

**Implementation Plan for Reopening
In Accordance with the Pennsylvania Department of Health's
Interim Guidance for Skilled Nursing Facilities During COVID-19**

This template is provided as a suggested tool for skilled nursing facilities to use in developing their Implementation Plan for reopening. 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.

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 Nursing Home Administrator but should be someone available to respond to questions regarding the Implementation Plan.	
1. FACILITY NAME Paramount Nursing and Rehabilitation, Paramount Senior Living at Chambersburg Road, Paramount Senior Living at Stonebrook	
2. STREET ADDRESS 6375 Chambersburg Road	
3. CITY Fayetteville	4. ZIP CODE 17222
5. NAME OF FACILITY CONTACT PERSON Melissa Randler	6. PHONE NUMBER OF CONTACT PERSON 717-352-2721

DATE AND STEP OF REOPENING
The facility will identify the date upon which all prerequisites will be met for reopening 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 REOPENING Paramount Senior Living at Chambersburg Road and Paramount Senior Living at Stonebrook will reopen for outdoor visitation on 7/28/20; Paramount Nursing and Rehabilitation will reopen for outdoor visitation on 8/3/20.

DATE AND STEP OF REOPENING

8. SELECT THE STEP AT WHICH THE FACILITY WILL ENTER REOPENING – EITHER STEP 1 OR STEP 2

(CHECK ONLY ONE)

☐ Step 1

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 8, 2020, Order of the Secretary of Health)

☒ 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 8, 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)

Yes

10. DATE THE FACILITY WAS SURVEYED BY THE DEPARTMENT OF HEALTH TO ENSURE THE FACILITY IS ADEQUATELY PREVENTING TRANSMISSION OF COVID-19

June 18, 2020

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 reopening).

11. DATE RANGE FOR THE BASELINE UNIVERSAL TEST ADMINISTERED TO STAFF AND RESIDENTS (BETWEEN MAY 24, 2020 AND JULY 24, 2020) IN ACCORDANCE WITH THE JUNE 8, 2020, ORDER OF THE SECRETARY OF HEALTH

June 10, 2020 to June 11, 2020

12. DESCRIBE THE CAPACITY TO ADMINISTER COVID-19 DIAGNOSTIC TESTS TO ALL RESIDENTS SHOWING SYMPTOMS OF COVID-19 AND TO DO SO WITH 24 HOURS

The facility has adequate swabs to test for COVID-19 and has two outside laboratories to process the tests.

13. DESCRIBE THE CAPACITY TO ADMINISTER COVID-19 DIAGNOSTIC TESTS TO ALL RESIDENTS AND STAFF IF THE FACILITY EXPERIENCES AN OUTBREAK

The facility has adequate swabs to test for COVID-19 and has two outside laboratories to process the tests.

14. DESCRIBE THE CAPACITY TO ADMINISTER COVID-19 DIAGNOSTIC TESTS TO ALL STAFF, INCLUDING ASYMPTOMATIC STAFF

The facility has adequate swabs to test for COVID-19 and has one outside laboratory to process the test.

15. DESCRIBE THE PROCEDURE FOR ADDRESSING NEEDED TESTING OF NON-ESSENTIAL STAFF AND VOLUNTEERS

The facility has adequate swabs to test for COVID-19 and one outside laboratory to process the test.

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

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

Residents that refuse COVID-19 testing will be placed on isolation for 14 days. Staff the refuse COVID-19 testing will only be able to work in a COVID red zone.

17. 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 SKILLED NURSING FACILITIES DURING COVID-19*.

Residents diagnosed with COVID-19 will be isolated on our West Quarantine Hall. They will be placed in a private room if available and if private rooms are not available two positive COVID-19 residents will be placed in the same room on contact droplet isolation.

18. 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)

We have disposable and reuseable gowns, N-95 masks, googles/Faceshields and gloves for all staff to utilize when caring for a COVID-19 positive or presumptive resident. We keep a weekly inventory of all PPE and continue to look for vendors to be able to purchases this protective PPE. In the event, we are unable to purchase we have reached out to our local county EMA; regional healthcare coalition; local health department; department of health and department of health and human services with our requests for emergency PPE needed. We are able to reach out to our Corporate office to get PPE from other Paramount facilities.

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

Skilled Care staffing is between 3.2 and 3.5 PPD. Personal Care Stafifng meets the Department of Health and Human Services requirements. We are offering \$2000 sign on bonus for Personal Care Aides/ CNA and Medtechs. We are also offering a \$1000 employee referral bonus for any employee who refers a Personal Care Aide/CNA or Medtech for Personal Care. We offer extra shift pickup bonuses for staff that pickup open shifts.

20. 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

The facility will stop the reopening if the county gets reverted to a red phase. This will be communicated to all residents, families and employees via emailed letter, mailed letter and hand delivered letter to residents that we are no longer in a reopen phase for visitation of open to nonessential vendors during the red phase.

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.

21. RESIDENTS

New admissions/residents that go out to essential appointments or leave facility grounds for any reason and return to the facility have their temperature taken at the Main Entrance and are a given a mask before entering the facility. Active screening twice a day is completed on all residents which includes temperature, pulse ox and signs and symptoms of COVID in their room. If screening indicates possible virus, staff notify physician for order to complete COVID test and any other labs as indicated. Resident is placed on transmission based isolation.

SCREENING PROTOCOLS

22. STAFF

All staff are screened with temperature check upon entering the facility at the Main Entrance and again when their shift ends when they sign out at the Main Entrance. They complete a COVID questionnaire every day upon entering the facility. If a staff member has a temperature of 100.4 degrees or higher and any symptoms they immediately report to the RN Supervisor to be evaluated and then instructed to go home and follow up with their personal physician.

23. HEALTHCARE PERSONNEL WHO ARE NOT STAFF

All healthcare personnel who are not staff are screened with temperature check upon entering the facility at the Main Entrance. They complete a COVID questionnaire every day upon entering the facility. They are provided a N-95 mask upon entering if they don't already have one. If they have a temperature of 100.4 degrees or greater and any symptoms we deny them access in to the facility.

24. NON-ESSENTIAL PERSONNEL

All non-essential personnel who are not staff are screened with temperature check upon entering the facility at the Main Entrance. They complete a COVID questionnaire every day upon entering the facility. They are provided a surgical mask upon entering if they don't already have one. If they have a temperature of 100.4 degrees or greater and any symptoms we deny them access in to the facility.

25. VISITORS

All visitors are screened with temperature check upon entering the facility at the Main Entrance. They complete a COVID questionnaire every day upon entering the facility. They are provided a surgical mask upon entering if they don't already have one. If they have a temperature of 100.4 degrees or greater and any symptoms we deny them access in to the facility. They will sign out when leaving the facility.

26. VOLUNTEERS

All volunteers are screened with temperature check upon entering the facility at the Main Entrance. They complete a COVID questionnaire every day upon entering the facility. They are provided a surgical mask upon entering if they don't already have one. If they have a temperature of 100.4 degrees or greater and any symptoms we deny them access in to the facility. They will sign out when leaving the facility.

Communal dining is the same for all steps of reopening so there is no need to differentiate among the three steps.

27. DESCRIBE COMMUNAL DINING MEAL SCHEDULE, INCLUDING STAGGERED HOURS (IF ANY)

Communal dining for Personal Care Chambersburg Road will have two seatings for all meals the meal times are 7:00 am and 7:30 am; lunch 11:00 am and 11:40 am; and dinner 4:00 pm and 4:35 pm. Stonebrook will have one seating for all meals the meal times are 7:00 am breakfast; lunch 11:00 am and dinner 4:30 pm. Communal dining for Memory Care will be 7:00 am breakfast; 11:00 am lunch and 4:30 pm supper. Communal dining for Paramount Skilled Nursing and Rehabilitation will have two seatings in the main dining rooms and up to two seatings if needed in the Activity Room. The meal times are breakfast 7:00 am and 7:30 am; lunch 11:00 am and 11:40 am; and dinner 4:00 pm and 4:35 pm. These times may be altered if necessary based on flow and resident feedback.

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

Tables will be arranged to accommodate 1 resident per 3 Foot table with at least 6 feet apart and 2 residents per 8 foot table and at least 6 feet apart from other tables.

29. DESCRIBE INFECTION CONTROL MEASURES, INCLUDING USE OF PPE BY STAFF Facility will be using prepackaged condiments for the tables and tables and chairs will be disinfected prior to each dining seating and after each seating. Staff assisting resident with feeding will be in full PPE to include N-95 with surgical mask over, eye protection, gown and gloves. Staff will disinfect hands prior to feeding and donning gloves and when going between more than one resident and after feeding a resident. 30. DESCRIBE ANY OTHER ASPECTS OF COMMUNAL DINING DURING REOPENING Dietary staff will remove dirty dishware from the tables wearing a N-95 mask and gloves. Dishware will be sanitized in our dishroom
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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. 31. DESCRIBE ACTIVITIES PLANNED FOR STEP 1 (FIVE OR LESS RESIDENTS UNEXPOSED TO COVID-19) Activities are being done 1:1 with resident and in groups of five or less in hallways, common areas maintaining social distancing and outside. Residents have cloth or surgical masks and are given hand sanitizer before and after the activity. Bingo game pieces are sanitized after each use and common areas tables are wiped down before and after an Activity. 32. DESCRIBE ACTIVITIES PLANNED FOR STEP 2 (TEN OR LESS RESIDENT UNEXPOSED TO COVID-19) Activities are being done 1:1 with residents and in groups of 10 or less in designated activities rooms between meal services. Additional smaller groups of 5 or less residents may be completed in the hallways, common areas and outside, maintaining social distancing. Residents have cloth or surgical masks and are given hand sanitizer before and after the activity. Bingo game pieces are sanitized after each use and common areas tables are wiped down before and after an Activity. Volunteers are utilized to assist with outside visitation. They only assist resident who are unexposed to COVID-19. 33. DESCRIBE ACTIVITIES PLANNED FOR STEP 3 Activities will be completed in the activities room while maintaining social distancing of groups of 10 or more residents. Additional smaller groups of 5 or less residents may be completed in the hallways, common areas and outside, maintaining social distancing. Residents have cloth or surgical masks and are given hand sanitizer before and after the activity. Bingo game pieces are sanitized after each use and common areas tables are wiped down before and after an Activity. Volunteers are utilized to assist with outside visitation. They only assist resident who are unexposed to COVID-19. 34. DESCRIBE OUTINGS PLANNED FOR STEP 3 Skilled Small group outings will be planned for 4 residents per trip as the bus will only hold one wheelchair bound resident and 3 ambulatory residents to maintain social distancing. Personal Care outings will be able to take more residents and maintain social distancing. Trips will be planned for local shopping. Restaurant outings will be dependent on the opening and capacity of the restaurants according to the Governor's mandate.

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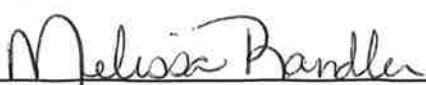
In Step 2, non-essential personnel <u>deemed necessary</u> by the facility are allowed (in addition to those already permitted in Section 4 of <i>Interim Guidance for Skilled Nursing Facilities During COVID-19</i>). In Step 3, <u>all</u> non-essential personnel are allowed. Screening and additional precautions including social distancing, hand hygiene, and universal masking are required for non-essential personnel.
35. DESCRIBE THE LIMITED NUMBER AND TYPES OF NON-ESSENTIAL PERSONNEL THAT HAVE BEEN DETERMINED NECESSARY AT STEP 2 Non-essential personnel deemed necessary to be permitted into the facility include: Podiatry, Optometry, Audiology, Dental, MedOptions, and Beautician Services
36. 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 see one resident receiving services to maintain social distancing, hand sanitizer will be available to the non-essential peronnel as well as a mask. These services will be overseen by a facility staff member to ensure compliance. Signs regarding social distancing, hand hygiene and universal masking are placed throughout the facility.
37. DESCRIBE MEASURES PLANNED TO ENSURE NON-ESSENTIAL PERSONNEL DO NOT COME INTO CONTACT WITH RESIDENTS EXPOSED TO COVID-19 All exposed COVID-19 residents are on a quarantine hall where non-essential personnel are not permitted.

VISITATION PLAN
For visitation to be permitted in Steps 2 and 3 of reopening (as described in Section 6 of <i>Interim Guidance for Skilled Nursing 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.
38. DESCRIBE THE SCHEDULE OF VISITATION HOURS AND THE LENGTH OF EACH VISIT Skilled Visitation Plan: All visitation will be scheduled through our Activities Department. Visits will be scheduled ahead of time in 30- minute time slots. Visit length will be 25 minutes with the additional 5 minutes being used to sanitize and reset the visitation area. We are starting with 1 visit per week with a maximum of two visitors on Monday, Wednesday, Friday and Sunday. The visitation time schedule is 9:00 am – 10:30 am; 2:00 pm- 3:30 pm and 5:30 pm -7:00 pm. Personal Care Visitation Plan: All visitation will be scheduled through our Activities Department. Visits will be for 30 minute and will start with 1 visit per week with a maximum of two visitors on Tuesday, Thursday and Saturday and Sunday. The visitation time schedule is 9:00 am – 10:30 am; 2:00 pm- 3:30 pm and 5:30 pm -7:00 pm.
39. DESCRIBE HOW SCHEDULING VISITORS WILL OCCUR Families will be instructed to call the Activity Department to schedule their planned visit.
40. DESCRIBE HOW VISITATION AREA(S) WILL BE SANITIZED BETWEEN EACH VISIT Seating areas will be sprayed and/or wiped with disinfectant before and after each visit.
41. WHAT IS THE ALLOWABLE NUMBER OF VISITORS PER RESIDENT BASED ON THE CAPABILITY TO MAINTAIN SOCIAL DISTANCING AND INFECTION CONTROL? 2 visitors per resident will be allowed to maintain social distancing and infection control.
42. DESCRIBE THE ORDER IN WHICH SCHEDULED VISITS WILL BE PRIORITIZED Residents diagnosed with Alzheimers/Dementia and those exhibiting signs of depression from social isolation will be prioritized for scheduled visits. 43. DESCRIBE HOW THE FACILITY WILL DETERMINE THOSE RESIDENTS WHO CAN SAFELY ACCEPT VISITORS AT STEP

VISITATION PLAN	
	2 (CONSIDERING SUCH SAFETY FACTORS AS EXPOSURE TO OUTDOOR WEATHER AND TRANSPORTING RESIDENT TO VISITOR LOCATION) The facility will allow all residents that are not currently on isolation precautions and who can safely be transported or use an assistive device to go outside to our designated visitor locations. Sunscreen will be available for resident's to protect themselves from sun exposure.
	44. DESCRIBE THE OUTDOOR VISITATION SPACE FOR STEP 2 TO INCLUDE THE COVERAGE FOR SEVERE WEATHER, THE ENTRANCE, AND THE ROUTE TO ACCESS THE SPACE 2 outdoor courtyards with concrete pathways will be utilized. The one courtyard has a covered gazebo. The other courtyard has two table with tabletop umbrellas. The one courtyard is located by the back parking lot with concrete driveway to access the gated courtyard. Residents will be taken through the Activity Department to access this courtyard. The other courtyard visitors enter the main entrance and and enter through a side door. The residents will use this same entrance. Visitation spaces are available at the Front Entrance under a large portico. We have a patio available off of the Main Entrance for visitation that is accessed from a side entrance from the Main Lobby. Visitation is available in front of Stonebrook that is shaded by the building.
	45. DESCRIBE HOW A CLEARLY DEFINED SIX-FOOT DISTANCE WILL BE MAINTAINED BETWEEN THE RESIDENT AND THE VISITOR(S) DURING OUTDOOR VISITS The facility will use marking tape to identify the six-foot distance space for outdoor visits.
	46. 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 The skilled entrance lobby will be used for indoor visitation and the main entrance lobby.
	47. DESCRIBE HOW A CLEARLY DEFINED SIX-FOOT DISTANCE WILL BE MAINTAINED BETWEEN THE RESIDENT AND THE VISITOR(S) DURING INDOOR VISITS The facility will use marking tape to identify the six-foot distance space for indoor visits.
	48. 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) The facility will allow all residents that are not currently on isolation precautions and who can safely be transported or use an assistive device to go outside to our designated visitor locations. Sunscreen will be available for resident's to protect themselves from sun exposure.
	49. WILL OUTDOOR VISITATION BE UTILIZED AT STEP 3? IF NO, SKIP TO QUESTION #52 Yes
	50. 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") 2 outdoor courtyards with concrete pathways will be utilized. The one courtyard has a covered gazebo. The other courtyard has two table with tabletop umbrellas. The one courtyard is located by the back parking lot with concrete driveway to access the gated courtyard. Residents will be taken through the Activity Department to access this courtyard. The other courtyard visitors enter the main entrance and and enter through a side door. The residents will use this same entrance. Visitation spaces are available at the Front Entrance under a large portico. We have a patio available off of the Main Entrance for visitation that is accessed from a side entrance from the Main Lobby. Visitation is available in front of Stonebrook that is shaded by the building.
	51. 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") The facility will use marking tape to identify the six-foot distance space for outdoor visits.
	52. DESCRIBE THE INDOOR VISITATION SPACE THAT WILL BE USED TO INCLUDE THE ENTRANCE AND THE ROUTE

VISITATION PLAN	
	TO ACCESS THE SPACE (IF THE SAME AS STEP 2, ENTER "SAME") The skilled entrance lobby will be used for indoor visitation and the main entrance lobby.
	53. 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") The facility will use marking tape to identify the six-foot distance space for indoor visits.
	54. 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 Visitors will have masks and be instructed by staff to maintain 6 feet social distancing from the resident for room visitation.

	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.
	55. DESCRIBE INFECTION CONTROL PRECAUTIONS ESTABLISHED FOR VOLUNTEERS, INCLUDING MEASURES PLANNED TO ENSURE VOLUNTEERS DO NOT COME INTO CONTACT WITH RESIDENTS EXPOSED TO COVID-19 All exposed COVID-19 residents are on a quarantine hall where volunteers are not permitted.
	56. DESCRIBE THE DUTIES TO BE PERFORMED BY VOLUNTEERS DURING STEP 2 Volunteers will assist with outside visitation.

	The Nursing Home Administrator (NHA) is responsible for the accuracy of the Implementation Plan and the facility's adherence to it. Upon completion of blocks 1-57, the Implementation Plan should be printed and the signature and date affixed by the NHA in block 58.
	57. NAME OF NURSING HOME ADMINISTRATOR Melissa Randler, NHA
	58. 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 <i>Interim Guidance for Skilled Nursing Facilities During COVID-19</i>. 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 NURSING HOME ADMINISTRATOR 7/16/2020 DATE