[Health Center Name]
COVID-19 Response Plan

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# Purpose

The purpose of this plan is to detail the steps [health center name] will take to respond to the outbreak of COVID-19. This plan will guide response actions and decisions to promote staff and patient safety and enable the health center to continue to care for the community.

# Situation

COVID-19 was first identified in December 2019; it has since spread around the world and is continuing to spread at a rapid rate. On March 11, 2020 the World Health Organization declared COVID-19 a pandemic, meaning there is worldwide spread with human-to-human transmission and fatalities. The exact rates of transmission and mortality are unconfirmed and regularly being adjusted as the disease spreads and more information is gathered. Symptoms of infection are primarily fever, cough, and shortness of breath. Cases range from asymptomatic to cold or flu-like, with extreme cases resulting in hospitalization or death. While people of all ages are confirmed to have had the virus, those over 60 or with preexisting conditions have the highest rate of significant complications and mortality. International guidance for community member personal protection has so far focused on washing hands, avoiding hand-to-face contact, and avoiding crowds. Those at high risk are encouraged to stay home as much as possible.

**The situation is rapidly evolving. This plan will be updated weekly to reflect the most recent guidance and requirements.**

# Assumptions

* The virus will continue to spread for an unforeseen amount of time.
* Health Center staff and patients will be affected.
* Resources – primarily personal protective equipment (PPE) – will be difficult to obtain.
* Guidance and requirements from the government will change with the situation.

# Key Roles Within Health Center

Staff have been assigned specific roles during the outbreak. These roles are to ensure key tasks are accomplished and staff and patients are kept as safe as possible. Each person will be trained on the expectations of each role. Staff not listed will be assigned tasks by their supervisor.

|  |  |  |
| --- | --- | --- |
| **Position** | **Primary Person** | **Secondary Person** |
| Response Manager/Incident Commander | [Insert name and contact information] | [Insert name and contact information] |
| Patient Outreach |  |  |
| Staff Outreach |  |  |
| Inventory and Supply Management |  |  |
| Health Center Signage |  |  |
| Facility Cleaning |  |  |
| Potential Exposure Tracking |  |  |
| Mandatory Reporting |  |  |
| Case Tracking |  |  |
| Media  |  |  |
| PPE Training and Enforcement |  |  |
| [Other] |  |  |
| [Other] |  |  |
| [Other] |  |  |
| [Other] |  |  |

[If you have a chart of specific roles and responsibilities (such as the Incident Command System) insert it here instead of the above table.]

# Communications

## Communication with Staff

The health center will send regular updates by [email/text/phone] to all staff at [time]. Staff should address all questions and concerns to [name/email/other means of contact]. Staff members who are unable to come to work due to illness for themselves or a family member must contact their direct supervisor immediately.

## Communication with Patients

The health center will communicate with patients using the [website/social media/phone system/patient portal]. In the event a person who was in the health center tests positive for COVID-19, [insert name/title of person responsible] will call everyone who may have come in contact with the ill individual in accordance with [local/state/national] requirements.

General questions and concerns about COVID-19 will be directed to the [CDC/WHO/health center website/Department/Ministry of Health].

If the disease becomes widespread and the health center has to adjust operations in response, the [front staff] will be responsible for contacting scheduled patients to reschedule visits as needed.

Signage on [stopping the spread of germs](https://www.cdc.gov/coronavirus/2019-ncov/downloads/stop-the-spread-of-germs.pdf) and [identifying potential COVID-19 symptoms](https://www.cdc.gov/coronavirus/2019-ncov/downloads/COVID19-symptoms.pdf) will be posted in the following locations:

* Entrances to Health Center
* Front Desk / Receptionist office
* Waiting rooms
* Examination Rooms
* Bathrooms
* [additional locations]

See plan resources for links to printable posters.

# Staff Safety

Staff are required to wear personal protective equipment when in contact with suspected or confirmed cases or in isolation rooms. The health center will follow all guidance from the [CDC/WHO/PAHO/other government agency] regarding required personal protective equipment (PPE) for staff safety. If the health center is unable to obtain the necessary PPE to keep staff protected, the following steps will be considered:

* Close the clinic
* Send staff to another location (such as local hospital) that has PPE but needs staff
* [additional steps]

Updated PPE recommendations can be found from the [CDC](https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fhcp%2Finfection-control.html) or [WHO](https://apps.who.int/iris/bitstream/handle/10665/331215/WHO-2019-nCov-IPCPPE_use-2020.1-eng.pdf).

The health center will be increasing the regular cleaning schedule to [frequency]. Cleaning supplies are available for disinfecting and staff are encouraged to keep their areas and public areas as clean as possible. Staff should use [these cleaning chemicals and supplies] to disinfect. Infection prevention and control training will be provided to all staff [frequency].

[Staff names/titles] are responsible for monitoring their assigned areas for infection prevention standards.

## Staff Sick Leave Policy

Staff are required to stay home if they are sick. This can include potential COVID -19, as well as other seasonal illnesses such as colds and flus. Staff at high risk or in close contact with someone at high risk from COVID -19 are encouraged to speak with their managers directly. If staff begin feeling ill while at work, they will be sent home as quickly as possible. If staff begin to feel unwell while at home, they are to contact their supervisor as soon as possible. The supervisor will relay that information to the Response Manager. Staff cannot return to work until they have been cleared to return by a healthcare provider.

If staff come into close contact with an individual strongly suspected of having COVID-19 outside of work, or travel to an area where the virus is widespread, the following procedures will be implemented.

* Document exposure
* Ongoing screening for symptoms during estimated 14-day incubation period
* Possible self-quarantine during incubation period even if asymptomatic, depending on confirmation of and degree of positive exposure
* Test for COVID-19 as soon as possible if symptomatic
* Communicate information with other individuals who might have been exposed
* Report to local government as required

# Patient Management

## Screening

All patients should be screened when scheduling appointments and on arrival at the health center to determine if they may have been exposed to COVID-19. Exposed or symptomatic patients in the health center will be immediately provided with a mask and directed to the isolation area. Signs will be posted throughout the health center asking anyone with COVID-19 symptoms to please put on a mask.

Screening questions to determine an individual’s exposure to COVID-19 are:

[Fill in with country guidelines, if they differ]

1. Has the patient travelled to any affected areas within the past 14 days? [If virus is spreading locally, remove this question]
2. Has the patient been in close contact with anyone [who has travelled to affected countries or] who has a laboratory-confirmed case of COVID -19 in the past 14 days?
3. Is the patient experiencing fever, cough, shortness of breath?
4. Is the patient high risk for negative outcomes (elderly, comorbidities)?
5. If the answer to any of these questions is yes take these steps:

[insert specific procedures]

Staff will refer patients to alternate locations as needed to best provide care and keep the patients safe.

* Patients with severe symptoms or with symptoms and high-risk factors will be directed to the [local hospital or treatment facility].
* Patients without symptoms will be directed to [specific location within the clinic] or asked to stay home.
* [additional options]

Additional referrals will be made to partners as needed.

Waiting Areas and Isolation

Patients who are visiting the health center for services not related to COVID-19 will be asked to enter [which door]. The [areas of health center] will be reserved for asymptomatic patients and will be sanitized regularly to prevent exposure.

If patient is at the health center and has symptoms (fever, cough, shortness of breath):

* 1. Move this patient immediately to the designated isolation room, preferably a negative pressure room if available.
	2. Designated isolation/sick rooms for site:
		1. [location 1]
		2. [location 2]
		3. [additional locations]
	3. Place “**Isolation Precaution**” sign on door (to ensure only designated staff enter room)
	4. Limit number of staff assigned to treating and having contact with the patient.
	5. Only [insert staff titles] personnel are allowed to enter designated isolation rooms.
	6. [Insert staff names/titles] are responsible for taking samples and [staff names/titles] is responsible for sending those samples to [location] to be tested.
	7. Alert the following people if a case is suspected:
		1. On-site point-of-contact:
		2. Leadership team point-of-contact:
		3. Department of Health point-of-contact:

The health center is required to notify the following organizations/government offices or any [suspected/confirmed] cases. [Staff names titles] are responsible for reporting.

|  |  |  |
| --- | --- | --- |
| **Agency Name** | **Contact Information** | **Reporting Requirements** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

CDC guidance for isolating a suspected or confirmed case can be found at <https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html>.

As the test to confirm COVID-19 takes time, the health center should contact patients, family members, and staff who were in the facility when a suspected case entered.

[Staff names/titles] are responsible for follow-up on patient test results, documentation of results and patient notification.

[Staff names/titles] are responsible for maintaining documentation of everyone (patients, family, visitors, and staff) who enters the health center. Documentation should include the date, time of entry, time of departure, and if possible, locations within health center the person visited.

This list is kept in [insert physical or computer file location].

## Patient Transportation

Confirmed cases needing a higher level of care must be transported to [insert location]. Transportation must be done by [ambulance/company name/type of vehicle] prepared to care for a highly contagious patient. [Transportation] will be notified in advance that the patient has, or is suspected to have, COVID-19. Proper PPE will be used by the transportation team and the patient will be given a mask to wear if medically safe.

The patient will remain in an isolation room until the ambulance has arrived. The patient will be taken out using [insert route/hallway/door] to minimize exposure to others.

## High-Risk Patients

The health center will take the following additional steps to care for high risk patients [adjust list for health center]:

* Open a [hotline/website/remote support group] for high risk patients
* Identify high risk patients and contact them directly.
* Encourage personal preparedness and social distancing or isolation.
	+ Work with family and neighbors to ensure high risk patients are able to get food and other necessary supplies.
* Work with [individual/family/community] to develop plan to manage pre-existing conditions.
* Conduct home visits to monitor health concerns rather than having the patient come to the health center.
* Use telehealth to monitor patients remotely.
* Refill necessary prescriptions without requiring a visit.

# Health Center Operations

In order to best provide care with staff shortages and/or increased patient numbers, the following services will be prioritized. These services have been chosen to ensure the health center is best able to care for critical patients. Staff will be reassigned from non-priority services to ensure priority services are able to continue.

* COVID-19 testing and care
* Community education for COVID-19 safety
* Critical injury or illness care
* Chronic condition management
* Prescription refills
* [additional services to be prioritized]

If needed, the following services will be temporarily suspended in order to reassign staff and resources to the priority services listed above. Temporarily suspended services will be resumed as soon as it is safe to do so. Staff usually assigned to these services will be reassigned to the priority services listed above based on their expertise.

* Well visits
* Routine exams
* Non-critical care
* Non-COVID-19 related community education
* [additional services to be temporarily suspended]

Temporarily suspended services will not be resumed until:

[Insert criteria and requirements for resuming services]

Patients seeking services that have been temporarily suspended will be [rescheduled/referred elsewhere/asked to call again at a later date]. [Staff names/titles] are responsible for contacting already scheduled patients to [cancel/reschedule]. Cancellation fees or no-show penalties will be waived during the outbreak to reduce non-critical visits.

If operations need to be adjusted, the health center can do the following [adjust list for health center]:

* Expand hours of operations □Yes □No
* Reduce hours to accommodate reduced staffing □Yes □No
* Include weekend/evening services □Yes □No
* Accept walk-in patients □Yes □No
* Accept new patients □Yes □No
* Expand/begin telehealth services □Yes □No
* Provide prescription refills to postpone well visits □Yes □No
* Accept credentialed providers from other sources □Yes □No

If staff illness becomes widespread, the health center will consider temporary closure until a safe minimum level of staffing can be maintained. The minimum number and type of staff needed to operate the clinic is:

|  |  |
| --- | --- |
| **Type of Staff** | **Minimum Safe Number** |
| Provider/Doctor |  |
| Nurse |  |
| Administration/Front Desk |  |
| Other |  |
| Other |  |
| Other |  |
| Other |  |

## Supplemental Staffing

The following organizations/individuals can be contacted to provide additional staffing:

|  |  |  |
| --- | --- | --- |
| **Organization/Name** | **Email Address** | **Phone Number** |
|  |  |  |
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# Resources

[Staff names/titles] are responsible for inventory management and resource acquisition. They are authorized to purchase additional supplies and reach out to new vendors if current vendors are unable to meet resource needs.

In the event of personal protective equipment (PPE) or other critical resource shortages, the following steps may be taken (adjust these steps to match health center policy and procedure):

* Limit the number of staff who come into contact with patients
* Minimize non-essential services to conserve PPE
* Work with the health department and local hospital to access additional supplies

Additional resources will be procured through existing supply contracts. The health center will also work with the following organizations and companies:

|  |  |  |
| --- | --- | --- |
| **Company Name** | **Resources Available** | **Contact Information** |
|  |  |  |
|  |  |  |
|  |  |  |
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|  |  |  |

# Partners

List the organizations the health center will be working most closely with along with the contact information and any specifics about the partnership. Also list any required contacts, for example required reporting to the Department/Ministry of Health of any suspected or confirmed cases. As local partners become overwhelmed, the health center will also work with [regional/state/national/international] partners. Non-clinical partners may be contacted to provide additional support.

|  |  |  |
| --- | --- | --- |
| **Organization Name** | **Contact Information** | **Capabilities/Reason for Partnership** |
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# Documentation

[Staff names/titles] are responsible for maintaining accurate documentation and records of expenses, training, staff illness, and any actions the health center takes in response to COVID-19.

# Plan Maintenance

This plan will be reviewed and updated weekly by [staff names/titles]. The following sections must be kept current with WHO and CDC guidelines.

* Staff Safety
* Patient Management

#

# Additional Resources

## World Health Organization (WHO)

* COVID-19 homepage:

<https://www.who.int/emergencies/diseases/novel-coronavirus-2019>

* Advice for the public from the World Health Organization (WHO) can be found here: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public>
* PPE guidance:

<https://apps.who.int/iris/bitstream/handle/10665/331215/WHO-2019-nCov-IPCPPE_use-2020.1-eng.pdf>

## Pan-American Health Organization (PAHO)

* COVID -19 homepage

<https://www.paho.org/hq/index.php?option=com_content&view=article&id=15696:coronavirus-disease-covid-19&Itemid=4206&lang=en>

* Hospital Readiness Checklist

<https://www.paho.org/hq/index.php?option=com_docman&view=download&alias=51716-hospital-readiness-checklist-for-a-novel-coronavirus-ncov&category_slug=scientific-technical-materials-7990&Itemid=270&lang=en>

* COVID -19 technical documents homepage

<https://www.paho.org/en/technical-documents-coronavirus-disease-covid-19>

## Centers for Disease Control and Prevention (CDC) – US Based Guidance

* COVID -19 homepage:

<http://www.coronavirus.gov>

* Information for healthcare providers

<https://www.cdc.gov/coronavirus/2019-nCoV/hcp/index.html>

* Specific steps healthcare centers should take can be found here: <https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/steps-to-prepare.html>
* COVID-19 Facts for the public (printable poster):

<https://www.cdc.gov/coronavirus/2019-ncov/about/share-facts-h.pdf>

* + Symptoms flyer: <https://www.cdc.gov/coronavirus/2019-ncov/downloads/COVID19-symptoms.pdf>
* Handwashing guidance posters:
	+ For adults: <https://www.cdc.gov/handwashing/fact-sheets.html>
	+ For teens and children: <https://www.cdc.gov/handwashing/posters.html>
* PPE Donning and Doffing

<https://www.cdc.gov/hai/pdfs/ppe/PPE-Sequence.pdf>

* State & Territorial Health Department Websites

<https://www.cdc.gov/publichealthgateway/healthdirectories/healthdepartments.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

## Occupational Safety and Health Administration (OSHA) – US Based Guidance

* Guidance for control and prevention can be found here:

<https://www.cdc.gov/coronavirus/2019-nCoV/index.html>

## Environmental Protection Agency (EPA) – US Based Guidance

* List of disinfectants effective against COVID-19:

<https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2>

## Other Resources

* Information for the public (including information in Spanish and Portuguese):

<http://coronavirusnetwork.org/resources/>

* National Association of Community Health Centers COVID-19 homepage:

<http://www.nachc.org/coronavirus/>

* National Association of Free and Charitable Clinics COVID-19 homepage:

<https://www.nafcclinics.org/content/coronavirus-disease-2019-covid-19-%E2%80%93-resources-general-information-preparedness-and>