COVID-19 Practice Reopening Checklist

Practice Name: _____   **Date of Adoption:** _____

Catalyst
HEALTH NETWORK

General Reopening Protocols: Preparing For Return Of Staff & Patients

SUGGESTED TIPS TO CONSIDER WHILE PREPARING FOR THE RETURN OF STAFF AND PATIENTS:

- Create **visual cues** for patients to follow to enhance adherence to physical distancing
  - Tape on floor in places where more than one patient at a time could occur:
    - *Check-in*
    - *Check-out*
    - *Vitals stations*
    - *Restrooms*
    - *Clinic entrance*
    - *Lab stations*

- **Close redundant** check-in and check-out windows

- **Augment or do not reopen** common staff areas like breakrooms

- **Create space** in tighter workspaces:
  - *Billing and collections*
  - *Front desk*
  - *Nursing stations*

- **Require** all staff to **wear a mask** to minimize the chance of an accidental exposure

- Discontinue use of toys, magazines, and other shared items (pens, clipboards, candy dish, etc.) in the waiting room and other areas of the clinic such as patient rooms

Catalyst
HEALTH NETWORK

Patient Communication Strategies: Scripting Protocols

REMINDER: This is new for everyone! Patients often struggle navigating healthcare in "normal" times already. During a pandemic, which is full of changes and conflicting information, they likely need extra support knowing how to access needed care. You are their source of truth right now. Use a calm and reassuring, but confident, tone so they feel comfortable asking questions and returning to your clinic.

Patient asks: What measures are you taking to keep your clinic a "safe space"?

Share your protection and sanitizing measures that you are taking currently to keep your patients, staff, and providers safe and healthy.

"We enforce physical distancing, we have blocks in our schedule to prevent mixing of well and ill patients, we have protoocls for continuous cleaning of all patient care areas and our staff is assessed prior to each shift"

Patient asks: Is it safe to come to the office for an appointment? Won't I get exposure to COVID-19?

"Our clinic is taking all recommended precautions to keep the clinic clean and safe for you. We have screening processes and procedures in place to protect you and keep you healthy. Your appointment experience will be slightly different than what you are used to, but we will explain every step of the way" (**NOTE***: Consider elaborating on safe space processes and procedures if not already addressed*)

Catalyst
HEALTH NETWORK

Patient Communication Strategies: Scripting Protocols

NOTE: Inform patients they should **come** to the office **with a mask** or other cloth face covering and are **required to wear a face covering while in the office** due to the guidelines that your office must currently follow as a precaution.

Patient asks: "Do you have masks or protective equipment I will be able to use?"

"Our clinic has limited masks that we use to protect our staff working safely with patients. You can use a wide variety of face coverings like a homemade mask , a bandana, a scarf or even a tee-shirt."

Share the CDC's recommendations on using Cloth Face Coverings.

FINDING FROM THE FIELD: Consider ordering cloth face masks with your clinic's logo. These could be used sparingly for patients who do not come to the clinic prepared with a face mask/covering. They could either be washed and reused OR the patient could keep it and market your clinic in the community.

www.discountmugs.com & www.dozpromo.com & https://crestline.com/b/face-masks

Patient says: "I do not want to wear a mask."

"We understand, unfortunately this is a requirement by the State, and we must comply Would you like me to schedule a telehealth visit? The doctor can still take care of you and you can remain in the comfort and safety of your own home."

Catalyst
HEALTH NETWORK

Infection Control Protocols: PPE Preparedness

☐ **When planning to reopen your practice, ensure you are equipped with the necessary PPE.**

View available PPE resources here, or on the Catalyst Practice Resources Page. The CDC has many strategies for optimizing:

- *Strategies for Optimizing the Supply of PPE*
- *Strategies for Optimizing the Supply of N95 Respirators*
- *Crisis/Alternate Strategies for Optimizing the Supply of N95 Respirators*
- *Strategies for Optimizing the Supply of Eye Protection*
- *Strategies for Optimizing the Supply of Isolation Gowns*
- *Strategies for Optimizing the Supply of Facemasks*

The CDC recommends wearing cloth face coverings in public settings where other social distancing measures are difficult to maintain and to slow the spread of the virus. **All patients seen in clinics must wear face coverings.** View their guide to cloth face coverings, including instructions on making your own, here.

Effective May 1, Texas Medical Board rules state a practice must implement these minimum COVID-19 standards of safe practice:

- *A mask must be worn by both the patient and physician or the physician's delegate when in proximity of the patient (less than 6 feet)*
- *Follow facility policies regarding COVID-19 screening and testing*
- *Screen patients for potential symptoms of COVID-19*
- *Wear N95 masks (or an equivalent) and face shields when conducting any medical procedure involving mucous membranes, including the respiratory tract, with a high risk of aerosol transmission*

Practices are required to post a COVID-19 Minimum Standards or Safe Practice Notice in each public area and treatment room of the office.

☐ **Post TMB updates in above required areas using this poster**

Catalyst
HEALTH NETWORK

Infection Control Protocols: Triaging Patients

OVER THE PHONE TRIAGE

STAGE ONE: Screen for symptomatic and high-risk asymptomatic patients.

At the time of scheduling, patients should be screened for possible COVID-19 risk. This includes:

- **Patients with complaint of any of the following symptoms:**

  - Fever
  - Cough
  - Shortness of breath
  - Chills
  - Muscle pain

  - Headache
  - Sore throat
  - Shaking with chills
  - Loss of taste or smell

- **Patients with history of exposure to a confirmed case of COVID-19 in the last 2 weeks**

For patients that meet the criteria:

- Triage for need for transport to an emergency facility for urgent care and testing

- If patient appears stable, patient should isolate in place, quarantine themselves from family and animals, and, if available, wear a face mask

- **Utilize a virtual visit** rather than an in-office visit**

- Recommend PCR diagnostic testing

OFFICE-BASED TRIAGE

STAGE TWO: Patients presenting to the office for an appointment will undergo a second screening prior to entering the clinic.

Patients will be asked about the **presence of COVID-19** symptoms or a **history of exposure** to a COVID-19 confirmed patient in the last 14 days. Temperature will be taken as well.

- If **either is true or the patient has a temperature ≥ 99.5**, the support staff member should:

  - Immediately notify a provide

  - Triage the patient and if stable attempt to convert the patient to a virtual visit, can be performed with the patient in their car

  - If it is determined the patient will be seen in-office, skip to "Rooming Protocols: Symptomatic or Exposed Patient"

NOTE: *When possible, patients at greatest risk of severe COVID-19 including older patients and patients with chronic conditions or weakened immunity should be encouraged to be seen virtually.*

Catalyst
HEALTH NETWORK

Infection Control Protocols: Rooming Protocols

ROOMING PROTOCOLS: ASYMPTOMATIC OR NON-EXPOSED PATIENTS

When a patient is asymptomatic, has no exposure history and no temperature elevation, the following infection control measures should be added to routine rooming policies and procedures:

- A masked staff member should escort the masked patient to an exam room, being careful to choose a pre-determined route that exposes as few people as possible
- Minimize the number of staff who come into contact with the patient
- Minimize the amount of time spent within 6 feet of the patient
- Minimize the amount of exam time spent with the patient's face uncovered
- Healthcare facilities should ensure that hand hygiene supplies are readily available in every care location and hands should be cleaned immediately after patient contact and prior to handling any paperwork or items (computer, equipment, etc.) that may be utilized during the care of patients
- Patients should be escorted to checkout one patient at a time or, if a queue forms, physical distancing of ≥ 6 feet must be possible and maintained
- All exam room areas of patient contact must be wiped down with approved antiseptic cleanser prior to rooming the subsequent patient

Catalyst
HEALTH NETWORK

Infection Control Protocols: Rooming Protocols

ROOMING PROTOCOLS: SYMPTOMATIC OR EXPOSED PATIENTS

At times, a healthcare provider may determine a **patients experiencing COVID-related symptoms or with a possible history of exposure or who has a temperature of ≥ 99.5** needs an in-office assessment. Under these circumstances, the following infection control measures should be added to routine rooming policies and procedures:

- The patient and all office staff with any patient interaction **should wear a mask at all times** unless removal required for patient exam
- Undergo as much of the routine rooming process as possible with the **patient still in their car**. This can be done by the support staff either virtually or through the car window
- The patient should be brought into the clinic **only when the provider is ready** to see the patient
- Using a pre-determined route **that exposes as few people as possible**, support staff should escort the patient while maintaining physical distancing to an **"isolation exam room"** in an area of the clinic designated for the care of symptomatic or exposed patients
- Any staff that is going to evaluate the patient should **first put on protective gear** (including face masks, googles/glasses, gown, and gloves). The protective gear should be removed while the staff member is in the room with the patient and placed into the trash can.
- Minimize the number of staff who come into contact with patient
- Minimize the amount of time spent within 6 feet of the patient
- Minimize the amount of exam time spent with the patients face uncovered
- Ensure that hand hygiene supplies are readily available in every care location and hands should be cleaned immediately after patient contact and prior to handling any paperwork or items (computer, equipment, etc.) that may be utilized during the care of patients

Catalyst
HEALTH NETWORK

Infection Control Protocols: Specimen Collection

REMINDER: In-clinic testing:

- **Only the patient and the staff** performing the test should be involved
- Because specimen collection (e.g. nasopharyngeal swap) is likely to induce cough or sneezing, testing should be done:
  - *Via self-collection*
  - *In the patient's car*
  - *At the end of the appointment*
- The staff responsible for collecting the specimens should **wear recommended PP**E (including a gown, gloves, eye protection, and respiratory protection (an N95 mask that is covered with a surgical mask to allow for N95 reuse))
- **Nasopharyngeal swab** is the preferred collection method
- Sample should be submitted **frozen**

POST-COLLECTION PROTOCOLS

- If the patient appears stable the patient should return home and be told to **isolate in place** until test results are available
- The patient should be instructed to quarantine themselves from family and animals, and continue to wear a face mask
- Patient should be escorted to checkout only after confirming no queue has formed. No additional patient should be allowed at checkout until the checkout area has been wiped down with an approved antiseptic cleaner
- HCP should perform hand hygiene using ABHS **before and after** all patient contact, contact with potentially infectious material, and before putting on and upon removal of PPE, including gloves.
- If provider suspects the patient may have COVID-19, the patient should undergo testing at a centralized testing site or prior to leaving the clinic

Catalyst
HEALTH NETWORK

Infection Control Protocols: Cleaning

After the patient leaves, the staff member who roomed the patient should:

- Put on new protective equipment
- Clean the room by first wiping all surfaces with the Sani Wipes, bleach or an approved antiseptic cleaner
- Then, spray the room with Lysol
- Place all protective equipment into a trash bag, tie off the bag, and then take the bag to the trash immediately after cleaning the room.

Infection Control Protocols: Waste Removal

The CDC has determined the medical waste created from the evaluation, treatment, and testing of COVID-19 confirmed or suspected patients should be managed the same as routine clinic waste management procedures and protocols. Frequency of pick-ups may need adjustment.

- No-touch removal methods should be used to dispose of any waste material containing respiratory secretions
- Use current recommended methods for dangerous waste material

Catalyst
HEALTH NETWORK

Infection Control Protocols: CDC Priorities For Testing

Criteria to Guide Evaluation and Testing for COVID-19
Clinicians should use their judgment to determine if a patient has signs and symptoms compatible with COVID-19 and whether the patient should be tested. Priorities for testing include:

HIGH PRIORITY

- Hospitalized patients

- Healthcare facility workers, workers in congregate living settings, and first responders with symptoms

- Residents in long-term care facilities or other congregate living settings, including prisons and shelters, with symptoms

PRIORITY

- **Persons with** symptoms of potential COVID-19 infection, including fever, cough, shortness of breath, chills, muscle pain, new loss of taste or smell, vomiting or diarrhea and/or sore throat

- **Persons without symptoms who are** prioritized by health departments or clinicians, for any reason, including but not limited to:
  - *Public health monitoring*
  - *Sentinel surveillance*
  - *Screening of other asymptomatic individuals according to state and local plans*

ANTIBODY TESTING: All asymptomatic, non-exposed patients may obtain antibody testing

Catalyst
HEALTH NETWORK

Infection Control Protocols: Testing

If testing is deemed necessary and on site testing is not being done, patients may be referred to the nearest North Texas Catalyst centralized testing facility OR to a local community testing site. For an in-depth guide on all things testing, reference our Testing Toolkit HERE, or on the Catalyst Practice Resources Page. You'll find detailed information on the following:

- Importance of Testing
- Work Restrictions for Healthcare Workers
- Return to Work Guidelines
- Screening
- Ordering Testing
- Testing
- Site Training
- Post-Testing
- Follow-up

Catalyst
HEALTH NETWORK

Infection Control Protocols: Clearing Patients For Work

Employers may ask for work clearance notes for an employee to return from "Shelter in Place" or as part of a release from home quarantine.

REMINDER: *Much is still unknown about immunity related to this novel coronavirus. The scientific understanding regarding antibody test interpretation, incubation periods, seroconversion and viral shedding needs further research. Recommendations are based off presumptions made based on similar coronavirus clinical experience.*

When PCR diagnostic or Antibody test-based work release is requested from a patient's employer, **consider wording the release to reflect the state of the science:**

"Patient meets the current Center for Disease Control and Prevention (CDC) criteria for release from home isolation. Based on patient testing, the patient is presumed to have a lower risk of infection."

Post-Testing Follow-Up Guides	
PCR Diagnostic Testing ONLY	
Negative PCR Test	**Positive** PCR Test
Click here to download the PCR Diagnostic Testing Only Follow-Up Guide	
Combination Testing	
Negative PCR/Negative Antibody Test	**Negative** PCR/**Positive** Antibody Test
Positive PCR/Negative Antibody Test	**Positive** PCR/**Positive** Antibody Test
Click here to download the Combination Testing Follow-Up Guide	
Antibody Testing ONLY	
Negative Antibody Test	**Positive** Antibody Test
Click here to download the Antibody Testing Only Follow-Up Guide	

Catalyst
HEALTH NETWORK

Exposure Protocols: Managing Staff Exposure

- ❑ **Train all staff involved in direct patient contact that could result in a possible exposure** (within 6 feet or less of the patient for 6 minutes or longer) in the appropriate use of PPE including how to don and doff and when an N95 is required. Observe staff using PPE until they have successfully demonstrated competency.

- ❑ **Ask all staff to check their temperature and self-assess for COVID-related symptoms prior to each shift.** Should a staff member become ill, require the staff member to stay home. Follow guideline from managing a symptomatic patient to determine when staff is ready to return to work.

- ❑ While at work, **staff should follow personal distancing and hand hygiene in addition to standard infection control protocols.** In the event of exposure, the CDC has created guideline intended to preserve the healthcare workforce.

As a **healthcare worker**, or any critical infrastructure worker, the **CDC recommends** the following practices **for asymptomatic, exposed** workers:

- **Prior to each shift**, employer should **assess** employee or the presence of **symptoms** and **elevated temperature**

- Employee should **wear a face mask**, surgical or cloth mask, for **14 days** after last exposure

- Employee should **maintain a social distance** of 6 feet whenever possible

- Employer should **disinfect all shared areas and equipment** (e.g. restrooms, computers, workspaces)

- Employee **should not share objects** that are used near the mouth, nose (e.g. headsets)

- Employee should **avoid sharing space** when possible (e.g. stagger lunches and breaks)

- Should the **employee become symptomatic**, they must be **sent home**. Additionally, employer should **assess the other employees for potential exposure** to the symptomatic employee, including the 48 hours prior to the employee becoming symptomatic

*NOTE: **Exposure** is defined as **contact** with a COVID-19 positive person, **including the 48 hours before** that person became symptomatic, under the following situation:*

- ***Within 6 feet** of a COVID-19 positive person for a period of 6 minutes or longer*

- *A **household contact** with a COVID-19 positive person*

Catalyst
HEALTH NETWORK

Exposure Protocols: Documenting Staff Exposure

When staff is exposed, they are to notify their direct supervisor immediately. Supervisors should immediately report exposures to the clinic's Infection Control Officer.

☐ **Using the COVID-19 Exposure Log, document for each case of exposure the following**

- *The route(s) of exposure*
- *Explanation of how the exposure occurred*
- *When the exposure occurred*
- *Where exposure occurred*
- *PPE utilized during exposure (if applicable)*
- *Testing plan and results*
- *Monitoring plan and instruction on Symptom Tracker*
- *Return to work instruction/Resolution*

Following exposure, have staff members document their symptoms using the 14 Day Symptom Tracker, found here.

Catalyst
HEALTH NETWORK

Miscellaneous Protocols: Financial Obligations Of Cares Act

The **Families First Coronavirus Response Act (FFCRA Act)** requires certain employers to provide their employees with paid sick leave or expanded family and medical leave for specified reasons related to COVID-19.

QUALIFYING REASONS FOR LEAVE:

Under the FFCRA, an employee qualifies for paid sick time if the employee is unable to work (**or unable to telework**) due to a need for leave because the employee:

- Is subject to a Federal, State, or local quarantine or isolation order related to COVID-19
- Has been advised by a health care provider to self-quarantine related to COVID-19
- Is experiencing COVID-19 symptoms and is seeking a medical diagnosis
- Is caring for an individual subject to an order described in (1) or self-quarantine as described in (2)
- Is caring for a child whose school or place of care is closed (or childcare provider is unavailable) for reasons related to COVID-19
- Is experiencing any other substantially-similar condition specified by the Secretary of Health and Human Services, in consultation with the Secretaries of Labor and Treasury

Under the FFCRA, an employee qualifies for expanded family leave if the employee is caring for a child whose school or place of care is closed (or childcare provider is unavailable) for reasons related to COVID-19.

Learn more about the FFCRA Act Employer Paid Leave Requirements here.

Catalyst
HEALTH NETWORK