

Implementation Plan for Reopening Personal Care At Peter Becker Community

FACILITY INFORMATION

Peter Becker Community

800 Maple Ave
Harleysville, PA 19438

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DATE AND STEP OF REOPENING

- **DATE THE FACILITY WILL ENTER REOPENING**

July 20, 2020

- **SELECT THE STEP AT WHICH THE FACILITY WILL ENTER REOPENING – EITHER STEP 1 OR STEP 2 (CHECK ONLY ONE)**

Step 2

As of 6/13/2020 we have met all prerequisites listed below for reopening:

Baseline universal test for COVID-19 administered to staff and residents on June 8th.

AND

Starting June 22nd, we have had the absence of any new facility onset of COVID-19 cases for 14 consecutive days since baseline COVID-19 testing occurred.

- **HAS THE FACILITY EXPERIENCED A SIGNIFICANT COVID-19 OUTBREAK?**

No

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

- **BASELINE TESTING COMPLETED**

In order to reopen Personal Care at Peter Becker Community, we first completed baseline testing to fulfill the June 12th mandate. On June 8th, all Personal Care staff as well as all residents were tested for COVID-19. All staff and resident results were negative which included 24 staff and 52 residents. We received a waiver of approval on 6/30/20 from Department of Human Services for our universal testing completed on 6/8/20.

- **CAPACITY TO ADMINISTER COVID-19 DIAGNOSTIC TESTS TO ALL RESIDENTS SHOWING SYMPTOMS OF COVID-19 AND TO DO SO WITH 24 HOURS:**

Peter Becker Community continues to keep swabs on-site so that any resident who shows signs or symptoms of COVID-19 can get tested upon onset of symptoms (within 24 hours of onset at a maximum). These swabs will be sent to a private lab that will return the results within 24-72 hours. Residents will continue to be monitored daily for signs and symptoms for quick detection including twice daily temperature checks, and continuous observation.

- **CAPACITY TO ADMINISTER COVID-19 DIAGNOSTIC TESTS TO ALL RESIDENTS AND STAFF IF THE FACILITY EXPERIENCES AN OUTBREAK:**

If the community were to experience an outbreak of COVID-19, we have connections with a private lab which could come in and perform mass testing on all residents and staff. This would include asymptomatic individuals as well. Any staff displaying symptoms would immediately be sent home from work and advised to get tested. They would remain out of work and only return based on CDC guidelines. Using the same procedures followed for baseline testing, we have a process in place for notifying staff of mass testing, coordinating the testing for a single day, and getting the results from the lab. We have prepared the necessary documentation and resources at Peter Becker Community so that a facility-wide mass testing process can be pulled together on short notice when necessary.

- **CAPACITY TO ADMINISTER COVID-19 DIAGNOSTIC TESTS TO ALL STAFF:**

If the community were to experience an outbreak of COVID-19, we have connections with a private lab which could come in and perform mass testing on all residents and all staff. This would include asymptomatic individuals as well.

- **PROCEDURE FOR ADDRESSING NEEDED TESTING OF NON-ESSENTIAL STAFF AND VOLUNTEERS:**

Currently we do not allow non-essential staff or volunteers in Personal Care. We will not be allowing this in step 2 at the current time. However, in the future if we were to allow any non-essential staff or volunteers in, they would be held to the same standard as essential staff. Before allowing these individuals back into the facility, they would be required to have a negative COVID test and pass through our screening questions and temperature check each time they enter the facility. They must wear a surgical mask while on duty and any other PPE deemed necessary. Additionally, if we were to perform mass testing for any reason, those volunteers and non-essential staff entering the facility would be included in those required to test. We would also require volunteers to complete a Consent Form acknowledging their responsibility to act in a manner, both during and outside of volunteering, that protects the safety of the residents and staff. This will include travel restrictions, wearing masks, social distancing, proper hand hygiene, and any other requirements necessary for safety.

- **PROCEDURE FOR ADDRESSING RESIDENTS OR STAFF THAT DECLINE OR ARE UNABLE TO BE TESTED**

For any resident that refuses mandatory testing, they will be put on precautionary isolation for 14 days to determine that they are COVID free. Any resident who was previously positive will not be required to test again.

For Personal Care staff, COVID testing is considered a condition of employment. Unless an employee has a reasonable religious or medical reason, supported by documentation from their physician or clergy, any non-compliance will be construed as a voluntary resignation. If there is a reasonable exemption, Peter Becker Community will make a reasonable effort to accommodate them in a different area of campus that does not expose residents to an untested employee.

- **PLAN TO COHORT OR ISOLATE RESIDENTS DIAGNOSED WITH COVID-19**

For a potential future outbreak, we have the capability of isolating residents. Each resident has their own private room in Personal Care, so we would be able to isolate a resident in their room if they developed any symptoms or had a known exposure. The resident would remain in the room and have all meals served in their room with minimal staff entering. If a positive test is returned and the resident requires a skilled level of care Peter Becker Community has the capability of transferring them to the Health Care Center into their red zone.

- **CURRENT CACHE OF PERSONAL PROTECTIVE EQUIPMENT (PPE) AND THE PLAN TO ENSURE AN ADEQUATE SUPPLY OF PPE FOR STAFF:**

Peter Becker Community has established a strong supply of PPE from various sources including federal and state agencies as well as through our own supply chain and their connections. Currently onsite, we have over 4 months' supply of N95 masks, adequate supply of reusable goggles and face shields to outfit the entire staff if necessary, and a steady supply of gowns and gloves that we can continue to acquire through our supply chain as needed. If an outbreak were to occur, there would be enough PPE onsite to last at minimum 2 months if all of personal care were put on contact and droplet precautions, and a strong supply chain that could continue to fuel our supplies as needed.

- **CURRENT STAFFING STATUS AND THE PLAN TO ENSURE NO STAFFING SHORTAGES**

Current staffing is strong with no staff shortages and a staffing model that is made up almost 100% from Peter Becker Community employees (i.e. no agency reliance). We will continue to allow staff vacations only when we have adequate staffing to cover the time period. We have a contingency of pool staff who will fill in gaps in the schedule as needed. Additionally, if the need were to arise, Peter Becker Community has contracts with a recruiting agency as well as two staffing agencies who will supply staffing if the need arises.

- **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**

If the county returns to the red phase, or Personal Care experiences a new facility-onset COVID-19 case, all reopening plans will cease. A community wide email will be sent out to staff notifying them of the change and the HCC will revert to red phase procedures. Receptionists will be trained on the new procedure and who is allowed in the building to ensure adherence to protocols. A posting will go up on the website to notify the public of the change. Additionally, a communication will go out to the POA of each resident to notify them of the change. Any families with visits scheduled will be notified of the cancellation. Signage will be immediately changed to reflect the change in procedure. Reopening will not commence until the county enters the yellow or green phase.

SCREENING PROTOCOLS

- **RESIDENT SCREENING**

All residents have their temperature taken at least twice daily and are monitored for signs and symptoms including fatigue, cough, shortness of breath and cold signs such as runny nose and sore throat. Any resident that shows signs/symptoms will be tested within 24 hours of onset of symptoms and isolated in their room.

Any resident being admitted will require two negative COVID tests unless there is an emergency situation where two tests cannot be completed ahead of time. If this is the case the resident will be placed on precautionary isolation until two negative tests can be procured.

- **STAFF SCREENING**

All staff are screened at the beginning of shift. Screening is performed at the location where the employee enters the building; either in the main lobby, or in the Personal Care unit. The written screening log includes the individual's name, time of entry, and the following questions. The log is constantly updated as more information comes out. If the individual answers yes to any of the following questions they will not be allowed to enter the building.

1. Do you have any of the following symptoms:

- *Sore throat

- *Fever

- *Cough

- *Shortness of breath

- *Loss of taste and smell

2. Have you been in close contact with or is anyone in your household being treated for or tested for COVID-19?
3. Have you worked in any Facilities with COVID-19 Cases without proper PPE?
4. Have you or have you had prolonged close contact with anyone who has traveled via plane or cruise ship in the last 14 days?
5. Have you been, or have you had prolonged close contact* with anyone who has traveled to, any of the following states in the past 14 days:

Alabama, Arizona, Arkansas, California, Florida, Georgia, Idaho, Louisiana, Mississippi, Nevada, North Carolina, South Carolina, Tennessee, Texas, or Utah.

*If there is a question about whether a situation falls under prolonged close contact, there are directions on the log to call the Director of Nursing for clarification.

In addition, the employee's temperature is taken as part of the screening for entry to the facility. If the individual has a temperature above 100°F they are not allowed to enter the building and are sent home. Staff are also instructed to monitor themselves during shift and to leave immediately if they develop any symptoms.

- **HEALTHCARE PERSONNEL WHO ARE NOT STAFF**

All outside healthcare providers are required to undergo the same screening when entering campus as staff outlined above. The log will also include the organization they work for and a phone number for contacting the individual if contact tracing should become necessary. Outside care providers are also required to have a COVID test with a negative result provided to Peter Becker Community prior to entering the campus starting July 13th. Any healthcare provider/personnel who has not been tested will not be allowed to enter the building until they provide a negative COVID test result.

- **NON-ESSENTIAL PERSONNEL SCREENING**

All other non-essential persons entering the building are required to undergo the same screening when entering campus as staff. The log will also include the organization they work for and a phone number for contacting the individual if contact tracing should become necessary. Currently, no non-essential staff are allowed in Personal Care but they are allowed in other parts of residential living that are housed in a connected building. Those individuals must go through the same screening process as staff as well.

- **VISITOR SCREENING**

All visitors entering the building are required to undergo the same screening when entering campus as staff. The log will also include the organization they work for and a phone number for contacting the individual if contact tracing should become necessary. Currently, no visitors are allowed inside Personal Care but they are allowed in other parts of residential living that are housed in the same building. Those individuals must go through the same screening process as staff as well.

- **VOLUNTEER SCREENING**

All volunteers entering the building are required to undergo the same screening when entering campus as staff. The log will also include the organization they work for if applicable and a phone number for contacting the individual if contact tracing should become necessary. Currently, no volunteers are allowed inside Personal Care but they are allowed in other parts of residential living that are housed in the same building. Those individuals must go through the same screening process as staff as well.

- **COMMUNAL DINING MEAL SCHEDULE**

The dining room will be reopened with the following procedures in place. Only residents unexposed in the last 14 days and who remain asymptomatic will be allowed to dine in the communal dining area. Any resident on precautionary isolation, exposed to a suspected or confirmed COVID positive individual in the past 14 days, or exhibiting symptoms must dine in their room.

Any resident who goes to the dining room will be required to wash their hands in their room prior to coming down. Hand sanitizer will also be provided at the door of the venue. The resident will also be required to have a mask on when they leave their room. Along with utilizing the existing dining rooms, multipurpose space will be reconfigured with tables so that personal care residents have a dedicated dining area that does not cross-over with Independent Living or skilled nursing residents. The tables will be spaced so residents seated are at least 6ft away from one another. Depending on the census and number of residents who would like to take advantage of communal dining, we may encourage staggered seating times in the dining room. If there are multiple seatings at one table, the table and chairs will be sanitized with EPA certified disinfectant and reset before another seating.

Residents will continue to wear masks until they are seated 6ft distance from any other resident. After dinner residents will replace their masks and return to their rooms at intervals to continue maintaining 6ft distance between other residents. The resident will immediately be asked to wash their hands upon returning to their room.

- **ARRANGEMENT OF TABLES AND CHAIRS TO ALLOW FOR SOCIAL DISTANCING**

Residents will be seated with maximum two at a table. A plexiglass barrier will be utilized as needed in the middle of the table to prevent droplet spread. Residents will strategically be seated on only two specific sides of the table across from one another and the furthest distance from the seats at adjacent tables. No resident will be seated closer than 6 ft to another resident at a neighboring table.

- **INFECTION CONTROL MEASURES**

All staff will be required to wear surgical masks and gloves when serving food. If any staff are helping to feed a resident who is at high-risk for choking, they will in addition need to wear a gown and eye protection. If a staff member feeds more than one resident, they must perform proper hand hygiene before switching between residents.

Residents will be required to wear a mask until they are seated, and there is no other resident within 6 feet of them.

All disinfecting procedures will be performed with EPA registered disinfectant. Before and after meals the dining room must be properly disinfected. This includes the tables and chairs being wiped down with EPA Emerging Pathogen List certified disinfectant spray or wipes. All cutlery and dishware once used will be taken immediately to a dedicated area of the kitchen to be cleaned. All staff handling this dishware will have proper PPE on including mask and gloves. For additional details on infection control measures in dining please refer to the Dining COVID-19 Infection Control Procedures Manual.

- **OTHER ASPECTS OF COMMUNAL DINING DURING REOPENING**

Pre-orders will be taken as needed to ensure the timely service of meals to residents. Adjustments to the above plan will be made as necessary to ensure the successful support of residents.

ACTIVITIES AND OUTINGS

- **ACTIVITIES PLANNED FOR STEP 1**

In step 1, limited activities will be resumed that involve 5 or fewer residents who are unexposed in the past 14 days. Any resident on precautionary isolation, exposed to a suspected or confirmed COVID positive individual in the past 14 days, or exhibiting symptoms will not be allowed to engage at that time in group activities. However, they will be provided individualized activities such as coloring, reading material, puzzles and others that can be done with only one person. These materials will then be dedicated to that resident for the duration of their isolation, or disinfected with EPA registered disinfectant properly before being returned to the general supplies used by all residents.

Residents will be required to wash their hands and put on a mask before leaving their room to join the activity. Any resident that refuses either of these precautions will not be allowed to participate. At all times the residents will keep their masks on and remain 6ft apart. Activities can be held in the library, TV area, or other neutral communal spaces that allow for spacing of more than 6 ft between residents. No activities will be engaged in that require touching a communal object. Examples of activities that could be engaged in are current events, storytelling, balloon ball with individual noodles for each resident, light chair exercise, and going outdoors. Upon completion of the activity, residents will be required to wash their hands immediately.

- **ACTIVITIES PLANNED FOR STEP 2**

In step 2, limited activities will be resumed that involve 10 or fewer residents who are unexposed in the past 14 days. Any resident on precautionary isolation, exposed to a suspected or confirmed COVID positive individual in the past 14 days, or exhibiting symptoms will not be allowed to engage at that time in group activities. However, they will be provided individualized activities such as coloring, reading material, puzzles and others that can be done with only one person. These materials will then be dedicated to that resident for the duration of their isolation, or disinfected with EPA registered disinfectant properly before being returned to the general supplies used by all residents.

Residents will be required to wash their hands and put on a mask before leaving their room to join the activity. Any resident that refuses either of these precautions will not be allowed to participate. At all times the residents will keep their masks on and remain 6ft apart. Activities can be held in the library, TV area, outdoor courtyard, or other neutral communal spaces that allow for spacing of more than 6 ft between residents. No activities will be engaged in that require touching a communal object. Examples of activities that could be engaged in are storytelling, balloon ball with individual noodles for each resident, light chair exercise, nature education, movies, among others. Upon completion of the activity, residents will be required to wash their hands immediately.

- **ACTIVITIES PLANNED FOR STEP 3**

In step 3, activities will be resumed that involve 15 or fewer residents who are unexposed in the past 14 days. Social distancing of 6 or more feet will be maintained. Universal masking will be ensured and hand washing before and after activities. Any resident on precautionary isolation, exposed to a suspected or confirmed COVID positive individual in the past 14 days, or exhibiting symptoms will not be allowed to engage at that time in group activities. However, they will be provided individualized activities such as coloring, reading material, puzzles and others that can be done with only one person. These materials will then be dedicated to that resident for the duration of their isolation, or disinfected properly before being returned to the general supplies used by all residents.

Activities will include programming on iN2L device, current events, hymn sing-a-longs, and spiritual programs with residents separated over 6 ft. apart. iN2L used only by Life Enrichment will be sanitized before and after use. Piano will be sanitized before and after use. All sanitation will be performed with EPA registered disinfectant.

- **OUTINGS PLANNED FOR STEP 3**

Residents will be allowed to attend an outing if they follow required hand hygiene before and after the trip, universal masking, and social distancing measures. Any resident on precautionary isolation, exposed to a suspected or confirmed COVID positive individual in the past 14 days, or exhibiting symptoms will not be allowed to attend outings.

Scenic Drive trips will commence with one resident per seat. Up to five residents in total at one time. Bus seats will be sanitized before and after trip. Other outings will be added when deemed safe depending on the prevalence of COVID-19 in the community and surrounding areas.

NON-ESSENTIAL PERSONNEL

- **TYPES OF NON-ESSENTIAL PERSONNEL THAT HAVE BEEN DETERMINED NECESSARY AT STEP 2**

No non-essential personnel are deemed necessary in step 2.

- **SOCIAL DISTANCING, HAND HYGIENE, AND UNIVERSAL MASKING FOR NON-ESSENTIAL PERSONNEL AT STEPS 2 AND 3**

All non-essential personnel will be required to wear a mask at all times in the building, as well as maintain 6 ft social distancing from all others. This is a campus wide policy for anyone entering the campus and is communicated through signage at the door and community policies. Receptionists will not allow anyone into the building without a mask on. Personnel in personal care will be provided with a surgical mask for use if necessary. They will also be provided education on hand hygiene. Signage is posted encouraging hand washing and proper hand hygiene throughout the facility.

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

Use of non-essential personnel will be reassessed closer to step 3 to determine what roles they will be allowed to perform. At a minimum the following restrictions will be put in place:

- Non-Essential Personnel (NEP) will only be allowed in areas with unexposed residents.
- Any resident with symptoms, potential exposure, or a pending test will not be allowed to interact with any NEP.
- NEP will not be allowed into resident rooms unless deemed necessary.
- NEP will be provided with and required to wear a surgical mask at all times in the HCC.
- NEP will be provided with and required to wear gloves when necessary (i.e. pushing a wheelchair).
- NEP will be trained on infection prevention and control procedures and proper hand hygiene.
- NEP will be required to undergo the same screening process staff do each day they volunteer.
- NEP will be required to have a negative COVID test prior to beginning work, and will be included in any mandatory mass testing that HCC staff are required to do.
- As much as possible NEP will be kept in roles where they maintain 6 ft distance from residents at all times. One exception is pushing a wheelchair which involves the volunteer being behind the resident only.

VISITATION PLAN

- **SCHEDULE OF VISITATION HOURS**

When outdoor visitation is allowed, visits will be scheduled and held by appointment only. Appointments to visit are available mornings (approximately 10am – 12pm) or afternoons (1:30pm – 4pm) Monday – Friday. Additionally, evening visitation hours are available Tuesdays and weekend hours on Saturdays in the morning. Visits will be made for 15-minute time slots initially to accommodate all residents. However, additional time will be given as the schedule allows.

- **SCHEDULING VISITORS**

All appointments for visits can be made by calling Life Enrichment at 215-256-1528. If a family member calls the receptionist they will get them in contact with the correct individuals for scheduling a visit. The website also provides directions on how to schedule a visit.

- **SANITIZATION OF VISITATION AREA(S)**

After each visit, the chair and plexi-glass barrier will be wiped down with EPA certified disinfectant spray or similar wipes. It will then be allowed to dry before another resident is brought out.

- **ALLOWABLE NUMBER OF VISITORS PER RESIDENT**

Visitors are required to remain in their vehicle for the entirety of the visit. At one time there can be a maximum of two visitors.

- **ORDER IN WHICH SCHEDULED VISITS WILL BE PRIORITIZED**

In an effort to give all residents an opportunity, appointments will be scheduled on a first come first serve basis but be limited to one visit per week per resident. However, if we have space in the schedule to accommodate more, we certainly may add additional visits.

**STEP
2**

- **DETERMINATION OF RESIDENTS WHO CAN SAFELY ACCEPT VISITORS AT STEP 2**

Residents will be allowed to participate in an outdoor visit at the Personal Care Administrator's discretion. If she is unavailable the decision will be made by the nurse supervisor on duty. Criteria for determining if a resident can safely visit will include respiratory condition, ability to transport, level of assistance needed, overall health, presence of communicable diseases, other symptoms, current weather conditions, and any other factors deemed critical to resident safety.

- **OUTDOOR VISITATION SPACE FOR STEP 2**

The visiting station has a 3-sided plexi-glass barrier that the resident will remain behind for the entirety of the visit. There is a tent over the visiting area to provide shelter and shade. The visitor(s) will remain in their car for the entirety of the visit and can pull right up to the visiting station in the paved road. The resident can access the visiting station through the building and paved sidewalks. An amplifying device will be provided if necessary for hearing.

- **DEFINED SIX-FOOT DISTANCE WILL BE MAINTAINED BETWEEN THE RESIDENT AND THE VISITOR(S) DURING OUTDOOR VISITS**

The plexi-glass barrier provides a limit that the resident cannot get past. The curb provides the physical barrier that a vehicle will not be able to drive over easily. This creates the physical distance that should be maintained for the whole visit on both sides. A staff member will be there throughout the entire visit to monitor the physical distancing as well.

- **INDOOR VISITATION SPACE THAT WILL BE USED IN THE EVENT OF EXCESSIVELY SEVERE WEATHER**

Indoor visitation space will only be provided in the event of multiple consecutive days of severe weather or other conditions that prevent or will limit outdoor visitation for an extended period of time. Our first step will be to reschedule any visits that are deemed unsafe to hold outdoors due to inclement weather at the earliest convenience. If indoor visitation is necessary due to extended inability to visit outdoors, we will have a neutral large room outside of the Personal Care unit be dedicated for visitation. An 8ft table will be used with chairs at either end for the resident and the visitor. The resident will be brought in first and sat at one end of the table. Then the visitor will be brought in through the main entrance, go through the screening and temperature check process, asked to sanitize their hands, remain masked, and then be escorted to the visitation room which is right off of the lobby. Visitor interaction with other staff in the building besides the screener and escort will be avoided whenever possible. The visitor will be sat opposite the resident at the table and a plexi-glass barrier will be placed in the middle of the table.

- **DEFINED SIX-FOOT DISTANCE WILL BE MAINTAINED BETWEEN THE RESIDENT AND THE VISITOR(S) DURING INDOOR VISITS**

If indoor visitation is deemed necessary due to a high amount of cancelled outdoor visits, both residents and visitors will be placed at a table that is over 6 feet long. A plexi-glass barrier may also be placed in the middle of the table to encourage physical distancing and prevent and travel of droplets across the table. A staff member will be there throughout the entire visit to monitor the physical distancing as well.

**STEP
3**

- **DETERMINATION OF RESIDENTS WHO CAN SAFELY ACCEPT VISITORS AT STEP 3**

Same as step 2.

- **OUTDOOR VISITATION IN STEP 3**

Yes we will continue to provide outdoor visitation whenever the weather permits in step 3. It will be preferred method of visitation when possible.

- **OUTDOOR VISITATION SPACE FOR STEP 3**

Same as step 2.

- **DEFINED SIX-FOOT DISTANCE WILL BE MAINTAINED BETWEEN THE RESIDENT AND THE VISITOR(S) DURING OUTDOOR VISITS**

Same as step 2.

- **INDOOR VISITATION SPACE**

Same as step 2.

- **DEFINED SIX-FOOT DISTANCE WILL BE MAINTAINED BETWEEN THE RESIDENT AND THE VISITOR(S) DURING INDOOR VISITS**

Same as step 2.

- **FOR THOSE RESIDENTS UNABLE TO BE TRANSPORTED TO THE DESIGNATED VISITATION AREA, PRECAUTIONS WILL BE PUT IN PLACE TO ALLOW VISITATION IN THE RESIDENT'S ROOM**

If a resident is unable to be transported out of their room, the first option would be to allow a window visit at their room window if the facility design allows. Visitors would still be required to wear masks and follow proper hand hygiene. If the room does not have an accessible outdoor window, then indoor visitation will be allowed on a case-by-case basis. A visitor will be required to complete all screening procedures outlined for staff in the above section including a temperature check. Then they will be required to wear a surgical mask, wash their hands prior to entering the unit, and wear gloves. They will be escorted directly to the resident room, maintaining 6 ft distance from any other individuals in the facility. The visitors will be required to maintain 6 ft distance from the resident. Upon completion of the visit, the visitor will be asked to wash their hands and immediately be escorted off the unit.

VOLUNTEERS

- **INFECTION CONTROL PRECAUTIONS ESTABLISHED FOR VOLUNTEERS**

Use of volunteers will be reassessed closer to step 3 to determine what roles volunteers will be allowed to perform. At a minimum the following restrictions will be put in place:

- Volunteers will only be allowed in Green Zones.
- Any resident with symptoms, potential exposure, or a pending test will not be allowed to interact with any volunteer.
- Volunteers will be provided with and required to wear a surgical mask at all times in the HCC.
- Volunteers will be provided with and required to wear gloves when necessary (i.e. pushing a wheelchair).
- Volunteers will be trained on infection prevention and control procedures and proper hand hygiene.
- Volunteers will be required to undergo the same screening process staff do each day they volunteer.
- Volunteers will be required to have a negative COVID test prior to beginning volunteer work, and will be included in any mandatory mass testing that HCC staff are required to do.
- As much as possible volunteers will be kept in roles where they maintain 6 ft distance from residents at all times. One exception is pushing a wheelchair which involves the volunteer being behind the resident only.

- **DUTIES TO BE PERFORMED BY VOLUNTEERS DURING STEP 2**

Volunteers will not be allowed into Personal Care in step 2.

ATTESTATION

- **PERSONAL CARE ADMINISTRATOR**

Jessica Saccarelli

- **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.

SIGNATURE OF PERSONAL CARE ADMINISTRATOR

DATE