



Getting Back to Work

Once stay-at-home restrictions are relaxed, physician practices should thoughtfully plan when and how to reopen to full capacity. Remember to comply with local governmental guidance. Some states, counties, and cities have modified or extended stay-at-home orders. Please refer to the Factsheet linked below that details state-specific delays, and when elective or non-urgent procedures may resume.

Below is a brief checklist of considerations when reopening and/or ramping up the clinic:

- ❑ **Make a Plan: Consider a 'soft reopening' where you open incrementally .**
 - ❑ Identify what visits can be done via telehealth and perform those visits remotely.
 - ❑ Direct administrative staff who do not need to be physically present in the office to stay home and work remotely.

- ❑ **Consider a tele-triage program and screening patients before in-person visits.**
 - ❑ Create a protocol for clinic staff to evaluate the patient's condition and symptoms. This should assist in determining if the visit is best handled via telemedicine or as an in-person visit.
 - ❑ Before a patient arrives at the office, the practice should verify as best it can that a patient does not have symptoms of COVID-19. In the case of suspected infection and the patient must be seen, flag the patient utilizing EMR features to alert the clinic in advance .
 - ❑ Change the arrival, registration, and processing procedures for patients to reduce the number of patient-staff interactions. Implement online registration (readily available via most EMRs).

- ❑ **Assess PPE needs and alternatives such as cloth masks and replenish as able**
 - ❑ Retrain staff on proper donning and disposal of PPE.
 - ❑ If necessary, retrain staff on proper cleaning and disinfecting protocols.
 - ❑ Have supplies delivered in advance before reopening so that sporadic deliveries do not disrupt the daily plan.
 - ❑ Clinical staff should wear face masks and gloves when treating non-ill patients because of concerns about asymptomatic COVID-19.
 - ❑ In the case of suspected infection, clinical staff should wear facemasks, gowns, eye protection, and gloves.



❑ Institute safety measures for patients and staff.

- ❑ Consider a modified schedule to avoid high volume or density within care rooms or waiting areas.
- ❑ Operating at capacity will not allow for adequate cleaning and disinfection of patient care rooms and surfaces - consider reduced capacity.
- ❑ Limit patient companions.
- ❑ Limit the number of interactions between employees and patients.
 - ❑ Alternate employee shifts so that the same group of employees is not repeatedly exposed to one another.
 - ❑ Restrict the number of patients and companions entering the facility.
 - ❑ Establish a rotation between work from home and onsite shifts.
 - ❑ Lengthen shifts to reduce the number of employee changes per day.
 - ❑ Change operating hours.
 - ❑ Provide and encourage services through online or phone reservations to mitigate in-person interactions.

❑ Ensure and prioritize workplace safety to limit interactions and make the workspace conducive to distancing.

- ❑ Conduct meetings virtually.
- ❑ If meetings must happen in-person, limit attendance and time frames.
- ❑ Utilize outdoor spaces to conduct business operations while social distancing.
- ❑ Place shields or other physical barriers between employees and patients in areas where maintaining a 6' distance may not be possible.
- ❑ Provide and utilize masks in close-contact settings.
- ❑ Place floor markings to direct traffic, ensuring 1-way directional flow in enclosed spaces.
- ❑ Remove chairs from waiting area and review seating arrangements in the waiting room to allow for distancing.
- ❑ Communicate personal health requirements clearly to clinicians and staff, including not working if ill.
- ❑ Adopt a flexible and sick policy to accommodate illness.

❑ Reduce the number of objects being transferred between staff and patients.



- ❑ **Reduce business functions that require domestic travel outside of your community.**
 - ❑ If domestic travel is necessary, discourage mass transit use and encourage private transport such as rental cars.
 - ❑ Provide PPE to traveling employees (gloves, masks, etc.).

- ❑ **Enforce Sanitation and Hygiene measures**
 - ❑ Identify priority cleaning supplies to disinfect surfaces, shared equipment, and facilities.
 - ❑ Procure, store, and maintain necessary cleaning supplies, PPE, and other critical supplies (face masks, hand sanitizers, tissues, and other paper products).
 - ❑ Request an increase in supplies from your distributors.
 - ❑ If necessary, identify alternative distributors or manufacturers.
 - ❑ Maintain handwashing and hand sanitizer stations throughout the facility with clear signage and notices.
 - ❑ Develop and implement a sanitation plan with increased cleaning schedules for surfaces, equipment, and rooms.
 - ❑ Identify who is responsible for cleaning and ensure those in charge of cleaning are provided with PPE and supplies .
 - ❑ Allow ample time for cleaning and disinfection of surfaces.

- ❑ **Continue to communicate system changes and policy updates with staff via a weekly newsletter or group call.**

More Information:

- [Checklist to Prepare Physician Offices for COVID-19 \(AAFP\)](#)
- [Opening Up America Again: Reopening Facilities to Provide Non-Emergent Non-COVID-19 Healthcare \(CMS\)](#)
- [A Physician Practice Guide to Reopening \(AMA\)](#)
- [Factsheet: State Action related to Delay and Resumption of 'Elective' Procedures During COVID-19 Pandemic \(AMA\)](#)
- [Considerations on Re-Opening Your Practice \(AAFP\)](#)
- [Guidance for Cleaning and Disinfecting \(CDC\)](#)
- [COVID-19 CDC/EPA Cleaning & Disinfecting Guidances \(CDC\)](#)
- [6 Steps for Safe & Effective Disinfectant Use \(EPA\)](#)
- [COVID-19: Using PPE \(CDC\)](#)
- [Factsheet for Healthcare Personnel: N95 Respirators and Decontamination \(FDA\)](#)
- [Public Health Principles for a Phased Reopening During COVID-19 \(JHU\)](#)