**[YOUR PRACTICE]**

**COVID19 Control Policy**

Date Issued: June 1, 2020

Date Reviewed: N/A

Date Revised: N/A

**Purpose:** To provide guidelines for provision of a safe environment that eliminates or minimizes the risk for transmission of the COVID19 Coronavirus in our office for the patient, employees, and physicians.

**Introduction:** This policy addresses and incorporates the prevailing guidance for medical practice operation and the minimization of the risk of spread of COVID19 to/from the patient, employees, and physicians.

The information set forth in these guidelines is based on federal and state regulations that include, but are not limited to, the following: Occupational, Safety and Health Act (OSHA), the Environmental Protection Act (EPA), New Jersey Department of Health (NJDOH), and national infection control guidelines and recommendations from the Centers for Disease Control and Prevention (CDC), Association for Professional in Infection Control and Epidemiology (APIC), the American Association for Medical Instrumentation (AAMI), and the American Medical Association (AMA), and the surrounding Divisions of Consumer Affairs and licensing boards.

**Policy:**

It is the policy of this practice to provide safe care for our patients, as well as to provide for a safe environment for our employees and physicians with respect to medical services, while maintaining compliance with current federal, state, and OSHA guidelines. The parameters set forth below are hereby implemented to ensure that expectations are memorialized and followed with respect to controlling and limiting the exposure of the practice, employees, and patients to the COVID19 Coronavirus. ***This policy shall remain in effect until modified or cancelled by the practice. This policy supplements, and is not meant to void any portion of, the practice’s Infection Control & Sterilization Policy. To the extent that the other corollary policy addresses an area of concern, it shall apply, is incorporated by reference, and is not restated herein.***

1. Patients Shall be Screened Before In-Person Visits.

At least 24 hours before an in-person visit, staff should review with patients the reopening logistics and protocols. Patients should be screened before entering the Practice. Persons accompanying the patient need to be screened as well and, to the extent possible, not permitted to attend the office visit.

With respect to the screening, all patients seeking in-person visits (or the patient’s parent, guardian, or accompanying companion) shall be called the day prior to the visit to (i) assess whether an in-person visit is necessary; (ii) determine their current health status; (iii) determine whether the patient has had known exposure to COVID19 or has compatible symptoms or has tested positive; (iv) determine the length of time since the onset of symptoms or from the positive test results; and (v) advise the patient of the face-covering and temperature taking requirements discussed below).

All patients shall remain in their cars until the time they are called in for their scheduled visit. They shall be instructed to contact the office upon arrival and to provide a contact telephone number to be called in when their appointment time is ready.

To the extent possible, all staff and visitors should have their temperatures taken before entering the office. Anyone with a temperature of 100.4 or higher shall not be permitted to enter the office.

Staff members temperatures shall be taken at least twice during each business day.

Vendors, delivery persons, and educators shall not be permitted at the office. Repairs shall be scheduled, whenever possible, for during non-business hours.

It shall not be required for all physicians, staff, patients, and visitors have valid COVID19 or COVID19 antibody testing before coming onto the Practice premises.

1. Person-to-Person Direct, Unobstructed Contact Shall be Avoided.

Reasonable social distancing shall be implemented. As set forth above, patients and their approved accompanying companions shall remain in their cars until the time of scheduled visits and shall promptly leave the premises following their visits. To the extent possible, all individuals at the Practice premises remain 6 feet apart at all times, with the exception of when treatment, examination, and evaluative services are rendered by a medical assistant and/or physician/physician’s assistant/advanced nurse practitioner. To the extent possible, contactless registration and payment shall be implemented.

Patient appointments shall be appropriately and reasonably staggered throughout the business day.

Patients with known exposure or compatible symptoms shall be scheduled for end of the day or a dedicated room. Patients with increased susceptibility to infections or complications from COVID19 shall be scheduled when the fewest patients and staff will be present, and not during times reserved for patients with known exposure or compatible symptoms.

Workspaces shall be rearranged to provide distance between employees. Dedicated workstations and patient rooms shall be implemented, whenever possible, so fewer people touch the same equipment.

Personal Protective Equipment (PPE) shall be worn/utilized in accordance with prevailing guidelines and circumstances of the Practice. It shall not be required that face shields, sneeze guards, or plexiglass shields be installed or utilized by the Practice. To the extent possible, these measures may be implemented. Masks shall be worn by physicians, staff, and patients (and their approved visitors when necessary) at all times while at the office. Patients may wear a dedicated face covering if they do not have access to a mask. Patients are not permitted to pull their shirt collar over their nose and mouth during access to the Practice premises. It is not required that gloves be worn unless by the staff rendering medical treatment or procedure services to patients. Staff is required to don and doff PPE appropriately.

\*\*If treatment services are being rendered to a patient that involve the breaking of the skin surface, the emission of blood or bloodborne pathogens, direct contact with a patient’s face, eyes, or mouth, or present a high risk of aerosolization, then it shall be required that: (i) the enhanced risks and complications of such procedures be explained to the patient and documented in the chart; (ii) PPE including respiratory protection such as N95 masks, gloves, fluid-resistant gowns, hair covers, and eye protection with solid side shields or face shields be worn.

To the extent possible and reasonable under the circumstances, the Practice shall utilize telemedicine to treat, order tests, to triage patients, and/or for follow-up care.

1. Enhanced Office Cleaning & Disinfection Practices Shall be Implemented.

The Practice hereby adopts its Infection Control & Sterilization Policy herein.

In addition, the following *additional* measures shall be required to be followed until further notice:

1. All high-touch areas are to be cleaned and disinfected with due diligence (including, but not limited to, front desks, treatment rooms, waiting areas, handles, doorknobs, computer keys, computer “mice”, and on-premises bathrooms) between each staff and patient encounter with such surface/room/area. This shall be done with commercial-grade germicidal products.
2. Medical waste shall be promptly disposed of.
3. All reading materials and toys shall be removed from waiting areas and bathrooms.
4. Disposable pens shall be utilized.
5. Credit cards shall be disinfected.
6. All staff shall have break time for repeated hand washing and changing PPE.
7. Hand hygiene is paramount. Antimicrobial soaps and hand sanitizers shall be placed throughout the practice and utilized by physicians and staff with aggressive regularity.
8. Guidance Relating to Infection Control Shall be Regularly Reviewed & Shared with Staff & Patients.

All staff shall understand COVID19 symptoms and stay home if they exhibit them. Staff exhibiting symptoms of COVID19 shall be required to be tested for COVID19 and to remain home for a period of at least fourteen (14) days or until they present a negative COVID19 test result and exhibit no active virus symptoms to the Practice, whichever is later.

A log of patients shall be maintained by the Practice to facilitate contact tracing, if requested to do so, by the State Department of Health.

All employees of the Practice shall be required to regularly review this policy and to remain abreast of all updates, developments, guidance, and directives issued by the State Department of Health, professional boards, and the CDC.