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

Fairmount Wheat Ridge Health Care

2. STREET ADDRESS

333 Wheat Ridge Drive	
3. CITY	4. ZIP CODE
Education	47522
Ephrata	17522
5. NAME OF FACILITY CONTACT PERSON	6. PHONE NUMBER OF CONTACT PERSON
Susan Noriega VP of Health Services	(717) 354-1800

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. 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 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

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**

6/23/2020

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 FORTHE 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

7/9/2020 to 7/10/2020

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

WellSpan Laboratory has the capacity to test symptomatic residents who are suspected of COVID-19. Point-of-Care antigen testing machines and kits are also an option for rapid results.

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

Fairmount utilizes Clarity Labs and Penn Medicine-LGH for all staff and residents should an outbreak occur. WellSpan labs and POC are also available.

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

Fairmount will continue to use Clarity/PM-LGH for surveillance testing.

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

Our non-essential staff and volunteers are in the building fewer than 3 days per week, therefore, will not be testing.

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

Residents who decline testing will need to quarantine in the isolation hallway for up to 14 days. Staff who decline testing will not be able to work in resident areas and may need to resign.

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.

All residents who test positive will be moved to our isolation hallway. Any area/ hallway where a positive resident resided or positive team member worked will be a yellow zone with team members wearing full PPE.

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)

Fairmount currently has adequate supplies of PPE ensuring at least a 2 week supply if at high usage. Fairmount has the ability to obtain additional supplies from organizations including PA DOH should there be an outbreak and/or supplies are low or unavailable through our regular suppliers.

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

Current staffing meets the regulatory requirements of hours per patient day ratio. Our emergency staffing policy outlines interventions should a staffing shortage occur.

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

If there are any new onset of positive COVID-19 cases in Wheat Ridge Health Care, the re-opening plan will be halted and we will immediately revert back to prior full precautions per most recent guidelines. Fairmount will communicate with families and the community through mail and electronically.

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

Body temperature and respiratory assessments are monitored twice a day. If a resident is exhibiting symptoms, the primary care provider will be notified and testing may be administered.

22. STAFF

Upon entering the building, staff have their body temperature taken and respond to a COVID-19 questionnaire via thermal camera. If there is increased temperature or positive answers to questions, an alert is sent to the receptionist and nursing supervisor for further assessment. Staff have been educated on not reporting to work if sick and if they become ill while on duty, report to supervisor and leave the building.

23. HEALTHCARE PERSONNEL WHO ARE NOT STAFF

Same

24. NON-ESSENTIAL PERSONNEL

Same

25. VISITORS

Visitors who are "essential caregivers", visiting at end-of-life, or otherwise visiting indoors will be screened using thermal camera with questions or by a team member. Such visitors will need to complete a visitors form including visitor's name, time in, contact information, and time out. Essential caregivers and other visitors providing support who visit twice a week or more will be tested per most recent PA DOH guidance. Anyone who visits at end-of-life must be screened, but not tested. Anyone who visits outdoors or through a window will not need to be screened or tested.

26. VOLUNTEERS

In order to assist residents with visits, volunteers will be used. Capable volunteers are trained on visiting procedures, emergency/safety, core principles of COVID-19 infection prevention, and communication. They will be screened upon entering the building per staff procedure above.

COMMUNAL DINING

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)

Rehab, Valley View and Mountain View each have their own dining areas. Residents will need to be 6 feet apart in the dining room. This will allow for open dining. Roommates may sit at the same table. Meal times remain at 7:30-9:00 AM, 11:45 AM – 12:30 PM, and 5:00 – 5:45 PM. Valley View breakfast will be open dining beginning at 7:30 AM. For dinner and supper, Birch neighborhood residents will eat at 11:30 AM and 4:45 PM, respectively. Aspen residents will eat at 12:15 PM and 5:30 PM, respectively. Mountain View breakfast will be open dining beginning at 7:30 AM. Lunch will begin at 11:45 AM and supper will begin at 5:00 PM.

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

Tables are arranged to allow 6 foot distance between residents. On Mountain View there is more space to accommodate all residents to eat outside of their rooms.

COMMUNAL DINING

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

Team members must wear a mask and protective eyewear at all times. Team members will ensure residents' hand hygiene is performed prior to and after mealtime. Team members will perform hand hygiene before and in between assisting residents. Tables and chair arms will be cleaned and disinfected between residents/seatings and after mealtime. Residents exhibiting respiratory systems or under transmission-based precautions must eat in room.

30. DESCRIBE ANY OTHER ASPECTS OF COMMUNAL DINING DURING REOPENING

Roommates may sit at the same table as desired. Any resident may dine in-room if it is their preference and they are safe to do so.

ACTIVITIES AND OUTINGS

In each block below, describe the types of activities that will be planned at each step and the outings that will be planned at Step 3 (an all-inclusive list is not necessary). Include where they will be heldand approximately how many residents will be involved. Describehow 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 of 5 residents or fewer will be held in a common area in each neighborhood and limited to residents of that particular neighborhood. Suggested activities include Bingo, trivia, Bible reading, reminiscing, etc. Residents will be physically distanced during the activities and resident will wear a mask (if tolerated). Team members will have hand sanitizer readily accessible and all chairs and items touched by the residents will be disinfected prior to being used by another resident.

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

Activities consisting of 10 residents or fewer will be held in common area in each neighborhood and limited to residents in that neighborhood. Suggested activities during this time include, but are not limited to, crafts, cooking/baking, games, etc. Residents will be physically distanced during the activities and will wear a mask. Team members will have hand sanitizer readily accessible and all chairs and items touched by the residents will be disinfected prior to being used by another resident.

33. DESCRIBE ACTIVITIES PLANNED FOR STEP 3

Activities consisting of 10 or more residents will be held in a common area with each neighborhood and their next door "hall" neighbors (same floor). Suggested activites are as above including Chapel worship services limited to a number of residents that can physically distance. Residents will be physically distanced during the activities and will wear a mask. Team members will have hand sanitizer readily accessible and all tables and items touched by the residents will be disinfected prior to being used by another resident.

34. DESCRIBE OUTINGS PLANNED FOR STEP 3

Outings such as country drives, trips for ice cream may be planned. Outings will include no more than the number of residents that can be 6 feet apart. Masks must be worn thoughout the trip. Fairmount will disinfect the transportation vehicle before and after each use.

NON-ESSENTIAL PERSONNEL

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.

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 includes, but is not limited to, podiatrist, eye doctor, dentist, home health care liaisons, hair care, etc.

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 each time they enter the building. Education on the core principles of infection prevention will be provided on their first visit and subsequent visits, as needed. Residents will be treated in separate levels of care areas or on separate days. Hair Care for Personal Care residents will be held in the beauty salon on a different day than Health Care residents.

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

Visits are scheduled six days a week (Sunday – Friday) between the hours of 1-4 pm on Sunday and in 30 minute increments between the hours of 10 am -4 pm on Monday – Friday.

38. DESCRIBE HOW SCHEDULING VISITORS WILL OCCUR

Visitors may schedule a visit by calling the Wheat Ridge receptionist or online on the Fairmount website.

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

Each visit ends at least 15 minutes prior to the next visit so that all high-touch areas in the visitation area can be wiped down with an EPA-registered disinfectant prior to the next visit.

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

In the special visiting room, the limit for visitors is six. For outdoor or indoor visits the limit is four.

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

Spouses of residents will have priority. Visiting schedules are on a first come, first served basis, but are monitored to ensure that visitors are not scheduled more than once a week to ensure all residents have an opportunity to have visitors.

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)

Prior to visitation being scheduled for a resident, Fairmount will identify residents that will be unable to travel to the indoor or outdoor visitation location. If the resident is unable to use the designated visitation location, families will be notified, and steps will be taken to facilitate a safe visit.

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

Due to the weather changing at this time, visits in our special visiting room will continue. However, if at the time of a visit it is determined that both the resident and visitors would like to visit outdoors, the visitation aide will escort the visitors to the fish pond/garden area outside

TEP 2

VISITATION PLAN

Valley View. If raining and the resident still prefers to visit outdoors, the Valley View patio under the canopy will be utilized.

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

The resident will be seated in front of the swing which is 6 feet from the visitors who will sit on the bench. The visitation aide will determine 6-foot distance under the canopy. Nursing is available to assist as needed.

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

Harvest View Conference Room will be used. The room is right inside the main entrance.

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

A 6-foot table will be used to maintain the physical distance between the resident and visitor.

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)

Same as in Step 2. Visitors will screen at the front entrance. Visitors and residents will continue to wear masks, visit at least 6 feet apart and perform hand hygiene using the hand sanitizer outside the elevators.

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

Due to change of season, most likely 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")

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")

The number of visitation spaces will increase to include Harvest View, Valley View Sunroom and Mountain View Sunroom. The sunrooms are located on the 1st and 2nd floors across from the elevators. A team member will assist the resident to the sunroom and a visitation aide will escort visitors to the sunrooms. Harvest View room visits will take place on the inside section of the room. For those with hearing deficits, the microphone can be used in this room.

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")

Seating will be clearly designated for the resident and the visitor using signs. Nursing will periodically monitor for distancing and mask wearing. Any one not following infection control precautions will be asked to comply or leave.

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

Team members will ensure hand hygiene is performed, masks are worn throughout the visit and physical distancing is maintained. Any one not following infection control precautions will be asked to comply or leave.

STEP

VOLUNTEERS

In Step 2, volunteers are allowed only for the purpose of assisting with outdoor visitation protocols. In Step 3, volunteer duties will gradually be resumed. 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 are educated on infection control precautions, emergencies, communication, and confidentiality, and must pass a hand hygiene competency prior to volunteering. Volunteers will be screen as described above, use hand sanitizer upon entering the building and perform hand hygiene throughout their hours of duty.

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

Visitation – ensuring visitors are checked in and escorted; hand hygiene is performed; transport resident; ensure visitors and residents are physically distanced; and high touch items are disinfected between visits.

ATTESTATION

The Nursing Home Administrator (NHA) is responsible for the accuracy of the Implementation Plan and the facility's adherence to it. Upon completion of blocks 1-56, the Implementation Plan should be printed and the signature and date affixed by the NHA in block 57.

56. NAME OF NURSING HOME ADMINISTRATOR

Susan Noriega

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.

- Ausen & Norrega	9/21/2020
SIGNATURE OF NURSING HOME ADMINISTRATOR	DATE