





Ascension


To: Ascension Executive Leadership

cc: Richard Fogel, MD, FACC, FHRS
Senior Vice President and Chief Clinical Officer, Clinical & Network Services, Ascension

Chief Clinical Officers
Chief Nursing Officers
Chief Operating Officers

From: Craig Cordola, MBA, MHA, FACHE 
Executive Vice President and Chief Operating Officer

Joseph Cacchione, MD, FACC 
Executive Vice President, Clinical & Network Services, Ascension

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Executive Vice President, Performance Optimization & Nursing Operations

Date: November 11, 2020

Subject: Associate and Visitor Screening

As the impact of COVID-19 continues and the ongoing outcomes remain uncertain, we must continue to minimize potential exposure within our facilities. With the resumption of survey activity, Ascension facilities are seeing an increasing number of For Cause Surveys conducted by the State Department of Health/Centers for Medicare and Medicaid Services (CMS).

With each survey, a COVID-focused infection prevention survey is required. Regulatory agencies expect to see 100% compliance with all COVID prevention/infection prevention strategies, including screening for all individuals entering the facility and compliance with personal protective equipment (PPE). Regulatory agencies are citing non-compliance at the Immediate Jeopardy and Condition level.

After reviewing the revised recommendations and CMS Conditions of Participation, the following outlines Ascension's expectations for associate and visitor screening:

1. **All individuals, including associates, physicians, vendors, visitors and patients, entering the facility must be screened upon entry.** Associates may complete the screening through the Screen and Go application but must present evidence of completion to a screener upon entry to the facility. If an associate does not present evidence to the screener, the full screening process

must be completed prior to the associate gaining entry to the facility.

2. No active temperatures are required unless mandated by the county/state.
3. If active temperature is part of the screening process due to a county/state mandate, all non-clinical associates must have documentation competency validation on file.

Please reach out to Kelly Randall, Vice President, Patient Safety and Compliance, if you have any questions regarding this process.

Thank you for your attention and adherence to our screening process and requirements as we seek to keep our associates, clinicians, and patients and their families safe.