Community Health Network takes the health and safety of our employees very seriously. In response to the spread of “COVID-19,” a respiratory disease caused by the novel coronavirus, the network has developed this COVID-19 Safety Plan as part of our efforts to reduce the potential for exposure to and spread of the coronavirus. This plan is based on information available from the U.S. Centers for Disease Control and Prevention (“CDC”), the Occupational Safety and Health Administration (“OSHA”), and the State of Indiana and is subject to change based on further guidance from these and other public health agencies. Our organization will monitor coronavirus-related guidance and will communicate any changes to this plan.

We are counting on all caregivers to do their part to promote a healthy, safe environment. If you have any questions about the plan, please email SafeReentry@eCommunity.com

1. Employee Health Screening Process
Community has instituted the following health screening process for all caregivers reporting for work on-site at our facilities:

- Temperature Screening
  - Upon reporting for work, all caregivers will report any fever (> 100.4°F), and all potential exposures to COVID-19 to 317-621-5310.
  - Caregivers will self-monitor for symptoms including fever (> 100.4°F), new/worsening cough, dyspnea (difficult or labored breathing; shortness of breath), myalgia (muscle aches and pain)
  - If these or other symptoms develop, caregivers will self-quarantine and contact Employer Health at 317-621-5310. In additions to the symptoms listed, Employer Health will complete a full symptom assessment of the caregiver including but not limited to GI symptoms, loss of taste/smell, etc.
  - A caregiver exhibiting symptoms of COVID-19 will be asked to immediately return home and not report to work until they are cleared of having COVID-19 and at least 72 hours after recovery from all symptoms.
• **COVID-19 Testing and Diagnosis**
  - Any caregiver who tests positive for COVID-19 or is diagnosed by a healthcare provider with COVID-19 should not report to work but should immediately notify Employer Health.
  - Any caregiver who tests positive for or is diagnosed by a healthcare provider with COVID-19 must stay out of the workplace for at least 10 days after illness onset (the date symptoms begin) and at least 3 days after recovery (the day symptoms are resolved, including the resolution of fever without fever-reducing medications). We remind our caregivers they should stay home when they are sick. Additionally, when coughing or sneezing, caregivers should use proper etiquette, including turning away from other individuals and coughing/sneezing into their elbow.

2. **Enhanced Cleaning and Disinfecting Protocols for the Workplace**
   
The following enhanced cleaning and disinfection protocols will be in place until further notice:
   - We are providing disinfectant products throughout our facilities. A list of hospital approved disinfectants effective against COVID-19 has been provided to all caregivers. Instruction/education for Cleaning High Touch Surfaces during COVID-19 (dated 4/6/20) has been provided through the Incident Command Center and is posted on our intranet.
   - It is necessary to clean AND disinfect frequently touched objects and surfaces such as workstations, keyboards, telephones, handrails and doorknobs.
   - We have engaged our cleaning service to increase the frequency and depth of cleanings to ensure all areas of the workplace are thoroughly cleaned with additional regularity.

3. **Enhanced Personal Hygiene Measures**
   
Community requires all caregivers to wash their hands with soap and water regularly and thoroughly, including at the beginning of each shift and upon returning from any break. In addition:
   - Caregivers and guests should wash their hands often with soap and water for at least 20 seconds especially after having been in a public place, or after blowing their nose, coughing or sneezing.
   - The Network is providing hand sanitizer stations throughout the workplace for caregivers, patients and guests to use.
     - When soap and water are not readily available and when hands are not visibly soiled, the use of hand sanitizer that contains at least 60% alcohol is acceptable. Cover all surfaces of the hands and rub them together until they feel dry.
• We are providing tissues and no-touch disposal receptacles throughout the workplace for caregivers to use.
• We are dedicating workstations to individual caregivers as much as possible. Wiping down keyboards between caregiver use or if contamination is suspected. We have obtained keyboard covers if keyboards are in areas with increased risk of contamination and in areas where caregivers share workstations.
• Many resources are available for caregivers on our intranet regarding PPE guidelines and safety practices. These are both in print and video formats.
• We all should avoid touching our eyes, nose, and mouth with unwashed hands.
• We discourage all handshaking – instead, use other noncontact methods of greeting.
• Read more at cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html

4. Social Distancing
Community requires all caregivers, patients, and visitors to follow the social distancing requirements established by the CDC, including maintaining six-foot social distancing for both caregivers and members of the general public when possible. In addition:
• Caregivers are required to wear masks at all times while on Network premises.
  *Caregivers alone in a private office setting or in cubicles are permitted to remove their masks.
• Patients and visitors are requested to wear masks at all times while on Network premises.
  o This is important because COVID-19 could spread to others even if an individual does not know they are sick.
  o The cloth face cover is meant to protect the people around an individual that may be infected.
  o The cloth face cover is not a substitute for social distancing. We should continue to keep about 6 feet apart from each other.
• To facilitate social distancing, we have marked six foot distances throughout the workplace and will physically arrange physician office space and common areas to ensure individuals ideally stay six feet apart. We will also limit use of waiting rooms as much as possible and use direct rooming as much as possible.
• We will be limiting the occupancy of lunch and break rooms to 50 percent of their capacity.
• Supervisors have contacted caregivers who are able to work from home effectively regarding plans for ongoing tele-commuting.
• Continue evaluating the necessity of face-to-face care based on clinical needs and individualized-care for each patient; consider prioritizing high-complexity chronic condition management and patients with illness; preventive services may be necessary based on the individual patient’s needs.

Community Health Network complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística.
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