

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

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 Orchard Manor Incorporated	
2. STREET ADDRESS 20 Orchard Drive	
3. CITY Grove City	4. ZIP CODE 16127
5. NAME OF FACILITY CONTACT PERSON Samantha Skibinski, Director of Nursing	6. PHONE NUMBER OF CONTACT PERSON (724) 458-7760

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).	
9/28/2020- Step One	
7. SELECT THE STEP AT WHICH THE FACILITY WILL ENTER REOPENING – EITHER STEP 1 OR STEP 2 (CHECK ONLY ONE)	
<input type="checkbox"/> Step 1 <i>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)</i>	
<input checked="" type="checkbox"/> Step 2 <i>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)</i> AND <i>Have the absence of any outbreak for 14 consecutive days since baseline COVID-19 testing</i>	
8. HAS THE FACILITY EXPERIENCED A SIGNIFICANT COVID-19 OUTBREAK? (IF NO, SKIP TO #11)	
Yes	
9. DATE THE FACILITY WAS SURVEYED BY THE DEPARTMENT OF HEALTH TO ENSURE THE FACILITY IS ADEQUATELY PREVENTING TRANSMISSION OF COVID-19	
7/7/2020, 8/06/2020 & 9/8/2020	

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).

10. 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](#)

7/9/2020

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

Residents are screened for signs and symptoms (s/s) of COVID-19 per shift. Any Resident exhibiting s/s will undergo testing via anterior nares swab, oropharyngeal swab or nasopharyngeal swab within 24 hours of s/s. Orchard Manor has contracted with Aegis Science Corporation Laboratory for supplies and has trained RNs to conduct testing. Orchard Manor RNs have also been trained to collect specimens for the BD Veritor Plus Analyzer Point of Care Rapid testing. Designated staff have been trained in the processing and determining results for use of the BD Veritor Plus Analyzer Point of Care Rapid testing. Orchard Manor RNs will collect the specimens to be tested via either of these methods.

If a Resident develops s/s when neither Aegis nor the BD Veritor Plus Analyzer Point of Care Rapid Testing are available to be completed with reasonable expectation of a 48 hour turn around, Allegheny Health Network, Grove City will be contacted for testing. Allegheny Health Network, Grove City will supply the tests and the RNs have been trained on conducting testing. Orchard Manor RNs will conduct the testing and deliver it to Grove City Medical Center. Allegheny Health Network, Grove City contracts with QUEST Diagnostics to analyze test samples.

A positive test result in the presence of any s/s would indicate a COVID-19 positive Resident.

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

Orchard Manor has contracted with Aegis Science Corporation Laboratory for supplies and has trained RNs to conduct testing. Orchard Manor has obtained a BD Veritor Plus Analyzer Point of Care Rapid Testing machine and supplies. RNs and designated staff have been trained to conduct this testing.

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

Orchard Manor has contracted with Aegis Science Corporation Laboratory for supplies and has trained RNs to conduct testing. Orchard Manor has obtained a BD Veritor Plus Analyzer Point of Care Rapid Testing machine and supplies and has trained RNs and designated staff to conduct this testing.

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

Orchard Manor will not be utilizing volunteers at this time. Non-essential staff may be tested prior to returning to Orchard Manor and per guidelines thereafter. This is during our Step 3 of reopening.

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

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

It is a Resident's right to decline testing. Symptomatic residents refusing testing will be treated as positive and be transferred to the Red Zone and placed in droplet/contact precautions. Asymptomatic residents refusing testing will be treated as possibly being exposed and will be transferred to the Yellow Zone or depending on circumstances, the Residents Room may become a Yellow Zone.

If an asymptomatic staff member declines testing as per federal regulation, that staff member will not be permitted to work. If a staff member is symptomatic, they will not be permitted to work and must quarantine for a minimum of 14 days and until they meet all return to work criteria.

16. DESCRIBE THE PLAN TO COHORT OR ISOLATE RESIDENTS DIAGNOSED WITH COVID-19 IN ACCORDANCE WITH [PA-HAN-509](#) PURSUANT TO SECTION 1 OF THE *INTERIM GUIDANCE FOR SKILLED NURSING FACILITIES DURING COVID-19*.

Based on current status of each Resident related to COVID-19, Residents will be placed into one of three possible zones: Red (COVID-19 Positive), Yellow (COVID-19 Exposed) or Green (No known exposure). Residents will cohort within specific zone they are assigned.

17. 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)

Orchard Manor has sufficient personal protective equipment consisting of gowns, facemasks, N95 masks, faceshields and gloves. Orchard Manor receives weekly delivery of PPEs as needed. If supply of PPE is interrupted, Orchard Manor will contact the county emergency management agency.

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

Staffing PPD is monitored daily to ensure adequate staffing. Orchard Manor is not currently under a contingency staffing plan. Hiring and training of new staff is ongoing. Orchard Manor has contracted with agency staffing to use as needed and in the event of a staffing shortage.

19. DESCRIBE THE PLAN TO HALT ALL REOPENING IF THE COUNTY IN WHICH THE FACILITY IS LOCATED IS REVERTED TO A RED PHASE OF THE GOVERNOR'S REOPENING PLAN

In the event that Mercer County reverts to a red phase, Orchard Manor will immediately revert to the highest level of mitigation. The steps to reopen will not start over until deemed appropriate. The facility will notify Residents and their responsible parties of relevant operational changes, if applicable. If Orchard Manor experiences a COVID-19 outbreak, at any point during a step, Orchard Manor will cease the step and visitor, dining and activity restrictions will be reinstated. Guidelines will then be followed for advancing to the re-opening steps.

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.

20. RESIDENTS

All Residents are to be screened for elevated body temperature and symptoms of COVID-19, as listed by CDC, at a minimum of every shift. Screenings will occur in Resident rooms. Symptomatic Residents will be tested and placed in designated Red Zone unit, while waiting test results. Residents that test positive will remain in the red zone for a minimum of 14 days and until they are not exhibiting symptoms of COVID-19 for at least 24 hours. Any Resident that is believed to be exposed to COVID-19 will be placed in a designated Yellow Zone and/or the exposed unit will be designated as a Yellow Zone as appropriate per current guidelines.

21. STAFF

Screening occurs at the beginning and end of staff shift at a designated point of entrance. A checklist-based screening protocol is used and recorded in written format. Screening must check for each of these exclusion criteria:

- Measured body temperature of 100.0 degrees or more
- Symptoms of COVID-19
- Diagnosis of COVID-19 within the past 14 days
- Close contact with a person with COVID-19 while not using appropriate PPE during the prior 14 days.

Staff will not be permitted to work if any findings are positive. Staff will keep their facemask on and leave the workplace. Employee will be instructed to call Infection Control nurse for further instructions. Orchard Manor will adhere to guidelines.

22. HEALTHCARE PERSONNEL WHO ARE NOT STAFF

Subject to the same screening requirements as staff. If positive screen or signs, they will not be permitted to enter Orchard Manor and notify their employer for further instructions.

23. NON-ESSENTIAL PERSONNEL

Subject to the same screening requirements as staff. Beautician must remain in the Personal Care Services (Beauty Shop) area throughout their time in the facility. Beautician is required to wear a mask at all times, gloves as appropriate, and practice proper hand hygiene. Medically stable Residents in a green zone will be permitted to utilize beautician services. Residents in the Beauty Shop are required to wear a cloth face covering or facemask at all times, if tolerated. 6-foot social distancing must be maintained. Services may not be provided in resident's rooms. Surfaces and styling tools will be sanitized between each resident.

24. VISITORS

Visitor access is limited and all visitors must follow the same screening requirements for staff.

25. VOLUNTEERS

Volunteers will not be permitted at this time.

COMMUNAL DINING

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

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

Meals may be served to the Residents in the dining room, Solariums, and their rooms on a rotating basis as determined appropriate by the Inter-Disciplinary Team as feasible with consideration to their personal preference and assistance requirements. Infection control practices will be in place, such as proper hand hygiene, universal masking, and disinfection of equipment in-between Resident use.

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

Tables will be spaced 6 feet apart. Chairs will be placed so residents will maintain at least 6-foot separation between other Residents. Residents will sit facing in one direction as much as is feasible, so that there will not be anyone face to face.

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

Staff and Residents will perform proper hand hygiene before and after the dining process. Masking will be universal for all Staff and for Residents as tolerated. Disinfection of all equipment and high touch areas will be done in between Resident use.

29. DESCRIBE ANY OTHER ASPECTS OF COMMUNAL DINING DURING REOPENING

Only Residents who are not in isolation or quarantine due to known or suspected COVID-19 infection or exposure will be allowed participation. Residents under isolation precautions for other communicable diseases will be restricted from communal dining as appropriate.

ACTIVITIES

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.

30. DESCRIBE ACTIVITIES PLANNED FOR STEP 1 (FIVE OR LESS RESIDENTS)

Activities will be limited to 5 or less Residents at a time. These activities will be initiated and carried out by the activity staff personnel, who will ensure that universal masking, proper hand hygiene, social distancing of at least 6 feet and disinfection of any high touch areas is completed in-between Resident use. There will be no sharing of equipment during these limited activities and any equipment used will be disinfected after use. Activities will take place in the Solariums on each of the SNF units and within the communal living space of the PC. Location of activities may be reassigned as necessary. Residents will attend these small group activities within their perspective units.

ACTIVITIES

31. DESCRIBE ACTIVITIES PLANNED FOR STEP 2 (TEN OR LESS RESIDENT)

Activities will be scheduled with 10 or less Residents at a time per desired participation and space availability. These activities will be initiated and carried out by the activity staff personnel, who will ensure that universal masking, proper hand hygiene, social distancing of at least 6 feet and disinfection of any high touch areas is completed in-between Resident use. There will be no sharing of equipment during these limited activities and any equipment used will be disinfected after use. Activities will take place in the Solariums on each of the SNF units and within the communal living space of the PC. Location of activities may be reassigned as necessary. Residents will attend these small group activities within their perspective units.

32. DESCRIBE ACTIVITIES PLANNED FOR STEP 3

These activities will be initiated and carried out by the activity staff personnel, who will ensure that universal masking, proper hand hygiene, social distancing of at least 6 feet and disinfection of any high touch areas is completed in-between Resident use. There will be no sharing of equipment during these limited activities and any equipment used will be disinfected after use. Activities will take place in the Solariums on each of the SNF units and within the communal living space of the PC. Location of activities may be reassigned as necessary. Residents will attend these small group activities within their perspective units.

33. DESCRIBE OUTINGS PLANNED FOR STEP 3

Outings will be limited to no more than 2 Residents at a time, as this is the maximum number allowed in the facility van. Resident must be able to wear a facemask during the length of the outing. Outings will be limited to scenic rides and Residents will remain in the van during outing with at least 6 feet apart. Hand hygiene will be performed upon entering and exiting the van. The van seats and surfaces will be disinfected after use. The van driver will always wear a facemask.

NON-ESSENTIAL PERSONNEL

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

34. DESCRIBE THE LIMITED NUMBER AND TYPES OF NON-ESSENTIAL PERSONNEL THAT HAVE BEEN DETERMINED NECESSARY AT STEPS 1 AND 2

There are no non-essential personnel deemed necessary at this time.

35. DESCRIBE HOW SOCIAL DISTANCING, HAND HYGIENE, AND UNIVERSAL MASKING WILL BE ENSURED FOR NON-ESSENTIAL PERSONNEL AT STEP 3

All non-essential personnel will be educated and will follow the same requirements as staff regarding screening, social distancing, hand hygiene, and facemasks. Non-essential personnel will stay in specified work areas and will not have direct Resident contact if possible.

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.	
36. DESCRIBE THE SCHEDULE OF VISITATION HOURS AND THE LENGTH OF EACH VISIT	
All visitation is to be scheduled by the Social Service department. Visitation will be Monday-Friday, from 9:30 am to 12 pm, and 1:30 pm to 4 pm for a maximum stay of 30 minutes per visit. These hours are subject to change.	
37. DESCRIBE HOW SCHEDULING VISITORS WILL OCCUR	
A family member or friend wishing to visit their loved one may call in and schedule a visit with the Social Service Department. These visits are to be scheduled at least 24 hours in advance and will be scheduled as available. With these visiting hours, each Resident may not have more than 1 in person visit per week.	
38. DESCRIBE HOW VISITATION AREA(S) WILL BE SANITIZED BETWEEN EACH VISIT	
The designated staff person assisting with the visitation, will disinfect the table, chairs, physical space divider (if in use), and any high touch area after each scheduled visit to ensure the area is ready for the next Resident visit.	
39. WHAT IS THE ALLOWABLE NUMBER OF VISITORS PER RESIDENT BASED ON THE CAPABILITY TO MAINTAIN SOCIAL DISTANCING AND INFECTION CONTROL?	
Visitation will be limited to up to two visitors at a time. Any child who visits is to be included in the maximum number of two visitors and must be accompanied by an adult for the entire duration of the visit. All visitors, including children over the age of 2, are required to wear a mask for the duration of the visit. All visitors must adhere to social distancing of at least 6 feet from the Resident and any adult bringing a child must be able to manage that child and maintain the child's social distancing from the Resident.	
40. DESCRIBE THE ORDER IN WHICH SCHEDULED VISITS WILL BE PRIORITIZED	
Visits will be prioritized for Residents with diseases that cause progressive cognitive decline and Residents expressing feelings of loneliness. Only unexposed, COVID-19 negative Residents will be permitted visitors.	
Window visits may continue with social distancing as desired by family and friends.	
Zoom / video visits may continue and are to be scheduled with Social Services.	
End of life visits will continue to be permitted with arrangements through Social Services.	
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)
	Residents whose screenings have been negative and are free of COVID-19 symptoms, or other signs of illness will be permitted to accept visitors. A designated indoor area is available for visitation during severe weather.
	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

VISITATION PLAN

The outdoor visitation space has a covered porch to provide protection from weather for the Residents and visitors. At the entrance of facility, a staff person will be present to screen visitors and ensure visitors perform hand hygiene. A mask is required upon entry and during the entirety of the visit. Staff will escort the visitors to the designated visitation area.

During severe weather, visitations will be conducted in the designated indoor area.

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

Each visitation space will be measured and marked to show the distancing of 6 feet. A physical space divider may be used. Staff will be available to assist the Resident and will observe to ensure the correct process is being followed and that the Resident is safe and comfortable.

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

Indoor visitation will take place in the front solarium for all SNF Residents. The Personal Care Residents indoor area will be in the conference room. Visitors will enter through the main entrance of the facility, where they will be screened and perform hand hygiene. A mask is required upon entry and for the duration of the visit. Staff will escort the visitors to the designated area and will observe to ensure the correct process is being followed and that the Resident is safe and comfortable. The visitors will exit in the same manor.

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

Each visitation space may utilize a physical space divider and the space will be measured and marked to show 6 feet separation. Staff will be available to assist the Resident and will observe the Resident visually to ensure they are comfortable, safe, and that social distancing is being followed.

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)

Residents who are medically stable and not under suspicion for COVID-19 or other communicable diseases may accept visitors.

47. WILL OUTDOOR VISITATION BE UTILIZED AT STEP 3? IF NO, SKIP TO QUESTION #51

Yes, outdoor visitation will be utilized if weather appropriate, as it is the preferable option for visitation.

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")

Same.

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")

Same.

STEP 3

VISITATION PLAN

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. If the Mercer county positivity rate is greater than 10.00% visitations will only occur for compassionate care situations.

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

Visitors will be screened and perform hand hygiene. A mask is required upon entry and for the duration of the visit. Staff will escort the visitors directly to the Resident's room. Visitors will be restricted to the room where the visitation will occur. Visits will be supervised to ensure infection control practices are maintained, including social distancing, that the visitors wear a cloth face covering or facemask continuously, and that the visitors practice proper hand hygiene. Visitors who fail to follow the required process may have visitation suspended.

VOLUNTEERS

53. DESCRIBE INFECTION CONTROL PRECAUTIONS ESTABLISHED FOR VOLUNTEERS

We will not be utilizing volunteers at this time.

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

N/A.

55. NAME OF NURSING HOME ADMINISTRATOR

Amber Morian-Gowetski, NHA

56. 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 *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.

Amber Marjan-Gowetsche

9/29/20 updated 11/24/20

SIGNATURE OF NURSING HOME ADMINISTRATOR

DATE