

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	
Elan Gardens, INC	
2. STREET ADDRESS	
465 Venard Road	
3. CITY	4. ZIP CODE
Clarks Summit	18411
5. NAME OF FACILITY CONTACT PERSON	6. PHONE NUMBER OF CONTACT PERSON
Mia Jacobs	570-585-4400

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).
7. DATE THE FACILITY WILL ENTER THE REOPENING PROCESS
8/28/2020

DATE AND STEP OF REOPENING

8. 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

9. 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).

10. 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](#)

8/12/2020 to 8/13/2020

11. 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

Elan Gardens will test anyone showing COVID symptoms, within 24 hours of identification. The Nursing Department will keep COVID nasal swab kits on hand, for this purpose.

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

We currently are contracted with Geisinger Lab and they will provide test kits to our facility in the event of an outbreak. Nursing department is capable of administering tests in a timely fashion. The facility is able to contact and notify all employees of scheduled Universal COVID testing, within 24 hours. COVID Tests will be administered to all staff and residents within 72 hours of receipt of test kits.

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

To minimize the potential for COVID exposure, all non-essential staff or non-essential volunteers will not be allowed inside the facility. Non-essential individuals may however visit in accordance with our window or outdoor visitation guidelines.

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

Staff who decline testing will not be allowed to continue employment. Staff who have a valid medical reason and are unable to be tested, will follow potential exposure procedures, quarantine, and may return to work in accordance with the most recent CDC HCP return to work guidelines, using the symptoms-based strategy. Employees off from work for this reason may use accrued time off. Residents who decline or are unable to participate in testing will be considered potentially exposed and follow the facility cohorting plan for potentially exposed residents.

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

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

Residents known to have COVID will be moved to a SNF with a COVID unit. Shall an immediate transfer not be possible, the resident will then be moved to the COVID positive area for their floor. The apartments designated for cohorting of positive residents include, 220,222,323,325, and 327. If the resident currently resided in adjoining apartment, the COVID positive areas will be expanded to include that apartment as well. As additional adjacent apartments become available, they may be added to expand the cohorting capacity as deemed necessary by administration. The soiled utility closets and common areas adjacent to the COVID positive areas will be used for cohorting purposes, such as storage of PPE, staff area, etc. The elevator in the COVID positive area will be used for COVID+ related operations only, unless it is absolutely necessary to be used for another purpose. Designated staff will be assigned to this area to care for positive residents. COVID suspected residents will quarantine to their respective apartments. Typically, all apartments are occupied by a single resident. Should there be a second resident occupying the same apartment, the unaffected resident will be moved to an empty apartment and assumed to be potentially exposed, until proven otherwise or until it is safe for them to return.

COVID negative residents will continue to reside in their own respective apartments.

16. 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)

As of 8/19/20 -Current PPE Supply – procured solely by Elan Gardens and not supplied by any external sources:

44 Cases Large Gloves (1,000 pcs ea.)

34 Cases Medium Gloves (1,000pcs ea.)

5 Cases Extra Large Gloves (1,000 pcs ea.)

230 Disposable Gowns + 400 Disposable Ponchos

1400 KN95 Masks

315 N95 Masks (1,000 more to ship December 4, 2020)

2100 Surgical Masks

38 Reusable Goggles

160 Face Shields

Each staff/resident has their own supply of cloth face masks

We plan to care for COVID+ patients, only in the event that they cannot be cared for elsewhere, such as a SNF COVID unit. Our parent company, The Jewish Home of Eastern Pennsylvania, has offered to care for our COVID+ residents shall it be necessary. We acknowledge the changing dynamics of this pandemic and realize this may not be a future option. We have plans for cohosting of residents by their known or assumed COVID status.

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

We currently are fully staffed, however staffing shortages would be a concern, should a COVID outbreak occur. Many of Elan Gardens staff are older with underlying conditions. They may choose not to continue employment should risking their health be a concern. We continue to hire and will contract with a staffing agency, should it be necessary to maintain appropriate staffing levels. Administrative staff, as able, will also fill in direct care staff roles.

18. 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

Immediately, the facility would revert to Step 1 if there are any new or suspected positive COVID cases. Residents will quarantine until universal testing can be completed. Positive staff will be excused from work and asked to quarantine until approval is given for return to work. Staff will return to work in accordance with the CDC's most recent guidelines for HCP return to work, symptoms-based approach. Positive residents may be sent to a Skilled Facility's COVID Unit, if available. If not available, facility cohosting procedures will be implemented immediately to minimize the virus spread.

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.

19. RESIDENTS

Residents are monitored daily for COVID-like symptoms and daily temperature checks are conducted. Residents who exhibit symptoms or an elevated temperature will be immediately tested for COVID. The resident in question will remain quarantined to their apartment until results are obtained. If COVID tests are positive, COVID tracking sheet and incident report will be submitted to DHS.

20. STAFF

All individuals entering the facility will be temperature checked and screened for COVID. Individuals leaving the facility will also have their temperature checked. Anyone who has an elevated temperature of 99.9 degrees Fahrenheit or greater will not be allowed access into the facility. Anyone leaving the facility with an elevated temperature will be tested for COVID prior to leaving and shall not return until the negative test is received, or appropriate time has passed, allowing the individual to return. Returning staff members must follow the most current CDC guidelines, allowing HCP to return to work.

21. HEALTHCARE PERSONNEL WHO ARE NOT STAFF

All individuals entering the facility will be temperature checked and screened for COVID. Staff leaving the facility will also have their temperature checked. Anyone who has an elevated temperature of 99.9 degrees Fahrenheit or greater will not be allowed access into the facility. Anyone leaving the facility with an elevated temperature will be tested for COVID prior to leaving, if able, and shall not return until the negative test is received or appropriate time has passed, allowing the individual to return. If unable to perform a COVID test prior to the individual leaving, that individual is asked to contact their physician and obtain a COVID test. Returning staff members must follow the most current CDC guidelines, allowing HCP to return to work.

22. NON-ESSENTIAL PERSONNEL

Non-essential personnel are not permitted to enter the facility at this time. Exceptions are made for end of life or emergency situations. In this instance. All individuals entering the facility will be temperature checked and screened for COVID. Individuals leaving the facility will also have their temperature checked. Anyone who has an elevated temperature of 99.9 degrees Fahrenheit or greater, or does not pass the screen, will not be allowed access into the facility.

23. VISITORS

Non-essential personnel are not permitted to enter the facility at this time. Exceptions are made for end of life or emergency situations. In this instance. All individuals entering the facility will be temperature checked and screened for COVID. Anyone who has an elevated temperature of 99.9 degrees Fahrenheit or greater, or does not pass the screen, will not be allowed access into the facility.

24. VOLUNTEERS

Non-essential personnel are not permitted to enter the facility at this time. Exceptions are made for end of life, emergency situations, or in the event that volunteers are performing essential functions. All individuals entering the facility will be temperature checked and screened for COVID. Anyone who has an elevated temperature of 99.9 degrees Fahrenheit or greater, or who does not pass the screen, will not be allowed access into the facility.

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.

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

We do not choose to reinstate communal dining until a vaccine is available and provided to all residents. We will continue to encourage mask wearing when residents are outside of their apartments or are receiving care, with the exception of showering and oral/facial hygiene. We only wish to participate in activities where social distancing and mask wearing is possible. Residents will continue to be served meals in their rooms at this time. Residents on our Memory Care Unit often do need assistance with meals to varying degrees. Memory Care residents will participate in communal dining on the Memory Care unit, under staff supervision. Social Distancing will be maintained to the extent possible.

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

Communal dining will only take place on our memory unit. Tables will be spaced to the extent possible. Clear plastic sneeze guards will be utilized to help prevent the spread of droplets when more than one individual is seated at a table.

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

Staff will perform appropriate hand hygiene before and after handling food. Staff will also wear a mask and gloves.

28. DESCRIBE ANY OTHER ASPECTS OF COMMUNAL DINING DURING REOPENING

N/A

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.

29. DESCRIBE ACTIVITIES PLANNED FOR STEP 1 (FIVE OR LESS RESIDENTS UNEXPOSED TO COVID-19)

For small group activities of five residents or less, recreational activities are planned, such as exercise, outdoor activities, bingo, painting, crafts, trivia, word games, book club, movies, etc. These activities will avoid using any items with will be handled by more than one individual, such as card games. All items handled, will be sanitized prior to use and prior to storage. Outdoor spaces will be utilized as able. If activities are held inside, they will take place in larger areas, such as our Auditorium, Wellness Center, Café/Leisure Center. For activities where residents are sitting more than one to a table, clear plastic sneeze guards will be utilized. Residents will be asked to wear a mask or face shield, if unable to wear a mask.

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

For small group activities of five residents or less, recreational activities are planned, such as exercise, outdoor activities, bingo, painting, crafts, trivia, word games, book club, movies, etc. These activities will avoid using any items with will be handled by more than one individual, such as card games. All items handled, will be sanitized prior to use and prior to storage. Outdoor spaces will be utilized as able. If activities are held inside, they will take place in larger areas, such as our Auditorium, Wellness Center, Café/Leisure Center. For activities where residents are sitting more than one to a table, clear plastic sneeze guards will be utilized. Residents will be asked to wear a mask or face shield, if unable to wear a mask.

ACTIVITIES AND OUTINGS

31. DESCRIBE ACTIVITIES PLANNED FOR STEP 3

For small group activities of five residents or less, recreational activities are planned, such as exercise, outdoor activities, bingo, painting, crafts, trivia, word games, book club, movies, etc. These activities will avoid using any items that will be handled by more than one individual, such as card games. All items handled, will be sanitized prior to use and prior to storage. Outdoor spaces will be utilized as able. If activities are held inside, they will take place in larger areas, such as our Auditorium, Wellness Center, Café/Leisure Center. For activities where residents are sitting more than one to a table, clear plastic sneeze guards will be utilized. Residents will be asked to wear a mask or face shield, if unable to wear a mask. .

32. DESCRIBE OUTINGS PLANNED FOR STEP 3

No outings except for necessary physician appointments or to places where public interaction is not a concern, such as a picnic in the nearby park. Residents will be transported to the outing in the facility vehicle. Staff and residents must wear masks while in the vehicle and while at the planned destination. Also, participants must remain socially distanced, to the extent possible while participating in the recreational outing. Spaces will be sanitized to the extent possible, prior to utilization.

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.

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

Non-essential personnel are not permitted to enter the facility at this time. Exceptions are made for end of life or emergency situations, such as a religious representative. In this instance, visitors will follow the same protocol the staff follow. All individuals entering the facility will be temperature checked and screened for COVID. Anyone who has an elevated temperature of 99.9 degrees Fahrenheit or greater, or does not pass the COVID screen, will not be allowed access into the facility.

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

All Non-essential individuals must wear a mask, perform hand hygiene upon entering the facility and when appropriate. Also, all individuals must comply with six-foot social distancing precautions as able. Non-essential individuals are only permitted for extenuating circumstances, at the approval of Administration.

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

Residents who are COVID + or COVID exposed will be quarantined to their apartments or designated apartments according to the facility cohorting plan. Only staff who are approved to provide care and necessary services would be allowed to come in contact with positive residents. Any non-essential staff will be educated on appropriate social distancing practices.

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*

VISITATION PLAN

COVID-19), the following requirements are established. Screening and additional precautions including social distancing, hand hygiene, and universal masking are required for visitors.

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

The scheduled 30-minute visitation will take place Monday through Friday 9am – 4:30pm and weekends by appointment. Visits must be scheduled through the Recreation Coordinator.

37. DESCRIBE HOW SCHEDULING VISITORS WILL OCCUR

Visitors will call the Recreation Coordinator to set up a visit. Residents may also schedule on behalf of their family/friends. Recreation Coordinator will keep a logbook with visitor contact information.

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

The seating area chairs will be sanitized before each visit.

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

For an outdoor visit, a family may have up to four visitors at a given time. Visitors must stay within the designated visitation area. There will be a physical clear barrier between the resident and the visitor. Visitors may not reach over/around the barrier at any time during the visit. Barriers may not be moved by residents or visitors. Visitors and residents must remain seated during the visit, wearing a mask at all times. If resident is unable to wear a mask, a face shield will be provided.

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

The first families to schedule will have priority, unless there are circumstances which would warrant a family to be moved to the top of the list. Special circumstances and arrangements will be approved by Administration. Priority will be given to residents experiencing a cognitive decline or show signs of loneliness.

41. 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)

Outdoor visits will be conducted if the following criteria are met: 1. Both residents and all visitors must wear a mask or face shield during the duration of the outdoor visit. 2. Both residents and visitors must stay seated in their assigned visitation space for the duration of the visit. 3. The outdoor visitation will not cause anxiety or stress to the resident. 4. Staff will accompany residents to the visitation location outside the Main Dining Room Patio doors.

42. 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 outdoor space, outside the Main Dining Room Patio doors, is located under an overhang, providing shelter from inclement weather. Excessive cold and hot temperatures will be monitored by administration for resident's safety and comfort.

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

A physical barrier with clear glass will separate the resident from their loved one. The chairs will be situated by staff to ensure a minimum six-foot distance separation. The outdoor visit will be monitored by staff, as to ensure safety but still provide for privacy.

44. 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

At this time there will be no indoor visitation planned until there is a vaccine that is available for administration to all residents and staff. Special circumstances for indoor visitation will be approved for emergency and end of life circumstances. Such cases must be approved by Administration prior to visitation. Visits will be limited to 30 minutes. Indoor visitation space

STEP 2

VISITATION PLAN

	<p>will be sanitized prior and after visitation. Indoor meeting space will be determined prior by administration. A larger room would be ideal but may not be plausible given the individual's circumstance. Social distancing and mask wearing would still apply for all visitors. Two visitors may visit one resident at a time. Medical grade air purifiers will be utilized in the meeting space for the duration of the visit.</p>
	<p>45. DESCRIBE HOW A CLEARLY DEFINED SIX-FOOT DISTANCE WILL BE MAINTAINED BETWEEN THE RESIDENT AND THE VISITOR(S) DURING INDOOR VISITS</p> <p>Visitors and residents will be asked to remain seated during the duration of the visit. Designated areas will be dedicated to each party. Staff will monitor the visit to ensure safety but still provide privacy as able.</p>
STEP 3	<p>46. 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>There will be no indoor visitation except in the event of an emergency or end of life situations, so long as the visit does not cause additional stress to the resident. These situations will be reviewed and approved by Administration prior to scheduled visitation. Staff will accompany residents to the visitation location.</p>
	<p>47. WILL OUTDOOR VISITATION BE UTILIZED AT STEP 3? IF NO, SKIP TO QUESTION #52</p> <p>Yes, outdoor visitation or window visits are the preferred means of visitation. Only under special circumstances will indoor visitation be approved by Administration.</p>
	<p>48. 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>The front patio area has an overhang that provides coverage from precipitation. If the weather is too hot or too cold, the outdoor visits will cease. Below 50 degrees Fahrenheit or above 95 degrees Fahrenheit will likely be uncomfortable temperatures for residents. Additionally, although the visitation space is covered, heavy precipitation may also prove to be uncomfortable or unsafe for residents. During these situations, visitations will be postponed and rescheduled.</p>
	<p>49. 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>50. 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>51. 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>52. 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>Only for end of life circumstances and emergency situations, would visitation in a resident's room be allowed. Special situations will be approved by Administration prior to visitation. Visitation must be scheduled with the Recreation Coordinator. Social distancing and PPE will still be enforced. Staff will monitor visit for resident safety. A facemask, handwashing, temperature check, and COVID screen must be completed prior to proceeding through the building. Surfaces in the resident's room would be disinfected prior and following the visit. The visiting time would be allowed for up to 30 minutes with a maximum of two individuals in the room at a time.</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.

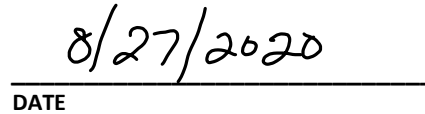
53. DESCRIBE INFECTION CONTROL PRECAUTIONS ESTABLISHED FOR VOLUNTEERS, INCLUDING MEASURES PLANNED TO ENSURE VOLUNTEERS DO NOT COME INTO CONTACT WITH RESIDENTS EXPOSED TO COVID-19

No volunteers at this time. Staff will provide necessary assistance to residents.

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

No volunteers at this time.


SIGNATURE OF ADMINISTRATOR


DATE