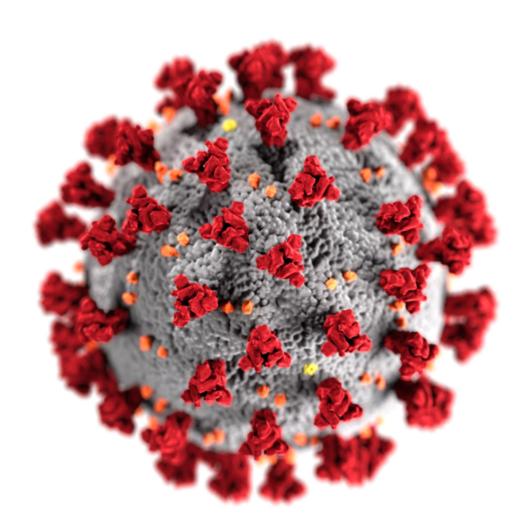


AFFORDABLE HOUSING

CORONAVIRUS DISEASE 2019 (COVID-19) LEVEL 5 PLAYBOOK





Coronavirus disease 2019 (COVID-19) is a respiratory illness that can spread from person to person. The virus that causes COVID-19 is a novel coronavirus that was first identified during an investigation into an outbreak in Wuhan, China.

For the health and safety of our senior residents, clients and staff we have imposed the highest level of precaution in every setting where we serve seniors based on the recommendations of the Centers for Disease Control and Prevention (CDC).

In the event that a resident or employee tests positive for COVID-19, or suspects a potential diagnosis, we want you to know exactly what steps will and should be taken to protect the health and wellbeing of everyone at your community. It is our hope that this clear step-by-step guide will help direct you and remove some of the uncertainty we are all experiencing during this stressful time.



Key Information and Where to Find It

Documentation and protocols mentioned in this resource are located on the Cornerstone in the COVID-19 Resource Library.

To ensure you are viewing the most current information, please continually visit the library.





COVID-19 Resource Library Location

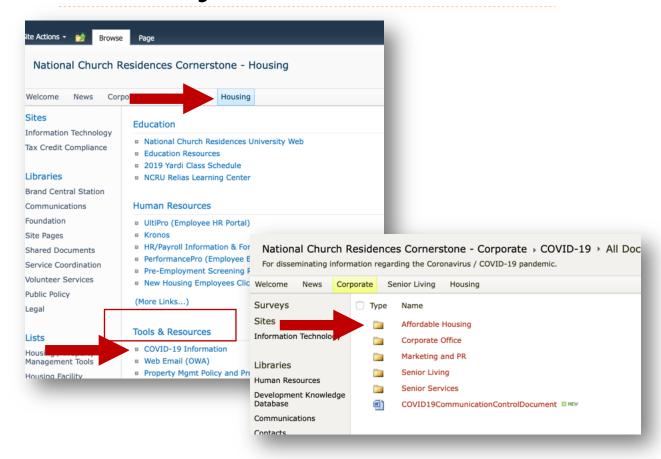


Table of Contents

Overview	2-5
Suspected Case	6-8
Confirmed Case Communication Protocol	9-22
Staff	23-32
Cleaning and PPE	33-35
Restrictions and Screening	36-39
Outbreak	40-49
Community Spaces	50-52
Media	53-54
Workflow	55-56



SUSPECTED CASE

Verifying Your Resident Has Tested Positive for COVID-19



Suspected Case

What should you do if you become aware of a possible COVID-19 case?

FIRST: Notify your RPL

SECOND: Contact the Support Hotline

Visit: https://COVID19support.ncr.org

Call: 844-STOPC19 (786-7219)

Email: Covid19SupportHotline@nationalchurchresidences.org

THIRD: Begin fact finding

Suspected Case CAPTURING INFORMATION/FACT FINDING

What information is helpful when confirming a positive COVID-19 case?

Did the resident receive confirmation from a doctor/hospital of their status?

Where did the resident get tested for COVID-19?

Are they hospitalized or quarantined at home/facility?

Can family member confirm?

What areas of the community did they recently visit?

Who have they have been in "close contact" with within the prior two weeks (a person that has been within six feet of the potentially infected individual)?

Contact your RPL for additional suggestions.





Resident Has a Medically
Confirmed COVID-19
Positive Test Result
Response Plan





When a case is confirmed please take the following actions:



Visit: https://COVID19support.ncr.org

Call: **844-STOPC19** (786-7219)

Email: Covid19SupportHotline@nationalchurchresidences.org

Contact your RPL

The following information must be collected in preparation of the calls:

- Resident or Employee Name
- Property Name
- Unit Number
- Date of diagnosis
- Who have they have been in "close contact" with within the prior two weeks (a person that has been within six feet of the infected individual).
- Staff and Support Hotline will remain in contact to record case milestones (issuance of resident letters, resident/employee return from the hospital, closed case).
- Complete the COVID-19 Site Checklist for Positive Cases form (Cornerstone: COVID-19 Resource Library)





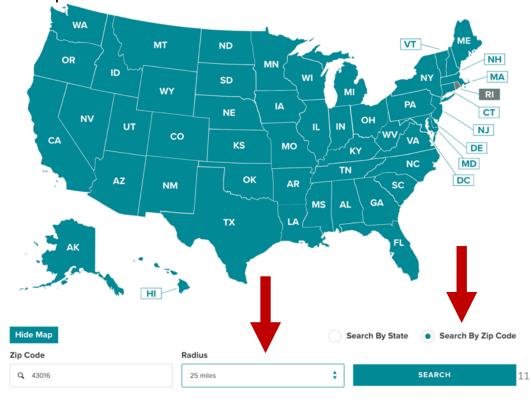
Notify your local Health Department of a Positive COVID-19 Case

The link below will direct you to an online tool to help you search local health departments in your area.

Directory of Local Health Departments

https://www.naccho.org/membership/lhd-directory?searchType=zipCode&lhd-zip=43016#card-filter (copy paste this web address in your browser, if the link above does not work)

Search Tip: Search by zip code and select 25 miles from the radius drop-down list.





Confirmed COVID-19 Positive Resident Response

✓ If our resident is found to be COVID-19 positive by their doctor or a hospital, we request that he or she immediately contact the management office. If the resident is in the hospital, please have family or the hospital call the building management office as soon as possible. The local or state board of health should also notify the office, but there may be a delay in this notification.

Staff Residents Non-Confirmed/Potentially Exposed

Continue Level 5 Plan Monitor Health

Direct Exposure

- ✓ Will immediately enter a 14-day quarantine and will monitor and report immediately any symptoms of COVID-19; fever of 100 degrees or greater, sore throat, cough or shortness of breath.
- ✓ Notify your supervisor and the COVID-19 Hot Line.
- ✓ Quarantined staff are encouraged to keep in close communication with their RPL during this time

Non-Direct Exposure

Employees will be asked to remain working unless they develop a fever greater than 100°F and/or symptoms of cough or shortness of breath. If employees develop these symptoms, they should 1) not come to work, 2) call their doctor and 3) call their supervisor.

Continue Level 5 Plan Monitor Health

✓ We will be instructing residents to self-quarantine for 14 days from the diagnosis date (isolate themselves in their apartments and not leave) or until the local or state health department provides guidance regarding who can discontinue this quarantine. Staying in apartments is the single best way for them to protect themselves and their neighbors. Residents should watch for fever, shortness of breath or worsening cough. Now would be a good time to encourage residents to set extra food and supplies back in case this happens.

What does "direct exposure" mean?

"Direct Exposure" has been defined by the CDC to mean (a) being within 6 feet, for a prolonged period of time, of a COVID-19 case (for example: meeting with, visiting, or living with a COVID-19 case) — or — (b) having direct contact with infectious secretions of a COVID-19 case (for example: being coughed on, sneezed).

Employees should take great care to avoid Direct Exposure.





When a resident or employee has tested positive for COVID-19, <u>notify all residents</u> someone has been diagnosed at the property. Date the letter and make hard copies for all the residents. Feel free to notify employees with this letter as well.

When the letter is sent, many residents will want to know who tested positive. Due to confidentiality, we cannot share names with them, but the infected person has been instructed to isolate in their unit for two weeks from the date they were diagnosed. In addition, our existing protocol doesn't change for other residents, regardless whether they were in close contact with the infected person: Stay in their units, discourage visitors, Wash their hands frequently, and Maintain social distancing.

To view a sample notification letter, please visit the COVID-19 Resource Library.



Monitoring Resident

MONITORING HEALTH AND VISITORS

During a resident's illness, a staff member will continually call to check if the resident is still experiencing COVID-19 symptoms (fever, cough and shortness of breath).

We will permit family caregivers entry into the building to tend to the resident's needs, such as delivering groceries, medications and other items.

The CDC recommends visitors to the ill resident's apartment wear a facemask, gloves and gown/apron. Caregivers should keep a distance of at least 6 feet.

Refer to the Resource Library for recent guidelines.





Returning Resident

RESIDENT RETURNS FROM HOSPITALIZATION

In cases where a resident returns from hospitalization, please send a letter highlighting the community's current Level 5 status and isolations requirements and our commitment to the resident.

To view a sample return letter, please visit the COVID-19 Resource Library.





During this time it is important residents receive alerts in a language and format they understand to make well-informed decisions during this pandemic.

Please visit the Cornerstone's COVID-19 repository to access translated notifications.

If you require a notification in a language not available on Cornerstone, please request your RPL contact the COVID-19 Support Hotline.







Over the last several months, the availability of testing has increased in many of the areas of the country. As a result, we are encouraging all sites to proactively pursue mass resident testing at their respective facilities. Various options for mass testing could include partnering with the local health department or an authorized provider, promoting a local drive-up test location or becoming a mobile test location.

Please visit the Affordable Housing COVID-19 folder on Cornerstone for guidance on pursuing mass resident testing.

In that folder, you will also find a pre-drafted letter template for you to send to your local health department alerting them of our interest in becoming a mobile COVID-19 testing location.





Move-in/Move-Out & Rent Protocols

Move in and Move out: Individuals assisting residents moving in or moving out of their apartment will be required to follow the visitor screening protocol before they will be permitted to enter the facility. Please insure the Moving Procedures during COVID-19 policy on PPG continues to be followed.

Rent Protocols: The Rent Collections During COVID-19 and the COVID-Rental Concessions policies that are in PPG are set to expire July 31, 2020. If either receives an extension beyond that date, it will be properly communicated via our compliance department. At this time, they are not being extended.



Mail/Package Delivery

All package deliveries, including resident medications may be delivered as normal or per the requirements of the delivery company. Managers can also establish a designated safe zone for all such package deliveries, as needed.



Employee Tests Positive

WHAT IF AN EMPLOYEE TESTS POSITIVE?

- Call the COVID-19 SUPPORT HOTLINE at 1 844 STOPC19 (844-786-7219)
- Contact your RPL and immediate supervisor
- Send a Resident Letter refer to page 14 for more details and visit the <u>Cornerstone</u>: <u>COVID-19 Resource Library</u> for single and multiple case letters.
- Call Sedgwick to request a leave of absence (888.436.9530)
- Self-Quarantine until:
 - At least 3 days (72 hours) have passed since recovery
 - Resolution of fever without the use of fever-reducing medications;
 and,
 - Improvement in respiratory symptoms (e.g., cough, shortness of breath); and,
 - At least 7 days have passed since symptoms first appeared
- A returning employee will continue to complete the screening process on a daily basis, upon return.
- It is the role of the local or state health department to determine if there is a risk to other employees working or residents living in your building. We will help these experts perform this important investigation in any way that we are asked.

What is the process for the paid leave?

If determined that employee should be considered for up to 2-weeks of paid leave, please follow the steps below:

- Employee informs manager of request for leave or is instructed to self-quarantine.
- 2. Manager directs employee to contact Sedgwick (888.436.9530) to initiate leave process.
- 3. Manager notifies Benefits (<u>benefits@nationalchurchresidences.org</u>; 614.273.3586).
- 4. Benefits codes the paid leave into the respective timekeeping system.





Tracking Cases

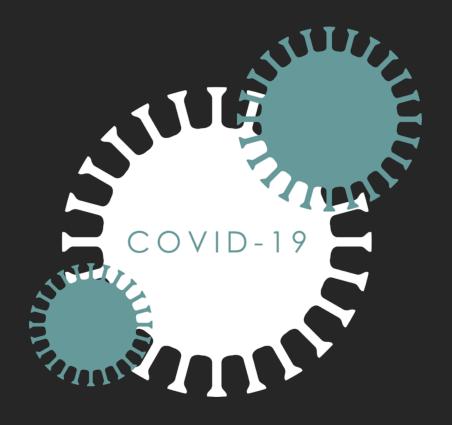
- Information and details related to confirmed COVID-19 cases will be tracked by the COVID-19 Support Team, once a case has been submitted through the support site.
- RPLs and managers will remain in contact with the Support Hotline to record case milestones (issuance of resident letters, resident/employee return from the hospital, closed case).
- Tracking an ill employee/resident will conclude when:
 - 7 days has passed since the initial symptoms started;
 - 72 hours has passed since resolution of fever and respiratory symptoms have improved;
 - A signed doctor's note saying they are free from the virus and can return to work (if an employee);
 - 2 negative tests at least 24 hours apart; or
 - Resident passes away

Support Hotline

Visit: https://COVID19support.ncr.org (possible or confirmed cases only)

Call: 844-STOPC19 (786-7219)

Email: Covid19SupportHotline@nationalchurchresidences.org



STAFF

Additional Staff Protocol



What Can You Do to Prevent the Spread?

Social distancing, wearing of masks and frequent hand washing has proven to slow the spread of COVID-19



Good hand washing with soap and water for 20 seconds

 If Hands are visibly soiled- wash hands versus using alcohol base hand sanitizers



If soap and water are not readily available, **use a hand** sanitizer that contains at least 60% alcohol. Rub hands for at least 30 seconds



Make sure hand hygiene products are well-stocked and available



As testing has become more widely available, we encourage employees to get tested for the COVID-19 virus — especially since recent increased testing has indicated that approximately 20% to 25% of those tested are asymptomatic.

If an employee tests positive, please refer to page 21 of the playbook to review next steps.



Flexible Schedule with the <u>Work from Home</u> option is suspended.

The standard Flexible Schedule protocol as outlined in the Employee Handbook is still available for usage. Stagger/adjust staff schedules to avoid crowding. Supervisors can stagger schedules to minimize the number of staff in one area at a time while ensuring resident needs are still being met.



Travel and Business Meetings

Limit business travel. Limit your airplane and train travel to those situations where business cannot reasonably be conducted without face to face interaction or visits. There are no restrictions on car travel at this time. Any special assignment for a SWAT, RML or another site employee that requires airplane travel, must be approved by the Regional VP and/or VP of Property Management.

Limit in-person business meetings. When possible meetings shall be conducted via teleconference or video conferencing. Face-to-face meetings will be restricted to those circumstances that are not conducive to phone or video to effectively conduct business. If a face-to-face business meeting is deemed necessary, social distancing protocols will be required, including mask wearing and sanitizing the used meeting space.



Property Manager

SOCIAL DISTANCING

Social Distancing protocols for resident meetings should continue. The CDC's social distancing guidelines states to maintain a distance of six feet from others. If that social distancing cannot be accomplished within the office, then please conduct any necessary resident meetings in the community room or an unused manager's apartment. Use of masks and desk shields are required if resident meetings are conducted in the manager's office, as well as the sanitizing of the meeting area after usage.

Leasing and recertification shall continue with social distancing protocols as normal. Social distancing protocols are required including use of masks, desk shields, the community room, and the required sanitizing of the meeting area after usage. Please reference the Annual Recertification Process for Social Distancing policy on PPG, as needed.

Regular Property Management/Service Coordination Check-ins with Residents by Phone will continue as schedule allows.



Service Coordination

FULL DUTIES RESUME

The Service Coordinator's (SC) full duties will resume. This will include the resumption of all Care Guide documentation requirements. Quality Assurance reviews will be adjusted for the impact of COVID-19 for the remainder of 2020. Service coordinators with questions on these adjustments should contact Quality Assurance at:

<u>qualityassurance@nationalchurchresidences.org</u> 614-233-2146

Continuation of assessments via the phone is highly recommended. If deemed necessary, and a face-to-face meeting is required, it must include social distancing protocols, such as use of masks, desk shields, utilizing the community room or vacant manager's unit for meetings, if needed, and the required sanitizing of any meeting area after usage.

Ensure the hosting and implementation of educational/wellness/social programs follow our COVID-19 small gathering protocols as outlined above. SCs must be present for these management sponsored events to ensure social distancing protocols are maintained.

Service coordinator is required to assist the staff with the sanitizing of the community space, post any management sponsored event that they may host.

Regular Property Management/Service Coordination Check-ins with Residents by Phone will continue as schedule allows.





Maintenance

FULL DUTIES RESUME

Maintenance staff will resume the performance of their duties as normal including but not limited to work orders, unit turns, cleaning, preventative maintenance, etc. However, additional precautions with social distancing practices should be implemented. That includes but is not limited to, use of masks, gloves, frequent hand washing and insuring 6ft social distancing. Please reference the *Maintenance Social Distance Best Practice Protocols* in the COVID-19 folder on Cornerstone.

Postponed COVID-19 Work Orders. All previously postponed COVID-19 service requests shall be completed by September 30, 2020. If additional time is needed beyond that date, RPL approval will be required.

Annual resident unit inspections will resume per the standard protocol.

Additional precautions with social distancing practices will be implemented that includes but is not limited to, use of masks, gloves, frequent hand washing and insuring 6ft social distancing. All missed unit inspections that should have taken place in the second quarter are required to be brought current on or before September 30, 2020. If additional time is needed beyond that date, RPL approval will be required. Please reference the *Maintenance Social Distance Best Practice Protocols* in the COVID-19 folder on Cornerstone.

Unit inspections and standard service work order requests are not required to be completed for any resident during the time they are under self-quarantine due to being COVID-19 positive. Once the resident has been cleared, unit inspections and service requests are to resume within 14 days of their confirmed clearance date. However, emergency work orders that pose a health and safety threat are still required to be completed. Please work with your manager and RPL on how best to address when this is necessary.



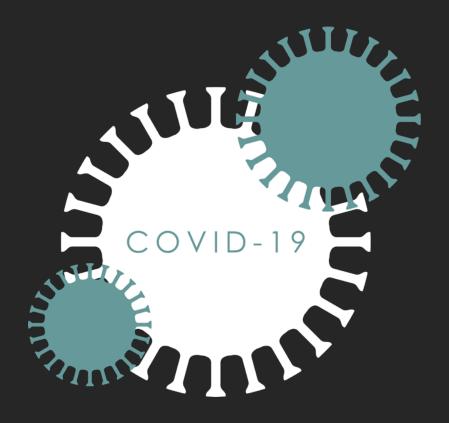
Feeling Concerned? Want Someone to Talk To?

Employee Assistance Program Partner: Magellan Ascend | 800.523.5668

Chaplain (Spiritual Support) 1.888.767.3613

Benefits & Wellbeing Manager
Joanna Mayer
614.273.3754

Please contact your RPL for information on weekly employee prayer meetings during this extraordinary time.



CLEANING & PPE

Cleaning Protocol

Personal Protective Equipment



Standard cleaning of the facility is to be handled per the site's precovid19 cleaning protocols and schedule, and with the person originally required to complete this task. Standard cleaning includes, but is not limited to, vacuuming, sweeping, mopping, etc.

Disinfecting the facility to minimize the spread of COVID-19 is an additional task and is required to be an equally shared responsibility, between all staff members, unless that site has a dedicated janitor or housekeeper. If the site has a dedicated person for this task, that employee or person will be required to continue the standard cleaning per the site's normal pre-COVID-19 schedule, along with completing the additional task consisting of disinfecting *critical or high touch surfaces*, Disinfecting should continue to occur at least twice daily on scheduled work days.

For sites with no dedicated janitor or housekeeper, the Property Managers is required to create and implement a **Shared Disinfecting Schedule** for all facility employees to participate in. This shared disinfecting schedule will focus on wiping down *critical or high touch surfaces*, such as elevator doors and buttons, common area doors and handles, handrails, counter tops, etc. These *critical or high touch surfaces* in the common areas should be identified at each facility and outlined in the shared sanitizing schedule, for completion at least twice daily on scheduled work days.

Refer to the Resource Library for detailed cleaning protocols.





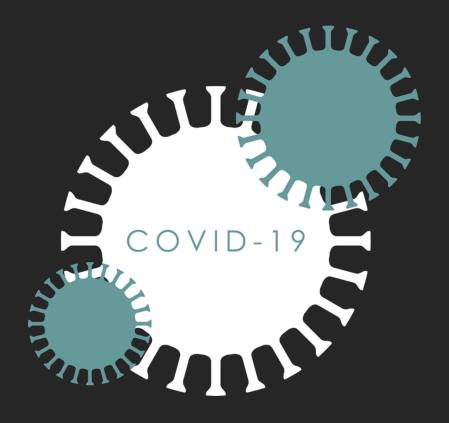
Personal Protective Equipment (PPE)

Employees are required to practice enhanced infection control measures, while on duty.

Wear masks and gloves in the common areas or when entering units or when in close physical contact with residents, staff or other authorized visitors. Wash hands frequently.

Do not pass or share technology such as iPads, laptops, cell phones, etc.

Conduct bi-weekly inventory of Personal Protective Equipment and supplies. We recommend that you maintain a one-month supply of PPE inventory. That recommended inventory includes gloves and masks for employees, as well as hand sanitizer. If a restock order is required that exceeds your spending limit and/or budget, please consult your RPL.



RESTRICTIONS and SCREENING

Community Entrance,
Restricted Visitations and
Screening

Screening and PPE

General Visitors: Please limit visitors to individuals that are life essential to the resident. Life essential individuals can include professional home health care, health care providers, spiritual care, families of a resident in an end of life situation and/or government officials.

Masks: All "essential" visitors and vendors must wear masks within the facility. We encourage the use of the sanitizing stations as well.

Vendors: Only health and safety vendors will be permitted and vendors providing essential services for the facility or to prepare a unit for a new resident. Special Assignment vendors (as preapproved by Central Office/RVP) will be required to confirm their COVID-19 protocols, in advance of their visit.



Daily screening of employees and all vendors: All staff and exempted vendors will be required to perform a DAILY infection prevention self-screening prior to entry. Screening will include completion of a screening questionnaire that will ask screening questions for the following signs and symptoms. In addition, their temperature should be taken.



Fever of 100 degrees or more (self-reported or verified if possible)



Newly developed cough, shortness of breath or sore throat



Flu-like symptoms or any respiratory illness Have they been exposed to anyone that has tested positive for COVID-19 or anyone who is being tested for COVID-19 in the past 14 days



Have they returned from any COVID-19 epidemic location

Vendors are not permitted on the premises if they fail the screening assessment.

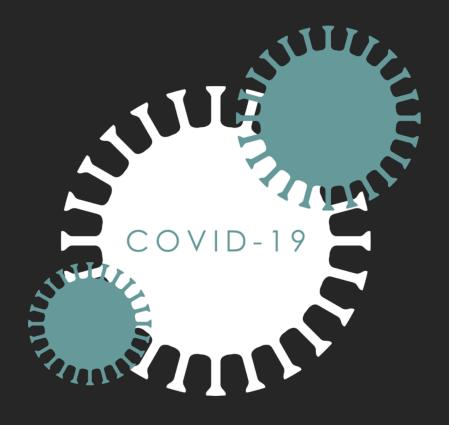




Entrance Plans

Continue approved limited community entrance plans.

Remind residents which secondary entrances are no longer accessible and guide all people to enter from the main entrance where infection prevention screening and/or hand sanitizing stations are set up.



OUTBREAK

Multiple Confirmed Cases



An "outbreak" is defined as a site with 3 or more reported positive COVID-19, cases within a 72-hour timeframe. Your RPL/RVP will advise when the "outbreak" protocols will take effect and when they expire.

In the event of an "outbreak" at your site, please return to <u>LEVEL 4 INFECTION</u> <u>PREVENTION PROTOCOL</u>. The additional protocols outlined on the following pages will be required, as well.



PROTOCOL

1

Redistribute COVID-19 educational material and reporting requirements communication to all residents. This will help to remind them of actions to take in an effort minimize the further spread of COVID-19. Insure important key communication has been translated, when applicable.

2

Ensure important key communication has been translated, when applicable.

3

Retrain or revisit with staff, all COVID-19 protocols, including the proper protocols on the use of PPE (donning & doffing). Videos are available on Cornerstone. Discuss with your RPL, if enhanced or contracted cleaning is needed.



PROTOCOL

4

Discuss with your RPL, if enhanced or contract cleaning is needed.

5

Ensure the Pass Down Log is up to date, in case staff shortages were to occur. The updated Pass Down Log is now available in PPG.

6

Check PPE Inventory. Always maintain a minimum of 30-day supply of PPE. See suggestions for maintaining PPE (pages 48-49), if there is a shortage.



PROTOCOL

7

Reach out to local agencies to inquire about providing COVID-19 mass testing on site.

8

Reach out to local Departments of Health to assist with residents who are not complying with local regulations and quarantine requirements.

9

Completion of only critical work orders, will be required, during an outbreak. Unit Inspections and standard work orders are not required to be completed during this time a site is deemed an "outbreak". The RPL/RVP will advise once that required protocol can be lifted.



PROTOCOL

10

Implement Contact Tracing

- First Course of Action: notify the local health department and request their assistance do the contact tracing
- Second Course of Action: IF the local health department does not react in timely manner follow below steps.
 - 1. Engage with the infected individuals as we have in the past. Let them know they don't have to identify anyone but if they can, it would be helpful to know if they've been in close contact with other residents/staff. Ask for names. Mention we will not disclose the infected individual's identity.
 - 2. Send a letter like the Resident Letter Multiple Positive Cases- to the individuals (in our building only not outside in the community) identified as being in close contact with an infected resident as we do with infected residents:
 - Mention that through containment strategies they have been identified as someone we believe has had direct exposure to someone diagnosed with COVID-19.
 - Include what we encourage they do.
 - 3. Follow-up via phone call and ask how they are feeling and if they want us to keep checking every few days, see if they need anything, etc. Ask if they have any COVID-19 symptoms? If they say no, then offer the number to call if they change their mind; if yes, then call every few days as mutually agreed upon.



General Guidelines - Dos and Don'ts

DO NOT

- Make participation in contract tracing mandatory (i.e. require infected individuals to give any information about who they've been in contact with)
- Require self-quarantine of other residents in contact with an infected individual – just encourage (as in the letter)
- Share names of those who test positive to other residents
- Share timeframe of when they might have been exposed
- Give any other information out that would make it so the exposed individuals would be able to identify the confirmed individuals



GENERAL GUIDELINES - DOS AND DON'TS

DO

- Try to get the local health department to do the contact tracing
- Ask the infected individuals if they've already been contacted about contact tracing – if not, then we can ask if they're willing to answer questions about who've they've been in direct contact with so we can let that individual know (without sharing their name)
- Encourage the residents we've identified as being in close contact to self-quarantine for 2 weeks – stay in units, wash hands, discourage visitors, maintain social distancing – in accordance with the letter
- If asked, we can say that the infected individuals has been instructed to isolate for 2 weeks



Suggestions for extending supplies during an outbreak:

Levels of Surge Capacity used to prioritize measures to conserve facemask supplies

<u>Conventional capacity</u>: measures consist of providing care without any change in daily contemporary practices. This set of measures, consisting of engineering, administrative, and personal protective equipment (PPE) controls should already be implemented in general infection prevention and control plans.

Contingency capacity: measures may change daily standard practices but may not have any significant impact on the care delivered to the patient or the safety of healthcare personnel (HCP). These practices may be used temporarily during periods of expected shortages.

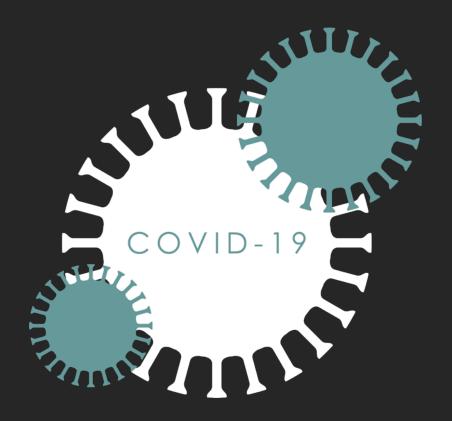
<u>Crisis capacity</u>: strategies that are not commensurate with U.S. standards of care. These measures, or a combination of these measures, may need to be considered during periods of known shortages.





Suggestions for extending supplies during an outbreak:

Capacity	Masks	N95/K95 (If available)	Gloves
Conventional (abundant supply)	Wear DISPOSABLE masks at all times in the building. Change after each interaction with residents.	Use when you need to enter unit or interact with resident with COVID. Change each time you move from one location to another	Wear gloves when cleaning/maintaining common areas or entering resident unit. Change each time you move from one area/or apartment to another.
Contingency (adequate supply)	Wear DISPOSABLE masks at all times in the building. Change disposable masks each day	Use when you need to enter unit or interact with resident with COVID. Change each day	Wear gloves when cleaning/maintaining common areas or entering resident unit. Change each time you leave a quarantine/isolation apartment.
Crisis (minimal supply)	Wear CLOTH masks at all times in the building. Wash at the end of each day.	Use when you need to enter unit or interact with resident with COVID. Use as long as possible disinfect at the end of each day	Wear gloves when cleaning/maintaining common areas or entering resident unit. Change each day. Use hand sanitizer on gloves each time you move from one location or apartment to another



COMMUNITY SPACES



Community spaces will remain closed for open usage by residents and guests. This includes large and small community rooms, fitness centers, resource/computer rooms, pool table rooms, and other common gathering areas. Renting of any community space by residents or non-residents is not allowed.

Laundry Rooms are to continue to be operated under limited hours with social distancing recommendations posted.

Postpone all large facility events. All large group events at the site will continue to be postponed, until further notice.



Small management-sponsored gatherings and events will be permitted for residents only, provided social distancing requirements can still be met. Additional requirements include:

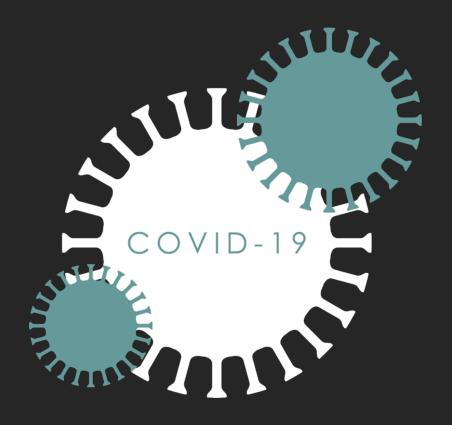
- All management sponsored small events will require pre-approval. This includes wellness, or educational programs typically hosted by the Service Coordinator.
- Attendance will be limited to no more than 10 residents per event or as allowed, to ensure social distancing protocols can be met. Events in excess of that attendance count of 10 will require RPL/RVP approval, to ensure CDC recommended social distancing protocols can still be met.
- Multiple events for the same wellness or educational purpose may need to be hosted if attendance will exceed the max allowed attendance levels of 10 residents per event.
- Multiple management-sponsored events within a week should be planned at least 2 or more days apart.
 - All small gatherings or events shall start and end during normal business hours. The end time of the event must occur at least one or more hour prior to the end of the

- All small gatherings or events shall start and end during normal business hours. The end time of the event must occur at least one or more hour prior to the end of the workday, to allow proper sanitizing and securing of the community space by management,
- All small management-sponsored events will require pre-registering of all attendees, with a sign in sheet on the day of.

prior to their departure.

- All small gatherings will require all attendees to wear masks. Hand sanitizing station will be provided.

 Seating will be limited to the registered guest count and spaced out per social distancing protocols.
- All extra seating should be removed or cordoned off.
- A member of management should be present for all sponsored events.



MEDIA

How to Address Media Contact

What if the media contacts you?



We may receive calls from the media to find out how we are responding. If you receive such a call, please follow these guidelines to make sure the call is handled appropriately by directing the reporter to:

Contact: Todd Hutchins, Director of Public Relations

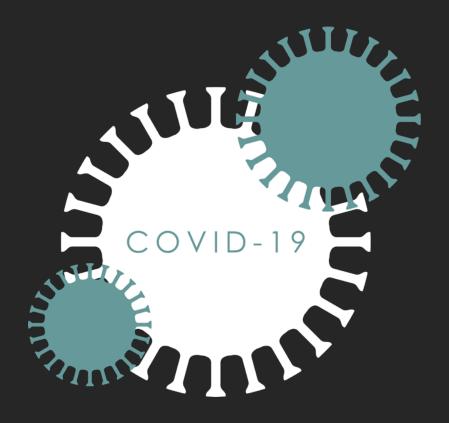
Call: 614-381-9853 or email at thutchins@nationalchurchresidences.org

This is our official media line and the official crisis hotline. Additionally, contact your supervisor immediately. Reporters on site should be invited to wait outside the building until you can reach our regular media contact, who will follow up.

For detailed information on our media protocol, please visit the Resource Library.

Cornerstone: COVID-19 Resource Library





Workflow

Response Flow Chart

The flow chart below is a diagram to help walk you through the steps outlined in this document. You're encouraged to utilize the diagram as a response cheat sheet.

