

Eagle Valley Personal Care Home, Inc.

Reopening Implementation Plan in accordance with Pennsylvania Department of Health's
Interim Guidance for Personal Care Facilities during COVID – 19

Eagle Valley Personal Care Home, Inc.

500 Front Street

Milesburg, PA 16853

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Date the facility will enter the reopening process: **August 14, 2020**

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.

- This facility has not experienced any COVID-19 cases.

Strategies for Testing, Cohorting, Personal Protective Equipment and Staffing

- Universal testing was completed on all current residents and staff between July 21, 2020 and July 31, 2020. This included property management staff, lawn care staff and facility beautician.
- A contractual agreement is in place with Contamination Source Identification (CSI-DX), that includes providing test kits to this facility.
 - o A clinical staff member would perform the testing needed for all residents showing symptoms of COVID-19 and to do so within 24 hours.
 - o A clinical staff member would perform the testing needed for all staff showing symptoms of COVID-19 and to do so within 24 hours.
 - o Symptomatic residents will self-isolate until results are received (if positive will self-isolate for an addition 10 days).
 - o Symptomatic staff will be removed from the schedule until results are received (if positive will self-isolate an additional 10 days).
 - o Refusals:
 - All residents who meet the required criteria will be required to self-isolate in their private room for 10 days as they are suspected of being ill.
 - Staff who refuse testing will be removed from the schedule and administratively suspended; they will not be reinstated until they comply with the state mandate for COVID-19 testing. Their position will not be held for them and their employment status will change to inactive and any benefits they are entitled to will be discontinued.

- Non- Essential personnel and Volunteer testing will be done at the discretion of administration based on exposure; these individuals will not be permitted into the facility.
 - o Non-Essential personnel and Volunteers being permitted into the facility must provide documentation of a negative COVID-19 test completed after June 26, 2020.
 - o Non- Essential personnel and Volunteers permitted into the facility must comply with the homes policies and procedures for universal masking and pre-entry screening.
 - o Those Non-Essential personnel and Volunteers that do not comply with the policies and procedures will be asked to leave and not permitted back into the facility.
- Personal Protective Equipment
 - o This facility maintains an adequate supply of PPE's, which consist of the following: N95 masks, KN95 masks, surgical masks, gowns, gloves, shoe coverings, face shields, hair nets, and hand sanitizer. This facility also has three over the bed tables, and extra trash cans available for any residents who are isolated. A COVID-19 rapid response cart is also set up in the facility for easy access for those residents who are ill and require staff assistance to perform ADL's. These supplies are monitored and inventoried weekly to ensure there is adequate supplies of each item listed above for personnel who would be in contact with any resident who test positive for three weeks.
- Staffing:
 - o In the event this facility has a confirmed case, the following Critical staffing plan will be implemented, along with the infection control procedures in policy I 28. If the staffing plan cannot be met with current staff, housekeeping and office personnel will be asked to assist on the floor as needed and where needed. Part time staff member will be offered additional hours as well. The possibility of moving to 12-hour shifts could be put into place if the need arises, that will be at the discretion of the Administrator moving forward pending on the situation and staff need.
- New onset of positive COVID-19 cases:
 - o Reopening will be postponed; testing will be completed on suspected individual (resident or staff). Resident would self-isolate for 10 days, the unit for which the resident resides would quarantine for 14 days. Staff exposed will be removed from the schedule pending re-testing and negative result.

Screening Protocols

- Residents/Staff:
 - o A contractual agreement with CSI-DX, testing kits are provided to the facility. Test will be obtained by a clinical staff member; resident will be isolated until results are received. CSI-DX courier will be contacted and transport specimen to the laboratory. Results will be faxed or emailed to the facility administrator. All

results received will be submitted to DHS within 48 hours of result being received (final).

- Healthcare personnel who are not staff:
 - o Once this facility is notified of possible exposure to outside healthcare personnel, outside personnel will not be permitted into the facility. Resident(s) who may have had contact with the individual healthcare personnel will be isolated and tested for COVID-19, residents being tested will self-isolate for 10 days. Staff exposed will be tested and removed from the schedule pending negative results.
- Non-Essential Personnel/Visitors/Volunteers:
 - o Once this facility is notified of possible exposure to Non- Essential Personnel, Visitor or Volunteer this facility will not permit those individuals into the facility until a negative test result is reported via official documentation.
 - A resident exposed to one of the above persons will be self-isolated until negative testing results are obtained.
 - Staff exposed will be removed from the schedule until negative testing results are obtained.

Communal Dining for Residents unexposed to COVID-19

- This facility policy and procedure on Communal Dining for residents unexposed to COVID-19. Those residents may eat in the same room with social distancing (limited number of people at tables and are spaced out by a minimum of 6 feet to comply with social distancing). The following precautions must be followed and adhered to:
 - o Provide in-room meal service for residents who are assessed to be capable of feeding themselves without supervision or assistance.
 - o Identify residents at-risk for choking or aspiration who may cough, creating droplets. Meals for these residents should be provided in their room with assistance. If meals cannot be provided in their rooms, the precautions outlined below be taken for eating in common area in addition to ensuring the residents remain at least six feet or more from each other.
 - o Residents who need assistance with feeding and eating in the common area should be spaced apart as much as possible, ideally six feet or more. Where it is not possible to have these residents six feet apart no more than one resident who needs assistance with feeding may be seated at a table.
 - o The following precautions should be followed when meals are served in a common area:
 - Stagger arrival times and maintain social distancing
 - Increase the number of meal services or offer meals in shifts to allow fewer residents in the common areas at one time
 - Take appropriate precautions with eye protection and gowns for staff feeding the resident population at high-risk for choking, given the risk to cough while eating.

- Staff member who are assisting more than one resident at a time must preform proper hand hygiene with at least hand sanitizer each time when switching assistance between residents.
 - This facility will adhere to all the above and run dining services as normal as possible for the residents.
 - Arrangement of tables and chairs to allow for social distancing:
 - A wing common area has been converted from a sitting room to a dining room, this area now contains four 6 foot by 4-foot tables. Two residents are assigned to each table at opposite ends of the table to comply with the 6-foot social distancing requirements.
 - A wing dining room continued to remain a dining room however in this dining area there will only be one resident assigned to each table as these tables are not large enough to secure the 6-foot social distancing.
 - B wing dining room also remains a dining rom and tables are designated to one resident per table to secure the 6-foot social distancing is complied with.
 - B wing common area has been converted from a sitting room to a dining room this area now contains four 6 foot by 4-foot tables. Tow residents are assigned to each table at opposite ends of the table to comply with the 6-foot social distancing requirements.
 - North wing – all dining area’s remain dining area’s but are limited to one resident per table except for the one table that is in the common area, this table is greater than 6ft look and can seat two residents.
 - Infection Control measures, including use of PPE during meal service
 - All staff serving meals will comply with universal masking. Staff preparing plates or handling food are required to wear gloves as well as a mask. All staff providing meal services are required to complete proper hand hygiene prior to service, as well as anytime there is a break in the flow of service. Collection of used dinnerware will be collected after the meal and dessert pass are completed to avoid cross contamination.
 - Those residents in self-isolation or quarantine will be given disposable diner wear. These items will be immediately disposed of by staff wearing PPE’s.

Planned Activities

- This facility may provide limited activities to residents unexposed to COVID-19, the number of residents that can participate depends on what step in the reopening process the home is in. In all steps social distancing, hand hygiene and universal masking is required. In all phases all activities will be at the discretion of administration.
 - Step 1: Activities will be limited to no more than 5 unexposed residents.
 - Step 2: Activities will be limited to no more than 10 unexposed residents.
 - Step 3: Activities will be provided to residents unexposed to COVID-19 and are limited to no more than the number of people were social distancing between residents can be maintained.
- Outings:

- During step 3 of the reopening process: Outings are allowed but only for residents unexposed to COVID-19 and are limited to no more than the number of people where social distancing between residents can be maintained. Appropriate hand hygiene and universal masking is required. Outings for all other residents should adhere to the restrictions in Step 1 of the reopening process.

Non- Essential Personnel

- The limited number and types of non-essential personnel that have been determined necessary at step 2 are: Home Health Nursing, Beautician, Outside Subcontractors, and Durable Medical Equipment suppliers.
 - No more than two non-essential personnel should be in the facility at any given time. This includes persons from the same office or agency, additional Non-Essential personnel will be allowed into the facility based on need and determined by administration.
 - All Non-Essential Personnel entering the facility will complete a series of questions, complete proper hand hygiene, must be using universal masking. Those
 - Non-Essential Personnel that are not performing hands on care such as Outside Subcontractors and Durable Medical Equipment Suppliers will not be permitted into a residents room unaccompanied, and the resident will be asked to leave the room to comply with social distancing.
 - Non-Essential Personnel such as Outside Subcontractors, Durable Medical Equipment Supplies, and the beautician will not be permitted into any area where a COVID-19 positive resident is residing.
 - Non- Essential Personnel such as Home Health Nursing that must see a COVID-19 positive resident will be permitted into the designated resident's room with full PPE.
 - Based on our policy on entering the facility, staff will be aware of any COVID-19 positive residents and will not allow access into the facility of any Non-Essential Personnel unless instructed to by administration.

Visitation Plan; Indoor visitations:

- This facility will adhere to a strict visitation policy regarding visitations. Any visitor entering the facility will be asked a series of questions, required to complete proper hand hygiene, and required to wear appropriate face coverings (mask or shield). The visitor will be escorted to assigned area, reminded of the 6-foot social distancing policy, and the no touch policy will be reiterated. Any visitor who does not have a mask will be offered one, if a visitor refuses to wear a face covering, they will not be permitted into the facility. The resident will be brought to the chapel for visitation and reminded of the same polices/procedures.
 - Indoor visitations will be scheduled daily from 10am – 7pm in the chapel. No more than two visitors will be permitted into the facility at a given time. The only exception to visitors not visiting in the chapel would be for those residents who are bed bound or actively dying.

- Visitations will be scheduled for no more than 45 minutes; this allows time for the chapel seating area to be cleaned and disinfected prior to the next visiting family member.
- Children are welcome to visit but are considered one of the two visitors permitted into the facility. Children over the age of two must wear a face mask or face shield.
- Visitations for bed bound or hospice residents will be schedule as well. These visitors will comply with all the same requirements prior to entering the facility and visitation length will be at the discretion of administration.
- Outdoor visitation:
 - All outdoor seating areas have been clearly marked with red tape; this tape indicates where the furniture must be kept ensuring 6-foot social distancing is complied with. There is also a long piece of red tape to indicate where visitors should remain behind to comply with 6-foot distancing.
 - Security has been put in place for this facility during the hours of 10:30am – 7:00pm, seven days a week to ensure furniture is kept in designated area, furniture is cleaned between residents, and to enforce the rules for visitors.
 - Visitors have been asked to bring their own furniture to limit the spread of germs to this facility’s outdoor furnishings.
- Cleaning and disinfecting of visitation areas:
 - Security will round the premises every 30 minutes from 10:30am – 7:00pm daily. While rounding if a chair is vacated that chair or bench will be disinfected with a 10 and 1 Clorox solution. Evening shift team leader, aide, evening housekeeper or supervisor will do a final round after all residents have gone to bed to disinfect all chairs.
 - In the event the security personnel is off, designated staff will be responsible for completing every 30-minute rounds.
 - 10 to 1 Clorox solution is mixed daily.
- Prioritizing indoor visitations:
 - Visitations will be based on resident needs, and at the discretion of administration.

Volunteers:

- All volunteers must follow and adhere to restrictions within the visitor policy when not in the reopening process, and in Step 1 of the Reopening Process. Volunteers will be approved by administration prior to volunteering at the facility. Approval will be based on need and purpose.
 - The guidance that the Volunteers must follow and adhere to the following for **Step 1:**
 - Limit exposure to residents, restriction visitation as follows:
 - Restrict all visitors, except those listed in section 2 below.

- Restrict all volunteers, non-essential healthcare personnel and other non-essential personnel and contractors (e.g., barbers).
 - Restrict cross-over visitation from Skilled Nursing Facilities, Independent Living Facilities and Continuing Care Community residents to PCH, ALR or ICF. Ensure cross-over staff adhere to this facilities Infection Control Plan.
- The following personnel are permitted to access this facility and must adhere to universal masking protocols.
 - Physician's, Nurse Practitioners, Physicians Assistance, and other Clinicians.
 - Home Health and Dialysis Services
 - Department of Aging/Area Agency on Aging, including the Ombudsman, where there is concern for serious bodily injury, sexual abuse, or serious physical injury.
 - Hospice services, Clergy and Bereavement Counselors, who are offered by licensed providers within PCH, ALR and ICF.
 - Department of Human Services (DHS) or designees working on behalf of the department.
- **Step 2** of the Reopening Process, 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.
- **Step 3** of the Reopening Process, Volunteers are allowed, but may only conduct volunteer activities with residents unexposed to COVID-19.
- **Steps 2 and 3** of the Reopening Process, Volunteers are allowed as detailed above, and at the discretion of Administration. Administration will conduct periodic rounds to ensure social distancing, proper hand hygiene and universal masking is kept in compliance with the facilities policies and procedures.

Sara M. Bennett, Administrator