



**Plan Statement:** Staff and Visitors are required to answer screening questions upon entry to the facility and before entering resident care areas. This process will help monitor for possible signs of infectious diseases such as COVID-19. An electronic device will be available at the front desk for staff and visitor sign in; paper copies of the screen questions are available.

### **Policy Plan and Implementation**

#### **1. Employee Procedure**

1. Tap the screen. If device is offline, press confirm to continue. Your information will still be registered.
2. Tap the SIGN IN button on the screen.
3. Tap the STAFF button.
  - a. **THE LIST GOES BY LAST NAME.** Look for your last name and tap the screen. If there is more than one employee with your same last name, it will be your first initial and then last name.(i.e. J. Smith)
4. The first question asks you to put your current temperature. At this time, **THE RECEPTIONIST OR NURSING SUPERVISOR WILL TAKE YOUR TEMPERATURE. YOU ARE NOT TO TAKE YOUR OWN TEMPERATURE.** After your temperature has been taken, please type it in the app and answer the following questions. After answering **ALL** the questions, press **CONTINUE**. You will not be able to move on until you have answered all of the questions.
5. A new page will show up asking you to wash your hands and practice social distancing. On this page as well, it tells you to let the receptionist or nursing supervisor know if you answered “Yes” to any of the questions. Press **CONTINUE** in the bottom right corner.
6. You are now signed in and allowed to enter the resident care areas of the building and clock in to start your shift.

**\*PLEASE USE DISINFECTANT WIPES AFTER USE OF THE IPAD\***

#### **2. Visitor Procedure**

Upon entering the facility, the receptionist or nursing supervisor will take the temperature of the visitor (if a temperature of 99.5 or higher is recorded the nursing supervisor or Infection Preventionist will see you for further evaluation) you will not be allowed to proceed into the building; in conjunction you will be screened and asked a series of questions by the receptionist or nursing supervisor:

1. The name of the “Company” you are with
2. I consent to adhere to the follow the Policy & Procedures set forth pursuant the NJ DOH screening recommendations and CDC guidelines
3. The name of the individual you are “Visiting”
4. Your “Current Temperature”

### **If you answer “YES” to any of the following screening questions #'s 5-10 you will need to meet with the Infection Preventionist prior to entering resident care areas**

5. Do you have any of the following symptoms: Cough, Muscle Ache, Sore Throat, Headache, Vomiting or Diarrhea, Difficulty Breathing
6. Have you had vomiting or diarrhea in the past 24 hours?
7. Have you traveled within the last 14 days or lived with someone who has traveled within the last 14 days
8. **HAVE BEEN IN CONTACT WITH A PERSON WHO IS UNDER INVESTIGATION FOR covid-19?**
9. **HAVE YOU HAD CLOSE CONTACT WITH A PERSON KNOWN TO HAVE COVID-19 ILLNESS?**
10. Is your temp 99.5 or above?
11. Did you answer all the above questions truthfully and completely?

#### **3. Notification Alerts**

In the event that any of the questions regarding symptoms, travel or exposure are answered “YES”; a real time notification email will be sent to the Administrator, Asst. Administrator, Dir. of Admin Services, DON, Infection Control & Nursing Supervisor. If the question in regards to adhering to the facility protocols is answered “NO” a real time notification email will be sent to the Administrator, Asst. Administrator, Dir. of Admin Services, DON, Infection Control & Nursing Supervisor.