March 10, 2020

Facility Access and Patient, Visitor, and Vendor Screening

As COVID-19 continues to spread across the United States, Virginia hospitals and health systems should consider taking precautions to "harden" their facilities and mitigate transmission of the disease within them. The Centers for Medicare & Medicaid Services now urges hospitals with emergency departments to screen all patients presenting in the ED for COVID-19. While each hospital and health systems' ability to limit facility access and screen patients, visitors, and vendors differs, hospitals and health systems across the Commonwealth may consider taking the steps below to the extent practical.

Facility Access:

- Identify limited/minimal entrance and exit sites for staff, emergency department patients and visitors, EMS patients, and all other patients, visitors, and vendors, and temporarily close non-essential entrance and exits points.
- Place signs at closed entrance points informing patients, visitors, and vendors that the entrance is closed and where they should go to enter the facility.
- Place signage on open entrance points asking patients, visitors, and vendors to put on a mask and inform staff if they have a travel history to a region with COVID-19, have been exposed to someone with COVID-19, and/or have signs and symptoms of respiratory illness.
- Store and secure masks away from access points inside external doors and within eyesight of security or triage personnel.
- Require all vendors to enter through the main hospital entrance.

Emergency Department Screening:

- Implement a standard screening process and form (example included below) to be used for all patients presenting in the emergency department to determine COVID-19 risk.
- Station hospital personnel at the entrance to the emergency department waiting room to conduct an initial screen prior to entering the facility.
- All screeners at entrances should wear level 1 masks (not N95 masks at this time).
- A surgical mask should be placed on any patient or visitor who screens positively for risk for COVID-19. Do not allow entry for any visitor who refuses to don a mask. If a patient who screens positive for risk for COVID-19 refuses a mask or cannot tolerate a mask due to condition, the patient should be placed directly into isolation.
- Patients who screen positive for risk for COVID-19 and are not an immediate threat to life of limb should be greeted by appropriately donned emergency department staff in the ambulance bay for further screening. Emergency department staff need to clear hallways and other areas of people prior to escorting an at-risk patient into the facility.

- Emergency department staff should conduct limited screening remotely in partnership with EMS via radio report prior to arrival. Patients who screen positively for risk for COVID-19 should be masked by EMS personnel in route.
- Ensure that all emergency department staff are educated on the screening processes established by the facility.
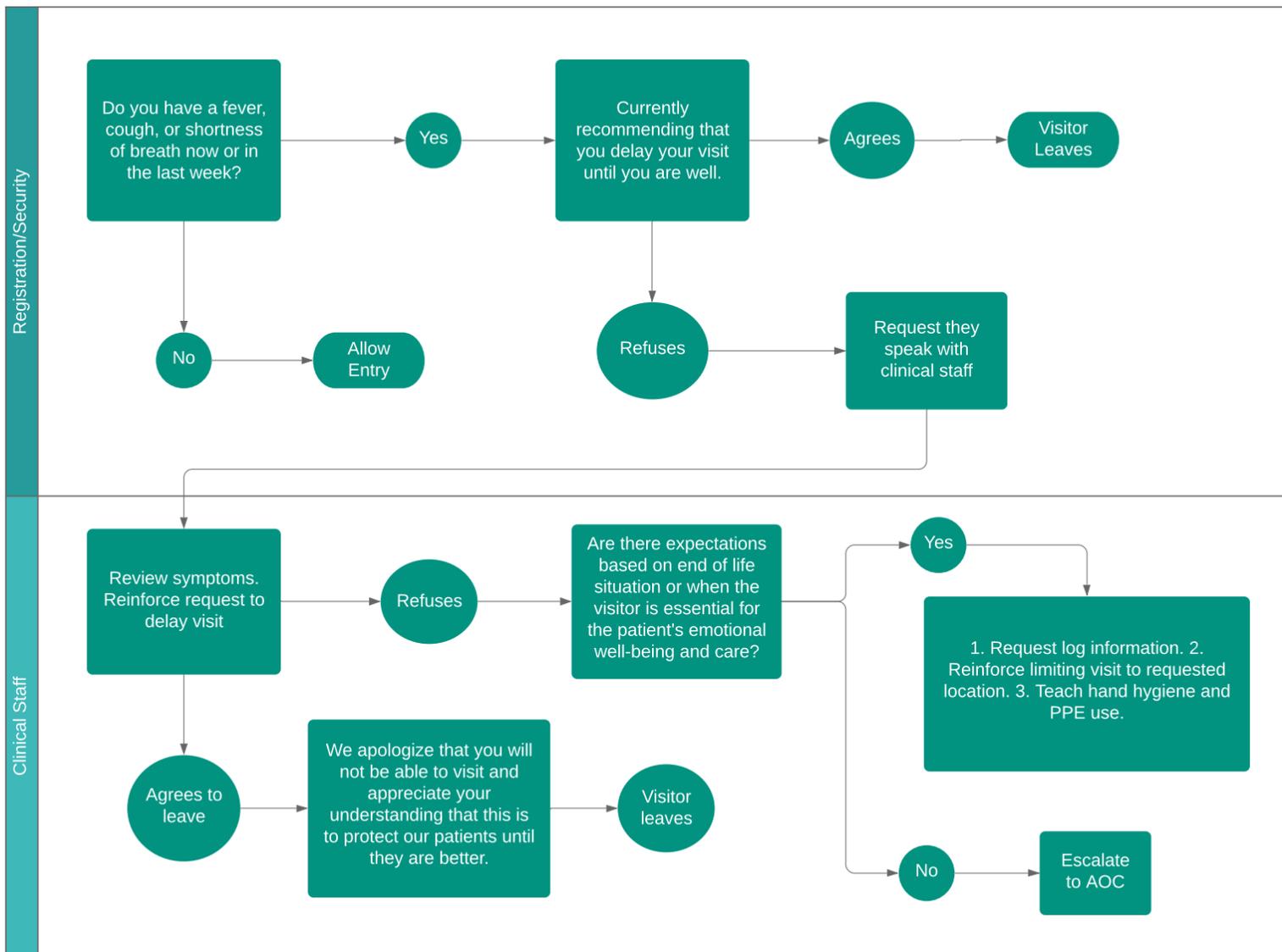
Screening at Other Access Points:

- To the extent practical, implement a standard screening protocol at open entranceways and/or main access points to the facility.
- Station hospital personnel (e.g. registration/security) at open entrances to the hospital to conduct screening on all patients and visitors.
- All screeners at entrances should wear level 1 masks (not N95 masks at this time).
- Use a standardized screening form for all patients, visitors, and vendors.
- A surgical mask should be placed on any patient or visitor who screens positively for risk for COVID-19. Do not allow entry for any visitor who refuses to don a mask. If a patient who screens positive for risk for COVID-19 refuses a mask or cannot tolerate a mask due to condition, the patient should be placed directly into isolation.
- Designate a path from entrances to the emergency department that is the only route for patients and visitors to get from the entrance to the emergency department and limit exposure outside of that path. The route should be clearly marked with directional signage.
- Ensure all staff that may conduct screenings are educated on the screening processes established by the facility.

Virginia Healthcare Emergency Management Program

Visitor Screening Protocol Example

Registration/Security

Do you have a fever, cough, or shortness of breath now or in the last week?

→ Yes → **Currently recommending that you delay your visit until you are well.** → Agrees → **Visitor Leaves**

→ No → **Allow Entry**

Currently recommending that you delay your visit until you are well. → Refuses → **Request they speak with clinical staff**

Clinical Staff

Review symptoms. Reinforce request to delay visit

→ Refuses → **Are there expectations based on end of life situation or when the visitor is essential for the patient's emotional well-being and care?**

→ Agrees to leave → **We apologize that you will not be able to visit and appreciate your understanding that this is to protect our patients until they are better.** → **Visitor leaves**

Are there expectations... → Yes → **1. Request log information. 2. Reinforce limiting visit to requested location. 3. Teach hand hygiene and PPE use.**

→ No → **Escalate to AOC**

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First Point of Contact Screening Form Example

Check any boxes that apply to patient.

	Patient/visitor has a fever **AND** signs/symptoms of lower respiratory illness (e.g. cough or shortness of breath.
	Patient/visitor has had close contact with laboratory-confirmed COVID-19 patient within 14 days.
	Patient has a fever **OR** signs/symptoms of lower respiratory illness (e.g. cough or shortness of breath) **AND** a history of travel from affected geographic regions within 14 days of symptom onset.
	Patient/visitor does not meet any of the above criteria.

If **visitor** and any of the first three boxes are checked, the visitor should be advised to defer visiting the facility. If the visitor refuses, contact the AOC.

If **patient** and any of the first three boxes are checked, place a mask on the patient and collect the following information:

1. Name:

2. Phone:

3. Arrival Date _____   Arrival Time _____

Send the patient to the emergency department following established routes.