



Taking Reasonable Efforts to PREVENT COVID-19 From Entering Our Affiliated (“AristaCare”) Skilled Nursing Centers

The top priority at this point with COVID-19 is to prevent the virus from entering our nursing homes given the high case fatality rate in the elderly, which preliminary data shows it at 15% or greater. Evaluations from prior viral epidemics that spread like COVID-19 found that actions taken early in outbreaks (such as social distancing, restricting interaction with others, washing hands) can significantly reduce the spread of the virus. Waiting until the virus is spreading in the community is often too late.

AristaCare has implemented a Corona Virus Policy and we are adhering to Centers for Disease Control (CDC) and Department of Health (DOH) recommendations and guidelines.

The American Health Care Association (AHCA) just published guidance for skilled nursing facilities that suggest the following five actions to help prevent the entry of COVID-19 into our facility WHETHER OR NOT it has been found in our surrounding community:

1. Allow entry to only individuals who need entry.
2. Restrict activities and visitors with potential for exposure.
3. Require all individuals entering the building to wash their hands at entry.
4. Set up processes to allow remote communication for residents and others.

#1 Restrict entry to only individuals who need entry, such as:

- Facility employees, contractors and consultants who are needed to keep the operations running and assure the residents’ needs are met.
 - The facility is setting up means for staff to receive sick pay for missed days.
- Government officials who in their capacity require entry (e.g., CDC or public health staff).
- Immediate families or friends who need to visit for critical or time sensitive reasons such as hospice-related visits, complete medical authorizations, etc. these visitors are to reach out to administration to discuss/ coordinate.

#2 Restrict activities and individuals with potential for exposure, including:

- Visitors, when there are any confirmed COVID-19 cases in the surrounding community. This does not apply to workforce needed to keep the operations going and to meet resident needs.
- Other visitors for routine social visits, tours with prospective residents or their families, and outside group activities (e.g., school groups or bands, etc.) should be restricted.
- Cancel activities that take residents into the community to public places particularly with large gatherings, such as mall, movies, etc. (note: this does NOT apply to residents who need to leave the building for medical care such as dialysis, medical visits, etc).
 - If you accompany or transport your loved one to an appointment this will be coordinated on an individual basis.
 - If you launder your loved ones clothes we can coordinate continuing this with a drop off and pick up.

Internal group activities should be restricted, especially if:

- a. the facility has residents with respiratory symptoms (who should be in contact isolation per CDC guidance)
- b. b) if COVID-19 is in the surrounding community; and/or
- c. c) the ability to restrict visitors is challenging in the facility.

#3 Actively try to screen all individuals entering the building, including employees, contractors, volunteers, visitors, new admissions, government officials, and health care professionals. The screening process² should include asking individuals for:

- Respiratory symptoms (fever, sore throat, cough and new shortness of breath);
- International travel within the last 14 days to areas where COVID-19 cases have been confirmed.
- Anyone who has worked in another health care setting with confirmed COVID-19 cases (this may change as COVID-19 spreads in your community)

#4 Require all individuals entering the building to wash their hands at entry.

- The facility will increase cleaning and disinfecting frequently touched objects and surfaces.
- Remind people to not shake hands or hug with each other, staff or residents during this epidemic.
- The facility is encouraging / empowering our residents to direct staff regarding hand hygiene.
- The facility has increased hand hygiene observations / competencies with staff.

#5 Set up a process to allow remote communication for residents and others.

- **PLEASE ENSURE WE HAVE YOUR EMERGENCY CONTACT INFORMATION INCLUDING EMAIL ADDRESS FOR ANY NEEDED COMMUNICATION.**
- **THE FACILITY WILL UTILIZE SOCIAL MEDIA SITES TO COMMUNICATE ANY POLICY CHANGES / UPDATES RELATED TO COVID-19**
- If you are interested in alternative means of communications for residents to visit and talk with loved ones, such as video chat, telephone, texting or social media please reach out to administration to coordinate.

These recommendations are built upon what CMS and CDC currently recommend. We are adopting these additional best practices based on the growing data about the high mortality rate among our vulnerable population (elderly over the age of 80 with chronic disease). Waiting until the virus starts to spread in the community, has been shown in prior viral epidemics to be too late.

We thank you all in advance for your cooperation and assistance in keeping our residents safe. If you have any questions, please feel free to reach out to the facility and a staff member will return your call.