

## 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 Service's *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.	
<b>1. FACILITY NAME</b>	
Spring Mill Senior Living	
<b>2. STREET ADDRESS</b>	
3000 Balfour Circle	
<b>3. CITY</b>	<b>4. ZIP CODE</b>
Phoenixville	19460
<b>5. NAME OF FACILITY CONTACT PERSON</b>	<b>6. PHONE NUMBER OF CONTACT PERSON</b>
Andrea DiOttavio	(610) 933-7675

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).
<b>7. DATE THE FACILITY WILL ENTER THE REOPENING PROCESS</b>
7/19/2020

## DATE AND STEP OF REOPENING

8. SELECT THE STEP AT WHICH THE FACILITY WILL ENTER THE REOPENING PROCESS – EITHER STEP 1 OR STEP 2 (CHECK ONLY ONE)

**Step 1**

*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*

**Step 2**

*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*

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

7/1/2020 to 8/15/2020

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

An agreement with our private laboratory, Aculabs, was made for nasopharyngeal swabs. Results were received within 3-5 business days. Staff also took advantage of free testing through The Chester County Health Department.

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

An agreement with our private laboratory, Aculabs, was made for nasopharyngeal swabs. Results were received within 3-5 business days. Staff also took advantage of free testing through The Chester County Health Department.

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

The community has capacity and capability for all of staff testing administration. The community has ample nasopharyngeal and rapid antibody test kits on-site to accommodate the census of active employees.

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

If a resident is unable or refused to be tested, the resident will be placed on a 14-day self-isolation. If a staff member is unable or refused to be tested, staff must remain out of work for a 14-day self-isolation, or they can be tested.

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

15. DESCRIBE THE PLAN TO COHORT OR ISOLATE RESIDENTS DIAGNOSED WITH COVID-19 IN ACCORDANCE WITH PA-HAN-509 PURSUANT TO SECITON 1 OF THE INTERIM GUIDANCE FOR *Personal Care Homes, Assisted Living Residences and Intermediate Care Facilities DURING COVID-19.*

Any resident with a positive nasopharyngeal Covid-19 result or who is presumptive positive will be placed on isolation until test or re-test results are obtained. Individuals who are placed on isolation will isolate in their apartment or another private apartment. Limited staff will assist resident during isolation and full PPE will be provided and utilized.

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)

Current cache includes gloves, face shields, N-95 masks, surgical masks, goggles, hair covering, shoe covering, gowns, and sanitizer. Weekly inventory is maintained with stock resupply weekly or as needed.

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

The community has been and currently is sufficiently staffed. The current staffing is as follows:

Director of Health and Wellness – full time  
Assistant Director of Health and Wellness – full time  
Memory Care Director – full time

1 Licensed Nursing Staff on day shift, 1 Licensed Nursing Staff on evening shift, 1 Licensed Nursing Staff on night shift  
2 Certified Medication Technicians on day shift, 2 Certified Medication Technicians on evening shift  
Direct Care Staff all three shifts that meets or exceeds DHS requirements

Per diem staff available as needed

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

Notification to our community through our internal tracking system which monitors all Chester County phases, as well as community phases based on any positive residents from testing.

Notification/Communication system in place to share changes related for families, staff, and residents.

## 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

Direct Care staff monitor residents daily through vital signs, observations and assessment of resident based on any signs and symptoms associated with Covid-19 or other respiratory illness. Residents are educated on hand sanitizer use, sanitizer locations, and proper hand hygiene, and when to use a cloth or surgical mask, such as when a staff member enters their apartment.

## SCREENING PROTOCOLS

### 20. STAFF

The community has a formal screening process at the concierge. All staff have temperatures taken upon entering the community at the start of their shift. Any temperature over 99.2 will restrict the team member from entering the community. Any new team member must provide a recent negative Covid-19 result prior to beginning onboarding. Any new team member that tests positive on their pre-employment testing may not permit onboarding and will need to provide a negative test result prior to joining the team. Hand sanitizer is located frequently throughout the community and team members are educated for proper hand hygiene. Cloth masks are used by staff with surgical and N-95 masks available at request or at presence of a positive Covid-19 case.

### 21. HEALTHCARE PERSONNEL WHO ARE NOT STAFF

Screening tool and temperature check is used at our concierge. Only healthcare professionals who pass the screening tool and do not present with a fever may be permitted into the community. Frequent healthcare professionals (home health, hospice) provide the community with their weekly negative Covid-19 results. All healthcare providers are encouraged to provide their own PPE. N-95 masks are available at concierge if the healthcare professional does not have one. Anyone who enters the community is asked to use the hand sanitizer before and after completing the screening tool.

### 22. NON-ESSENTIAL PERSONNEL

Non-essential personnel are not permitted in the community at this time. When restrictions are lifted, the same concierge protocol for healthcare professionals will be utilized with the screening tool, temperature check, hand sanitizer and N-95 mask if they do not provide one.

### 23. VISITORS

Visitors are not permitted in the community at this time. When restrictions are lifted, the same concierge protocol for healthcare professionals will be utilized with the screening tool, temperature check, hand sanitizer and N-95 mask if they do not provide one.

### 24. VOLUNTEERS

Volunteers are not permitted in the community at this time and there is no plan to allow them soon.

## 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)

Communal dining has resumed in the community with multiple seating times to accommodate social distancing.

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

Table formation ensures 6 ft. distance between residents.

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

All staff follow infection control measures that include use of mask and gloves and sanitation between seatings of each table and chair. All tables are stripped, sanitized, and reset after each meal.

### 28. DESCRIBE ANY OTHER ASPECTS OF COMMUNAL DINING DURING REOPENING

Hand sanitizer is set up at the entrance of the dining room. There is a host/hostess that escorts each resident to their assigned seat. Residents wear their mask until their meal is served and place it back on when meal is complete. Hand sanitizer is provided as residents depart the dining room.

## 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.

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

Community has an in-house televised channel that staff can record activities (ie religious services, exercise) where resident can watch and participate in their apartment. Other programming is arranged in open areas that allow for 6-ft social distancing with no more than five residents. All residents are instructed to wear their mask during all programs. Staff will escort residents to and from programs and offer one-to-one programming in their apartments.

### 30. DESCRIBE ACTIVITIES PLANNED FOR STEP 2 (TEN OR LESS RESIDENTS UNEXPOSED TO COVID-19)

Ten resident programming will consist of program content that is on the monthly schedule that includes physical, spiritual, cognitive, emotional, and creative program offerings.

### 31. DESCRIBE ACTIVITIES PLANNED FOR STEP 3

The community will follow the monthly program schedule and continue to follow infection control measures as outlined in Discovery Senior Living policy, which includes sanitation of space and program materials between programs.

### 32. DESCRIBE OUTINGS PLANNED FOR STEP 3

Outings will be scheduled to ensure the location is safe, open, and accessible for residents. Outings using the community bus will be half-filled to ensure social distancing and sanitation procedures will be followed before and after each trip outside of the community.

## NON-ESSENTIAL PERSONNEL

In Step 2, non-essential personnel deemed necessary by the facility are allowed (in addition to those already permitted in Section 4 of *Interim Guidance for Personal Care Homes, Assisted Living Residences and Intermediate Care Facilities During COVID-19*). In Step 3, all non-essential personnel are allowed. Screening and additional precautions including social distancing, hand hygiene, and universal masking are required for non-essential personnel.

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

All regulatory and mandatory inspections to include fire, water, kitchen sanitation, generator testing, sprinkler, and elevator. All necessary repair work must be completed.

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

All non-essential personnel will be educated on social distancing, hand hygiene and universal precautions prior to accessing the community. All screening protocols will be followed.

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

Any resident exposed to Covid-19 will be on isolation. There will not be any non-essential personnel in locations where exposed Covid-19 residents are located.

## VISITATION PLAN

For visitation to be permitted in Steps 2 and 3 of reopening (as described in Section 6 of *Interim Guidance for Personal Care Homes, Assisted Living Facilities and Intermediate Care Facilities During*

## VISITATION PLAN

*COVID-19*), the following requirements are established. Screening and additional precautions including social distancing, hand hygiene, and universal masking are required for visitors.

**36. DESCRIBE THE SCHEDULE OF VISITATION HOURS AND THE LENGTH OF EACH VISIT**

Outdoor visitation will be offered at staggered times allowing for 6-ft social distancing. Visits will be no more than one hour (60 minutes).

**37. DESCRIBE HOW SCHEDULING VISITORS WILL OCCUR**

Visitors are to contact concierge to set up a visitation. During that contact, the visitor is advised of the social distancing protocol, time limit and use of hand sanitizer and masks during the entire visit.

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

Each outdoor area (table) will be marked with a designation that is assigned to the visitor when they make appointment. Concierge monitors the visitations and sanitation will occur before and/or after each visitation to include the table and the chairs.

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

No more than two visitors per resident/per day.

**40. DESCRIBE THE ORDER IN WHICH SCHEDULED VISITS WILL BE PRIORITIZED**

There is no prioritization of scheduled visits. If there is a special accommodation needed, we will handle that on a one-time basis.

**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 will be individually assessed to ensure they are safe and comfortable for outdoor visitation. This includes memory care residents. Residents who express no interest in visitors will continue with video conferencing visits as set up by the community.

**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**

The community will use outdoor patio areas that are protected from weather. Visitors will be screened prior to their scheduled visit. Visitors will not access the patio area from inside the community. Visitors can access the patio areas from outside of the community. Visitors will not be permitted to use restrooms.

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

Signage, posting, table and floor markings will be set up for guidance and instruction of adherence to social distancing.

**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**

We will not permit indoor visitation at this time. Visitors are advised of inclement weather conditions and offered alternative times for visits. Outdoor beverage stations will be set up with beverages to provide hydration during excessive heat conditions.

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

N/A

**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)**

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### VISITATION PLAN

Residents will notify community of specific visitation request. Both resident and visitor will go through the screening process.

47. WILL OUTDOOR VISITATION BE UTILIZED AT STEP 3? IF NO, SKIP TO QUESTION #52

N/A

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")

N/A

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")

N/A

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")

N/A

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")

N/A

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 community will work with each resident and visitor regarding the need for indoor visits. If this is the only option, and both resident and visitor has passed the screening tool, we would allow one visitor at a time due to space constraints and the family would need to don PPE such as mask, gloves and practice hand hygiene. Visitor would only be permitted in the resident apartment and not communal areas. Visitors will be escorted by staff to and from the apartment.

### 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

There is not a process for volunteers at this time as we will not be permitting them.

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

N/A



SIGNATURE OF ADMINISTRATOR



DATE