UPMC Asbury Health Center
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 Asbury Health Center	
2. STREET ADDRESS 700 Bower Hill Road	
3. CITY Pittsburgh	4. ZIP CODE 15243
5. NAME OF FACILITY CONTACT PERSON Megan Caracciolo, Assistant Administrator	6. PHONE NUMBER OF CONTACT PERSON 412-571-5104

DATE AND STEP OF REOPENING
The facility will identify the date upon which all prerequisites will be met for reopening and the Step at which the facility will enter reopening. Those facilities that experienced a significant COVID-19 outbreak will identify the date the Department of Health survey was conducted (that is required prior to reopening).
7. DATE THE FACILITY WILL ENTER REOPENING Step 1: July 27, 2020 Step 2: September 11, 2020
8. SELECT THE STEP AT WHICH THE FACILITY WILL ENTER REOPENING – EITHER STEP 1 OR STEP 2 (CHECK ONLY ONE) ☐ ✓ **Step 1** *The facility must meet all the Prerequisites, including the baseline universal test for COVID-19 administered to staff and residents (in accordance with the June 8, 2020, Order of the Secretary of Health)- COMPLETED* ☐ ✓ **Step 2** *The facility must meet all the Prerequisites, including the baseline universal test for COVID-19 administered to staff and residents (in accordance with the June 8, 2020, Order of the Secretary of Health)* ***AND*** *Have the absence of any new facility onset of COVID-19 cases for 14 consecutive days since baseline COVID-19 testing*

DATE AND STEP OF REOPENING

9. **Has the Facility experienced a significant COVID-19 out break? If NO skip to # 11.**

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

Department of Health conducted an Infection Control Focused survey on July 10, 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**

6/30/20 for residents and 6/29-7-/1/12 for Staff. One unit of the Health Center (and its staff) were tested 7/7/2020 and 7/14/2020. Residents and staff of the Health Center were all again tested week of 7/20/20 and 7/28/20.

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**

Facility has one RN and two CRNP testers and additional testing support may be available through UPMC at this time.
Facility is seeking additional staff to receive this training.

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

Facility has one RN and two CRNP testers and additional testing support may be available through UPMC at this time.
Facility is seeking additional staff to receive this training.

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

Facility has one RN and two CRNP testers and additional testing support may be available through UPMC at this time.
Facility is seeking additional staff to receive this training.

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

We are not planning to re-introduce volunteers during phase 2 or 3 of re-opening. Non-essential employees were tested when essential employees were tested.

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

Residents have the right to decline testing. If the resident is exhibiting symptoms of COVID-19 and declines testing, resident will be placed in droplet/contact precautions and moved to a yellow zone.

If staff decline testing or are unable to be tested and are not exhibiting symptoms of COVID-19, the infection control policy will be followed regarding their assignment. If the employee refuses testing or is unable to be tested and IS exhibiting symptoms of COVID-19 they will not be permitted to work and must quarantine for 14 days.

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*.

Facility utilizes the Red, Yellow and Green zones for cohorting residents with positive COVID-19 in the facility. Residents will be transferred to the appropriate zone based on his/her status.

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)

Facility maintains a supply of gowns, surgical masks, N95 masks and eye protection in the facility and supply is monitored daily. UPMC supply chain will be used to obtain needed PPE. If UPMC supply chain is unable to provide necessary PPE, the county emergency management agency will be contacted.

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

Facility manages census based on the availability of staff to meet the needs of the residents and meet daily staffing requirements of 2.7 or above. The facility has been able to meet the required staffing hours per patient day.

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 a RED phase is determined for the county, the facility will halt all re-opening activities and families will be notified via email and a message will be left on the 1-800 line established for families to call and get updates from the facility.

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 for symptoms and temperature twice a day. If the resident screens positive for potential COVID-19, the resident will be placed in droplet precautions and placed in yellow zoned unit and tested for COVID-19. If resident tests positive for COVID-19, they will be move to a red zone.

22. STAFF

Staff are screened at the start of their shift using recommended screening guidelines. If the employee has a positive screen, they are not permitted to work, they are instructed to call UPMC MyHealth at Work for further instructions and sent home. Facility will adhere to recommendations given to the employee by MyHealth at Work.

23. HEALTHCARE PERSONNEL WHO ARE NOT STAFF

All healthcare staff will follow the same screening guidelines. If personnel has a positive screen, they will not be permitted to work and instructed to notify their employer for further instructions.

Podiatrists, audiologist, dentist, optometrist will be permitted to return to the facility for necessary visits.

SCREENING PROTOCOLS

24. NON-ESSENTIAL PERSONNEL

Non-essential personnel follow the same screening protocols as essential personnel noted in #22.

25. VISITORS

Visitor access is limited, and all visitors must follow the same screening protocols for staff and healthcare personnel who are not staff. They will not be permitted to enter the facility if considered a non-essential visitor or a resident's visitor.

26. VOLUNTEERS

Volunteers will not be permitted to visitor as part of Step 2 or 3 of re-opening.

COMMUNAL DINING

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

Facility will not resume communal dining during Step 2 or 3. Residents will continue to dine in their rooms. Dining on the unit for those needing supervision or assistance will continue with 6 feet of physical distancing between residents, limiting the number of residents at any one time to adhere to the physical distancing requirements. Residents eating in the lounge on the units must be COVID-19 negative and not exhibiting any signs of illness. Residents must not be on droplet precautions to eat in the lounge.

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

Residents will be spaced at least 6 feet apart.

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

Staff will maintain proper hand hygiene before and after assisting each resident with meals. Masking requirements will be maintained when assisting residents with dining. If resident is in droplet precaution, employees will maintain droplet precaution PPE.

30. DESCRIBE ANY OTHER ASPECTS OF COMMUNAL DINING DURING REOPENING

Only COVID-19 negative residents and residents who have not been exposed will be permitted to dine in the lounge on the unit. Residents in droplet precautions will not eat in the lounge.

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.

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

All activities currently are at the bedside.

Resident outings are not occurring.

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

Resident outings will not resume during Step 2.

33. DESCRIBE ACTIVITIES PLANNED FOR STEP 3

Activities for unexposed residents will resume without any resident limitation on # of residents participating while maintaining 6 feet of physical distancing between residents. Room size may limit number of residents participating in order to maintain 6 feet of physical distancing. Residents are strongly encouraged to wear masks when attending activities. Hand hygiene is performed prior to the start of the activity. The activity room and dining room are utilized to accommodate residents at activities while maintaining physical distancing. If residents are seated at tables, the tables are disinfected after the activity is completed. Activities is not utilizing any supplies that cannot be disinfected between resident use.

34. DESCRIBE OUTINGS PLANNED FOR STEP 3

Resident outings with no more than 2 residents at a time will be allowed on the facility van providing the residents are unexposed and masked. Resident must be able to wear mask during the length of the outing. Outings will be limited to pleasure rides and residents will not be exiting the van during the outings. Residents will be seated on the van at least 6 feet apart.

Hand hygiene will be performed before the resident enters the van. The van seats and surfaces and will be disinfected after use.

The van driver will always be masked.

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 working off-site will continue to work off-site during phase 2 making only essential visits to the facility when necessary.

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

All non-essential staff and essential staff will follow the same guidelines regarding physical distancing, hand hygiene, masking always. Non-essential personnel will not enter resident rooms or care areas unless necessary.

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

Non-essential personnel will not travel to red zones or in resident rooms with exposure.

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

- Unexposed residents who are physically able to be outdoors and may receive a visit with one visitor at a time for a maximum of 30 minutes once per week.
- If the visitor needs physical assistance/support from another family member to facilitate the visit, or a child under the age of 18 is visiting, an exception will be made for two visitors at one time.
- Residents must be free of any symptoms of COVID-19, not in a 14-day readmission or fever isolation, any signs of illness and not have a temperature as determined during twice per day screening will be permitted visitors.

VISITATION PLAN

39. DESCRIBE HOW SCHEDULING VISITORS WILL OCCUR

Visits will be scheduled and coordinated through the Activities Staff. Facility can set up a safe visiting area outside of the facility in an open courtyard. The Linden Garden Courtyard is accessible without traveling through a resident unit. Visitors will enter the main lobby and will be screened. Visitors with a negative screen will be masked, hand hygiene performed and will be instructed how to drive to the outside courtyard. After screening of the visitor, the screener or receptionist will call down to the resident's unit to notify them that the visitor has screened and the resident shall be transported by the activities staff to the breezeway window hallway. Visitor will be asked at the end of the visit by activity staff to be screened and a temperature taken out in the main lobby area. Both resident and visitor will be masked during the visit.

Visits can be scheduled on:

Mondays-Fridays from 10:00 AM – 4:00 PM
Saturdays and Sundays from 1:00 PM – 4:00 PM

This schedule will be re-evaluated after two weeks to determine if any alteration in the visiting schedule is needed.

All visits must be scheduled through the Activity Department and will Visits that are not schedule will not be accommodated.

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

One table on each courtyard will be set up by environmental services so that resident and visitor have 6 feet of physical distance between them. Activities/social service staff will supervise each visit to ensure physical distancing is maintained and will disinfect the table and door handles after each visit with an EPA-registered disinfectant between visits.

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

- One adult visitor per visit. If an adult visitor requires the physical assistance of another in order to visit, an exception will be made for that visitor to have one person accompany him/her on the visit.
- One child (under the age of 18) may visit if accompanied by an adult. Adult visitor must be able to manage child and children over the age of 2 must where a facemask during the entire visit. Children must also maintain strict physical distancing.
- **No pets**

VISITATION PLAN

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

Residents experiencing a progressing cognitive decline or expressed feelings of loneliness will have priority with visitation. Only unexposed, COVID-19 negative residents will be permitted visitors. Resident requests for who visits will be utilized in planning visitation.

End of life, and compassionate care visits will be permitted as arranged with social service and approved by administration and must be care planned according to DOH guidelines. Guidance can be found on the Department of Health website titled: Guidance on COVID-19 for Skilled Nursing Facilities in Pennsylvania.

STEP 2

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)

Residents will be free of any symptoms of COVID-19, other signs of illness and not have a temperature as determined during twice per day screening will be permitted visitors.

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

The outdoor visitation space is in the Linden Garden under the canopy and a large tree to provide proper shade for both resident and visior. The visitor will be directed on how to drive down to the space by an activities staff member prior to arriving for the appointment time.

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

The resident and visitor will be seated at the opposite ends of a 6-foot table. Resident and visitor will be seated during the visit. Resident and visitor will enter the courtyard and seated at the table at different times to maintain 6 feet physical distancing.

A plexiglass divider will be placed in between resident and visitor.

Only visitors that can be masked during the duration of the visit will be permitted to visit.

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

Visits scheduled for the outdoor green space will take place in the Nurse Aide training room (if available) during severe weather). The conference room will be the alternate visitation space if the training room is occupied.

Visitors will enter the main lobby and will be screened. Visitors with a negative screen will be masked, hand hygiene performed and escorted by a member of the activity staff directly from lobby to the alternate assigned visiting area. Visitor will be escorted at the end of the visit by activity staff from the alternate assigned visiting area directly to the main lobby. Both resident and visitor will be masked during the visit.

VISITATION PLAN

STEP 3

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

Resident and visitor will be seated at a tables(s) with 6 feet of physical distance between them. A member of the activities or social service department will monitor the visit to ensure that physical distancing is maintained.

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)

Residents will be free of any symptoms of COVID-19, other signs of illness and not have a temperature as determined during twice per day screening will be permitted visitors.

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

Yes, outdoor visits will continue to be the preferable visitation setting weather permitting.

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")

Same

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")

Same

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")

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

Visitors will be screened in the main lobby and only permitted to visit with a negative screen. Visitors will perform hand hygiene and will be required to wear a mask. Activities staff (or designee) will escort visitor directly to the resident's room. Whenever feasible, the roommate will be relocated from the room during the visit. Every effort will be made to keep visitor 6 feet from the resident. Visitor will be escorted from the resident's room directly back to the main lobby following the visit. One visitor is allowed for a room visit per week for 30 minutes.

If the visitor needs physical assistance/support from another family member to facilitate the visit, an exception will be made for two visitors at one time.

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

Volunteers will not be utilized during Step 2 or 3.

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

N/A

RESPONSIBILITY FOR PLAN

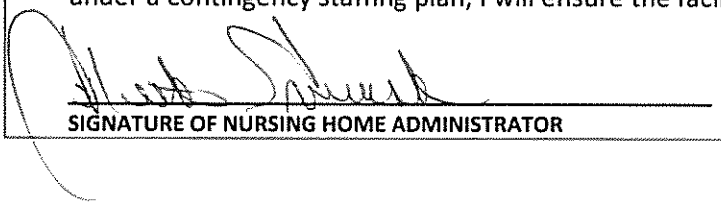
The Nursing Home Administrator (NHA) is responsible for the accuracy of the Implementation Plan and the facility's adherence to it. Upon completion of blocks 1-57, the Implementation Plan should be printed, and the signature and date affixed by the NHA in block 58.

57. NAME OF NURSING HOME ADMINISTRATOR

Celeste Emrick

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

9/23/2020

DATE