

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	
Saunders House	
2. STREET ADDRESS	
100 E. Lancaster Ave	
3. CITY	4. ZIP CODE
Wynnewood	19096
5. NAME OF FACILITY CONTACT PERSON	6. PHONE NUMBER OF CONTACT PERSON
Stacey Houseknecht	610-658-5147

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
8/3/2020
8. SELECT THE STEP AT WHICH THE FACILITY WILL ENTER REOPENING – EITHER STEP 1 OR STEP 2 (CHECK ONLY ONE)
<input checked="" 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 <u>June 8, 2020, Order of the Secretary of Health</u>)</i>
<input 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 <u>June 8, 2020, Order of the Secretary of Health</u>)</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)
Yes

DATE AND STEP OF REOPENING

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

6/16/2020

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

6/16/2020 to 7/20/2020

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

We have enough swabs and can test within 24 hours.

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

We have enough swabs and can test within 24 hours.

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

We have enough swabs and can test within 24 hours.

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

We have enough swabs and can test within 24 hours. We currently are not allowing volunteers.

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

Staff who cannot be tested will be put on Medical LOA until they can be tested. Residents who cannot be tested will be put in isolation until they can be tested.

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*.

We have a COVID unit and a unit where all new admissions go until we get a current negative test. Anyone testing positive is moved to the COVID unit.

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)

We currently have enough PPE for our staff and residents.

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

We currently have enough staff to take care of the residents.

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

If there is a resurgence we will immediately stop all visitation and ensure that any positive COVID residents will be moved to the COVID unit and be put into isolation.

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

Any new resident is sent to the second floor and where all new admissions go until we get a negative test. They will be put in isolation as they wait for the results of the test. If the test is positive they remain in isolation and are immediately moved to the COVID+ unit where they stay until the 14 day quarenteen is over.

22. STAFF

All staff will have been tested before visitation starts. Any new staff is tested before they are put on the schedule. Any positive result will require 14 days of isolation before they can work.

23. HEALTHCARE PERSONNEL WHO ARE NOT STAFF

Non staff are screened via a questionnaire and temperature checks before they are allowed to go past the front reception area. All non staff have their temperature taken when they enter and are leaving the facility.

24. NON-ESSENTIAL PERSONNEL

Non-essential personnel are tested the same as essential personnel. Questionnaire and temperature when entering and temperature when leaving.

SCREENING PROTOCOLS

25. VISITORS

Saunders House may allow visits with residents to occur, provided that the physical distancing and protection requirements described in detail below are followed. As much as possible, we will continue to use alternative electronic methods for communication between residents and visitors, such as Skype and FaceTime. Designated Outdoor Visitation Space: Saunders House may allow in-person visitation in a designated outdoor visitation space, provided that all of the following safety, care, and infection control measures are followed:

- A resident who is suspected or confirmed to be infected with COVID-19 cannot be visited. A resident who has recovered from COVID-19 may be visited.
- Prior to transporting a resident to the designated outdoor visitation space, we must screen the visitor for fever or respiratory symptoms. Any individuals with symptoms of COVID-19 infection (fever equal to or greater than 100.0 F, cough, shortness of breath, sore throat, myalgia, chills or new onset of loss of taste or smell) will not be permitted to visit with a resident.
- Transport of a resident to and from the designated outdoor visitation space must be safe and orderly. At a minimum, safe transport means that the resident cannot be transported through any space designated as COVID-19 care space or space where residents suspected or confirmed to be infected with COVID-19 are present.
- Saunders House staff member trained in such patient safety and infection control measures must remain with the resident at all times during the visit. One staff member may supervise more than one family visit as long as they can see everyone.
- Visitors must be limited to no more than two individuals per person/couple. A visitor must remain at least 6 feet from the resident and attending staff member(s) at all times during the visit.
- Staff and residents must wear a surgical face mask and visitors must wear a face covering or mask for the duration of the visit. Visits with a resident in a designated outdoor space must be scheduled in advance and are dependent on permissible weather conditions, availability of outdoor space, and sufficient staffing at the facility to meet resident care needs, and the health and well-being of the resident. Saunders House may limit the length of any visit, the days on which visits will be permitted, the hours during a day when visits will be permitted, and the number of times during a day or week a resident may be visited. Visitors must sign a release and agree to abide by the rules set forth. Any violation by any visitor will cause the visit to be immediately terminated, and may affect future visits. If the visitors get too close to the resident, the resident may be put in isolation until a COVID test can be completed and the results return as negative. It is important to remember that any visitation increases the risk for the resident getting COVID-19. It is therefore very important that people who are not feeling well, have COVID-19, or have been to areas where they may have been exposed to others with COVID-19, and did not follow CDC guidelines, do not visit.

26. VOLUNTEERS

No volunteers at this time.

COMMUNAL DINING FOR RESIDENTS UNEXPOSED TO COVID-19

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)

There will be only one seating in each dining room. This allows for time for complete cleaning between meals.

COMMUNAL DINING FOR RESIDENTS UNEXPOSED TO COVID-19

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

The dining room has been configured to allow for 6 feet between each resident. Only the number of residents who can fit safely into the dining room will be permitted to eat in the dining room.

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

Residents will be required to wear masks when they enter and exit the dining room. They can remove their masks when they are seated and eating their meal. Staff will wear masks at all times. Residents will wash their hands prior to entering the dining room and use hand sanitizer before and after they eat. Staff will wash their hands prior to starting meal service and at the end of the meal service. They will use hand sanitizer between serving each resident.

30. DESCRIBE ANY OTHER ASPECTS OF COMMUNAL DINING DURING REOPENING

Click or tap here to enter text.

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 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)

Activities will have no more than 5 residents in the activity at any time. Residents will be social distancing at all times. They will be given hand sanitizer at the beginning of the activity and the end of the activity. They will be required to wear masks at all times. Only residents who have had a negative COVID test will be permitted to attend the activities. No activities that require communal touching of objects will be permitted.

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

Activities will have no more than 10 residents in the activity at any time. Residents will be social distancing at all times. They will be given hand sanitizer at the beginning of the activity and the end of the activity. They will be required to wear masks at all times. Only residents who have had a negative COVID test will be permitted to attend the activities. No activities that require communal touching of objects will be permitted.

33. DESCRIBE ACTIVITIES PLANNED FOR STEP 3

Activities may have more than 10 residents in the activity. Residents will be social distancing at all times. They will be given hand sanitizer at the beginning of the activity and the end of the activity. They will be required to wear masks at all times. Only residents who have had a negative COVID test will be permitted to attend the activities. No activities that require communal touching of objects will be permitted.

34. DESCRIBE OUTINGS PLANNED FOR STEP 3

No outings are being planned at this time.

NON-ESSENTIAL PERSONNEL

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.

NON-ESSENTIAL PERSONNEL

35. DESCRIBE THE LIMITED NUMBER AND TYPES OF NON-ESSENTIAL PERSONNEL THAT HAVE BEEN DETERMINED NECESSARY AT STEP 2.

The beautician and barber will be permitted as will the eye doctor, dentist, and podiatrist.

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

All who enter the facility will be required to complete a screening questionnaire and a temperature check. They must wear a mask at all times, wash their hands, and/or use hand sanitizer in between each resident seen. Residents will be brought to a central location so the non-essential personnel will not be going from unit to unit. They will only see residents who are COVID negative.

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

Non-essential personnel are not permitted on the COVID+ unit and COVID+ residents are not allowed off the COVID+ unit so they will never come in contact.

VISITATION PLAN

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

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

b. Visits will be scheduled for 20 minutes between 11am and 4:30pm (last appointment is at 4pm) Monday through Friday.

39. DESCRIBE HOW SCHEDULING VISITORS WILL OCCUR

a. To schedule a visit, the family will call and request a visit. They will be given a time to visit and the instructions on what is involved in visitation.

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

b. All furniture used during the visit will be wiped down with an approved cleaning material.

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

2. Only 2 visitors are allowed per resident/couple.

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

Residents who are on Hospice or have diseases that cause progressive cognitive decline or those who have expressed feelings of loneliness will be prioritized.

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)

STEP 2
Residents who are COVID negative will be allowed visits. If the weather is not conducive to an outside visit, the visit may take place inside, at a neutral area, at the discretion of the management.

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 back patio will be used for visitation. There is a covering over this area that will allow for a shady area for visits. To reach this area the staff member will take the resident down the center

VISITATION PLAN

	<p>elevator and out the door of the first floor living room. The families will enter the area by walking around the side of the building.</p>
	<p>45. DESCRIBE HOW A CLEARLY DEFINED SIX-FOOT DISTANCE WILL BE MAINTAINED BETWEEN THE RESIDENT AND THE VISITOR(S) DURING OUTDOOR VISITS</p> <p>The floor of the area will be marked with where the chair(s) are to be located and there will be 6 feet between chairs. A staff member will be with the resident the entire visit to make sure the 6 feet of separation are maintained.</p>
	<p>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</p> <p>If weather is too severe for an outside visit, visits will be moved into the pods along the back wall of the first floor living room. Families will enter from the front door and proceed to the pods. The staff member will bring the resident down the center elevator and enter the living room and go to the pod.</p>
	<p>47. DESCRIBE HOW A CLEARLY DEFINED SIX-FOOT DISTANCE WILL BE MAINTAINED BETWEEN THE RESIDENT AND THE VISITOR(S) DURING INDOOR VISITS</p> <p>The floor of the area will be marked with where the chair(s) are to be located and there will be 6 feet between chairs. A staff member will be with the resident the entire visit to make sure the 6 feet of separation are maintained</p>
STEP 3	<p>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)</p> <p>COVID negative residents can receive visitors. Special arrangements will need to be made for residents who are unable to get out of bed in order to go to the back patio or first floor living room.</p>
	<p>49. WILL OUTDOOR VISITATION BE UTILIZED AT STEP 3? IF NO, SKIP TO QUESTION #52</p> <p>Outdoor visitation will be utilized as the preferred place of visitation.</p>
	<p>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")</p> <p>Same</p>
	<p>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")</p> <p>Same</p>
	<p>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")</p> <p>Same</p>
	<p>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")</p> <p>Same</p>
	<p>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</p> <p>The family that is going to visit will be screened at the front door. They will be required to don full PPE. A staff member will take them to the room of the person they are going to visit. If it is a semi-private room, and the roommate is able to be moved out of the room during the visit, they will be moved before the visitors arrive. Once the visit is over, the PPE (except for the mask) will be removed and the visitors must wash their hands. New PPE will be put on and the staff member will walk the visitor(s) to the front door. All PPE (except the mask) will be removed and the visitors temperature will be taken. They will then leave the building.</p>

VOLUNTEERS

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

At this time, no volunteers will be permitted.

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

None

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 1-57, the Implementation Plan should be printed and the signature and date affixed by the NHA in block 58.

57. NAME OF NURSING HOME ADMINISTRATOR

Stacey Houseknecht

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