

## **COVID-19 Reopening Implementation Plan**

The following plan will be in place, prior to reopening the facility following the COVID-19 pandemic, in accordance with CMS and Department of Health guidelines. This plan is subject to change based on CMS and Department of Health guidelines and recommendations. To implement the reopening plan, numbers 1-8 of this document must be met. Once these criteria have been met, the facility will enter 'Step 1' of the reopening plan. From the date the facility enters each step of reopening, if there is no new facility onset of COVID-19 cases for 14 consecutive days, the facility may move to the next step of the process. If at any point during any step there is a new facility onset (resident or employee) of COVID-19 cases, the facility must cease the steps to reopen and the plan will be restarted.

1. Fair Acres completed the one baseline COVID-19 test for all residents and employees, per the Department of Health's June 8, 2020 universal testing order, by the deadline of July 24, 2020. This baseline testing will be completed by July 24, 2020 and prior to the reopening of the facility.
  - a. Any symptomatic resident who refuses testing will be cared for in a COVID-potentially exposed red zone until at least 14 days after refusal. If the resident develops symptoms consistent with COVID-19, testing will be recommended, and the testing request will be revisited with the resident and/or responsible party.
  - b. Any employee who refuses testing will not care for residents in unexposed green zones. If these employees develop symptoms consistent with COVID-19, testing will be recommended, and the employee will be excluded from work and follow return to work criteria per the Department of Health.
2. Fair Acres contracts with laboratories to manage the capacity for testing any resident who develops symptoms consistent with COVID-19. This diagnostic testing is completed within 24-hours of symptom onset. This capacity for testing includes those residents who may be asymptomatic (without symptoms).
3. In the event the facility experiences an outbreak of COVID-19, diagnostic testing of all residents and employees, those considered essential and non-essential, will occur. When the facility is not experiencing an outbreak, the frequency of testing for residents and employees will occur based on the facility's county positivity rate.
4. Routine asymptomatic testing of residents will occur to appropriately cohort those residents identified as COVID-19 positive from those without detectable COVID-19 virus.
5. Residents will have their temperature monitored routinely. At risk residents recently exposed to COVID-19 will have a respiratory assessment completed routinely.
6. Essential visitors entering the facility, who have been approved by Administration or the Medical Director, will be screened and provided with the appropriate personal protective equipment if entering a resident-care area. Monitoring of employee and essential visitors' symptoms continues daily.

7. Compassionate Care visitation is allowed in limited situations and will be considered if there are two or more documented “significant changes” in a resident’s condition. A significant change is defined as:
  - a. A major decline or improvement in a resident’s status that: 1. Will not normally resolve itself without intervention by staff or by implementing standard disease-related clinical interventions; the decline is not considered “self-limiting...” 2. Impacts more than one area of the resident’s health status; and 3. Requires interdisciplinary review and/or revision of the care plan.
  - b. Any resident who qualifies for a Compassionate Care visit will have it added to their care plan pursuant to these regulations, to develop comprehensive, individualized, person-centered care plans with resident participation.
  - c. The facility reserves the right to institute all necessary safety precautions prior to, and during, a Compassionate Care visit to protect the health and safety of all the residents.
8. Adequate supplies of personal protective equipment are maintained in the facility. In the event the facility experiences a shortage of this personal protective equipment, the facility will communicate with all necessary channels to obtain an appropriate quantity of supplies.
9. Fair Acres currently has adequate staffing and staffs the facility to meet the state mandated nursing direct care hours, patient per day (PPD) minimums.
10. Prior to entering ‘Step 1’ of the reopening process, in-room meal services will be provided for residents who can feed themselves without supervision or assistance. Meals for residents at-risk for choking or aspiration will be provided in their rooms with assistance. If meals cannot be provided in their rooms, the precautions outlined below must be taken for eating in a common area. Communal dining will be resumed when the facility reaches ‘Step 1’ of the reopening process.
  - a. When the facility reaches ‘Step 1’ of the reopening process, communal dining will be limited to residents unexposed to COVID-19. Those residents may eat in the same room with social distancing (limited number of people at tables and spaced by at least six feet). The following precautions must be taken when meals are served in a common area.
    - i. Stagger arrival times and maintain social distancing (at least six feet or more from each other);
    - ii. Increase the number of meal services or offer meals in shifts to allow fewer residents in common areas at one time;
    - iii. Staff members who are assisting more than one resident at the same time must perform hand hygiene with at least hand sanitizer each time when switching assistance between residents.
11. Prior to entering ‘Step 1’ of the reopening process, group activities will be restricted.
  - a. When the facility reaches ‘Step 1’ of the reopening process, group activities will be limited to five or less residents unexposed to COVID-19. When ‘Step 2’ is reached, group activities will be limited to ten or less residents unexposed to COVID-19 and when

‘Step 3’ is reached, group activities will be resumed with residents unexposed to COVID-19. Social distancing, hand hygiene, and universal masking are required during each step of the reopening process.

12. Prior to entering ‘Step 3’ of the reopening process, visitation will be restricted as follows:

- a. Visitors will be restricted, except for those listed below
  - i. Physicians, nurse practitioners, physician assistants, and other clinicians;
  - ii. The Department of Aging/Area Agency on Aging including the Ombudsman and the Department of Human Services *where there is concern for serious bodily injury, sexual abuse, or serious physical injury*;
  - iii. Visitors to include but not be limited to family, friends, clergy, and others during end of life situations approved by Administration and/or Medical Director;
  - iv. Hospice services, clergy and bereavement counselors, who are offered by licensed providers within the SNF; and
  - v. Department of Health or agents working on behalf of the Department, such as Long-Term Care Ombudsman, or local public health officials.
  
- b. When the facility reaches ‘Step 3’ of the reopening process, outdoor visitation will be permitted in neutral zones designated by the facility. Visitation is limited to residents who are recovered from COVID-19. If weather does not permit outdoor visitation, indoor visitation will be permitted in neutral zones designated by the facility. Alternate needs will be addressed on an individual basis.

13. If Delaware County is reverted to a ‘Red Phase’ of the Governor’s Reopening Plan, the facility’s reopening plan will cease.