

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	
Mifflin Court	
2. STREET ADDRESS	
450 E. Philadelphia Avenue, Shillington, PA 19607	
3. CITY	4. ZIP CODE
Shillington	19607
5. NAME OF FACILITY CONTACT PERSON	6. PHONE NUMBER OF CONTACT PERSON
Derek Groff, Mifflin Court Executive Director	610-796-1600

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
Friday 07/10/19
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)
No

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

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](#)

06/16/20 and 06/17/20

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

Genesis is contracted with various labs that give us the capacity to complete testing (AccessDx, Mako Medical). We do have test kits at Mifflin Court currently.

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

Same as above. Mifflin Court has the ability to test everyone in the facility with current labs.

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

Same as above

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

We do not plan on utilizing volunteers at this time. Non-essential staff will be tested bi-weekly or as deemed appropriate--same as with Mifflin Courts' residents and staff.

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

Testing is a requirement of employment. Refusal of testing can be taken as a staff member's resignation. Resident's have the right to refuse the test and will be educated on the importance of testing, and, if refusing, will be in isolation for the period of time that they would no longer be considered potentially COVID19 positive.

17. DESCRIBE THE PLAN TO COHORT OR ISOLATE RESIDENTS DIAGNOSED WITH COVID-19 IN ACCORDANCE WITH [PA-HAN-509](#) PURSUANT TO SECTION 1 OF THE *INTERIM GUIDANCE FOR SKILLED NURSING FACILITIES DURING COVID-19*.

At Mifflin Court, if a resident would test COVID19 positive, they will be quarantined to their room and monitored for the duration of time needed (14 days) to no longer be COVID19 positive.

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)

Mifflin Court currently has an adequate supply of all PPE required. Genesis has people specifically designated to procure PPE, and updated inventory sheets are sent to Genesis' procurement daily.

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

Mifflin Court has an emergency staffing plan that can be implemented if necessary. Mifflin Court continues staff recruitment efforts to maintain staffing levels.

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

If at any point Berks County would revert back to the Red Phase, we would have to immediately revert back to the restrictions outlined in the Red Phase as well. Mifflin Court will notify all residents and families of the reinstatement of restrictions as needed.

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.

21. RESIDENTS

All Mifflin Court residents are screened (at least) 2 times per day for signs and symptoms of COVID19. Anyone who triggers for COVID19 indicators will have a change in condition completed and the physician will be notified to see if testing is required. Mifflin Court will isolate the resident to address the possible exposure risk.

22. STAFF

Staff are screened at the beginning of their shift for signs and symptoms of COVID19, including having their temperature taken. Any staff member that would develop signs or symptoms during their shift would immediately stop direct care and would exit the facility. In addition, Mifflin Court has universally tested our entire staff twice with all results being negative for COVID19. Mifflin Court will move to a testing frequency of 1-4 weeks based on prevalence of COVID19 in the community. All staff are asked not to work if they are not feeling well, are sick, or are symptomatic of COVID19

23. HEALTHCARE PERSONNEL WHO ARE NOT STAFF

Healthcare Personnel are screened at the beginning of their shift for signs and symptoms of COVID19, including having their temperature taken. Any Healthcare personnel that develops signs or symptoms during their shift will immediately stop direct care and exit the facility. They are also being tested for COVID19 on the same schedule as Mifflin Court's staff and residents.

24. NON-ESSENTIAL PERSONNEL

Non-Essential personnel are screened at the beginning of their shift for signs and symptoms of COVID19, including having their temperature taken. Any Non-Essential personnel that develops signs or symptoms of COVID19 during their shift would immediately stop direct care and exit the facility.

25. VISITORS

Visitation will occur on the outside patio and will be scheduled in advance. Any Visitor who is scheduled for a visit will be screened for signs and symptoms of COVID19, including having their temperature taken prior to the resident being able to visit with them.. The screening will take place outside and the visitor will not be permitted in the building. Any visitor must wear a mask, must maintain the 6 feet of social distancing, and may not have any physical contact with the resident. If a visitor would screen positive for signs and symptoms of COVID19, the visitor will be asked to leave and follow up with their medical provider, and will be asked to reschedule their visitation for a different time. In order to reschedule they will have to be symptom free for 72 hours without the use of fever reducing medication and be 14 days post the onset of symptoms.

26. VOLUNTEERS

Center does not use volunteers at this time.

Communal dining is the same for all steps of reopening so there is no need to differentiate among the three steps.
27. DESCRIBE COMMUNAL DINING MEAL SCHEDULE, INCLUDING STAGGERED HOURS (IF ANY)
Meals will continue to be provided in the residents rooms.
28. DESCRIBE ARRANGEMENT OF TABLES AND CHAIRS TO ALLOW FOR SOCIAL DISTANCING
as above
29. DESCRIBE INFECTION CONTROL MEASURES, INCLUDING USE OF PPE BY STAFF

Staff will continue to universally wear masks and goggles throughout the meal and assist residents as necessary.

30. DESCRIBE ANY OTHER ASPECTS OF COMMUNAL DINING DURING REOPENING

as above

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.

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

Activities will be held in our activity room, which can support 5 residents at the time following the 6 feet of social distancing. Activities will include bingo, floor exercise, random trivia, etc.

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

Due to Mifflin Court's floor plan, space for more than 5 residents is not possible.

33. DESCRIBE ACTIVITIES PLANNED FOR STEP 3

Same as above

34. DESCRIBE OUTINGS PLANNED FOR STEP 3

Outings would only be permitted if COVID19 is completely eliminated from the community to limit risk of resident exposure. Outings would be limited to the number of residents who could safely be transported while being socially distanced.

In Step 2, non-essential personnel deemed necessary by the facility are allowed (in addition to those already permitted in Section 4 of *Interim Guidance for Skilled Nursing Facilities During COVID-19*). In Step 3, all non-essential personnel are allowed. Screening and additional precautions including social distancing, hand hygiene, and universal masking are required for non-essential personnel.

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

Clergy
Podiatry
Dentist
Optometrist
Pain Management
Psychology
Personal Physicians
Urgent repair/maintenance needs

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

Any non-essential personnel entering the building is educated on social distancing, hand hygiene and universal masking upon entry.

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 have access to any resident presumed to be COVID19 positive.

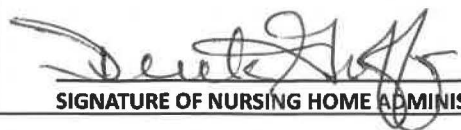
VISITATION PLAN	
<p>For visitation to be permitted in Steps 2 and 3 of reopening (as described in Section 6 of <i>Interim Guidance for Skilled Nursing Facilities During COVID-19</i>), the following requirements are established. Screening and additional precautions including social distancing, hand hygiene, and universal masking are required for visitors.</p>	
<p>38. DESCRIBE THE SCHEDULE OF VISITATION HOURS AND THE LENGTH OF EACH VISIT</p> <p>Visitation would occur between the hours of 9:30 a.m., and 11:00 a.m., Monday thru Friday. One visit will be allowable per 15 minute time slot. Visits will be 15 minutes each to allow time for proper cleaning and disinfecting between visits.</p>	
<p>39. DESCRIBE HOW SCHEDULING VISITORS WILL OCCUR</p> <p>Residents and/or family members allowed to visit can schedule their visit by calling 610-796-1600 and scheduling at time with our receptionist (Isee #38 above). Please note* no pets are allowed to visit due to potential COVID19 exposure.</p>	
<p>40. DESCRIBE HOW VISITATION AREA(S) WILL BE SANITIZED BETWEEN EACH VISIT</p> <p>Staff will sanitize all furniture and other areas that may have been touched during visitation (including elevator during transport, door handles, etc). Staff will also assist with hand hygiene with residents.</p>	
<p>41. WHAT IS THE ALLOWABLE NUMBER OF VISITORS PER RESIDENT BASED ON THE CAPABILITY TO MAINTAIN SOCIAL DISTANCING AND INFECTION CONTROL?</p> <p>Mifflin Court would like to be able to effectively manage up to 2 visitors per visit. More than 2 visitors at a time will need to be approved due to potential visitation space limitations.</p>	
<p>42. DESCRIBE THE ORDER IN WHICH SCHEDULED VISITS WILL BE PRIORITIZED</p> <p>Scheduled visits will be prioritized for residents who may benefit the most from a visit from family and friends. Visits will be scheduled based on time slot availability.</p>	
S T E P 2	<p>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)</p> <p>Only residents who are COVID19 negative will be allowed to have outside visitation with their family and loved ones.</p>
	<p>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</p> <p>The outside visitation area is a covered patio to the immediate left of the front entrance, which primarily keeps residents out of the elements.</p>
	<p>45. DESCRIBE HOW A CLEARLY DEFINED SIX-FOOT DISTANCE WILL BE MAINTAINED BETWEEN THE RESIDENT AND THE VISITOR(S) DURING OUTDOOR VISITS</p> <p>Visit will be monitored to ensure that proper social distancing takes place. Center will also place chairs, tables, and/or "rope off" areas to maintain 6 feet of separation.</p>
	<p>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</p> <p>To comply with safety and potential COVID19 exposure measures, Indoor visitation is not permitted at this time.</p>
	<p>47. DESCRIBE HOW A CLEARLY DEFINED SIX-FOOT DISTANCE WILL BE MAINTAINED BETWEEN THE RESIDENT AND THE VISITOR(S) DURING INDOOR VISITS</p> <p>N/A at this time</p>
S T	<p>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)</p>

E p 3	49. WILL OUTDOOR VISITATION BE UTILIZED AT STEP 3? IF NO, SKIP TO QUESTION #52
	Outdoor visitation will be the preferred method of visitation at this time.
	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	
Memory Support visitation will be window or patio door visits.	

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 are not planned to be utilized at this time
56. DESCRIBE THE DUTIES TO BE PERFORMED BY VOLUNTEERS DURING STEP 2
Same as above.

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
Derek Groff, Mifflin Court Personal Care Home Executive Director
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.



SIGNATURE OF NURSING HOME ADMINISTRATOR

07/08/2020

DATE

Outdoor Visitation

July 2, 2020

Updates to this Guidance (first issued on May 29, 2020 and updated on June 4 and June 24) are in red italics.

Recognizing the significant burden of a no visitation policy, Genesis has sought approaches to permit visitation under certain well-defined circumstances, while continuing to protect our residents from potential exposure to coronavirus, and while remaining in compliance with CMS requirements. Outdoor visitation presents a potential solution, and Genesis will permit this according to the following expectations.

Before the Visit:

- Outdoor space must be designated that will permit visitors to access the dedicated visit space without entry into the building.
 - Interior courtyard space may be used for Outdoor Visits **only** if the Courtyard is **directly accessible from the main Lobby** without having to cross through any other areas of the building or **from the exterior of the facility**.
 - Visitors must be screened before entering the Lobby to pass through to the Courtyard.
 - Visitors who access the Courtyard from the exterior (where such access is available) must be screened before entering the Courtyard.
- Visitation must be scheduled in advance, to ensure that the outdoor space can safely accommodate, and also to allow staff to plan to transport the resident safely to the visitation spot. It would be advisable to schedule block time for visits given the limitation on space and in consideration for other residents and their visitors.
- Seating for residents and visitors must be physically separated by > 6 feet by a barrier, such as a large table (or two tables side by side), to ensure that closer contact does not occur.
- Visitation is only appropriate for asymptomatic COVID-negative (including COVID-recovered) residents.
 - Asymptomatic, COVID-negative residents who regularly travel out for medical appointments or treatments (such as dialysis) who reside in a private room on or off the AQU may participate in outdoor visitation according to this guidance.
 - These residents must wear a disposable surgical mask at all times when out of their rooms including for outdoor visitation.
 - Residents who are COVID-positive are not appropriate for outside visitation, until their transmission-based precautions have been discontinued.
- Resident access to the visitation area may not involve crossing through any units of a different COVID status as the resident's home unit (COVID-naive or COVID-recovered).

Outdoor Visitation

July 2, 2020

Resident Movement to the Visitation Area:

- Residents must wear a cloth face mask to/from the visitation area, while also maintaining social distance from other residents. (As stated above, residents who travel out regularly for medical appointments or treatments, such as residents receiving dialysis, must wear a surgical mask.)
- Staff assisting residents to/from the visitation area must wear standard facemasks and eye protection.
- Each resident to access the visitation area one at a time.
- Social distancing practices must be followed during entry and exit
- When access to the outside requires use of the elevator:
 - Residents must be assisted by staff;
 - Residents may cross only through units that have the same COVID status as the resident's home unit (such as COVID-naive or COVID-resolved);
 - Transport only one resident at a time in the elevator;
 - Assist residents with hand hygiene before and after using the elevator;
 - Allow time to clean/disinfect high touch elevator surfaces with an EPA-approved disinfectant on List N (i.e. elevator floor button, handrails) between each use.

During the Visit:

- Visitors must be screened for symptoms and temperature with findings recorded in the Visitation Log. Any visitors who screen positive must be rescheduled to a future date.
- Residents must wear cloth face masks.
- Visitors must wear cloth face masks.
- **Visitation must be supervised by a member of the facility staff, to help remind visitors and residents of the importance of adhering to physical separation, and to ensure face masks are worn at all times during the visit.**
- *Visitors must maintain social distancing at all times.*
- *Physical contact such as hugging, although desired by many families and residents, is high risk and should not be allowed.*
- The table and chairs used for the visit must be disinfected with an approved EPA List N disinfectant between residents.



Order of the Secretary of the Pennsylvania Department of Health Requiring Universal Face Coverings

COVID-19 is a contagious disease that is rapidly spreading from person to person. People infected are capable of exposing others to COVID-19 even if their symptoms are mild, such as a cough, or even if they are asymptomatic. Additionally, exposure is possible by touching a surface or object that has the virus on it and then touching one's mouth, nose, or eyes. Symptoms of COVID-19 may include fever, cough, shortness of breath, chills, repeated shaking with chills, muscle pain, headache, sore throat, and new loss of taste or smell. Early symptoms may also include chills, body aches, sore throat, headache, diarrhea, nausea or vomiting, and runny nose. Older adults and people who have serious chronic medical conditions are at a higher risk for serious illness.

The first cases of COVID-19 were reported in the United States in January 2020. Since then, multiple areas of the United States have experienced "community spread" of COVID-19, meaning that the illness is being transmitted through unknown contact, and not from contacts with known cases. On March 6, 2020, after the first cases of COVID-19 in the Commonwealth of Pennsylvania were confirmed, the Governor issued a Proclamation of Disaster Emergency. Since that date, the number of positive cases has continued to rise, and community spread has continued in the Commonwealth as well. Case counts rapidly increased throughout the Commonwealth in March and April, 2020. As of July 1, 2020, every county in the Commonwealth has been affected, the number of cases is 87,242, and 6,687 individuals have died from COVID-19.

In order to slow the spread and protect the people of the Commonwealth, the Governor and I issued Orders on March 19, 2020, closing all Commonwealth businesses that are not life sustaining. See *Order of the Governor of the Commonwealth of Pennsylvania Regarding the Closure of All Businesses That Are Not Life Sustaining*, as amended; *Order of the Secretary of the Pennsylvania Department of Health Regarding the Closure of All Businesses That Are Not Life Sustaining*, as amended. On April 1, 2020, the Governor and I issued Orders directing all individuals in Pennsylvania to stay at home. See *Order of the Governor of the Commonwealth of Pennsylvania for Individuals to Stay at Home*, as amended; *Order of the Secretary of the Pennsylvania Department of Health to Stay at Home*, as amended.

In addition, I issued an Order on April 15, 2020, requiring mitigation measures to be applied at businesses that are permitted to engage in in-person operations, including a requirement that all customers wear masks while on premises of businesses that serve the public within a building or a defined area and directs businesses to deny entry to individuals not wearing masks, unless the business is providing medication, medical supplies, or food, in which case the business must provide alternative methods of pick-up or delivery of such goods. Individuals who cannot wear a mask due to a medical condition (including children under the age of 2 years per CDC guidance) are permitted to enter the premises and are not

required to provide documentation of such medical condition. *See Order of the Secretary of the Pennsylvania Department of Health Directing Public Health Safety Measures for Businesses Permitted to Maintain In-person Operations.*

Those mitigation efforts slowed the spread of the disease, protected our hospitals from being overwhelmed, and enabled our hospitals to care for our ill residents. Accordingly, in Orders on May 7, 2020, the Governor and I suspended restrictions for certain areas instituted in the orders on March 19, 2020, as amended, and April 1, 2020, as amended. *See Order of the Governor of the Commonwealth of Pennsylvania for Limited Opening of Business, Lifting of Stay at Home Requirements, and Continued Aggressive Mitigation Efforts, as amended; Order of the Secretary of the Pennsylvania Department of Health for a Limited Opening of Businesses, Lifting of Stay Home Requirements and Continued Aggressive Mitigation Efforts, as amended.*

These mitigation strategies, practiced by all persons in the Commonwealth, have been successful in slowing the spread of the virus, and have allowed the phased and considered reopening of the Commonwealth, *see Order of the Governor of the Commonwealth of Pennsylvania for the Continued Reopening of the Commonwealth* of May 27, 2020, as amended; *Order of the Secretary for the Continued Reopening of the Commonwealth* of May 27, 2020, as amended. Person-to-person spread does continue however, and with the reopening, the Commonwealth is beginning to see increases in new cases. Mindful of the need to slow this increase, in order to avoid the types of stringent Commonwealth-wide mitigation strategies that were discontinued a short time ago, and in order to avoid the resurgence that is overwhelming the health care systems and public health systems in other states, I am ordering that all persons in the Commonwealth wear face coverings in accordance with this Order. Face coverings can decrease the spread of respiratory droplets from people. *See <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover-guidance.html#recent-studies>.* When used in public settings, face coverings will work to reduce the spread of COVID-19 in the Commonwealth.

COVID-19 is a threat to the public's health, for which the Secretary of Health may order general control measures, including, but not limited to, closure, isolation, and quarantine. This authority is granted to the Secretary of Health pursuant to Pennsylvania law. *See* section 5 of the Disease Prevention and Control Law, 35 P.S. § 521.5; sections 2102(a) and 2106 of the Administrative Code of 1929, 71 P.S. §§ 532(a), and 536; and the Department of Health's regulations at 28 Pa. Code §§ 27.60-27.68 (relating to disease control measures; isolation; quarantine; movement of persons subject to isolation or quarantine; and release from isolation and quarantine). Particularly, the Department of Health has the authority to take any disease control measure appropriate to protect the public from the spread of infectious disease. *See* 35 P.S. § 521.5; 71 P.S. § 532(a), and 1403(a); 28 Pa. Code § 27.60.

Accordingly, on this date, July 1, 2020, to protect the public from the spread of COVID-19, I hereby order:

Section 1: Face Coverings Defined

“Face covering” means a covering of the nose and mouth that is secured to the head with ties, straps, or loops over the ears or is wrapped around the lower face. A “face covering” can be made of a variety of synthetic or natural fabrics, including cotton, silk, or linen. For purposes of this order, a face covering includes a plastic face shield that covers the nose and mouth. “Face coverings” may be factory-made, sewn by hand, or be improvised from household items, including but not limited to, scarfs, bandanas, t-shirts, sweatshirts, or towels. While procedural and surgical masks intended for healthcare providers and first responders meet these requirements, such as N95 respirators, these specialized masks should be reserved for appropriate occupational and health care settings.

Section 2: Face Coverings Required

Except as provided in Section 3, individuals are required to wear face coverings if they are:

- A. outdoors and unable to consistently maintain a distance of six feet from individuals who are not members of their household;
- B. in any indoor location where members of the public are generally permitted;
- C. waiting for, riding on, driving, or operating public transportation or paratransit or while in a taxi, private car service or ride-sharing vehicle;
- D. obtaining services from the healthcare sector in settings including, but not limited to, a hospital, pharmacy, medical clinic, laboratory, physician or dental office, veterinary clinic, or blood bank; or
- E. engaged in work, whether at the workplace or performing work off-site, when interacting in-person with any member of the public, working in any space visited by members of the public, working in any space where food is prepared or packaged for sale or distribution to others, working in or walking through common areas, or in any room or enclosed area where other people, except for members of the person’s own household or residence, are present when unable to physically distance.

Section 3: Exceptions to Face Covering Requirement

- A. The following are exceptions to the face covering requirement in Section 2:
 - i. Individuals who cannot wear a mask due to a medical condition, including those with respiratory issues that impede breathing, mental health condition, or disability;

- ii. Individuals for whom wearing a mask while working would create an unsafe condition in which to operate equipment or execute a task as determined by local, state, or federal regulators or workplace safety guidelines;
 - iii. Individuals who would be unable to remove a mask without assistance;
 - iv. Individuals who are under two years of age;
 - v. Individuals who are communicating or seeking to communicate with someone who is hearing-impaired or has another disability, where the ability to see the mouth is essential for communication;
- B. Individuals are not required to show documentation that an exception applies.

Section 4: Prior Orders

This Order is intended to be read in concert with my Order Relating to Public Health Safety Measures for Businesses Permitted to Maintain In-person Operations, dated April 15, 2020, and with the Governor's and my Orders for the Continued Reopening of the Commonwealth, dated May 27, 2020.

Section 5: Effective Date

This Order is effective immediately and will remain in effect until further notice.



Rachel Levine, MD
Secretary of Health