



A CONTINUING CARE
RETIREMENT COMMUNITY

**Implementation Plan for Reopening
In Accordance with the Pennsylvania Department of Health’s
Interim Guidance for Skilled Nursing Facilities During COVID-19**

FACILITY INFORMATION	
1. FACILITY NAME Homeland Center	
2. STREET ADDRESS 1901 North Fifth Street	
3. CITY Harrisburg	4. ZIP CODE 17102
5. NAME OF FACILITY CONTACT PERSON Barry Ramper II, NHA, President/CEO	6. PHONE NUMBER OF CONTACT PERSON 717-221-7902

DATE AND STEP OF REOPENING
7. DATE THE FACILITY WILL ENTER REOPENING 8/3/2020
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 <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) Homeland Center has not experienced any COVID-19 cases among its residents or any significant outbreak.

DATE AND STEP OF REOPENING

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

On July 8, 2020, Homeland Center was found in compliance with COVID-19 focused survey.

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

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](#)

6/22/2020 to 7/19/2020

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

Homeland Center has existing contracts with Quest Diagnostic Laboratory and Geisinger Health System to facilitate laboratory testing of staff and residents. Homeland Center continues to screen residents and staff for signs and symptoms daily. Anticipating an increased statewide demand, Homeland Center is continuing to expand beyond its current testing capability and capacity.

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

Homeland Center has completed its baseline universal test of all residents and staff. If Homeland were to experience an outbreak, PA Department of Health State Laboratory and/or other laboratories under contract would be utilized to administer universal testing of staff and residents. Homeland Center would utilize contact tracing to establish testing priority. At this time Homeland Center has the ability to test using various sample collection methods such as anterior nares, mid-turbinate, or nasopharyngeal swab kits through various laboratories. Staff refusing testing will not be permitted to return to work until a negative test is received. Residents declining testing would be quarantined as a presumptive positive COVID-19 resident and staff would care for the resident using Transmission-Based precautions for at least 14 days. As testing capacity and technology evolves, Homeland will expand its capacity to conduct rapid testing during an outbreak, including when possible point of care (POC) testing onsite at Homeland Center.

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

Homeland Center is utilizing existing staff and laboratory contracts to maintain its testing capacity. Homeland continues to utilize both test-based and symptom-based screening protocols. Symptom-based screening will continue to detect symptomatic persons and test-based screening will be used to identify presymptomatic and asymptomatic persons. Please refer to questions 12 and 13 for additional test-based screening detail.

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

All Homeland Center staff have been defined as essential from the onset of the COVID Pandemic. Volunteers have not been permitted onsite at Homeland Center since CMS directed visitation restrictions. Homeland Center thanks its volunteers for their time and service and looks forward to the opportunity to all volunteers to return during Phase III. Homeland will provide capacity to test non-essential staff and volunteers no sooner than Phase III or re-opening.

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

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

Staff declining testing will not be permitted to schedule hours until a test is conducted and negative result is received. Respecting residents' right to refuse testing, residents declining testing will be placed on isolation precautions congruent with PA DOH HAN 509. Additional questions about infection control protocols associated with PA DOH HAN 509 may be referred to the nursing department.

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*.

Early in the COVID Pandemic, Homeland Center developed plans and capacity for a COVID quarantine unit within the facility. To date Homeland has not needed to utilize the COVID unit, but maintains capacity to do so. Homeland has adopted guidance as outlined in HAN 509 to maintain staff and resident safety in the event of a COVID case at Homeland Center. Staff and resident isolation and/or quarantine protocols are updated as additional information is released by CDC, CMS, and DOH. Homeland Center utilizes existing public health and preventive control techniques to mitigate, quickly identify and manage COVID-19 exposures; techniques include active surveillance via test and symptom-based screening, contact tracing, and engineering controls.

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)

Homeland Center has obtained and will continue to maintain PPE adequate to support operations for at least 60 days on-hand supply. Homeland has a PPE sustainment plan and maintains a close working relationship with local, regional, state, and federal entities to support emergent shortages.

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

Homeland Center is currently operating with a full staff complement. In the event multiple staff test positive for COVID-19, we will utilize our emergency staffing plan which will incorporate the use of certified and licensed agency staff, previously trained feeding assistants, staff whom have completed the Temporary Nurse Aide certification and associated on-site skills development, and incorporate the use of volunteers as a last resort. Should the implementation of those initiatives not be sufficient, we will contact DOH for assistance and support.

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

Homeland's reopening status is based upon several criteria, including: facility Covid status, testing capacity, staffing, access to personal protective equipment (PPE), and community case status. In the event the Governor moves Dauphin County into the Red Phase, Homeland Center will immediately move back to Phase I and close Homeland Center's Campus to resident visitors, and non-essential personnel and vendors. Independent of the Governor's reopening plan, Homeland Center reserves the authority to move back to Phase I and/or limit access to portions of Homeland Center as deemed necessary to maintain safety of staff and residents.

SCREENING PROTOCOLS

21. RESIDENTS

Skilled nursing residents are screened three times daily by clinical staff for signs and symptoms of COVID, including temperature and oxygen saturation levels; Personal Care residents are screened daily for fever and other COVID symptoms. Residents leaving for medically necessary appointments receive additional screening again upon their return. Homeland follows existing Infection Control protocols to identify, isolate, and manage any identified infectious diseases. Through contact tracing, possible exposures will be tested and quarantined or isolated per CDC and DOH guidance.

22. STAFF

Homeland Center is utilizing both a test and symptom-based approach to identify asymptomatic, pre-symptomatic, and symptomatic staff. As directed by the PA DOH, universal testing was completed on July 17th, identifying one non-clinical asymptomatic staff member who was subsequently quarantined for 24 days. All other Homeland Center staff tested negative for COVID-19 upon the conclusion of the universal testing. Staff are screened for signs, symptoms, and potential exposures at the beginning and end of every shift, as well as during the shift should a staff member experience an onset of symptoms during their shift. Staff with a temperature over 100.0 F are not permitted to return to work until at least 24 hours have passed fever free without a fever reducing medication. Homeland implemented a risk-based approach and educated staff to COVID-19 risks outside of work. Homeland provides regular educational updates regarding infection control standards, new Covid-19 guidance and/or alerts which have the potential to negatively affect them, their families, and our residents. Homeland provided all staff with two cloth masks to utilize when offsite for their ongoing protection and the protection of our residents. Management also engages in frequent conversations with staff regarding time off requests, activities and/or travel associated to those requests and their reporting responsibilities associated to any potential exposures. Homeland maintains the capacity to utilize a test-based approach for staff as necessary, particularly for return to work from approved vacations or emergency travel to identified 'hot spots'. All staff are required at a minimum to wear facial protection while inside Homeland Center, unless eating or drinking in approved non-clinical areas. All staff maintain physical distancing as clinically appropriate. Newly hired staff are tested no less than 72 hours prior to their first day of employment and will not be permitted to enter the facility until a negative result is received.

23. HEALTHCARE PERSONNEL WHO ARE NOT STAFF

Non-Homeland Center healthcare personnel are screened as if they are Homeland Staff. Agency staff who work in other healthcare facilities are not permitted to work at Homeland Center. Homeland Center uses a combination of a symptom and risk-based approach to determine entry of non-Homeland Center healthcare persons. No entry is granted for any healthcare personnel who have cared for a COVID-19 patient or resident. Other healthcare personnel are required to use personal and respiratory protective equipment to protect Homeland Center staff and residents. Agency staff were also tested in accordance with Universal testing guidance. No new Agency person will be permitted to begin work without being tested within 72 hours or less of their start date and a negative result is received.

24. NON-ESSENTIAL PERSONNEL

Non-essential personnel are not permitted in Homeland Center at this time. Non-essential personnel will be permitted in Homeland Center at Phase III of reopening and will be screened using a risk and symptom-based approach. As determined to be necessary, a test-based approach will be used to actively screen non-essential personnel.

SCREENING PROTOCOLS

25. VISITORS

Visitation is permitted only in circumstances of end-of-life or compassionate care as medically necessary. Visitors are screened using a risk and symptom-based approach. Visitors may be asked to present proof of a negative COVID-19 antigen test. Visitors are required to wear a gown, gloves, and mask at all times. Visitors must remain 6ft apart from their loved one and are strictly prohibited from touch of any kind. If found in violation of these standards, visitors will be asked to leave the premises.

26. VOLUNTEERS

Volunteer screening will be congruent with screening of non-essential personnel.

COMMUNAL DINING FOR RESIDENTS UNEXPOSED TO COVID-19

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

Residents are encouraged to dine in their rooms, if safely possible. Personal Care residents have received meals within their rooms since CMS provided guidance to discontinue communal dining earlier this year. Skilled nursing residents are required to stay on their prospective unit to limit crossover between units. To address space limitations and compliance with social distancing guidelines, residents capable of feeding themselves will be provided an opportunity to engage in communal dining at least one meal per week in a designated area. Residents who need assistance with feeding will continue to eat in a common area and spaced at least 6 feet apart.

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

Residents have been encouraged to eat in their rooms if safely possible. Tables and chairs are arranged such that a minimum of six (6) feet is maintained between seatings.

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

Staff have enhanced cleaning of high touch surfaces and locations since the beginning of the COVID pandemic. Staff maintain social and physical distancing as permissible during assembly and delivery of trays. Staff maintain at a minimum facial protection, and as appropriate utilize additional personal protective equipment such as gloves or eye protection.

30. DESCRIBE ANY OTHER ASPECTS OF COMMUNAL DINING DURING REOPENING

N/A

ACTIVITIES AND OUTINGS

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

Residents are screened for COVID-related symptoms, including temperature, prior to all activities. Residents confirmed to be COVID naïve are permitted to participate in group activities of no more than 5 residents. Social distancing, hand hygiene, and universal masking is maintained at all times. Activities are conducted individually in residents' rooms, on each unit, or in large gathering spaces such as the main dining rooms. All materials, equipment, and surfaces available during activities are cleaned using an EPA approved chemical before, during, and after activities.

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

Maintaining comparable requirements as Step 1, group activities will be increased up to 10 residents.

ACTIVITIES AND OUTINGS

33. DESCRIBE ACTIVITIES PLANNED FOR STEP 3

Maintaining comparable requirements as Step 1 and 2, group activities will be increased up to 25 residents.

34. DESCRIBE OUTINGS PLANNED FOR STEP 3

The Activities department does not plan for non-medically necessary outings until after Step 3.

NON-ESSENTIAL PERSONNEL

35. DESCRIBE THE LIMITED NUMBER AND TYPES OF NON-ESSENTIAL PERSONNEL THAT HAVE BEEN DETERMINED NECESSARY AT STEP 2

Homeland Center has defined all staff as essential. Non-essential personnel include non-direct care vendors. For example, vendors include those required to maintain critical infrastructure or support medically necessary care.

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

Movement of non-essential personnel will be limited to non-direct care areas. All personnel have access to both alcohol based hand sanitizer (ABHS) and soap with water. All personnel within Homeland Center must wear a facial covering. Individuals not wearing a facial covering will not be permitted inside the building.

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 be permitted in direct care areas. In the event a COVID unit is established, non-essential personnel will not be permitted within areas where COVID is suspected or confirmed.

VISITATION PLAN

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

Visitation hours will occur for 15 minute intervals between the hours of 1000 and 1600 hours, Monday through Thursday.

39. DESCRIBE HOW SCHEDULING VISITORS WILL OCCUR

To ensure fairness and equity associated to the scheduling process, Resident's names will be randomly generated for scheduling. As the name is pulled, the Social Work and Activities departments will contact the Resident's family members to schedule a visit in accordance with the established policy.

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

The use of an EPA approved chemical will be used to clean surfaces within the visitation area(s). Sufficient time will be provided between visits to allow adequate air exchanges of the visitation location.

VISITATION PLAN

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

A maximum of two (2) visitors will be permitted for each resident visit. At this time, no persons under the age of 19 will be permitted to visit (identification may be requested). During visitation, physical distancing and infection control practices (including the continuous use of masks) will be strictly enforced and observed per CDC and DOH guidance.

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

Visits will be prioritized based on resident need which includes medical, cognitive and emotional status. The group, identified as prioritized residents, will be offered initial visits followed by the remaining residents. Contact to both groups will be made in a randomized order to maximize equity in accordance with item #39.

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)

Homeland’s clinical team will discuss the safety of visitation, factoring in weather, mobility, and resident overall wellbeing.

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 visitation location details will be discussed with prospective visitors at the time of scheduling. Visitation location may be altered due to severe weather or other emergent situations.

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

Clearly labeled signage will designate six (6) foot distances.

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

In the event of severe weather, Ellenberger and Personal Care visitation will be permitted within a defined area of Muench Street Lobby.

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

The visitation space is arranged such that a minimum of 6 feet is maintained between visitors and residents.

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)

Homeland’s clinical staff will assess residents to safely receive visitors.

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

Indoor (in a designated location) and outdoor (but in an enclosed temperature controlled location) visitation will be permitted at Step 2. Outdoors visitation in an open setting is encouraged and will remain available at Step 3, 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, See Step 2

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”)

STEP 2

STEP 3

VISITATION PLAN

	SAME, See Step 2
	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, See Step 2
	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, See Step 2
	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
	SAME, See Step 2

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 permitted at Homeland Center until Phase III of reopening. Any areas identified as suspected or confirmed positive for COVID will be clearly marked and require additional respiratory and personal protective equipment (PPE). Volunteers will not be permitted in areas defined as suspect or confirmed positive for COVID-19.
	56. DESCRIBE THE DUTIES TO BE PERFORMED BY VOLUNTEERS DURING STEP 2
	Volunteers are permitted to support Homeland Center in an off-site capacity during Step 2.

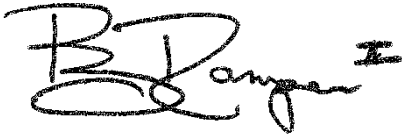
ATTESTATION

	57. NAME OF NURSING HOME ADMINISTRATOR
	Barry Ramper, II CEO

ATTESTATION

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.



07/29/2020

SIGNATURE OF NURSING HOME ADMINISTRATOR

DATE