

The Centers for Disease Control and Prevention (CDC) has offered the following information regarding interim coronavirus (COVID-19) guidance for healthcare facilities:

KEY CONSIDERATIONS FOR HEALTHCARE FACILITIES:

Currently there are no medications to treat or vaccines to prevent COVID-19. Therefore, community approaches to slowing transmission including appropriate hand hygiene, cough etiquette, social distancing, and reducing face-to-face contact with potential COVID-19 cases are needed to slow disease transmission and reduce the number of people who get sick. In each healthcare facility, the primary goals include:

- ▶ Provision of the appropriate level of medical care
- ▶ Protecting healthcare personnel and non-COVID-19 patients accessing healthcare from infection
- ▶ Preparing for a potential surge in patients with respiratory infection
- ▶ Preparing for potential personal protective equipment supply and staff shortages

Purpose of this document: This interim guidance outlines goals and strategies for all U.S. healthcare facilities to prepare for and respond to community spread of coronavirus disease-2019 (COVID-19). Although it is not possible to predict the future course of the outbreak, planning for a scenario in which many persons become ill and seek care at the same time is an important part of preparedness and can improve outcomes if an outbreak occurs. Therefore, preserving healthcare system functioning is paramount. It is critical for healthcare facilities to continue to provide care for all patients, irrespective of COVID-19 infection status, at the appropriate level (e.g., home-based care, outpatient, urgent care, emergency room, or hospitalization). Facilities may need to respond to a surge in patients requiring care. Concentrated efforts will be required to mobilize all aspects of healthcare to reduce transmission of disease, direct people to the right level of care, and decrease the burden on the healthcare system.

Public health guidance will shift as the COVID-19 outbreak evolves. All healthcare facilities should be aware of any updates to local and state public health recommendations.

Key Goals for the U.S. healthcare system in response to the COVID-19 outbreak are to:

1. Reduce morbidity and mortality
2. Minimize disease transmission
3. Protect healthcare personnel
4. Preserve healthcare system functioning

ACTIONS TO TAKE NOW TO PREPARE FOR AN OUTBREAK OF COVID-19

1. Designate a time to meet with your staff to educate them on COVID-19 and what they may need to do to prepare.
2. Explore alternatives to face-to-face triage and visits. The following options can reduce unnecessary healthcare visits and prevent transmission of respiratory viruses in your facility:
 - ▶ Instruct patients to use available advice lines, patient portals, on-line self-assessment tools, or call and speak to an office/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 come to your facility.
 - ▶ 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.
3. Plan to optimize your facility's supply of personal protective equipment in the event of shortages. Identify flexible mechanisms to procure additional supplies when needed.
4. Prepare your facility to safely triage and manage patients with respiratory illness, including COVID-19. Become familiar with infection prevention and control guidance for managing COVID-19 patients.
- ▶ Visual alerts (signs, posters) at entrances and in strategic places providing instruction on hand hygiene, respiratory hygiene, and cough etiquette
 - ▶ Ensure supplies are available (tissues, waste receptacles, alcohol-based hand sanitizer)
 - ▶ Facemasks are available at triage for patients with respiratory symptoms
 - ▶ Create an area for spatially separating patients with respiratory symptoms. Ideally patients would be >6 feet apart in waiting areas.

CONSIDERATIONS FOR SPECIFIC SETTINGS

1. Outpatient facilities

- ▶ Reschedule non-urgent outpatient visits as necessary.
- ▶ Consider reaching out to patients who may be a higher risk of COVID-19-related complications (e.g., elderly, those with medical co-morbidities, and potentially other persons who are at higher risk for complications from respiratory diseases, such as pregnant women) to ensure adherence to current medications and therapeutic regimens, confirm they have sufficient medication refills, and provide instructions to notify their provider by phone if they become ill.
- ▶ Consider accelerating the timing of high priority screening and intervention needs for the short-term, in anticipation of the possible need to manage an influx of COVID-19 patients in the weeks to come.
- ▶ Symptomatic patients who need to be seen in a clinical setting should be asked to call before they leave home, so staff are ready to receive them using appropriate infection control practices and personal protective equipment.
- ▶ Eliminate patient penalties for cancellations and missed appointments related to respiratory illness.

2. 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. Include options for:
 - ▶ *Using alternate and separate spaces in the ER, ICUs, and other patient care areas to manage known or suspected COVID-19 patients.*
 - ▶ *Separating known or suspected COVID-19 patients from other patients (“cohorting”).*
 - ▶ *Identifying dedicated staff to care for COVID-19 patients.*

3. Long term care facilities

- ▶ Limit visitors to the facility
- ▶ Post visual alerts (signs, posters) at entrances and in strategic places providing instruction on hand hygiene, respiratory hygiene, and cough etiquette
- ▶ Ensure supplies are available (tissues, waste receptacles, alcohol-based hand sanitizer)
- ▶ 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.
- ▶ Observe newly arriving patients/residents for development of respiratory symptoms.

PROMOTING THE INCREASED USE OF TELEHEALTH

- ▶ Healthcare facilities can increase the use of telephone management and other remote methods of triaging, assessing and caring for all patients to decrease the volume of persons seeking care in facilities.
- ▶ If a formal “telehealth” system is not available, healthcare providers can still communicate with patients by telephone (instead of visits), reducing the number of those who seek face-to-face care.
- ▶ Health plans, healthcare systems and insurers/payors should message beneficiaries to promote the availability of covered telehealth, telemedicine, or nurse advice line services

This document is for general information only and is not intended to provide, and should not be relied upon for, medical or other advice in any particular circumstance or fact situation.

Source:

Centers for Disease Control and Prevention

<https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/guidance-hcf.html>