

Rehab at Shannondell

The Meadows at Shannondell

COVID-19 Reopening Plan

July 1, 2020

Rehab at Shannondell at The Meadows at Shannondell has developed an extensive plan to reopen our facility in conjunction with the guidance provided by the CDC and the PA DOH. This plan is intended to be used as a guide and will be updated regularly as dictated by changes in resident conditions, needs and COVID-19 status.

Implementation Date – All units that are in “Green” status in accordance with section 3a below will be entering Step 1 on July 6, 2020.

1. Cohorting Residents

The healthcare component of Shannondell at Valley Forge has three (3) dedicated “COVID-19” treatment units in the Rehab at Shannondell (5000 Shannondell Drive). Unit 1B, 2A and 1C have been approved by the PA DOH to function as COVID-19 treatment units for the purposes of treating COVID-19 positive patients or patients that are recovering after being treated for COVID-19. The current “open” or available unit is – 2A.

If, at any time, a resident at The Meadows at Shannondell or Rehab at Shannondell receives a positive COVID-19 test, they will be transferred to Unit 2A immediately. The clinical team is responsible for transfer and a member of the clinical leadership team is on call 24/7 and is responsible to come in to the facility to assist with this process.

Unit 1C is being used as a “transitional care unit” for patients that were previously treated for COVID-19 and have recovered to be transferred off of the treatment unit.

2. Mandatory Reporting through Corvena (previously known as Knowledge Center) and Survey123

In accordance with the Order of the Secretary of Health issued on April 21, 2020, our facility completes the SNF Capacity survey on a daily basis (**Reference #1**)

In accordance with the Order of the Secretary of Health issued on May 14, 2020, our facility completes the survey data collection information each day.

(Reference #2)

3. Infection Control and Personal Protective Equipment (PPE)

a. Nursing Unit Classification System

The Meadows at Shannondell and Rehab at Shannondell have implemented a color coded COVID-19 infection control program for each of our nursing units. Each individual 20 or 30 bed unit has its own unique color coded classification (Red, Yellow or Green) based on the level of COVID-19 exposure to residents, patients or staff on the unit. All patients and residents are screened for COVID-19 based on the color of the unit that they reside on.

Red – These are COVID-19 Positive units and only patients that are verified COVID-19 positive will be on this unit. Instructions for wearing PPE are outlined in policy and posted on the unit. Full PPE (Hair covering, gown, gloves, N95 masks, foot coverings, eye protection) must be worn when providing care. Temperature and vital sign monitoring are specific to each resident and determined by the physician.

Yellow – these are “exposure” or “potential exposure” units and for all new admissions and for anyone that has suspected exposure to COVID-19 or their exposure level is unknown. Instructions for wearing PPE are outlined in policy and posted on the unit. Full PPE (Hair covering, gown, gloves, N95 masks, foot coverings, eye protection) must be worn when providing care and must be changed for each room / patient visit. Temperature and vital signs monitoring on a yellow unit occurs every 4 hours.

Green – these are units that there is no concern for exposure and the staff on these units is required to wear N95, gloves and face covering when providing care. Temperature and vital signs monitoring on a green unit occurs every 12 hours.

b. Michelle Dicola is the facility Infection Control Specialists. Kelly Moore, Director of Nursing, acts in this capacity in Micelle's absence.

c. All employees gain access through entering the Rehab facility (5000 Shannondell Drive). Social Distancing markers are provided on the floor of the entrance and all employees complete a health / COVID-19 status questionnaire and have their temperature checked. All employees are required to wear N95 masks at all times when in the facility

d. If an employee presents with an elevated temperature at check in (above 98.6) or they report any signs and symptoms of COVID-19 on the health screening questionnaire, they are advised to return home and contact their physician. In addition, these employees are required to be tested for COVID-19 and produce the results before returning to work.

e. All deliveries are being received at the loading dock – drivers are being screened similar to that of an employee. Some essential personal items (ie: Incontinence Products) for Residents are being dropped off to the concierge at the front desk (incontinence products). No deliveries come into contact with any patient or resident.

f. Facility follows CDC Guidance for cleaning and disinfecting all areas

g. See Attachment 3 for guidance on infection control and PPE use, including universal masking for all persons entering the facility:

4. Visitor Policies

During the “closed” period of time prior to entering Step 1 (See section 6 below) our facility has strict restriction on visitors (details below). Once advancement into Step 1 is achieved, if any concern is presented for Resident safety related to COVID-19, we will revert back to “closed” and resume the visitation policies described in this section.

a. To limit exposure to residents during “closed” period, restrict visitation as follows:

- Restrict all visitors from entering facility
- Restrict all volunteers, non-essential health care personnel and other non-essential personnel and contractors (e.g., barbers).
- Minimize cross-over staff scheduling – each employee will be classified as a “color” consistent with the colors in Section 3 above. Once the color is determined – the employee will only be assigned to that same color nursing unit.

b. The following personnel are permitted to access SNFs and must adhere to universal masking protocols in accordance with **HAN 492 and HAN 497** (**Reference #3 and Reference #4**):

- The Department of Aging/Area Agency on Aging including the Ombudsman and the Department of Human

Services where there is concern for serious bodily injury, sexual abuse, or serious physical injury;

- Visitors to include but not be limited to family, friends, clergy, and others during end of life situations;
- Department of Health or agents working on behalf of the Department, such as Long-Term Care Ombudsman, or local public health officials.

5. Dining Services in “Closed” Phase

All employees participating in delivering meals to residents in their rooms must ensure that their hands are properly washed or sanitized.

- a. Meals will be provided to residents in their rooms and direct care staff will provide assistance to residents requiring such
- b. Residents that cannot eat in their room will be assessed and an individual plan will be implemented.

6. Reopening of Rehab at Shannondell and The Meadows at Shannondell

To safely lift restrictions, the reopening has two primary components:

- Reopening prerequisites, requirements, and criteria (sections 6b-c); and
- Reopening "Steps" (section 6d).
These components were developed in consultation with the **Centers for Medicare and Medicaid Services guidelines on reopening nursing homes (Reference #5)**
- Rehab and The Meadows at Shannondell will adhere to the pre-requisites and conditions for reopening.

a. Terms Used in this Section

Terms used in section 6 are defined below:

- **"Cross-over visitation"** refers to visits from an individual residing in a personal care home, continuing care retirement community, or assisted living facility. This type of visitation is restricted.
- **"Exposed residents"** refers to those residents with a known recent exposure to the virus that causes COVID-19 or have had a positive test result for the virus that causes COVID-19 in the past 14 days.
- **"Neutral zone"** means a pass-through area (such as a lobby or hallway not in a red, yellow, or green zone)

- **"New facility onset of COVID-19 cases"** refers to COVID-19 cases that originated in the facility, and not cases where the nursing home admitted individuals from a hospital with a known COVID-19 positive status, or unknown COVID-19 status but became COVID-19 positive within 14 days after admission. In other words, if the number of COVID-19 cases increases because a facility is admitting residents from the hospital AND they are practicing effective **Transmission-Based Precautions (Reference #6)** to prevent the transmission of COVID-19 to other residents, that facility may still advance through the steps of reopening. However, if a resident contracts COVID-19 within the facility without a prior hospitalization within the last 14 days, the facility will be deemed to have new facility onset of COVID-19.
- **"Non-essential personnel"** includes contractors and other non-essential personnel.
- **"Screening"** includes checking for fever and symptoms of COVID-19 and asking questions about possible exposure.
- **"Social distancing"** is the practice of increasing the physical space between individuals and decreasing the frequency of contact to reduce the risk of spreading COVID-19 (ideally to maintain at least 6 feet between all individuals, even those who are asymptomatic).
- **"Unexposed to COVID-19"** refers to an individual who has no known recent exposure to the virus that causes COVID-19 or has not had a positive test result for the virus that causes COVID-19 in the past 14 days.
- **"Universal masking"** means the protocols set forth in PA-HANs 492 and 497, with homemade cloth masks being acceptable for visitors.
- **"Visitors"** includes individuals from outside of the facility as well as cross-over visitors.
- **"Volunteer"** is an individual who is a part of the facility's established volunteer program.

b. Reopening Prerequisites and Requirements

1) Prerequisites

The Meadows and Rehab at Shannondell will need to be in compliance with the prerequisites and remain in compliance at all times. Any deviation from the plans or positive COVID-19 testing, reopening is suspended with regression to "closed" status so plan evaluation can be completed.

Baseline Components of Plan (Please reference completed check list):

- On June 23, 2020, Rehab at Shannondell and The Meadows at Shannondell completing mandatory COVID-19 employee testing for all employees;
- Prior to June 23, 2020, Rehab at Shannondell and The Meadows at Shannondell conducted mandatory direct care staffing (anyone with patient or resident contact) on a weekly basis since April 24, 2020.
- Prior to June 23, 2020, Rehab at Shannondell and The Meadows at Shannondell conducted regular resident testing throughout both facilities as a result of exposure concern
- Since March 15, 2020, Residents and patients have had their symptoms monitored according to their "status" – red / yellow / green.
- Rehab at Shannondell and The Meadows at Shannondell have a partnership with a private laboratory and have access to COVID-19 testing on a consistent basis. The details of this partnership are as follows -
 - Testing on Residents with 24 hours of symptom onset. A member of the clinical leadership team is "on call" 24/7 and is responsible to conduct any COVID-19 test that is ordered by the residents physician within 4 hours of order.
 - As part of this plan and in accordance with Step progression, if it is determined that a particular employee or department is going to begin to have an increase in Resident contact, they will be added to the weekly testing schedule prior to gaining additional resident contact.
 - In the event of an outbreak, testing of all residents and employee will be completed by the clinical nursing team in the physician exam clinic on the first floor
 - Mandatory testing will be completed on a weekly basis on the following departments – nursing, therapy, housekeeping, activities and maintenance. This testing is done based on which employees have and/or will have contact with residents. If an employee has not been part of the facility testing plan, they are not permitted to have resident contact.
 - The facility will verify that all employees not listed above, will be monitored for symptoms and tested as needed
 - When ancillary staff are permitted to access the facility in accordance with this plan, the facility will ensure that all ancillary staff (hospice, home health, companions) have been tested with negative results produced before entering facility
 - If a resident refuses to get tested for COVID-19 they will be placed on droplet isolation precautions (ie: yellow room) and testing will be attempted the next day.
 - If the resident continues to refuse and a "Red" unit is open, the resident will be transferred to this unit "presumed positive". If a

“red” unit is not available, the resident will remain on Droplet Precautions in “yellow” indefinitely.

- As was stated above, Residents will be co-horted based on their COVID-19 exposure.
- All staff will be screened on arrival to work. All staff must enter through Rehab main entrance.
- PPE inventory is monitored by Central Supply Manager.
- The Administrator is responsible to ensure that PPE stock is sufficient at all times.
- In order for re-opening to occur, the facility must be staffed at or above minimum requirements as stated by PA DOH.
- The plan for how we will progress our dining services is detailed in “**Plan for Dining Services**” – **Reference #7** document.
- In the event that a resident tests positive for COVID-19 or any other COVID-19 related concern is raised, facility leadership will direct that both facilities revert to “closed” status so that a proper plan can be made.
- To begin reopening, a facility must be in a Yellow or Green county per the Governor's Reopening Plan.

2) For The Meadows and Rehab at Shannondell to enter into Step 1 of Reopening:

- To enter reopening at **Step 1**, the both facility must meet all the Prerequisites. In the event that one facility has met the prerequisites and the other has not – the facility leadership team will assess options and communicate plan at that time

c. Criteria for Advancing from Next Step or to Begin ReOpen

The following criteria will be applied to determine movement among steps of reopening.

1. To **enter Step 1**, the facility must meet all **Prerequisites (See Prerequisite Check List (Reference # 8))**
2. If all Prerequisites are met, in addition to DOH mandated requirements, an internal check list should be used to determine readiness to move into Step 1 –
 1. Has there been at least 28 consecutive days since last positive COVID-19 test for any resident or patient?
 2. Is there any current Resident or patient with a COVID-19 test “pending” or “inconclusive”?
 3. Are testing capabilities available?

4. Is there sufficient staff?

If all prerequisites are met in both facilities and the internal check list is answered appropriately – the facility may enter Step 1.

If at any point during Step 1 (21 consecutive days) there is a new facility onset of COVID-19 cases, the facility must cease Step 1 reopening and return to the “closed status” with guidance described in Sections 4 and 5 relating to visitors and dining, respectively. Moving back to the guidance described in Sections 4 and 5 restarts the 21-day period count. After the new 21-day period, if there is no new facility onset of COVID-19 cases the facility may reinitiate Step 1.

3. From the date the facility enters Step 1, if there is no new facility onset of COVID-19 cases for 21 consecutive days the facility may **move to Step 2**.

If at any point during Step 2 (21 consecutive days) there is a new facility onset of COVID-19 cases, the facility must cease Step 2 reopening and return to the guidance described in Sections 4 and 5 relating to visitors and dining, respectively. Moving back to the guidance described in Sections 4 and 5 restarts the 21-day period count. After the new 21-day period, if there is no new facility onset of COVID-19 cases the facility may reinitiate Step 1.

4. From the date the facility enters Step 2, if there is no new facility onset of COVID-19 cases for 21 consecutive days the facility may **move to Step 3**.

If at any point during Step 3 there is a new facility onset of COVID-19 cases, the facility must cease Step 1, 2, and 3 reopening and return to the guidance described in Section 4 and 5 relating to visitors and dining, respectively. Moving back to the guidance described in Sections 4 and 5 restarts the 14-day period count. After the new 14-day period, if there is no new facility onset of COVID-19 cases the facility may reinitiate Step 1.

5. If a county in which a facility is located moves into the Red Phase, the SNF must return to “closed” status and the guidance described in Section 4 and 5 relating to visitors and dining, respectively. When the county moves back to the Yellow Phase, the facility may enter reopening again only when the prerequisites and internal check list

and requirements in Section 6b are also met.

d. Steps to Reopen (Also See Facility Status Detail – Reference #9)

To maximize resident, patient and staff safety during Step 1, Rehab at Shannondell and The Meadows at Shannondell will be treating each nursing hallway as its own “pod” and all Step activities will be confined to each pod. Resident and patients are not permitted to exit their “pod” without approval from the Administrator

The guide below will be used for general informational purposes and will be the template for broad directions and guidance with each Step of Reopening. This information is subject to change, without notice, if there is a concern for resident, patient or employee safety.

	Step 1	Step 2	Step 3
Dining	<p>No communal dining.</p> <p>Resident meals served from full menu, in each private room. Staff participating in meal service must ensure hands are properly washed and/or sanitized.</p>	<p>Breakfast service will remain in private rooms (see Step 1)</p> <p>Communal dining is limited to residents unexposed to COVID-19.</p> <p>Dining rooms will open on all Green Units only.</p> <p>One resident per table in dining rooms.</p> <p>The dining services team has updated maximum occupancy for each dining room factoring in social distancing requirements</p> <p>Dining room</p>	<p>Breakfast service to be evaluated for dining room and contingent upon safely being able to provide this service</p> <p>Communal dining is limited to residents unexposed to COVID-19.</p> <p>Dining rooms will open on all Green Units only.</p> <p>One resident per table.</p> <p>The dining services team has updated maximum occupancy for each dining room factoring in social distancing</p>

		opportunities will be staggered by hallway or unit to ensure maximum amount of social distance occupancy is maintained (6 feet at all times between tables)	requirements Dining room opportunities will be staggered by hallway or unit to ensure maximum amount of social distance occupancy is maintained (6 feet at all times between tables)
Activities	"POD" concept for all units. Hallway activities and small group activities (less than 5 people) in each unit sunroom. Residents must wear masks and sanitize hands at beginning and end of each activity	"POD" concept for all units. All Step 1 activities plus small group activities in common areas like living rooms (no activity room use). Restricted to 10 or less people practicing social distancing. Sanitize hands before and after. All resident must wear a mask.	All Step 1 and Step 2 activities. No changes to size of activities. Activity programming adding options / events / exterior etc... all within social distancing guidelines and max occupancy restrictions
Non-Essential Personnel (homecare, companions, barber)	Adhere to restrictions in Section 4. No non-essential personnel	Adhere to restrictions in Section 4, Visitor Policies when in closed phase. No non-essential personnel If any changes will be made in this area, they will be communicated in advance of moving to Step 2	Adhere to restrictions in Section 4, Visitor Policies when in closed phase. No non-essential personnel If any changes will be made in this area, they will be communicated in advance of moving to Step 3
Volunteers	Adhere to restrictions in	Adhere to restrictions in Section 4, Visitor	Adhere to restrictions in Section 4, Visitor

	<p>Section 4, Visitor Policies. Volunteer services will not be used</p>	<p>Policies when in closed phase. Volunteer services will not be used</p> <p>If any changes will be made in this area, they will be communicated in advance of moving to Step 2</p>	<p>Policies when in closed phase. Volunteer services will not be used</p> <p>If any changes will be made in this area, they will be communicated in advance of moving to Step 3</p>
Visitors	<p>Adhere to restrictions in Section 4, Visitor Policies. No visitors are permitted.</p>	<p>Outdoor visitation is allowed in neutral zones (exterior courtyard on lower level of The Meadows and 1st floor or Rehab). Visitation area is under cover so weather is not a concern for the resident. If weather does present a dangerous situation for the resident, the outdoor visitation will be suspended. Visitation is limited to residents unexposed to COVID-19 (Only residents or patients on Green Unit).</p> <p>All visitation will be conducted in accordance with facility COVID-19 visitation guidelines (Reference #10) as shared and only after an appointment is made through the</p>	<p>Outdoor visitation is allowed in neutral zones (exterior courtyard on lower level of The Meadows and 1st floor or Rehab). Visitation area is under cover so weather is not a concern for the resident. If weather does present a dangerous situation for the resident, the outdoor visitation will be suspended. Visitation is limited to residents unexposed to COVID-19.</p> <p>All visitation will be conducted in accordance with facility COVID-19 visitation guidelines as shared and only after an appointment is made through the Activity Director</p> <p>Any advancement in</p>

		Activity Director	visitation will be made prior to entering Step 3
Medical Follow up Needs	No Outpatient appointments that are non-life threatening. All medical follow up will be handled by Telehealth	No Outpatient appointments that are non-life threatening. All medical follow up will be handled by Telehealth	No Outpatient appointments that are non-life threatening. All medical follow up will be handled by Telehealth
In House Medical Consultants or Specialists	No medical consultants or specialists	No medical consultants or specialists Any advancement in this area will be made before entering Step 2	No medical consultants or specialists Any advancement in this area will be made before entering Step 3

e. Visitation Requirements

Visitation, as defined above in steps 2 and 3, will be conducted in accordance with the **COVID-19 Visitation Guidelines (Reference #10)**

- 1) Visits will be coordinated by the Activity Director and will be by appointment only
- 2) Visitation areas will be exterior courtyard of both facilities and only through visitation structure.
- 3) In the event of inclement weather, visitation will be suspended.
- 4) Each scheduled visitor will have to "check in" through the normal check in process and complete the health screening questionnaire and have temperature verified. Once completed, visitor will get color coded arm band.

Activities staff is responsible to ensure that visitation area is properly cleaned and sanitized in between visits. Use an EPA-registered disinfectant to wipe down visitation area between visits.

- 5) Visitor area will be marked to ensure social distancing.

- 6) No more than 2 visitors at one time
- 7) Determine those residents who can safely accept visitors at Steps 2 and 3.
- 8) Residents and visitors must wear a mask and sanitize hands before and after visit
- 9) No children under the age of 12 are permitted to visit.
- 10) Ensure compliance with the following requirements for visitors:
 - Scheduled visitors must check in through the rehab main lobby entrance. Any visitor that does not pass the health screening questionnaire or has a temperature above 98.6 will not be permitted to visit.
 - Provide alcohol-based hand rub to each visitor and demonstrate how to use it appropriately, if necessary.
 - Visitors must:
 - Wear a face covering or facemask during the entire visit;
 - Use alcohol-based hand rub before and after visit;
 - Stay in designated facility locations;
 - Sign in and provide contact information;
 - Sign out in the rehab main lobby at the conclusion of the visit

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 and will be delivered to current residents, provided to new admissions and emailed to

family members on a regular basis. 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.

Dan Freed
Vice President of Health Services
Shannondell at Valley Forge

Date