



Visitor and Patient Entry Screening Guidelines

All visitors and patients arriving to the hospitals or clinics will be screened. Visitors are currently restricted due to the COVID -19 response. Please check https://www.scvmc.org/COVID19/covid-19-update.html for the most current guidelines.

All patients and permitted visitors will be required to wear a surgical mask at all times while in the facility. Patients and permitted visitors are encouraged to bring their own surgical masks, but if not, one will be provided upon arrival.

All patients and permitted visitors will be screened before entering the facilities. Permitted visitors are not allowed in the facility if they have a temperature of 100°F degrees or above, or if they respond affirmatively to any Screening Questions (Attachment A). The patient may identify an alternative visitor who meets all requirements.

Lines of people should be minimized to the extent possible and all patients and permitted visitors should be required to maintain at least 6 feet away from each other where possible.

Screening locations and hours of operation vary by site and are subject to change, please refer to site specific information as needed (located at https://www.scvmc.org/COVID19/covid-19-update.html)

SCREENING PROCESS:

- 1. Give person gel to clean hands.
- 2. Provide surgical mask to all persons upon entry to screening station if person is not already wearing a surgical mask.
- 3. Ask all persons entering if they are here for care or to visit/accompany a patient in care or seeking care. Proceed to Process for Visitors or Process for Patients below, depending on nature of the visit.

Process for Visitors

If person is entering to visit/accompany a patient:

- 1. Ask the purpose for the visit
 - a. If purpose of visit does not fall within permitted visitation circumstances noted in the current visitor policy, advise that visitation is not permitted.
 - b. If visit permitted, follow procedure below.
- 2. Ask or show the visitor the Screening Questions in preferred language. If visitor is unable to read or understand the screening questions, contact supervisor for assistance.
 - a. If yes to any questions, do not allow the visitation. Advise visitor to seek medical care from provider of choice. If visitor does not have a primary care provider, give visitor the Valley Connections number (888-334-1000) to register with our system and get an appointment. If visitor has a medical or psychiatric emergency, call

- supervisor for guidance. Call 911 or escort the person to nearest emergency room. If the visitor is unclear of their answers to the screening questions or the answers are complex, contact supervisor for assistance.
- b. If no to any of the screening questions, proceed to temperature taking procedure.
- 3. Temperature reading
 - a. If less than 100.0°F provide guidance on destination.
 - b. If 100.0°F or above, do not allow visitation. Advise visitor that they can seek medical care from their provider. If visitor has a medical or psychiatric emergency, contact supervisor for guidance. Call 911 or escort the person to nearest emergency room. If unclear or complex, contact supervisor for assistance.

Process for Patients

If person is entering to seek care:

- 1. Take patient's temperature. Ask or show the patient the Screening Questions in preferred language. If patient is unable to read or understand the screening questions, contact supervisor for assistance.
 - a. If temperature is less than 100.0°F and answer is no to all Screening Questions, give patient sticker badge with date and care destination and allow to proceed to destination.
 - b. If the patient's temperature registers 100.0°F or above, or answers yes to any of the Screening Questions, follow the Patient Disposition Process below.

Patient Disposition Process

- 1. If patient is going to Emergency Department (ED), Urgent Care, or Express Care, screener shall allow patient to proceed to location. If patient is going to Emergency Psychiatric Services, ensure that patient is escorted to the ED for evaluation.
- 2. If patient is going anywhere else, screener shall notify the Screening Site RN, Nurse/House Supervisor, Health Center Manager, Medical Director, or Medical Administrator on Call (MAOC). For O'Connor Hospital and St. Louise Regional Hospital, contact the House Supervisor and, if needed, the Administrator on Call (AOC).
- 3. Screening Site RN/Nurse or House Supervisor (or other appropriate clinician designated by Health Center Manager, Medical Director, AOC, or MAOC), shall accompany the patient to a designated private room (isolation room) or other appropriate area to protect patient care and privacy, near the screening station, and obtain the following:
 - a. Reason for visit
 - b. Chief complaint
 - c. Vital signs (including temperature), including blood pressure, heart rate, respiration rate, oxygen saturation, and pain scale
- 4. If patient is going to any other location within the **Main Hospital building**, including ancillary locations (*e.g.*, Diagnostic Imaging, Lab, Radiology), the Screening Site RN/Nurse or House Supervisor or designee shall accompany patient to the Emergency Department or Express Care to complete screening (for O'Connor Hospital and St. Louise Regional Hospital, follow process in section 8).

- a. The Screening Site RN/Nurse or House Supervisor shall notify the ancillary or other department of the patient's disposition.
- b. The Emergency Department or Express Care shall advise the ancillary or other department before sending any patient with a fever or other COVID-19 symptoms to the patient's destination within the Main Hospital building in order to allow sufficient preparation by the ancillary or other department.
- 5. If patient is going to a clinic appointment at SCVMC that is not in the Main Hospital Building, call the clinic where the patient has the appointment.
 - a. Specialty Services (incl. Valley Specialty Center and Renal Care Center) The patient's provider will advise about disposition. The patient's provider shall use sound clinical judgment in determining patient's disposition, which may require an in-person assessment of the patient in the isolation room in order to formulate the appropriate disposition plan.
 - o If the provider is unavailable, contact the appropriate Medical Director or Medical Administrator on Call (MAOC).
 - If a decision is made to send the patient to the ED, then 911 shall be called and the
 patient handed over to the EMS crew upon arrival. An RN or clinician shall remain
 with the patient for the duration of the wait. The patient shall not escort
 themselves to the ED.
 - b. Primary Care. The provider will determine the disposition, which can include proceeding to the scheduled appointment, send home with self-care instructions and follow up, or redirecting patient to an urgent care appointment at the same clinic with verbal and physical handoff of patient to urgent care staff. If patient is seen in Primary Care Clinic or Urgent Care Clinic, the patient should be moved to a designated isolation room in the clinic and not be seated in the waiting room.
 - o If the provider is unavailable, contact the appropriate Doctor of the Day /Physician Site Lead or available provider in the clinic.
 - If a decision is made to send the patient to the ED, then 911 shall be called and the
 patient handed over to the EMS crew upon arrival. An RN or clinician shall remain
 with the patient for the duration of the wait. The patient shall not escort
 themselves to the ED.
 - c. Community Health (PACE/ ID/ TB and Refugee) The patient's provider shall use sound clinical judgment in determining patient's disposition, which may require an in-person assessment of the patient in the isolation room in order to formulate the appropriate disposition plan. The patient's provider shall document such assessment in the patient's medical record.
 - o If the provider is unavailable, contact the Provider of the Day or Doctor of the Day.
 - If a decision is made to send the patient to the ED, then 911 shall be called and the
 patient handed over to the EMS crew upon arrival. An RN or clinician shall remain
 with the patient for the duration of the wait. The patient shall not escort
 themselves to the ED.
- 6. If the patient is going to an **ancillary location at SCVMC** (e.g., Diagnostic Imaging, Lab, Radiology) that is **not in the Main Hospital Building**, Screening Site RN/Nurse or House Supervisor shall:

- a. Notify patient's provider, or if not available, the Doctor of the Day/Physician Site Lead, the Medical Director or the MAOC to determine patient's disposition.
- b. Notify the ancillary service department of the patient's disposition. Patient will remain in isolation room off screening station until such time as department has prepared to take patient.
- 7. At **O'Connor Hospital and St. Louise Regional Hospital**, if patient is arriving for any appointment, outpatient procedure, or other service, and screens positive, contact the House Supervisor.
 - a. Full vital signs (including temperature) and reason for visit will be obtained by the house supervisor or other clinician at screening site, while assuring patient privacy
 - b. This information will be reviewed with AOC as needed with consideration of patient circumstances and appropriateness of visit for services
 - c. Patient disposition will be directed by House Supervisor or AOC based on patient medical needs, with the Emergency Department being the backup for anyone needing or requesting immediate medical screening exam or comprehensive care.
- 8. In ALL circumstances above, the Screening Site RN/Nurse or House Supervisor, provider, Medical Director, Doctor of the Day/Physician Site Lead, AOC, or MAOC, or designee who responded to the situation, shall document the following in the patient's medical record:
 - i. Reason for visit, chief complaint, and vital signs
 - ii. All interactions
 - iii. Relevant screening and assessment
 - iv. Patient disposition
- 9. The Screening Site RN/Nurse or House Supervisor, provider, Medical Director, Doctor of the Day/Physician Site Lead, AOC, or MAOC, or designee who responded to the situation shall file an occurrence report, and thereafter any appropriate reports to regulatory bodies shall be submitted per standard policy.

Rev. 6.18.20, 7.31.20, 10.20.20

Attachment A: COVID-19 Visitor and Patient Screening Questions

Attachment B: COVID-19 Symptoms Infographics

ATTACHMENT A

COVID-19 Visitor and Patient Screening Questions

Do you have any of these symptoms in the last 3 days? (Please review carefully and let our screening staff knows if you answer YES to any of the symptoms below)

Fever (≥37.8°C/100°F)

Chills

Cough

Sore throat (new or unexplained)

Shortness of breath or difficulty breathing

Fatigue (new or unexplained)

Muscle or body aches (new or unexplained)

Headache (new or unexplained)

Loss of taste or smell

Nausea, vomiting, or diarrhea (new or unexplained

In the past 14 days, have you had a positive COVID-19 test? Yes or No

In the past 14 days, have you had a close contact (within 6 feet for at least 15 minutes) with a person with COVID-19?

Yes or No

- 1. Patient: follow current Visitor and Patient Entry Screening Guidelines
- 2. Visitor: advise visitor to leave facility, go home and contact primary care provider. If visitor does not have a primary care provider, give visitor the Valley Connection number (888-334-1000) to call to register with our system and get an appointment.

^{*}If answer positive to any of the above:

ATTACHMENT B COVID-19 Symptom Pictograph



Have you experienced these symptoms within the last three days?



Fever or Chills



Cough



Shortness of Breath or Difficulty Breathing



Sore Throat *New or Unexplained



Fatigue *New or Unexplained



Muscle or Body Aches



Headache *New or Unexplained



Loss of Taste or Smell



Nausea, Diarrhea, or Vomiting *New or Unexplained

DO NOT ENTER IF YOU HAVE ANY OF THE ABOVE SYMPTOMS

SEEK MEDICAL CARE AND TESTING



