



Partners in Comprehensive Care

POLICY NAME:	Airborne Transmissible Diseases & Other Infectious Disease Management				
POLICY #:	P.STAFF.47				
IMPLEMENTATION DATE:	7/27/2020	LAST REVIEWED/UPDATE DATE:		8/14/2020	
POLICY OWNER:	Quality & Compliance Department				
POLICY FOR:	Staff: <input checked="" type="checkbox"/>	Managers: <input checked="" type="checkbox"/>	Providers: <input checked="" type="checkbox"/>	Shareholders: <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Other:

- I. **PURPOSE:** To outline a process to screen all Epic Care Employees, Consultants, Independent Contractors, Providers and Shareholders for symptoms of an infectious disease prior to beginning his/her workday, as well as to ensure all personnel comply with this policy and related measures to protect patients, employees, family members, and the community from the spread of an infectious disease. If the CA State or Federal Government protocols for screening, quarantine and/or isolation prove to be more stringent than the ones outlined in this policy, the CA State or Federal Government mandates shall be followed. Additionally, due to the constant change in information and guidance as a result of the COVID-19 Pandemic, Epic Care regularly communicates protocol changes to adhere to all CDC compliance requirements, but reserves the right to base policies off of CDC recommendations that might be either more or less stringent.

- II. **SCOPE:** All Epic Care Employees, Consultants, Independent Contractors, Providers and Shareholders who perform duties at Epic Care are required to submit to screening prior to entering any Epic Care clinics and offices, and don PPE at the appropriate level required to perform their tasks in the clinic or office, during the COVID-19 Pandemic, Influenza Outbreak, or any other Infectious Disease Health Emergency.

Volunteers as well as sales and/or other healthcare representatives not employed by Epic Care, but working or visiting our offices and clinics, are also considered personnel for purposes of this policy and will be expected to comply with the directives outlined in this policy.

- III. **DEFINITIONS:**
 - 1. **Personal Protective Equipment (PPE):** Any protective garments or equipment designed to protect the wearer's body from injury or infection.
Examples include: facemasks, face shield, gowns, gloves, booties, goggles.

- IV. **PROCEDURE:**
 - A. **Staff Screening:**
 - 1. Any Epic Care Employees, Consultants, Independent Contractors, Providers and Shareholders scheduled to be physically present at an Epic Care facility, must conduct a self-screening for any COVID-19 symptoms before reporting to work for the day. This screening

expectation includes a temperature check and standard health screening questions listed in Number 4 below.

2. All Epic Care Employees, Consultants, Independent Contractors, Providers and Shareholders are expected to use a thermometer at home each morning as part of the self-screening process. Employees with a fever $\geq 100^{\circ}\text{F}$ are required to immediately report this information to their Supervisor who will ask the employee not to report to work, and to standby for a phone call from the Safety & Compliance Specialist who will provide further guidance, following current CDC guidelines.
3. The Supervisor will alert the Safety & Compliance Specialist of the employee's status. The employee will be contacted to determine next steps and advised on whether he/she is cleared to report to work or seek COVID-19 testing.
4. Standard daily self-screening questions include:
 - a. Do you have any of the following symptoms presently?
 - Fever or chills
 - Cough,
 - Fatigue
 - Shortness of breath or difficulty breathing,
 - Sudden loss of smell or taste
 - Muscle or body aches
 - Headache
 - New loss of taste or smell
 - Sore throat
 - Congestion or runny nose
 - Nausea or vomiting
 - Diarrhea
 - b. Have you been in contact with someone who was confirmed or suspected to have COVID-19 in the last 48 hours?
5. If the answer to **any** of the above questions is "yes", the employee must immediately report this information to their Supervisor who will direct the employee not to report to work, and to standby for a phone call from the Safety & Compliance Specialist who will provide further guidance, following current CDC guidelines. Number 3 above will again be followed.
6. Epic Care Employees, Consultants, Independent Contractors, Providers and Shareholders may be asked to be tested for COVID-19, quarantine, work from home, and/or be transferred to do tasks that do not expose patients and staff to the possible spread of infection.
7. Epic Care may require additional PPE, quarantine, social distancing, work-from-home, delay of new hire start date, or other accommodation depending on the work environment, job duty, or type of engagement with patients, vendors, and visitors.

B. Patient and Visitor Screening:

Patient screening will be conducted in accordance with Epic Care's COVID-19 Patient Screening SOP.

C. Required Use of PPE for Infectious Disease Control:

1. All Epic Care Employees, Consultants, Independent Contractors, Providers and Shareholders who perform duties at Epic Care are required to wear a facemask at all times when interacting with patients, visitors, and/or other Epic Care staff. Refusing to comply with PPE guidelines will result in progressive disciplinary action up to and including termination,

regardless of current health, result of health screening, and/or COVID-19 testing.

Additionally, any Patient or Visitor entering an Epic Care facility must wear a face covering at all times and undergo the health assessment as outlined in the COVID-19 Patient Screening SOP.

2. The CDC Guidelines further states that specific types of facemasks must not be worn where sterility must be maintained, specifically masks with a one-way valve. These types of facemasks are prohibited from use by all Patients, Visitors, Epic Care Employees, Consultants, Independent Contractors, Providers and Shareholders who perform duties at Epic Care, as they allow the relief of respiratory droplets into the air upon exhalation of the wearer.
3. Additional PPE may be required to be worn by personnel depending on the duties being performed, the confirmed or suspected disease type, mode of transmission and other factors as recommended by the CDC and County Health Department.
4. All personnel must perform hand hygiene regularly (e.g. wash hands often, use alcohol based hand sanitizer, and/or don and doff gloves to reduce cross contamination. Additionally, hand hygiene measures also require that glove wearers immediately wash hands with soap and water after removal.).
5. When possible, check-in personnel must remain behind a clear barrier (i.e plexiglas), wear a facemask and/or face shield when checking in patients, collecting payments, etc., or remain within 6 feet or more of distance between staff and patients/visitors.

D. Compliance:

1. All Epic Care Employees, Consultants, Independent Contractors, Providers and Shareholders who perform duties at any Epic Care facility must comply with required screening and precautionary measures as detailed above, as well as any additional precautions that may be recommended by the CDC at any time during the COVID-19 Pandemic, Influenza Outbreak or any other Infectious Disease Health Emergency.
2. Any individual who has COVID-19, or symptoms associated with it, should not be in the workplace. Epic Care Employees, Consultants, Independent Contractors, Providers and Shareholders who perform duties at Epic Care are responsible for self-monitoring and reporting symptoms to their Supervisor, as well as reporting a co-worker who may be exhibiting symptoms.
3. Employees exhibiting symptoms will immediately report this information to their Supervisor who will ask the employee not to report to work, and to standby for a phone call from the Safety & Compliance Specialist who will provide further guidance, following current CDC guidelines and/or Epic Care policies.
4. Refusing to answer health screening questions or providing false information about community interaction, travel or exposure may result in further disciplinary action up to and including termination, regardless of current health, result of health screening, and/or COVID-19 testing.
5. Supervisors will inform the Human Resources Manager of any employee who refuses to answer screening questions and in conjunction a determination will be made as of the corrective action course to be pursued.
6. Failure to wear a facemask as defined above will result in any or all of the following:
 - a. Written warning for the first offense;
 - b. A letter of final warning for the second offense;
 - c. Unpaid suspension for 3-5 business days for the third offense; or Termination (Corrective

action may be escalated due to severity of infraction (determined by Site Leadership and Human Resources).

V. TRAINING:

Due to the ever-changing nature of the COVID-19 pandemic, employees will be provided regular communication. This information will be provided by your Supervisor in a huddle and or Site MD meeting, via email from the Communications Team and/or posted on the Intranet.

Additionally, Epic Care provides ongoing training efforts and resources to All Staff, this includes proper PPE use and donning and doffing sequence, Exposure Control Plan for Bloodborne Pathogens, Injury and Illness Prevention, Disposal of Hazardous Drugs, among others.

VI. RECORDKEEPING:

Any records relating to an exposure due to COVID-19 or any other infectious disease will be managed by the Human Resources and Quality & Compliance Department as any other occupational injury. For more information on exposure and containment management, please review Epic Care's Aerosol Transmissible Disease Program.

VII. RELATED DOCUMENTS AND RESOURCES:

1. Social Distancing Policy
2. Appendix A Social Distancing Protocol – Template provided by Alameda and Contra Costa Counties
3. Aerosol Transmissible Disease Program (ATD)
4. COVID-19 Patient Screening SOP
5. Epic Care's General Housekeeping Guidelines

All Epic Care Employees, Consultants, Independent Contractors, Providers and Shareholders are required to comply with this policy and failure to do so may lead to disciplinary action, leading up to termination.

By signing below, I acknowledge receipt and understanding of this policy, and commit to abide by it.

Print Name _____ Title/Dept. _____

Employee' signature _____

Date _____