

## Hallsworth House Personal Care Home

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\*Changes are indicated in red

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### COVID Policies as it related to Hallsworth House Personal Care Home

#### 1. Testing Plan

- a) Hallsworth House Personal Care Home has contracted with Med Health Services to provide baseline COVID-19 testing to all residents and team members. Testing will be performed for all team members and residents at a frequency that is determined by Westmoreland County's percent positivity rate. The positivity percent rate will be observed on the first and third Monday of each month by a member of the administration.
  - i. If the level of community transmission is low, which would be indicated by <5% county positivity rate, testing will be performed on all team members every 4-6 weeks. Should the positivity increase to "moderate" or "substantial", testing should begin at the corresponding frequency without delay.
  - ii. If the level of community transmission is moderate, which would be indicated by a 5-10% county positivity rate, testing of staff will occur every 30 days and weekly testing of residents that have had outside contact in the last 14 days. If community transmission lessens to "low", this must be sustained for two weeks prior to moving to recommendations for a "low" testing frequency.
  - iii. If the level of community transmission is substantial, which would be indicated by a >10% county positivity rate, testing of staff will occur once weekly. Also, weekly testing of all residents that have had outside contact in the past 14 days will be performed. If community transmission lessens to "low" or "moderate", this must be sustained for two weeks prior to moving to recommendations for a "low" or "moderate" testing frequency.
  - iv. Hallsworth House Personal Care Home may choose to increase the frequency of staff and residents with outside contact to test up to weekly without meeting the above criteria dependent on other factors such as outbreaks in long-term care

facilities within close local proximity, local school closures due to outbreaks, or local municipal business closures due to outbreaks.

- b) Any resident that is admitted to Hallsworth House Personal Care Home will receive a baseline COVID-19 test upon admission and be isolated to their bedrooms until results are obtained. New residents must wear a mask for 14 days from their arrival date to the facility, even after negative test results are received.
- c) Residents readmitted from hospitalization or skilled facility where they resided for >24 hours, will be retested and isolated to their bedroom until results are obtained. Residents returning must wear a mask for 14 days from their return to the facility, even after the negative test results are received.
- d) All residents that reside in Hallsworth House Personal Care Home will be tested within 24 hours when symptoms of COVID-19 are present. Extra testing kits have been made available by MHS labs, and courier services are available to transport specimens as they are needed.
- e) If Hallsworth House Personal Care Home experiences an incidence of COVID-19 infection, MHS lab will provide additional universal testing of all residents and team members, including asymptomatic team members and residents; then weekly serial testing thereafter until no positive tests result for 14 days from a most recent positive result.
- f) All new hires will be required to obtain a negative COVID-19 test result before training can be scheduled. During the interview process, candidates must be screened and adhere to social distancing like those policies as they relate to visitation. COVID-19 testing can be dated up to 7 days in advance of the hire date, and negative results must be on file before scheduling training that would permit access to common areas of the building.
- g) Residents attending outings that are considered high risk will be tested 2-3 days from when the resident attended the outing.
- h) Residents have the right to decline the testing. If a resident declines testing, the resident must be isolated to a bedroom for fourteen days from the date the policy indicates testing should occur.
- i) Due to the danger the COVID-19 presents and the nature of the work that is performed at Hallsworth House Personal Care Home, it is necessary to require that all staff be tested for COVID-19 per testing recommendations by PA DOH. Team members that refuse COVID-19 testing will not be permitted to perform job duties on site. If a particular testing route is deemed medically inadvisable (such as a nasopharyngeal swab), an alternative route will be sought (such as an anterior nares sample).
- j) All nonessential staff and volunteers are required to receive testing at the frequency of testing required of direct care staff employed by Hallsworth House Personal Care Home. If a particular testing route is deemed medically inadvisable (such as a nasopharyngeal swab), an alternative route will be sought (such as an anterior nares sample). Should a volunteer or nonessential staff member refuse testing, they can continue to present to

Hallsworth House, but only in the capacity as a visitor and follow visitation guidelines that involve strict social distancing.

- k) All essential personnel that is contracted to provide care inside the facility more than three times per week will be required to obtain a COVID-19 test at the frequency of testing required of direct care staff employed by Hallsworth House. Should an essential provider refuse to test, they can still present to Hallsworth House. But they must follow visitation guidelines by appointment and will not have access to residents without strict social distancing.

## 2. Team member infection policy

- a) The Facility will refer to 2020-PAHAN-516-07-18- UPD regarding return to work criteria based on suspected or confirmed COVID infection.
- b) A team member is not permitted to report to work should COVID-19 symptoms or fever develop.
- c) If a team member develops a fever or signs and symptoms of COVID-19 during
- d) their shift, they will report this to their supervisor immediately and leave the facility
- e) A team member that has had exposure to a confirmed case of COVID-19 in the community must report this to their supervisor immediately and await further instruction before entering the facility.

## 3. Plan to isolate or cohort Residents diagnosed with COVID-19

- a) Upon the incidence of COVID-19 at Hallsworth House Personal Care Home, bedrooms and/or hallways will be designated as RED, YELLOW, or GREEN areas. Once universal testing is performed, and a negative result is received for each resident and employee, each bedroom and hallway would be considered a green zone. If COVID is suspected, the affected resident's bedroom will be designated as YELLOW (potentially exposed). Upon COVID+ lab result, the affected resident's bedroom is designated RED and the rest of the hallway or any resident's that the infected resident came into contact with will be considered "potentially exposed" areas or yellow zones until weekly serial testing is performed from 14 days from the most recent positive. A hallway will be considered green if no COVID is suspected or all residents could not have been exposed. A hallway would only be labeled a red zone should all residents in a hallway have a positive COVID test result.
- b) During an incidence of COVID infection(s), we will isolate all residents to their bedroom with the door closed. Bedside toileting will be provided to all residents without a bathroom in areas designated as yellow or red. Any essentials such as meals, care needs, etc. will be provided to the bedroom.
- c) All team members have been trained in "Donning/Doffing" PPE. Full PPE will be required before entry to a bedroom of a COVID+ resident (red) or COVID potentially exposed (yellow). A "donning" and a "Doffing" station will be designated in each hallway of a red or yellow zone. Any resident that resides in a semi-private room in a red or yellow hallway, when possible, will be asked to move into an empty unoccupied single bedroom.

## 4. Plan to actively screen visitors, employees, and residents

- a) All visitors, volunteers, non-essential personnel, and essential personnel will be screened for fever prior to entry to the building. Using hand hygiene, signing in, and answering basic screening questions upon arrival is required. A mask is required for all team members, visitors, non-essential personnel, and essential personnel when an outbreak of COVID is not suspected. When an outbreak of COVID is confirmed, visitation will be restricted, and PPE protocols will be in effect.
- b) All residents will be screened for signs and symptoms of COVID-19 daily. Temperature checks and symptoms screening is documented and kept for facility record.

4b. Plan to maintain PPE supply and train direct care staff on the use

- a) Knowledge and education regarding how to don and Doff PPE in full (N-95 mask, gloves, gown, and eye shield) per CDC guidance is a requirement of employment at Hallsworth House Personal Care Home. Receiving education via instructional videos and demonstrating competency is required before the training period is completed.
- b) A current and adequate supply of PPE is in place. Should the incidence of COVID-19 develop, whereas increased PPE needs are required, the facility grounds director will do a weekly inventory and order from existing suppliers contracted with the facility. Our facility is also in contact with Michele Whiting Zona with the Westmoreland County Department of Safety for any critical supply needs should we develop a need based on the supply chain shortage.

5. Plan to maintain adequate staffing

- a) Should the facility develop an outbreak of COVID-19, staffing shortages are expected. Hallsworth House exceeds staffing levels based on the Department of Health requirements. Should staffing contingencies be in place, Hallsworth House may reduce staff hours to *meet* Department of Health requirements, as an alternative to exceeding the hours. Hallsworth House is also contracted with Dedicated Nursing Associates, a Pittsburgh staffing agency that will be contracted as needed to support staffing needs should they develop.
- b) During a COVID-19 outbreak in the facility, team members with asymptomatic COVID-19 infection may continue to present for job duties, but only in the event of a staffing contingency. Those team members would only be permitted to perform duties for those residents confirmed to be COVID+.

6. Dining Services

- a) Communal Dining is limited to residents unexposed to COVID-19. Residents may eat in the same room with social distancing in place.
- b) If a resident is coughing during mealtimes due to dysphagia, eye shields and gowns will be utilized for the staff members assisting those residents. If a team member is assisting more than one resident, the staff member will perform hand hygiene each time the staff member switches between residents.

7a. During periods where visitation is permitted, such as no active or suspected COVID cases:

- a) Visitation must only be in areas designated as neutral. Visitation is limited to one hour of scheduled intervals. Appointments must be made 24 hours in advance. There are three

designated neutral zones indoors when the weather is not suitable for outside visitation, or when the weather is otherwise inclement. One indoor and two outside neutral zones are scheduled when the weather outside is suitable for visitors.

- b) For the outdoor neutral zone on the deck, outdoor umbrellas will be provided. All visitors will be screened at the very front entrance. Those with mobility needs can request a team member to meet the visitor at the back door. Visitors scheduled on the back deck are encouraged to stop in the front entrance to check-in and screen and drive to the back for convenience purposes. Each outdoor zone can accommodate up to six visitors. Assigned team members will anticipate your arrival. However, call in advance if you will be late, or if you are here, but a staff member has not yet greeted you.
- c) For indoor neutral zones, designated staff members will screen visitors at the very front entrance, and four visitors will be permitted. Assigned team members will anticipate your arrival but call in advance if you will be late or if you are here, but a team member has not yet greeted you.
- d) Before and after visitation for both outdoor and indoor visitation, areas will be wiped down with an EPA-registered disinfectant. Social distancing must be maintained. Visitors must comply with a face mask for the entire visit and wear it properly. If a visitor does not pass screening, we are required to refuse visitation. Visitors must perform hand hygiene before and after the visit, sign in, and stay in neutral areas designated for visitation. Visitation is not permitted during mealtimes. Children are permitted when accompanied by an adult visitor. Adult visitors must be able to manage children, and children older than 2 years old must wear a facemask during the entire visit. Children must also maintain strict social distancing.

#### 7b. Plan to allow for special visitation circumstances

- a) Compassionate Caregivers will be considered if there is a documented “significant change” in the resident’s condition, an “end of life situation, bereavement due to the loss of a loved one, or emotional support for a resident who has just moved to a licensed setting and is adjusting to their new surroundings
- b) The need for Compassionate Caregivers will be documented in the Resident’s Support plan and circumstances for the Compassionate caregiving to continue.
- c) Compassionate Caregivers will be required to obtain COVID-19 testing at a frequency required of direct care staff. An initial test will be required before admission to the facility. A predated test will be accepted if the date is within seven days of the initial visitation period.
- d) No more than two hours per day are allotted, and only one compassionate caregiver is permitted at one time.
- e) Social distancing from the resident is strongly preferred but not required if distancing would not achieve the intended health outcomes of the visit.
- f) Compassionate caregivers that refuse COVID-19 testing will not be permitted compassionate caregiving duties but otherwise will need to continue visitation as allotted in neutral zones by appointment.

g) A log of all visitor sign-in is documented and kept on file. Additional contact information such as email, phone, and addresses are on file with each resident in the event contact tracing is required.

#### 8. Plan to halt the reopening process

- a) If Westmoreland County reverts to the Red Phase of the Governor's reopening plan or in the event of Hallsworth House +COVID cases, all visitation will cease except medically necessary services such as hospice care and home health nursing.
- b) Telehealth will be encouraged when applicable
- c) Outings from the facility will only be permitted in the event of medically necessary medical treatments/appointments
- d) Compassionate care visits will be allotted for those residents whose terminal condition has further deteriorated
  - 1. Visitation for compassionate care visits must be scheduled
  - 2. Any visitors that do not pass screening, such as fever or symptoms of COVID, will not be allotted visitation despite circumstances.

#### 9. Activities

- a) Upon entering step three of the reopening plan per Department of Health, activities may be conducted with residents unexposed to COVID-19. Social distancing, hand hygiene, and universal masking are required.

#### 10. Non-essential Personnel

- a) Upon entering step three of the reopening plan per Department of Health, non-essential services and persons are permitted.
  - 1. Universal masks must be in place, and equipment and seating areas will be wiped down with EPA-registered disinfectant before and after services, The social distance must be maintained when services are not being performed.

#### 11. Volunteers

- a) While in step three of the reopening plan per Department of Health, volunteers are permitted.
  - 1. Volunteer activities must be limited to those residents unexposed to COVID-19. Screening, social distancing, and universal masking are required.

#### 12. Outings

##### i. Medical Appointments

- 1. When a virtual appointment is not available or suggested, residents are encouraged to keep medically necessary appointments such as specialist visits, PCP visits, chemotherapy, dialysis, etc.
- 2. While using transportation via wheelchair van/ambulance, or Westmoreland Rides, the resident should don a surgical or cloth mask and keep it on for the duration of the visit. While using transportation via a family member or friend, residents, and family members or friends, transporting the resident should be done with a mask for the

duration of the outing. All parties such as family and residents should be screened on the screening visitation tool when they depart and **when they return** from the appointment.

3. Staff should be cognizant of residents who go off-site for outpatient medical care and remain alert for notification of any known exposures. Such exposure would require testing, case identification, contact tracing, quarantine, observation, and any other necessary medical care.

#### ii. Non-medical outings

##### 1. Low-Risk Outing

- a) A low-risk outing is any outing in which less than 10 people are present, and there is consistent use of universal masking and hand hygiene. There is **no** incidence where physical is not maintained

##### 2. High-risk Outing

- a) A high-risk outing such as an event in which greater than 10 people are present and there is a failure to maintain consistent universal masking or there is a failure of physical distancing from the resident (for example hugging or riding in a car with unmasked persons) and county in which resident resides is experiencing >10% county positivity rate.

#### iii. Isolation

- i. Residents returning from an outing will NOT be required to be placed in isolation-based precautions unless exposure is known or highly suspected. Residents that attend any outing ARE required to wear a mask outside of their room or when care is provided to the resident in their room for 14 days from the date of the outing. Residents that frequent outings should expect to wear a mask consistently while outside of their bedrooms, when care is performed, and when visitation occurs. Testing will be performed 2-3 days after a high-risk outing. See the testing section for details related to residents with outside contact as it relates to testing frequency and county positivity rate.

#### iv. Resident Mask Policy

- a) All residents are provided a cloth mask and encouraged to wear a mask when outside of their bedrooms, with visitors, and while care is provided in their rooms.
- b) Resident's or resident's personal representative will be asked the following questions, choose the most applicable answer(s), and sign an informed consent form prior to admission. Existing residents will also be surveyed, choose the most applicable answer(s), and sign informed consent forms.
  - i. I choose not to wear a mask, while outside of my bedroom while the facility has no known active cases. I will maintain six feet of social distance when at all possible. I understand that choosing not to wear a mask outside of my room increases my risk of spreading infection.
  - ii. I always choose to wear a mask outside of my bedroom and ask that all residents in my company or near me wear a mask as well.

- iii. I am unable to wear a mask or am unable to tolerate wearing a mask because of cognitive impairment or medical condition.
- c) If the resident is in the company of or in an area near a resident that requested all individuals to wear a mask, all residents must wear a mask. This includes group activities, social engagements, etc. but will not apply if the resident cannot tolerate a mask due to a medical condition or cognitive deficit. Then the resident will be kept strictly socially distanced from those residents.
- d) Residents that attend outings outside of the facility must wear a mask outside of their bedroom for 14 days from the date of the outing. If a resident cannot tolerate a mask due to a medical condition or cognitive deficit, the resident or direct care staff must assist the resident in maintaining a strict social distance from other residents for 14 days.
- e) Residents that choose to wear a mask and ask that others wear one in their company are educated that there may be some residents that are physically or cognitively unable to tolerate a mask. These residents may choose to forgo the activities in and around those individuals or choose to use best practices such as social distancing and hand hygiene to mitigate the increased risk.
- f) In the event of +COVID cases in the facility, all residents will be isolated to their bedrooms, and any instances where a resident must leave their bedroom will be kept at a minimum (ex: Medically necessary treatments, emergencies, fire, etc.)