



Clinic operations to support recovery phase

Working safely during the Coronavirus



This is an interactive eBook - click the buttons to navigate through the information.

- Click the **arrow** below to **start**.
- Click **each tab** on the **Main Menu** page to review the information.
- Click the **NEXT or PREV** buttons to review additional information.
- Click the **MENU** button to return to the Main Menu.



Letter from Pam Oliver

As we respond to the novel coronavirus (COVID-19) pandemic, we are continuing to evaluate what's best for our communities, physicians, APPs and team members. I am constantly impressed at how everyone has responded to this crisis, quickly transitioning to virtual care even as we have suspended some surgeries, procedures and appointments. Your commitment to our patients is clear, and I'm grateful for all you have done to ensure remarkable care during this time.

Across the system, we monitor hospital utilization as a result of the virus, and we have not seen increased utilization in over two weeks. It is clear physical distancing and efforts to reduce spread have been effective. Instead, and consistent with national trends, we have seen a disturbing decline in patients seeking care for potentially emergent conditions, including heart attack and stroke.

It is critical that we partner with our patients in smart, safe ways to make sure they get the care they need. With the curve flattening and in close consultation with our clinical experts, **we are pleased to share we will resume select surgeries, appointments and procedures beginning May 4.** The timing and speed with which we increase surgeries and clinic appointments will be made based on local and regional COVID-19 activity, evaluated on a regular basis and may vary by market.

While virtual care options will continue and are encouraged to be used as appropriate, the announcement today ensures patients who may have delayed their care can resume their treatments and care, including many surgical procedures. Novant Health will prioritize rescheduling patients with delayed and postponed appointments and procedures. We will issue guidance to clinics about scheduling and rescheduling appointments.

As we prepare to increase the number of in-person appointments at our clinics starting May 4, we will be taking measures to promote physical distancing and ensure clinical safety, which may include lowering the number of patients in the clinic at once, managing workflows to reduce use of waiting rooms, and providing some care delivery within the confines of patients' vehicles. Visitor restrictions will remain in place at all of our facilities and clinics.

I want to thank you again for your response during these uncertain times. Please be assured that we are proceeding in an intentional manner, prioritizing the safety and well-being of our patients and teams. If you have questions, please reach out to your manager.

NHMG Clinic Operations Recovery Quick Guide

This NHMG Clinic Operations Recovery Quick Guide will provide general recommendations as to how you can prepare your clinic to return to full operations during the COVID-19 pandemic. You and your team will determine the best methods to incorporate these recommendations with the focus aimed at patient and team member safety.

Key elements of this quick guide:

1. Team members are well and safe when coming to work.
2. Clinics prepare in advance to return to full operations.
3. Patients feel safe when returning to clinics by visibly seeing our commitment through cleaning, masking, and directional sign support.
4. Patients are pre-screened to reduce exposure to COVID-19 and direct care to the appropriate level including our Respiratory Assessment Centers (RACs).
5. Schedules are blocked to assure ongoing video visits coincide with our standard clinic appointments.
6. Clinic workflows are adjusted to keep everyone safe and well.

Main Menu



Team Member Safety



Clinic Preparation



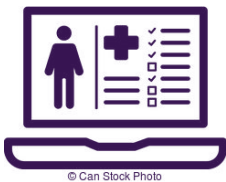
Patient Safety – Clinic
Cleaning



Use of PPE



Schedules



Patient Screening



Clinic Workflows

PREV

NEXT



Team member safety

1

Team member pre-shift screening process

In order that you can come to work without fear of being exposed to the COVID-19 virus, a pre-shift screening has been implemented. All team members working within our North Carolina and South Carolina clinics, including contract team members, will need to complete the pre-shift COVID-19 symptom screening before reporting to work.

Each day, you will complete the pre-shift questionnaire on your smartphone and register your temperature within 2 hours of your shift start time. You will display your results when entering the designated team member entrance at your clinic. Visit this site to complete your pre-shift questionnaire:

www.NovantHealth.org/preshiftscreening

If you do have access to a thermometer or smartphone, paper screening documents and thermometers will be available. Random temperature checks will be performed as an additional level of safety. Please allow additional time to get to work and complete the screening process within the 2 hour of your shift.

Other resources:

- Paper screening tool: <https://nh.team/nhmgscreeningpapertool>.
- Clinic temperature check template: <https://nh.team/nhmgscreeningtemplate>.

Random temperature checks

The Clinic Administrator should perform and record random temperature screenings on team members and providers throughout the day. Team members or providers who exhibit a temperature of 100.1 or greater while working in a clinic should contact EOH and will be sent home.



Team member safety

1

Team member pre-shift screening process; cont.

Pre-shift

Team members with smartphone and thermometer access	Complete online team member screening, including temperature check and health questionnaire
Team members with smartphone access, but no thermometer	Complete the questionnaire section of the online team member screening tool only
Team members with no smartphone access	N/A – full screening to take place upon arrival at clinic
Vendors, contractors, and others working within NHMG clinics	Vendors, contractors, or other non-NH persons working within a clinic must complete the online screening tool. Lab Corp will complete the paper form prior to arrival at the clinic

Upon arrival

Team members with smartphone and thermometer access	Present green check* result to designated team member at designated team member entrance
Team members with smartphone access, but no thermometer	Present yellow check* result to and have temperature checked by designated team member; if temperature is lower than 100.1 the team member is cleared for work
Team members with no smartphone access	Team member to complete paper form and have temperature checked by designated team member at designated team member entrance
Vendors, contractors, and others working within NHMG clinics	Present green check* result to designated team member upon arrival at clinic; visitors at multiple sites only need to complete one screening per day



Team member safety

1

Team member pre-shift screening process; cont.

Team members may review the pre-shift personal verification screening process by accessing the link below. Team members will use their NH email address to log in and vendors without an NH email address will need to use a personal email address. LabCorp employees will complete the paper process prior to arriving at the clinics.

<https://vimeo.com/408148131>

Video demo on the screening process



What actions should I take based on the checks?

If you receive a green check, then you should report to work.

Open the app and display the green check on your smart phone as you enter through the designated entry point. The green check should be valid and **completed within two hours of your shift start time**. If more than two hours has passed, you will be required to complete the process again, unless you have already completed it once for the day and are returning to the clinic or another NH location.

If you receive a yellow check, then you should report to work.

If a team member successfully answered all items but a temperature cannot be performed prior to their shift, the team member will get a yellow check and a temperature will be performed at the designated facility entry point. You will need to wear a mask during your full shift. You may receive a call from EOH regarding your current symptoms

If you receive a red check, then you should NOT report to work.

Your questionnaire results will be **routed to EOH through the app** for follow up. You should follow up with EOH and **notify your Clinic Administrator** that you are unable to report for the shift due to receiving a red check. Complete the following form and EOH will follow up with you and provide guidance on next steps: <https://www.novanthhealth.org/intakeformcovid19>



Team member safety

2

Universal masking

All team members working in a clinic should wear a mask.

Team members who work within 6 feet or with patients for 10 or more minutes are considered **patient-facing** and should wear a surgical or procedural mask issued at the start of each shift.

All other team members should wear a cotton mask per the **nonpatient-facing team member** guidelines.

For more information, see Use of PPE.

Type of mask/ respirator	Nonpatient-facing team members	Patient-facing team members
Clean cloth / homemade mask	Yes	Yes (When not providing care for patients, such as in break rooms or when entering/exiting work, may not substitute for procedural or surgical mask)
Procedural or surgical mask with eye protection	No	Yes (Team Members who expect to be within 6 feet of patients for 10 or more consecutive minutes. Follow guidance on extended use)

COVID-19 Masking reference

<http://iconnect.novanthhealth.org/News/Documents/ COVID19/Masking%204.20.2020.pdf>



Clinic preparation

1

To ensure our patients are protected and feel safe when they visit our medical group clinics, clinics must take steps to prepare in advance.

Prepare for the visit in advance

To prepare patients for their visit, consider calling them in advance of their scheduled appointment or share information about what to expect at the time their visit is scheduled. Let them know they will be screened before entering and ask them to bring a cotton mask to wear while they are in the clinic. If they do not have a mask, be prepared to provide a mask for them. Encourage patients to complete visit questionnaires via MyChart prior to the appointment.

Stagger patient scheduling to avoid traffic in waiting rooms

When scheduling patient appointments, stagger them to prevent several patients arriving at the same time and to ensure you have exam rooms available for everyone. See the section on “Schedules”.

Plan to complete registration workflows prior to arrival

Remind patients they have the option to wait in their car until an exam room is ready for them. The check-in process can be completed over the phone to minimize the number of patients in the lobby and close contact.

Streamline workflows to minimize bottlenecks and wait times

The lobby or waiting area may be needed for patients using public transportation, arrive by long term care transportation or who do not have a cell phone. Review resources on clinic cleanliness and patient waiting for best practices on keeping the waiting area clean and helping patients remain at a safe distance.

Perform all eligible services in the exam room

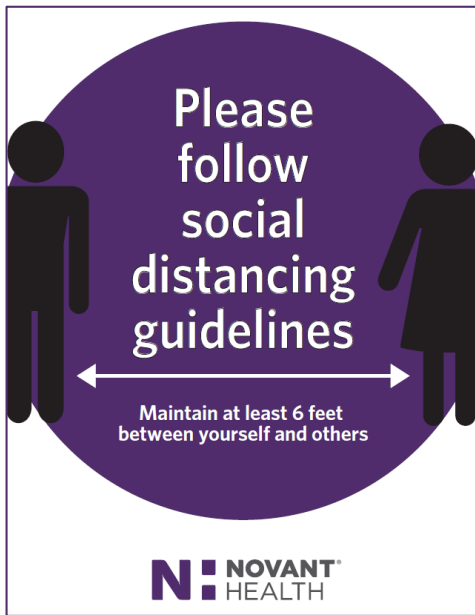
If a patient needs additional services during their visit, ask team members to travel to the patient’s exam room rather than asking the patient to leave the room. For example, clinics may implement a floating lab to enable draws in the exam room. An x-ray would require the patient to leave the room, but most other services are mobile.



Clinic preparation

2

Be prepared with clinic signage



Poster size: 11" x 17"

Laminated flyer/seat blocker size: 8.5" x 11"



Floor stickers, option 1 - noncarpeted flooring; option 2 - carpet flooring



Horizontal & vertical options (8.5" x 11"), for use with masking stations



Laminated horizontal 8.5" x 11" sign for areas where water fountains are turned off



Clinic preparation

3 Patient communications

NovantHealth@novanthealthcommunications.org Thu, Feb 13, 2:43 PM ☆ ↶ ⋮
to me ▾

Hello Lavella Hall,

Your appointment has been scheduled at Novant Health Uptown Primary Care

1. Go to <https://www.novantmychart.org/MyChart/> and log in as usual. (If you have forgotten your MyChart Username, click this link <https://mynovant.org/mychart/recoverlogin.asp> and if you have forgotten your Password, click this link <https://mynovant.org/mychart/passwordreset.asp>)

2. Click on Appointments on left menu and then click on "Upcoming Appts" for more details.

If you would like to cancel this appointment, please call the department directly or cancel through MyChart account. You cannot request a cancellation via return e-mail message.

At your appointment, please be prepared to share your photo ID to help us prevent identity theft. Please speak with our staff if you have questions.

Timely communication is an important part of your health care. Please do not mark this message as SPAM and ensure you have adjusted your SPAM filter to allow messages from noreply_mychart@novanthealth.org.

Your health is always our top priority. We're taking extra steps to deliver the safest care possible, including wearing and providing masks, increased disinfection and cleaning processes, physical distancing protocols and more. [Learn more.](#)

Healthy regards,

Novant Health
Mychart customer Service Line: 1-844-266-8266

***This is an automated message. Please do not reply.

MyChart | **NOVANT HEALTH** Ver en Español

Thanks for using MyChart. You have been logged out.

MyChart Username
Password
SIGN IN

[Forgot Username?](#) [Forgot Password?](#)
New User?
SIGN UP NOW

PAY BILL AS GUEST
FIND A DOCTOR

Coronavirus updates
Learn how Novant Health is preparing for coronavirus (COVID-19).
VIEW LATEST UPDATES

Get answers to your medical questions from the comfort of your own home

No more waiting for a phone call or letter – view your results and your doctor's comments within days


Request prescription refills
Send a refill request for any of your refillable medications


Manage your appointments
Schedule your next appointment, or view details of your past and upcoming appointments





Clinic preparation


3 Patient communications





**Lavella**


Health

Visits

Messaging

Billing

Resources

Profile

Lavella Hall
Log Out

Ver en Español

Welcome!

Your health is always our top priority. We're taking extra steps to deliver the safest care possible, including screening all patients and team members, wearing appropriate PPE and the using highest level of disinfectant processes throughout our facilities and more. [Learn more.](#)

To Do


You have no upcoming tasks.


< April 2020 >						
S	M	T	W	T	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	


What's New in MyChart


Out of concern for the health and well-being of our patients and to help control the spread of respiratory illnesses such as the coronavirus, Novant Health is restricting visitation for patients in our hospitals except for laboring mothers and patients who are


Quick Links


Begin an E-Visit


On-Demand Video Visit


View test results


Ask a question

Schedule an appointment

Refill medications

Review health summary

View billing summary

Share your record



Clinic preparation

4

Recommendations for pre-opening for lobby and patient restrooms

- All furniture should be wipeable with no tears.
- As possible, space **furniture out** with a minimum of 6 feet in between - denote placement so visible to patients.
- Provide clear seating **separation for Sick/Well areas** (if applicable).
- Remove all magazines, pamphlets, toys, or activities.
- Contact maintenance to **shut off all water fountains**. Place branded signage to alert patients to request bottled water.
- Have bottled water for patients, determine quick access location for team member to provide for patients, if needed, and ensure team members know the location.
- Post approved **social distancing signs**, place distancing marks on floor.
- Remind team members **no food or uncovered drinks in work areas**.
- Consider removing clutter from work areas - photos, decorations, stacks of paper/forms, etc.
- Ensure dispensers for hand soap and hand sanitizer are available and working.

Consider using:

Saran Wrap coverings
Q-tips with key pads
Key board covers



Clinic preparation

5

Recommendations for preparing clinical areas: Exam room, Procedure room, and imaging

- **Consider placing all nonessential items on countertops inside of drawers or cabinets** (canisters, swabs, bandages, etc.).
- Place most common used items at front for ease of access.
- Only place items such as otoscopes and ear/nasal speculums in holders on countertops.
- Ensure appropriate cleaning supplies and PPE available in each room.
- Ensure soap and hand sanitizer dispensers are available and in working condition.
- Blood pressure cuffs, and any other items with soft surfaces, should be placed in drawers and cleaned after each patient.
- Exam Curtains: Assess clinical need. If not needed, remove. If needed to maintain privacy, spray with Sani-24 spray and allow to air-dry between each patient and at end of day.
- Consider using alcohol to clean the business end of the stethoscope in front of the patient before the exam.



Clinic preparation

6

Recommendations for preparing clinical areas: Nursing station

- Remove clutter from workspaces and countertops. Remove personal items from countertops.
- Ensure appropriate PPE is stocked and readily available for team members.
- Remind team members no food or open beverages in work area.

7

Recommendations for preparing clinical areas: Lab and phlebotomy spaces

- All furniture must be wipeable with no tears
- All furniture is spaced out with a minimum of 6 feet in between - denote placement on floor so visible to patients.
- Provide clear seating separation for Sick/Well areas (if applicable)
- Place all nonessential items on countertops inside of drawers or cabinets (remove baskets of draw supplies from patient space.)
- Ensure appropriate PPE and cleaning supplies are available.
- Remind team members no food or open beverages in work area.



Clinic preparation

8

Recommendations for preparing common areas: Breakroom

- Consider minimizing number of tables and chairs to minimize large group socialization.
- Ensure all tables and chairs are cleanable and without tears.
- Consider supplying paper products (cups, plates) to eliminate need to wash dishes.
- Clean out breakroom refrigerator and sanitize regularly.
- Ensure appropriate cleaning supplies and PPE available to wipe down appliances, tables, chairs, door and cabinet handles, commercial nourishment machines, etc.
- Remind all team members they are responsible for cleaning as they leave space.

9

Recommendations preparing common areas: Team member restrooms

- Stock hand towels, tissue, hand soap and hand sanitizer and ensure dispensers are in working condition.
- No extra paper towels/toilet paper sitting outside of the holders
- Ensure appropriate cleaning supplies and appropriate PPE readily available.
- Remind all team members they are responsible for cleaning as they leave space.

Click here to learn more
about [Green is Clean](#)



Clinic preparation

10

Recommendation to use Green is Clean

What state are you in?

Medical Devices / Equipment are always in one of three states:
In Use, Dirty or Clean (stored, ready for use).

If it's Green, It's Clean

Dirty Equipment

- Is cleaned prior to use on next patient or placed in designated dirty storage areas/utility rooms as soon as possible
- Any items not identified as clean/ready to use will be cleaned before use

Cleaning/Disinfection Process

- Wipe/wet the equipment with the appropriate product
- Monitor to ensure surface stays wet for the correct time
- Rewet/wipe the surface if it dries before the time is complete
- The NH Disinfectant Grid is available on NH Intranet with instructions for additional disinfectant products approved for use within NH



4 minutes

3 minutes



Clean/Ready To Use Equipment

- Is identified by a green plastic ribbon (Ariba # 557209) found in clean utility rooms
- The green plastic ribbon is attached in a manner that requires the ribbon to be removed and discarded before use, see examples below
- For equipment with multiple pieces, tie the pieces together with the ribbon to ensure it is removed prior to use. *If this is impractical, attach green plastic ribbon to each piece.*
- Equipment is then stored in clean utility or storage areas
- Some equipment may be covered with a bag in addition to the green ribbon



Important Points:

- This process includes any equipment that is used on a patient and will then be used on another patient. Equipment that stays in the patient room when the room is cleaned will be considered clean unless removed and stored in another location.
- Items not designated as clean/ready for use are cleaned before use.
- Clean items are not to be stored in dirty / soiled utility rooms. All items in those areas are considered dirty and not ready for use without being cleaned.



Patient safety -Clinic cleaning

1

Clinic cleaning and safe processes

Clinic cleanliness is one of the most important things we can do to help our patients feel welcome and safe when they arrive at your clinic.

Cleaning Checklist (optional):

<http://iconnect.novanthhealth.org/NMGPractices/ClinicMgrResources/Documents/Updated%20Final%20NHMG%20Covid%2019%20Cleaning%20Checklist%205-1-20.xlsx>





Patient safety -Clinic cleaning

2

Clinic cleaning and safe processes

Be aware of the disinfection to be used in your clinic areas. Use the below grid to assist in your cleaning plan. Remember to wear gloves when using this agents when indicated.



DISINFECTION & FOOD SERVICE WIPES



Lawson# 99403



Disinfects in
3
Three Minutes

SANI-CLOTH AF3 (alcohol free)

USES: Hard surfaces - IV poles, BP cuffs, glucometers, wheel chairs, commodes.
3 minute contact time.
2 year expiration (check date).
WEAR GLOVES



Lawson# 99404



Disinfects in
4
Four Minutes

SANI-CLOTH BLEACH

USES: For all isolations, including *C.diff*, *Norovirus*; specific equipment like CareFusion Alaris pumps.
4 minute contact time.
11 month expiration (check date).
WEAR GLOVES



Lawson# 592232



Disinfects in
1 min

SANI-WIPE

USES: Food service items -dining tables, coffee pots, refrigerators, microwaves, office desks/mouse/keyboard, toys.
1 minute contact time.
2 year expiration (check date).
GLOVES NOT NEEDED



Lawson# 485974



NEW

EASY SCREEN

USES: Clean smudges and dirt from touchscreens, smart phones, tablets, electronic medical record equipment, Accuvein scanners and other medical equipment with touchscreen computer monitors.
GLOVES NOT NEEDED



Lawson# 485752

SANI-HANDS

USES: Patient Hand Hygiene: Before & After; Bathroom, Eating & Drinking, Contact with others and Coughing / Sneezing.

DO NOT FLUSH WIPES DOWN TOILET!



Patient safety -Clinic cleaning

3

Clinic cleaning and safe processes

Recommendation for managing patient paperwork

1. Defer the use of any paperwork requiring a patient signature if possible.
2. Team member and patient use hand sanitizer when handling patient paperwork.
3. Use topaz signature pads or iPads if available.

Knowledge Check- Did you know?

Under HIPAA, the Notice of Privacy Practices only has to be provided and acknowledged at the initial visit. An acknowledgement is not required in connection with each visit.

The Consent to Treat form is valid for 3 years, and does not have to be signed at each visit.

Included in the optional Cleaning Checklist:

Pre-opening checklist for lobby:

details on am procedure for assigned team member to ensure lobby is in proper condition to receive patients.

Lobby cleaning:

details for ongoing cleaning of lobby bathroom, lobby, and check in and check out areas.

End of day checklist for lobby:

details on pm procedure for assigned team member to ensure lobby is in proper condition for next day operations.



Patient safety -Clinic cleaning

4

Clinic cleaning and safe processes: Lobby cleaning

Cleaning in the lobby should take place at a **minimum of every 30 minutes, as possible.**

Tasks to consider

- Wipe down door handles
- Wipe down all chairs: handles and arm rest., and wheelchairs if used
- Wipe down any tables/side tables (if applicable)
- Straighten furniture and ensure it is spaced out according to social distancing guidelines.
- Replenish sanitation kiosk/supplies (sanitizer, tissues, masks)
- Remove trash as needed out of trash cans or floors
- Wipe down wheelchair after each use.
- *Round on patients, check for comfort and inform of any delay status and update delay board if present*

Grey/orange top wipes are to be used in lobby.

Grey/orange top wipes and Sani-24 are to be used in all other areas

** Ensure appropriate PPE used for specific disinfectant product.

Use **Green Is Clean** ribbons as visual evidence that item has been cleaned/disinfected.



Patient safety -Clinic cleaning

5

Recommendation for clinic cleaning: Lobby restrooms

Lobby Restrooms

- No extra paper towels/toilet paper sitting outside of the holders.
- Restock hand towels, tissue, and hand soap as needed.
- Empty trash and wipe down trash can.

6

Recommendation for clinic cleaning: Team member space

Check-In /Check-Out / Team Member Space

- Wipe down countertops.
- Wipe down all phones and desk surfaces.
- Wipe down iPads after each use, if in use.
- Wipe down all pens, if needed, after each use. Recommend to limit signatures.
- If paper forms are used, see Management of Paper for additional direction.



Patient safety -Clinic cleaning

7

Recommendations for cleaning common areas: Breakroom /team restroom

Breakroom

- Ensure all tables and chairs are placed back in appropriate social distancing space.
- Wipe refrigerator handles.
- Place all trash in trash receptacle.
- Wipe down all countertops, appliances, cabinet and drawer handles.

Team Member Restrooms

- No extra paper towels/toilet paper sitting outside of the holders.
- Restock hand towels, tissue, and hand soap as needed.
- Empty trash as needed.

8

Electronic devices shared between patients can be a source of transmission of organisms that can lead to infection. See the 4P for cleaning recommendations and antimicrobial sleeves for the iPads and tablets

[4P Electronic Devices with Ariba.pdf](#)

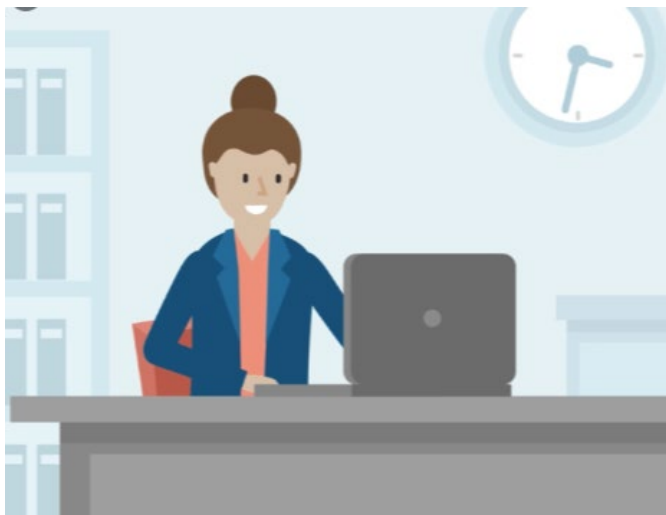




Use of PPE

1

**I am working the front desk or check-out desk.
What PPE should I wear?**



Clerical team members working at the front desk or at the check-out desk will wear a procedural or surgical mask.

You will receive a mask at the beginning of your shift. Keep the mask on while in contact with patients, visitors and team members.

If your mask should become soiled, damaged, or too moist, you should request another mask. Discard the mask at the end of your shift.

Gloves are not required for the work at the front desk or check-out desk. Advance planning and efforts should be taken to reduce touching patient forms, insurance cards, or payments. However, if you need to handle these items, carry out the task and clean your hands immediately with hand sanitizer.

If you feel that gloves are needed, please discuss with your clinic administrator. Gloves are not a substitute for hand hygiene. Make sure you have hand sanitizer readily available at your work area.



Use of PPE

2

I am working in the patient exam room. What PPE should I wear?



All clinical team members will wear a procedural or surgical mask. You may wear the mask across patients and discard when the mask is soiled, damaged, or at the end of the day.

Gloves may be indicated when coming in contact with infectious materials, contaminated skin or other potential contaminates.

If the patient is suspect for a person under investigation (PUI) don with gloves, gowns, and goggles or face shield.

**I am the provider in the clinic.
What PPE should I wear?**

As a provider, you will wear a procedural or surgical mask. You may wear the mask across patients and discard when the mask is soiled, damaged, or at the end of the day. A provider can remove the mask while involved in a virtual visit (keeping 6 ft apart) and place it back on if not contaminated.

Wear gloves, according to Standard Precautions, when it can be reasonably anticipated that contact with blood or other potentially infectious materials, mucous membranes, non-intact skin, potentially contaminated skin or contaminated equipment could occur. (CDC)

If patient is suspect for a person under investigation (PUI) don with gloves, gowns, and goggles or face shield.



MENU

PREV

NEXT



Use of PPE

3

Wear a mask



The infographic above helps illustrate how properly wearing a mask significantly reduces likelihood of transmission of COVID-19.

Is it mandatory for me to wear a mask at work?

- **Yes.** All team members in North Carolina are now required to wear a mask at work — this is part of our new normal in all Novant Health facilities to keep us all safe.
- The Centers for Disease Control and Prevention recommend that everyone who enters a healthcare facility wear a mask (cloth or procedural).

How do I get a mask?

We encourage nonpatient-facing team members to bring in and wear a clean cloth mask from home. If you do not have one, a mask will be provided to you.

- **If you work at an ambulatory clinic**, masks for nonpatient-facing team members should be distributed during the pre-shift screening process.
- **If you work in a corporate or administrative area**, we encourage you to work remotely, if possible, to conserve hand sanitizer and personal protective equipment (PPE) for team members on the front line. **If you must come into the office, please bring in a mask from home until your cloth Novant Health-branded mask is delivered to your home address in mid-May.**



Use of PPE

4

Patient-facing masking

Given the widespread community transmission of COVID-19, we have taken additional steps to protect our team members, providers and patients. All team members who work within 6 feet of patients for 10 or more minutes should wear a surgical or procedural mask.

Why are we moving to patient-facing masking?

This patient-facing masking approach will protect our team members and patients should they come into contact with anyone who may be asymptomatic or whose symptoms have not yet been identified as the result of a COVID-19 infection.

How will patient-facing masking work?

Patient-facing team members should wear a surgical/procedural mask. One surgical or procedural mask will be issued at the start of each shift. The issued mask is to remain properly in place on your face and only be changed when the mask becomes visibly soiled or damaged.

Team members are asked to be mindful of conservation needs and strictly limit activities which would require removal of the mask.

Be sure to wash your hands frequently. Masks should be maintained in place on the face for prolonged periods — not hanging under the nose or mouth.



Once the procedural or surgical mask has been removed it should not be reused. A cloth mask should only be worn outside of patient care settings, such as in the break room.

Who does patient-facing masking apply to?

All team members who are working on site in acute or ambulatory settings with patient contact will be asked to wear a mask they will be issued for the duration of their shift. If you work within 6 feet of patients for 10 or more minutes, then you should wear a mask.



Use of PPE

5

Nonpatient-facing team member masking

- **Nonpatient-facing team members** can wear nonmedical grade masks, such as reusable cloth masks. You may be given surgical or procedural masks until enough reusable cloth masks are available from our suppliers. **If you work within 6 feet of another person for greater than 10 minutes, each person needs to wear a mask — even while working. If you can maintain 6 feet of separation while working, the masks can be removed. Also wear your mask when walking around the building — you don't know who you may interact with and it demonstrates we are all in this together.**

How do I prevent self-contamination while wearing a mask?

As a reminder, everyone who receives a mask should follow best practices to prevent self-contamination:

- Continue to wash your hands frequently and follow social distancing rules.
- Always keep the mask over your nose and mouth — it should never dangle around your neck.
- Remember, the mask's primary purpose is to keep any germs you may have from spreading to others as you talk, cough or sneeze. It also may keep you from touching your face. By preventing you from touching your nose and mouth, the chance of transmitting germs to yourself decreases significantly.
- If your mask is a reusable cloth mask, wash it in the laundry on hot after each shift so it's clean and ready to wear the next day.

Learn more: <http://nh.team/universalmasking>



Use of PPE

6 Do I need an N95 mask?

Only healthcare professionals who will be performing aerosolizing generating procedures should wear an N95 mask. Prior to wearing a N95, the individual must be fit tested to ensure a proper fit. You may contact the NHMG Education Dept for assistance if you feel you will need to be fit tested.

If your clinic will be collecting COVID-19 specimens, you will need to wear a N95 mask. Clinics are encouraged to screen patients for symptoms of COVID-19 prior to the appointment and direct patients to locations where testing can be accomplished.

If you have questions about the type of mask you should be wearing, please reach out to your clinic administrator.

This list includes the identified Aerosolizing Generating Procedures (AGP)

http://iconnect.novanthealth.org/News/Documents/_COVID19/Aerosolizing%20Procedures%20and%20Sign_updated_03302020.pdf

7 Wearing gloves for your protection.

- Use standard precautions when considering the use of gloves.
- When you need gloves, such as when a patient presents with symptoms of COVID-19, don your gloves when you enter the exam room in front of the patient. After completing the task, remove your gloves and wash your hands or use hand sanitizers.
- Never wear your gloves from patient to patient. Always discard your gloves in the patient room prior to leaving the room. Again remember to wash your hands for 20 seconds or gel with hand sanitizers. Let the patient see you washing your hands. It builds trust and confidence in their care team.





Use of PPE

4 When should I wear a gown?

Use standard precautions when considering when to apply a gown.

A gown is indicated when you suspect the patient may be a PUI. An isolation gown should be donned as soon as symptoms are identified.

When doffing the gown, it should be removed in the room and not worn for extended use.

Gowns				
Isolation Gown (Universal Blue)	Cardinal Health	V5210PG	484554	
Isolation Gown (Universal Yellow)	Cardinal Health	484564 484555 484562	7211PG VAT4437-XL V1100PG	

The goal for PPE is to avoid contamination between two individuals. Use of the appropriate PPE is key in remaining safe from exposure to COVID-19. It is our role to conserve PPE and to consider new ways we can do our work while extending our PPE supply.

Universal masking and hand washing are our greatest weapons for fighting the COVID-19 pandemic.



Recovery Schedules

1

Overview of recommendations for recovery schedules

The recommendations for template management during the recovery period use a combination of blocks and open/available time with session limits. These template guidelines support turning back on certain scheduling functions in MyChart.

Communication

- All day [Zoom](#) help meeting will be open to help troubleshoot individual circumstances on Friday 5/1
- Email referralandschedulingoptimization@novanthealth.org with specific questions anytime

Template options

- Sick

Use Same Day blocks for time carved out for sick visits

- Well

Use open/available time with session limits for well time

- Video Visit

Use Video Visit blocks for sessions dedicated to virtual visits

For CMHW:

- Effective 5/1 @ 5PM begin blocking Video Visits
- Patient Access team will block your generic video visit schedules for you.

Appointment Spacing

- Mark slots as Unavailable intermittently to prevent back to back appointments
- Mark slots with Video Visit blocks intermittently so providers can do video visits in between in-person appointments

MyChart & Open Scheduling-- TBD

- Phased approach to turning these functions back on
- In MyChart, verbiage to be updated for New Problem and Problem Follow-up tiles to: "This appointment is in person so if you have any upper respiratory symptoms, like cough, runny nose, shortness of breath or fever call your provider before scheduling or select the Video Visit option"
- Allow video visit scheduling through the Provider Finder with the addition of screening questions



Recovery Schedules

2

Overview of recommendations for recovery schedules

Sick Visits

	Time	Pri?	MRN	Name	Visit Type	Len	Appt Notes
4	8:00 a			SAME DAY			
4	8:15 a			Unavailable - Other			
4	8:30 a			SAME DAY			
4	8:45 a			Unavailable - Other			
4	9:00 a			SAME DAY			
4	9:15 a			Unavailable - Other			
4	9:30 a			SAME DAY			
4	9:45 a			Unavailable - Other			
4	10:00 a			SAME DAY			
4	10:15 a			Unavailable - Other			
4	10:30 a			SAME DAY			
4	10:45 a			Unavailable - Other			
4	11:00 a			SAME DAY			
4	11:15 a			Unavailable - Other			
4	11:30 a			SAME DAY			
4	11:45 a			Unavailable - Other			
4	12:00 p						

	Time	Pri?	MRN	Name	Visit Type	Len	Appt Notes
1	8:00 a			SAME DAY			
1	8:15 a			Video Visit			
1	8:30 a			SAME DAY			
1	8:45 a			Video Visit			
1	9:00 a			SAME DAY			
1	9:15 a			Video Visit			
1	9:30 a			SAME DAY			
1	9:45 a			Video Visit			
1	10:00 a			SAME DAY			
1	10:15 a			Video Visit			
1	10:30 a			SAME DAY			
1	10:45 a			Video Visit			
1	11:00 a			SAME DAY			
1	11:15 a			Video Visit			
1	11:30 a			SAME DAY			
1	11:45 a			Video Visit			
1	12:00 p		END				

Well Visits

	Time	Pri?	MRN	Name	Visit Type	Len	Appt Notes
	12:00 p		END				
1	1:00 p						
1	1:15 p			Unavailable - Other			
1	1:30 p						
1	1:45 p			Unavailable - Other			
1	2:00 p						
1	2:15 p			Unavailable - Other			
1	2:30 p						
1	2:45 p			Unavailable - Other			
1	3:00 p						
1	3:15 p			Unavailable - Other			
1	3:30 p						
1	3:45 p			Unavailable - Other			
1	4:00 p						
1	4:15 p			Unavailable - Other			
1	4:30 p						
1	4:45 p			Unavailable - Other			
1	5:00 p		END				

	Time	Pri?	MRN	Name	Visit Type	Len	Appt Notes
	12:00 p		END				
1	1:00 p						
1	1:15 p						
1	1:30 p			Video Visit			
1	1:45 p						
1	2:00 p			Video Visit			
1	2:15 p						
1	2:30 p			Video Visit			
1	2:45 p						
1	3:00 p			Video Visit			
1	3:15 p						
1	3:30 p			Video Visit			
1	3:45 p						
1	4:00 p			Video Visit			
1	4:15 p						
1	4:30 p			Video Visit			
1	4:45 p						
1	5:00 p		END				

Uses session limits to control which visits types are allowed during this time.



Recovery Schedules

2

Pediatric schedules

Half day sick & half day well

For the sick time:

- Block the whole session with Same Day
- Go back and mark every other slot as Unavailable* to limit to two patients per hour
- If the clinic wants to mix Same Day and Video Visits** block those two visit types (VT) together or rotate.
- If you block simultaneously both VTs must be the same length

For the well time:

- Leave Well time open - no blocks
- Make sure your slot lengths match your shortest visit type length
- Block time as Unavailable* intermittently to control the number of visits per hour. The goal is to see 2 patients per provider per hour. Here are some examples:
 - Block 15 minutes (or 20 if you use 20/40) for every 30 minute increment on the schedule
 - If you use all 15 or 20 minute visits, block every other slot
- During well time clinics can see ADHD, Adolescent Well Visit, Med Check, Newborn Well Visit, New Patient, Office Visit, Procedure (Peds specialty only), Well Child Check
- Adjust session limits for ADHD, Adolescent Well Visit, Med Check, Newborn Well Visit, New Patient, Well Child Check according to your provider's preference. Examples:
 - Leave session limits as they were prior to COVID-19
 - Set each VT to 1
 - If your provider is going to do all Well Child Checks in a session, set all other VTs (including Office Visit) to 0

All day or half day Video Visit only

- Block the entire day or half day with the Video Visit VT block

**If your provider wants to do Video Visits during the Unavailable time, you can use the Video Visit VT block instead of marking it unavailable.*

***Note, Dimensions will be changing the Video Visit VT to look for blocked time instead of open time on the schedule.*



Recovery Schedules

3 Women's Services schedules

General template guidelines:

- Only use blocks for Procedure and Routine Prenatal Visits
- Make sure your slot lengths match your shortest visit type length
- Block time as Unavailable* intermittently to control the number of visits per hour. The goal is to see 2 patients per provider per hour. Here are some examples:
- Block 15 minutes (or 20 if you use 20/40) for every 30 minute increment on the schedule
- If you use all 15 or 20 minute visits, block every other slot
- During well time clinics can see Annual Physical, New GYN, Initial Prenatal, ENTP Long, Office Visit, Pregnancy Confirmation, Procedure, Routine Prenatal Visits
- Adjust session limits for Annual Physical, New GYN, Initial Prenatal, and Pregnancy Confirmation according to your provider's preference.

Examples:

- Leave session limits as they were prior to COVID-19
- Set each VT to 1
- If your provider is going to do all Initial Prenatal in a session, set all other VTs (including Office Visit) to 0

All day or half day Video Visit only

- Block the entire day or half day with the Video Visit VT block

**If your provider wants to do Video Visits during the Unavailable time, you can use the Video Visit VT block instead of marking it unavailable.*

***Note, Dimensions will be changing the Video Visit VT to look for blocked time instead of open time on the schedule*



Recovery Schedules

4

Community Health and Wellness schedules

Half day sick & half day well

For the sick time:

- Block the whole session with Same Day
- Go back and mark every other slot as Unavailable* to limit to two patients per hour
- If you want to mix Same Day and Video Visits** block those two visit types (VT) together or rotate.
- If you block simultaneously both VTs must be the same length

For the well time:

- Leave Well time open - no blocks
- Make sure your slot lengths match your shortest visit type length
- Block time as Unavailable* intermittently to control the number of visits per hour. The goal is to see roughly 2 patients per provider per hour. Here are some examples:
 - Block 15 minutes (or 20 if you use 20/40) for every 30 minute increment on the schedule
 - If you use all 15 or 20 minute visits, block every other slot
- During well time clinics can see Annual Physical, Medicare AWW, New Patient, Office Visit, Well Child
- Adjust session limits for Annual Physical, Medicare AWW, New Patient and Well Child according to your provider's preference. Examples:
 - Leave session limits as they were prior to COVID-19
 - Set each VT to 1
 - If your provider is going to do all Annual Physicals in a session, set all other VTs (including Office Visit) to 0

Beginning 5/1 @ 4pm the Video Visit visit type will need to be placed as blocks on your template in order for MyChart and Care Connections to find and schedule these appointments!

All day or half day Video Visit only

- Block the entire day or half day with the Video Visit VT block

**If your provider wants to do Video Visits during the Unavailable time, you can use the Video Visit VT block instead of marking it unavailable.*

*** Note, Dimensions will be changing the Video Visit VT to look for blocked time instead of open time on the schedule.*



Recovery Schedules

5

Scenario 1: Half sick & half well visits

Step 1: Select **Edit Template** in Dimensions.

(Epic --> Scheduling --> Templates --> Edit Templates)

Step 2: Enter provider name into Provider/Resource Select box

Step 3: Select date on calendar to begin building template.

Step 4: Enter Start Time and End Time for morning session of sick visits.

Edit Slots

Department: MIM INTERNAL... ▼

Date: 5/4/2020 📅

Start time: ⚠️ ⌚

End time: ⚠️ ⌚

Slot length: 15 📅 minutes

Openings: 1 📅

Overbooks: 0



Edit Slots

Department: MIM INTERNAL... ▼

Date: 5/4/2020 📅

Start time: 08:00 AM ⌚

End time: 12:00 PM ⌚

Slot length: 15 📅 minutes

Openings: 1 📅

Overbooks: 0



Recovery Schedules

5


Scenario 1: Half sick & half well visits; cont.

Step 5: Add **Same Day** under Block to block the morning for sick visits only. Select Apply.

Block	Num

→

Block	Num
SAME DAY	

Step 6: Go to Exceptions  and mark every other 15 minute slot as unavailable. Select Apply. Repeat this step for **every other** 15 minute interval.

Exceptions	Exceptions
Date: 5/4/2020	Date: 5/4/2020
<input type="checkbox"/> All day	<input type="checkbox"/> All day
Department: MIM INTERNAL...	Department: MIM INTERNAL...
Start time: [Red icon]	Start time: 08:15 AM
End time: [Red icon]	End time: 08:30 AM
Unavailable On Hold	Unavailable On Hold
Reason: [Red icon]	Reason: Other
Comments:	Comments:

→

Exceptions
Date: 5/4/2020
<input type="checkbox"/> All day
Department: MIM INTERNAL...
Start time: 08:15 AM
End time: 08:30 AM
Unavailable On Hold
Reason: Other
Comments:

Step 7: your morning template should resemble the following

	Time	Pri?	MRN	Name	Visit Type	Len	Appt Notes
4	8:00 a			SAME DAY			
4	8:15 a			Unavailable - Other			
4	8:30 a			SAME DAY			
4	8:45 a			Unavailable - Other			
4	9:00 a			SAME DAY			
4	9:15 a			Unavailable - Other			
4	9:30 a			SAME DAY			
4	9:45 a			Unavailable - Other			
4	10:00 a			SAME DAY			
4	10:15 a			Unavailable - Other			
4	10:30 a			SAME DAY			
4	10:45 a			Unavailable - Other			
4	11:00 a			SAME DAY			
4	11:15 a			Unavailable - Other			
4	11:30 a			SAME DAY			
4	11:45 a			Unavailable - Other			
4	12:00 p						



Scenario 1: Half sick & half well visits; cont.



Step 9: Repeat **Step 6** to mark **every other** 15 minute slot as unavailable. Your afternoon template should resemble the following

MENU

PREV

NEXT



Recovery Schedules

6

Setting Session Limits

Step 1: Select **Edit VT Limits** in Dimensions.
(Epic --> Scheduling --> Templates --> Edit VT Limits)

Step 2: Enter provider name into Select Provider box

Step 3: Under the Session column, enter Daily AM and Daily PM for each day of the week.

Session	Visit Type
1 DAILY AM	
2 DAILY PM	
3 DAILY AM	
4 DAILY PM	
5 DAILY AM	
6 DAILY PM	
7 DAILY AM	
8 DAILY PM	
9 DAILY AM	
10 DAILY PM	

Step 4: Enter the Visit Type that needs to be limited under the Visit Type column.

Session	Visit Type	Visit Type Group	Overbook	Day of Week
1 DAILY AM	ANNUAL PHYSICAL		<input type="checkbox"/>	1
2 DAILY PM	ANNUAL PHYSICAL		<input type="checkbox"/>	2
3 DAILY AM	MEDICARE ANNUAL WE		<input type="checkbox"/>	3
4 DAILY PM	MEDICARE ANNUAL WE		<input type="checkbox"/>	4
5 DAILY AM	NEW PATIENT		<input type="checkbox"/>	5
6 DAILY PM	NEW PATIENT		<input type="checkbox"/>	6
7 DAILY AM	WELL CHILD		<input type="checkbox"/>	7
8 DAILY PM	WELL CHILD		<input type="checkbox"/>	8
9 DAILY AM			<input type="checkbox"/>	9
10 DAILY PM			<input type="checkbox"/>	10



Recovery Schedules

6 Setting Session Limits; cont.

Step 5: Enter the Day of Week and From Date to set which days of the week the session limits should apply to for visit type. The From Date determines when these rules will go into effect.

Session	Visit Type	Visit Type Group	Overbook	Day of Week	From Date
1 DAILY AM	ANNUAL PHYSICAL		<input type="checkbox"/>	Monday	4/27/2020
2 DAILY PM	ANNUAL PHYSICAL		<input type="checkbox"/>	Monday	4/27/2020
3 DAILY AM	MEDICARE ANNUAL WE		<input type="checkbox"/>	Monday	4/27/2020
4 DAILY PM	MEDICARE ANNUAL WE		<input type="checkbox"/>	Monday	4/27/2020
5 DAILY AM	NEW PATIENT		<input type="checkbox"/>	Monday	4/27/2020
6 DAILY PM	NEW PATIENT		<input type="checkbox"/>	Monday	4/27/2020
7 DAILY AM	WELL CHILD		<input type="checkbox"/>	Monday	4/27/2020
8 DAILY PM	WELL CHILD		<input type="checkbox"/>	Monday	4/27/2020

Note: For Day of Week, you can use "All" instead of typing each individual day if the session limits are meant to be the same for each day of the week the provider is in clinic.

Step 6: In the column labeled **Maximum**, enter the max number of visits to allow for each visit type. A **0** indicates no visits allowed for that visit type. If a visit type is not entered into the session limit activity, then an unlimited number of visits can be scheduled for that visit type.

Session	Visit Type	Visit Typ...	Overbook	Day of Week	From Date	To Date	Maximum
1 DAILY AM	ANNUAL PHYSICAL		<input type="checkbox"/>	Monday	4/27/2020		0
2 DAILY PM	ANNUAL PHYSICAL		<input type="checkbox"/>	Monday	4/27/2020		1
3 DAILY AM	MEDICARE ANNUAL WELLNE		<input type="checkbox"/>	Monday	4/27/2020		1
4 DAILY PM	MEDICARE ANNUAL WELLNE		<input type="checkbox"/>	Monday	4/27/2020		1
5 DAILY AM	NEW PATIENT		<input type="checkbox"/>	Monday	4/27/2020		1
6 DAILY PM	NEW PATIENT		<input type="checkbox"/>	Monday	4/27/2020		1
7 DAILY AM	WELL CHILD		<input type="checkbox"/>	Monday	4/27/2020		1

0 indicates no Annual Physicals can be scheduled for the Monday AM session.

Step 7: Repeat **Steps 5 & 6** adjusting the visit type for each day of the week to match the provider's preference for what they would like to schedule on their templates.

Leaving the Daily PM session out for Well Child indicates that an unlimited number of Well Child visits can be scheduled for the Monday PM session.



Recovery Schedules

7

Scenario 2: Half sick & half well visits with Video Visit

Step 1: Select **Edit Template** in Dimensions.
(Epic --> Scheduling --> Templates --> Edit Templates)

Step 2: Enter provider name into Provider/Resource Select box

Step 3: Select date on calendar to begin building template.

Step 4: Enter Start Time and End Time for morning session of sick visits.



Recovery Schedules

7

Scenario 2: Half sick & half well visits with Video Visit; cont.

Step 5: Add **Same Day** under Block to block the morning for sick visits only. Select Apply.

Block	Num

→

Block	Num
SAME DAY	

Step 6: Using steps 4 & 5 mark every other 15 minute slot as video visit. Select Apply. Repeat this step for **every other** 15 minute interval.

Block	Num

→

Block	Num
Video Visit	

Step 7: Your morning template should resemble the following

	Time	Pri?	MRN	Name	Visit Type	Len	Appt Notes
1	8:00 a			SAME DAY			
1	8:15 a			Video Visit			
1	8:30 a			SAME DAY			
1	8:45 a			Video Visit			
1	9:00 a			SAME DAY			
1	9:15 a			Video Visit			
1	9:30 a			SAME DAY			
1	9:45 a			Video Visit			
1	10:00 a			SAME DAY			
1	10:15 a			Video Visit			
1	10:30 a			SAME DAY			
1	10:45 a			Video Visit			
1	11:00 a			SAME DAY			
1	11:15 a			Video Visit			
1	11:30 a			SAME DAY			
1	11:45 a			Video Visit			
	12:00 p		END				



Recovery Schedules

7

Scenario 2: Half sick & half well visits with Video Visit; cont.

Step 8: Enter a Start Time and End Time for the afternoon session of well visits. Do not enter a visit type into the Block section. Use session limits* to limit well visit types on the template.

Step 9: Repeat **Step 6** to mark **every other** 15 minute slot as video visit. Your afternoon template should resemble the following

Time	Pri?	MRN	Name	Visit Type	Len	Appt Notes
12:00 p		END				
1:00 p						
1:15 p			Video Visit			
1:30 p						
1:45 p			Video Visit			
2:00 p						
2:15 p			Video Visit			
2:30 p						
2:45 p			Video Visit			
3:00 p						
3:15 p			Video Visit			
3:30 p						
3:45 p			Video Visit			
4:00 p						
4:15 p			Video Visit			
4:30 p						
4:45 p			Video Visit			
5:00 p		END				



Recovery Schedules

8

Scenario 3: All day Video Visit

Step 1: Select **Edit Template** in Dimensions.
(Epic --> Scheduling --> Templates --> Edit Templates)

Step 2: Enter provider name into Provider/Resource Select box

Step 3: Select date on calendar to begin building template.

Step 4: Enter Start Time and End Time for the morning session of video visits.



Recovery Schedules

8

Scenario 3: All day Video Visit; cont.

Step 5: Add **Video Visit** under Block to block the morning session with video visits. Select Apply.

Block	Num

→

Block	Num
Video Visit	

Step 6: Repeat **Steps 4 & 5** to set the afternoon session with video visits. Select Apply.

Edit Slots

Department: MIM INTERNAL...

Date: 5/4/2020

Start time: 01:00 PM

End time: 05:00 PM

Slot length: 15 minutes

Openings: 1

Overbooks: 0

Block	Num
Video Visit	

Step 7: The template should resemble the following

	Time	Pri?	MRN	Name	Visit Type	Len	Appt Notes
1	8:15 a			Video Visit			
1	8:30 a			Video Visit			
1	8:45 a			Video Visit			
1	9:00 a			Video Visit			
1	9:15 a			Video Visit			
1	9:30 a			Video Visit			
1	9:45 a			Video Visit			
1	10:00 a			Video Visit			
1	10:15 a			Video Visit			
1	10:30 a			Video Visit			
1	10:45 a			Video Visit			
1	11:00 a			Video Visit			
1	11:15 a			Video Visit			
1	11:30 a			Video Visit			
1	11:45 a			Video Visit			
	12:00 p		END				
1	1:00 p			Video Visit			
1	1:15 p			Video Visit			
1	1:30 p			Video Visit			
1	1:45 p			Video Visit			
1	2:00 p			Video Visit			
1	2:15 p			Video Visit			
1	2:30 p			Video Visit			
1	2:45 p			Video Visit			
1	3:00 p			Video Visit			
1	3:15 p			Video Visit			
1	3:30 p			Video Visit			
1	3:45 p			Video Visit			
1	4:00 p			Video Visit			
1	4:15 p			Video Visit			
1	4:30 p			Video Visit			
1	4:45 p			Video Visit			
	5:00 p		END				



Recovery Schedules

9

Scenario 4: Half day annual physical

Step 1: Select **Edit VT Limits** in Dimensions.
(Epic --> Scheduling --> Templates --> Edit VT Limits)

Step 2: Enter provider name into Select Provider box

Step 3: Under the Session column, enter Daily AM and Daily PM for each day of the week.

	Session	Visit Type
1	DAILY AM	
2	DAILY PM	
3	DAILY AM	
4	DAILY PM	
5	DAILY AM	
6	DAILY PM	
7	DAILY AM	
8	DAILY PM	
9	DAILY AM	
10	DAILY PM	

Step 4: Enter the Visit Type that needs to be limited under the Visit Type column.

Step 5: Enter the Day of Week and From Date to set which days of the week the session limits should apply to per visit type. The From Date determines when these rules will go into effect.

Step 6: In the column labeled **Maximum**, enter the max number of visits to allow for each visit type.



Recovery Schedules

9

Scenario 4: Half day annual physical; cont.

Session	Visit Type	Visit Typ...	Overbook	Day of Week	From Date	To Date	Maximum
1 DAILY AM	MEDICARE ANNUAL WELLNE		<input type="checkbox"/>	Monday	4/27/2020		0
2 DAILY PM	MEDICARE ANNUAL WELLNE		<input type="checkbox"/>	Monday	4/27/2020		0
3 DAILY AM	MEDICARE ANNUAL WELLNE		<input type="checkbox"/>	Tuesday	4/27/2020		0
4 DAILY PM	MEDICARE ANNUAL WELLNE		<input type="checkbox"/>	Tuesday	4/27/2020		0
5 DAILY AM	NEW PATIENT		<input type="checkbox"/>	Monday	4/27/2020		0
6 DAILY PM	NEW PATIENT		<input type="checkbox"/>	Monday	4/27/2020		0
7 DAILY AM	WELL CHILD		<input type="checkbox"/>	Monday	4/27/2020		0
8 DAILY PM	WELL CHILD		<input type="checkbox"/>	Monday	4/27/2020		0

0 indicates no appointments will be scheduled for that visit type in the corresponding session and day of week.

Leaving Annual Physical off the Visit Type Limits indicates an unlimited amount of Annual Physicals can be scheduled for the AM or PM session on any given day of the week.

Step 7: Repeat **Steps 5 & 6** adjusting the visit type for each day of the week to match the provider's preference for what they would like to schedule on their templates.



Patient screening

1 Prepare for the visit in advance

To prepare patients for their visit, it is recommended that you call in advance of the scheduled appointment to share information about what to expect and to complete a pre-visit screening.

Perform a patient screening **within 24 hours of the appointment** by phone.

Let the patient know they will be **screened again over the phone before entering the clinic**. Ask them to bring a cotton mask to wear while they are in the clinic. If they do not have a mask, be prepared to provide a mask for them.


All patient and visitors will need to have their **temperature taken** regardless of the answers to the screening questions.

Inform the patient they have the **option to wait in their car** until an exam room is ready for them. The check-in process can be completed over the phone to minimize the number of patients in the lobby and close contact. Collect the patient's cell phone and their vehicle make and model.

Encourage patients to complete visit questionnaires via MyChart prior to the appointment. Patient screening is essential for the prevention of exposure to COVID-19 and safety of the patients and team members.

To protect the health and safety of our patients and team members, Novant Health is limiting the number of visitors that come with patients to its ambulatory clinics. We **recommend that patients not bring a visitor** unless absolutely necessary.

Some Institutes may have additional restrictions on visitors. Clinics should clearly communicate visitor rules to patients prior to their appointment.



Hello, this is
Diana at
Novant
Health.



Patient screening

2

Know the current symptoms of COVID-19

People with COVID-19 have had a wide range of symptoms reported – ranging from mild symptoms to severe illness.

Symptoms may appear **2-14 days after exposure to the virus**.

People with these symptoms or combinations of symptoms may have COVID-19:

- Cough
- Shortness of breath or difficulty breathing

Or at least two of these symptoms:

- Fever
- Chills
- Repeated shaking with chills
- Muscle pain
- Headache
- Sore throat
- New loss of taste or smell

Children have similar symptoms to adults and generally have mild illness.

3

Pre-visit screening

Each patient will need to be screened within 24 hours of their appointment. A series of questions will be asked to determine if the patient is a current person under investigation (PUI).

Please review the questionnaire on the following page to be used to screen the patient.



Patient screening

4

Patient and visitor pre-visit screening questionnaire

- Have you recently been quarantined or tested for Coronavirus (COVID-19)? ☐ Yes ☐ No
- Have you been in contact with someone who was recently quarantined, tested or diagnosed with COVID-19? ☐ Yes ☐ No
- Do you have a fever, or have you had a fever in the past 24 hours? ☐ Yes ☐ No
- Are you experiencing new or worsening shortness of breath? ☐ Yes ☐ No
- Do you have a cough? ☐ Yes ☐ No
- Do you have a recent loss of sense of smell or taste? ☐ Yes ☐ No

If the **patient** responds **YES** to any one of the questions above, a physician, APP or RN within the clinic should further evaluate the patient before proceeding with the appointment.

- If the physician, APP or RN **suspects the patient is a PUI**, that patient should be referred to a respiratory assessment center.
- If the physician, APP or RN **does not suspect the patient may be COVID-19 positive**, they should make a recommendation for how to proceed with the appointment (i.e. masking the patient and escorting directly to an exam room, converting the appointment to a virtual visit, etc.)

If the **visitor** responds **YES** to any one of the questions above:

1. "I am sorry, you won't be able to visit today. Because you have (state specific reason i.e. have a cough, sore throat). We want to make sure our patients are safe and we also want to make sure you follow up on your symptoms."
2. Instruct visitor to call the 24/7 Coronavirus Care Hotline @ 1-877-9NOVANT

If the patient/visitor responds **NO** to the questions above: take the patient/visitor's temperature. All patients/visitors will need to wear a mask – they may wear their own mask or one provided by NH.

Patients:

If the temperature is above 100F orally or 99.6F with infrared, a physician, APP or RN within the clinic should further evaluate the patient before proceeding with the appointment.

Visitors:

If the temperature is above 100 F orally or 99.6 F with infrared, no visitation will be allowed. Consult a leader within the clinic for situations that may be exceptions.

For known/positive and suspected COVID-19 14 days after symptom onset/positive result:

WITH 72 hours afebrile without antipyretics +improving symptoms → Proceed with clinic appointment.

WITHOUT 72 hours afebrile without antipyretics +improving symptoms → For patients, reschedule their appointment; For visitors, ask them to wait in the car or reschedule the appointment.

For exposed and self-quarantined:

If ≥14 days and asymptomatic → Proceed with clinic appointment.

If <14 days and/or with symptoms → For patients with symptoms, refer to RAC; For visitors, ask them to wait in the car or reschedule the appointment.



Patient screening

6

Referring to the Respiratory Assessment Center (RAC)

When referring one of your patients to the closest Respiratory Assessment Center, provide a hand-off including pertinent information the receiving care team. It is recommended that the provider provide a brief report to the RAC provider.

- **Kernersville:** 111 Gateway Center Drive, Kernersville, NC 27284, 336-515-7294
- **Winston Salem:** 600 Highland Oaks Drive, Winston Salem, NC 27103, 336-893-2330
- **Winston Salem (Waughtown Pediatrics):** 648 E Monmouth St, Winston Salem, NC 27107, 336-718-4380
- **Thomasville:** 903 Randolph Street, Thomasville, NC 27360, 336-481-8551
- **Rowan:** 1904 Jake Alexander Blvd W #301, Salisbury, NC 28147, 704-210-7845
- **Matthews:** 3330 Siskey Parkway, Matthews, NC 28105, 980-302-8875
- **Huntersville:** 16525 Holly Crest Lane, Suite 120, Huntersville, NC 28078, 704-316-0583
- **Charlotte (Michael Jordan Clinic):** 3149 Freedom Drive, Charlotte, NC 28208, 980-302- 9408 OR 980-302-9404
- **Brunswick:** 5145 Sellers Road, Shallotte, NC 28470, 910-754-4441

Key team members involved in the patient's care should wear gowns, gloves, masks, and eye protection when the patient is identified as a PUI.

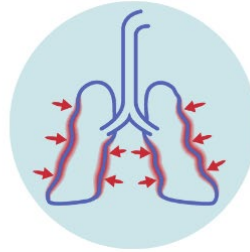


Patient screening

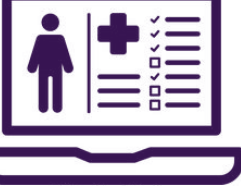
7

Referring to the Emergency Department

If the patient has any of these emergency warning signs for COVID-19, get medical attention immediately:



- **Trouble breathing**
 - **Persistent pain or pressure in the chest**
 - **High fevers unable to control by medication**
 - **New confusion or difficulty with thinking clearly**
 - **Bluish lips or face**
1. Call EMS for non-emergent transport. Provide pertinent information regarding the patient and tell them the patient is a PUI.
 2. Call the emergency department and provide a report to the receiving care team. Alert them that the patient is a PUI.
 3. Make sure the patient is wearing a mask at the time of departure.



Patient screening

8 Patient scenarios and responses

Scenario #1:

A patient walks into the clinic with symptoms of cough, recent fever, chills, and states he is experiencing shortness of breath.

Response:

If the patient is not wearing a mask, the clerical team member provides a mask. Clinical team member is alerted that a patient has arrived with positive symptoms of COVID-19. Clinical team member dons PPE (gown, gloves, mask, and face shield) and immediately comes to escort patient into an exam room. If an exam room is not available the patient will be asked to remain in their car.

Rapid assessment of the patient should occur including vital signs and pulse oximetry. The provider will don PPE (gown, gloves, mask, and face shield) and perform physical assessment. The appropriate level of care is determined and arrangements are made to transfer the patient to a RAC or the ED.

Scenario #2:

A patient arrives without a mask. They are provided a mask but you notice them not wearing it.

Response:

Ask the patient if they are having difficulty wearing the mask. If they indicate they are not having difficulty, share with the patient the purpose of universal masking and their benefit. If they indicate they feel like they are smothering (potential signs of claustrophobia or anxiety), allow the patient to remove the mask. A patient cannot be forced to wear a mask.

Any patient that does not want to wear a mask should be taken back immediately to the exam room for their protection and others safety.



Clinic workflows

5

Parking lot arrival

When the patient calls us from the parking lot we check them in by asking the same questions, we would ask in person: verify name, address, phone, insurance and travel screen questions, etc. Prep the patient for everything they will need ready when they come inside.

- Utilize the **Warm Welcome Always Event** when first speaking with patient upon arrival
- Consider if your clinic is ready to have patient come in and go directly to a room
- If not, ask the patient to wait in the car until ready for a room. If your clinic and staffing allows to get the patient from the car, ask what type of vehicle they will be driving (color, truck/car or model) or license plate. Otherwise, team member will call them when ready.
- If the insurance has changed, we enter the new insurance and ask them to have their insurance card in hand to give to the front desk to scan. The insurance card is returned as the patient exits.
- If there is a co-pay that can be paid with a card we collect over the phone, paid at time of eCheck-in or balance bill to patient on the back end. Receipt is given as they go back with the team member.

6

Clinic arrival

- If possible, a clinic team member may go to the parking lot to bring the patient into the office, offers the patient a mask, introduce self, and explain the process to the patient of what to expect.
- Remember to follow the Warm Welcome Always Event
- Patient comes to front desk for sense of “normalcy.” Spots marked 6’ apart in case anyone is waiting with special stickers
- Collect updated insurance card and cash if needed
 - Front desk should have glove or hand sanitizer





Clinic workflows

7

Limiting lobby use

- May be needed for patients who come by public transportation or do not have a cell phone
- Designate a small assigned area of our lobby with marked seats 6' apart. Remove chairs to designate limited seating (or turn some chairs backwards). Consider some grouped chairs together designated for patient + visitor.
- Inform the clinical team member when one of these patients arrives and is waiting
- The clinical team member takes the patient back as quick as possible, remembering to utilize the Lobby Invitations Always Event
- The team member cleans the lobby (visibly) utilizing the *Cleaning Checklist*.
- Remember to update patients on wait times as applicable

8

Bringing patients back to exam rooms

- Team member meets patient at the door to take back. If they need a mask, he/she gives them one as they enter.
 - The patient goes straight to the exam room for visit.
- Exam room has visible indication that it has been cleaned for patient.
 - Talking points: "We have cleaned this room in preparation for you coming. We want to make sure that you know that you are safe here."



Clinic workflows

9

End of visit

Ideally the patient does not stop by the check-out desk before exiting

- Scheduling follow-up visits
- While the patient remains in the clinic:
 - Consider having the clinical team member scheduling the follow-up appointment in the room with patient
 - Or, inform the front desk to help schedule. An appointment is made and given to the patient as they exit. Have floor clings 6ft apart on the floor in case there's a line
 - Consider suggesting the patient utilize MyChart to schedule their follow-up appointment

Ask patient their preference on receiving their AVS



- If patient needs it printed, consider giving the patient the AVS while the patient is in the room
- Or, send to them through MyChart. If the patient does not have MyChart, provide information about MyChart or help patient sign-up



“We are here
for you”

Resources

- **Green is Clean**
[http://iconnect.novanthealth.org/News/Documents/Green%20Is%20Clean%20Poster%20\(3\).pdf#search=Green%20is%20Clean](http://iconnect.novanthealth.org/News/Documents/Green%20Is%20Clean%20Poster%20(3).pdf#search=Green%20is%20Clean)
- Green ribbon - Ariba as item # 557209
- Tipsheet for Credit Card on file:
http://teamportalprod1.novanthealth.org/dimensions/ref/pmreference/Front%20Desk/Saving%20a%20Credit%20Card%20on%20File_CAD0062.pdf#search=credit%20card
- Antimicrobial sleeves for iPads and tablets Ariba #APS812B
- Easy Screen wipes for cleaning electronic devices and charging cords Ariba #485974
- Clinic Cleaning Checklist for Recovery Phase during COVID-19
<http://iconnect.novanthealth.org/NMGPractices/ClinicMgrResources/Documents/Final%20NHMG%20Covid%2019%20Cleaning%20Checklist%20to%20Post.xlsx>

Procedural/Surgical Masks				
Procedural/Surgical Mask	Halyard/ O&M	47117	40707	
Procedural/Surgical Mask	Medline	NON27300	191385	

Resources

If you receive an error message when trying to order Novant # 557209 Tape Flagging Fluorescent Lime Green 150 Ft, please follow the three steps below.

- 1. Contact Supply Chain Customer Service
 - For urgent requests call 877-308-7101
 - For non-urgent requests submit a Service Portal > Supply Chain ticket
- 2. Please state the following "I have a GL Account error on Novant # 557209 Green Tape. Can you please have GL Account # 061138 linked to my Cost Center # <provide the cost center # for the ordering clinic>?"
- 3. Once either Supply Chain or Finance to confirm that the accounts have been linked, please wait 2 hours and then try to submit the order again.