

**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 <i>Bethlen Communities</i>	
2. STREET ADDRESS <i>66 Carey School Rd</i>	
City <i>Ligonier, PA</i>	3. ZIP CODE <i>15658</i>
4. NAME OF FACILITY CONTACT PERSON <i>Ray Soto</i>	5. PHONE NUMBER OF CONTACT PERSON <i>724-238-6711</i>

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).	
6. DATE THE FACILITY WILL ENTER REOPENING <i>3/16/2021</i>	
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 new facility onset of COVID-19 cases 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) <i>NO</i>	
9. DATE THE FACILITY WAS SURVEYED BY THE DEPARTMENT OF HEALTH TO ENSURE THE FACILITY IS ADEQUATELY PREVENTING TRANSMISSION OF COVID-19 <i>7/6/2020</i>	

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](#) Completed 7/13/2020

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

Bethlen Communities staff administers the swabs. Swabs are couriered to Parkway Clinical Laboratories. Parkway Clinical Laboratories will process COVID-19 tests.

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

Bethlen Communities has entered into an agreement with Parkway Clinical Laboratories. Parkway Clinical Laboratories has the capacity to test residents and staff in the event of an outbreak.

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

Bethlen Communities has entered into an agreement with Parkway Clinical Laboratories. Parkway Clinical Laboratories has the capacity to test residents and staff in the event of an outbreak, including asymptomatic staff.

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

Bethlen Communities has entered into an agreement with Parkway Clinical Laboratories. Parkway Clinical Laboratories has the capacity to test volunteers and non-essential staff before they are granted entrance into a facility.

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

Resident(s) will be placed on the 100 Unit in Red Zone for 14 days. If resident develops signs and symptoms of COVID-19, resident will be approached a second time for consent to test. If resident refuses and is symptomatic, resident will be presumed positive and remain placed in a Red Zone/Unit until 14 days have lapsed since onset of symptoms. If staff member declines testing, they will be removed from the schedule and remain at home for a duration of 14 days to self-isolate.

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*.

COVID-19 positive residents will be cohorted on a red zone/unit. All exposed residents will be cohorted on a yellow unit for 14 days and be monitored closely for signs and symptoms of Covid-19; should symptoms present they are immediately allocated to a redzone for 14 days.

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)

Facility maintains PPE levels in Hybrent. Facility continues to purchase PPE from multiple vendors. Facility will request supplies from FEMA/PEMA as needed, if the facility encounters a shortage of less than 1-week supply.

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

The facility has an established emergency staffing plan. RN supervisor will reach out to dept staff and places calls to staff in effort to have them come in and assist with coverage. If non-nursing, department head is notified and contact their staff as applicable. If RN Supervisor is unable to replace staff; nurse on call is notified of shortage. Additional efforts are made to obtain staff; as applicable. If needed for resident care; mandation of current staff can occur to ensure resident needs are met. AGENCY is notified of need for emergency staff and efforts are made to obtain coverage.

Current agency contracts: ePeople (6/17/2020) and Intelycare (6/15/2020). IF agency cannot provide staff; nurse on call will go to facility and work as needed. IF nurse on call is unable to adequately meet the staffing needs; ADON, DON, NHA are notified of critical need and they are expected to report to facility and assist with resident care and floor coverage as applicable. CEO is notified of staffing crisis by NHA/DON. Home Health staff as well as staff from Ligonier Gardens are contacted in effort to meet the staffing needs. If applicable and appropriate unlicensed staff are able to be utilized to meet care needs. If ALL attempts to obtain staff have been exhausted and current staff is not able to be replenished a call is placed to DOH/National Guard, residents can be transferred to alternate facilities nearby. (St. Anne Home, Siemens Lakeview Manor, Winder Medical Center) If unable to accept the resident's at alternate facilities they are transferred to an Excelsa Facility.

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

19. 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

Staff will be informed of halting of reopening via company payroll system (Paycom) messaging and in-person notification, as able. Families will be notified via postings on the Bethlen website. Families may also be notified via mail or telephone calls if needed.

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

Residents are screened by nursing staff every shift for temperature and any signs or symptoms of COVID-19 and documentation on Medication Administration Record. If screening reveals any signs or symptoms, resident will be assessed by RN (and CRNP or MD if present in facility) and placed on droplet precautions if COVID-19 testing is indicated, resident will be rapid tested. If the results are positive, the resident will be moved to the red zone. If the rapid test indicate a negative result, the resident will receive a PCR test that will be sent to the lab and resident will be moved to the yellow zone until results are obtained. Contact tracing will be completed if resident tests positive for COVID-19.

21. STAFF

Staff are screened for temperature and signs and symptoms upon entering the facility. If signs and symptoms present during their shift or at time of exit, staff are instructed to cease patient care/contact, exit the facility, and alert the RN supervisor immediately. Staff with known travel to high risk areas must meet return to work eligibility criteria. Staff are followed and approved to return by Director of Nursing/Infection Preventionist for return to work eligibility criteria. Contact tracing will be completed if personnel tests positive for COVID-19.

22. HEALTHCARE PERSONNEL WHO ARE NOT STAFF

Contracted staff are screened for temperature and signs and symptoms upon entering the facility. If signs and symptoms present during their shift or at time of exit, staff are instructed to cease patient care/contact, exit the facility, and alert the RN supervisor immediately. Healthcare Personnel with known travel to high risk areas must meet return to work eligibility criteria. Healthcare Personnel are followed and approved to return by Director of Nursing/Infection Preventionist for return to work eligibility criteria. Contact tracing will be completed if personnel tests positive for COVID-19.

23. NON-ESSENTIAL PERSONNEL

Non-essential personnel are screened for temperature and signs and symptoms upon entering the facility. If signs and symptoms present during their shift or at time of exit, non-essential personnel are instructed to cease patient care/contact, exit the facility, and alert the RN supervisor immediately. Non-essential personnel with known travel to high risk areas must meet return to work eligibility criteria. Non-essential personnel are followed and approved to return by the Director of Nursing/Infection Preventionist for return to work eligibility criteria. Contact tracing will be completed if personnel tests positive for COVID-19.

Beauticians/Barbers: Beauticians/Barbers will follow the screening protocol outlined above for non-essential personnel. Additionally, beauticians/barbers will undergo initial COVID-19 testing and receive a negative result before entering the facility. Beauticians/barbers will be required to wear gloves and a surgical mask while performing hairdressing duties on residents. Residents will be strongly encouraged to wear surgical mask coverings with education provided and hand hygiene encouraged/provided. All surfaces that have been touched by staff, beautician/barber, or resident will be cleansed with approved sanitation solution and allowed appropriate dry time before the next visit may begin.

24. VISITORS

Visitors will be screened for travel to high risk areas, exposure to someone testing positive for COVID-19, temperature and signs and symptoms upon entering the facility. If visitor has traveled to a high-risk area or been in close contact with someone testing positive for COVID-19, they may visit only after the recommended period of self-quarantine has been completed. If signs and symptoms present during their visit or at time of exit, visitors will be instructed to cease patient contact, exit the facility, and alert the RN supervisor immediately. Symptomatic visitors will be monitored by Bethlen staff and contact traced.

SCREENING PROTOCOLS

25. VOLUNTEERS

Volunteers will be screened for temperature and signs and symptoms upon entering the facility. If signs and symptoms present during their shift or at time of exit, volunteers are instructed to cease patient care/contact, exit the facility, and alert the RN supervisor immediately. Volunteers are followed and approved to return by the Director of Nursing/Infection Preventionist for return to work eligibility criteria. Contact tracing will be completed if personnel tests positive for COVID-19.

Communal dining is the same for all steps of reopening.

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

Dining Room eating has been reconfigured to allow for social distancing of six (6) feet. Up to thirty (30) residents will attend the dining room for meals. Resident must be afebrile and asymptomatic prior to entering the Dining Room. Resident residing in a yellow or red unit are not eligible for communal dining.

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

Resident will be seated at least six (6) feet apart in the Dining Room with the exception of roommates.

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

Residents will have a negative COVID-19 screen for the previous shift and be able to wear a surgical mask covering during the transport to and from the Dining Room. Residents will sanitize hands prior to eating. Staff will be required to wear surgical mask coverings and gloves, as appropriate. Disinfection protocol will be followed

29. DESCRIBE ANY OTHER ASPECTS OF COMMUNAL DINING DURING REOPENING

Residents that need assistance will be transferred to and from Dining Room by Bethlen Staff following social distancing.

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 UNEXPOSED TO COVID-19)

In room or on individual units with five (5) or less residents with social distancing of at least six feet of spacing of residents. All residents outside of their rooms will be strongly encouraged to wear surgical mask coverings with education provided and hand hygiene encouraged/ provided.

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

In room or on individual units with ten (10) or less residents with social distancing with at least six feet of social distancing spacing of residents. All residents outside of their rooms will be strongly encouraged to wear surgical mask coverings with education provided.

32. DESCRIBE ACTIVITIES PLANNED FOR STEP 3

Individual units may participate in group activities with residents maintaining social distancing with at least six feet of spacing of residents. All residents outside of their rooms will be strongly encouraged to wear surgical mask coverings with education provided.

33. DESCRIBE OUTINGS PLANNED FOR STEP 3

None at this time, as social distancing cannot be maintained for transportation.

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 STEP 2

Non-essential personnel such as hair stylist will be allowed with screening and additional precautions including social distancing, hand hygiene and universal masking. May service/interact with only un-exposed residents.

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

Education and competencies will be provided. Beauty shop will be limited to one (1) resident at a time; however, we will accommodate two residents in the beauty shop but they must maintain a distance of 6 feet and both should be vaccinated. Resident and beautician will be masked during the entire interaction, and proper cleaning of surfaces will be completed before another resident may be brought to beauty shop. The beautician will complete hand hygiene before and after providing services to each resident.

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

Residents exposed to COVID-19 or positive for COVID-19 are to remain on their red or yellow zone unit behind the barrier. The zones are identified as green, yellow or red. The residents are encouraged not to leave their unit for non-essential services.

VISITATION PLAN

For visitation to be permitted (as described in *CMS Guidance Regarding Visitation QSO-20-39-NH*), the following requirements are established. Screening and additional precautions including social distancing, hand hygiene, and universal masking are required for visitors.

37. DESCRIBE THE SCHEDULE OF VISITATION HOURS AND THE LENGTH OF EACH VISIT

Visitation hours will be from 9:00AM-11:00AM & 1:00PM- 3:00PM on Sunday, Monday, Wednesday, Friday, and Saturday. 3:00PM-4:00PM & 6:30PM-8:30PM on Tuesdays and Thursdays. Visits will be scheduled with the Unit Clerk and last no longer than thirty (30) minutes each. Outdoor visits in neutral zones (front entrance parking lot area or outside courtyard for dementia wing) are preferred as weather permits. If weather does not permit, in-door visitation will occur in the Bethlen Home Linden Room. Visitors can access the Linden Room from the parking lot and will not be required to walk through the building or front entrance. Residents will be transported one at a time to the visitation location and the visit will be monitored by Bethlen staff or volunteers to ensure the safety and compliance of residents and visitors to current restrictions. Visitors will be screened, hand hygiene performed and will be required wear a face covering during the entire visit with six (6) feet social distance at all times. Fully vaccinated residents may touch visitors with hand hygiene performed before and after contact. A maximum of two (2) visitors per scheduled visit and one (1) visit per week, per resident on a first come/first served basis, or according to need. Additional visits may only be scheduled if the schedule can accommodate and if other residents/ families that have expressed a desire to have visits have been completed. Visitation areas will be disinfected between each visit. Compassionate care visits will be allowable and encompass CMS guidelines. Bethlen Home will

identify the residents that qualify.

38. DESCRIBE HOW SCHEDULING VISITORS WILL OCCUR

Visitors can schedule their visit times with Unit Clerk at 878-295-3279 Monday-Friday from 10:00AM-6:30PM

VISITATION PLAN

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

All surfaces that have been touched by staff, visitor, or resident will be cleansed with approved sanitation solution and allowed appropriate dry time before the next visit may begin.

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

Two (2) visitors per resident

41. DESCRIBE THE ORDER IN WHICH SCHEDULED VISITS WILL BE PRIORITIZED

On a first come/first serve basis, or any resident with a disease(s) that cause progressive cognitive decline and any resident expressing feelings of loneliness will take precedence for visitation schedule as long as resident resides on a green zone/unit. Bethlen Home will identify the residents that qualify.

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)

Nursing staff will determine if resident is medically stable to receive outdoor visitation. Bethlen Home will identify the residents that qualify. Residents will have a negative COVID 19 screen and be encouraged to wear surgical mask coverings for the duration of the visit. Residents residing on a yellow or red unit are not eligible for face to face visitation except in compassionate circumstances/end of life care.

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

Visitors will enter the outdoor visitation area located at the front of the building for general population, and in an outside courtyard area for the dementia unit. Visitors will park their vehicles in the lot located at the front of the facility. They will not need to enter the facility. 8-foot tables will be erected under tents Residents and Visitors will be socially distanced. Tents and tables will be 8 feet+ apart in distance.

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

Areas will be visually marked for where resident is to be seated and where visitors are to be seated with at least six feet of social distance.

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

The Linden Room will be utilized for indoor visitation. Area will be visually marked for where resident is to be seated and where visitors are to be seated with physical barrier between the resident and the visitor(s) for unvaccinated residents. Visitors can access the Linden Room from the parking lot and will not be required to walk through the building or the main entrance. Residents will be transported one at a time to the visitation location and visit will be monitored by Bethlen staff or volunteer to ensure the safety and compliance of residents and visitors to current restrictions.

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

Areas will be visually marked for where resident is to be seated and where visitors are to be seated with at least six feet of social distance.

47. 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)

Nursing staff will determine any resident that is medically stable to receive visitation. Residents will have a negative COVID-19 screen and are encouraged to wear a surgical mask covering for the duration of the visit. Residents residing on a yellow or red unit are not eligible for face to face visitation.

STEP 2

S

48. WILL OUTDOOR VISITATION BE UTILIZED AT STEP 3? IF NO, SKIP TO QUESTION #52

Yes. Visitors will park and access the outside visitation station. Visitors will not need to enter the facility.

49. 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

VISITATION PLAN	
	Same
	50. 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
	51. 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
	52. 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
	53. 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 <i>Visitation in resident rooms is an option in cases of end-of-life or compassionate care. Compassionate care visits will be allowable and encompass CMS guidelines. Bethlen Home will identify the residents that qualify. In the end-of-life and compassionate care visits, visitors are screened at the main entrance to the building and escorted to the resident's room. If possible the roommate will be removed from the room for the time of visit and cleaning of surfaces after the visit. Visits will be visually supervised by Bethlen staff to observe that resident and visitor are maintaining masking and social distancing. Limit to two (2) visitors for two (2) hours when in resident room to accommodate social distancing requirements. Visitor will be accompanied to exit.</i>

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.	
	54. DESCRIBE INFECTION CONTROL PRECAUTIONS ESTABLISHED FOR VOLUNTEERS, INCLUDING MEASURES PLANNED TO ENSURE VOLUNTEERS DO NOT COME INTO CONTACT WITH RESIDENTS EXPOSED TO COVID-19 <i>Residents exposed to COVID-19 or positive for COVID-19 are to remain on their red or yellow zone unit behind zone barriers. The zones are identified as green, yellow or red. The residents are encouraged not to leave their unit for non-essential services.</i>
	55. DESCRIBE THE DUTIES TO BE PERFORMED BY VOLUNTEERS DURING STEP 2 <i>Volunteers may assist with screening visitors, accompanying visitors to assigned visiting station, assisting with disinfection of the visitation area, observing and maintaining masking and social distancing requirements for visitation and assisting visitors with exiting the visitation area, provided education and competencies are adequate.</i>

<p>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.</p>	
56. NAME OF NURSING HOME ADMINISTRATOR <i>Ray Soto, NHA</i>	

57. 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.

Raymond Soto

3/15/2021

SIGNATURE OF NURSING HOME ADMINISTRATOR

DATE