MEDICAL DIRECTOR/PRACTITIONER COVID PREPARATION

Goals overall are to keep residents and staff safe including practitioners though

* 1. KEEPING COVID OUT
  2. KEEPING COVID CONTAINED IN YOUR FACILITY (see Treating COVID in Place tool)
  3. KEEPING COVID FROM SPREADING OUT OF YOUR FACILITY

Strategies to do this:

1. Limit traffic into your building
   1. Telehealth visits as much as practical
      1. Initial visits
      2. Regulatory follow up visits
      3. Change in condition
      4. ACP visits
   2. Limit practitioner presence to one building or only one building per day and wear appropriate PPE that can be reused in keeping with CDC recommendations. Collaborate with colleagues to accomplish this
   3. Stop routine lab work or try to batch on less days. Consider taking over blood drawing by your staff and arrange for outside the facility pick up since phlebotomists visit multiple facilities
   4. Stop other diagnostic services or limit what you can
   5. Stop consultant visits unless medically necessary and utilize phone or tele consults
2. Limit traffic into resident rooms
   1. Keep residents in their rooms (aware of limits with dementia residents)
   2. Limit vital signs to what is absolutely needed recognizing staff will be in the room for their twice a day surveillance of each resident so they can optimize that time.
   3. Limit anything where equipment shared between residents
   4. Limit fingersticks and get rid of insulin more than twice a day if you can
   5. Decrease all but absolutely necessary meds-great time for med reduction (see below for specific medication recommendations)
   6. Limit therapies to minimum and probably only one discipline and once a day
   7. Help staff multitask and evaluate bathing routines
   8. Make sure staff masking and utilizing any needed PPE appropriately and good environmental cleaning daily particularly high touch surfaces as yo round or tele visit
3. Assume everyone even those without respiratory signs and symptoms could be infectious and spread COVID to residents and each other
4. ALWAYS practice good Infection Prevention and Control and set an example and encourage staff to check on each other and you
   1. Handwashing
   2. PPE and proper DON and DOFF
   3. Physical distancing
5. Be in contact with facility leadership daily-you should be getting lots of calls
6. Know how to test and who to notify and how to manage PUI-refer to guidance for Treat in Place
7. Make sure facility has current responsible party contact info
   1. Communicate with responsible parties as much as you can for updates/change in condition
   2. Review ACP with COVID specific discussions about desire for CPR, ventilator support, hospital transfer, comfort care. Explain treat in place-not everyone with COVID need to be hospitalized and be clear about prognosis
8. Most Importantly BE THE LEADER THAT YOU ARE and

STAY CALM AND CARRY ON!