Plan for Reopening Community Heritage Green Hanover

<u>Reopening Plan Requirements</u> - This plan to reopen includes thoughtful consideration of the following elements: testing plans to include baseline testing, outbreak testing and routine testing of symptomatic individuals, routine PPS testing of asymptomatic residents and staff, cohorting plans, screening protocol for all persons entering the building, a plan to ensure an adequate supply of PPE, staffing plans including contingency plans, plans to safely resume communal dining and activities, and a plan to allow for the safe visitation of residents within all applicable and appropriate guidelines.

Reopening Process: Upon completion of baseline testing, if there are no new case of COVID 19 identified, the community can begin to enter Step 1 (see attached <u>Guidelines for Steps to Reopen PCH and ALR Facilities</u>). After entering Step 1, the community may then move to Step 2 after 14 consecutive days of no new community onset cases of COVID-19. From the date the community enters Step 2, if there is no new community onset of COVID-19 cases for 14 consecutive days, the community may move to Step 3. If at any time in any Step, new cases of COVID-19 are confirmed, the community will cease reopening, revert back to all restrictions in place prior to Step 1, execute all cohort and outbreak protocols and monitor until such time as there are no new community onset cases for 14 consecutive days. At that time, the community may reinitiate Step 1. The process of progressing and regressing between Steps may be very fluid, based on the status of community COVID-19 cases.

<u>Baseline Testing Plan</u> - All Residents and Staff who have not previously tested positive will be eligible to have a COVID-19 baseline test on or before August 31, 2020. Any Residents or Staff who have tested negative since June 12, 2020 can also be excluded from baseline testing. Baseline testing will be executed by a national lab. If there are any positives that surface during the Baseline testing the community will implement their cohorting strategies and remain under restrictions, per that state guidelines, for at least 14 days from the last positive test. (*Detailed Baseline Testing Procedure available upon request*)

Ongoing Testing Plan for Symptomatic Residents or Staff. The national lab that is supporting baseline testing also has the capacity to provide 48-hour test results for ongoing testing of residents or staff who are showing symptoms of COVID 19. Testing materials are onsite and available to execute same day testing as needed. If there is an outbreak at the community, the same lab can provide support for widespread testing of all residents and staff. Nonessential staff and volunteers will be tested by the national lab using the inventory of testing material available at the community. (Detailed Outbreak Testing Procedure available upon request)

<u>Ongoing PPS Testing Plan for Asymptomatic Residents or Staff</u>. The national lab that is supporting baseline testing also has the capacity to provide 48-hour test results for ongoing PPS

testing of residents or staff who are NOT showing symptoms of COVID 19. PPS testing is a preemptive intervention where a random sample of 20% of residents and staff will be tested. If all results are negative, we will retest the same group after 7 days or select another 20% sample. If any positives are detected, a facility-wide (outbreak) PPS testing plan will be conducted. (Point Prevalence Surveys (PPS) for Heritage Senior Living Communities available upon request)

Cohorting Plan — A resident that tests positive for COVID-19 (symptomatic or asymptomatic) will immediately be isolated to the appropriate Cohort when available or their private room. All direct care staff providing care to COVID-19 positive residents will be trained in CDC PPE guidelines. Appropriate PPE (per CDC guidelines) will be worn during any interaction/care of the resident. To the extent possible, a designated "COVID" team will provide care to any COVID positive residents limiting contact with COVID negative residents. Community will follow CDC guidelines for COVID-19 positive recovery before moving resident out of positive cohort. If a Resident refuses to undergo Covid-19 testing, the Community will treat the resident as a Person Under Investigation make a notation in the resident's chart notify any authorized family member or legal representative of the decision cohort the resident for the required 14-day quarantine period per CDC guidelines for a Person Under Investigations and continue to check temperature of resident daily. (Detailed Cohorting Procedure available upon request)

Staffing Plan - Staff that refuse to be tested or refuse to allow the results to be provided to the community may not report to work until such time they agree to sign the release and have the test. Asymptomatic staff will continue to report to work awaiting the test results. Symptomatic staff will not report to work and will follow the Community Employee Exposure Guidelines. If the community has staffing challenges that need to be addressed due to the a COVID 19 outbreak among staff, all Managers will be trained to provide care and necessary care needs will be prioritized to Medication Management, Meals, Toileting per the Strategies to Mitigate Healthcare Personnel Staffing Shortages published by the CDC April 13, 2020. Agreements are in place for additional per diem contract staffing if the need arises. (Detailed Community Employee Exposure Guidelines available upon request)

<u>Personal Protective Equipment (PPE) Plan</u> – Current PPE inventory at the community includes Gloves, Gowns, N95 Masks, Surgical Masks, Face Shields, Goggles and Sanitizer. Inventory is reviewed weekly and appropriate supply levels are maintained with weekly replenishment from centralized stock maintained by Management Company. All staff are trained in the proper use, donning and doffing of PPE. (Detailed Personal Protective Equipment Guidelines available upon request)

<u>Infection Control Screening Plan</u> – The community has a formal screening process at the front desk for all staff entering the community. All staff have temperatures checked and must answer screening questions when they report to work. These temperatures and answerers to screening questions are captured in a computerized database (AccuShield) for future reference and/or contact tracing. Any staff with a temperature of over 100 degrees Fahrenheit or symptoms of any

illness are sent home and are not allowed to return to work until the symptoms or fever have resolved. When staff are working in the community, they are required to wear surgical masks or N95 masks if working with positive COVID residents per the community cohorting plan. Residents are monitored daily with wellness checks that include screening for any signs and symptoms associated with COVID 19 including daily temperature checks. Residents are educated on proper hand hygiene, including using hand sanitizer and encouraged to wear surgical masks when out of their room. The only visitors allowed in the community are essential personnel who are medically necessary (physicians, hospice, therapy). These visitors must follow the same screening process at the front desk of the community which includes answering screening questions and having their temperature checked. They will not be allowed in the community if they don't meet the screening criteria. (Detailed Infection Control Manual available upon request)

Communal Dining Plan — As a result of the COVID 19 pandemic, the community implemented a policy of in room dining only for residents. For residents who were identified at-risk for choking or aspiration who may cough and create droplets, meals were provided in their rooms with assistance. If meals could not be provided in their rooms, the residents were fed in the common area dining room taking appropriate precautions to allow for social distancing, staff wearing appropriate PPE and disinfecting of area after dining. Staff will also take appropriate precautions with eye protection and gowns when feeding the resident population at high-risk for choking. As the community enters Step 1 of reopening, we will implement a dining plan that ensures safe social distancing at all tables between residents. This will require multiple seating times with staggered hours for dining in the main dining room. All dining staff will follow the proper infection control measures including wearing masks and gloves at all times and sanitizing the tables and chairs after each seating. (Detailed Communal Dining Reopening Procedure available upon request)

<u>Activities Plan</u> – Resident activities will be restricted to specific activity areas that will be set up to ensure social distancing can be maintained. In Step 1 of reopening, resident activities will be limited to no more than 5 residents at a time. Programs will include, exercise classes, arts and crafts classes, cognitive programming and other outdoor activities weather permitting. All residents will be required to wear a mask during activities and maintain social distancing. Resident outings will be scheduled for locations that can be monitored to ensure social distancing (preferably outdoor spaces). The bus transporting residents will only carry the number of residents that can be safely socially distanced in the existing seating configuration.

<u>Visitation Plan</u> –the community is currently not allowing visitors other than medically essential personnel defined above (physicians, hospice, therapy). The community is supporting connections between residents and family/friends with video conferencing technology including FaceTime and Zoom calls. This policy will not change in Step 1 of reopening. When the community enters into Step 2, the community will allow outdoor visitation by appointment only. Outdoor visitation will occur in designated areas only. All visitors must check in at the front desk before their appointment to have their temperature checked and to answer the screening

questions. Visitors who do not pass the screening process will not be allowed to visit the resident that day. During approved visits, all residents and visitors must wear masks at all times and maintain social distancing. Staff will sanitize the visiting area after each visit. No indoor visitation will be allowed during Step 2. When the community enters into Step 3, we will allow appointment only indoor visitation, in addition to outdoor visitation, in neutral areas within the community that are designated in advance by the community. All the same infection control procedures used for outdoor visitation will be implemented for indoor visitation. For those residents unable to be transported to the designated indoor visitation area, the community will work with each family to determine the need to visit the resident within their room. If this option is approved by the community, the resident and visitor must go through the same screening process used for other visitors. The community will only allow 2 visitors in room at a time due to space constraints. All visitors must wear PPE at all times when in the community for a visit. The visitors will be escorted to and from the resident room by a staff member and will not be allowed to linger in the common areas of the community. (Detailed Visitation Procedure available upon request)

Non-Essential Personnel Plan – non-essential personnel (contractors, barbers and other salon services) are currently not allowed in the community. This policy will not change in Step 1 of reopening. When the community enters into Step 2 and 3, the community will allow non-essential personnel in the community on an as needed basis. When entering the community, they must check in at the front desk to have their temperature checked and to answer the screening questions. Non-essential personnel who do not pass the screening process will not be allowed to enter into the community that day. For barbers and those providing salon services, they must follow the Salon Infection Control Procedures established by the community. (*Detailed Salon Infection Control Procedure available upon request*)

<u>Volunteer Plan</u> – volunteers are currently not allowed in the community. This policy will not change in Step 1 of reopening. When the community enters into Step 2, the community will allow volunteers only to assist with outdoor visitation on an as needed basis. They must check in at the front desk to have their temperature checked and to answer the screening questions. Volunteers who do not pass the screening process will not be allowed to assist at the community that day. When the community enters into Step 3, the community will allow volunteers only to assist with indoor and outdoor visitation on an as needed basis following the same screening process used in Step 2.

Guidelines for Steps to Reopen PCH and ALR Facilities

	Step 1	Step 2	Step 3	
Dining ¹	Communal dining is 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). Adhere to the Precautions When Meals Are Served in a Common Area in Section 5 of this guidance. All other residents must adhere to the restrictions in Section 5, Dining Services when not in the Reopening Process.			
Activities	Limited activities may be conducted with <i>no more than five</i> residents unexposed to COVID-19. Social distancing, hand hygiene, and universal masking are required.	Limited activities may be conducted with <i>no more than ten</i> residents unexposed to COVID-19. Social distancing, hand hygiene, and universal masking are required.	Activities may be conducted with residents unexposed to COVID- 19. Social distancing, hand hygiene, and universal masking are required.	
Non- Essential Personnel	Adhere to restrictions in Section 4, Visitor Policies when Not in the Reopening Process.	Non-essential personnel are allowed as determined necessary by the facility, with screening and additional precautions including social distancing, hand hygiene, and universal masking. Services for exposed residents adhere to the restrictions in Section 4, Visitor Policies When Not In the Reopening Process	Non-essential personnel are allowed with screening and additional precautions including social distancing, hand hygiene, and universal masking. Barber and hair stylist services are permitted for residents unexposed to COVID19, at the facility's discretion. Facility must establish protocols in the Implementation Plan for barber or hair stylists including PPE and ensuring six feet between residents receiving services. Services for all other residents adhere to the restrictions in Section 4, Visitor Policies when not in the Reopening Process	

¹Communal dining is the same for all steps of reopening.

	Step 1	Step 2	Step 3
Volunteers	Adhere to restrictions in Section 4, Visitor Policies when not in the Reopening. Process.	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. Screening, social distancing, and additional precautions including hand hygiene and universal masking are required.	Volunteers are allowed but may only conduct volunteer activities with residents unexposed to COVID-19. Screening, social distancing, and additional precautions including hand hygiene and universal masking are required.
Visitors	Adhere to restrictions in Section 4, Visitor Policies when not in the Reopening Process.	Outdoor visitation (weather permitting) is allowed in neutral zones to be designated by the facility. If weather does not permit outdoor visitation, indoor visitation is allowed in neutral zones to be designated by the facility and defined in the Implementation Plan. Visitation is limited to residents unexposed to COVID-19. Review Section 6e for additional requirements. Visitation for exposed residents adhere to the restrictions in Section 4, Visitor Policies Not Impacted by the Reopening Process.	Indoor visitation is allowed in neutral zones to be designated by the facility. Visitation is limited to residents unexposed to COVID-19. Visiting in a resident's room (within facility's established protocols) is permitted only if the resident is unable to be transported to designated area. Screening and additional precautions including hand hygiene and universal masking are required. Space between visitor(s) and resident (and other groups of visitors/resident) must be at least six feet. Visitation time is scheduled, and facility determines appropriate number of visitors to meet visitation requirements. Visitation is not permitted during mealtimes. Cross-over visitation is only permitted if there is no new facility onset of COIVD-19 in the facility in which the cross-over visitor resides. Visitation for all other residents adhere to the restrictions in Section 4, Visitor Policies Not Impacted by the Reopening Process.

² Outdoor visitation protocols could include scheduling of visits, transporting (but not lifting) residents and monitoring visitation.

	Step 1	Step 2	Step 3
Outings	Section 4, Visitor	Adhere to restrictions in Section 4, Visitor Policies Not Impacted by the Reopening.	Outings are allowed only for residents unexposed to COVID-19. Outings limited to no more than the number of people where social distancing between residents can be maintained. Appropriate hand hygiene, and universal masking are required. Outings for all other residents adhere to the restrictions in Section 4, Visitor Policies Not Impacted by the Reopening Process