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

This template is provided as a suggested tool for skilled nursing facilities to use in developing their Implementation Plan for reopening. This (or another version of an Implementation Plan) is to be posted on the facility's website (if the facility has a website) or available to all residents, families, advocates such as the Ombudsman and the Department upon request. This is NOT to be submitted to the Department.

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. Barnabas Nursing Home	
2. STREET ADDRESS 5827 Meridian Road	
3. CITY Gibsonia	**4. ZIP CODE** 15044
5. NAME OF FACILITY CONTACT PERSON Aaron Salyards or Jennifer Starr	**6. PHONE NUMBER OF CONTACT PERSON** 724-443-0700

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 8/11/2020
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)*
☐ **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 outbreak for 14 consecutive days since baseline COVID-19 testing*
X **Step 3**

DATE AND STEP OF REOPENING
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 5/20/2020 and 7/22/2020

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 6/29/2020 to 7/14/2020
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 Capacity to test all residents and staff within the facility within 24 hours
13. DESCRIBE THE CAPACITY TO ADMINISTER COVID-19 DIAGNOSTIC TESTS TO ALL RESIDENTS AND STAFF IF THE FACILITY EXPERIENCES AN OUTBREAK Capacity to test all residents and staff within the facility within 24 hours
14. DESCRIBE THE CAPACITY TO ADMINISTER COVID-19 DIAGNOSTIC TESTS TO ALL STAFF, INCLUDING ASYMPTOMATIC STAFF Facility retains an inventory of sufficient testing supplies to test all staff member within the facility.
15. DESCRIBE THE PROCEDURE FOR ADDRESSING NEEDED TESTING OF NON-ESSENTIAL STAFF AND VOLUNTEERS These persons would be required to perform the same screening as any employee that is seeking to gain admittance to the building. If screening shows suspicion of the presence of COVID-19, testing shall be offered to the person(s) effected. In the event testing is refused, exclusion from admittance for that person would be as any other paid staff member for a period no shorter than 14 days. The facility retains an inventory of testing supplies and has the capacity to perform such testing within 24 hours.
16. DESCRIBE THE PROCEDURE FOR ADDRESSING RESIDENTS OR STAFF THAT DECLINE OR ARE UNABLE TO BE TESTED Residents will be moved to the established Yellow Zone for a period of no less than 14 days. If symptoms occur, the issue of testing will be revisited with the resident. Staff whom refuse will be excluded from work for a period of no less than 14 days.
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.* Residents with confirmed cases will be moved to the established Red Zone of the facility.

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

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 part of a subacute health system with a centralized central supply department in charge of all procurement of PPE. PPE shortages have not presented themselves and ample supply is on hand, as reported daily to the Pennsylvania Department of Health.

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

The facility has not experienced shortages of staff yet has developed an Emergency Staffing Plan to shield against staffing shortages. The current staffing exceeds the state minimum ppd. The use of emergency staff includes yet is not limited to the utilization of staff from other entities of the health system, licensed and/or certified staff that is being used in capacities not related to patient care and utilizing staffing agencies if/when appropriate.

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

The facility would notify residents and families of the change of status within the county. The facility would revert back to the lockdown protocol of 3/12/2020 and continue to follow the instructions pursuant to PAHAN's and orders of the Secretary of Health.

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 a minimum of 3 times per day in their rooms. Vitals are taken on each resident. Any resident that has vitals that would be outside of normal limits, consistent with symptoms of COVID-19, would be offered COVID-19 testing and moved to the established Yellow Zone. If test results are positive the resident would then be placed in the established Red Zone of the facility.

SCREENING PROTOCOLS

22. STAFF

Proper PPE is offered if needed upon arrival. Staff is screened upon arrival to the facility in the foyer. Using a thermometer to take their temperature they record their temperature. Per the instructions and education provided, staff members with a temperature higher than 99.0 degrees Fahrenheit, must retake their temperature for confirmation. Any person seeking to gain admittance to the facility shall have a temperature lower than 100.0 degrees Fahrenheit. The staff members are also asked a series of questions including if they have participated in any recent travel internationally or domestically. If yes, the questionnaire asks for location and dates of travel. The staff member is also asked if they have any symptoms consistent with COVID-19 or if they have experienced any similar symptoms in the past 3 days. The last question asks if the staff member has had any exposure to anyone that tested positive or was under suspicion of having COVID-19 in the last 14 days. All questions must have satisfactory answers prior to the staff member gaining admittance to the facility. In the event that all questions are not answered appropriately, the staff member is offered testing with the exception of travel. If the staff member is agreeable to testing, they are tested outside of the facility, encouraged to quarantine and notified of the results upon receipt. In the event that they are positive, they are excluded from work for a period no less than 10 days, 24 hours of which shall be without a fever and without the use of fever suppressant medication. If the staff member refuses testing, they shall be excluded from work for a period of no less than 14 days. Should symptoms occur, testing will be offered to the staff member again. If the staff member has traveled by airplane or traveled to an area determined to be a hot zone by the Governor of Pennsylvania and the Pennsylvania Secretary of Health, that person shall be excluded from work for a period of no less than 14 days. The person may return as long as they are free of symptoms and have not taken fever suppressant medications in the last 24 hours prior to return.

23. HEALTHCARE PERSONNEL WHO ARE NOT STAFF

Proper PPE is offered if needed upon arrival. Providers are screened upon arrival to the facility in the foyer. Using a thermometer to take their temperature they record their temperature. Per the instructions provided, providers with a temperature higher than 99.0 degrees Fahrenheit, must retake their temperature for confirmation. Any person seeking to gain admittance to the facility shall have a temperature lower than 100.0 degrees Fahrenheit. The providers are also asked a series of questions including if they have participated in any recent travel internationally or domestically. If yes, the questionnaire asks for location and dates of travel. If the provider has traveled by airplane or traveled to an area determined to be a hot zone by the Governor of Pennsylvania and the Pennsylvania Secretary of Health, that person shall be excluded from the facility for a period of no less than 14 days. The person may return as long as they are free of symptoms and have not taken fever suppressant medications in the last 24 hours prior to return. The provider is also asked if they have any symptoms consistent with COVID-19 or if they have experienced any similar symptoms in the past 3 days. The last question asks if the provider has had any exposure to anyone that tested positive or was under suspicion of having COVID-19 in the last 14 days. All questions must have satisfactory answers prior to the provider gaining admittance to the facility. In the event that all questions are not answered appropriately, the provider is offered testing. If the provider is agreeable to testing, they are tested outside of the facility, encouraged to quarantine and notified of the results upon receipt. In the event that they are positive, they are excluded from gaining admittance to the facility for a period no less than 10 days, 24 hours of which shall be without a fever and without the use of fever suppressant medication. If the provider refuses testing, they shall be excluded from admittance to the facility for a period of no less than 14 days. At that point, the organization from which they are coming shall be notified.

SCREENING PROTOCOLS

24. NON-ESSENTIAL PERSONNEL

Proper PPE shall be offered if needed upon arrival. Non-Essential Personnel shall be screened upon arrival to the facility in the foyer. Using a thermometer to take their temperature they record their temperature. Per the instructions provided, Non-Essential Personnel with a temperature higher than 99.0 degrees Fahrenheit, shall retake their temperature for confirmation. Any person seeking to gain admittance to the facility shall have a temperature lower than 100.0 degrees Fahrenheit. The Non-Essential Personnel shall also be asked a series of questions including if they have participated in any recent travel internationally or domestically. If yes, the questionnaire asks for location and dates of travel. If the Non-Essential Personnel has traveled by airplane or traveled to an area determined to be a hot zone by the Governor of Pennsylvania and the Pennsylvania Secretary of Health, that person shall be excluded from the facility for a period of no less than 14 days. The person may return as long as they are free of symptoms and have not taken fever suppressant medications in the last 24 hours prior to return. The Non-Essential Personnel shall also be asked if they have any symptoms consistent with COVID-19 or if they have experienced any similar symptoms in the past 3 days. The last question asks if the Non-Essential Personnel has had any exposure to anyone that tested positive or was under suspicion of having COVID-19 in the last 14 days. All questions shall have satisfactory answers prior to the Non-Essential Personnel gaining admittance to the facility. In the event that all questions are not answered appropriately, the Non-Essential Personnel shall be offered testing. If the Non-Essential Personnel is agreeable to testing, they shall be tested outside of the facility, encouraged to quarantine and notified of the results upon receipt. In the event that they are positive, they shall be excluded from admittance from the facility for a period no less than 10 days, 24 hours of which shall be without a fever and without the use of fever suppressant medication. If the Non-Essential Personnel refuses testing, they shall be excluded from admittance to the facility for a period of no less than 14 days. Their organization, if affiliation exists, will be notified of refusal.

25. VISITORS

Proper PPE shall be offered if needed upon arrival. Visitors shall be screened upon arrival to the facility in the foyer. Using a thermometer to take their temperature they record their temperature. Per the instructions provided, Visitors with a temperature higher than 99.0 degrees Fahrenheit, must retake their temperature for confirmation. Any person seeking to gain admittance to the facility shall have a temperature lower than 100.0 degrees Fahrenheit. The visitors shall also be asked a series of questions including if they have participated in any recent travel internationally or domestically. If yes, the questionnaire asks for location and dates of travel. If the visitor has traveled traveled to an area determined to be a hot zone by the Governor of Pennsylvania and the Pennsylvania Secretary of Health, that person shall be excluded from visitation for a period of no less than 14 days of the day of their arrival to the area. The person may return as long as they are free of symptoms and have not taken fever suppressant medications in the last 24 hours prior to return. The visitor shall also be asked if they have any symptoms consistent with COVID-19 or if they have experienced any similar symptoms in the past 3 days. The last question asks if the visitor has had any exposure to anyone that tested positive or was under suspicion of having COVID-19 in the last 14 days. All questions shall have satisfactory answers prior to the visitor gaining admittance to the facility. In the event that all questions are not answered appropriately, the visitor will not gain admittance to the facility and will be encouraged to quarantine. The visitor shall be excluded from admittance to the facility for a period of no less than 14 days. At which point, the same questions will be required with satisfactory responses to gain admittance.

SCREENING PROTOCOLS

26. VOLUNTEERS

Proper PPE shall be offered if needed upon arrival. Volunteers shall be screened upon arrival to the facility in the foyer. Using a thermometer to take their temperature they record their temperature. Per the instructions and education to be provided, Volunteers with a temperature higher than 99.0 degrees Fahrenheit, must retake their temperature for confirmation. Any person seeking to gain admittance to the facility shall have a temperature lower than 100.0 degrees Fahrenheit. The Volunteers shall also be asked a series of questions including if they have participated in any recent travel internationally or domestically. If yes, the questionnaire asks for location and dates of travel. If the Volunteer has traveled by airplane or traveled to an area determined to be a hot zone by the Governor of Pennsylvania and the Pennsylvania Secretary of Health, that person shall be excluded from volunteering for a period of no less than 14 days. The person may return as long as they are free of symptoms and have not taken fever suppressant medications in the last 24 hours prior to return. The Volunteer shall also be asked if they have any symptoms consistent with COVID-19 or if they have experienced any similar symptoms in the past 3 days. The last question asks if the Volunteer has had any exposure to anyone that tested positive or was under suspicion of having COVID-19 in the last 14 days. All questions must have satisfactory answers prior to the Volunteer gaining admittance to the facility. In the event that all questions are not answered appropriately, the Volunteer shall be offered testing. If the Volunteer is agreeable to testing, they shall be tested outside of the facility, encouraged to quarantine and notified of the results upon receipt. In the event that they are positive, they shall be excluded from admittance to the facility for a period no less than 10 days, 24 hours of which shall be without a fever and without the use of fever suppressant medication. If the Volunteer refuses testing, they shall be excluded from admittance to the facility for a period of no less than 14 days. At which point, the same questions will be required with satisfactory responses to gain admittance.

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)

Meal times remain the same. The residents deciding to eat in the dining rooms shall be served at the same time as the residents deciding to dine in their rooms. Staggering of meal times shall depend on the interest of the individual resident to go to the dining room for meals. In the event the need presents itself, due to the number of residents that wish to dine in the dining room, the facility shall consider multiple seatings to maintain social distancing.

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

Each of the three units of the facility have their own dining room. Tables shall be arranged to maintain adequate social distancing (6 feet apart), of any chair(s) surrounding the tables for resident usage. In the event that a resident is confined to a wheel chair for meals, the same social distancing recommendations shall be maintained.

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

Universal masking is required when staff enter building. When caring for patients in red and yellow zones, droplet precautions are required and staff members shall be donning masks, gowns, gloves and face shields. Standard precautions as well as universal masking are used in green zones. Staff has been educated on hand hygiene and also to practice social distancing when not doing direct patient care.

30. DESCRIBE ANY OTHER ASPECTS OF COMMUNAL DINING DURING REOPENING

Social distancing will be maintained in the dining rooms. Patients that require feeding assistance will eat at separate tables 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)

Activities are held with no more than 5 residents and only in rooms that are able to accommodate social distancing. Residents attending group activities should have the cognition to adhere to universal masking and don a mask properly at all times. This is monitored by the activities professional throughout the activity. Hand sanitizer is provided to the residents to properly maintain hand hygiene. There are no outings planned in this step aside from residents going outside while remaining on facility property.
Residents that are not cognitively capable of universal masking, shall have individualized activities.

32. DESCRIBE ACTIVITIES PLANNED FOR STEP 2 (TEN OR LESS RESIDENT)

Activities shall be held with no more than 10 residents and only in rooms that are able to accommodate social distancing. Residents attending group activities should have the cognition to adhere to universal masking don a mask properly at all times. This is monitored by the activities professional throughout the activity. Hand sanitizer is provided to the residents to properly maintain hand hygiene. There are no outings planned in this step aside from residents going outside while remaining on facility property.
Residents that are not cognitively capable of universal masking, shall have individualized activities.

33. DESCRIBE ACTIVITIES PLANNED FOR STEP 3

Activities shall be held limited to the number of residents based on the size of the room to maintain social distancing. Residents attending group activities should have the cognition to adhere to universal masking don a mask properly at all times. This is monitored by the activities professional throughout the activity. Hand sanitizer is provided to the residents to properly maintain hand hygiene. There are no outings planned in this step aside from residents going outside while remaining on facility property.
Residents that are not cognitively capable of universal masking, shall have individualized activities.

34. DESCRIBE OUTINGS PLANNED FOR STEP 3

The only outings that will be planned shall be for residents to go outside. When going outside, residents shall adhere to requirements of social distancing, universal masking and hand hygiene. Residents shall not be leaving the property of the facility for outings as social distancing will not be able to be maintained during group transportation in conjunction with residents who leave the property should be isolated for 14 days upon return to the facility.

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

The Pharmicist and Pharmacy Resident (2 people)
Consulting Pharmacist (1 person)
Beautician (1 person)
Clergy (no more than 1 person at a time)

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 shall be provided education and PPE prior to admittance to the facility. Staff members will be notified of the admittance of Non-Essential Personnel and be empowered to either remind those persons of the mitigation recommendations or seek leadership of the building to re-educate said persons.

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.

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

Visitation shall be between the hours of 0830 and 1700 in up to 45 minute increments and scheduled as often as every 60 minutes to allow time for sanitization in between each visit. Under certain circumstances, visitation hours and times may be extended for visitors that cannot make arrangements during the times allotted. Visitation plans of the facility shall be in addition to the end of life visitation permitted by the DOH and CMS along with compassionate caregivers.

38. DESCRIBE HOW SCHEDULING VISITORS WILL OCCUR

Prospective visitors shall notify the activities department of their desire to visit. Activities shall schedule the visits based on availability of the activities visitation schedule and the schedule of the would be visitor while taking into consideration the proper prioritization of residents based on their present state of health.

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

Visitation areas shall be sanitized by using products that are EPA approved for use to eliminate viral particles and bacteria to the furthest extent. The area shall be sanitized by a member of the activities department that has been trained by the housekeeping director on the use of the prior mentioned products and proper cleaning techniques.

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

The number of visitors on the outside of the door from the resident shall not exceed two (2). In the event that more than two (2) visitors would like to visit they will have to schedule an additional time for visitation.

VISITATION PLAN

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

End of life situations will be first. Then Compassionate Caregiver visitation. Prioritization for visitation shall then be prioritized based on visitation for residents with diseases that cause progressive cognitive decline (e.g., Alzheimer's disease) and residents expressing feelings of loneliness. Then the visitation prioritization shall be on a first come first serve basis. The facility shall request that visitors respect the fact that multiple visitors shall be requesting visitation and to please not schedule visitation more than twice per week to accommodate all residents that wish to receive visitors.

STEP 2

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)

Residents shall be allowed to go outside yet will not be able to accept visitors in that setting. Visitation shall be welcomed with the resident behind a plexiglass barrier with the visitor no less than six (6) feet from the structure in the Chapel of the building that has been determined a Neutral Zone. Residents and visitors shall be required to practice social distancing, proper hand hygiene and universal masking for the duration of the visit. The facility shall follow the guidance in CMS QSO-20-39-NH to safely afford residnets and loved ones visitation per the guidance.

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

Visitation shall not be afforded outside.

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

Visitation shall not be afforded outside.

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

The visitor(s) shall utilize the main entrance. The visitor(s) shall follow all limitations, screenings and protocols that have been previously mentioned in this document to gain admittance to the facility. They will then walk through the facility lobby (neutral zone) into the Nursing Home's Chapel (neutral zone) where visitation shall commence. The facility shall follow the guidance in CMS QSO-20-39-NH to safely afford residnets and loved ones visitation per the guidance.

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

The facility shall have markers on the floor to clearly mark the distance needed to be maintained between the resident and visitor(s). The facility shall also have a clear barrier between the two parties for added mitigation and safety.

STEP 3

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)

Patients, with the exception of end of life visits, those that are unable to be transported, and compassionate caregivers, will be transported via wheel chair or assisted by staff with ambulation to the designated visitation area. Patients and visitors shall observe universal masking during visits as well as social distancing and proper hand hygiene. If one or more public health protocols are not being followed during visitation, the facility reserves the right to ask the party to leave the premise.

48. WILL OUTDOOR VISITATION BE UTILIZED AT STEP 3? IF NO, SKIP TO QUESTION #51

No

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")

VISITATION PLAN

N/A

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")

N/A

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")

Same.

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

Visitors shall be properly screened as described previously. Visitors shall be offered the proper PPE to walk through the facility safely. Once at the location of the resident to be visited, a limit of 45 minutes shall be placed on the visit and no more than two (2) people to visit at a time to maintain social distancing. Products shall be available for hand hygiene and universal masking shall be followed at all times. The facility shall follow the guidance in CMS QSO-20-39-NH to safely afford residnets and loved ones visitation per the guidance. If one or more public health protocols are not being followed during visitation, the facility reserves the right to ask the party to leave the premise.

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

54. DESCRIBE INFECTION CONTROL PRECAUTIONS ESTABLISHED FOR VOLUNTEERS

Volunteers in Step 3 shall be educated on proper hand hygiene, proper use of PPE, the use and maintaining of social distancing along with universal masking. Volunteers shall be utilized for purposes related to the execution of the facility visitation plan and escorting residents outside, weather permitting.

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

Volunteers will not be gaining admittance to the facility during step 2.

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 1-56, the Implementation Plan should be printed and the signature and date affixed by the NHA in block 57.

56. NAME OF NURSING HOME ADMINISTRATOR

Aaron D. Salyards, NHA

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.

Aaron D. Galanda — 9/25/2020

SIGNATURE OF NURSING HOME ADMINISTRATOR **DATE**