

## 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	
<p>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.</p>	
<p><b>1. FACILITY NAME</b></p> <p>Garden Spot Village of Akron d/b/a Maple Farm</p>	
<p><b>2. STREET ADDRESS</b></p> <p>604 Oak Street</p>	
<p><b>3. CITY</b></p> <p>Akron</p>	<p><b>4. ZIP CODE</b></p> <p>17501</p>
<p><b>5. NAME OF FACILITY CONTACT PERSON</b></p> <p>Lora Gomboc</p>	<p><b>6. PHONE NUMBER OF CONTACT PERSON</b></p> <p>717-859-1191</p>

DATE AND STEP OF REOPENING	
<p>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).</p>	
<p><b>7. DATE THE FACILITY WILL ENTER REOPENING</b></p> <p>8/3/2020</p>	
<p><b>8. SELECT THE STEP AT WHICH THE FACILITY WILL ENTER REOPENING – EITHER STEP 1 OR STEP 2 (CHECK ONLY ONE)</b></p> <p><input type="checkbox"/> <b>Step 1</b> <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 <u>June 8, 2020, Order of the Secretary of Health</u>)</i></p> <p><input checked="" type="checkbox"/> <b>Step 2</b> <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 <u>June 8, 2020, Order of the Secretary of Health</u>)</i></p> <p><b>AND</b> <i>Have the absence of any new facility onset of COVID-19 cases for 14 consecutive days since baseline COVID-19 testing</i></p>	

## DATE AND STEP OF REOPENING

9. HAS THE FACILITY EXPERIENCED A SIGNIFICANT COVID-19 OUTBREAK? (IF NO, SKIP TO #11)

No

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

6/24/2020

## 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

6/15/2020 to 7/16/2020

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 Infection Control Preventionist and all RNs have been trained and are able to administer the COVID 19 diagnostic tests to all residents showing symptoms of COVID 19 and are able to do so within 24 hours.

Maple Farm also has a contract with Clarity Lab. Clarity is able to provide the test kits (i.e. swabs, test tube, collection bags, labels) and transportation of specimens through Phoebe Pharmacy.

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

Maple Farm has the capacity to administer COVID 19 tests to all residents and staff through the contract with Clarity Lab. Per the contract, Clarity provides the test kits with all of the necessary supplies. They are also able to provide assistance with administering the COVID-19 tests.

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

Maple Farm has the capacity to administer COVID 19 tests to all staff, including asymptomatic staff, through the contract with Clarity Lab. Per the contract, Clarity provides the test kits with all of the necessary supplies. In addition to Maple Farm RNs and Infection Control Preventionist administering the COVID 19 diagnostic tests, Clarity Lab is also able to provide assistance with administering the COVID-19 tests.

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

Non-essential staff and volunteers will need to be tested through their primary care physician's (PCP) office or at a location determined by their PCP.

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

Residents who refuse or are unable to be tested will be assumed to be positive and therefore will be under quarantine for 14 days.

Per the Garden Spot Communities HR policy 1.123, due to the extreme safety and risk to all, testing is mandatory for all staff as a condition of employment.

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

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*.

Any single resident that is suspected positive or confirmed positive will be isolated in their room and their room will become a red zone. If multiple residents are confirmed positive for COVID, will attempt to cohort residents in COVID designated area. Residents under the suspicion of having COVID with COVID testing pending will be part of yellow zone.

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)

Maple continues to purchase and maintain an adequate supply of personal protective equipment (PPE) in a designated emergency supply storage area. A PPE inventory list is maintained to continually track supply levels. The PPE supply chain has significantly improved, too.

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

Maple Farm currently has staffing levels that exceed the PA state minimum 2.7 NHPPD. Garden Spot Communities has a contract with Mediquest Staffing to assist if Maple Farm experience staffing shortages. Additional staff have been cross-trained to provide additional nursing care support. Maple Farm is able to provide an approved 8 hour CNA training program utilizing the waiver for CNA training classes. The CDC Strategies to Mitigate Healthcare Personnel Staffing Shortages will also be utilized.

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

If Lancaster County reverts back to Red Phase, Maple Farm will stop all reopening plans and revert back to Step 1. Residents, Families and/or POAs and Staff will be contacted via phone with a recorded message detailing the plan for moving back to Step 1 and the website will be updated. Residents will be contacted via in person and postings in each household.

## 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

Residents are screened every shift for temperature, pulse ox and are asked and observed for possible signs and symptoms of COVID 19. If a temperature of 100.0 or greater is noted and symptoms of COVID 19 are identified, the resident is placed in droplet isolation precautions and the PCP is notified for next steps.

### 22. STAFF

All staff complete screening upon entering the main entrance of the building. Each staff member must wear a mask, use hand sanitizer and have their temperature is taken prior to the start of the shift. (If the temperature exceeds 100.0 degrees, the employee cannot work.) Employees are asked about any symptoms of COVID 19 (per CDC guidance). If the employee had possible exposure to COVID 19 they may not work. The temperature scanner requires the employee to have a surgical mask on. If screening reveals they have possible virus, they are instructed to go home and contact their healthcare provider for next step and are not able to work until cleared by a provider.

## SCREENING PROTOCOLS

### 23. HEALTHCARE PERSONNEL WHO ARE NOT STAFF

Healthcare personnel who are not staff are required follow the same steps as all staff as indicated in #22..

### 24. NON-ESSENTIAL PERSONNEL

Non-essential personnel are required to follow the same steps as all staff as indicated in #22.

### 25. VISITORS

In Step 1 there are no visitors unless compassionate care situations (A maximum of people) may go directly to the resident's room post screening, hand sanitizing, and wearing a mask.

In Step 2& 3 visitors will only be permitted outside of the households with appropriate social distancing. All visitors will go through the same screening process as staff. Each visitor will have their temperature taken (temp may not exceed 100.00 degrees). Visitors will: 1)answer questions regarding COVID-19 symptoms and possible exposure per the CDC guidance 2)wear mask and 3) hand sanitize. If screening reveals they have a possible virus, the visor will be asked to leave and contact their healthcare provider for next steps.

### 26. VOLUNTEERS

In Steps 2 & 3, when volunteers are permitted to return for the purpose of visitation procedures, they will be required to follow the same steps as all staff (as indicated in #22).

## 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.

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

The meal schedule will allow for residents to have breakfast at their request and/or upon arising. Offering breakfast all morning naturally provides staggered times with ability to socially distance. Lunch and dinner are served at routine times. Each household will have two serving times for lunch and dinner to promote social distancing.

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

Tables are spaced apart for social distancing and one person is seated at a table. Spouses may be seated together but at opposite ends of the table.

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

All staff will follow appropriate infection control measures and wear surgical masks at all times with in resident care areas, including the dining room.

### 30. DESCRIBE ANY OTHER ASPECTS OF COMMUNAL DINING DURING REOPENING

Staff members will perform hand hygiene when moving from one resident to assist another resident. Residents will be encouraged to wash hands and/or use hand sanitizer prior to and after the meal.

## 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.

## ACTIVITIES AND OUTINGS

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

Activity programming will continue to occur on a one to one basis, but will also include small groups of 5 or less residents unexposed to COVID-19. These activities will occur in the resident's room or a common area in their household. At least 6 feet of social distance will be maintained between residents. Bingo (and similar activities) will be modified to ensure residents are provided their own supplies (i.e. bingo chips) and the supplies are cleaned by the staff at the end of the program. Staff will disinfect the area after the program. Residents will be provided with opportunities to use hand sanitizer and/or hand wash. Residents are provided masks and will be encouraged to use their masks when outside their rooms.

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

As described in #31, with exception of allowing 10 or less residents per group.

### 33. DESCRIBE ACTIVITIES PLANNED FOR STEP 3

Activities will occur in locations where proper social distancing can occur for those residents not exposed to COVID-10. The location will determine the size of the group based on the amount of residents in the area with proper social distancing. As stated in #31, residents will be provided masks to use when outside their rooms and will practice hand hygiene prior to leaving and upon returning to their room.

### 34. DESCRIBE OUTINGS PLANNED FOR STEP 3

Group outings off-campus are not anticipated at this time. Residents and staff will instead utilize the multiple shaded outdoor space areas while maintaining proper social distancing. Car ride outings may be offered to individual residents who do not enjoy group programs. A car ride outing may be provided by Maple Farm staff in the Maple Farm van. Masks and hand hygiene (for staff and resident) would be performed prior to and after the car ride. The Maple Farm van would be cleaned/disinfected after the car ride.

## 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.

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

Non-essential personnel that have been determined necessary at Step 2 are Physical, Occupational & Speech Therapist, MD, CRNP, and Podiatrist - the stated disciplines have been included to ensure residents remain at the highest functioning level physically, emotionally and spiritually. In the event of beautician and barber usage these services will be utilized as necessary for emotional health of residents one person at time.

### 36. DESCRIBE HOW SOCIAL DISTANCING, HAND HYGIENE, AND UNIVERSAL MASKING WILL BE ENSURED FOR NON-ESSENTIAL PERSONNEL AT STEPS 2 AND 3

Care areas are utilizing one entrance to enter and exit. Each team member (essential and non-essential) is required to have their temperature taken, answer a series of questions regarding symptoms and potential exposure and sanitize hands prior to entering the area. Masks are mandatory for all persons entering the facility and the mask must be of surgical quality for all staff and contractors. When close proximity to a resident is required to provide service/care, both parties are required to wear a mask.

## NON-ESSENTIAL PERSONNEL

### 37. DESCRIBE MEASURES PLANNED TO ENSURE NON-ESSENTIAL PERSONNEL DO NOT COME INTO CONTACT WITH RESIDENTS EXPOSED TO COVID-19

Residents potentially exposed to COVID-19 are isolated to their rooms. Tape and door signs (with needed PPE) clearly identify the room and only specifically assigned team members are permitted to enter the room. Individuals are also informed visually through signage when they are entering a potentially COVID-19 restricted area. Non-essential personnel may not enter.

## VISITATION PLAN

**For visitation to be permitted in Steps 2 and 3 of reopening (as described in Section 6 of *Interim Guidance for Skilled Nursing Facilities During COVID-19*), 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

Initially, visitation hours will occur one day per week for 40 minutes (max) each between the hours of 9am and 3pm. For example, visitation will occur at 9am, 10am, 11am. After the 40 (max) minute visitation, volunteers and/or staff will have 20 minutes to sanitize the areas of visitation to ensure proper infection control.

### 39. DESCRIBE HOW SCHEDULING VISITORS WILL OCCUR

Visitation will be conducted on certain days of the week at specified times. Families and friends will be able to call Maple Farm to schedule a visit. Guidelines regarding visitation will be located on the website. If a family member or friend lives a significant distance away, special pre-scheduled visitations can occur by contacting the resident's Social Services staff member.

### 40. DESCRIBE HOW VISITATION AREA(S) WILL BE SANITIZED BETWEEN EACH VISIT

Between each visit, any tables, chairs, doors or high contact services will be cleaned, with the use of an EPA approved cleaner, by volunteers or the staff member overseeing the visitation.

### 41. WHAT IS THE ALLOWABLE NUMBER OF VISITORS PER RESIDENT BASED ON THE CAPABILITY TO MAINTAIN SOCIAL DISTANCING AND INFECTION CONTROL?

Two to three visitors may visit a resident at one time in order to maintain social distancing and proper infection control. Children are permitted to visit when accompanied by an adult visitor. Adult visitors must be able to manage children and children older than 2 years must wear a mask during the time of visit. Children must also maintain strict social distancing.

### 42. DESCRIBE THE ORDER IN WHICH SCHEDULED VISITS WILL BE PRIORITIZED

Compassionate Care visitation will occur, as needed, based on the situation. All other non-Compassionate Care visitation will occur based on the order family members/friends sign up. Again, special consideration will be made for those that live a significant distance from the community and cannot arrive during the pre-scheduled times. It is up to the family member/friend to contact the resident's Social Services staff member to prearrange these. Under no circumstances will non prescheduled visitations occur.

## VISITATION PLAN

<b>STEP 2</b>	<p><b>43. 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)</b></p> <p>Residents will need to be in good health, not showing signs of COVID-19 (fever, cough, SOB, etc.) and able to be transported to a designated area protected by the weather.</p>
	<p><b>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</b></p> <p>Outdoor visits will occur in the courtyard. In the event of severe weather or heat the visitations may occur in the activity room (located outside the households) or the visit may have to be rescheduled.</p>
	<p><b>45. DESCRIBE HOW A CLEARLY DEFINED SIX-FOOT DISTANCE WILL BE MAINTAINED BETWEEN THE RESIDENT AND THE VISITOR(S) DURING OUTDOOR VISITS</b></p> <p>Tape will be placed on the floor to indicate a six-foot distance between resident and visitor(s). Additionally, tables will be placed in-between residents and visitors to maintain safe distancing.</p>
	<p><b>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</b></p> <p>The space to be used for visitation is located in the activities room outside the households (near the front entrance). This space will be sectioned into two separate areas.</p>
	<p><b>47. DESCRIBE HOW A CLEARLY DEFINED SIX-FOOT DISTANCE WILL BE MAINTAINED BETWEEN THE RESIDENT AND THE VISITOR(S) DURING INDOOR VISITS</b></p> <p>Tape will be placed on the floor to indicate a six-foot distance between resident and visitor(s). Additionally, tables will be placed in-between to maintain that distance.</p>
<b>STEP 3</b>	<p><b>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)</b></p> <p>Same as #43</p>
	<p><b>49. WILL OUTDOOR VISITATION BE UTILIZED AT STEP 3? IF NO, SKIP TO QUESTION #52</b></p> <p>Outdoor and indoor visitation will be utilized during Step 3.</p>
	<p><b>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")</b></p> <p>Outdoor visits will occur in the courtyard. In the event of severe weather or heat the visitations will take place in the activity room (same as # 46). Access to the courtyard will be through the main entrance. In the event of rain, an umbrella will be used to keep residents dry.</p>
	<p><b>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")</b></p> <p>A staff member or volunteer will be utilized to intermittently monitor visitations to assure a 6-foot distancing will be maintained during visitation. The area utilized for visitation will also include a marked off area to delineate safe distancing boundaries.</p>
	<p><b>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")</b></p>

## VISITATION PLAN

Same

**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")**

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**

A staff member or volunteer will be utilized to intermittently monitor visitations to assure a 6-foot distancing will be maintained during visitation. The area utilized for visitation will also include a marked off area to delineate safe distancing boundaries.

## VOLUNTEERS

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 volunteers will be required to complete a COVID-19 infection control training program prior to returning to volunteer duties. Volunteers will be educated on the following: screening guidelines, proper hand hygiene, required face mask use, and infection control guidelines. Per Step 2 & 3, volunteers are only able to return for the purpose in assistance of visitation procedures to those residents unexposed to COVID-19. Only personnel would be permitted to be in any areas where there is facility onset of COVID-19 case/s.

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

Volunteers may be utilized for the purpose of visitation procedures.

## ATTESTATION

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**

Lora A. Gomboc



ATTESTATION

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.

Rona A. Nambroc, MHA, NHA

SIGNATURE OF NURSING HOME ADMINISTRATOR

8/3/2020

DATE