

# 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.	
1. FACILITY NAME	
Rittenhouse Village at Muhlenberg	
2. STREET ADDRESS	
2900 Lawn Terrace	
3. CITY	4. ZIP CODE
Reading	19605
5. NAME OF FACILITY CONTACT PERSON	6. PHONE NUMBER OF CONTACT PERSON
Kelly Frank, Executive Director	610-208-8890

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
8/31/2020

## 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](#)

7/29/2020 to 8/6/2020

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

Test kits provided upon request by Tower Health Laboratory. Community will have COVID testing supplies in the community at all times to ensure the capability of testing symptomatic residents within 24 hours. Community nurse will obtain an order from the symptomatic resident's physician. Community nurse will administer testing and notify Tower Health Laboratory. Tower Health will pick up the specimen for processing. Tower Health Laboratory will notify the resident's physician and the Community of the results.

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

Residents will have the COVID testing administered by the Community nurse and the specimen will be sent to Tower Health Laboratory for processing. Staff will be sent to Tower Health Urgent Care where they will administer the COVID-19 test. Results will be sent to the staff and the Community.

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

COVID-19 testing will not be required for non-essential staff and volunteers. Screening will be required every time they enter the Community. If they do not pass the screening, they will not be able to enter the Community.

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

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

Residents that refuse or are unable to be tested for COVID – 19 will be quarantined for 14 days. If the residents that refused testing develop symptoms consistent with COVID – 19, testing is recommended and the testing request will be re-visited with the resident and the responsible party.

Staff that refuse COVID – 19 testing, the Community will consider this their voluntary resignation. If there are extenuating circumstances that do not allow a staff member to be tested they must notify the Executive Director and the situation will be evaluated.

### 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*.

Residents that are diagnosed with COVID-19 will be required to isolate in their apartment. A symptom based strategy will be utilized to discontinue transmission based precautions. To minimize exposure and transmission of COVID-19, one staff member per shift will be assigned to care for residents with COVID-19. Staff member assigned to care for residents diagnosed with COVID-19 will care only for COVID-19 positive residents and will handle all needs for those residents.

### 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)

The current cache of PPE on hand in the Community is a one month supply.

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

The Community currently has adequate staffing. The Community has a contract with 2 different staffing agencies such a staffing need arise.

### 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

If the Community has a new onset of positive COVID-19 cases during Step 1, 2 or 3 the Community will impose restrictions. Staff will be immediately notified and will monitor for symptoms. Residents and families will be immediately notified of the restrictions in place.

## 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

Prior to a resident moving into the Community the resident is required to obtain COVID-19 testing and must provide the Community with a copy of the test results. A negative COVID-19 results will be required to move in. Residents that were admitted to the hospital or rehab facility will be required to have a negative COVID-19 test prior to returning to the Community.

Current residents are monitored for symptoms and their temperature is taken daily. If a resident is symptomatic or has had exposure to COVID-19, the Community nurse will obtain an order from the resident's physician to test for COVID-19. Positive cases will be reported to the resident's physician and the Dept of Human Services utilizing the DHS COVID tracker.

SCREENING PROTOCOLS	
20. STAFF	<p>New hires will be required to have pre-employment COVID-19 testing. Testing will be completed at Tower Health Urgent Care. Tower Health Urgent Care will notify the Community of the results. New hires must have a negative COVID-19 result prior to working at the Community.</p> <p>Staff with even mild symptoms of COVID-19 need to contact their supervisor prior to reporting for their scheduled shift. If staff develops symptoms while working, they need to immediately stop caring for residents, notify their supervisor and leave the Community immediately.</p> <p>Staff are required to answer screening questions and have their temperature taken prior to the start of their shift. If there is any concern regarding a staff member's questionnaire or a fever is present, the staff member will be sent home and will be required to have a COVID-19 test.</p>
21. HEALTHCARE PERSONNEL WHO ARE NOT STAFF	<p>Healthcare personnel must answer screening questions and have their temperature taken prior to entering the Community. All healthcare personnel are required to wear face covering, social distance and perform hand washing.</p>
22. NON-ESSENTIAL PERSONNEL	<p>Non-essential personnel must answer screening questions and have their temperature taken prior to entering the Community. All non-essential personnel are required to wear face coverings, practice social distancing, and perform hand washing.</p>
23. VISITORS	<p>Visitors must answer screening questions and have their temperature taken prior to entering the Community. All visitors are required to wear face coverings during the entire visit, stay in the designated visitation area, practice social distancing, use alcohol based sanitizer before and after visit, and sign in providing contact information.</p>
24. VOLUNTEERS	<p>Volunteers must answer screening questions and have their temperature taken prior to entering the Community. All volunteers are required to wear face coverings, practice social distancing and perform hand washing.</p>

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)	<p>Floors will rotate meal service in the dining room and receiving meal trays to their apartments. Residents will be seated in the dining and sit one resident per table, couples will be seated together at a table.</p>
26. DESCRIBE ARRANGEMENT OF TABLES AND CHAIRS TO ALLOW FOR SOCIAL DISTANCING	<p>Tables will be arranged 6 feet apart. Signs will be placed to indicate where the resident is to sit to ensure a 6 feet distance.</p>
27. DESCRIBE INFECTION CONTROL MEASURES, INCLUDING USE OF PPE BY STAFF	<p>Staff are required to wear face coverings at all times in the dining room. Eye protection and gowns are to be worn for staff feeding or monitoring residents that are at high risk for choking. Staff may only assist one resident at a time and must perform hand hygiene with at least hand sanitizer each time they switch assistance between residents.</p>
28. DESCRIBE ANY OTHER ASPECTS OF COMMUNAL DINING DURING REOPENING	N/A

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)	Activities will be scheduled in advance and residents(<5 residents) will be required to sign up. Tables, chairs, high touch areas, game pieces and any item touched by a resident or staff will all be disinfected after each activity. Items used for bingo, word search, etc. will be discarded. Residents and staff are required to wear face masks and practice social distancing. Examples of activities – bingo, crafts, prayer circle, word games, trivia, exercise.
30. DESCRIBE ACTIVITIES PLANNED FOR STEP 2 (TEN OR LESS RESIDENTS UNEXPOSED TO COVID-19)	Activities will be scheduled in advance and residents(<10 residents) will be required to sign up. Tables, chairs, high touch areas, game pieces and any item touched by a resident or staff will all be disinfected after each activity. Items used for bingo, word search, etc. will be discarded. Residents and staff are required to wear face masks and practice social distancing. Examples of activities – bingo, crafts, prayer circle, word games, trivia, exercise
31. DESCRIBE ACTIVITIES PLANNED FOR STEP 3	Activities will be scheduled in advance and residents will be required to sign up. Tables, chairs, high touch areas, game pieces and any item touched by a resident or staff will all be disinfected after each activity. Items used for bingo, word search, etc. will be discarded. Residents and staff are required to wear face masks and practice social distancing. Examples of activities – bingo, crafts, prayer circle, word games, trivia, exercise
32. DESCRIBE OUTINGS PLANNED FOR STEP 3	Outings scheduled will include, but not limited to scenic drives, ice cream trips, trips to the park. Residents are required to sign up for the outing. Six residents will be permitted to travel on the bus to ensure social distancing and face covering are to be worn at all times on the bus and hand sanitizer will be available for resident and staff use. The bus will be disinfected including seats, handrails and any area that may have been touched by residents or staff.

NON-ESSENTIAL PERSONNEL	
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.	
33. DESCRIBE THE LIMITED NUMBER AND TYPES OF NON-ESSENTIAL PERSONNEL THAT HAVE BEEN DETERMINED NECESSARY AT STEP 2	Non-essential personnel for the purposes of life safety, sanitation and maintenance may enter the community. One non-essential personnel will be at a time and must be accompanied by a Community staff member.
34. DESCRIBE HOW SOCIAL DISTANCING, HAND HYGIENE, AND UNIVERSAL MASKING WILL BE ENSURED FOR NON-ESSENTIAL PERSONNEL AT STEPS 2 AND 3	Non-essential personnel will be required to answer screening questions and have their temperature taken prior to entering the Community. They will be accompanied by a Community staff member and will be required to wear face covering and maintain social distancing.

NON-ESSENTIAL PERSONNEL	
35. DESCRIBE MEASURES PLANNED TO ENSURE NON-ESSENTIAL PERSONNEL DO NOT COME INTO CONTACT WITH RESIDENTS EXPOSED TO COVID-19	
Non-essential personnel will not be permitted to enter a resident apartment that has been exposed to COVID-19. Non-essential personnel will be accompanied by a Community staff member.	

VISITATION PLAN	
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.	
36. DESCRIBE THE SCHEDULE OF VISITATION HOURS AND THE LENGTH OF EACH VISIT	
Visitation will be scheduled in advance and will occur between the hours of 9:30 am -11:00 am and 1:00 pm – 4:00 pm ( Subject to change). Scheduled visits will be a maximum of 30 minutes in length. There will be 15 minutes allotted between each scheduled visit to allow Community staff members to disinfect the visitation area.	
37. DESCRIBE HOW SCHEDULING VISITORS WILL OCCUR	
Visitors are required to contact the Community to schedule a visit at least 24 hours prior to the date and time requested. At the time the visitation is scheduled the Community will screen the visitors that will be coming to the Community and obtain contact information. An appointment book will be kept to log all visitors and their contact information, such a need for contact tracing would arise.	
38. DESCRIBE HOW VISITATION AREA(S) WILL BE SANITIZED BETWEEN EACH VISIT	
15 minutes will be scheduled between each visit. Visitation area will be disinfected including tables, chairs any other surface that may have been touched. The area will be disinfected with an approved EPA disinfectant.	
39. WHAT IS THE ALLOWABLE NUMBER OF VISITORS PER RESIDENT BASED ON THE CAPABILITY TO MAINTAIN SOCIAL DISTANCING AND INFECTION CONTROL?	
Two visitors will be permitted to visit during a scheduled visitation. Children are permitted to visit a resident when accompanied by an adult, and will be considered as one of the permitted visitors. Adult visitor must be able to manage children and maintain strict social distancing. . Children older that 2 years of age must wear a face mask during the entire visit. Visitors are required to be screened and have temperature taken prior to visitation. Visitors that do not pass the screening will not be permitted to visit and have access to the Community or Community grounds. Alcohol based hand sanitizer is to be used by visitor and resident before and after the visit. Face coverings are to be worn the entire visit. Visitors are required to stay in the designated visitation area. Visitors are required to sign in and out and provide contact information.	
40. DESCRIBE THE ORDER IN WHICH SCHEDULED VISITS WILL BE PRIORITIZED	
Visits will be scheduled based on residents medical and cognitive conditions. Residents that have a disease that causes progressive cognitive and medical decline and residents that are expressing feelings of loneliness will have priority when scheduling visits. Otherwise, visits will be scheduled on a first come, first serve basis. No standing appointments will be permitted. In order to accommodate all residents in the Community, residents will only be permitted to have one visit per 7 days. Extenuating circumstances are to be discussed with the Executive Director for review.	
STEP 2	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)
	Community staff will assist the residents to the visitation area. Residents must be able to safely travel outside to the visitation area, wear a face covering and maintain social

VISITATION PLAN	
	<p>distancing. Residents that have been exposed to, having symptoms or tested positive for COVID-19 will not be permitted to have visitors.</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</p> <p>Two areas will be available for outdoor visitation. The outdoor visitation will be held at the patio area located outside of the dining room. There will be a visitation area set up on the patio and a visitation area set up in an outdoor tent. The patio is covered and the outdoor tent will provide coverage for inclement weather. The visitation area is accessible from the parking lot for visitors and residents will be escorted by Community staff to the area utilizing the dining room exit.</p>
	<p>43. DESCRIBE HOW A CLEARLY DEFINED SIX-FOOT DISTANCE WILL BE MAINTAINED BETWEEN THE RESIDENT AND THE VISITOR(S) DURING OUTDOOR VISITS</p> <p>The visitation area will be clearly defined by signage indicating the designated visitation area. There will be 6 foot markers indicating where the resident will be seated as well as markers indicating where the visitor will be seated. Social distancing reminders will be placed throughout the visitation area. Community staff will monitor the visitation area to ensure compliance maintaining 6 foot distancing.</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</p> <p>The indoor visitation area will be set up in the sitting room located immediately inside the front entrance. Visitors are able to access the front entrance from the parking lot. Visitors with scheduled visitation will contact the Community upon arrival. Community staff will assist the resident to the indoor visitation area. Visitors will be required to complete the screening and have their temperature taken and will be escorted by Community staff to the visitation area.</p>
	<p>45. DESCRIBE HOW A CLEARLY DEFINED SIX-FOOT DISTANCE WILL BE MAINTAINED BETWEEN THE RESIDENT AND THE VISITOR(S) DURING INDOOR VISITS</p> <p>The visitation area will be clearly defined by signage indicating the designated visitation area. There will be 6 foot markers indicating where the resident will be seated as well as markers indicating where the visitor will be seated. Social distancing reminders will be placed throughout the visitation area. Community staff will monitor the visitation area to ensure compliance maintaining 6 foot distancing.</p>
STEP 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)</p> <p>Community staff will assist the residents to the visitation area. Residents must be able to safely travel outside to the visitation area, wear a face covering and maintain social distancing. Residents that have been exposed to, having symptoms or tested positive for COVID-19 will not be permitted to have visitors.</p>
	<p>47. WILL OUTDOOR VISITATION BE UTILIZED AT STEP 3? IF NO, SKIP TO QUESTION #52</p> <p>Yes, weather permitting.</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")</p> <p>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>



VISITATION PLAN	
	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
<p>Visitors will be required to answer screening questions and have their temperature taken. Visitors will be escorted to the resident's room by Community staff and will be required to contact the Community staff to be escorted to exit the Community. Visitors will only be permitted in the resident's room. Visitors will be required to wear face coverings, practice hand washing and social distancing.</p>	

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
We currently do not have volunteers.
54. DESCRIBE THE DUTIES TO BE PERFORMED BY VOLUNTEERS DURING STEP 2
We currently do not have volunteers.

*Kelly Frank, Executive Director*

*8/24/2020*

SIGNATURE OF ADMINISTRATOR

DATE