

**Messiah Lifeways Implementation Plan for Reopening
In Accordance with the Pennsylvania Department of Health's
Interim Guidance for Skilled Nursing Facilities During COVID-19**

FACILITY INFORMATION	
1. FACILITY NAME Messiah Lifeways	
2. STREET ADDRESS 100 Mount Allen Drive	
3. CITY Mechanicsburg	4. ZIP CODE 17055
5. NAME OF FACILITY CONTACT PERSON Crystal Stair, Nursing Home Administrator	6. PHONE NUMBER OF CONTACT PERSON 717-697-4666

DATE AND STEP OF REOPENING	
7. DATE THE FACILITY WILL ENTER REOPENING Step 2 July 13 2020, Step 3 July 27 2020	
8. SELECT THE STEP AT WHICH THE FACILITY WILL ENTER REOPENING – EITHER STEP 1 OR STEP 2 (CHECK ONLY ONE) <input 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 June 8, 2020, Order of the Secretary of Health)</i> <input checked="" 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 June 8, 2020, Order of the Secretary of Health)</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) No	
10. DATE THE FACILITY WAS SURVEYED BY THE DEPARTMENT OF HEALTH TO ENSURE THE FACILITY IS ADEQUATELY PREVENTING TRANSMISSION OF COVID-19 N/A	

STRATEGY FOR TESTING, COHORTING, PERSONAL PROTECTIVE EQUIPMENT, AND STAFFING	
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 06/01/2020 to 06/02/2020	
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 ML has the capacity to perform Covid testing through UPMC Lab and/or Viktor Lab and has a supply of swabs on hand to complete testing within 24 hours of a resident displaying symptoms of Covid-19.	
13. DESCRIBE THE CAPACITY TO ADMINISTER COVID-19 DIAGNOSTIC TESTS TO ALL RESIDENTS AND STAFF IF THE FACILITY EXPERIENCES AN OUTBREAK ML would utilize Viktor Lab for mass testing if needed and has a Retesting Plan that allows for all residents and team members to be tested in a 2 day time period. Results are available within 48 hours of the lab receiving the completed tests.	
14. DESCRIBE THE CAPACITY TO ADMINISTER COVID-19 DIAGNOSTIC TESTS TO ALL STAFF, INCLUDING ASYMPTOMATIC STAFF	

As noted above in question 13.

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

Staff Development RN is coordinating and completing any additional testing through Vikor that needs performed for non-essential personnel, non-clinical team members, new hires, etc. ML has a Covid Care Team that can support the Staff Development RN if/when needed.

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

ML has an HR policy that prohibits team members from working until they have received a baseline Covid test. ML Testing Plan addresses residents that decline or are unable to be tested . These residents would be cohorted accordingly. To date, there have been no team member or resident refusals. Refer to Covid19 Testing Policy/Procedure as needed.

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*.

ML has a Results Plan to address cohorting. In summary: ML created a plan with “Red/Yellow/Green Zones” to allow for cohorting. The Red Zone consists of converting the 31 private rehab beds to 62 semi-private isolation rooms as needed.

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)

ML has adequate supply of PPE to care for residents currently needing isolation and in secured storage if needed for an outbreak. We continue to acquire PPE for the stockpile. Refer to ISO-SAN Inventory as needed.

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

ML has adequate staffing at this time and has an Emergency Staffing Plan. Summary of Emergency Staffing Plan: a list of team members and who would be their replacement if out ill/requiring quarantine/etc., having non-clinical team members complete CNA Waiver Course, Agency Staffing contact information and contracts. Refer to Emergency Staffing Plan - Covid-19 as needed.

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

ML has kept a timeline of all Covid-related activities/restrictive measures taken throughout the phases since the beginning of Covid efforts. ML will refer to the timeline and reimplement any and/or all restrictions as needed.

SCREENING PROTOCOLS

21. RESIDENTS

ML utilizes a Point Click Care Respiratory Surveillance tool twice daily for new admissions x 14 days after admission with a focus on vital signs and a respiratory evaluation to identify symptom onset promptly. Long Term Care residents are evaluated twice daily for temp and oxygen saturation. Those meeting criteria (ie. abnormal vitals) will prompt a Respiratory Surveillance x 3 days. This information is reported to the Medical Provider’s who will order Covid testing as deemed necessary.

22. STAFF

All team members entering Village Center (location of Skilled Nursing and Personal Care) must perform hand hygiene and apply a face mask prior to entry and are screened at the main entrance. Anyone triggering for illness or possible exposure will be denied entry until further evaluation has occurred by the Infection Preventionist and/or designee. If illness is present, entry will be denied and the team member will be referred to their primary care doctor to determine if testing is needed and will follow return to work criteria.

23. HEALTHCARE PERSONNEL WHO ARE NOT STAFF

Only persons that have been determined by the facility to be essential personnel are permitted to enter Skilled Nursing and they must complete the same screening process as staff prior to entry.

24. NON-ESSENTIAL PERSONNEL

Only persons that have been determined by the facility to be essential personnel are permitted to

enter Skilled Nursing and they must complete the same screening process as staff prior to entry. Non-essential personnel are only permitted to enter for specific purposes and/or timeframes (ie. end of life visit) and must follow strict guidelines.

25. VISITORS

Visitors are only permitted to enter for specific purposes and/or timeframes (ie. end of life visit) and must complete the same screening process (same as #24) and follow strict guidelines.

26. VOLUNTEERS

As noted in question 24.

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)

ML provides in-room meal service for residents who are assessed to be capable of feeding themselves without supervision or assistance. We have identified residents at-risk for choking or aspiration who may cough, creating droplets, and those residents are assisted with meals in dining areas, adhering to social distancing guidelines.

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

Dining rooms have been rearranged to meet social distancing requirements (ie. 2 residents per table across from one another at a table that would have previously accommodated 4 residents).

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

All direct care team members are wearing face masks and face shields. Hand hygiene is being formed for residents before meals and as needed, and for team members before meals, between residents, and according to ML Hand Hygiene policy.

30. DESCRIBE ANY OTHER ASPECTS OF COMMUNAL DINING DURING REOPENING

As stated above.

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

To date, ML is Covid naive. Activities are being coordinated by the Enrichment team for each neighborhood. Activities for Step 1 have consisted more of 1:1 activities, small groups of 5 or less residents (such as bible study, current events), or staggered and socially distanced at room entrances (ex. hallway bingo). Items are dedicated to each resident and/or cleaned between use (ex. disposable paper bingo cards).

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

As noted in #31 with exception of permitting ten or less residents per group.

33. DESCRIBE ACTIVITIES PLANNED FOR STEP 3

Activities will be conducted with residents unexposed to Covid, number or residents permitted to attend will be based on location/room size to allow for adequate social distancing. Hand hygiene will be performed prior to transporting to activity and masks will be worn, unless medically contraindicated.

34. DESCRIBE OUTINGS PLANNED FOR STEP 3

No off campus outings are anticipated at this time. ML will utilize outdoor space on campus at times, abiding by social distancing guidelines. A tent structure located on campus is reservable for shaded, outdoor programs.

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

ML will permit only those Medical Providers or non-essential personnel entry based on acute visits needed (ie. Podiatrist for diabetic resident). When entering, all persons will be screened, perform frequent hand hygiene, must wear a mask and face shield, and will have a dedicated space to avoid traveling through the nursing neighborhoods). Residents needing to travel to the exam room will be encouraged to wear face masks.

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

As noted in #35. Non-essential personnel will need to follow the facilities infection control guidelines, including being screened, performing hand hygiene and applying a mask before entry. Personnel not required to be within 6 feet of a resident (ie. Neuropsychologist) will complete visit with resident, but maintain social distancing requirements.

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

To date, ML is Covid naive. If we were to have facility onset covid case/es, only personnel from the Covid Care Team would be permitted to enter that care area. ML has developed systems to allow for Telemedicine with Providers, Video Chats with families, etc to provide alternate options for contact/communication/connection.

VISITATION PLAN

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

Visitation is scheduled Monday through Friday in 30 minute increments between the hours of 9:00 AM - 4:30 PM.

39. DESCRIBE HOW SCHEDULING VISITORS WILL OCCUR

Residents or family members may request to schedule a 30 minute visit by contacting their neighborhood Social Worker or a member of the Enrichment (Activities) team. A schedule of visits is maintained by the Facility in a shared document.

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

After each 30 minute visit, an additional 30 minutes is reserved for the sanitization of the booth and chairs located at the booth. Each sanitization task is assigned to a team member and proper cleaning/sanitizing supplies are provided.

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

Each scheduled visit allows for 2 visitors per 30 minute visit.

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

Residents with identified special needs will receive priority to scheduled visits. Residents who have spouses on campus in a different level of care (Residential Living or Personal Care) will also have priority to visits.

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2** **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)**

Residents must be unexposed to Covid in order to accept visitors. ML will be sensitive to residents who may find in person visits disruptive. Video conference calls could be offered as an alternative. A team member or volunteer will remain with the resident for the duration of the visit.

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

Outdoor visitation space will be located adjacent to the indoor visitation space at the Chapel entrance. Parking is available next to the Chapel entrance which permits a direct route to the designated visitation space for visitors. In cases of inclement weather, the scheduled visits will be moved to the indoor visitation space. Only one visit will be scheduled at a time to allow for outdoor visits to be moved to the inside space when necessary.

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

Chairs will be placed between a six foot table with markings on the ground indicating appropriate placement of chairs to honor social distancing. A designated team member or volunteer will be available during visits to ensure social distancing is followed.

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

A Connection Booth, a plexi-glass structure with chairs on each side, is available in the indoor visitation space providing a physical barrier between residents and their visitors. This indoor

	<p>space is accessed through the Chapel entrance in a lobby/foyer area. Parking is available next to the Chapel entrance which permits a direct route to the designated visitation space for visitors.</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>A Connection Booth, a plexi-glass structure with chairs on each side, is available in the indoor visitation space providing a physical barrier between residents and their visitors. Only one visit will be scheduled at a time. A designated team member or volunteer will be available during visits to ensure social distancing is followed.</p>
S T E P 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>Residents must be unexposed to Covid in order to accept visitors. ML will be sensitive to residents who may find in person visits disruptive. Video conference calls could be offered as an alternative. A team member or volunteer will remain with the resident for the duration of the visit.</p>
	<p>49. WILL OUTDOOR VISITATION BE UTILIZED AT STEP 3? IF NO, SKIP TO QUESTION #52</p> <p>Yes. Outdoor visitation is preferred weather pending.</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 visit schedule would be coordinated with the Social Worker beforehand. Visitors would be screened, perform hand hygiene and apply a mask prior to entry. Visitors are provided an Approved Visitor Education handout that addresses hand hygiene, limiting surfaces touched, personal protective equipment requirements, and monitoring for signs and symptoms post visitation.</p>

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 will be required to complete specific Covid Infection Control education prior to returning to our campus. Volunteers will need to follow the facilities infection control guidelines, including being screened, performing hand hygiene and applying a mask before entry. In Step 3, volunteers are allowed only for the purpose of assisting with visitation protocols (with residents unexposed to COVID-19). If we were to have facility onset covid case/es, only personnel from the Covid Care Team would be permitted to enter that care area.

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

In Step 2, volunteers will not be utilized. In Step 3, volunteers are allowed only for the purpose of assisting with visitation protocols (with residents unexposed to COVID-19).

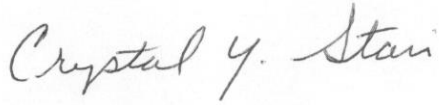
57. NAME OF NURSING HOME ADMINISTRATOR

Crystal Stair, NHA

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.



7/10/2020

SIGNATURE OF NURSING HOME ADMINISTRATOR

DATE