

# Inherited Property Solutions

## COVID 19 Employee/Guest Screening Protocol

In following the guidance from the Centers for Disease Control (CDC), and to protect our staff and visitors, IPS has implemented pre-entry screening for **ALL individuals** (staff, visitors, contractors, etc.) entering the building; In addition to having their temperature taken by means of a Portable Handheld Forehead Thermometer, **ALL individuals** must complete the Health Screening Questionnaire.

Procedure:

- No Touch Forehead Thermometer
  - Using no-touch Thermometer, Check Individual’s Temperature 3 separate times documenting each numeric result and initiating.
  - Health Screening Questionnaire- Verbatim
    - Ask ‘Yes/No’ Questions and document Answers

Results-Failure:

- TWO (2) or more temperature readings 100.4 Fahrenheit or greater, AND/OR
- An Affirmative (yes) response to and TWO or more of the Health Screening Questions.

Follow Up Action -Failure of Screening:

- Instruct individual to contact his/her physician for a consult and ask them to leave the facility.

Documentation – Screening

Screened Individuals Name (First, Last) \_\_\_\_\_

Procedure:

- No-Touch Forehead Thermometer:
 

○ Reading 1 _____	Initials of Reader: _____
○ Reading 2 _____	Initials of Reader: _____
○ Reading 3 _____	Initials of Reader: _____
  
- Health Screening Questionnaire – Verbatim:
  - Do you have any of the following?
 

• Fever	Y or N
• Shortness of breath (not severe)	Y or N
• Cough	Y or N
• Chills	Y or N
• Repeated shaking with chills	Y or N
• Muscle pain	Y or N
• Headache	Y or N
• Sore throat	Y or N
• Loss of taste or smell	Y or N
  - Are you ill, or caring for someone who is ill? Y or N
  - In the two weeks before you felt sick, did you (if applicable):
    - Have contact with someone diagnosed with COVID-19? Y or N
    - Live in or visit a place where COVID-19 is spreading? Y or N