

# TanaBell Health Services COVID-19 Reopening Plan

## Goal

We remain ever diligent in maintaining the safety and health of our residents and health care providers to reduce the risk of spreading COVID-19. This plan was developed with the consideration of current facility and community status of COVID-19, CMS guidance, and CDC recommendations.

## Phase 1-

1. Criteria for Implementation-
  - a. The community is experiencing a decline and/or stabilization in the number of new cases, hospitalizations, or deaths, and no new community outbreaks.
  - b. There have been no new or rebound in COVID-19 cases within the nursing home facility for 14 days.
  - c. The facility has adequate supplies of personal protective equipment and essential cleaning and disinfecting supplies to care for residents.
  - d. The facility is not experiencing any staff shortages.
  - e. The surrounding community and hospitals have adequate bed capacity in intensive care units.
  - f. The facility has carefully reviewed any state or local health official orders, recommendations, or changes received from CDC or CMS, and implementation does not conflict with any orders or recommendations.
  - g. The facility has adequate access to testing for COVID-19 to meet Priority Group 1 Testing Protocol
2. General Visitation and Facility Entry
  - a. The facility HCP will continue to have entry, in addition to, critical care workers, and facility Medical Director.
  - b. Volunteers and noncritical vendors are restricted from entry.
  - c. Visitation for family and friends will continue to be restricted, except for authorized compassionate care situations. During these authorized compassionate care situations, no more than 5 individuals per patient will be allowed in the facility at any given time.
3. Screening
  - a. All individuals permitted entry will be screened according to COVID-19 CDC guidelines prior to entry to resident care areas. Temperature Screens and questionnaire will be done daily for HCP and symptom screening 2 x day for residents, including temp >100 or subjective fever and symptoms suggestive of COVID-19.
  - b. Any HCP or individual who triggers one of the listed areas will be restricted access.
  - c. Any individual non-compliant with any of the screening protocols will be denied entry into the patient care areas.
4. Universal Source Control during Phase 1
  - a. Screening per above-mentioned protocol will occur for everyone who enters facility.
  - b. Individuals, including residents/patients, should continue to engage in social distancing of at least six feet.
  - c. All HCP will practice good hand hygiene at all times.
  - d. HCP will assist residents/patients in practicing good hand hygiene at all times.
  - e. All visitors who are non-HCP will be instructed and must perform proper hand hygiene.
  - f. All HCP and visitors will wear face coverings in facility at all times.
  - g. HCP will wear required PPE where appropriate.
  - h. Authorized compassionate care situation visitors will wear full PPE (mask, gown, gloves).
  - i. Staff will disinfect surfaces and objects regularly.
  - j. Testing of symptomatic staff, residents, and all new admits (prior admit or upon admission)
  - k. Symptom screening 2 x day on all residents pertaining to signs and symptoms of COVID-19
  - l. All residents are care planned for COVID-19 monitoring and 2x daily screenings
  - m. Communal Dining will be allowed for to residents/patients who are either asymptomatic or negative test and are no longer on 14-day quarantine. Social distancing spacing will be maintained for residents/patients who participate in communal dining.

- i. Residents/patients will adhere to the above-mentioned protocols for hand hygiene and social distancing.
- n. Activities will be limited to groups of 10 or less and will be limited to residents/patients who are either asymptomatic or negative test and are no longer on 14-day quarantine.
  - i. Residents will adhere to the above-mentioned prevention protocols including hand hygiene and 6 feet of social distancing.
  - ii. Residents participating in group activities will be encouraged to wear a face covering if they have no breathing difficulties and if they can remove the mask themselves.
  - iii. If at any time COVID-19 infection is suspected during Phase 1 among group participants, group activities will be ceased until infection is confirmed negative.
- o. Medically necessary trips outside of the facility will be avoided if circumstances permit.
  - i. If appointments are deemed necessary, then residents will adhere to the above-mentioned prevention measures during trip outside the facility.
  - ii. Any resident or patient with breathing difficulties or who is unable to remove their mask without assistance will not be required to wear a mask during out of facility trips.
  - iii. Staff accompanying patients on medically necessary trips will carry hand sanitizer that will be utilized by staff and patient throughout the trip as needed.
  - iv. A facility letter will be sent to all potential health care providers, asking compliance from the providers to alert the facility if any known Covid-19 patients have been at their location in the last 14 day.
  - v. If a health care provider alerts the facility of any known cases within their building, measures will be taken to attempt to change providers or reschedule appointment if possible.
  - vi. Upon return to the facility, HCP will assist the resident/patient in performing proper hand hygiene and will educate the patient about reporting any new signs or symptoms consistent with CDC COVID-19 guidelines.
  - vii. The facility transport personnel will thoroughly disinfect high touch surfaces in the transport vehicle following each resident transport.
  - viii. If a resident/patient leaves the facility for any reason against medical advice or in conflict with protocols, fellow residents/patients will be protected upon resident' return by testing the resident. Additionally, quarantine measures will be taken until receipt of results.

## Phase 2

1. Criteria for Implementation-
  - a. The community is experiencing a decline and/or stabilization in the number of new cases, hospitalizations, or deaths, and no new community outbreaks.
  - b. There have been no new or rebound in COVID-19 cases within the nursing home facility during Phase 1.
  - c. The facility has adequate supplies of personal protective equipment and essential cleaning and disinfecting supplies to care for residents.
  - d. The facility is not experiencing any staff shortages.
  - e. The surrounding community and hospitals have adequate bed capacity in intensive care units.
  - f. The facility has carefully reviewed any state or local health official orders, recommendations, or changes received from CDC or CMS, and implementation does not conflict with any orders or recommendations.
  - g. The facility has adequate access to testing for COVID-19 to meet Priority Group 1 Testing Protocol

## 2. General Visitation and Facility Entry

- a. The facility HCP will continue to have entry, in addition to, critical care workers, and facility Medical Director.
- b. Facility-contracted Cosmetologist and non-critical vendors limited scheduled entry. These individuals will call at least 24 hours in advance to the administrator and schedule an appointment. Visitation for family and friends will be limited to **designated outdoor** areas and scheduled between hours of 9am – 12pm and 4pm - 7pm except for authorized compassionate care situations. All visits must be scheduled with Administrator (Jordan), Marketing Director (Jess), Facility Nurse (Cambria), Resident Care Director (Annie), or Activities Director (Chelsey) during Business Hours (Monday – Friday 9am-5pm).
  - i. Social distancing must continue during visits and masks must be worn by visitors.
  - ii. If resident/patient does not have breathing issues and can remove the mask without assistance, the resident/patient will also wear a face covering.
  - iii. Please limit the number of visitors to maintain social distancing. Facility can limit number of visitors at a time per resident if needed.
  - iv. Only one resident/resident couple/patient with visitors in the designated outdoor visit area at a time.
  - v. Visitor must be screened, must wear facemask, and sanitize hands with provided sanitizer. Due to limited availability of PPE, families must provide own face mask during visits.

## 3. Screening

- a. All individuals permitted entry will be screened according to COVID-19 CDC guidelines prior to entry to resident care areas. Temperature Screens and questionnaire will be done daily for HCP and symptom screening 2 x day for residents, including temp >100 or subjective fever and symptoms suggestive of COVID-19.
- b. Any HCP or individual who triggers one of the listed areas will be restricted access.
- c. Any individual non-compliant with any of the screening protocols will be denied entry into the patient care areas.
- d. Guests visiting the outdoor visitation area will also be subject to screening process and protocol.

## 4. Universal Source Control

- a. Screening per above-mentioned protocol will occur for everyone who enters facility.
- b. Individuals, including residents/patients, should continue to engage in social distancing of at least six feet.
- c. All HCP will practice good hand hygiene at all times.
- d. HCP will assist residents/patients in practicing good hand hygiene at all times.
- e. All visitors who are non-HCP will be instructed and must perform proper hand hygiene.
- f. All HCP and visitors will wear face coverings in facility or in designated visitation area at all times.
- g. HCP will wear required PPE where appropriate.
- h. Authorized compassionate care situation visitors will wear full PPE (mask, gown, gloves).
- i. Staff will disinfect surfaces and objects regularly.
- j. Testing of symptomatic staff, residents, and all new admits (prior admit or upon admission)
- k. Symptom screening 2 x day on all residents pertaining to signs and symptoms of COVID-19
- l. All residents are care planned for COVID-19 monitoring and 2x daily screenings
- m. Communal Dining is allowed with residents/patients who are either asymptomatic or negative test and are no longer on 14-day quarantine. All residents during communal dining will maintain social distancing spacing.
  - i. Residents/patients will adhere to the above-mentioned protocols for hand hygiene and social distancing.

- n. Activities will be held with groups where 6 feet of social distancing can be maintained within the space. and will be limited to residents/patients who are either asymptomatic or negative test and are no longer on 14-day quarantine.
  - i. Residents will adhere to the above-mentioned prevention protocols.
  - ii. Residents participating in group activities will be encouraged to wear a face covering if they have no breathing troubles and if they can remove it themselves.
  - iii. If at any time COVID-19 infection is suspected during Phase 2 among group participants, group activities will be immediately ceased until infection is confirmed negative.
- o. Medically necessary trips outside of the facility will be avoided if circumstances permit.
  - i. If appointments are deemed necessary, then residents will adhere to the above-mentioned prevention measures during trip outside the facility.
  - ii. Any resident or patient with breathing difficulties or who is unable to remove their mask without assistance will not be required to wear a mask during out of facility trips.
  - iii. Staff accompanying patients on medically necessary trips will carry hand sanitizer that will be utilized by staff and patient throughout the trip as needed.
  - iv. A facility letter will be sent to all potential health care providers, asking compliance from the providers to alert the facility if any known Covid-19 patients have been at their location in the last 14 day.
  - v. If a health care provider alerts the facility of any known cases within their building, measures will be taken to attempt to change providers or reschedule appointment if possible.
  - vi. Upon return to the facility, HCP will assist the resident/patient in performing proper hand hygiene and will educate the patient about reporting any new signs or symptoms consistent with CDC COVID-19 guidelines.
  - vii. The facility transport personnel will thoroughly disinfect high touch surfaces in the transport vehicle following each resident transport.
  - viii. If a resident/patient leaves the facility for any reason against medical advice or in conflict with protocols, fellow residents/patients will be protected upon resident' return by testing the resident. Additionally, quarantine measures will be taken until receipt of results.
- p. Any resident with COVID-19 or develops symptoms will be managed as outlined in the facility's COVID-19 Policy and Procedure Plan.
- q. Should there be a confirmed resident or HCP COVID-19 transmission, the facility will revert to the highest level of mitigation (Phase 1) and follow the facility's policy and procedure plan for outbreak.

### **Phase 3 -**

- 1. Criteria for Implementation-
  - a. The community is experiencing a decline and/or stabilization in the number of new cases, hospitalizations, or deaths, and no new community outbreaks.
  - b. There have been no new or rebound in COVID-19 cases within the nursing home facility for 14 days or during Phase 2.
  - c. The facility has adequate supplies of personal protective equipment and essential cleaning and disinfecting supplies to care for residents.
  - d. The facility is not experiencing any staff shortages.

- e. The surrounding community and hospitals have adequate bed capacity in intensive care units.
  - f. The facility has carefully reviewed any state or local health official orders, recommendations, or changes received from CDC or CMS, and implementation does not conflict with any orders or recommendations.
  - g. The facility has adequate access to testing for COVID-19 to meet Priority Group 1 Testing Protocol
2. General Visitation and Facility Entry
- a. The facility HCP will continue to have entry, in addition to, critical care workers, and facility Medical Director.
  - b. Facility-contracted Cosmetologist and non-critical vendors limited scheduled entry. These individuals will call at least 24 hours in advance to the administrator and schedule an appointment.
  - c. Visitation for family and friends may occur in rooms and will be limited to two visitors. Scheduling visit ahead of time will not be required during this phase.
    - i. Staff will assist visitors in carrying out proper handwashing as per CDC guidelines upon arrival for visit.
    - ii. Social distancing must continue during visits and masks must be worn.
    - iii. Two visitors at a time per resident.
    - iv. Compassionate care situation visitors will be allowed to have up to 2 people in the room at a time.
    - ix. Visitor must be screened, must wear masks, and sanitize. Due to limited availability of PPE, families must provide own face mask during visits.
3. Screening
- a. All individuals permitted entry will be screened according to COVID-19 CDC guidelines prior to entry to resident care areas. Temperature Screens and questionnaire will be done daily for HCP and symptom screening 2 x day for residents, including temp >100 or subjective fever and symptoms suggestive of COVID-19.
  - b. Any HCP or individual who triggers one of the listed areas will be restricted access.
  - c. Any individual non-compliant with any of the screening protocols will be denied entry into the patient care areas.
4. Universal Source Control
- a. Screening per above-mentioned protocol will occur for everyone who enters facility.
  - b. Individuals, including residents/patients, should continue to engage in social distancing of at least six feet.
  - c. All HCP will practice good hand hygiene at all times.
  - d. HCP will assist residents/patients in practicing good hand hygiene at all times.
  - e. All visitors who are non-HCP will be instructed and must perform proper hand hygiene.
  - f. All HCP and visitors will wear face coverings in facility at all times.
  - g. HCP will wear required PPE where appropriate.
  - h. Compassionate care situation visitors will be allowed to have up to 5 persons in the room at a time.
  - i. Staff will disinfect surfaces and objects regularly.
  - j. Testing of symptomatic staff, residents, and all new admits (prior admit or upon admission)
  - k. Symptom screening 2 x day on all residents pertaining to signs and symptoms of COVID-19
  - l. All residents are care planned for COVID-19 monitoring and 2x daily screenings
  - m. Communal Dining is allowed with residents/patients who are either asymptomatic or negative test and are no longer on 14-day quarantine. All residents during communal dining will maintain social distancing spacing.

- i. Residents/patients will adhere to the above-mentioned protocols for hand hygiene and social distancing.
- n. Activities will be held with groups where 6 feet of social distancing can be maintained within the space. and will be limited to residents/patients who are either asymptomatic or negative test and are no longer on 14-day quarantine.
  - i. Residents will adhere to the above-mentioned prevention protocols.
  - ii. Residents participating in group activities will be encouraged to wear a face covering if they have no breathing troubles and if they can remove it themselves.
  - iii. If at any time COVID-19 infection is suspected during Phase 2 among group participants, group activities will be immediately ceased until infection is confirmed negative.
- o. Medically necessary trips outside of the facility will be avoided if circumstances permit.
  - i. If appointments are deemed necessary, then residents will adhere to the above-mentioned prevention measures during trip outside the facility, as well as will wear full PPE during duration of trip.
  - ii. Any resident or patient with breathing difficulties or who is unable to remove their mask without assistance will not be required to wear a mask during out of facility trips.
  - iii. Staff accompanying patients on medically necessary trips will carry hand sanitizer that will be utilized by staff and patient throughout the trip as needed.
  - iv. A facility letter will be sent to all potential health care providers, asking compliance from the providers to alert the facility if any known Covid-19 patients have been at their location in the last 14 day.
  - v. If a health care provider alerts the facility of any known cases within their building, measures will be taken to attempt to change providers or reschedule appointment if possible.
  - vi. Upon return to the facility, HCP will assist the resident/patient in performing proper hand hygiene and will educate the patient about reporting any new signs or symptoms consistent with CDC COVID-19 guidelines.
  - vii. The facility transport personnel will thoroughly disinfect high touch surfaces in the transport vehicle following each resident transport.
  - viii. If a resident/patient leaves the facility for any reason against medical advice or in conflict with protocols, fellow residents/patients will be protected upon resident' return by testing the resident. Additionally, quarantine measures will be taken until receipt of results.
- p. Any resident with COVID-19 or develops symptoms will be managed as outlined in the facility's COVID-19 Policy and Procedure Plan.
- q. Should there be a confirmed resident or HCP COVID-19 transmission, the facility will revert to the highest level of mitigation (Phase 1) and follow the facility's policy and procedure plan for outbreak.

#### **Phase 4 - Final Re-Open:**

- 1. Criteria for Implementation-
  - a. The community is experiencing a decline and/or stabilization in the number of new cases, hospitalizations, or deaths, and no new community outbreaks.

- b. There have been no new or rebound in COVID-19 cases within the nursing home facility for 14 days or during Phase 3.
  - c. The facility has adequate supplies of personal protective equipment and essential cleaning and disinfecting supplies to care for residents.
  - d. The facility is not experiencing any staff shortages.
  - e. The surrounding community and hospitals have adequate bed capacity in intensive care units.
  - f. The facility has carefully reviewed any state or local health official orders, recommendations, or changes received from CDC or CMS, and implementation does not conflict with any orders or recommendations.
  - g. The facility has adequate access to testing for COVID-19 to meet Priority Group 1 Testing Protocol
2. General Visitation and Facility Entry
- a. No restrictions at this time. All individuals who are willing to comply with continued screening and Universal source Control guidelines will be allowed in the facility.
3. Screening
- a. All individuals will be screened according to COVID-19 CDC guidelines prior to entry to resident care areas. Temperature Screens and questionnaire will be done daily for HCP and symptom screening 2 x day for residents, including temp >100 or subjective fever and symptoms suggestive of COVID-19.
  - b. Any HCP or individual who triggers one of the listed areas will be restricted access.
  - c. Any individual non-compliant with any of the screening protocols will be denied entry into the patient care areas.
4. Universal Source Control
- a. Screening per above-mentioned protocol will occur for everyone who enters facility.
  - b. Individuals no longer are required to maintain 6 feet of social distancing.
  - c. All HCP will practice good hand hygiene at all times.
  - d. HCP will assist residents/patients in practicing good hand hygiene at all times.
  - e. All visitors who are non-HCP will be instructed and must perform proper hand hygiene.
  - f. All HCP and visitors are not required to wear face coverings unless it is warranted/required due to a specific patient diagnosis or situation.
  - g. HCP will wear required PPE where appropriate.
  - h. Staff will disinfect surfaces and objects regularly.
  - i. Testing of symptomatic staff and residents. However, all new admits (prior admit or upon admission) will not be tested.
  - j. Symptom screening 2 x day on all residents pertaining to signs and symptoms of COVID-19
  - k. All residents are care planned for COVID-19 monitoring and 2x daily screenings
  - l. Communal Dining is allowed with residents/patients who are either asymptomatic or negative test and are no longer on 14-day quarantine. All residents during communal dining no longer need to maintain social distancing; multiple residents at each table will be allowed.
    - i. Residents/patients will adhere to the above-mentioned protocols for hand hygiene prior to and following meals.
  - m. Activities will be held with groups as appropriate and social distancing no longer needs to be maintained within the space. Activities will be limited to residents/patients who are either asymptomatic or negative test and are no longer on 14-day quarantine.
    - i. Residents will adhere to the above-mentioned prevention protocols with handwashing.
    - ii. Residents participating in group activities will not be required to wear a face covering.

- iii. If at any time COVID-19 infection is suspected during Phase 4 among group participants, group activities will be immediately ceased until infection is confirmed negative.
- n. Medically necessary and other scheduled appointments/trips outside of the facility will resume as normal.
  - i. During trips outside the facility, residents will adhere to the above-mentioned prevention measures during trip outside the facility including using hand sanitizer and mask if possible.
  - ii. Any resident or patient with breathing difficulties or who is unable to remove their mask without assistance will not be required to wear a mask during out of facility trips.
  - iii. Staff accompanying patients on appointments/trips will carry hand sanitizer that will be utilized by staff and patient throughout the trip as needed.
  - iv. A facility letter will be sent to all potential health care providers, asking compliance from the providers to alert the facility if any known Covid-19 patients have been at their location in the last 14 day.
  - v. If a health care provider alerts the facility of any known cases within their building, measures will be taken to attempt to change providers or reschedule appointment if possible.
  - vi. Upon return to the facility, HCP will assist the resident/patient in performing proper hand hygiene and will educate the patient about reporting any new signs or symptoms consistent with CDC COVID-19 guidelines.
  - vii. The facility transport personnel will thoroughly disinfect high touch surfaces in the transport vehicle following each resident transport.
- p. Any resident with COVID-19 or develops symptoms will be managed as outlined in the facility's COVID-19 Policy and Procedure Plan.
- q. Should there be a confirmed resident or HCP COVID-19 transmission, the facility will revert to the highest level of mitigation (Phase 1) and follow the facility's policy and procedure plan for outbreak.