

**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 Moravian Manor Communities, Inc.	
2. STREET ADDRESS 300 West Lemon Street	
3. CITY Lititz	4. ZIP CODE 17543
5. NAME OF FACILITY CONTACT PERSON Virginia Boyle, MSW	6. PHONE NUMBER OF CONTACT PERSON 717-626-6112

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 3/13/2021	
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 checked="" type="checkbox"/> Step 2 – as of 9/23/20 <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	

DATE AND STEP OF REOPENING

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

On 10/5/20 the Department of Health conducted an Infection Control Survey. The survey was deficiency free.

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](#) 7/13/2020 to 7/15/2020

July 13, 2020 to July 15, 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

Clarity Lab Contract allows for testing upon request. Facility also has capacity for point of care antigen testing.

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

Clarity Labs will provide supplies and testing for all staff and residents upon request.

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

Clarity Labs provide supplies and facility tester will test the staff. We also use point of care testing for staff. We currently do weekly Universal Testing of residents and staff.

15. DESCRIBE THE PROCEDURE FOR ADDRESSING NEEDED TESTING OF NON-ESSENTIAL STAFF AND VOLUNTEERS Non-Essential Staff are randomly tested or provide testing results from their work.

Non-essential staff will be included in testing once Phase 3 goes into effect.

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

Staff who decline to be tested will be placed on an unpaid absence for 10 days and must self-quarantine during that time. Residents are placed in yellow observation status for 14 days.

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*.

Red Zone (HCS) Unit is our COVID 19 care unit or area for residents who test positive. Alternative Red Zone determination will be made with consultation from the DOH & RRHCP.

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)

Daily PPE inventory is maintained and daily (see attached sample) DOH reporting regarding select PPE is completed. (See attached for PPE 3 month level.) Central Supply orders on a regular basis to maintain PPE par levels. Central PA Regional Coalition is used for emergency PPE requests.

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

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

Please see attached staffing plans for current and reduced staffing.

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

Immediately upon notification of the PA State Red Phase implementation Moravian Manor will close its campus and cease all resident visitation and close the Founder's Campus and Warwick Woodlands campus to visitors/vendors and contractors (emergent only).

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 were part of Universal Testing July 13-15, 2020. Resident vital signs are taken daily (Q4-Q8 hours) if symptoms/criteria met. Residents place in isolation or on precautions, as determined by the Infection Preventionist.

22. STAFF

All staff complete a questionnaire upon arrival to work, temperature is taken and hands are sanitized.

23. HEALTHCARE PERSONNEL WHO ARE NOT STAFF

All non-staff complete a questionnaire or use the automated check-in system and have temperature taken upon arrival.

24. NON-ESSENTIAL PERSONNEL

All approved non-essential personnel complete a questionnaire or use the automated system and have temperature taken upon entry to the building. For Warwick Woodlands contractors they can leave the campus if the visit is less than three hours and no contact with residential living residents.

25. VISITORS

All visitors will complete the questionnaire, have temperature taken and will be observed for signs / symptoms of COVID. Denial of entry for positive screens or positive signs of covid will be enforced.

26. VOLUNTEERS

Volunteers will follow the same processes as non-compassionate care visitors.

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

Communal dining meal schedule will remain as follows: Breakfast 7:00am to 8:30am, Lunch 12noon to 1:30pm and Dinner 5pm to 6:30pm.

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

All residents will be one resident to a square table and one to a round table facing toward the windows. Tables are spaced six feet or more apart.

SCREENING PROTOCOLS

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

All staff wear, masks, eye protection and as appropriate gloves and gowns.

30. DESCRIBE ANY OTHER ASPECTS OF COMMUNAL DINING DURING REOPENING

Second floor dining room will open for communal dining July 13, 2020. There will be only one resident per table seated towards the windows; Tables will be positioned six feet or more apart from each other. Tables will be arranged in a line to minimize any resident cough or sneeze spray experienced during dining.

The unit dining schedule will be one week Health Center South (HCS) residents would be in the dining room during dinner and Health Center North (HCN) residents would be in for lunch. The units would continue to rotate the lunch/dinner schedule every other week.

Breakfast for HCW and HCN would be tray service to resident rooms.

First floor dining room will have priority seating for fall risks and residents needing assistance when eating. The supervisor, in consultation with the charge nurse, will identify those residents. Residents are seated one to a table facing the windows.

During Red Zone times, residents will eat in their rooms if possible.

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)

A variety of group activities will be offered, based on resident preferences and from all disciplines (i.e.-mental, creative, social, spiritual, etc.) in the common areas or outside. Residents are required to wear masks properly, and are social distanced at least six-feet apart. Hand hygiene is offered at each group activity. Five or less resident will be included in Step 1. Single-use items or supplies that can be thoroughly disinfected will be offered when necessary, as part of the program. Games with multiple touching will not be offered (i.e.-balloon volleyball). One-to-one visits are offered to those that cannot or choose not to attend group activities, including chatting, spiritual, pre-packaged special food items and manicures with single-use tools and polish. Single-use materials are offered for self-directed activities (i.e.-word puzzles). Music (via CDs and CD players) is offered and disinfected after use. Movies, religious services, virtual BINGO and documentaries are offered via the in-house channel. During Red Zone times there will be no communal activities.

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

Same as #31 (above) – but with 10 or less residents in group activities.

33. DESCRIBE ACTIVITIES PLANNED FOR STEP 3

Same as #31 (above) – with limits based on number of residents that can safely attend group functions.

34. DESCRIBE OUTINGS PLANNED FOR STEP 3

Outings will include the number of residents that can safely fit on the bus, while adhering to the six-foot social distancing rule, and they will wear masks. Hand hygiene will be offered often. Open air trips will be offered, weather permitting (i.e.-local parks or outdoor dining). Other low-risk options can be evaluated as available.

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 are the contracted health providers (i.e. Nurse Practitioner, Optometrist, Dentist, Pain Doctor, Audiologist, vending machine replentisher and fire safety personnel).

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

Non-Essential Personnel on resident units are escorted by assigned staff. All non-personnel complete the questionnaire, wash hands and have temperature taked going into and out of our building.

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

No contracted personnel are allowed in the red zone, only assigned care givers are allowed in the Red Zone with COVID positive residents. Yellow Zone work is completed last and the contractor leaves the building. An employee escort is present in the Yellow Zone, assuring all contractors/non-essential personnel adhere to PPE requirements.

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

As of 3/13/2021: visitation will start following the 3/10/2021 CMS Revised Nursing Home Visitation – Covid 19 Guidelines:

- Compassionate Care and End-Of-Life visitation will continue/.
- Personal Care and Assisted Living visitation will start in March 13, 2021

39. DESCRIBE HOW SCHEDULING VISITORS WILL OCCUR

Appointments for resident visitation will not be required for visitation as of 3/13/21. Should this change, the visitation schedule would be coordinated by Social Services through the Genius App.

Outdoor visitation is preferred to indoor visitation.

VISITATION PLAN	
<p>40. DESCRIBE HOW VISITATION AREA(S) WILL BE SANITIZED BETWEEN EACH VISIT</p> <p>Outside high-touch areas and flat surfaces will be wiped down between visits by assigned team members. Indoor high-touch general housekeeping will occur as routinely scheduled, per Covid cleaning procedures.</p>	
<p>41. WHAT IS THE ALLOWABLE NUMBER OF VISITORS PER RESIDENT BASED ON THE CAPABILITY TO MAINTAIN SOCIAL DISTANCING AND INFECTION CONTROL?</p> <ul style="list-style-type: none"> • Outside visits permit three visitors, with social distancing required. • Indoor visits strongly encourage for private rooms limit two visitors, with social distancing required. • Indoor visits for semi-private rooms strongly encourage two visitors per resident, with social distancing required. If one resident and their visitors can easily relocate to a common lobby or outdoor space, this is recommended. 	
<p>42. DESCRIBE THE ORDER IN WHICH SCHEDULED VISITS WILL BE PRIORITIZED</p> <p>All in-house visits and outside visits follow CMS/DOH guidelines and Moravian Manor Communities guidelines for safe visitation. As of 3/13/2021, there are no scheduled visits, just general visitation. With restrictions of one visitor for semi-private rooms and two visitors for private rooms, for indoor visits. Outdoor visits may include three visitors.</p>	
STEP 2	<p>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)</p> <p>If medically indicated, the charge nurse will determine the physical status of the resident prior to the resident going outside or with a visitor.</p>
	<p>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</p> <p>Main entrances are covered and the pavilion space is available for 1 family of 4, including the resident. (Outside visits during severe weather not permitted. Outside visits will cease November 1st until warmer weather.)</p>
	<p>45. DESCRIBE HOW A CLEARLY DEFINED SIX-FOOT DISTANCE WILL BE MAINTAINED BETWEEN THE RESIDENT AND THE VISITOR(S) DURING OUTDOOR VISITS</p> <p>Security, assigned volunteers, and assigned staff conducting quality control checks will monitor visitation areas, providing redirection when applicable.</p>
	<p>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</p> <p>If visitors are uncomfortable with in-room resident visits, the following visitation areas can be used (but arrangements must go through Social Services):</p> <ul style="list-style-type: none"> • The Moravian Manor Outpatient Gym will accommodate in-house Assisting Living visits. The Moravian Manor former IT Office will accommodate Herrnhut visits. • HHPC, HCN and HCW will accommodate in-house visits in the indoor visitation room.
	<p>47. DESCRIBE HOW A CLEARLY DEFINED SIX-FOOT DISTANCE WILL BE MAINTAINED BETWEEN THE RESIDENT AND THE VISITOR(S) DURING INDOOR VISITS</p> <p>Space will be marked for resident and visitor. The rooms are divided with separate air source for enhanced safety.</p>
5	<p>48. DESCRIBE HOW THE FACILITY WILL DETERMINE THOSE RESIDENTS WHO CAN SAFELY ACCEPT VISITORS AT STEP</p>

VISITATION PLAN	
	<p>3 (CONSIDERING SUCH SAFETY FACTORS AS TRANSPORTING RESIDENT TO VISITOR LOCATION)</p> <p>The charge nurse will determine the physical status of the resident.</p>
	<p>49. WILL OUTDOOR VISITATION BE UTILIZED AT STEP 3? IF NO, SKIP TO QUESTION #52</p> <p>Yes, same as above. Weather advisories will be taken into consideration.</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>Main entrance and south entrance are covered spaces. Pavilion is also covered, and can accommodate one family of four (including resident). No outside visits are permitted during severe weather.</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>Security, assigned volunteers and quality control staff will round and remind, using the "see something, say something" model.</p> <p>Spaces will be marked in the pavillon and outside areas for suggested distancing.</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>In-room visitation will be available. If visitors are not comfortable, the following areas are available (but space must be scheduled through Social Services):</p> <ul style="list-style-type: none"> • The south entrance will provide access to visitation in the old IT office. (The resident will be brought to the visitation area separately.) • For downstairs visitation, the visitors will enter through the back of the building, parking in the Manor Green area and walking to the ground level (former childcare area). Signage will be posted. (The resident will be brought to the visitation area separately.)
	<p>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")</p> <p>In accordance with the CMS visitation guidelines released 3/10/2021, visitors will be permitted to embrace and otherwise touch residents who have had their vaccination, so long as resident is wearing mask and hand hygiene is performed before and after. Further, residents receiving compassionate care may be touched/ embraced according to their desire and preference. Additionally, privacy will be provided in resident rooms to the extent possible during visitation. Visitors will receive printed materials outlining expectations at the time of screening in. Visitors visiting in resident rooms will need to estimate 6 foot distancing, particularly as it involves room mates and staff, as well as non-vaccinated residents. Clinically staff will enforce expectations in accordance with the regulations.</p>
	<p>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</p> <p>All visitors will complete the questionnaire upon entering the facility, have temp taken and sanitize hands. PPE (mask & face shield) must be worn at all times. <u>Non-compliance is taken seriously with one education warning – then, at the second violation, revocation of visitation priveleges.</u> Wash hands upon entering the residents room and exiting the room.</p>

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 be used during the Pandemic. They are educated on PPE use, are vaccinated, and participate in weekly Covid-19 testing.

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

Volunteers will be assisting with directions to resident rooms, observing PPE compliance during visits, cleaning of high-touch areas after visits, greeting visitors and pointing out educational materials for visitor review, reporting to appropriate administrative authorities any issues of non-compliance, and transporting residents to outside visit locations.

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

Dr. C. Lynn Ruppertsberger-Swisher, NHA

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.

Dr. C. Lynn Ruppertsberger-Swisher, NHA

March 12, 2021

SIGNATURE OF NURSING HOME ADMINISTRATOR

DATE