

Reopening Implementation Plan for the Pennsylvania Department of Human Services's Interim Guidance for Personal Care Homes, Assisted Living Residences and Private Intermediate Care Facilities During COVID-19

This template is provided as a suggested tool for Personal Care Homes, Assisted Living Residences and private Intermediate Care Facilities to use in developing their Implementation Plan for reopening in accordance with the Pennsylvania Department of Human Service's *Interim Guidance for Personal Care Homes, Assisted Living Residences and Private Intermediate Care Facilities During COVID-19*. 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. The facility will progress to the next step of reopening only when the criteria are met as described in the *Interim Guidance for Personal Care Homes, Assisted Living Residences and Intermediate Care Facilities During COVID-19*. If at any point during reopening the facility fails to meet the criteria for reopening or is operating under a contingency staffing plan, the facility will cease reopening immediately.

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 Administrator but should be someone available to respond to questions regarding the Implementation Plan.	
1. FACILITY NAME	
The Regency at South Shore – Manor Suites	
2. STREET ADDRESS	
322 Washington Place	
3. CITY	4. ZIP CODE
Erie	16505
5. NAME OF FACILITY CONTACT PERSON	6. PHONE NUMBER OF CONTACT PERSON
Kristen Gehrlein	814-969-4800
7.	8.

DATE AND STEP OF REOPENING
The facility will identify the date upon which all prerequisites will be met to begin the reopening process 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).
9. DATE THE FACILITY WILL ENTER THE REOPENING PROCESS
10/19/2020

DATE AND STEP OF REOPENING

10. SELECT THE STEP AT WHICH THE FACILITY WILL ENTER THE REOPENING PROCESS – EITHER STEP 1 OR STEP 2 (CHECK ONLY ONE)

Step 1

The facility must meet all the Prerequisites included in the Interim Guidance for Personal Care Homes, Assisted Living Residences and private Intermediate Care Facilities During COVID-19

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 26, 2020, Order of the Secretary of Health)

AND

Have the absence of any new facility onset of COVID-19 cases for 14 consecutive days since baseline COVID-19 testing

11. HAS THE FACILITY EXPERIENCED A SIGNIFICANT COVID-19 OUTBREAK? (IF NO, SKIP TO #11)

No

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 enter the reopening process).

12. DATE RANGE FOR THE BASELINE UNIVERSAL TEST ADMINISTERED TO STAFF AND RESIDENTS (BETWEEN JUNE 14, 2020 AND AUGUST 31, 2020) IN ACCORDANCE WITH THE JUNE 26, 2020, ORDER OF THE SECRETARY OF HEALTH

8/17/2020 to 9/4/2020

13. DESCRIBE THE ABILITY TO HAVE COVID-19 DIAGNOSTIC TESTS ADMINISTERED TO ALL RESIDENTS SHOWING SYMPTOMS OF COVID-19 AND TO DO SO WITHIN 24 HOURS

For personal care residents, their PCP will be notified to determine diagnostic route to be taken if patient becomes symptomatic, resident will be asked to quarantine in room. For an independent resident they will be asked to quarantine to room and contac their PCP for assistance. Facility will reach out to parent organization for assistance and would be able to have swabs on site and completed within 24 hours. Parent organization SNF will be able to assist with lab processing in an emergency situation.

14. DESCRIBE THE ABILITY TO HAVE COVID-19 DIAGNOSTIC TESTS ADMINSTERED TO ALL RESIDENTS AND STAFF IF THE FACILITY EXPERIENCES AN OUTBREAK, INCLUDING ASYMPTOMATIC STAFF

An outbreak would be identified if active testing is occurring. If this is the case supplies would be on site. For residents their PCP will be notified. If additional supplies are needed, parent organization will supply and assist as needed with processing.

All PC Residents will be temped daily.

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

New Staff are tested upon hire. All Staff were tested essential and non essential. Volunteers will be tested before return as well.

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

Staff will be unable to work in Green Zone, will be offered to work in Yellow or Red Zone and referred to HR for testing and refusal policy. Residents will have to stay in their apartments for 14 days, staff will bring residents meals and care for them in Full PPPE.

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

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 Personal Care Homes, Assisted Living Residences and Intermediate Care Facilities DURING COVID-19*.

If a resident is positive they will be isolated in their apartment. State will be notified. Contact tracing will be done by PCHA. Proper staff communication will be implemented. Staff will wear full PPE when entering apartment to delivery meals and care. We will designate assigned staff to that resident. Resident will be monitored for symptoms. If any symptoms arise, medical director will be notified and RRHCC team. If the symptoms and residents health declines they can be moved to the COVID 19 unit within the company.

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 have adequate PPE on site. Gowns, surgical masks, KN95, gloves, bonnets, N95, eye wear and face shields and booties. Currently as we are in the green zone staff is wearing eye wear, KN95 with surgical mask over top, and gloves. If moved to yellow or red will increase the PPE and we do have enough on site and have access to additional if needed.

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

We currently are operating above the staffing minimum hours required. We do also have plans to implement OT or request support from our continuum of care if we did experience of shortage. Signed contracts with staffing agencies in place.

20. DESCRIBE THE PLAN TO HALT ALL REOPENING FACILITIES AND RETURN TO STEP 1 IF THE FACILITY HAS ANY NEW ONSET OF POSITIVE COVID-19 CASES

If any cases present withing the facility either staff or residents we will stop the reopening plan and return to stage 1. We will also retest weekly until 14 days of no new positives has been achieved before presenting new reopening.

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. Include how the data will be submitted to the Department.

21. RESIDENTS

Personal Care Residents will be asked to self report any new COVID-19 symptoms. Staff will complete temperature checks on PC residents daily. Education will be provided to increase symptom awareness. PC and IL Residents have access to thermal imaging camera to take their temps as needed. Residents can also ask nurses to take their temp and vitals. Weekly communication to all residents and family members are presented via our OneCall Now system. Residents are aware, and will be reminded that in the event of a positive case the community will return to the Stage 1 level.

22. STAFF

Staff are required to take a questionnaire that covers symptoms, contacts and travel before entering the facility. If they can not pass the questionnaire they are to go home and notify the administrator. They are also required to take their temperature before entering the building. They are provided with proper PPE to wear at work. They have been and received weekly reminders about COVID 19 and what the facilities policies and procedures are. They are aware of the reopening plan and have been educated on what would happen if we have to return to step 1.

SCREENING PROTOCOLS

23. HEALTHCARE PERSONNEL WHO ARE NOT STAFF

All are required to take the questionnaire before entering the facility. If they can not pass the questionnaire they are to return home and notify their supervisor/building contact. They are also required to take their temperature before entering the building. They are provided with proper PPE to wear while at the facility. They will be notified of zones and steps upon entering the building if they have changed.

24. NON-ESSENTIAL PERSONNEL

All are required to take the questionnaire before entering the facility. If they can not pass the questionnaire they are to return home and notify their supervisor. They are also required to take their temperature before entering the building. They are provided with proper PPE to wear while at the facility. They will be notified of zones and steps upon entering the building if they have changed.

25. VISITORS

All are required to take the questionnaire before entering the facility. If they can not pass the questionnaire they are to return home and notify the PCHA. They are also required to take their temperature before entering the building. They are provided with proper PPE to wear while at the facility. They will be notified of zones and steps upon entering the building if they have changed.

26. VOLUNTEERS

All are required to take the questionnaire before entering the facility. If they can not pass the questionnaire they are to return home and notify their supervisor. They are also required to take their temperature before entering the building. They are provided with proper PPE to wear while at the facility. They will be notified of zones and steps upon entering the building if they have changed.

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)

Breakfast: 8AM for all residents in main dining room. Lunch: 11:30AM for all personal care residents, 1:00PM for all independent living residents. Dinner: 4:30PM for all personal care residents, 6PM for all independent living residents. If residents doesn't want to participate in attending the dining room they will have their meal delivered to their apartment at those times.

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

Dining Room is set for 50% capacity of original setting. Tables are 6 feet apart from each other. Assigned seats will be provided.

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

Residents will be required to wear masks when not at the table, Staff will be in PPE (KN95, surgical mask, gloves and eye wear) The times of meals are staggered so that a cleaning can happen between the services. Silverware will be wrapped in linen by staff with appropriate gloves. No condiments will be on tables, single serve condiments will be used.

30. DESCRIBE ANY OTHER ASPECTS OF COMMUNAL DINING DURING REOPENING

Menus will be given out 1 week in advance to avoid delays in dining room.

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)

Providing busy bee packets to resident apartments, providing technology to them for skype, zoom and facetime sessions with family. Windows visits with family if capable. Music played via loud speakers to hear through building in their doorways. One Call Now communication system to update with fun facts of the day.

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

All of Step 1, and: 3 Tier Bingo with ten residents in a large space and then around each balcony wearing PPE. Exercise classes via Zoom with no more than 10 residents wearing PPE. Staff providing a door to door delivery system of Wine and Cheese Happy Hour, Vitural Tours of Zoos and Museums with no more than 10 residents. Offering televised religious services.

33. DESCRIBE ACTIVITIES PLANNED FOR STEP 3

All of 1 and 2 but uncapping the limit of 10 and taking it to 25 residents in a space, still requiring PPE.

34. DESCRIBE OUTINGS PLANNED FOR STEP 3

Scenic tours will be provided and dining out, every other seat, wearing PPE. Washing down VANS before and after.

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 Personal Care Homes, Assisted Living Residences and Intermediate Care 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

1- Hair Dresser

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

There are trainings, posters and PPE will be provided. - Hair dresser/Salon detailed plan will be followed.

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

Questionnaire will have to be adheard to and education provided weekly.

VISITATION PLAN

For visitation to be permitted in Steps 2 and 3 of reopening (as described in Section 6 of *Interim Guidance for Personal Care Homes, Assisted Living Facilities and Intermediate Care 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

Tuesday and Thursday indoor Hobby Shop 8AM-4:00PM- 30 mins visits supervised

VISITATION PLAN

39. DESCRIBE HOW SCHEDULING VISITORS WILL OCCUR

Families or friends will have to schedule with office, and questionnaire must be completed and able to pass with temperature check passed and ppe provided.

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

Housekeeping will clean with approved products between each sessions

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

2 Visitors per resident- at separate tables in Hobby Shop and plex glass, wearing PPE.

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

They can not schedule more than 1 visit per week. We will allow all residents to schedule before taking a 2nd visitation appt.

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)

Independent Living Residents can transport themselves. Personal Care Residents will receive assistance. Visitation will be indoors to avoid weather issues. Independent residents are able to come and go at their leisure.

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

No outdoor space only indoor hobby shop to avoid weather issues. The weather is cooler now and residents would be uncomfortable outside.

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

No outdoor visits

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

Hobby shop has 4 tables that at are 4 by 4 in size. The hobby shop is less than 20 steps from main entrance when you enter and turn right. The hobby shop will be cleaned before and after each session.

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

There will be tape marked in the assigned seats in the hobby shop.

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)

Independent Living Residents can transport themselves. Personal Care Residents will receive assistance. Visitation will be indoors to avoid weather issues. Independent residents are able to come and go at their leisure.

49. WILL OUTDOOR VISITATION BE UTILIZED AT STEP 3? IF NO, SKIP TO QUESTION #55

No

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")

Click or tap here to enter text.

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")

Click or tap here to enter text.

VISITATION PLAN

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")

Click or tap here to enter text.

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")

Click or tap here to enter text.

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

Click or tap here to enter text.

VOLUNTEERS

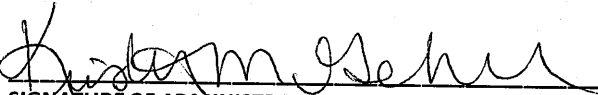
In Step 2, volunteers are allowed only for the purpose of assisting with outdoor visitation protocols and may only conduct volunteer duties with residents unexposed to COVID-19. In Step 3, all volunteer duties may be conducted, but only with residents unexposed to COVID-19. Screening, social distancing, 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

Volunteers would be used for resident visitation coordination and bingo. They will only be in community space and not allowed in resident rooms. Volunteers will be screened before every shift. Volunteers will be consistent. PPE will be provided to volunteers and education on COVID-19 will be given including facilities policies.

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

Calling Bingo and supervising visits on Tuesday and Thursdays


SIGNATURE OF ADMINISTRATOR

10-13-2020
DATE