COVID-19 Procedure: Management of Patient Presumed to be Positive

This procedure is intended to outline the actions that need to be taken when we have an individual in our setting (residential, outpatient & employee) who we presume to be positive for COVID-19 due to symptoms, or a confirmed diagnosis. *Please note that immediate action is necessary upon identification of the symptoms, do NOT wait for testing results to act.

General Considerations
1. Continue to follow CDC guidelines for distance and hygiene
2. Designate space in building for isolation (recommend using James Flint as resource)

Residential
1. Notify medical
2. Obtain an N95 mask for the patient, and for the staff member working directly with the patient through the discharge process.
3. Isolate the patient to the designated area (each site to determine their isolation location)
4. Begin discharge planning; should occur as quickly as possible
5. Notify family of discharge status and requirements to remove patient from treatment
6. Notify site leader and housekeeping leader; housekeeping to follow prescribed procedures
7. Clean room per housekeeping guidelines (2 hour wait time for entry)
8. Complete the Infection Report Form (Fusion-Forms)
9. Notify Marv Seppala and Jill Seward
10. Exposed roommates and staff are not required to isolate
   a. Assess for symptoms daily
   b. Take temperatures daily
11. Site leader to communicate exposure

Outpatient
1. Patient must not be allowed to participate in programming and must be sent home immediately
2. Notify Marv Seppala and Jill Seward
3. Notify site leader and housekeeping leader; housekeeping to follow prescribed procedures
4. Complete the Infection Report Form (Fusion-Forms)
5. Site leader to communicate exposure

Staff Member | Volunteer | Visitor
1. The individual will immediately leave the premises upon identification of the COVID-19 symptoms.
2. Notify Marv Seppala and Jill Seward
3. Notify housekeeping leader; housekeeping to follow prescribed procedures
4. Complete an incident report (Fusion)
5. Manager to communicate exposure
Cleaning
Facilities has a documented procedure for disinfecting spaces following a febrile individual. Once housekeeping is notified, they will take the appropriate actions. Please note, part of the procedure includes waiting a prescribed period of time before entering/cleaning the space involved.

Notification Script for Communicating Confirmed COVID-19 Diagnosis
Our practice is to notify a site’s patients and staff any time a patient is diagnosed with COVID-19. Below is a communication template, to be deployed by local leadership.

COMMUNICATING COVID-19 CASE
Customize yellow highlights and remove highlighting before communicating
At the Hazelden Betty Ford ________ location, an individual who has been in the facility in the past week—including the cafeteria, group rooms,—has been diagnosed with COVID-19.

All of our treatment locales are now experiencing community transmission of COVID-19, meaning there are patients infected with the virus in our community who may not be diagnosed or have symptoms. Because of the prevalence of the virus, we are implementing the following strategies to minimize and contain transmission on our campuses.

- Assume that you and those around you have the virus, and follow universal precautions.
- Current information indicates that cough, sore throat and runny nose may precede development of fever by 1-3 days; regularly assess for these symptoms and report any to medical/nursing personnel.
- More frequent temperature measurements – twice daily for those who have had direct exposure to individuals diagnosed with COVID-19.
- We have followed CDC guidelines around thoroughly disinfecting and cleaning the affected areas, and will continue to do so.