

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 Services *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	
Messiah Lifeways	
2. STREET ADDRESS	
100 Mount Allen Drive	
3. CITY	4. ZIP CODE
Mechanicsburg	17055
5. NAME OF FACILITY CONTACT PERSON	6. PHONE NUMBER OF CONTACT PERSON
Jennifer McKenna, Enhanced Living Administrator	(717) 591-7205

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
Step 2 July 13, 2020; Step 3 July 27, 2020
8. SELECT THE STEP AT WHICH THE FACILITY WILL ENTER THE REOPENING PROCESS – EITHER STEP 1 OR STEP 2 (CHECK ONLY ONE)
<input type="checkbox"/> Step 1 <i>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</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 26, 2020, Order of the Secretary of Health)</i>
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](#)

08/24/2020 to 08/25/2020

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

ML has the capacity to perform Covid testing through UPMC Lab and/or Vikor Lab and has a supply of swabs on hand to complete testing within 24 hours of a resident displaying symptoms of Covid-19.

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

ML would utilize Vikor 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.

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

As noted above in question #12.

14. 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.

15. 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*.

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

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)

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.

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

ML has adequate staffing at this time including available PRN team members to work in the absence of full time and part time team members. Agency Staffing contact information and contracts are available through Nursing and could be utilized in Personal Care.

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

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

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

Nurses obtain resident vital signs twice daily which include oxygen saturation level and temperature to identify symptom onset promptly. Residents displaying respiratory symptoms are placed on droplet precautions and quarantined in their private room for 3 days for further monitoring.

20. 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.

21. HEALTHCARE PERSONNEL WHO ARE NOT STAFF

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

22. NON-ESSENTIAL PERSONNEL

Only persons that have been determined by the facility to be essential personnel are permitted to enter Personal Care 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.

23. 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.

24. VOLUNTEERS

As noted in Question 22.

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)

ML provides in-room meal service for residents who are capable of feeding themselves without supervision or assistance. Others are served meals in the dining room with social distancing protocols followed.

26. 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).

27. 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 offered for residents before meals and as needed, and for team members before meals, between residents and when appropriate.

28. DESCRIBE ANY OTHER ASPECTS OF COMMUNAL DINING DURING REOPENING

As stated above.

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.

<p>29. 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 or staggered and socially distanced at room entrances (ex. hallway bingo).</p>
<p>30. DESCRIBE ACTIVITIES PLANNED FOR STEP 2 (TEN OR LESS RESIDENTS UNEXPOSED TO COVID-19) As noted in #29 with exception of permitting ten or less residents per group.</p>
<p>31. 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. Residents will be asked to wear a mask unless contraindicated.</p>
<p>32. 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.</p>

NON-ESSENTIAL PERSONNEL

<p>In Step 2, non-essential personnel <u>deemed necessary</u> by the facility are allowed (in addition to those already permitted in Section 4 of <i>Interim Guidance for Personal Care Homes, Assisted Living Residences and Intermediate Care Facilities During COVID-19</i>). In Step 3, <u>all</u> non-essential personnel are allowed. Screening and additional precautions including social distancing, hand hygiene, and universal masking are required for non-essential personnel.</p>
<p>33. 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 resident needs. 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 neighborhoods). Residents needing to travel to the exam room will be encouraged to wear face masks.</p>
<p>34. DESCRIBE HOW SOCIAL DISTANCING, HAND HYGIENE, AND UNIVERSAL MASKING WILL BE ENSURED FOR NON-ESSENTIAL PERSONNEL AT STEPS 2 AND 3 As noted in #33. 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.</p>
<p>35. 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.</p>

VISITATION PLAN

<p>For visitation to be permitted in Steps 2 and 3 of reopening (as described in Section 6 of <i>Interim Guidance for Personal Care Homes, Assisted Living Facilities and Intermediate Care Facilities During COVID-19</i>), the following requirements are established. Screening and additional precautions including social distancing, hand hygiene, and universal masking are required for visitors.</p>
<p>36. 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.</p>
<p>37. 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.</p>
<p>38. DESCRIBE HOW VISITATION AREA(S) WILL BE SANITIZED BETWEEN EACH VISIT</p>

<p>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.</p>	
<p>39. 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.</p>	
<p>40. 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.</p>	
S T E P 2	<p>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) 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>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 Outdoor visitation space will be located adjacent to the indoor visitation space at the Bailey Street entrance. Parking is available next to the Bailey Street 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.</p>
	<p>43. 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.</p>
	<p>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 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 space is accessed through the Bailey Street entrance in a lobby/foyer area. Parking is available next to the Bailey Street entrance which permits a direct route to the designated visitation space for visitors</p>
	<p>45. DESCRIBE HOW A CLEARLY DEFINED SIX-FOOT DISTANCE WILL BE MAINTAINED BETWEEN THE RESIDENT AND THE VISITOR(S) DURING INDOOR VISITS 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>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) 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>47. WILL OUTDOOR VISITATION BE UTILIZED AT STEP 3? IF NO, SKIP TO QUESTION #52 Yes. Outdoor visitation is preferred weather pending.</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") Same.</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>

Same.
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") Same.
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") Same.
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 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.

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 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.
54. 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).

8/5/2020

SIGNATURE OF ADMINISTRATOR

DATE