

SILETZ COMMUNITY HEALTH CLINIC POLICY



COVID-19

TABLE OF CONTENTS

	Page
18A Face Mask, Face Covering, Face Shield	1
18B COVID-19 Personal Protective Equipment (PPE)	4
18C Accountability	6
18D Communication	8
18E Cleaning, Decontamination, High-Level Disinfection and Sterilization	10
18F Testing for COVID-19 Virus	12
18G Hand Hygiene	14
18H Occupational Health	15
18I Screening/Testing of SCHC Staff	19
18J Identification and Management of Ill Patients	21
18K Patient and Visitor Access and Movement Within the Facility	23
18L Supplies and Inventory Management	25
18M Employee Training and Education	26

SILETZ COMMUNITY HEALTH CLINIC	
Program	COVID-19
Policy	Face Mask, Face Covering, Face Shield
Date Approved	03/19/21
Date Revised	12/17/21

PART 18A
Face Mask, Face Covering, Face Shield

I. PURPOSE

This policy is established in response to the COVID-19 pandemic in an effort to educate and protect healthcare personnel, patients, and visitors to the Siletz Community Health Clinic (SCHC), and to limit the transmission of COVID-19, reduce morbidity and mortality and preserve healthcare system functioning to the extent possible.

II. DEFINITIONS

- A. Face Covering: Cloth, polypropylene, paper, or other face covering that covers the nose and the mouth and that rests snugly above the nose, below the mouth, and on the sides of the face.
- B. Face Mask: Medical grade mask. Means a surgical, medical procedure, dental, or isolation mask that is FDA-cleared, authorized by an FDA EUA, or offered or distributed as described in an FDA enforcement policy. Facemasks may also be referred to as “medical procedure masks.”
- C. Face Shield: Clear plastic shield that covers the forehead, extends below the chin, and wraps around the sides of the face. Means a device, typically made of clear plastic, that:
 - 1. Is certified to ANSI/ISEA Z87.1 (incorporated by reference, § 1910.509); or
 - 2. Covers the wearer’s eyes, nose, and mouth to protect from splashes, sprays, and spatter of body fluids, wraps around the sides of the wearer’s face (i.e., temple-to-temple), and extends below the wearer’s chin.
- D. Physical Distancing: Maintaining a space of 6 feet or more in all directions between individuals.
- E. Source Control: Use of a face covering or face mask to cover a person’s mouth and nose to prevent the spread of respiratory secretions when they are talking, sneezing, or coughing.

III. POLICY FOR SCHC STAFF

- A. All staff who enter the clinic are directed to wear a face mask or face covering at all times while in the office, except when in a private office by themselves.
- B. A face mask is prioritized over a face covering because it offers a source control and protection for healthcare personnel from potentially infectious droplets, splashes, or sprays.

SILETZ COMMUNITY HEALTH CLINIC	
Program	COVID-19
Policy	Face Mask, Face Covering, Face Shield
Date Approved	03/19/21
Date Revised	12/17/21

- C. A cloth face covering may not be worn in place of a respirator or face mask when more source control is needed. This is based on OSHA Temporary Emergency Standards – it will be up to organization when or if the organization wants to implement. SCHC will communicate to all employees when a cloth face covering is not allowed, such as during periods of surge or high case rates.
- D. An FDA cleared/approved face mask must be used while providing direct patient care.
- E. Face coverings are allowed to be worn by healthcare personnel when performing administrative duties or traveling through the facility, unless otherwise directed as a result of increased need for source control.
- F. Staff should avoid touching the outside (contaminated) surface of a face mask or face covering. If staff must adjust the face mask or face covering, hand hygiene should be performed immediately after adjustment.
- G. Face shields should be worn in addition to, but not in place of, face masks for the purposes of eye protection and additional layer of splash protection.
- H. Face masks or face coverings are not required while eating or drinking, but strict physical distancing should be maintained while face masks, face coverings, or face shields are not worn.
- I. Respirators with exhalation valves may not be worn.

IV. POLICY FOR SCHC PATIENTS AND VISITORS

- A. When visiting the clinic, all patients and visitors are required to wear a face mask, face covering, or face shield unless the patient or visitor is under five (5) years of age, except as follows:
 1. Face masks, face coverings, or face shields are not required while eating or drinking, but strict physical distancing (6 feet or more) should be maintained while face masks, face coverings, or face shields are not worn.
 2. Face masks, face coverings, or face shields are not required during an examination or procedure where access to parts of the face that are covered by a face mask, face covering, or face shield is necessary. A face mask, face covering, or face shield is required as soon as the examination or procedure in question has completed.
 3. Face masks, face coverings, or face shields can be briefly removed in situations where identity needs to be confirmed by visual comparison. If possible, limit speaking while the cover is off as speaking generates aerosols and droplets that can contain viruses.

SILETZ COMMUNITY HEALTH CLINIC	
Program	COVID-19
Policy	Face Mask, Face Covering, Face Shield
Date Approved	03/19/21
Date Revised	12/17/21

- B. It is not recommended for patients or visitors to wear a face shield instead of a face mask or face covering. Face shields provide protection for the eyes and an additional layer of splash or spray protection, but the role of face shields as a method of source control has not been established. Use of a face shield alone should be limited to situations when wearing a face mask or face covering is not feasible, to include:
1. When a patient or visitor has a medical condition that prevents him or her from wearing a face mask or face covering.
 2. When healthcare personnel need to see the mouth and tongue motions in order to communicate with a patient or visitor.
- C. Patients or visitors should notify the clinic or healthcare personnel in advance of an office visit if they have a medical condition that makes it hard to breathe, or a disability that prevents them from wearing a face mask, face covering, or face shield, so that appropriate accommodations can be made to ensure the safety of other patients, visitors, and healthcare personnel.

SILETZ COMMUNITY HEALTH CLINIC	
Program	COVID-19
Policy	COVID-19 Personal Protective Equipment (PPE)
Date Approved	03/19/21
Date Revised	12/17/21

**PART 18B
COVID-19 Personal Protective Equipment (PPE)**

I. POLICY

All staff are required to use appropriate personal protective equipment (PPE), dependent on exposure risk type. In addition to PPE, staff must utilize hand hygiene, masking, and standard precautions for every patient, to minimize transmission of COVID-19.

II. MINIMUM PPE

The minimum PPE necessary to evaluate patients with respiratory illness, suspected COVID-19, confirmed COVID-19, or a known exposure to COVID-19 includes:

- A. Face mask
- B. Eye protection (face shield or goggles)
- C. Gown
- D. Gloves

III. AEROSOL-GENERATING PROCEDURES (AGPS)

- A. Some patient care warrants a higher level of protection. Aerosol-generating procedures (AGPs) have been associated with an increased risk of transmission in healthcare settings. If medically reasonable, AGPs for patients with suspected or confirmed COVID-19, or with known exposure to COVID-19, should be delayed.
- B. Potential Aerosol-Generating Procedures includes:
 - 1. Intubation, extubation, and related procedures such as manual ventilation and open suctioning.
 - 2. Cardiopulmonary resuscitation
 - 3. Some dental procedures (those that include high-speed drilling)
 - 4. High-flow nasal oxygen
 - 5. Induction of sputum
 - 6. Medication administration via continuous nebulizer

SILETZ COMMUNITY HEALTH CLINIC	
Program	COVID-19
Policy	COVID-19 Personal Protective Equipment (PPE)
Date Approved	03/19/21
Date Revised	12/17/21

- C. If AGPs are necessary for patients with suspected or confirmed COVID-19 or with known exposure to COVID-19, healthcare personnel performing and or assisting should utilize standard, contact, and airborne precautions, including:
1. N95 respirator or higher respiratory protection (includes powered air-purifying respirators (PAPRs))
 2. Eye protection (face shield or goggles)
 3. Gown
 4. Gloves
- D. When an AGP is performed, the only healthcare personnel allowed in the area are those who are required for the procedure.
- E. Whenever possible, AGPs should be performed in an airborne infection isolation room (AIIR). This is Room 150 on the medical floor. It is unknown how long infectious aerosols remain in the air when a patient remains in the room following an AGP. Continuation of standard, contact, and airborne precautions, with eye protection, for a period after aerosol-generation has ceased, may provide time for contaminant removal.
- F. Respirator means a type of personal protective equipment (PPE) that is certified by NIOSH under 42 CFR part 84 or is authorized under an EUA by the FDA. Respirators protect against airborne hazards by removing specific air contaminants from the ambient (surrounding) air or by supplying breathable air from a safe source. Common types of respirators include filtering facepiece respirators, elastomeric respirators, and PAPRs.
- G. Face coverings, facemasks, and face shields are not respirators.

SILETZ COMMUNITY HEALTH CLINIC	
Program	COVID-19
Policy	Accountability
Date Approved	12/17/21
Date Revised	

**PART 18C
Accountability**

I. PURPOSE

It is the policy of Siletz Community Health Clinic (SCHC) to prevent and/or minimize the spread of the COVID-19 virus within the organization. Performance and accountability reporting is the process of compiling and documenting factors that quantify SCHC’s efficiency and adherence to the measures and protocols implemented by the organization. SCHC is responsible for reporting the actions taken and performance to the Confederated Tribes of Siletz Indians (CTSI) Tribal Council.

This policy is related to the Siletz Tribe’s Phase 1. The policy is subject to revision, when the governing body approves of differing phases, as it responds to the COVID-19 pandemic.

II. POLICY FOR SCHC STAFF

A. Required Reporting CTSI Tribal Council or Designee

The SCHC is responsible for preparing and submitting positive COVID-19 case reports each day positive cases are reported at SCHC. Tribal Council is also provided a thorough COVID-19 situation report each quarter.

B. Oregon Health Authority

The SCHC automatically submits results, via web portal, of all test results for COVID-19. Results are to be entered in the web portal within 24 hours of test result.

C. Staffing

Provider and nurse staffing reports will be sent out each morning to the front desk, pharmacy, and medical staff. Any unusual staffing circumstances will be communicated to the Health Director.

D. Supplies/Inventory

The Infection Control Officer or delegate are responsible for reporting PPE, testing supplies, medical equipment, storage, and other pandemic supply levels and will be inventoried on a weekly basis, more often when needed.

E. Financial/Budgetary

The Health Director will report on, but not limited to, the availability of COVID-19 funding and expenditures to the Accounting Department and will assist in the following: preparing budgets; hiring additional staff; securing contracts; and tracking hazard pay expenditures and impacts on the budget as indicated.

SILETZ COMMUNITY HEALTH CLINIC	
Program	COVID-19
Policy	Accountability
Date Approved	12/17/21
Date Revised	

F. Incident Reporting System

A reporting process is in place and required for all staff to report incidents in accordance with the Risk Management Policy.

G. Audits

The Clinical Services Director is responsible for the number of tests conducted and results (negatives and positives per day).

H. Patient Screening - Front Entrance

Patients and visitors will be screened at the front entrance for COVID-19 symptoms and their temperatures taken.

I. Patient Screening - Phone

Patients will be screened for COVID-19 related symptoms or exposures over the phone at the time their appointment is scheduled.

J. Patient Medication Pick Up

Patients picking up medications will let the front door screener know who they are and the screener will call pharmacy staff. Patient will be instructed to wait in their vehicle and pharmacy staff will deliver to them.

K. Masks

Masks are provided to employees, patients, and visitors.

L. Feedback

The general manager or designee will continually monitor customer and employee feedback through various sources (i.e., staff, patients, visitors, Facebook, Survey Monkey, Tribal Council, etc.)

SILETZ COMMUNITY HEALTH CLINIC	
Program	COVID-19
Policy	Communication
Date Approved	12/17/21
Date Revised	

**PART 18D
Communication**

I. PURPOSE

It is the policy of the Siletz Community Health Clinic (SCHC) to establish regular communication methods to staff and patients throughout the COVID-19 Pandemic to assure that staff and patients receive information that is timely, factual, and beneficial for making good decisions in the workplace and outside of work.

II. POLICY FOR SCHC STAFF

A. Internal

1. The General Manager (GM) will routinely communicate with the CTSI Leadership Team during hours of operation, more frequently as needed.
2. The GM and/or designee will routinely communicate with SCHC personnel.
3. Safety and Occupational Safety & Health communications will originate from the GM or designee for consistency.
4. The GM will communicate with the SCHC COVID Response Team as needed.
5. The automated system will be used at the direction of the GM to communicate to SCHC personnel matters of urgency or when the SCHC is closed.
6. COVID-19 test results will be communicated to medical staff via TEAMS 'COVID Need to Know' group.
7. The SCHC COVID Response team will meet weekly via TEAMS to coordinate the ongoing COVID-19 response, including but not limited to: testing, vaccines, staffing, PPE, client wrap services, and community messaging.

B. External

1. The GM will routinely communicate with the CTSI Tribal Leadership Team during hours of SCHC operation, more frequently as needed.
2. The GM or designee will routinely communicate with the Tribal Emergency Response and COVID Response Teams.
3. The Health Director or designee, will communicate to patients/visitors via SCHC Facebook page as needed, with content determined locally regarding operations. COVID-19 specific content will be sourced from The White House, CDC DHHS,

SILETZ COMMUNITY HEALTH CLINIC	
Program	COVID-19
Policy	Communication
Date Approved	12/17/21
Date Revised	

Northwest Portland Area Indian Health Board (NWPAIHB), or Oregon Health Authority.

4. The SCHC will communicate to patients/visitors via posted signage, handouts, robo calls, social media, as well as be available via a triage call center at 541-444-1030 for COVID-19/respiratory specific calls. SCHC has a dedicated COVID-19 line to request resources, vaccines, and home test kits.

SILETZ COMMUNITY HEALTH CLINIC	
Program	COVID-19
Policy	Cleaning, Decontamination, High-Level Disinfection and Sterilization
Date Approved	12/17/21
Date Revised	

PART 18E

Cleaning, Decontamination, High-Level Disinfection and Sterilization

I. PURPOSE

The virus that causes COVID-19 can land on surfaces. It is possible for people to become infected if they touch those surfaces and then touch their nose, mouth, or eyes. It is the policy of the Siletz Community Health Clinic (SCHC) to minimize the transmission of the COVID-19 virus throughout its facilities by implementing additional guidelines and continued adherence to the SCHC Infection Control Policy.

II. POLICY FOR SCHC STAFF

- A. If someone is sick or has tested positive for COVID-19, disinfect frequently touched surfaces in or around their office. Maintenance crew will be notified and they will do additional cleaning and disinfection in the affected area.
- B. Clean high touch surfaces at least once a day or as often as determined is necessary. Examples of high-touch surfaces include pens, counters, carts, tables, doorknobs, light switches, handles, stair rails, elevator buttons, desks, keyboards, phones, toilets, faucets, and sinks.
- C. Ensure cleaning staff are trained on proper use of cleaning (and disinfecting, if applicable) products.
- D. Read the instructions on the product label to determine what safety precautions are necessary while using the product. This could include PPE (such as gloves, glasses, or goggles), additional ventilation, or other precautions.
- E. Wash hands with soap and water for 20 seconds after cleaning. Be sure to wash hands immediately after removing gloves.
 - 1. If hands are visibly dirty, always wash hands with soap and water.
 - 2. If soap and water are not available and hands are not visibly dirty, use an alcohol-based hand sanitizer that contains at least 60% alcohol, and wash with soap and water as soon as you can.
- F. Special considerations should be made for people with asthma. Some cleaning and disinfection products can trigger asthma.
- G. Use a disinfectant product from the EPA N List that is effective against COVID-19.
- H. Always follow the directions on the label to ensure safe and effective use of the product. The label will include safety information and application instructions. Keep disinfectants

SILETZ COMMUNITY HEALTH CLINIC	
Program	COVID-19
Policy	Cleaning, Decontamination, High-Level Disinfection and Sterilization
Date Approved	12/17/21
Date Revised	

out of the reach of children. Many products recommend keeping the surface wet with a disinfectant for a certain period (see “contact time” on the product label).

1. Check the product label to see what PPE (such as gloves, glasses, or goggles) is required based on potential hazards.
2. Ensure adequate ventilation.
3. Use only the amount recommended on the label.
4. If diluting with water is indicated for use, use water at room temperature (unless stated otherwise on the label).
5. Label diluted cleaning or disinfectant solutions.
6. Store and use chemicals out of reach of children and pets.
7. Do not mix products or chemicals.
8. Do not eat, drink, breathe, or inject cleaning and disinfection products into your body or apply directly to your skin. They can cause serious harm.
9. Do not wipe or bathe people with any surface cleaning and disinfection products.

I. Laundry

1. Use the warmest appropriate water setting and dry items completely.
2. If handling dirty laundry from a person who is sick, wear appropriate PPE.
3. Clean clothes hampers or laundry baskets according to guidance for surfaces.
4. Perform hand hygiene after handling dirty laundry.

J. Electronics such as tablets, touch screens, keyboards, remote controls, and ATM machines.

1. Consider putting a wipeable cover on electronics, which makes cleaning and disinfecting easier.
2. Follow the manufacturer’s instructions and recommendations for cleaning the electronic device.
3. For electronic surfaces that need to be disinfected, use a product on the EPA N List that meets manufacturer’s recommendations.

SILETZ COMMUNITY HEALTH CLINIC	
Program	COVID-19
Policy	Testing for COVID-19 Virus
Date Approved	12/17/21
Date Revised	

PART 18F
Testing for COVID-19 Virus

I. PURPOSE

It is the policy of the Siletz Community Health Clinic (SCHC) to follow sampling and testing instructions when testing for the COVID-19 virus in accordance with CDC and manufacturer guidelines. <https://www.cdc.gov/coronavirus/2019-ncov/hcp/testing-overview.html>

II. POLICY FOR SCHC STAFF

- A. All COVID-19 testing is performed in the ambulance bay located on the ground floor, which opens to the covered parking area where curbside testing of patients is performed.
- B. The following individuals will be notified once a patient has been identified as known positive for COVID-19 based on diagnosis:
 - 1. Clinical Services Director, who will enter the case in Opera and notify the local public health authority. The Clinical Services Director will also conduct an investigation on any positive CTSI employee.
 - 2. Any clinical staff who have had contact with the known positive in the 48 hours prior to symptom onset or date of positive test.
 - 3. CTSI HR department will be notified of any positive CTSI employee test results.
- C. A report of daily positive test counts will be sent at the end of each day by the Clinical Services Director to the following:
 - 1. General Manager
 - 2. Assistant General Manager
 - 3. Health Director
 - 4. Tribal Council Secretary who will distribute to Tribal Council
- D. Positive test reports and case information will also be entered in the Oregon COVID-19 reporting portal found at www.healthoregon.org/howtoreport, per their process described here:

<https://secure.sos.state.or.us/oard/displayDivisionRules.action?selectedDivision=1233>
- E. Once a patient has been identified as known positive for COVID-19, a diagnosis of COVID-19 disease will be recorded on the Integrated Problem List within the EHR if

SILETZ COMMUNITY HEALTH CLINIC	
Program	COVID-19
Policy	Testing for COVID-19 Virus
Date Approved	12/17/21
Date Revised	

diagnosed at the SCHC or historically if the diagnosis occurred elsewhere and outside records are available.

F. Airborne Infection Isolation Rooms

1. Personnel working in the SCHC will clean and disinfect patient care rooms directly or will notify the maintenance staff or the Infection Control Officer at the time of patient discharge to request Airborne Infection Isolation Room (AIIR) cleaning and disinfection as follows:

- a. 6-14 minutes should elapse prior to staff (wearing appropriate PPE) entering an AIIR to clean and disinfect.
- b. Ventilation should be maintained for 30 minutes after prior patient departure before occupying with a subsequent patient.

G. The SCHC has one negative pressure room (room 150) available for use when necessary. Negative pressure must be turned on (the 'light' switch on the wall with both doors labeled "negative pressure") and both doors must be kept CLOSED. Use the 'ball in the wall' visual display to ensure negative pressure is achieved.

H. Cleaning and disinfection procedures shall include the use of an EPA registered disinfectant that is active against SARS-CoV-2 per manufacturer's instructions for use.

I. Management of laundry and medical waste will be performed in accordance with routine procedures.

SILETZ COMMUNITY HEALTH CLINIC	
Program	COVID-19
Policy	Hand Hygiene
Date Approved	12/17/21
Date Revised	

**PART 18G
Hand Hygiene**

I. PURPOSE

Hand hygiene, along with wearing of proper PPE, facemasks, and social distancing, will be practiced in an effort to limit disease transmission. All staff (employees, contractors, volunteers) will practice good hand hygiene to limit the spread of the COVID-19 virus. Practicing hand hygiene, which includes the use of alcohol-based hand rub (ABHR) or handwashing, is a simple yet effective way to prevent the spread of pathogens and infections in healthcare settings.

II. DEFINITIONS

Hand Hygiene means cleaning your hands by using either handwashing (washing hands with soap and water), antiseptic hand wash, antiseptic hand rub (i.e., alcohol-based hand sanitizer including foam or gel), or surgical hand antisepsis.

III. POLICY FOR SCHC STAFF

- A. Employees are required to follow the detailed handwashing practices outlined in Section VIII of the SCHC Infection Control Policy.
- B. Hands should be washed with soap and water for at least 20 seconds when visibly soiled, before eating, and after using the restroom.
- C. Alcohol-based hand sanitizer is the preferred method of hand hygiene when hands are not visibly soiled or dirty.
- D. Lapses in proper hand hygiene practices noted by any personnel will be corrected at the time of recognition.
- E. Auditing adherence to proper hand hygiene practices by personnel working (1) within the patient care areas area and (2) at patient/visitor/personnel screening stations will be completed at a minimum of monthly by the Infection Control Officer. Audit results will be documented and shared with the Safety/Infection Control Committee and the Planning/QI Committee monthly, with areas for improvement noted and corrected. A schedule will be created and maintained by the Infection Control Officer to assure on-going hand hygiene adherence by staff.

SILETZ COMMUNITY HEALTH CLINIC	
Program	COVID-19
Policy	Occupational Health
Date Approved	12/17/21
Date Revised	

**PART 18H
Occupational Health**

I. PURPOSE

Occupational health is to promote and maintain the highest degree of physical, mental, and social well-being of workers in all occupations. The COVID-19 virus presents a grave danger to workers in healthcare settings where people with suspected or confirmed COVID-19 are reasonably expected to be present. It is the policy of the Siletz Community Health Clinic (SCHC) to assure that all personnel take required safety precautions to protect themselves from contracting the COVID-19 virus and to be aware of the varied policies and procedures specific to limiting COVID-19 disease transmission in the workplace.

II. POLICY FOR SCHC STAFF

- A. To keep personnel work duties on track while balancing personal responsibilities and concerns, the Employee Assistance Program (EAP) is available. RBH can be reached at 866-750-1327 or at rbhsolutions.com
- B. Workplace flexibilities will be utilized to the extent and duration permissible by the Confederated Tribes of Siletz Indians.
- C. Social distancing guidelines along with proper use of hand hygiene, PPE, and other physical barriers will be utilized to limit disease transmission. In departments where possible, staggered work schedules and working from home will be utilized to limit the number of staff in the clinic.
- D. There will be the appropriate number or percentage of personnel per space (meeting rooms, office spaces).
- E. Common areas will be marked to remind staff about social distancing (hallways, break spaces, restrooms).
- F. Effective 03-19-2020, personnel who report to work at the SCHC will receive COVID-19 symptom screening for the duration of the event. Staff will check their temperatures and will record the temperature along with symptom screening questions at the start of each shift. Screenings are completed in various departments. The front entrance is staffed during business hours with a designated screener who is responsible for screening and temperature checks of patients, vendors, other CTSI staff and visitors as they come through the entrance.
- G. Effective April 12, 2021, personnel are directed to self-monitor for COVID-19 symptoms and are offered home test kits free of charge in an effort to maximize self-monitoring practices.

SILETZ COMMUNITY HEALTH CLINIC	
Program	COVID-19
Policy	Occupational Health
Date Approved	12/17/21
Date Revised	

- H. At the onset of the pandemic declaration, source control face mask measures were implemented for employees, patients, visitors, contractors, volunteers, and delivery personnel entering the SCHC.

Refer to Enforcement Policy for Face Masks, Barrier Face Coverings, Face Shields, Surgical Masks, and Respirators During the Coronavirus Disease (COVID-19) Public Health Emergency (Revised). <https://www.fda.gov/media/136449/download>.

- I. Effective August 1, 2021, and in accordance with OSHA Temporary Emergency Standards, SCHC personnel are required to wear FDA approved face masks. Wearing cloth masks is no longer an acceptable practice for SCHC personnel working in a health care setting.
- J. The SCHC has the right to require that symptomatic personnel depart from the work site. Personnel who become symptomatic or are diagnosed with COVID-19 disease will contact their supervisor to arrange for immediate leave options.
- K. Staff are encouraged to (prior to entering the workplace) self-screen prior to coming onsite and not to attempt to enter the workplace if any of the following are present:
1. Symptoms of COVID-19
 2. Fever equal to or higher than 100.4 degrees F
 3. Under evaluation for COVID-19 (for example, waiting for the results of a viral test to confirm infection)
 4. Diagnosed with COVID-19 and not yet cleared to discontinue isolation
 5. Exposed to or in close-contact with someone who tested positive for COVID-19 and are not fully vaccinated for COVID-19
- L. Employees are further encouraged to focus on "new" or "unexpected" symptoms (e.g., a chronic cough would not be a positive screen). Consider including these symptoms:
1. Fever or feeling feverish (chills, sweating)
 2. New cough
 3. Difficulty breathing
 4. Sore throat
 5. Muscle aches or body aches
 6. Vomiting or diarrhea

SILETZ COMMUNITY HEALTH CLINIC	
Program	COVID-19
Policy	Occupational Health
Date Approved	12/17/21
Date Revised	

7. New loss of taste or smell
- M. Employees who experience COVID-like symptoms will be directed to contact the nurse triage for an appointment for testing. An employee who is too sick to come to work (for any illness) must contact the supervisor.
- N. If personnel test positive for COVID-19, they are required to notify their immediate supervisor and Human Resources of the diagnosis via email within one hour of receiving a positive COVID-19 diagnosis. The SCHC will address positive COVID-19 results in the workforce with the utmost respect to privacy, while taking swift measures to mitigate the spread of the virus in the workplace. The identity of any staff member who tests positive for COVID-19 must be kept strictly confidential and not further disclosed except as required or permitted by applicable law. Employees will be required to self-screen and make daily assessments of any symptoms that are related to COVID.
- O. Testing remains relevant to assure the safety of others including fellow colleagues and patients. Employees are required to contact Human Resources who will be their primary contact when questions arise about whether to stay home or not. Supervisors are required to report known incidents to their respective supervisor as well as Human Resources to assess quarantine/isolation requirements.
- P. Upon learning of a COVID-19 positive case in a work location, personnel who may have had prolonged close personal contact with the COVID-19 positive staff member (or possibly a patient) will be notified by Human Resources via phone, email, or text. Fully vaccinated close contacts will be notified of exposure, advised to self-monitor for symptoms, and to get tested 3-5 days after exposure incident. Unvaccinated close contacts will be sent home to quarantine and advised to get tested at SCHC or their PCP 7-10 days after exposure incident or if symptomatic.
- Q. CDC's guidelines will be followed for Criteria for Return to Work for Healthcare Personnel with Confirmed or Suspected COVID-19 (Updated September 10, 2021):
<https://www.cdc.gov/coronavirus/2019-ncov/hcp/return-to-work.html>
- R. An incident report and a good faith inquiry to evaluate the source of personnel exposure, determined to have occurred while personnel were performing work-related duties, will be made:
1. While not wearing required PPE to while in close contact (less than 6 feet for \geq 15 minutes) with a patient with COVID-19 disease.
 2. If the individual tested positive for COVID-19 and serious outcomes occur (hospitalization and/or death).

SILETZ COMMUNITY HEALTH CLINIC	
Program	COVID-19
Policy	Occupational Health
Date Approved	12/17/21
Date Revised	

S. Return to work.

SCHC must make decisions regarding an employee's return to work after a COVID-19-related workplace removal, with guidance from:

1. Licensed healthcare provider

2. CDC's "Isolation Guidance"

<https://www.cdc.gov/coronavirus/2019-ncov/your-health/quarantine-isolation.html>

3. CDC's "Return to Work Healthcare Guidance"

https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assessment-hcp.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fhcp%2Freturn-to-work.html

4. CDC's "Strategies to Mitigate Healthcare Personnel Staffing Shortages" which allows for elimination of quarantine for certain healthcare workers, but only as a last resort.

www.cdc.gov/coronavirus/2019-ncov/hcp/mitigating-staff-shortages.html

SILETZ COMMUNITY HEALTH CLINIC	
Program	COVID-19
Policy	Screening/Testing of SCHC Staff
Date Approved	12/17/21
Date Revised	

PART 18I
Screening/Testing of SCHC Staff

I. PURPOSE

All staff (employees, contractors, volunteers) who report to work at the Siletz Community Health Clinic (SCHC) will obtain COVID-19 symptom screening and temperature checks each day for the duration of the event.

II. POLICY FOR SCHC STAFF

A. Employees are required to self-screen and make daily assessments of any symptoms that are related to COVID.

1. SCHC staff are encouraged to (prior to entering the workplace) self-screen prior to coming onsite and not to attempt to enter the workplace if any of the following are present:

- a. Symptoms of COVID-19
- b. Fever equal to or higher than 100.4 degrees F
- c. Under evaluation for COVID-19 (for example, waiting for the results of a viral test to confirm infection)
- d. Diagnosed with COVID-19 and not yet cleared to discontinue isolation
- e. Exposed to or in close-contact with someone who tested positive for COVID-19 and have not been vaccinated for COVID-19

2. SCHC staff are further encouraged to focus on "new" or "unexpected" symptoms (e.g., a chronic cough would not be a positive screen). Consider including these symptoms:

- a. Fever or feeling feverish (chills, sweating)
- b. New cough
- c. Difficulty breathing
- d. Sore throat
- e. Muscle aches or body aches
- f. Vomiting or diarrhea

SILETZ COMMUNITY HEALTH CLINIC	
Program	COVID-19
Policy	Screening/Testing of SCHC Staff
Date Approved	12/17/21
Date Revised	

g. New loss of taste or smell

- B. SCHC staff who experience COVID-like symptoms will be directed to contact the nurse triage or their PCP for an appointment for testing. An employee who is too sick to come to work (for any illness) must contact the supervisor.
- C. SCHC offers home test kits free of charge in an effort to maximize self-monitoring practices. Contact COVID Lead Coordinator or Clinical Services Director for test kits.
- D. The SCHC has the right to require symptomatic personnel to depart from the work site. Personnel who become symptomatic or are diagnosed with COVID-19 disease will contact their supervisor to arrange for immediate leave options.
- E. The SCHC will address positive COVID-19 results in the workforce with the utmost respect to privacy, while taking swift measures to mitigate the spread of the virus in the workplace. The identity of any staff member who tests positive for COVID-19 must be kept strictly confidential and not further disclosed except as required or permitted by applicable law.
- F. Testing is relevant to assure the safety of others including fellow colleagues and patients and to obtain a proper diagnosis for treatment. Employees are to contact their respective supervisor who will be their primary contact when questions arise about whether to stay home or not. Supervisors are required to report known incidents to their respective supervisor/department manager to assess quarantine/isolation requirements.
- G. Upon learning of a COVID-19 positive case in a work location, personnel who may have had prolonged close personal contact with the COVID-19 positive personnel will be notified as directed by the Infection Control Officer who will perform a risk assessment to determine whether the exposed employee will need to quarantine or self-monitor.

SILETZ COMMUNITY HEALTH CLINIC	
Program	COVID-19
Policy	Identification and Management of Ill Patients
Date Approved	12/17/21
Date Revised	

PART 18J
Identification and Management of Ill Patients

I. PURPOSE

It is the policy of the Siletz Community Health Clinic (SCHC) to provide guidance on the identification or screening of suspected patients with symptoms of suspected COVID-19.

II. POLICY FOR SCHC STAFF

- A. The triage process will have oversight by the Clinical Services Director.
- B. All requests for COVID-19 testing or questions about COVID-19 like illnesses will go to nurse triage for screening.
 - 1. Nursing staff will use a COVID-19 symptom screening tool to determine testing priority.
 - 2. COVID-19 testing will be done outside in the covered provider parking area in blocked off spots marked for COVID-19 testing.
 - 3. Patients coming in for provider appointments, that have COVID-19 like symptoms, will have COVID-19 testing prior to their scheduled appointment and coming into the building.
- C. Patient care activities will follow the CDC’s Interim Clinical Guidance for Management of Patients with Confirmed Coronavirus Disease (COVID-19):
<https://www.cdc.gov/coronavirus/2019-ncov/hcp/clinical-guidance-management-patients.html>
- D. Dedicated medical equipment should be used when caring for patients with known or suspected COVID-19. All non-dedicated, non-disposable medical equipment used for patient care should be cleaned and disinfected according to manufacturer’s instructions and the SCHC Infection Control Policy.
- E. Patient transport to emergency rooms or other outside agencies will include communication to receiving agencies of patient status, in advance, for coordination of appropriate patient handling.
- F. Surge Capacity. Demand for COVID-19 tests and visits should be tracked often, in order to plan and prepare a response for increased demand for resources such as PPE, testing kits and supplies, due to the COVID-19 pandemic. Visit totals for COVID-19 like illnesses, positive COVID-19 test results, referral activity, data from personnel screening and attendance, as well as data from weekly community sewer testing will be utilized to determine if respiratory symptoms and/or actual COVID-19 disease is present or

SILETZ COMMUNITY HEALTH CLINIC	
Program	COVID-19
Policy	Identification and Management of Ill Patients
Date Approved	12/17/21
Date Revised	

increasing in the community. In the event of a surge, refer to the SCHC Medical Staff Bylaws for disaster privileging procedures if necessary.

SILETZ COMMUNITY HEALTH CLINIC	
Program	COVID-19
Policy	Patient and Visitor Access and Movement Within the Facility
Date Approved	12/17/21
Date Revised	

PART 18K

Patient and Visitor Access and Movement Within the Facility

I. PURPOSE

It is the policy of Siletz Community Health Center (SCHC) to limit visitors to the clinic to minimize the risk of COVID-19 disease transmission regardless of known community transmission.

II. POLICY FOR SCHC STAFF

- A. A single point entrance is established for temperature recording for patients, contractors, vendors, and visitors (limited to one per patient).
- B. Visitors will be limited to one per patient.
- C. Visual alerts, such as signs and posters, should be placed at facility entrances and other strategic areas instructing visitors not to enter as a visitor if they have fever or respiratory symptoms.
- D. Barriers will be installed for staff that cannot separate themselves in common areas/reception areas.
- E. External signage will direct parking for patients and visitors
- F. Display signs are located throughout the CTSI facilities pertaining to risk, social distancing, and mask protocols. Signs must be laminated.
- G. Mask requirements are posted on the doors. Masks are available at the main clinic entrance and the two employee entrances. Daily temperature screening is completed in each department upon arrival. Monthly logs are submitted to the Lead COVID Coordinator for storage.
- H. Staff may be asked to stagger their working hours with other employees to minimize the number of staff in one area.
- I. All clinic staff who schedule patients are responsible for pre-screening patients at time appointment is scheduled. When patients arrive for appointment, the front entry screener will confirm patient has a scheduled appointment, review COVID-19 screening questions with them and take their temperature. Any patient that has a temperature of 100.4 F or higher or who answers yes to screening questions, will be evaluated by the nurse triage prior to being allowed to attend the scheduled appointment.
- J. Patients with scheduled COVID-19 testing appointments will be directed to park in the provider parking area around back of the clinic. Signs are posted instructing patients what to do, if they arrive prior to the tester.

SILETZ COMMUNITY HEALTH CLINIC	
Program	COVID-19
Policy	Patient and Visitor Access and Movement Within the Facility
Date Approved	12/17/21
Date Revised	

- K. If for any reason a person with known or suspected COVID-19 needs to be brought into the clinic for evaluation, the patient will be source masked upon entrance to the SCHC, and brought immediately to the exam room.

SILETZ COMMUNITY HEALTH CLINIC	
Program	COVID-19
Policy	Supplies and Inventory Management
Date Approved	
Date Revised	

**PART 18L
Supplies and Inventory Management**

I. PURPOSE

The Siletz Community Health Clinic (SCHC) will ensure that there is an adequate supply of masks, face coverings, face shields, personal protective equipment (PPE), including respirators necessary to minimize employee exposure to the COVID-19 virus.

II. POLICY FOR SCHC STAFF

- A. The Clinical Services Director and/or the Emergency Preparedness Coordinator, with assistance from other key personnel, will determine necessary critical supplies required and the numbers of each critical supply item needed to support the care and safety of patients, visitors, and personnel.
- B. Distribution of masks is based on need/requests. Employees can reach out directly to the Clinical Services Director at 541-444-9610 or by email at cherityb@ctsi.nsn.us.
- C. Inventory will be tracked at a minimum of weekly, more often as required:
 - 1. Cleaning and disinfection supplies used by medical staff. Other department managers/supervisors are required to monitor cleaning and disinfection supplies used in their areas and order as needed.
 - 2. Hand hygiene products.
 - 3. Medical supplies to support intravenous fluid use and respiratory monitoring/therapy.
 - 4. Medical equipment to support intravenous fluid use, cardiac monitoring, and respiratory monitoring/therapy.
 - 5. Personal Protective Equipment
 - 6. COVID-19 testing supplies.
- D. If necessary, a PPE burn rate calculator will be used to project anticipated supply usage.
- E. Emergency purchases of supplies or services related to direct patient care are authorized in accordance with CTSI acquisition policies.

SILETZ COMMUNITY HEALTH CLINIC	
Program	COVID-19
Policy	Employee Training and Education
Date Approved	
Date Revised	

**PART 18M
Employee Training and Education**

I. PURPOSE

It is the policy of the Siletz Community Health Clinic (SCHC) to assure routine education and training for employees in the prevention and spread of the COVID-19 virus.

II. POLICY FOR SCHC STAFF

- A. All current employees are required to attend training on bloodborne pathogens, COVID-19 Infection Control Plan, all COVID-19 policies and procedures, and COVID-19 Exposure Policy. Employees receive this training at time of hire and once a year thereafter as a mandatory infection control review. All new hires receive OSHA COVID-19 related training on hire by the Human Resources Department.
- B. Continuous Learning Plan. Managers/Supervisors will be responsible for documenting any training, work sessions, and staff meetings regarding informing their respective staff on COVID-19 precautions and workplace safety for staff, patients, and visitors; and will monitor public health communications about COVID-19 recommendations.
- C. Managers/Supervisors will ensure that staff have access to that information and collaborate with staff to designate effective means of communicating important COVID-19 information and will frequently check the OSHA and CDC COVID-19 websites for updates.
- D. Managers/Supervisors will train all staff, with respect to their departments, with reasonably anticipated occupational exposure to COVID-19 SARS-CoV-2 about the sources of exposure to the virus, the hazards associated with that exposure, and appropriate workplace protocols in place to prevent or reduce the likelihood of exposure.
- E. Training should include information about how to isolate individuals with suspected or confirmed COVID-19 or other infectious diseases, and how to report possible cases. Training must be offered during scheduled work times, at no cost to the employee, and documented.
- F. All providers and other staff engaged in direct patient care must complete the following:
 - 1. Novel Coronavirus
 - A Physician’s Guide; American College of Physicians (ACP):
<https://www.acponline.org/cme-moc/online-learning-center/novel-coronavirus-a-physicians-guide>

SILETZ COMMUNITY HEALTH CLINIC	
Program	COVID-19
Policy	Employee Training and Education
Date Approved	
Date Revised	

2. PPE proper use training video NETEC
Personal Protective Equipment for 2019 Novel Coronavirus (COVID-19)
<https://www.youtube.com/watch?v=bG6zISnenPg>
- G. New personnel orientation will include training on the following topics:
1. COVID-19 symptom screening and source mask requirements
 2. Infection prevention and control related universal/standard precautions (i.e. Bloodborne Pathogen Training)
 3. Hand hygiene
 4. PPE donning/ doffing
 5. FIT Testing (when applicable)
- H. COVID-19 education regarding its implications and basic prevention and control measures will be included in external communications to patients/visitors.
- I. COVID-19 preparedness and patient routing drills will occur and be documented, with areas for improvement noted and corrected to the extent possible.
- J. PPE Compliance. Lapses in correct PPE usage noted by any personnel will be corrected at the time of recognition. Auditing adherence to recommended PPE use by personnel working (1) within the patient care area and (2) at patient/visitor/ personnel screening stations will be completed at a minimum of monthly by the Infection Control Officer. Audit results will be documented and shared with the Safety/Infection Control Committee monthly, with areas for improvement noted and corrected.