

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

This template is provided as a suggested tool for skilled nursing facilities to use in developing their Implementation Plan for reopening. This (or another version of an Implementation Plan) is to be posted on the facility's website (if the facility has a website) or available to all residents, families, advocates such as the Ombudsman and the Department upon request. This is NOT to be submitted to the Department.

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	
Calvary Fellowship Homes	
2. STREET ADDRESS	
502 Elizabeth Drive	
3. CITY	4. ZIP CODE
Lancaster	17601
5. NAME OF FACILITY CONTACT PERSON	6. PHONE NUMBER OF CONTACT PERSON
Clifford Hurter, CEO	717-393-0711

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	
Facility will enter Step 1 after two consecutive weeks of COVID-19 testing with negative results. Testing will begin the week of October 11, 2020 which means that the facility will not enter Step 1 until the week of October 26, 2020 at the earliest.	

DATE AND STEP OF REOPENING

8. **SELECT THE STEP AT WHICH THE FACILITY WILL ENTER REOPENING – EITHER STEP 1 OR STEP 2 (CHECK ONLY ONE)**

Step 1

The facility must meet all the Prerequisites, including the baseline universal test for COVID-19 administered to staff and residents (in accordance with the [June 8, 2020, Order of the Secretary of Health](#))

Step 2

The facility must meet all the Prerequisites, including the baseline universal test for COVID-19 administered to staff and residents (in accordance with the [June 8, 2020, Order of the Secretary of Health](#))

AND

Have the absence of any new facility onset of COVID-19 cases for 14 consecutive days since baseline COVID-19 testing

9. **HAS THE FACILITY EXPERIENCED A SIGNIFICANT COVID-19 OUTBREAK? (IF NO, SKIP TO #11)**

Yes

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

October 9, 2020

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

To ensure the facility has taken appropriate measures to protect residents and staff, descriptions of those strategies are required in this section (prerequisites to reopening).

11. **DATE RANGE FOR THE BASELINE UNIVERSAL TEST ADMINISTERED TO STAFF AND RESIDENTS (BETWEEN MAY 24, 2020 AND JULY 24, 2020) IN ACCORDANCE WITH THE [JUNE 8, 2020, ORDER OF THE SECRETARY OF HEALTH](#)**

July 17th to July 20th, 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**

Calvary Homes has adequate supplies to administer COVID-19 tests to all symptomatic residents within 24 hours. Calvary Homes has contracts with three laboratories and has access to the PA DOH laboratory services to facilitate timely testing.

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

Calvary Homes has adequate resources to administer COVID-19 tests to all skilled care residents and team members if we experience a COVID-19 outbreak.

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

Calvary Homes has adequate testing supplies to administer COVID-19 tests to asymptomatic team members. Team members who exhibit symptoms of COVID-19 will be advised to contact their personal medical provider and/or the Pennsylvania Department of Health.

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

Calvary Homes has adequate testing supplies to administer COVID-19 tests to volunteers and non-essential staff employed by Calvary Homes. Calvary Homes will coordinate with vendors to ensure COVID-19 testing is completed for non-essential staff, if needed.

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

In accordance with PAHAN – 509, asymptomatic residents who refuse testing, will be cared for in a COVID- potentially exposed YELLOW ZONE for at least 14 days after any known exposure. Residents with COVID-19 symptoms without a differential diagnosis who refuse testing, will be considered presumptively positive and cohorted in a COVID positive RED ZONE.

Universal (asymptomatic) COVID-19- testing is required for all team members working the skilled care areas. Symptomatic team members are excluded from working in accordance with PA HAN 516 or subsequent guidance.

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*.

Calvary Homes has adequate resources to implement the transmission-based prevention strategy outlined in PA-HAN-509. Specifically, Calvary Homes has the capacity to designate three cohorting zones, based on test results and/or the residents’ clinical status. The “RED ZONE” is for positive or presumptively positive residents who are still within the parameters for transmission-based precautions. The “YELLOW ZONE” is for potentially exposed residents are within 14 days of a possible COVID-19 exposure. And, a “GREEN ZONE”, is for residents with no known COVID-19 exposure and are without symptoms.

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)

Calvary Homes actively monitors and compares our inventory and utilization rates of PPE to ensure we maintain an adequate supply of PPE to provide resident care. We have established contracts with suppliers and have resources to obtain necessary PPE as needed.

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

As a result of the COVID-19 pandemic, Calvary Homes has created an Emergency Staffing Plan. This plan includes assessing staffing needs, available resources, and coordinating schedules. To date, COVID-19 has not had a significant negative impact on 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

Upon notification of Lancaster County’s intent to revert to the red phase of the Governor’s reopening plan, Calvary Home will return to the protocols in place, prior to entering the reopening steps as they related to visitors, dining and activities.

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.

SCREENING PROTOCOLS

21. RESIDENTS

Calvary Homes is in full compliance with Secretary Levine's Testing at Skilled Nursing Facilities Order dated June 8, 2020. Potential residents are screened via a medical record chart review upon receipt of the referral. Residents admitted from the hospital are tested for COVID-19 prior to admission. Admissions or readmissions are cared for in a YELLOWZONE (potentially exposed) for a minimum of 14 days. Residents are screened 2-3 times a day for symptoms consistent with COVID-19, including measuring temperatures and pulse ox. If symptom screening reveals possible infection, the provider is notified and, if indicated the resident is moved to a YELLOW ZONE and a COVID-19 test is performed. All in-house screening will occur in the resident's room.

22. STAFF

Calvary Homes is in full compliance with Secretary Levine's Testing at Skilled Nursing Facilities Order dated June 8, 2020. Team members were educated on COVID-19 including symptoms, what to do if they develop symptoms while working and to stay home if they are ill. Team Members are screened for symptoms consistent with COVID-19 and have their temperature taken prior to and at the end of their shift. Screening occurs in the conference room for all team members.

23. HEALTHCARE PERSONNEL WHO ARE NOT STAFF

Non-staff healthcare personnel (HCP) are educated on the risks of working in Healthcare, signs and symptoms of COVID-19, actions to take if they develop symptoms and appropriate infection control measures. They are screened for symptoms consistent with COVID-19, perform hand hygiene, and have their temperature taken prior to entry in to Healthcare. Screening takes place in the conference room.

24. NON-ESSENTIAL PERSONNEL

When non-essential personnel return to Healthcare, they will receive education on the risks of working in Healthcare, signs and symptoms of COVID-19, actions to take if they develop symptoms and appropriate infection control measures. They will be screened for symptoms consistent with COVID-19, perform hand hygiene, and have their temperature taken prior to entry into Healthcare. Screening takes place in the conference room.

25. VISITORS

Visitors are educated on the risks of visiting in Healthcare, signs and symptoms of COVID-19, actions to take if they develop symptoms and appropriate infection control measures. They are screened for symptoms consistent with COVID-19, perform hand hygiene, and have their temperature taken, prior to entry in to Healthcare.

26. VOLUNTEERS

When volunteers return they will be educated on the risks of volunteering in Healthcare, signs and symptoms of COVID-19, actions to take if they develop symptoms and appropriate infection control measures. They are screened for symptoms consistent with COVID-19, perform hand hygiene, and have their temperature taken prior to entry in to Healthcare. Screening takes place in the conference room.

Communal dining is the same for all steps of reopening so there is no need to differentiate among the three steps.

<p>27. DESCRIBE COMMUNAL DINING MEAL SCHEDULE, INCLUDING STAGGERED HOURS (IF ANY)</p> <p>Calvary Homes has an upper level and lower level in HC. Residents will continue to eat meals mostly in their rooms. Residents may choose to eat in the lounge on their floor if they are distanced greater than 6 feet apart and no more than 5 residents in the lounge.</p>
<p>28. DESCRIBE ARRANGEMENT OF TABLES AND CHAIRS TO ALLOW FOR SOCIAL DISTANCING</p> <p>Tables will be separated to allow at least 6 foot distance between resident seating with one resident per table.</p>
<p>29. DESCRIBE INFECTION CONTROL MEASURES, INCLUDING USE OF PPE BY STAFF</p> <p>Residents will be encouraged to wear a face covering unless they are seated at a dining table eating or drinking. Team members will assist residents with hand hygiene before and after meals. Team members will wear masks, gloves and eye protection for serving /assisting residents. Team members will complete hand hygiene before and after assisting with meal preparation, meal delivery and between residents when assisting with eating. Tables will be cleaned using EPA registered disinfectant with appropriate dwell times between resident seating and between meals.</p>
<p>30. DESCRIBE ANY OTHER ASPECTS OF COMMUNAL DINING DURING REOPENING</p> <p>N/A</p>

<p>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.</p>
<p>31. DESCRIBE ACTIVITIES PLANNED FOR STEP 1 (FIVE OR LESS RESIDENTS UNEXPOSED TO COVID-19)</p> <p>Group activities will occur in designated areas such as the living room, activity room and/or dining room to promote appropriate physical distancing. Five or less residents will be permitted to participate in an activity at one time and will wear an appropriate face covering. Residents will be seated with a minimum of 6 feet between residents with one resident per table. Team members will assist residents to perform hand hygiene before and after group activities. Supplies/equipment needed for group activities will be distributed to each resident and cleaned with an EPA registered disinfectant after use. When possible disposable items and/or single use items will be used. Before and after each group activity tables will be cleaned with an appropriate EPA registered disinfectant. Examples of step 1 activities include, devotions and BINGO with disposable cards and proper cleaning of chips.</p>
<p>32. DESCRIBE ACTIVITIES PLANNED FOR STEP 2 (TEN OR LESS RESIDENT UNEXPOSED TO COVID-19)</p> <p>The process outline in step 1 will also be followed in step 2, except ten or less residents will be permitted to participate in the activity.</p>
<p>33. DESCRIBE ACTIVITIES PLANNED FOR STEP 3</p> <p>The process outlined in step 1 will be followed in step 3, except there is no limit to the number of residents able to participate as long as all safety measure identified in step 1 are maintained.</p>
<p>34. DESCRIBE OUTINGS PLANNED FOR STEP 3</p> <p>Outings will be planned provided proper physical distancing can be maintained. Residents will remain on the bus at all times. Proper hand hygiene practices and universal masking will be maintained.</p>

<p>In Step 2, non-essential personnel <u>deemed necessary</u> by the facility are allowed (in addition to those already permitted in Section 4 of <i>Interim Guidance for Skilled Nursing Facilities During COVID-19</i>). In Step 3, <u>all</u> non-essential personnel are allowed. Screening and additional precautions including social distancing, hand hygiene, and universal masking are required for non-essential personnel.</p>
<p>35. DESCRIBE THE LIMITED NUMBER AND TYPES OF NON-ESSENTIAL PERSONNEL THAT HAVE BEEN DETERMINED NECESSARY AT STEP 2</p> <p>Access to Healthcare and Healthcare residents by non-essential personnel will be determined on a case by case basis. The number of personnel and area of access will be determined using the information available at the time of request. Examples of non-essential personnel include maintenance personnel performing routine maintenance or beauty shop personnel.</p>
<p>36. DESCRIBE HOW SOCIAL DISTANCING, HAND HYGIENE, AND UNIVERSAL MASKING WILL BE ENSURED FOR NON-ESSENTIAL PERSONNEL AT STEPS 2 AND 3</p> <p>Non-essential personnel must pass screening, perform hand hygiene and will be educated on the risk associated with working in Healthcare, the signs and symptoms of COVID-19, actions to take if they develop symptoms consistent with COVID-19, the requirement to wear a mask per Calvary Homes protocol, approved areas of access, and physical distancing.</p>
<p>37. DESCRIBE MEASURES PLANNED TO ENSURE NON-ESSENTIAL PERSONNEL DO NOT COME INTO CONTACT WITH RESIDENTS EXPOSED TO COVID-19</p> <p>Non-essential personnel will not be permitted access to residents exposed to COVID-19, unless the work to be performed is a significant safety risk. In those situations, the vendor will be notified in advance. Calvary Homes will coordinate with the vendor to develop a plan to complete the necessary work with the least risk of exposure.</p>

<p>VISITATION PLAN</p>
<p>For visitation to be permitted in Steps 2 and 3 of reopening (as described in Section 6 of <i>Interim Guidance for Skilled Nursing Facilities During COVID-19</i>), the following requirements are established. Screening and additional precautions including social distancing, hand hygiene, and universal masking are required for visitors.</p>
<p>38. DESCRIBE THE SCHEDULE OF VISITATION HOURS AND THE LENGTH OF EACH VISIT</p> <p>Outdoor visits - Monday thru Friday in HC lower level garden from 9:00am-11:00am, 12:45pm-4:15pm and 6:00pm – 7:15pm. Saturdays 9:00am-11:00 am. There will be 15 minutes in between each visit to allow for transportation and cleaning of areas. Visits will be 30 minutes long.</p>
<p>39. DESCRIBE HOW SCHEDULING VISITORS WILL OCCUR</p> <p>To ensure compliance with regulatory guidelines and infection control procedures, all visitations are by appointment. Visits can be scheduled by e-mailing: jrettew@calvaryhomes.org or jsmith@calvaryhomes.org. You can also call 717-824-8823 or 717-824-8867.</p>
<p>40. DESCRIBE HOW VISITATION AREA(S) WILL BE SANITIZED BETWEEN EACH VISIT</p> <p>The visitation area will be cleaned with an EPA-registered disinfectant before and after each visit.</p>

VISITATION PLAN

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

To promote appropriate physical distancing and infection control prevention strategies, visits are limited to 2 visitors per session. Children are permitted to visit provided they are able to maintain physical distancing and infection control prevention strategies. Children under 13 must be accompanied by an adult. Failure of any visitor to maintain physical distancing or established infection control prevention strategies may result in immediate termination of the current visit and modification of future visits up to and including loss of visiting sessions.

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

Visits are scheduled on a first come – first served basis. Individual resident’s psychosocial needs will be considered when scheduling additional visits as able.

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)

Calvary Homes will establish a collaborative interdisciplinary team approach when determining if individual residents can safely participate in indoor and/or outdoor visits. Residents in transmission-based precautions, for any condition, are excluded from visitation, unless otherwise deemed appropriate by the medical provider. Outdoor visits will be scheduled, weather permitting. In the case of inclement weather, such as rain, snow, high winds, temperatures over 85 degrees fahrenheit under 65 degrees fahrenheit, or if deemed unsafe by the medical provider, visits will occur in an inside neutral space.

STEP 2

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

Calvary Homes has designated one location for outdoor visits, located on the lower level garden patio. There is a section of roof coverage to provide shade and protection from unexpected inclement weather. Signage will be posted to direct visitors to the visit location and reminders of infection control prevention strategies.

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

A 6 foot table will be set up on the patio. The resident will be seated at one end of the table and the visitor (s) will be seated at the other end. Signage will be posted to remind visitors of physical distancing requirements. A team member or volunteer will be present or within view of visitation to intervene, if necessary.

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

Indoor visitation will occur in the Game/Rec. room in the lower level of Hurter building. Visitors may access the Game/Rec. room via the side entrance off the parking lot. This entrance will be clearly marked. Staff/volunteer will need to open door to allow access to visitors. Visitors will get screened in the conference room first before entering the building thru side entrance.

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

Six-foot distance will be maintained with furniture placement and signage. A team member or volunteer will be present or within view of visitation to intervene, if necessary.

STEP 3

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)

Safety of visits for step 3 will be determined in the same manner as identified in step 2.

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

VISITATION PLAN

Yes

50. DESCRIBE THE OUTDOOR VISITATION SPACE FOR STEP 3 TO INCLUDE THE COVERAGE FOR SEVERE WEATHER, THE ENTRANCE, AND THE ROUTE TO ACCESS THE SPACE (IF THE SAME AS STEP 2, ENTER "SAME")

Same

51. DESCRIBE HOW A CLEARLY DEFINED SIX-FOOT DISTANCE WILL BE MAINTAINED BETWEEN THE RESIDENT AND THE VISITOR(S) DURING OUTDOOR VISITS (IF THE SAME AS STEP 2, ENTER "SAME")

Same

52. DESCRIBE THE INDOOR VISITATION SPACE THAT WILL BE USED TO INCLUDE THE ENTRANCE AND THE ROUTE TO ACCESS THE SPACE (IF THE SAME AS STEP 2, ENTER "SAME")

Same

53. DESCRIBE HOW A CLEARLY DEFINED SIX-FOOT DISTANCE WILL BE MAINTAINED BETWEEN THE RESIDENT AND THE VISITOR(S) DURING INDOOR VISITS (IF THE SAME AS STEP 2, ENTER "SAME")

Same

54. FOR THOSE RESIDENTS UNABLE TO BE TRANSPORTED TO THE DESIGNATED VISITATION AREA, DESCRIBE THE INFECTION CONTROL PRECAUTIONS THAT WILL BE PUT IN PLACE TO ALLOW VISITATION IN THE RESIDENT'S ROOM

When a resident is unable to be transported to the designated visitation area, visitors will complete screening as described in # 25 above and will wear a face covering, gown, and gloves to visit in the residents room. Education will be provided on appropriate physical distancing and furniture placement will serve as a reminder. A team member or volunteer will oversee the visit and will intervene, if necessary.

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 screened in the conference room and education will be provided, including education on the risk of volunteering in Healthcare, signs and symptoms of COVID-19, actions to take if they develop symptoms consistent with COVID-19, performing hand hygiene, and the requirement to wear a mask per Calvary Homes protocol. Volunteers will only interact with residents residing in a "green zone". The Volunteer Coordinator will coordinate volunteer assignments and is responsible to modify assignments if resident status or precaution zones change.

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

Volunteers will be limited to assisting with outdoor visitation, including monitoring and ensuring physical distancing and infection control precautions are followed and sanitizing visitation areas between visits.

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

Clifford Hurter

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.

Date: 10/9/2020

SIGNATURE OF NURSING HOME ADMINISTRATOR: