COVID-19 Reopening Plan

Purpose: United Hebrew will follow all New York State Department of Health guidelines with regards to reopening for visitation, however, the facility reserves the right to establish additional guidelines as needed to ensure the safety of visitations and daily operations.

Policy:

Family Notification & Communication

1. Upon receiving notification allowing visitation from the New York State Department of Health, the administrator or designee will send an email to all persons listed on the family contact list. The email will contain the facility's visitor expectation fact sheet, as well as information on the prevention of spreading COVID-19 and proper hand hygiene techniques. The policy will also be shared on our website www.ughc.org
2. The first round of visitation will be scheduled in advance by a staff member to ensure all residents have a visit.
3. After the first round of visits, families will be directed to contact Carrie Deppong cdeppong@uhgc.org or x1234 to schedule their Courtyard Visit. This process is similar to the Window Visits. A calendar titled Courtyard has been created and will be shared with all users and maintained by Recreation.
4. While we cannot require, we strongly recommend all visitors to be tested for COVID-19 prior to visitation.

Schedule

1. Visits will occur Monday through Friday, in 30-minute intervals. There will be a 15-minute cleaning period in-between each session to allow for sanitizing and prep for the next visit.
2. The scheduled times for visits are: 10:00am-10:30am, 10:45am-11:15am, 11:30am-12:00pm, 1:30pm-2:00pm, 2:15pm-2:45pm, 3:30pm-4:00pm
3. 4 residents will be permitted to have visits per time slot. There shall be no more than 2 visitors per resident.
4. Visitation should occur only on days when there are no weather warnings that would put either visitors or residents at risk. Furthermore, visitation spaces must provide adequate protection from weather elements (e.g., shaded from the sun).
5. If any resident or staff member tests positive for COVID-19, visitation will be suspended for a period of 28 days.

Courtyard Visit Protocol

1. Upon entry to facility, all visitors will perform hand hygiene with antibacterial hand sanitizer, will be screened for temperature and symptoms of COVID-19 and will answer
the visitor questionnaire and provide all necessary information. Visitors will be required to wear a Visitor ID Badge.

2. Visitors and residents must wear a mask at all times. We encourage visitors to bring their own mask to help us conserve our supply. However, if a visitor does not have a mask, one will be provided to them.

3. The entrance to the Courtyard will be by the Screening Station, the exit will be by the Reception Desk.

4. Visitors and residents will remain 6 feet apart and practice social distancing. Tables and chairs will be appropriately marked.

5. All visitors must be over the age of 18.

6. No pets allowed.

7. Food and drinks are prohibited during the visit.

8. A designated staff member, or Care Liaison will monitor the visitation for compliance.

9. Tables and chairs will be cleaned after each visit by the Care Liaison. Garbage disposals and sanitizer will be readily available.

10. If any visitor fails to adhere to the facility policy, he/she/they will be prohibited from visiting for the duration of the COVID-19 state declared public health emergency.

Residents

1. Residents will be escorted down from their unit by the unit staff and will be wearing a mask.

2. Once in the Courtyard or visitation area, residents will be provided sanitizer by the Care Liaison.

3. At the end of the visit, residents will be transferred upstairs by the unit staff.

4. Residents will not be allowed to have a courtyard visit if they have a confirmed or suspected diagnosis of COVID-19 or are on isolation.
Visitor Expectation Fact Sheet

- Visitors are screened for signs and symptoms of COVID-19 prior to resident access and visitation will be refused if the individual(s) exhibits any COVID-19 symptoms or do not pass the screening questions.
- Screening shall consist of both temperature checks and completing a screening questionnaire to assess potential exposure to COVID-19.
- The screening questionnaire must include the following for each visitor: first and last name of the visitor; physical (street) address of the visitor; daytime and evening telephone number; date and time of visit; and email address, if available. This record will be kept by United Hebrew.
- United Hebrew will provide alcohol-based hand rub, consisting of at least 60 percent (60%) alcohol, to residents, visitors and representatives of the long-term care ombudsman prior to visiting the residents. To use, rub hands together using friction for 20 seconds.
- Visitation is limited to our Courtyard, weather permitting.
- Visitors must maintain social distance when in the facility. Visitors must stay 6 feet apart from residents during their visit.
- Visitors must wear a face mask or face covering which always covers both the nose and mouth. We encourage visitors to wear their own mask, however, if a visitor does not have a mask, one will be provided to them.
- Visitors are required to wear a Visitor ID badge.
- Visits are by scheduled appointment only.
- Visits will occur Monday through Friday, in 30-minute intervals. There will be a 15-minute cleaning period in-between each session to allow for sanitizing.
- The scheduled times for visits are: 10:00am-10:30am, 10:45am-11:15am, 11:30am-12:00pm, 1:30pm-2:00pm, 2:15pm-2:45pm, 3:30pm-4:00pm
- 4 residents will be permitted to have visits per time slot. There shall be no more than 2 visitors per resident.
- Visitors under the age of 18 and pets are prohibited.
- A copy of the visitation policy is posted on our website www.uhgc.org
- Staff are required to monitor the visitation process.
- **If any visitor fails to adhere to the protocol, he/she/they will be prohibited from visiting for the duration of the COVID-19 state declared public health emergency. United Hebrew reserves the right to refuse any visitor who is under the influence, disruptive or presents a danger to any resident or staff.**
**COVID-19 Visitor Screening Form**

This form is required to be completed by the visitor and will be kept by United Hebrew.

<table>
<thead>
<tr>
<th>Date:</th>
<th>Time:</th>
<th>Daytime Number:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>First Name:</th>
<th>Last Name:</th>
<th>Evening Number:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address:</th>
<th>City:</th>
<th>State:</th>
<th>Zip:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Email:**

1. Did you wash your hands or used alcohol-based hand rub? ☐ No ☐ Yes

2. Do you have signs or symptoms of respiratory infection such as cough or shortness of breath or any 2 of the following – fever, chills, new loss of taste, diarrhea, muscle pain, sore throat, vomiting. ☐ No ☐ Yes

3. Have you had contact with someone with or under investigation for Covid-19? ☐ No ☐ Yes

4. Temperature above 99.5? ☐ No ☐ Yes

5. Have you traveled in the past 14 days to any states/countries outside of New York State? ☐ No ☐ Yes
   If yes, list state/country traveled to:

   The above-named individual, has been cleared for visitation.

   **Screener Signature:** ______________________

   **Date:** ______