During transport and for the duration of the visit, resident and visitors will be required to wear masks, maintain social distancing, and complete hand hygiene upon arrival and departure from visit.
	49. WILL OUTDOOR VISITATION BE UTILIZED AT STEP 3? IF NO, SKIP TO QUESTION #52 Yes if resident desires.
	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 as noted above.
	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") Same as noted above.
	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 as noted above.
	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 as noted above.
	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 upon arrival. A mask must be present at time of entrance into facility. If a resident is medically and cognitively capable of wearing a mask, they will also wear a mask. Social distancing will be maintained, and monitored by staff. Visitor(s) and resident(s) will perform hand hygiene before and after visit. Visitors will be educated upon arrival to limit visitation to their loved one's room and to avoid congregating in the corridors, activity areas and dining rooms and practice social distancing during the visit

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 upon arrival and if the volunteer does not pass the screen then entrance into the facility will be denied and volunteer will be referred to their primary care Physician. All volunteers will be required to wear masks during their visit and complete hand hygiene upon arrival, between residents, and upon departure. Volunteers will require COVID testing, with a negative result, if they schedule 24 hours/week or more within the facility. Volunteers may only assist residents that reside in the green zone. The yellow and red zones will be identified by postings, and the volunteers will be educated on the zoning and where they are and are not able to enter.

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

Volunteer activities will be assigned by the volunteer coordinator that will include but not be limited to: Assisting in outdoor/indoor visits for those residents residing in the green zone and screening in and out staff members/visitors.

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

Barbara Smith

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**