

COVID-19 BSL 20-002 Implementation Call Questions and Answers

Updated 03-11-2020

Thank you for your patience, dedication and calm during the urgent protocol implementations. We realize each of you are very busy right now, yet your urgency and sensitivity to this situation has been superb. Your questions are appreciated, and we hope the following document helps to prepare you to talk further with your team members, volunteers, sponsors and donors. When talking with them, please be mindful of their concerns and questions, even if you have heard the same question several times before. It is very important that each person feels they have your full attention and appreciation while you share with them the new precautionary measures put in place to lower their risk of exposure to COVID-19. For each of your team members, donors, sponsors and volunteers, please remember you will be their main contact for this information. It is vitally important for you to listen intently, acknowledge their feelings, and explain clearly when talking with them. To them **YOU** are the American Red Cross.

To ensure that we are receiving your questions and answer them as fast as possible, please use the following email address to submit all questions. This Q&A document will be routinely updated for you as new questions are asked and updates to the current ones are made.

COVID19CollQuestions@redcross.org

HR POLICY TYPES:

Q: If staff take their temperature and it is above 99.5°, they are instructed to not come to work. Will staff be charged PTO for this? Does the attendance policy apply?

A: Biomed Human Resources (HR) issued the Employee and Volunteer Guidelines for Coronavirus Health Concerns that includes guidance related to attendance during this outbreak situation. Please refer to the policy at the link below. As updates to this policy become available, they will be shared. Please direct questions regarding the current policy to your local HR representative.

https://intranet.redcross.org/content/dam/redcross/documents/staff_services/hr_policy/coronavirus-staff-guidelines.pdf

SUPPLIES:

Q: When will supplies be available in the totes?

A: Totes are being updated day by day until everything is fully stocked. Warehouses and Supply Management are closely monitoring inventories of supplies.

Staff Wellness and taking their own temperature:

Q: Can't an elevated temperature mean something other than the staff person is sick? There are other reasons that a staff may have an elevated temperature. Do they still come to work?

A: It is the expectation that anyone with a temperature above 99.5 degrees should not enter the drive, regardless of the suspected reason. Staff should not come to work and should notify their supervisor as soon as possible if they have temperature above 99.5 degrees.

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Q: If staff do not have a thermometer at home, how are they to take their temperature? Is Red Cross paying for thermometers?

A: If no home thermometer is available, the staff member must have the temperature check performed before entering the drive for set up or work. The Red Cross is not purchasing thermometers for home use.

Q: Can the charge or supervisor of the blood drive check staff temperatures before heading out to the blood drive?

A: Staff should check at home, before coming to the drive. If there is no home thermometer, take the temperature at the soonest available time. Concerns about staff not following policies for attendance should be directed to your HR Representative and direct supervisor.

Q: Will there be a vaccination available soon? Will Red Cross pay for it to be administered?

A: The American Red Cross does not develop vaccines. At the time one becomes available there will be further guidance.

Staff and Volunteer PPE

Q: If a staff is unable to wear gloves due to a medical reason, can they continue to work?

A: Directing this question to HR and will get back with more info.

Donor Deferral Instructions:

Q: If a donor volunteers that they have traveled to Iran, Italy, or South Korea, should we defer them at this time, or wait for the Coronavirus Information Sheet that will implement on 3/16?

A: It is acceptable to defer for those countries now. Donors who volunteer that they have traveled to one of these countries in the last 28 days should be asked to self-defer prior to the start of registration. If the donor has been registered, staff must discontinue the donor in eBDR as "Ineligible" and complete the DIF as instructed in BSL 20-001. Reminder that BSL 20-002 and the updated STOP Sign and Information sheet with these added countries implement on 3/16.

Q: Can a donor donate if they have been exposed to someone with flu symptoms if they are asymptomatic (symptom free) when they present at the drive?

A: Yes. We currently do not defer donors for this reason and have not changed the deferral criteria related to the flu.

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Pre-donation Temperature Screening Process:

Q: When will the new process for pre-screening donor temps begin?

A: Immediately.

Q: Who will be performing the pre-screening of donor temps? Can we utilize volunteers? Drivers? DRD staff?

A: All staff and volunteers, including sponsor volunteers can be trained to perform the pre-screening of donor temps. The drive charge is responsible for ensuring that anyone taking the pre-screen temperature has been trained to do so. It is not a requirement to be a Volunteer Medical Screener to perform the pre-screening temperatures.

Q: Is there additional training material available to donor ambassadors regarding health screening sensitivity issues?

A: All volunteers will receive training specific to the temperature pre-screen.

Q: Who is responsible for ensuring that staff or volunteers performing the pre-screening process understand what to do?

A: The volunteers will receive training through volunteer management before performing this function and will receive day of training on site from collections charge staff.

Q: Do you feel it is a good idea to assign charge of the drive/drive lead to take the temperature of the employees when they arrive to the drive?

A: These decisions should be made to support the drive. A supervisor will be needed for other tasks and decisions making. It is not ideal to assign the charge to this role.

Q: What is the expectation if someone presents that doesn't plan to donate (e.g. guest accompanying a donor, or a child)? Is only the donor allowed to be pre-screened and enter the drive if found acceptable?

A: Anyone entering the drive must be screened for temperature. Please limit the number of non-donors as best as possible.

Q: Does temperature screening extend to couriers and volunteers picking up blood/collection runs?

A: Anyone entering the drive must be screened for temperature.

Q: Does the pre-screening station need to be set up to maintain confidentiality?

A: There is no record of the temperature screening or recording of name, therefore confidentiality is not an expectation.

Q: Does the donor temp pre-screening station need to be manned at all times during the drive?

A: The temperature pre-screening station is expected to be manned for the full operation.

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Q: Is a table required to be used for the pre-screening station or can we use other surfaces such as a chair?

A: You can use any non-porous surface.

Q: Do electronic thermometers used for the pre-screening station need to be QCd prior to use?

A: All thermometer devices must be QCd prior to use and documented in the Daily Function Check.

Q: What if a donor presents and has an acceptable temperature but is showing other symptoms such as a dry cough?

A: The health history screening has not changed, and the donor will be asked “Are you feeling healthy and well today?” The determination of their acceptability to donate will be evaluated during the Health History process.

Q: Do the staff or volunteers hold the thermometer probe for the donor or does the donor take their own temperature?

A: When using an electronic thermometer, the person taking the temperature must hold the probe.

Q: What it about a small drive with, say, 3 staff on the drive? Do we still have to do pre-screening? How will we accomplish that?

A: All drives are required to have the pre-screening temperature station for the duration of the drive. Additional resources are being considered for 3 staff drives. Please contact your leadership to discuss.

Q: Can donors who are turned away because of temperature over 99.5°, return the same day?

A: No, the donor is asked to return at a later time or to schedule a future appointment when they do not have a fever. Donors will not be rescreened on the same day.

Q: If the donor temperature during the pre-screening is under 95.0°, do we tell them not to donate today?

A: The temperature pre-screen station is used to screen temperatures above 99.5°; therefore, they will be allowed to check-in to the drive.

Q: Will there be an additional thermometer designated for the pre-screening station so that the mobile isn't short a thermometer in health history?

A: Supplies are currently being updated to provide for this additional thermometer whenever possible.

Q: Will we allow for any re-checks of donor temperatures if the first reading was above 99.5°?

A: The pre-screening does not allow for re-checks.

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Q: If the pre-screening station is located outside, will the donor's temperature readings be affected?

A: As part of drive set-up, look for a location to perform this pre-screening that will allow protection from the elements and extreme temperature. Extreme environmental temperatures could affect the thermometers and donor temperature readings. It is best to avoid conditions that may cause donors to be turned away for an unintended high reading. Staff must use the readings from the thermometers without question and will not recheck donors.

Q: If protocol is broken such as the prescreening for the temperature of the donor and the donor presents themselves and the donor does have a temperature, what actions do we take?

A: The donor would be deferred according to the process we already have in place for Health History screening.

Social Distancing and Drive Set-Up

Q: You mentioned on the call that SCUs present a unique challenge for social distancing and that local management may provide additional direction. Can you clarify?

A: SCUs present unique challenges in that by their nature, they do not allow space to expand to accommodate social distancing. At this time Red Cross is not limiting the use of SCUs because in some locations they may provide a needed alternative to holding a large drive. Regional leadership, together with their DRD partners, will continue to evaluate their needs for collections using SCUs based on the outbreak situation in their local areas.

Some suggestions for social distancing on SCU drives are: 1) Processing smaller groups of donors rather than larger groups is preferred as it reduces the risk of exposure, 2) Ensure that the number of donors allowed on the SCU does not exceed the number of Health History stations and donor beds, 3) Each donor should have a designated health history station or donor bed, and 4) Process one donor at a time.

Q: With the recommendation that the donor beds be foot to foot, does this mean we cannot switch the donor beds to accommodate arm preference?

A: We may need to have donors wait for a bed to accommodate arm preference. This will be a decision made at the drive as needed.

Q: I understand the concept of social distancing, but if the donor has been accepted, doesn't it mean we view them as being healthy and well?

A: All precautions that assist us in helping to decrease the spread of COVID-19 and maintain a healthy donor, volunteer and work force are being taken.

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Enhanced Disinfecting and Donor Hand sanitizing:

Q: What if the donor refuses to use hand sanitizer before signing the donor acknowledgement on the laptop? Can we place gloves at registration desk for those who do not want to use hand sanitizer?

A: We want donors to use hand sanitizer or wash their hands. If they do not want to, they can use gloves or staff can enter the acknowledgement using the consent process in 15.3.416.

Q: What should we be do about cleaning Apheresis donor blankets?

A: Apheresis blankets must be cleaned between donors. Donors can bring their own blankets, personal hand squeeze, reading materials, tablets, iPads, and laptops (with headphones). Current policy remains that they cannot bring electric blankets or heating pads. We are working with communications and TR to work to notify donors ahead of time.

Q: How do we clean eBDR equipment, laptops and donor tablets? Do we use Sani-Cloths or a cloth dampened with water?

A: At this time, we are taking measures with hand sanitizer to eliminate the need to clean the laptop and tablets. Additional information is being sought out to identify additional measures for equipment that we cannot be disinfected using water or Sani-Cloths.

Q: It was stated to clean all surfaces the donor touch. What will be used on the laptop screens once the donor signs the donor acknowledgement screen?

A: Donors are being asked to use hand sanitizer prior to touching tablets or laptops and before eating or drinking. Since donors will be sanitizing their hands prior to touching the tablets and laptops, they only need to be cleaned as necessary during the day and at the end of the day.

Q: It was stated on the call there is a pen for signing. Donors sign with their finger. Can you clarify?

A: Donors do sign their BDR using the touch screen feature. However, there are pens at drives for signing paper consent forms. Pens should be wiped down between donors.

Q: Do we need to wipe down the flip signs and health history postings after each donor as well?

A: Yes, these signs should be wiped down.

Q: Discarding permeable donor hand grips is expensive. Can we use the permeable hand grips if we cover them with a clean glove between each donor?

A: Hand grips that are permeable should be considered a single use supply and discarded after the donation. Non-permeable hand grips must be cleaned after each use and re-wrapped for each donor.

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Q: Can we use other hand grips that are available to us but not standardized? Can we make our own?

A: Please use the handgrips that have been provided by the American Red Cross for donor use.

Q: Can we use Lysol Spray on items such as chairs in the donor center?

A: At this time Lysol is not an approved item. Please use the supplies you have been given and if you are running low follow the process for resupply. Our inventories are being carefully reviewed and managed.

Q: Can fixed sites get the freestanding hand sanitizer machines?

A: As supplies are being analyzed, there may be a need to shift in the future. At the point that our supplies or inventory shift, you will be notified.

Q: Should staff be offering the hand sanitizer to the donor prior to giving them the hand grip in donor room?

A: Yes, staff can place the hand sanitizer in the donor's hands.

Q: Can the person performing the pre-screening temperature checks offer the donors hand sanitizer and squeeze it into the donor's hand to avoid them touching it? This could be done before the donor moves to the check in process?

A: There is an expectation that the hand sanitizer should be used at the check-in station. This is due to supply of hand sanitizer and consistency of use.

Signage and Pre-reading Materials:

Q: Will the Stop Sign also include information that only donors who are donating are allowed in the donation area?

A: This is not included. The stop sign is to defer those who have traveled or have a fever as it relates to COVID-19.

Q: Will you be providing signage for the drive to explain potential delays due to the additional cleaning measures?

A: Currently we have a lot of signs and information for donors to read. Please ensure that you are having these conversations with donors as you encounter them, and use your At Drive Management Training and Language of Caring skills to update and thank donors.

Q: Can we create local signage for explaining why we are doing the pre-screening?

A: Locally made signage should not be created. Any requests should be made through the donor marketing team.

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General/Communications:

Q: Is there similar guidance being implemented for our deployment sites such as cleaning of carts, wearing of personal protective equipment, needing to check their own temperature? Or is this only for blood drive/fixed site collection staff?

A: The issued guidance and the additional cleaning measures within the BSL are for donor-facing activities. Additional requirements will be implemented as needed.

Q: Is Telerecruitment being made aware of the deferral criteria and other steps being taken with our donors? Will they share this when they call donors to schedule appointments?

A: Communications with Telerecruitment, Customer Care, and others who routinely talk with donors are taking place.

Q: Will the safe guard measure that were discussed on the call be included in the Huddle notes on Monday 3/16?

A: The BSL will implement on Monday 3/16. There will not be an additional huddle note.