COVID-19
Checklist

MSMS
MICHIGAN STATE MEDICAL SOCIETY

MSMS Safe Return to Practice Recommendations

As of April 27, 2020

As Michigan's Executive Orders impacting the operation of medical facilities and the public's mobility status are expected to relax over the next several weeks, physician practices and other health care facilities will need to determine their readiness to resume routine health care.

On the following pages are some suggestions for minimal steps to be taken upon return to full clinical practice to ensure the safety of patients and health care team members. All recommendations are subject to state-issued Executive Orders and Centers for Disease Control and Prevention (CDC) guidelines. Physicians are also encouraged to check with their respective national specialty societies for any recommendations unique to their specialty practice. Physician medical practices also need to monitor CDC guidance for direct threat analysis to determine whether they should modify any employment-related procedures and protocols (e.g., health care team screening and testing, which are subject to ADA standards).

RECOMMENDATION 1:

Health Care Team Safety

- Prepare and educate staff on clinical and operational procedures and protocols.

- Wear masks and ensure appropriate and optimal use of personal protective equipment (PPE) for the practice setting as recommended by the CDC and required by Executive Order. Review proper technique for putting on and taking off PPE.

- Perform routine screening of health care team members for potential COVID-19 related symptoms such as fever, chills, cough, shortness of breath, headache and fatigue and log and document daily temperatures.

- Advise staff ill with fever or respiratory symptoms to STAY HOME!

- Pursuant to Federal Drug Administration protocols and the availability of adequate testing, test health care team members with or without symptoms for COVID-19. (NOTE: Please be aware of the latest data pertaining to false positives and false negatives.)

- Restrict the number of workers present on premises to no more than is strictly necessary to perform work requiring staff to be onsite.

- Consider allowing staff to telecommute and perform certain tasks like scheduling and billing remotely.

- Conduct as much business as possible over the phone, including triage with appropriate screening questions.

- Consider utilizing telemedicine/telehealth for patient encounters and monitoring activities that do not require in-person visits.

- Follow risk assessment guidance for staff exposure to COVID-19.

RECOMMENDATION 2:

Patient Safety

- Screen patients for potential symptoms of COVID-19 prior to appointment date and before entering facility.

- Patients should be given appropriate face coverings if they do not present with their own.

- Pre-procedural testing for COVID-19, when appropriate.

- Post signage at the practice.

  » At the entrance - screening questions and advise patients who answer "yes" to call the practice from somewhere away from the entrance and wait for instructions.

  » In the waiting room and exam rooms – information on how to protect oneself from COVID-19.

- Minimize direct contact between patient and staff and maintain appropriate distancing.

- Minimize the number of patients and amount of time in the waiting room. Reorganize waiting room if possible to maintain social distancing guideline of 6 feet.

- Limit additional persons attending in-person appointments with patients to the following:

  » Those necessary for the provision of medical care, the support of activities of daily living, or the exercise of power of attorney or court-appointed guardianship for the patient.

  » Spouse or legal partner, provided that until Executive Order 2020-37 expires (i.e., presently scheduled beginning on May 4, 2020), spouses or legal partners may attend only as necessary for the provision of medical care, the support of activities of daily living, or the exercise of power of attorney or court-appointed guardianship for the patient.

  » Parents, foster parents, or guardians of a patient who is 21 years of age or under.

- Provide no-touch waste containers with disposable liners in all reception, waiting, patient care, and restroom areas.

- Provide alcohol-based hand rub and masks in all reception, waiting, patient care, and restroom areas. Keep soap dispensers stocked with handwashing signs.

- Discontinue the use of toys, magazines, and other shared items in waiting areas, as well as office items shared among patients, such as pens, clipboards, phones, etc.

- Provide handouts for patients with questions about COVID-19 and for those with COVID-19 related illness.

RECOMMENDATION 3:
Operational Readiness

- Ensure you have ample supply of PPE (e.g., gowns, goggles, gloves, and respiratory protection) and disposable goods such as facial tissue, soap, hand sanitizer, and disinfectants.

- Follow recommended isolation precautions and infection control measures such as immediately masking and escorting patients to an area away from other patients, providing alternative facility entrances/exits, and limiting nonessential personnel interaction with suspected COVID-19 cases.

- Implement mitigation controls including social distancing guidelines, minimizing foot traffic, limiting the number of patients in waiting areas (or adopt alternatives to waiting room use), etc.

- Keep team members and patients who are on premises at least six feet from one another to the maximum extent possible, including those who are checking in or out.

- Install physical barriers, such as clear plastic sneeze guards at reception and check-out desks.

- Initially, consider maintaining low patient volumes or spacing out appointments.

- Minimize staff and patient contact with touchscreens, credit card machine, pens, paper documents, etc.

- Utilize e-documents and other electronic methods for online registration, pre-procedure planning, etc. and adopt protocols to accept verbal or electronic informed consent for medical and/or surgical procedures when appropriate, including reasonable identity verification procedures. Ensure that the patient's medical record appropriately documents patient informed consent (including identity verification) when obtained verbally or utilizing an e-signature.

- Use negative pressure rooms or rooms with appropriate air exchange and HEPA filters, where a bovie, aerosol droplets or any procedure that puts health care team at risk.

- Undertake appropriate care while sterilizing instruments, according to recommend sterilizing procedure, as dictated by anti-viral cleaning procedures.

- Adopt an infection control plan that includes standards for thorough facility cleaning and disinfection to limit staff and patient exposure to COVID-19, as well as adopting protocols to clean and disinfect in the event of a positive COVID-19 case in the workplace.
  - » Clean exam room after every patient.
  - » Comply with existing OSHA standards to minimize risk.
  - » View information from the Environmental Protection Agency on disinfectant use and COVID-19.
  - » Consult the cleaning agent's safety data sheet for information on dwell time.

RECOMMENDATION 4:
General Information and Resources

- Coordinate contact tracing with your local health department.

- Know how to report a potential COVID-19 case.

- For health care team members positive for COVID-19, follow CDC guidelines for return to work.

- Consider American Academy of Dermatology recommendations for dry skin relief from COVID-19 handwashing.

- Patient handouts.

- Infection control plans for outpatient and other settings.

- OSHA Guidance on Preparing Workplaces for COVID-19.

- Equal Employment Opportunity Commission guidance on COVID-19 and employment laws.

The above recommendations are designed to assist physician practice and medical clinic readiness to re-open for routine services and care delivery. However, they are also applicable across multiple health care facilities. For additional guidance on recommendations for other care setting, please view the following links:

- ◆ Hospitals
- ◆ Home care and hospice
- ◆ Federally Qualified Health Centers
- ◆ Community health centers
- ◆ Long term care facilities
- ◆ Ambulatory surgical centers
- ◆ Behavioral health residential facilities
- ◆ Laboratory services