**Standard Operating Procedure #2**

**Work Instructions for Health Surveillance and Reporting**

Revision Register:

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| Documentation and Responsibility | Name | Title | Date |
| Amended by:  |  |  |  |

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**OBJECTIVE**

To provide instructions on setting up a system of ongoing health checks for chapter members and instructions for screening associate members, pledges, chapter advisers, guests, and visitors prior to entry to the chapter facility.

**PERSONAL PROTECTIVE EQUIPMENT**

1. **SCREENER AND VISITOR PPE**
	1. Face and Eye Protection
		1. Face Mask

**DEFINITIONS**

1. Fever – The Centers for Disease Control and Prevention (CDC) defines an ill person as someone who:
2. Has a fever (has a measured temperature of 100.4 °F [38 °C] or greater, or feels warm to the touch, or gives a history of feeling feverish**) accompanied by one or more of the following:**
* Skin rash
* Difficulty breathing
* Persistent cough
* Decreased consciousness or confusion of recent onset
* New unexplained bruising or bleeding (without previous injury)
* Persistent diarrhea
* Persistent vomiting (other than air sickness)
* Headache with stiff neck, or
* Appears obviously unwell **OR**
1. Has a fever that has persisted for more than 48 hours **OR**
2. Has symptoms or other indications of communicable disease, as the CDC may announce.
3. Health surveillance in this standard operating procedure (SOP) refers to conducting regular health self-checks for early detection of any potential infection or illness. It also includes screening of others who may visit the chapter facility prior to entry.
4. Health monitoring in this SOP refers to self-monitoring an individual’s health within the facility.
5. HIPAA Privacy Rule – Establishes national standards to protect individuals’ medical records and other personal health information. The Rule requires appropriate safeguards to protect the privacy of personal health information, and sets limits and conditions on the uses and disclosures that may be made of such information without patient authorization.
6. Non-Contact Infrared Thermometer (NCIT) – According to the Food and Drug Administration, is a thermometer that measures an individual’s surface temperature without making physical contact. Improper use of NCITs can result in inaccurate temperature measurements.
7. Option for purchase by members residing in the chapter facility: Temple touch or ear thermometer is a non-invasive thermometer for member personal use only. Not to be used at the entry screening station.
8. Nonpharmaceutical Interventions (NPI) – Actions that people and communities can take to slow the spread of illness. These actions include simple everyday preventive measures, such as staying away from other people when you are sick, practicing social distancing, properly covering coughs and sneezes, and washing hands often.
9. Screening – Assessing an individual’s temperature and symptoms prior to entry into the chapter facility.
10. PPE – Personal Protective Equipment
11. CDC – Centers for Disease Control and Prevention
12. FERPA – Family Educational Rights and Privacy Act
13. FDA – Food and Drug Administration
14. OSHA – Occupational Safety and Health Administration
15. NIOSH – The National Institute for Occupational Safety and Health
16. PUI – Person Under Investigation

**SAFETY**

The Centers for Disease Control and Prevention (CDC) has published a guidance to separate people infected with a potentially infectious pathogen (e.g., virus, bacteria) from people who are not infected. People who are in isolation should stay home until it is safe for them to be around others. In the home, anyone sick or infected should separate themselves from others by staying in a specific “isolation room” or area and using a separate bathroom (if available).

**HOUSE CORPORATION AND CHAPTER ADVISER PROCEDURES**

1. **FOCUS ON PREVENTION**
	1. Distribute written information about the signs and symptoms of potential infection of COVID-19 to Chapter Officers for their dissemination to members and pledges.
	2. Monitor CDC and other governmental sources for potential emerging or reemerging infectious diseases.
	3. Support self-monitoring by members by providing guidance and contact information
	4. Support health screening of all members, associate members, pledges, visitors, guests and non-resident members prior to entering the chapter facility.
	5. Work with the designated Chapter Officer to develop a specific plan for health screening.
2. **SELECTING A NON-CONTACT INFRARED THERMOMETER (NCIT)**
	1. There are numerous NCITs with various features. Compare the following:
		1. Accuracy is the most important feature. Manufacturers will provide a range in terms of “±” or “≤.”
		2. Read or report speed is the time needed to complete the reading process.
		3. Distance required from the forehead to take an accurate reading. This needs to be a comfortable distance to maintain as much distance between the screener and the visitor.
		4. LED screen size and color (e.g., LCD backlit). Make sure it can be easily read by persons who may have vision impairments.
		5. Measurement range is the range from lowest to highest temperatures readable by the sensors.
		6. Power source and power off/conservation. Most are battery operated and some can take up to 3,000 readings on 2 AAA batteries.
		7. Some have an alarm or beep when temperatures are out of range. Check to see if the alarm can be turned off or select a model that does not have an alarm to maintain individual privacy.
	2. Make sure that it has received FDA approval.
3. **HEALTH SCREENING PLAN FOR ENTRY**
	1. The following items are recommended for the screening station:
		1. Non-Contact Infrared Thermometer (NCIT) with extra batteries. Consider having more than one NCIT available in the event of a device failure, to test that the NCIT is properly calibrated, or to speed up entry of multiple individuals.
		2. Sign in sheet.
		3. Soap and running water near the entry or alcohol-based hand sanitizer containing at least 60% alcohol.
		4. Disinfectant and paper towels or disinfectant wipes.
		5. Touchless sensor or soft-step waste basket.
		6. Waste basket trash liners.
		7. Signage explaining steps to administer health screening.
		8. Use painter’s tape or stanchions to set up lanes on the floor or other methods to ensure individuals remain at least six feet apart during the entry process.
		9. Depending on space availability, install pegs or hooks spaced 24” apart or other accommodation for hanging outerwear prior to entering chapter facility.
		10. COVID-19 warning signs/posters at the outside point of entry.Include that they must comply with mandatory COVID-19 prevention steps as a condition to enter the chapter facility.

*For example:*

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**SCREENING CHECKPOINT**

Enter at your own risk. We cannot guarantee that this is a COVID-19 free facility.

You are required to sanitize your hands upon entry and may be required to have your temperature taken and wear a mask.

To protect everyone, we are asking all members, visitors, and employees to review the questions below.

If you answer “yes” to any of these questions, **please do not enter this facility.**

Have you in the past 14 days:

Q1: Traveled to one of the known COVID-19 “Hot Spots”?

Q2: Been in contact with a novel coronavirus (COVID-19) infected person?

Q3: Experienced the following symptoms in the last 14 days:

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* Fever or chills
* Cough
* Shortness of breath or difficulty breathing
* Fatigue
* Muscle or body aches
* Headache
* New loss of taste or smell
* Sore throat
* Congestion or runny nose
* Nausea or vomiting
* Diarrhea
	1. When preparing the environment for use of the NCIT, the FDA recommends the following:
		1. Use a draft-free space and out of direct sun or close to radiant heat sources. If possible, set up the screening area close to the entrance with a barrier between the screener and people being screened.
		2. Determine if conditions are optimal for use. Typically, the environmental or temperature required in order for the device to operate should be between 60.8-104º F (16-40º C) and relative humidity below 85 percent.
		3. Place the NCIT in the testing environment or room for 10 – 30 minutes prior to use to allow the NCIT to adjust to the environment.
		4. Indicate participant waiting spots in 6 ft. increments to maintain social distancing and confidentiality. If possible, provide seating a safe distance from the entrance and screening station for visitors who are awaiting re-screening.
	2. Identify screeners who will be responsible for performing temperature screenings on guests and visitors requesting entry. All members and associate members not residing at the chapter facility should be screened by a person trained to use the NCIT.
	3. Determine the temperature threshold above which constitutes a fever. Consult with local health officials or college/university health services for the threshold for your area. Or, set the threshold in accordance with CDC definition of 100.4◦ F.
	4. Have a sign in sheet available at all entrances (many chapter facilities have more than one entrance). If possible, restrict to a single point of entry to facilitate surveillance and monitoring.
	5. Ensure that the screening location does not block facility exits or egress in case of an emergency.
	6. Place hand sanitizer at the entrance and require all entrants to disinfect their hands immediately upon entry into the chapter facility.
1. **PREPARING FOR NCIT SCREENING:**
	1. Both screeners and individuals being screened are required to wear face masks during screening. Require all outside visitors to wear a mask while in the chapter facility and while attending chapter activities.Masks help reduce the spread of droplets from infectedpersons tobecome airborne and from being transmitted to surfaces within the chapter facility that can be passed on to other persons.
	2. Have the individual ensure that their forehead is clean and dry. The forehead should not be blocked with anything such as a head cover (e.g. hat, bandana).
	3. Keep in mind that the individual’s body temperature at the forehead can be increased or decreased by wearing excessive clothing or a head cover, or by using facial cleansing products (e.g. cosmetic wipes). Body temperature can also be affected by the outside temperature or rigorous activity like jogging.

*Be aware of HIPAA or FERPA privacy protections for members’ health information and never publicly reveal an individual’s COVID-19 status or other health issues to others without their permission.*

* 1. Disinfect and wipe down the NCIT per the manufacturer’s instructions before and after each use.
1. **USING THE NCIT:**
	1. Strictly follow the manufacturer’s guidelines and instructions for using the NCIT. Consider placing these guidelines and instructions in this SOP.
	2. Typical instructions for use of the NCIT:
		1. Hold the NCIT sensing area ***perpendicular*** to the forehead at the proper distance and instruct the person to remain still during the screening.
		2. The distance between the NCIT and forehead is specific to each NCIT.
		3. Do not touch the sensing area of the NCIT and keep it clean and dry.
	3. Check the reading and show the reading to the person being screened. Do not announce the reading to protect the person’s privacy. If the person wants to discuss the reading caution them to do so very quietly so others cannot overhear.
	4. Do **not** write down the reading. Only share it with the person being screened.
2. **HEALTH SCREENING PLAN WHEN GUEST OR VISITOR DISPLAYS TEMPERATURE INDICATING A FEVER**
	1. Normal body temperatures vary throughout the day. The body temperature could have increased or decreased due to the individual wearing excessive clothing or a head cover or by recently using a facial cleansing product or exercising. If the NCIT displays a temperature indicating a possible fever, consider in your health screening plan whether you will ask the individual to exit the chapter facility or have a seat where indicated and wait 5 minutes to read the temperature again. Determine the number of re-screenings to perform before asking the visitor to exit the chapter facility.
	2. If after re-screening the visitor continues to display a temperature indicating a fever, determine whose responsibility it will be to ask the person to leave: Screener, House Director, Chapter Officer, etc. This can be a challenging situation and may result in peer pressure and rule bending. Consider training members, associate members, etc. to be vigilant in following the rules set up by the chapter.
	3. Do not admit the guest or visitor into the facility, briefly explain the chapter facility rules, and politely ask them to leave. Consider also suggesting to the person that they seek medical attention to ensure that the fever is not an indication of something more serious.
3. **DAILY SELF-SCREENING AND REPORTING PLAN FOR RESIDENTS**
	1. Contact your college/university to learn if they have a self-screening and reporting plan in place.
	2. Consider if you will be designating a screener/volunteer to perform the temperature screening. If you decide to have each member residing in the chapter facility to take their own temperature:
		1. If using an NCIT, follow the procedures above and the manufacturer’s instructions and guidelines.
		2. An alternative for personal use is a temple touch or ear thermometer purchased by the member for personal use only. It may be easier for the member to use than an NCIT and the member does not have to go to the screening station for self-monitoring. These are non-invasive and can be maintained with the member’s personal hygiene tools.
	3. Consider having chapter facility members take their temperature twice a day and self-report a temperature indicating a fever.
	4. Members should be alert for any of these symptoms:
		1. Fever or chills
		2. Cough
		3. Shortness of breath or difficulty breathing
		4. Fatigue
		5. Muscle or body aches
		6. Headache
		7. New loss of taste or smell
		8. Sore throat
		9. Congestion or runny nose
		10. Nausea or vomiting
		11. Diarrhea
		12. Additional symptoms are provided via the [CDC website](https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html)
	5. Members who have symptoms should self-report to the Chapter Officer appointed as the contact and contact the college/university health services, and immediately separate themselves from people, monitor their symptoms and follow the Isolation Room SOP.
4. **COMMUNICATION**
	1. Contact the college/university student health services for guidance on developing the Health Surveillance and Reporting Plan.
	2. Upon development of Health Surveillance and Reporting Plan, communicate the plan with the chapter members, associate members, pledges, staff, etc.
	3. Provide appropriate training (e.g. NCIT use, cleaning and disinfection, review processes and procedures).
	4. Be prepared to make adjustments to the plan as treatment protocols and public health agency guidance evolves.
5. **REFERENCES**

[The HIPAA Privacy Rule](https://www.hhs.gov/hipaa/for-professionals/privacy/index.html#:~:text=The%20HIPAA%20Privacy%20Rule%20establishes,certain%20health%20care%20transactions%20electronically.)

[Non-contact Infrared Thermometers](https://www.fda.gov/medical-devices/general-hospital-devices-and-supplies/non-contact-infrared-thermometers)

[CDC Poster – “Please read before entering.”](https://www.cdc.gov/coronavirus/2019-ncov/downloads/Please-Read.pdf)

[Symptoms of Coronavirus](https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html)

1. **VENDORS**

<https://www.grainger.com/content/ppe-safety>

<https://www.amazon.com/Personal-Protective-Equipment/b?node=486555011>