

STAFFING CONSIDERATIONS

1. *Right Size Physician and Staff Work Force*

As noted above, practice revenue and patient volume may come back slowly, in cycles, and unevenly.

To prepare for this, practices should consider staffing adjustments, which may include bringing staff and physicians back in different waves.

Personnel can be placed on rotating teams or via telecommuting for certain positions, if possible.

2. *Consider Options for Vulnerable Staff*

- Working in health care immediately puts health care workers at risk and at higher exposure.
- The risk is even higher for vulnerable staff – those over the age of 60 or with pre-existing conditions.
- Having internal policies for these workers can help all employees feel safe while working.
- Workers in vulnerable populations may be shifted to different roles that minimize their risk of exposure.
- This may include various duties, such as consulting with younger staff, advising on the use of resources, keeping staff updated on most recent news, ordering of supplies for the clinic, working from home, phone triage of patients, helping providers and managers make tough decisions, or talking to patients' family members.

3. *Give Extra Care and Attention to the Emotional and Physical Needs of Staff*

- The pandemic has required physicians and many other health care workers to work long hours in dangerous conditions.
- As the health care system reopens, practices should pay extra attention for signs of exhaustion, depression, stress and other similar issues.

UNIVERSAL SAFETY PRECAUTIONS FOR PRACTICES AND FACILITIES

As physician practices and health care facilities reopen, every precaution should be taken to minimize the risk of infection, for both office staff and patients.

FMA recommends that all practices and facilities adopt comprehensive safety protocols.

Below is a list of best practices. Some of the suggestions below may not apply to certain practices, so physicians and office staff should adjust them for individual circumstances.

1. *Maintain Physical Distancing*

Physician office space and workflow should be structured to encourage physical distancing.

Here are a few ideas for practices to consider:

- Ask patients to check in by phone or text message and wait in the car until an exam room is ready.

- Prohibit adults and teens from having guests or visitors. Only parents of younger children should be in the office with the patient. Frail elderly patients should also have an adult with them.
- Schedule patients such that only a few are in the office at any one time. Practices can consider offering evening and weekend hours and leaving more time in between patients.
- Put away articles such as magazines, toys, coffee, or anything else that may be handled by infected patients.
- If possible, arrange office flow such that patients enter and leave through separate doors.
- As able, modify check-out procedures to minimize/avoid any patient time in central area or at check-out desk.
- Consider setting aside clinic hours for vulnerable patients – elderly, immunocompromised, etc.
- Separate patients with respiratory symptoms so they are not waiting among other patients seeking care. Be careful about airflow within your waiting areas as best you can to minimize potential for air from where sicker patients are waiting to flow into areas where healthier patients are waiting.
- Consider strategies to prevent patients who can be seen at home via telehealth from coming to your facility, potentially exposing themselves or other's to germs.

2. Require Universal Face Covering

Practices should require everyone who enters the practice – both patients and staff – to wear appropriate face covering.

Physicians should communicate this requirement to patients at the time of scheduling an office visit.

Patient communications should also include education about the proper type of face covering.

Patients who are not ill do not need N95 or surgical masks, which should be reserved for health care workers.

Practices should be aware of the needs of very young children and those with respiratory diseases, who may face difficulties with reduced airflow through face coverings.

3. Implement Strict Sterilization Procedures

Physician offices and health care facilities are already cleaned and sterilized more than most communal spaces. Lowering the risk of infection, however, will involve even stricter sterilization protocols.

Staff should familiarize themselves with the CDC Guidelines for Cleaning and Disinfecting of Community Facilities.

4. Continue to Use Telehealth, as Appropriate

With the support of regulatory guidance and waivers, the health care system has made a massive shift to the use of telehealth.

For all “no-touch” services, physicians should continue to engage in virtual care.

This will have the effect of limiting the number of patients who appear in the office and preserving precious office time and space for patients who must be seen in person.

Practices that are continuing to use telehealth find it helpful to schedule blocks of time (two or three hours) exclusively for virtual care.

Staying in one modality at a time may be easier than moving back and forth.

5. Pre-Screen Patients for Possible COVID-19 Symptoms

At the time of scheduling, patients should be asked if they are experiencing common COVID-19 symptoms – dry cough, fever, etc.

All patients, regardless of symptoms, should have their temperature checked as they enter the office.

Patients displaying COVID-19 symptoms should be screened telephonically and tested, if possible, before coming to the office.

Physicians should keep up to date on the suggestions for preventing spread of COVID-19 on the CDC's website.

6. Preservation of Personal Protective Equipment

All staff should be trained on the proper use of personal protective equipment.

Practices should follow CDC guidelines for extended use and reuse of PPE.

7. Establish a Quarantine Policy

Practices should have a policy requiring a 14-day quarantine for workers who have contracted COVID-19, or show symptoms that they may have contracted it.

The last section contains a very detailed “checklist” to more fully assure you that you and your staff are ready to re-establish your practice.