

**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	
St. Anne's Retirement Community	
2. STREET ADDRESS	
3952 Columbia Avenue	
3. CITY	4. ZIP CODE
Columbia	17512
5. NAME OF FACILITY CONTACT PERSON	6. PHONE NUMBER OF CONTACT PERSON
Lisa Hollywood	717-285-1401

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 31, 2020	
8. SELECT THE STEP AT WHICH THE FACILITY WILL ENTER REOPENING – EITHER STEP 1 OR STEP 2 (CHECK ONLY ONE)	
<input 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 June 8, 2020, Order of the Secretary of Health)</i>	
<input checked="" 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 June 8, 2020, Order of the Secretary of Health)</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	
August 8, 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](#)

July 2, 2020 to July 24, 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

If a resident shows symptoms, a swab is collected and sent to Lancaster General Health within 24 hours. We have results within 2-3 days on average.

We have a contract with Clarity Labs to complete volume testing.

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

We have a contract with Clarity Lab for volume testing as needed.

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

We are not allowing volunteers on campus at this time. All staff are considered essential for our business. Therefore all working staff were tested during the universal testing

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

We have not had anyone refuse. Residents would be quarantined for 14 days. Staff would be considered a voluntary quit.

16. 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*.

We have built temporary walls half way down two of our wings, one on each floor. The first half of each wing is for our yellow residents. The back half of each wing is for our red residents.

17. 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)

Currently, we have an adequate supply of PPE. Staff are wearing surgical masks at all times except for eating. They are wearing face shields/goggles and gloves when interacting with residents. When caring for those residents in isolation (yellow rooms), staff are wearing disposable or non-disposable gowns. We also have an adequate supply of N95 and KN95 masks should we need them.

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

We have been able to maintain a staffing PPD of 3.0-4.0 on a daily basis. Our management team attended a non-essential task class in case we need more assistance.

19. 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 we need to stop our re-opening program, we would notify residents, families and POAs via phone calls, letters, website and phone hotline.

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.

20. RESIDENTS

Residents have their temperature and pulse ox on each shift and evaluated for potential covid symptoms such as cough, sore throat, congestion and GI issues.

21. STAFF

All staff have their temperature taken at the beginning and end of each shift. They complete a questionnaire at the beginning of each shift and asked if there are any changes at the end of each shift.

22. HEALTHCARE PERSONNEL WHO ARE NOT STAFF

Healthcare personnel have their temperature taken at the beginning and end of each visit. They complete a questionnaire at the beginning of each visit and asked if there are any changes at the end of each visit. They must wear a mask while in the building. They must wear appropriate PPE when interacting with a resident.

23. NON-ESSENTIAL PERSONNEL

All staff have their temperature taken at the beginning and end of each shift. They complete a questionnaire at the beginning of each shift and asked if there are any changes at the end of each shift.

24. VISITORS

End of Life visitors have their temperature taken at the beginning and end of each visit. They complete a questionnaire at the beginning of each visit and asked if there are any changes at the end of each visit. They must wear a mask while in the building

25. VOLUNTEERS

We do not have volunteers in our building at this time. When they are allowed, they will follow the same process as everyone else.

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

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

We will begin with our breakfast service. We have open seating, so we will only allow 1 resident at each table while maintaining the social distance of 6 feet between each resident.

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

We will allow only 1 resident/table and each table is at least 6 feet apart.

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

Staff must have masks and shields/goggles when with residents as well as gloves. Dining will only be for those residents in our green areas.

29. DESCRIBE ANY OTHER ASPECTS OF COMMUNAL DINING DURING REOPENING

We will follow are standing infection control guidelines for meal service.

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.
30. DESCRIBE ACTIVITIES PLANNED FOR STEP 1 (FIVE OR LESS RESIDENTS UNEXPOSED TO COVID-19)
We are using a Step 2 approach and by-passing step 1. We will use our dining rooms for beginning activities on the units in step 1. We will have only 1 resident at every table. This will allow for social distancing of at least 6 ft. Staff will wear masks/face shields/goggles. Residents will wear masks as well. This will be for residents in our green areas.
31. DESCRIBE ACTIVITIES PLANNED FOR STEP 2 (TEN OR LESS RESIDENT UNEXPOSED TO COVID-19)
We will use our dining rooms for beginning activities on the units for step 2. We will have 1 resident at every table. This will allow for social distancing of at least 6ft. Staff will wear masks/face shields/goggles. Residents will wear masks as well. This will be for residents in our green areas.
32. DESCRIBE ACTIVITIES PLANNED FOR STEP 3
None planned at this time.
33. DESCRIBE OUTINGS PLANNED FOR STEP 3
None planned at this time.

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 <i>Interim Guidance for Skilled Nursing Facilities During COVID-19</i>). 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.
34. DESCRIBE THE LIMITED NUMBER AND TYPES OF NON-ESSENTIAL PERSONNEL THAT HAVE BEEN DETERMINED NECESSARY AT STEP 2
Our units are closed for all non-essential personnel unless there is a necessary task requiring them to enter a unit. At that time, they must wear a face shield/goggles as well as their surgical mask when entering resident areas. They must practice good hand hygiene as well as social distancing when at all possible.
35. DESCRIBE HOW SOCIAL DISTANCING, HAND HYGIENE, AND UNIVERSAL MASKING WILL BE ENSURED FOR NON-ESSENTIAL PERSONNEL AT STEPS 2 AND 3
All staff must wear a surgical mask now at all times as well as a face shield/goggles when with a resident. There is ongoing training for COVID 19 such as hand hygiene, sanitization, social distancing and proper PPE.
36. DESCRIBE MEASURES PLANNED TO ENSURE NON-ESSENTIAL PERSONNEL DO NOT COME INTO CONTACT WITH RESIDENTS EXPOSED TO COVID-19
Residents in our yellow and red (if we would have one) areas are cared for by clinical staff only. There are no other staff allowed in those rooms.

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

VISITATION PLAN

are required for visitors.

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

We will have outside visits twice each day Monday through Sunday (10:30a-11:00am and 3:30p-4:00p). We can have up to 4 visits at a time. We also allow for window/face time visits. M/W/F: 9:30am/1:30pm and T/Th: 9:30am/1:30pm/6:30pm/7:00pm and Sa/Su: 6:30pm. Social service will also work with families, if there is a need outside of those times. Visitors will need to complete a questionnaire, have their temperature taken, wear a mask while residents are in the area and maintain a social distance of 6ft. Chairs will be set by SARC team (6ft apart) and a plexi glass screen will be utilized to assist with social distancing. Hand sanitizer will be available for residents and visitors.

38. DESCRIBE HOW SCHEDULING VISITORS WILL OCCUR

All visits will be scheduled through social services.

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

Chairs and screens will be wiped down with anti-bacterial spray between visits.

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

For outside visits, there will be two visitors allowed. For all other visits it is unlimited.

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

Residents/families will be allowed to schedule one visit/week to start. Visit times will open on the third Monday of the current month for the following month. Social Services will communicate with Nursing Administration if there are concerns regarding the need for more visiting times.

42. 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)

Nursing and social services will determine residents who are able to have visits. This will be based on a resident's ADLs and care plan. Residents must be in a green area. Staff will bring each resident to their visiting area (there will be signs posted at each area).

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

Outside visits will occur at our main entrance. We will have tents set up for each visit along with signage for no other residents/visitors entering the area during visitation times. We will have hazard cones set to prevent traffic in this area during those times. A staff member will be in attendance during outside visits.

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

Chairs will be pre-set as well as a plexi glass divider between resident and visitors. Staff will be in attendance to insure rules are followed.

45. 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

Outside visits will be canceled for inclement weather. This will be determined by Nursing Administration. We will not have inside visits at this time.

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

We are not allowing inside visits at this time.

47. 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)

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VISITATION PLAN

Nursing and social services will determine residents who are able to have visits. This will be based on a resident's ADLS and care plan. Residents must be in a green area. Staff will bring each resident to their visiting area (there will be signs posted at each area).

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

We have not decided when we will allow inside visits so at this time outside visits will continue in step 3.

49. 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

50. 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

51. 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")

Not determined at this time.

52. 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

53. 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

We are not allowing visits in the facility at this time. Residents have the choice of outside visits, window visits or face time visits with loved ones.

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.

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

When volunteers are back in the building, they will have their temperature taken at the beginning and end of each visit. They will complete a questionnaire at the beginning of each visit and asked if there are any changes at the end of each visit. They will be required to wear surgical masks, face shields/goggles and practice good hand hygiene. They will also be instructed as to which areas they are allowed to enter and which areas are off limits - green, yellow and red.

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

None are allowed at this time.

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.

56. NAME OF NURSING HOME ADMINISTRATOR

Lisa Hollywood

57. 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.

Lisa Hollywood

SIGNATURE OF NURSING HOME ADMINISTRATOR

August 31, 2020

DATE