

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

| FACILITY INFORMATION | |
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| 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 | |
| Mosser Nursing Home | |
| 2. STREET ADDRESS | |
| 1175 Mosser Rd, PO Box 133 | |
| 3. CITY | 4. ZIP CODE |
| Trexlerstown | 18087 |
| 5. NAME OF FACILITY CONTACT PERSON | 6. PHONE NUMBER OF CONTACT PERSON |
| John Muth, NHA | 610-395-5661 |

| DATE AND STEP OF REOPENING | |
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| 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 | |
| 07/27/2020 | |
| 8. 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 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 new facility onset of COVID-19 cases for 14 consecutive days since baseline COVID-19 testing</i> | |
| 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 | |
| 06/20/2020 | |

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

06/04/2020 to 06/23/20

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

As of this date, Mosser Nursing Home has enough test kits and agreements with two lab providers to test residents within 24 hours of symptoms being observed.

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

As of this date, Mosser Nursing Home has enough test kits and agreements with two lab providers to test residents within 24 hours of symptoms being observed for staff and residents.

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

As of this date, Mosser Nursing Home has enough test kits and agreements with two lab providers to test residents within 24 hours of symptoms being observed for staff and residents.

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

Mosser Nursing Home will not utilize any volunteers at this time. Non-essential staff must have evidence of a negative COVID-19 swab before entrance to the facility.

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

Mosser Nursing Home staff must participate with COVID-19 mandatory testing as a condition of employment.

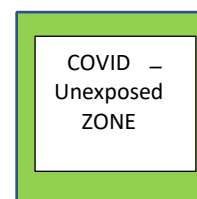
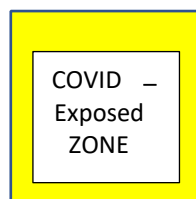
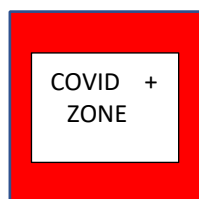
Residents Refusing Testing:

- a. Staff will explain the benefits of testing to the resident and/or resident representative. If an asymptomatic resident still refuses to be tested and they have been potentially exposed to COVID-19, they will room in a private room or room by themselves as available, under droplet precautions for at least 14 days.
- b. If the resident develops a fever or respiratory symptoms testing is recommended, and the testing request should be re-visited with the resident and/or resident representative. The resident will remain under droplet precautions and roomed by themselves, as feasible, for at least 14 days.

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

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*.

1. Mosser Nursing Home will cohort residents in separate units in three zones, whenever possible, based on test results.
 - a. COVID + test (Red Zone) should include residents with a positive COVID-19 test and still within the parameters for transmission-based precautions.
 - b. COVID – test; potentially exposed (Yellow Zone) should include residents with a negative COVID-19 test that remain asymptomatic but are within 14 days of possible exposure to COVID-19.
 - c. Unexposed (Green Zone) should include residents in the facility that were not tested and thought to be unexposed to COVID-19.



2. The three types of residents listed above should not share common areas such as communal bathrooms and showers with other types of residents. The three zones should remain separated in the building
3. Staff should be designated by zone as much as possible to minimize risk to exposed (Yellow) and non-exposed (Green) residents. Using staff in more than one zone should be prioritized as below, with the best option listed first, and the least desirable option last.
4. Ideally, different zones will not exist on the same unit. However, facilities may find that all 3 zones exist on the same unit due to building layout, location of positive residents, etc. When this occurs, zones must be clearly marked with signs.
5. Staff should work on the same unit, whenever possible. However, staffing needs, resident needs, etc. may not always make this practical.

See attached table for staffing options:

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

16. DESCRIBE THE CURRENT CACHE OF PERSONAL PROTECTIVE EQUIPMENT (PPE) AND THE PLAN TO ENSURE AN ADEQUATE SUPPLY OF PPE FOR STAFF (BASED ON THE TYPE OF CARE EXPECTED TO BE PROVIDED)

As of this date, Mosser Nursing Home has an adequate supply of PPE to sustain a COVID outbreak for greater than 30 days.

- PPE supplies are monitored daily and secured in two locked locations at Mosser Nursing Home and a larger supply at the Lifequest campus (available to Mosser 24/hours a day prn)
- Strategies to conserve, address supply shortages, and prioritize allocation of PPE equipment have been investigated and will be implemented, including recommendations by the CDC. These include use of re-washable PPE, re-use of N95's masks with same type of resident, use of LUMIN light to sanitize appropriate items, co-horting residents and use of dedicated staff to limit supply usage.

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

Mosser Nursing Home presently has adequate staffing levels to operate on a daily basis. Contingency plan for staffing shortage follows:

- Staffing contingency plans include: flex staff, agency usage, administrative nursing staff, cross training of non-medical staff, common pool with sister facility prn.
- DON is responsible for conducting a daily assessment of staffing status and needs during a COVID-19 outbreak
- If a staffing crisis is declared, state health departments will be consulted to confirm and address prn.

18. 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

If Lehigh County reverts to a "Red Phase" of the Governor's reopening plan, Mosser Nursing Home will halt all activity and re-instate measures included before Step 1. These measures include cessation of non-essential visitors, group activities and communal dining. All resident out of facility appointments will be cancelled, unless urgent.

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.

19. RESIDENTS

- All residents will be monitored per the Medical Director's discretion, depending on facility status and surrounding community infections, including vital signs and pulse oximeter checks at least daily

SCREENING PROTOCOLS

20. STAFF

- The facility does not promote presenteeism and has sick leave policies that are flexible and consistent with public health policies that allow ill healthcare personnel to stay home.
- At the start of each shift, all employees must check in with the charge nurse to verify they are not exhibiting symptoms associated with COVID-19 : fever or chills, sore throat, congestion/runny nose, cough, horthness of breath, new loss of taste or smell, fatigue, body aches, nausea/ vomiting or diarrhea Each person’s temperature will be taken and logged on a daily sheet at the beginning and end of the shift. Anyone with an elevated temperature above 99.4F or exhibiting any other symptoms will be sent home for the day. Return to work will be discussed on a case by case basis.
- Employees noticing others exhibiting any symptoms such as fever or chills, sore throat, congestion/runny nose, cough, shortness of breath, new loss of taste or smell, fatigue, body aches, nausea/ vomiting or diarrhea coughing, etc. should immediately notify: Nurse Manager on Duty.

21. HEALTHCARE PERSONNEL WHO ARE NOT STAFF

A Visitor Health Screening Form will be completed

22. NON-ESSENTIAL PERSONNEL

A Visitor Health Screening Form will be completed

23. VISITORS

A Visitor Health Screening Form will be completed

24. VOLUNTEERS

Volunteers will not be utilized at this time. The plan will be updated prn volunteers are indicated.

COMMUNAL DINING FOR RESIDENTS UNEXPOSED TO COVID-19

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

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

Communal Dining is limited to residents unexposed to COVID-19. The majority of residents presently eat breakfast in their room. The dining rooms may accommodate eight to nine residents in the main dining room and four- five residents in the west lounge for meals. There are two seatings for lunch and dinner. Residents will be assisted to the dining rooms before trays are served at intervals to maintain social distancing.

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

One resident may sit at one table in each dining room for meals to maintain 6 feet of social distancing. The tables are positioned at six foot distances.

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

Residents who need assist with feeding at are at risk for aspiration, may cough creating droplets. Staff will wear eye protection and gowns for this resident population. If staff assists more than one resident at the same time, staff must perform hand hygiene with at least hand sanitizer each time when switching assistance between residents.

COMMUNAL DINING FOR RESIDENTS UNEXPOSED TO COVID-19

28. DESCRIBE ANY OTHER ASPECTS OF COMMUNAL DINING DURING REOPENING

Mosser Nursing Home continues to strive to provide outlets for socialization and psychosocial well being while also adhering to protocols to minimize the risk of transmission of infection. The facility will continue to investigate avenues to increase the safe participation of all residents in communal dining.

ACTIVITIES AND OUTINGS

In each block below, describe the types of activities that will be planned at each step and the outings that will be planned at Step 3 (an all-inclusive list is not necessary). Include where they will be held and approximately how many residents will be involved. Describe how social distancing, hand hygiene, and universal masking will be ensured. Also include precautions that will be taken to prevent multiple touching of items such as game pieces.

29. DESCRIBE ACTIVITIES PLANNED FOR STEP 1 (FIVE OR LESS RESIDENTS UNEXPOSED TO COVID-19)

Activities planned for step 1 are, word games on dry erase board, sing alongs, trivia, devotions, movies, exercise, Hi and Low, current events, coffee & discussion, reminiscing and arts & crafts. All activities up to 5 people will be held in the West Lounge or the Main Dining Room. Each individual will be utilizing their own supplies and will be 6 feet apart. Any tables, chairs or supplies used will be sanitized and masks will be worn at all times. Proper hygiene will be ensured for residents and staff.

30. DESCRIBE ACTIVITIES PLANNED FOR STEP 2 (TEN OR LESS RESIDENT UNEXPOSED TO COVID-19)

Activities planned for step 2 are essentially the same, word games on dry erase board, sing alongs, trivia, devotions, movies, exercise, Hi and Low, current events, coffee & discussion, reminiscing and arts & crafts (with each individual utilizing their own supplies-1 per table & there are 7 tables). All activities up to 10 people will be held in the Main Dining Room. Each individual will be utilizing their own supplies and be 6 feet apart. Any tables, chairs or supplies used will be sanitized and masks will be worn at all times. Proper hygiene will be ensured for residents and staff.

31. DESCRIBE ACTIVITIES PLANNED FOR STEP 3

Due to limited room in the building, while we are required to social distance, we will continue to limit our indoor group size to 10 or under and continue with the activities described in steps 1 or 2.

32. DESCRIBE OUTINGS PLANNED FOR STEP 3

No outdoor outings are planned at this time. The plan will be updated prn when this activity will be initiated.

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.

33. DESCRIBE THE LIMITED NUMBER AND TYPES OF NON-ESSENTIAL PERSONNEL THAT HAVE BEEN DETERMINED NECESSARY AT STEP 2

The non-essential personnel included at this stage are: Dental, Psychiatric and Optometry Services

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| <p>34. DESCRIBE HOW SOCIAL DISTANCING, HAND HYGIENE, AND UNIVERSAL MASKING WILL BE ENSURED FOR NON-ESSENTIAL PERSONNEL AT STEPS 2 AND 3</p> <p>All non-essential personnel will be screened at the entrance of the facility. They will be provided with appropriate face masks and education regarding hand hygiene. These services will be provided in residents' rooms to ensure social distancing.</p> |
| <p>35. DESCRIBE MEASURES PLANNED TO ENSURE NON-ESSENTIAL PERSONNEL DO NOT COME INTO CONTACT WITH RESIDENTS EXPOSED TO COVID-19</p> <p>Non-essential personnel will only be permitted to enter the facility if there are no active cases of COVID-19 nor any residents who have been exposed to COVID-19.</p> |

| VISITATION PLAN | |
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| <p>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.</p> | |
| <p>36. DESCRIBE THE SCHEDULE OF VISITATION HOURS AND THE LENGTH OF EACH VISIT</p> <p>Visitation hours within the facility will be available 12pm-4pm Monday through Saturday. Each visit is limited to 15 minutes.</p> | |
| <p>37. DESCRIBE HOW SCHEDULING VISITORS WILL OCCUR</p> <p>A visitor's schedule will be maintained at the front desk. Visits must be scheduled at least 24 hours ahead of time to ensure adequate space is available.</p> | |
| <p>38. DESCRIBE HOW VISITATION AREA(S) WILL BE SANITIZED BETWEEN EACH VISIT</p> <p>39.</p> <p>Chairs and tables when utilized will be sanitized with appropriate disinfection products before and after each visit.</p> | |
| <p>40. WHAT IS THE ALLOWABLE NUMBER OF VISITORS PER RESIDENT BASED ON THE CAPABILITY TO MAINTAIN SOCIAL DISTANCING AND INFECTION CONTROL?</p> <p>Outdoor visitation may accommodate up to two visitors, however visitors will be instructed and must adhere to social distancing policies from the resident and each other. The facility will begin with outdoor visitations. The facility will progress to indoor visitation at increments. Indoor visitation is limited to two people to visit with one resident inside the facility.</p> | |
| <p>41. DESCRIBE THE ORDER IN WHICH SCHEDULED VISITS WILL BE PRIORITIZED</p> <p>Visits will be scheduled on a first come, first serve basis. End of life and compassionate care visits will continue to be offered on a case by case basis.</p> | |
| STEP 2 | <p>42. 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)</p> <p>Visitation is limited to residents unexposed to COVID-19. Only residents who can safely sit in a wheelchair or ambulate independently or with assist of one staff member can visit outdoors. Staff will escort residents to visits as scheduled.</p> |
| | <p>43. DESCRIBE THE OUTDOOR VISITATION SPACE FOR STEP 2 TO INCLUDE THE COVERAGE FOR SEVERE WEATHER, THE ENTRANCE, AND THE ROUTE TO ACCESS THE SPACE</p> <p>Outdoor visits can only be accommodated as weather permits, as coverage is not available.</p> |

| VISITATION PLAN | |
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| | <p>Outdoor visits may occur in the courtyard, the resident will remain on the sidewalk and the visitors may sit on the benches provided. The entrance and exit is via the main entrance door.</p> |
| | <p>44. DESCRIBE HOW A CLEARLY DEFINED SIX-FOOT DISTANCE WILL BE MAINTAINED BETWEEN THE RESIDENT AND THE VISITOR(S) DURING OUTDOOR VISITS</p> <p>Signage will be provided indicating 6 foot distance, either via flagged areas or direct application to the sidewalks/ walkways.</p> |
| | <p>45. DESCRIBE THE INDOOR VISITATION SPACE THAT WILL BE USED IN THE EVENT OF EXCESSIVELY SEVERE WEATHER TO INCLUDE THE ENTRANCE AND THE ROUTE TO ACCESS THE SPACE</p> <p>Once indoor visits occur, the middle lounge can accommodate inside visits. The entrance is via the main entrance door. Visitors will be escorted directly to the lounge, as it is less than 12 feet from the entrance and within a neutral zone of the building. However, due to space limitations, no more than two visitors may visit one resident at a time in this space.</p> |
| | <p>46. DESCRIBE HOW A CLEARLY DEFINED SIX-FOOT DISTANCE WILL BE MAINTAINED BETWEEN THE RESIDENT AND THE VISITOR(S) DURING INDOOR VISITS</p> <p>47.</p> <p>Clear signage, markings and instruction will be provided delineating safe six foot separation between all parties.</p> |
| STEP 3 | <p>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)</p> <p>Visitation is limited to residents unexposed to COVID-19. Visiting in a resident’s room is permitted only if the resident is unable to transported to the designated visitation area. Only residents who can safely sit in a wheelchair or ambulate indepenfently or with assist of one staff member can visit outdoors.</p> <p>Staff will escort residents to visits as scheduled.</p> |
| | <p>49. WILL OUTDOOR VISITATION BE UTILIZED AT STEP 3? IF NO, SKIP TO QUESTION #52</p> <p>Outdoor visits will be utilized as weather permits.</p> |
| | <p>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”)</p> <p>Outdoor visits can only be accommodated as weather permits, as coverage is not available. Outdoor visits may occur in the courtyard, the resident will remain on the sidewalk and the visitors may sit on the benches provided. The entrance and exit is via the main entrance door.</p> |
| | <p>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”)</p> <p>Clear signage, markings and instruction will be provided delineating safe six foot separation between all parties.</p> |
| | <p>52. 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”)</p> <p>SAME</p> |
| | <p>53. DESCRIBE HOW A CLEARLY DEFINED SIX-FOOT DISTANCE WILL BE MAINTAINED BETWEEN THE RESIDENT</p> |

VISITATION PLAN

AND THE VISITOR(S) DURING INDOOR VISITS (IF THE SAME AS STEP 2, ENTER "SAME")

SAME

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

Visitation is limited to residents unexposed to COVID-19. Visiting in a resident's room is permitted only if the resident is unable to be transported to the designated visitation area. All visitors will be escorted directly to the resident's room. Visitors will be directed to use hand sanitizer upon entry and exit of the facility. Visitors will be instructed on 6 feet social distancing during the visit and must wear a mask the entire time while they are in the facility. Visits are limited to fifteen minutes. At the end of the visit, visitors are to leave the facility directly. No interaction with other residents is permitted.

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

No volunteers will be utilized at this time.

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

No volunteers will be utilized at this time.

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

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 *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.

SIGNATURE OF NURSING HOME ADMINISTRATOR

DATE