

# PHYSICIAN GUIDE TO REOPENING

*With the best information available as of 5/1/20*

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## “Pre COVID-19” and “Post COVID-19” are Different Worlds

Like it or not, a global pandemic is a crash course in SWOT (strength, weakness, opportunity & threat) analysis: It quickly becomes apparent where you have challenges, and where you are strong. The start to 2020 has been a challenge although we may have experienced the crisis in a unique way. That experience will frame how we make decisions and respond to everyday ideas through the coming years.

This Guide to Reopening is a toolbox intended to give you a starting framework you can apply and customize to your specific situation. It should provoke thought while highlighting ideas and opportunities you may not have considered.

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***Throughout this guide you will see reminders to check with your local and state authorities on all matters before proceeding. States determine their own rules based on their unique situation about how to navigate through the COVID-19 crisis. They are the ultimate authority on the rules for your location.***

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## Start with the big picture

### Don't rush, don't panic, but do plan

Big decisions are best made when you have as much information as possible. Decisions made too quickly tend to be either costly or outright wrong. But there's also a difference between procrastination and taking time.

### Look through someone else's eyes

Your patients' lives have changed too. Put yourself in their shoes for a few minutes – if you can, do this with another person or your staff to get different viewpoints – and think about how they may have different needs for services you can provide, or how their expectations and experiences in your office may need to change to meet their needs.

### Help them look forward

We've learned more about personal hygiene and protective gear in the last three months than most of us would have expected to learn in our entire lives. As you start inviting patients back into the office, demonstrate your commitment to keeping them – and you – safe with signage that instructs and reassures, and actions that support that knowledge. You can even start showing this before they reach the office in the way you manage scheduling calls, and social media.

### Face your numbers

Revisit your historical financials to get a feel for where you would have expected to be now. Take a deep look at your monthly expenses and see if there are things you can drop, reduce, or put on hold. Be smart about the cuts you make; now is not the time to stop marketing or cut your whole staff. You still need to communicate with your patients and find new ones, and you still need to provide an exceptional patient experience. People are your business and staff are people

Regardless of what you do, people remember what you do, for good or bad, so try to be kind and thoughtful as you communicate your plan. Loyal employees are a key part of the team and their role in the overall patient experience needs to be thought through. If you find you must permanently let staff members go, be kind. Do your best to retain those who bring the best experience to your patients. Think about whether you can bring them back now on a reduced schedule, if necessary, and offer incentives or loyalty compensation once things are on solid ground again.

### Leadership in a time of stress

It's important to inspire your team by planning and sharing an optimistic view of a future they are invested in and calling on them to be part of the solution. Practical actions make your staff part of the solution, empowering them to play their part for their own and the greater good.

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## Get back to working on the business vs. in the business as soon as possible

At first you may be tempted to try to do everything yourself to save money. While this is a good time to look for fluff or unnecessary expenses, be careful. Prioritize actions that will make money – immediately, or in the near future – over actions that cost effort but do not yield financial benefit. For example, is it really worth your time to make your own appointments and is that best left to a staff member.

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## Phases of Reopening ([full government guidelines here](#))

In all phases, adhere to Department of Public Health and CDC guidelines for self-isolation when traveling, even across state borders

### Phase I - In the workplace

- Continuing to encourage telework
- Return staff to work in phases if possible
- Close access to common areas, and/or enforce strict social distancing
- Minimize non-essential travel
- Consider special accommodations for staff who are members of vulnerable populations

### In the community

- Schools and organized youth activities remain closed
- Visits to senior living facilities and hospitals should be prohibited
- Large venues (concerts, sit-down dining, places of worship) can reopen with strict physical distancing protocols
- Elective surgeries can resume
- Gyms can open if they adhere to strict physical distancing protocols
- Bars should remain closed

### Phase II - In the workplace

- Continuing to encourage telework
- Close access to common areas, and/or enforce strict social distancing
- Consider special accommodations for staff who are members of vulnerable populations

### In the community

- Schools and organized youth activities may reopen
- Visits to senior living facilities and hospitals should be prohibited
- Large venues (concerts, sit-down dining, places of worship) can reopen with strict physical distancing protocols
- Elective surgeries can resume
- Gyms can open if they adhere to strict physical distancing protocols
- Bars may reopen with reduced standing-room occupancy and physical distancing

### Phase III - In the workplace

- Resume unrestricted staffing of worksites

### In the community

- Visits to senior living facilities and hospitals can resume
- Large venues (concerts, sit-down dining, places of worship) can operate under limited physical distancing protocols
- Bars may operate with increased standing room occupancy

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## Revisit policies & procedures

### Insurance Concerns

**If you've made changes to your malpractice insurance policy, contact your broker to discuss necessary updates to ensure your policy and coverage reflect your new status.**

### Auditing & Monitoring practices

Now is the time to revisit your compliance policies and procedures, identify any gaps or areas to improve with a risk assessment, refresh your memory on outstanding items, and look for ways to improve going forward. Pull some charts and ask yourself, "Does this record look complete? Would I be proud to put this up in a court of law? How would I feel if an insurance company pulled this record and said, can you substantiate what you billed?" Do a self-audit and look for items that might raise concerns. If you don't know what concerns to look for, we can help. [Contact the risk management division](#) for more information.

### Document Everything

If you only remember one thing, it should be this. It all comes down to a good faith effort to be compliant with policies and procedures. If you set a process, use the process and document that you use the process. This is especially useful for telehealth. If you don't document, you can't show a good faith effort. Additionally, if you deviate from your process document the reasons why you did so.

### Updated Processes and Policies

Depending on CDC guidelines and your local community directives you may need to continue physical distancing. Think through your processes from all relevant angles:

- The first-time patient experience
- The returning patient experience
- The telehealth patient experience
- The staff experience
- The doctor experience

Will you be doing things differently? What needs to be updated for safety? Write out a workflow for each experience, noting any new or changed steps in the workflow. Make sure the change is clearly documented. This is important for training, and also should there ever be a malpractice claim or board action against you.

Think through how you will communicate the new processes to your staff. Ideally you will walk them through the new processes via a virtual training session before they return to the office, so they understand what will happen before they're on site. If staff responsibilities have been changed, document and ensure each team member has their updated work responsibilities clearly defined.

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Next, determine how you will communicate these processes to patients. This is additional training for your staff as they will likely be responsible for explaining the system to your patients. They might do this on the scheduling call or follow up with an email. Each office will need to make their own decisions on how best to communicate new information, based on the needs and expectations of their patients.

Once you have established a policy, you must follow it. For example, if your policy is that everyone will check their temperature each morning, you need to ensure you have sufficient probes. Create a daily log to track (and document) results. If you are going to have hand sanitizer at the desk, and in the rooms, and in other locations in the office, you need to be sure you have enough hand sanitizer to continue this practice.

## Have Your Cleaning, Emergency Response, and Communications Plans Available

Once you have created your COVID-19 cleaning and response training plans, document them and make them available to patients. Prepare a Crisis Management Plan which will include how you communicate with patients if you need to close the office.

### **RESOURCES:**

[Beware of OCR Scam Asking for Personal Health Information](#)

[Joint Commission Approves Homemade Face Masks](#)

[How to Avoid a Coronavirus “Phishing” Scam in Your Practice](#)

[Protect Your Practice from Coronavirus Info Security Risks](#)

[HIPAA Reminder - COVID-19](#)

[Are You Ready for an Emergency](#)

[Crisis Communication Plan](#)

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## Communication

### Staff

Hopefully you've stayed in communication with your staff during this time. For some of you, you've remained open but may have reduced staff hours or furloughed some. For others, you may have furloughed the entire team. And some may not have reduced staff at all.

If you've had a good working relationship in the past, you and your team have likely developed a mutual sense of loyalty. But that loyalty can be tested without open and regular communication.

Regardless, your team needs to hear from you. They need to understand how you see the future, what you expect the short- and long-term impacts to be, and how it will affect them and their position with your organization. They also need to understand new processes and procedures that need to be implemented and will need training on effectively managing those for themselves and patients.

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### Patients

Even if you've stayed open and busy during the pandemic, you should develop a plan to let your patients know how you've adjusted the office experience to their benefit and for their safety and yours.

If you've been closed, or only seeing emergent patients, you'll need to make people aware of your new office hours and are looking forward to seeing them. Reassure them of the steps you've taken in the office to keep them safe.

Whether you continued to see patients or did not, it would be smart to create a simple video explaining any new processes, giving them a tour of the office and treatment rooms to show how you will engage with them and how you will maintain a clean work environment, and noting anything that may have changed since they were last in. If you see a lot of seniors or at-risk individuals, consider setting aside a day or two just for them.

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## Vendors

As you're making plans to reopen, include vendors in your communication plan, including your insurance providers.

There's a possibility your supply chain vendors may not open on the same timeline you do, depending on their location and state's rules. Service or delivery people will need to be aware of your hours, if they're not the same as before.

If any of your vendors have put your account on hold during the crisis, let them know you're preparing to resume activity. A quick check in with your banker and accountant could be useful, as well.

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## Staffing

Particularly if you need to restructure your staff for the short-term or long-term, look at your employee policy manual and ensure job descriptions match expectations. Revisit employee tasks list and workflows and if necessary, refine them.

Before you reopen, hold virtual training sessions with staff to go over new policies and procedures, and talk about scheduling issues and patient workflows. At first these virtual trainings may need to be done weekly as all of these guidelines are so fluid.

Consider how you can think differently about staff time and capacity. Can a team member do a pre-consultation triage by phone? This would be comfortable for the new patient and save time for you. What staff/positions worked well from home? Can they be transitioned to full time work from home?

What can be done outside of the box? Be open to staff ideas and suggestions. What can your team do from home? Look at what information could be stored in your home office in case an emergency or crisis keeps you from your work location. It is expected we may have a resurgence of COVID-19 or the next novel virus. What is your contingency plan?

If you're going to reduce staff, determine what responsibilities can be shifted, and what new training will need to be provided to ensure each person has the knowledge and skills they need to provide a productive and safe patient experience.

Whatever decisions you make, be upfront and clear with your team. If you've worked together for any length of time, there is likely loyalty on both sides. The best way to maintain that relationship is to be empathetic and compassionate and communicate as clearly and openly as possible.

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## Health & Safety

Demonstrate that you have a plan to protect the health and welfare of your patients and employees.

### Before reopening

- Deep clean every surface. Spray the fabric with a cleaner that has been approved by the CDC or your local / state DPH.
- Consider purchasing high efficiency air filters to keep air circulating.
- Take photos or videos demonstrating what you're doing. Demonstrate that when regulatory restrictions are eased, you can accommodate physical distancing for both staff and patients.

### Checklist for yourself and your team

- Have a screening checklist that guides you through the scheduling call. Even though the immediate threat will be less, it is still important to understand your patient's potential exposure. Consider a multi-step screening process to ensure patients are appropriately triaged before entering your facility. The COVID-19 triage questions below should be asked 2-3 days before their scheduled appointment and again when they present for the appointment.
- Provide and require staff to use appropriate personal protective equipment. "Appropriate" may change as your state moves to different phases of reopening.
- Set guidelines to monitor employees' health for potential symptoms in compliance with applicable state and federal laws.
- If possible, redefine workstations that provide a 6' safe zone around employees.
- Require employees stay home if they are sick.
- Provide alcohol-based hand rubs containing at least 60% alcohol in the reception area, bathrooms, outside treatment room door and in treatment room.

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### Create a system

- Create and implement protocols for disinfecting the workplace on a regular and systematic basis.
- Create and post cleaning logs.
- Document your protocols.
- Set limitations on the number of people inside of your business at any given time.

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## Staff and Patient PPE

- Once you're approved to reopen, you may reevaluate some of the CDC's Personal Protection Equipment requirements, but should you? Decide what you will slowly phase out and what you might choose to continue into the future.
- Again, think about what experience will make your patients feel safe and comfortable. Reducing visitors in public areas could be a good start. Should you ask patients to wait in their cars until their scheduled appointment time? Limit people in the treatment room? Decide what you will slowly phase out and what you might choose to continue into the future.
- USE EPA-approved cleaners. While we appreciate the desire to use natural cleaner, they do not have what is needed to kill the virus. The cleaners must have chemicals approved by the EPA, which you can find on [this list](#).
- Sanitize ALL equipment. Make sure you clean ANY and all equipment after each patient. This includes the door handles, exam tables, light switches, chairs in the room, hooks on the door where they might place a coat or purse, etc.,
- Frequently disinfect phones, keyboards, copiers, fax machines, counter areas etc.
- Remove waiting room "extras." That includes mints, water/coffee stations, remote controls, reading material and magazines. For doctors that treat pediatrics, pull all toys, games, and books out of the waiting room.
- No touch is best. Provide no-touch waste receptacles in all areas of your office and exam rooms.
- Thoroughly disinfect door handles, light switches, counter tops, writing tools after each patient.
- Patients will be comforted seeing you practice safety in the room. Wash your hands, use sanitizer, don and doff new gloves in clear view.

## Scheduling

- Determine your practice policies around scheduling and communicate them to staff, patients and vendors who might come into your office space.
- Offset patient appointments
- Request that unless a family member is needed in the room, they must wait in the car
- If you open your waiting room, remove extra chairs to enforce physical distancing and continue to follow safe distancing guidelines

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## Take inventory of your equipment and supplies.

- Create a list of items you will need. Are you low on any key items? Vendors may be experiencing delays so order sooner rather than later and look for potential alternative suppliers for emergencies.

## Vendors and Service People

- Post a notice at entrances advising vendors and service people (post office, delivery services, equipment servicing, cleaning crew, and shredding companies) to be appropriately dressed when they come into the office. You may need to provide facemasks, booties and gloves. Depending on how items are delivered, consider wiping down packaging upon receipt.

### **RESOURCES:**

[Sanitation Guidelines and Best Practices for Risk Management in Your Practice](#)

[COVID-19 Resources in 30+ Languages](#)

[COVID-19 Practice Exposure - Communicating With Your Patients](#)

[How to Discuss Coronavirus with Patients](#)

[Helpful Information to Share with Patients](#)

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## Telehealth

The first step, and one of the most important pieces, is to refine your plan and make sure that anything you're implementing is HIPAA compliant **right now**. During the crisis there have been lots of exceptions made; some states have granted exceptions, and insurance companies have been reimbursing for limited services. You must monitor your state's rules around licensing; these exceptions may last a week, a month, or forever, but it's up to you to be aware of changes.

It is also important to go through your processes and be sure that everything you're doing via telehealth is legal and complies with your state and federal guidelines.

Once you're confident you've got your T's crossed and I's dotted, let patients know you can provide telehealth support. At the end of each in office visit, say something like, "If for some reason you can't come in to the office for your follow-up visit, I want to make sure you and I continue to connect via a telehealth encounter." The patient now knows that it's possible to transition to telehealth at some point in the future. And it's easy to make this conversation part of your regular conversation with patients during in-office visits.

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You will need to create an informed consent form for telehealth. Make it a fillable form with fields that are easily filled out, using a tool such as Word or Adobe PDF. Notify them that telehealth services may not be paid by their insurer. Let the patient know you're going to provide the service and will bill the insurance company if they have benefits, but you can't promise they'll pay, in which case the patient will be responsible for settling the charge.

One of the keys to successful telehealth encounters is making sure the patient knows everything that's going to happen. It is important to set clear expectations. For the first time, have a staff member call to be sure they know how to log on. Be sure they understand the importance of being on time. Talk about how long the visit is going to take and what to expect at the end of the visit.

You should expect the first telehealth visit with any patient to take a little longer. There's a learning curve for them to adapt to the new method of engaging, and you'll also need to learn how they respond and react in this new environment. Have staff keep in touch with the patient if you are running late.

### **RESOURCES:**

[Patient Consent Guidelines for Telehealth](#)

[Things to Consider Before Including Telehealth in Your Practice](#)

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## Resource Guide

### Websites:

[Mental Health Resources for Health Care Providers](#)

[CDC Cleaning and Disinfecting Your Facility](#)

[CDC Communication Resources](#)

[CDC How COVID-19 Spreads](#)

[World Health Organization: Q&A on Coronavirus \(COVID-19\)](#)

[John Hopkins University COVID-19 Dashboard](#)

[State Health Departments](#)

[State Licensing Boards](#)

[OSHA Enforcement Guidance for Recording Cases of Coronavirus](#)

[OSHA Health & Safety Topics COVID-19](#)