



THE WELLNESS COMPANY

SLV CLINICS - POLICY & GUIDELINES IN RESPONSE COVID-19

All precautionary steps follow current RIDOH and CDC protocols for COVID-19.
Due to the evolving nature of the situation, updates to the policy will be made as warranted.

TWC STAFF UPDATES

- Mandatory flu orientation with emphasis on COVID-19 protocols
- Staff increased at all clinics to screen clients at door, manage traffic flow and reduce wait time
- All staff must answer Screening Questions prior to each workday
A “yes” answer to any of these questions will disqualify a staff member from working, and they will be removed from the active scheduling roster pending further evaluation.
- All staff required to wear Level 1 Surgical Mask
- Nurses required to wear medical gloves on both hands, change gloves between patients and practice appropriate hand hygiene



REGISTRATION PROCESS

- TWC provides personalized flier for clinic advertising
- Flier includes registration information and details regarding COVID-19 safety precautions
- Online registration required
- No walk-ins
- System updated - more mobile friendly
- Pre-Registration allows client to choose a 15-minute appointment block
- Appointment times support social distancing and ensures building capacity limits are met
- Online consent forms printed and sent to clinic to reduce handling
- Electronic signature provided, no need for client to sign on site



ON-SITE CLEANING AND DISINFECTING

- Tables, chairs, and high touch areas disinfected prior to clinic
- Common touch areas cleaned throughout clinic
- Chairs and vaccine station disinfected between clients
- Entry and exit doors to remain open to eliminate touching of handles



REOPENING RI
COVID-19 Screening Tool

Recommended tool to screen employees, clients, and/or visitors for symptoms of COVID-19.

SYMPTOMS

Do you have any of the following symptoms in the last 14 days and have you experienced a change in your respiratory status?	YES	NO
LOSS OF TASTE		
LOSS OF SMELL		
LOSS OF VOICE		
SORE THROAT		
COUGHING		
HAZE OF VISION		
HEADACHE		
FEVER		
DIARRHEA		
LOSS OF APPETITE		
ANY OTHER		

RISK FACTORS

Do you have any of the following conditions in the last 14 days and have you experienced a change in your respiratory status?	YES	NO
Do you have a close contact (see below) with someone with COVID-19 symptoms of COVID-19 in the last 14 days?		
Do you have a close contact with someone who has been in the last 14 days?		
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IF YOU HAVE ANSWERED "YES" TO ANY OF THE QUESTIONS ABOVE, AND YOU CANNOT RETURN THESE RESULTS BY EMAIL, YOU MUST REPORT TO THE CLINIC. YOU WILL NOT BE ALLOWED ENTRY INTO THE CLINIC.

• Patients: Please contact your physician and your Health Department representative.
• Visitors: Please call to discuss when you can return to this facility.

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MANDATORY PRE-SCREENING AT CLINIC ENTRANCE

- COVID-19 Screening Tool posted at clinic entrance in both English and Spanish languages
- Admin to instruct Client to read and answer all questions
- Clients that answer YES to any of the questions denied entry

FACE CLOTH COVERING REQUIRED



- All participants must wear cloth face covering
- Supply will be available for those in need
- Clients who cannot wear a mask will be referred to their PCP for vaccination

SOCIAL DISTANCE MAINTAINED



- Clinic location must allow for one-way traffic flow from entrance to exit
- TWC staff will apply floor markers in 6-foot increments to indicate where to stand in line
- Signage posted throughout clinic to direct clients

HAND SANITIZER PROVIDED

- Pump hand sanitizers available throughout clinic
- Alcohol based and meets safety guidelines

