

# Preparedness Actions for Providers and Considerations for Vulnerable Patients

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# Overview

- Preparing to manage suspect COVID-19 patients
- Planning for patient surge
- Continuity of Operations Planning (COOP)
- Messages to patients
- Vulnerable populations
- Personal preparedness for providers

# Prepare for Suspect COVID-19 Patients

**ATTENTION**

**IF YOU ARE FEELING SICK WITH**

  
**FEVER**

  
**COUGH**

  
**SHORTNESS OF BREATH**

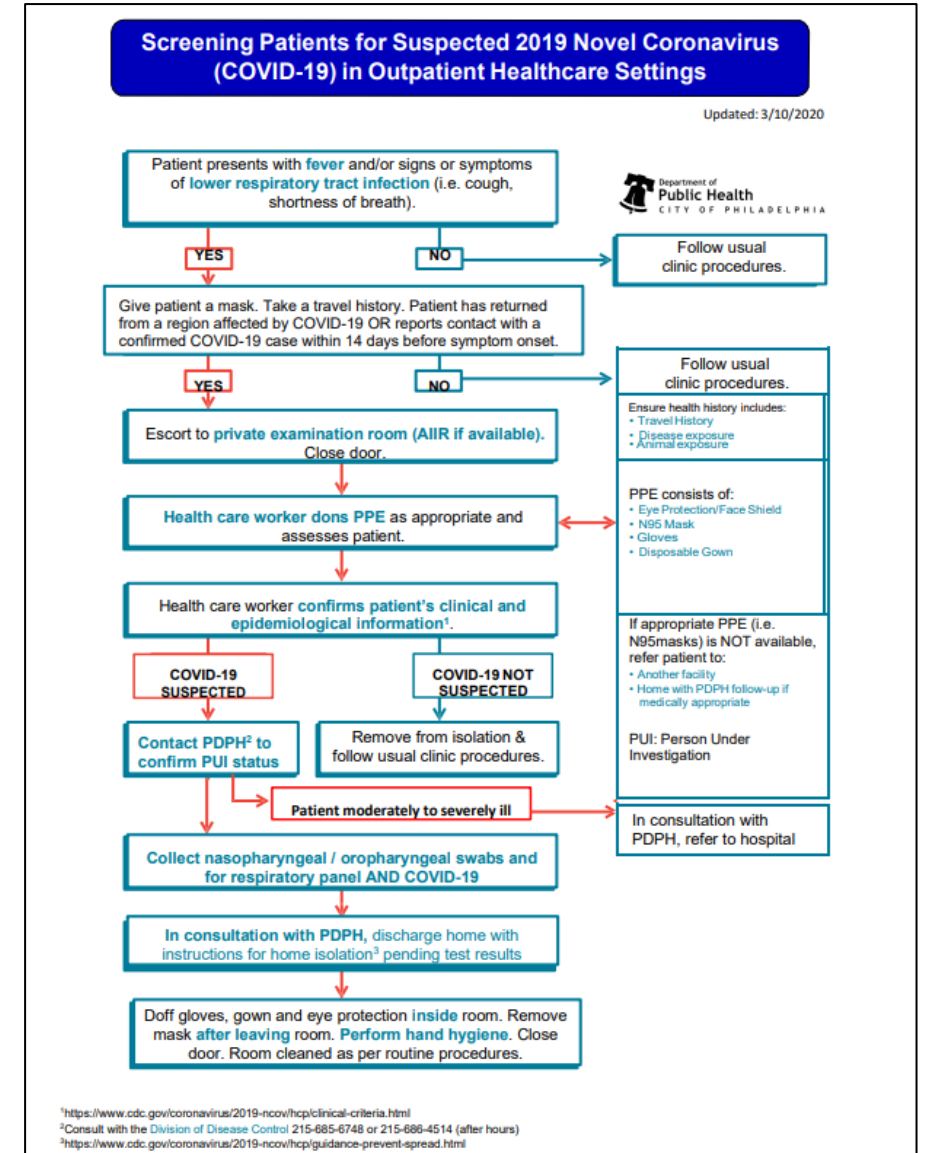
**PLEASE TELL STAFF IMMEDIATELY**



- Prepare to evaluate and manage persons presenting with respiratory symptoms and possible exposure to COVID-19
  - Post signs or posters directing patients to inform staff of symptoms of respiratory infection
  - Post signs or posters to remind patients to practice respiratory etiquette
  - Provide respiratory etiquette stations, including hand sanitizer, tissues, and surgical masks in waiting areas
  - Provide surgical masks to patients with respiratory symptoms

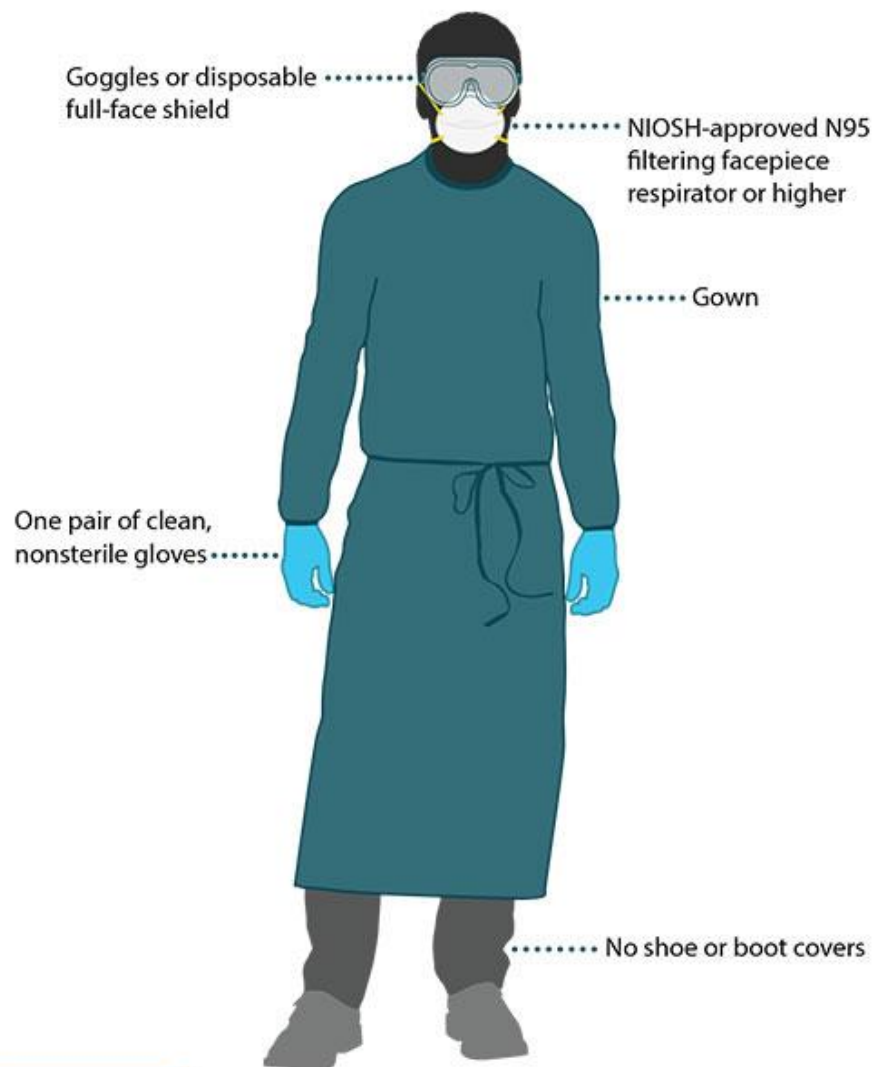
# Manage Suspect COVID-19 Patients

- Review [procedures for evaluation and management of patients](#) with suspected COVID-19
- Meet with staff to educate them about COVID-19
  - How [COVID-19 spreads](#)
  - [Clinical management](#) of COVID-19 patients
  - [Infection prevention and control](#) recommendations for COVID-19



# Protect Healthcare Workers

- Clinicians should use recommended personal protective equipment (PPE) when evaluating patients with suspected COVID-19
- Familiarize staff with [recommendations](#) to help preserve the supply of N95 masks
- Develop a plan for managing healthcare worker exposures



## Health Alert

### Updated Interim Guidance for Evaluating and Reporting Persons Under Investigation for Coronavirus Disease 2019 (COVID-19) March 5, 2020

In response to the ongoing increase in the number of countries reporting widespread community transmission of COVID-19, the increasing number of cases in the U.S. and expanded availability of diagnostic testing, the Centers for Disease Control and Prevention (CDC) has revised criteria for guiding which patients should be evaluated for COVID-19. Of note, guidance indicates that clinicians can use their judgement to determine if a patient with compatible symptoms should be tested. This decision should consider epidemiologic risk criteria, including presence of local transmission, travel history, and risk factors for severe COVID-19 disease<sup>a</sup>. As there are other respiratory viruses prevalent in the community at this time, clinicians may see a high volume of patients with signs of an acute respiratory infection. As such, it is important to consider epidemiologic risk factors, underlying health conditions and congregate setting environment of patients before proceeding with COVID-19 testing.

#### Patient Assessment and Management:

Providers should maintain vigilance and obtain thorough travel histories when evaluating patients with acute respiratory illness, particularly those with severe lower respiratory disease requiring hospitalization without an apparent cause<sup>b</sup>. Providers should also consider COVID-19 infection in patients who present with fever and/or symptoms of acute respiratory illness who do not require hospitalization in the following instances:

- Patient has exposure risk factors including close contact with a confirmed COVID-19 case OR travel to an affected area<sup>c</sup> within 14 days
- Patient is at risk for severe disease (older age, chronic medical conditions)
- Patient resides in a congregate setting
- Patient is presenting with progressive acute respiratory illness with no apparent cause<sup>c</sup>

<sup>a</sup>For additional details, visit: <https://www.cdc.gov/coronavirus/2019-nCoV/hcp/clinical-criteria.html>.

<sup>b</sup>Negative influenza and respiratory virus panel testing along with negative bacterial and fungal cultures results are needed to rule out other infectious etiologies.

<sup>c</sup>The current COVID-19 affected area list is subject to change. For updates on areas with Level 2 or higher travel notices, visit: <https://www.cdc.gov/coronavirus/2019-ncov/travelers/>.

For persons who fulfill any of the above criteria, please take the following actions:

- Place surgical mask on patient and move patient to a private room as soon as possible. Use an airborne infection isolation room if available.
- Promptly notify infection prevention personnel at your facility and report the suspected case to PDPH (business hours: (215) 685-6742, after hours: (215) 686-4514). PDPH and the Pennsylvania

#### SUMMARY POINTS

- The outbreak of COVID-19 is rapidly expanding worldwide and in the U.S. Guidance for evaluating potential cases has been revised accordingly.
- Consider COVID-19 in patients with acute respiratory illness and epidemiologic risk factors.
- Consider COVID-19 in patients with acute respiratory illness and no exposure risk who are at higher risk of severe disease or reside in congregate settings.
- Consult with PDPH for COVID-19 testing (215-685-6741 business hours, 215-686-4514 after hours).

# Stay Informed

- Make sure your facility/providers are receiving the most current information
- Sign up for the Health Alert Network:
  - <https://hip.phila.gov/HealthAlerts/SignUpHealthAlerts>
- Health alerts and other materials are frequently updated on PDPH's Health Information Portal

# Plan for Patient Surge

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- Review plans to manage patient surge
  - Alter staffing models as able
  - Expand/modify hours if able
  - Reschedule non-urgent visits as necessary
  - Convert spaces for patient evaluation/treatment
  - Leverage telemedicine capabilities
    - Telemedicine can help to keep sick persons out of waiting areas
    - Health plans, healthcare systems and insurers/payors should promote the availability of covered telemedicine or nurse advice line services



# Alternatives to Face-to-Face Visits

- Instruct patients to use available advice lines, patient portals, or to call and speak to clinic staff if they become ill with symptoms such as fever, cough, or shortness of breath
- Identify staff to conduct telephonic and telehealth interactions with patients
  - Develop protocols so that staff can triage and assess patients quickly
- Determine algorithms to identify which patients can be managed by telephone and advised to stay home, and which patients will need to be sent for emergency care or should come to your facility
  - Patients with mild COVID-19 illness can be safely managed at home
- Instruct patients that if they have respiratory symptoms they should call before they leave home, so staff can be prepared to care for them when they arrive





# Managing Patient Surge at Inpatient Facilities



**Reschedule elective surgeries as necessary**



**Shift elective urgent inpatient diagnostic and surgical procedures to outpatient settings, when feasible**



**Limit visitors to COVID-19 patients**



**Plan for a surge of critically ill patients and identify additional space to care for these patients**



# Continuity of Operations Planning

- Identify all essential functions of the practice
  - Identify primary staff who perform those functions, as well as other persons or cadres of staff who could serve as back-ups
- Plan for supply shortages
  - Inventory personal protective equipment, including gowns, gloves, surgical and N95 masks, and eye protection
- Establish emergency communication protocols for communicating with staff and patients

# Workforce Management

- Review sick leave policies and instruct staff who are ill to stay at home until their symptoms have resolved
  - Establish non-punitive policies
- Review your facility's emergency plans for managing absenteeism and increased patient volume
- Minimize staff exposure by establishing flexible work hours for functions that do not involve patient care
- Review/develop policies for managing workforce depletion
  - Consider alternative staffing strategies and using alternatives to clinic visits for patient evaluation
  - Cross-train staff to perform essential administrative functions

# Messages to Communicate to Patients

- Practice good hand hygiene and respiratory etiquette
- Stay home when sick
- Maintain a 2-week supply of food, water and essential household items, such as cleaning products, diapers and pet food
  - The Philadelphia Office of Emergency Management has tips on which [essential items should be stored at home](#) in preparation for any emergency
- Maintain a month-long supply of prescription medications
- Keep a supply of over-the-counter medications, such as fever-reducing medications, or other medications that household members use regularly
- Seek accurate information from sources like PDPH and the CDC



Persons at Risk for  
Serious Illness from  
COVID-19

- Older adults
- People with serious chronic medical conditions:
  - Heart disease
  - Diabetes
  - Lung disease

# Prepare Vulnerable Patients

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- Consider reaching out to patients who may be a higher risk of COVID-19-related complications to ensure adherence to current medications, confirm they have sufficient refills, and provide instructions for what to do if they become ill
- Advise patients to:
  - Stock up on supplies
  - Consider mail-order for prescription medications
  - Avoid crowds as much as possible
  - When in public, keep away from others who are sick, limit close contact, and wash hands often
  - Avoid cruise travel and non-essential air travel
  - Watch for potential COVID-19 symptoms, including fever, cough, and shortness of breath
  - Determine who can provide care if a caregiver gets sick



# Guidance for Long-term Care Facilities



- Limit visitors to the facility
- Post signs or posters at entrances and in strategic places providing instructions on hand hygiene, respiratory hygiene, and cough etiquette
- Ensure supplies are available (tissues, waste receptacles, alcohol-based hand sanitizer)
- Observe newly arriving patients/residents for development of respiratory symptoms
- Take steps to prevent known or suspected COVID-19 patients from exposing other patients
- Limit the movement of COVID-19 patients (e.g., have them remain in their room)
- Identify dedicated staff to care for COVID-19 patients



# Personal Preparedness for Providers

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- Stay home when you're sick
- Check for any signs of illness before reporting to work each day
- Check with your child's school or daycare to find out about plans for early dismissals and how urgent information will be communicated
- Make arrangements for back-up childcare in the event that your child is sick or school is closed
- If you have elderly parents or relatives, consider how you will care for them if they get sick
  - If they rely on a caregiver, make back-up plans in case that caregiver becomes sick and is unavailable

# Resources

- COVID-19 Webinar for Urgent Care and Outpatient Providers
  - <https://hip.phila.gov/EmergentHealthTopics/2019-nCoV>
- Strategies for Optimizing the Supply of N95 Respirators during the COVID-19 Response
  - <https://www.cdc.gov/coronavirus/2019-ncov/hcp/checklist-n95-strategy.html>
- Healthcare Professional Preparedness Checklist For Transport and Arrival of Patients With Confirmed or Possible COVID-19
  - <https://www.cdc.gov/coronavirus/2019-ncov/hcp/hcp-personnel-checklist.html>
- Interim Guidance for Healthcare Facilities: Preparing for Community Transmission of COVID-19 in the United States
  - <https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/guidance-hcf.html>
- Coronavirus Disease 2019 (COVID-19) Hospital Preparedness Assessment Tool
  - <https://www.cdc.gov/coronavirus/2019-ncov/downloads/hospital-preparedness-checklist.pdf>
- People at Risk for Serious Illness from COVID-19
  - <https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/high-risk-complications.html>